Date of Notification (1)			Nam	e of Buildir	ng Owner/Operator	(2)							
	17				Ward Home	x-/	/ Job #1702-215	5 Ch	k. #46	55			
Agencies Notified Type Notifie	cation		Stree	et Address			FER	3 1		FF			
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Name of Facility Where Abatement is	Taking Pla	ace (3)		CILITI	NFORMATION	Type of Facility	The state of the s	INOI	NG				
Winchester Gardens - Hardin	100	(0)				School (K-12							
Street Address						Subchapter	8 (Other than K-12)						
333 Elmwood Avenue						Other (i.e., p homes, etc.)	rivate and commer	cial bu	uildings	Ķ.			
City (5)		934-93				Square Feet	# of Floors	BI	dg. Age				
Maplewood						473,763	5	- 1	89				
County (6)			Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pr	rior if being demolisi	ned)					
Essex							sing/Assisted Li						
Name of Monitoring Firm Hired by Bui	lding Own	er (8)	ASCM	No.	Name of Abatem								
Criterion Laboratories					Asbestos an	d Mold Service	es, Corp.						
Street Address					Street Address								
3370 Progress Drive, Suite J				3859 Sylon Boulevard									
City, State, Zip Code					City, State, Zip Co	ode							
Bensalem, PA 19020		u Challant			Hainesport, I	NJ 08036							
Project Manager for Monitoring Firm		Te	lephone	No.	Telephone No.		License No.						
Mike Panepresso			215-244		609-702-0400)	00862						
Start Date (10)2 /24 /17	Scheduled 2		letion Da 24/		Name of OSHA M EMSL Analyt								
Occupancy Status During Abatement (Check on	y one)			Street Address	•							
☐ Facility Closed/Vacated During Ent	re Period	of Abat			200 U.S. Rou	te 130 North							
Abatement Performed Outside of N					City, State, Zip Co	ode		_					
Time of Abatement:AM	PM/	PN	Λ	_AM	Cinnaminson	, NJ 08077							
Scope of Work (Check all that apply)			-::		M								
≥3 sf or ≥3 lf	\boxtimes	Renova	ition		☐ Mini-Enc		Negative Pressure						
☐ ≥160 sf or ≥260 lf		Demoli	tion			g Procedure							
		Is Loc	ation		☑ Non-Exe	mpted (*) and No	n-Friable Procedure	1					
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TO BE ABATED IN Facility			Staff?	(i.e	., thermal systems i surfacing, VAT,		(Specify SF or LF)	SVOL	air F	losu			
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	П	ПП											
Name of Registered Waste Hauler		ᅼ	NJDEP		Cubic Yards of	Name of Regis	tered Landfill			7			
Freehold Cartage, Inc.			Hauler II	O No.	Waste	GROWS La							
City, State			02265)	5 Disposal Date	City, State							
Freehold, NJ					2/24/17	Morrisville,	PA 19067						
Completed By (Print or Type)	Title				Signature	1	Date						
Kimberly A. Trumbetti		Coor	dinato	r	o a de la composition della co	1			2-1-				
				5	IXI	N		- 4	- !	l l			

ASB-41 MAY 11

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

Date of Notification (1)			Name	of Building	Owner/Operator (2	2)					5000		
	17		Jers	ey Cent	ral Power & Ligh	t Company / J			hk. #	463	5		
Agencies Notified Type Noti	fication		Street	Address	41.04		MEG	E	W	L			
☐ EPA ☐ Initial			300	Madisor	Avenue PO BO	x 1911	IVI						
□ DOLWD □ Amen □	CARGO CONCARDO PO		City, S	tate, Zip C	ode	de de			0.019				
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	ency (including	3	III CONTRACTOR	of Contact	HENCE STREET,		Telephone Numb	per					
(NJAC 5:23-8) justific			Ann	a Sulliva	in	ar 917 (200)	1		JTR	(
Decision and artistic			FAC	ILITY IN	FORMATION	and the second	LIC	ENSI					
Name of Facility Where Abatement	s Taking Place	(3)	11389			Type of Facility (4)						
Sea Isle City Former Manufa			Site			☐ School (K-12)							
Street Address						Subchapter 8	(Other than K-12) ivate and commer) rcial bui	Idina	,			
39 th Street & Central Avenue	į.					homes, etc.)	ivate and comme	ciai bu	iuiiig.	,			
City (5)						Square Feet	# of Floors	Blo	g. Ag	е			
Sea Isle City, NJ				8.		NA	NA	a	ppro	x. 7	5		
County (6)			Coun	ty Code (7)(STATE USE ONLY)	Current Use (Pric	or if being demolis	hed)					
Cape May Count					200	NA							
Name of Monitoring Firm Hired by E	uilding Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)							
Horizon Environmental					옍 FORMTEX	T Asbestos an	d Mold Service	s, Co	p.				
Street Address					Street Address								
PO Box 316													
City, State, Zip Code					City, State, Zip Co		77.5						
Thorofare, NJ 08086					Hainesport, N	NJ 08036							
Project Manager for Monitoring Firm		Tele	phone l	No.	Telephone No.	Telephone No. License No.							
David Flanigan		85	6-848	-0800	609-702-0400	l .	00862						
Start Date (10)	Scheduled (Comple	tion Da	te (11)	Name of OSHA M	lonitor							
2 / 23 / 17	3	/3	_ / _	17	EMSL Analyt	ical, Inc.							
Occupancy Status During Abateme	nt (Check only	one)			Street Address								
☐ Facility Closed/Vacated During B	Intire Period of	Abate	ment		200 U.S. Rou	te 130 North							
Abatement Performed Outside o					City, State, Zip Co	ode							
Time of Abatement:AM-	PIVI/	PIVI-		AIVI	Cinnaminsor	n, NJ 08077	16						
Scope of Work (Check all that apply)				□ Full Con	tainment with Neg	ative Pressure						
≥3 sf or ≥3 lf	⊠R	enovat	on		☐ Mini-End								
≥160 sf or ≥260 lf		emolitic	on		☐ Gloveba	g Procedure	n-Friable Procedu	re					
		s Loca	ion	T	⊠ Noll-Exe	impled () and No.	II-I Habie i Toccuu		ateme	ant T	/ne		
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TO BE ABATED	IVI	aintena stodial		(i.∈	e., thermal systems		(Specify SF or LF)	SVOI	air.	sqe	nso		
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										$\overline{\Box}$			
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Name of Registered Waste Hauler		100	IJDEP \ fauler II		Cubic Yards of Waste	Grand Cen							
Waste Management			17273		5					10000-3			
City, State				Disposal Date	City, State	Io DA							
Lafayette, NJ					3/3/2017	Penn Argy		- 1 -					
Completed By (Print or Type)	Title	_			Sighature	_	1.77	ate 10 10 1	7 -1 -	1000			
Kimberly A. Trumbetti	Office	e Coordinator									(P)		

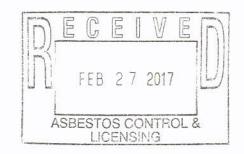
ASB-41 MAY 11 * Do not use this form for asbestos licensure-exempted activities.

Date of Notification (1)				Name	of Building	g Ow	vner/Operator ((2)					:X:::176		
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☑ DOLWD ☐ Amend				City, S	State, Zip C	Code					FEB	27	วกา	7	
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(NJAC 5:23-8) justifica		uuiig		Name	of Contac	t				Telephone No	umber				
☐ Cancell	ation			Chi	ristine				I.					OL 8	
				FA	CILITY IN	IFOI	RMATION			-	LIUE	NS	NG		
Name of Facility Where Abatement is	Taking F	Place (3	3)					Т	Type of Facility (4)					
Residential Property									School (K-12)		0.20				
Street Address									Subchapter 8 (uildir	ngs,		
City (5)								S	Square Feet	# of Floors	E	ildg.	Age		
Manalapan								1	1,800	2		52	-		
County (6)				Cour	nty Code (7)(STA	ATE USE ONLY)	to	Current Use (Prior	r if being dem	olished)		-		
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Name of Monitoring Firm Hired by Bu	ilding Ow	ner (8)) [ASCM	No.	Na	me of Abatem	ent	t Contractor (9)	W					
Tiger Environmental						1	Asbestos an	nd I	d Mold Services, Corp.						
Street Address						Str	eet Address								
16 W Elizabeth Ave # 2						3	3859 Sylon E	Βοι	ulevard						
City, State, Zip Code			City, State, Zip Code												
Linden, NJ 07036					Hainesport, NJ 08036										
Project Manager for Monitoring Firm			Tele	phone	No.	Tel	lephone No.			License No.					
Kelly Walton		8	(9	908) 862-4301 609-702-0400						00862					
Start Date (10)				etion Date (11) Name of OSHA Moni					nitor						
_2 / _22 / _17_	_ 2	_ / _	22	_ / _	17	E	EMSL Analyt	tica	al, Inc.						
Occupancy Status During Abatement		A CONTRACTOR				Str	eet Address								
☐ Facility Closed/Vacated During Er						2	200 U.S. Rou	ıte	130 North						
Abatement Performed Outside of Time of Abatement:AM	Normal Fa PM/	acility i	Hour: PM-	s - Des	cribe AM	12200	y, State, Zip Co								
							Cinnaminsor	n, I	NJ 08077						
Scope of Work (Check all that apply)							☐ Full Con	tai	nment with Nega	tive Pressure					
≥3 sf or ≥3 lf		Rend	ovatio	on			☐ Mini-Enc	clos	sure	live i lessure					
☐ ≥160 sf or ≥260 lf	L] Dem	olitio	n			☐ Gloveba		Procedure pted (*) and Non-	Eriable Droce	dura				
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Asbestos-Containing Material (AC	M)	Used					Containing Ma			Amount	Remova	Repair	Encapsulate	Enclosure	
TO BE ABATED IN Facility		Custo			(i.e		ermal systems surfacing, VAT			(Specify SF or LF)	ova	=	ıpsu	nso	
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Name of Registered Waste Hauler			=	JDEP V	Vaste Vaste	Cul	bic Yards of		Name of Registe	red Landfill			1-		
Waste Management			H	auler II	No.	Wa	iste		Grand Centr						
City, State						Dis	posal Date	-	City, State						
Lafayette, NJ							/22/17		Penn Argyle	, PA					
Completed By (Print or Type) Title						_	Signature	_		* 1 7 7	Date				
Kimberly A. Trumbetti		ce Co	ord	inator						2-21-17					
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ASB-41 MAY 11 * Do not use this form for asbestos licensure exempted activities.

Date of Notification (1)					Nome	of Duildin	~ 0		(2)	Y		2512		
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Agencies Notified EPA	Type Notific	ation				t Address King Stre	eet			MEG	E	7	V [3
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Name of Facility Where A		Taking	Place	e (3)					Type of Facility	(4)	C'L-1 V	Onvo	A	
Commercial Proper	rty								School (K-1)					
Street Address 69 King Street										8 (Other than K-12 private and comme)		uildin	gs,	
City (5)									Square Feet	# of Floors	E	Bldg. A	ae	
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County (6)				L. Commercial Commerci	Cour	nty Code (7)(STA	ATE USE ONLY)	Current Use (Pr	rior if being demoli	shed)	C.J.E.W.		
Morris								•	Warehouse		1105.00.000 .			
Name of Monitoring Firm	Hired by Buil	ding C	wner	(8)	ASCM	No.	Na	me of Abateme	ent Contractor (9))				
Criterion Laborator	0.50	-		8 %					d Mold Service					
Street Address							-	eet Address	a 11101a 001 V101	о, остр.	3 2			
3370 Progress Drive	e. Suite J							8859 Sylon B	oulovard					
City, State, Zip Code	-,							y, State, Zip Co	Secretary and	Total Control of the				
Bensalem, PA 1902	0													
Project Manager for Moni				Tole	phone	No		Hainesport, No.	10 00036	I Lianna Na				
Mike Panepresso	toring r iiiii				5-244					License No.				
Start Date (10)		Cohod	ulad C			te (11)		309-702-0400		00862				
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Occupancy Status During	Bill of the second of the second of the second						Str	eet Address		-11				
☐ Facility Closed/Vacate	d During Enti	ire Per	iod of	Abate	ment		2	200 U.S. Rou	te 130 North					
Abatement Performed	Outside of N	ormal	Facilit	y Hou	s - Des	cribe	Cit	y, State, Zip Co	ode	(0				
Time of Abatement:	AM	PN	Λ/	PM-		AM		innaminson						
Scope of Work (Check all	that apply)							⊠ Full Cont	ainment with Neg	native Pressure		-		
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			⊠ Re	novati molitic				☐ Mini-Enc ☐ Glovebag	losure	gativo i reesare				
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Asbestos-Containing N TO BE ABA		")		intena		Asbes	stos the	Containing Ma	terial (ACM)	Amount (Specify	Removal	Repair	nca	nclo
IN Facility	y		Cus	todial	Staff?	(surfacing, VAT,		SF or LF)	oval	-	Encapsulate	Enclosure
(13)		-	V	(12)	1		ot	her miscellaned	ous)				ate	(D)
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Waste Management				2.20	auler ID	No.	Wa	ste	Grand Cen					
City, State					17273		5 Dist				1100			
Lafayette, NJ								posal Date /28/17	City, State Penn Argy	le PA				
Completed By (Print or Ty	ne)	Title							r eilii Aigy					
Kimberly A. Trumbe			fion (`~~	inator			Signature	()	Da	1000	د المحدود	20	7
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February 15, 2017

State of New Jersey Notification for Asbestos Abatement Page 2 of 2

Commercial Property 69 King Street Dover, NJ Amendment #7 – Additional Scope of work

Scope of Work:

Location	Description	Amount	Abatement Type
2 nd Floor – (2) rooms	Pipe Insulation	845 LF	Removal
Already Completed			
1 st Floor – 1 room	Floor Tile & Mastic	400 SF	Removal
1 st Floor – 3 rooms & 3 hallways	Pipe Insulation	139 LF	Removal
Basement	Pipe Insulation	33 LF	Removal
2 nd Floor	Pipe Insulation	20 LF	Removal
3 rd Floor	Pipe Insulation	18 LF	Removal
3 rd Floor	Floor Tile	770 SF	Removal

2-15-2017

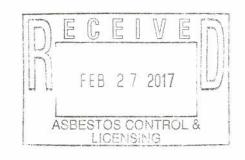
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

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Date of Notification (1)		40			□□ÿ≝] ÿ录 "□□□□□ÿr/C	SOUTH STATE OF THE	IIII FEB	21	20	- 0				
		16	_		A&	H Partne	rship, LLC	/ Jol	#1611-2136	Ch	k. #N	IA ®				
Agencies Notified	Type Notific	ation			Street	Address			ASBEST	SC	ONT	ROL	- &			
□ EPA	☐ Initial	rui-co			69	King Stre	eet			ENS						
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□ DCA	Amendm Emergen		U		Dov	er, NJ 0	7801									
(NJAC 5:23-8)	justificati		Juding	d.	Name	of Contac	t		Telephone Numb	ar						
	☐ Cancella				Kirl	K Harpell		,								
				7.6 12 - 2.0			IFORMATION				-					
Name of Facility Where	Ahatement is "	Taking	Place	(3)	1 //	JILIT III	TORWATION	Type of Facility (4	4)							
Commercial Prope		raiting	1 1400	(0)				School (K-12)								
Street Address	, .,								(Other than K-12)							
69 King Street									vate and commer	cial bu	uilding	S,				
City (5)			-					homes, etc.)	4 -5 51		-I - A					
Dover								Square Feet	# of Floors		dg. A	ge				
					10-	1 . 0 - 1 - 7	WOTATE HOE ON W	217,800	4		107					
County (6) Morris					Cour	ity Code (/	(STATE USE ONLY)	Current Use (Price	or if being demolis	nea)						
	I liber of the Death	-1:		(0)	10011		Th	Warehouse								
Name of Monitoring Firm		aing O	wner ((8)	ASCM	No.	Name of Abateme		•							
Criterion Laborator	ries				,			d Mold Services	s, Corp.							
Street Address	0161						Street Address									
3370 Progress Driv	e, Suite J							Sylon Boulevard								
City, State, Zip Code							City, State, Zip Co									
Bensalem, PA 1902	100			T				lainesport, NJ 08036								
Project Manager for Mon	itoring Firm			1000000	phone		Telephone No.		License No.							
Mike Panepresso				100	15-244		609-702-0400	S	00862							
Start Date (10)					tion Da		Personal Section 1997 1997 1997 1997 1997 1997 1997 199	me of OSHA Monitor								
//	17	2	/	28	3_ / _	17	EMSL Analytical, Inc.									
Occupancy Status During			CONTRACTOR OF THE PARTY OF THE				Street Address									
☐ Facility Closed/Vacate							200 U.S. Rou	te 130 North								
Abatement Performed							City, State, Zip Co									
Time of Abatement: _			и			AIVI	Cinnaminson	, NJ 08077								
Scope of Work (Check al	ll that apply)						· · ·	. v								
☐ >3 sf or >3 lf			⊠ Re	novat	ion			tainment with Nega	ative Pressure							
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							☐ Non-Exe	mpted (*) and Non	-Friable Procedur	e						
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	ne of Registered Waste Hauler NJDEP Waste Waste Management Hauler ID No.						Cubic Yards of Waste	Name of Registe								
Waste Managemen	17273						5	Grand Cent	rai							
City, State							Disposal Date	Date City, State								
Lafayette, NJ							2/28/17	Penn Argyle	∍, PA							
Completed By (Print or Ty	ype)	Title					Signature		Dat	e						
Kimberly A. Trumbe	etti	Of	fice (Coord	dinator		BX V	_	2-15-2017							





February 15, 2017

State of New Jersey Notification for Asbestos Abatement Page 2 of 2

Commercial Property 69 King Street Dover, NJ Amendment #6

Scope of Work:

Location	Description	Amount	Abatement Type
2 nd Floor – (2) rooms	Pipe Insulation	845 LF	Removal
Already Completed	•		100 (100 (100 (100 (100 (100 (100 (100
1 st Floor – 1 room	Floor Tile & Mastic	400 SF	Removal
1 st Floor – 3 rooms & 3 hallways	Pipe Insulation	139 LF	Removal
Basement	Pipe Insulation	33 LF	Removal
2 nd Floor	Pipe Insulation	20 LF	Removal
3 rd Floor	Pipe Insulation	18 LF	Removal
3 rd Floor	Floor Tile	455 SF	Removal

2-15-2017

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

PrintForm

Date of Notification (1)					JAC 0.60		,		FFR	2	7 2	017		
02/24/2017			Gle	e of Build nwood	ding Owne Apartme	er/Operato	or (2) ounty Club	I had bed				017	America de	
Agencies Notified Type Notificat EPA Initial	ion		Stree 1 Cl	et Addres herry H	ss Iill Lane			ASB	EST(OS C	CON	TRO	L 8	
DEP Amender Amendm	ent#		City, Old	State, Zi oridge,	p Code NJ 0885	57		20-1/2- (B-51/8-04.II						
DOH justificati		ng	F-1400	e of Cont Prieto	act			Teleph	none N	lumhe	÷r			
Name of Facility and					NFORMA	TION								
Name of Facility Where Abatement is Ta Glenwood Apartment	king Place	(3)					Type of Facili	ty (4)	-1000					
Street Address							School (I	K-12)						
7-11 Willow Run							X Other (i.e	ter 8 (Other to e. private & co	nan K- ommer	12) cial b	uildin	gs, ho	me	
City (5) Oldbridge, NJ							etc.) Square Feet 2,000	# of Flo		T	Bldg	. Age		
County (6)			Count (STATE	y Code (1 E USE ON	7) ILY)		Current Use (F	- Control	demoli	shed)	65+			
Name of Monitoring Firm Hired by Buildin	g Owner (8)		CM No.		Name	Name of Abatement Contractor (9)							
N/A						DIA (General Cons	struction, I	nc					
Street Address							Address Clifton Ave,						_	
City, State, Zip Code	State, Zip Code					City, St	ate, Zip Code						-	
Project Manager for Monitoring Firm			Teleph	one No.		Teleph	n, NJ 07012							
			1,7				89-0089		ense 1 693	No.				
Start Date (10) 03/09/2017	03/17/	/2017	mpletion	Date (1	1)		f OSHA Monito Seneral Cons		10					
Occupancy Status During Abatement (Che	ck Only O	ne)				Street A		u dollori, ir						
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor	Period of mal Facilit	Abater y Hour	ment s			PMB Suite	218							
Other – Describe: Scope of Work (Check All That Apply)							ate, Zip Code n, NJ 07012							
23 sf or ≥3 If	▽ .						NEW CONTRACTOR OF THE PARTY OF	inment with Nove 1						
≥160 sf or ≥260 lf		Renova Demoli				×	Mini-Enclosur Glovebag Pro	ull Containment with Negative Pressure ini-Enclosure ovebag Procedure on-Exempted (*) and Non-Friable Procedure						
	Is	Locati	ion				Non-Exempte	d (*) and Nor	n-Friab	le Pro		re emen	+	
Location of Asbestos-Containing Material (ACM)		Normal ed Sole			Des	cription o	f					/pe		
TO BE ABATED	Ma	intenar	nce/	Asbe (i.e	stos Conta e. thermal s	aining Ma	terial (ACM)	Amoun (Specifi				T.	-	
In Facility (13)	Cus	(12)	olali?		surfac	ing, VAT, iscellaned	or	SF or LF		Remova	Repair	caps	Flictonia	
	Yes	No	N/A	•	001 111	io ociiarie (,us)			val	air	Encapsulate	ame	
7 A-D Willow Run-Crawl Space	X			F	Pipe/Elbo	ow Insu	ation	180 LF		X				
9 A-D Willow Run-Crawl Space			F	Pipe/Elbo	ow Insu	ation	160 LF	=	X					
11 A-D Willow Run-Crawl Space		F	Pipe/Elbo	ow Insul	ation	170 LF								
me of Registered Waste Hauler	I N.	IDED W	asto	Cubia V										
rvice Transport Group	NJDEP Waste Hauler ID No. of Waste 20990 8 CY			Traine of registered Landin										
y, State w Castle			Disposa		City, State		1600							
mpleted by	Title		3/17/2017 Waynesbu				esburg,OH44688							
an Njezic Vice Preside				sident Signature Date 02/2						017				

		N	OTIFICA (Purs	ATION C	F ASBEST NJAC 8:60	OS ABATE	EMENT	Tanana and and and and and and and and an)OL -	- 1() D	AY	
Date of Notification (1) February 23, 2017			Na	me of B		er/Operato					,	/	1
Agencies Notified Type Notifica PART DEP Initial Amanda			Str 76	eet Add 51 Mai	ess den Choi	ce Lane			FEB /	2 3 V	20	17	THE REAL PROPERTY AND ADDRESS OF THE PERSON NAMED IN COLUMN 1
DOL Amendar	ent#	ding	_ Cit	y, State, atonsv	Zip Code lle, MD 2	1228		WAI	VER	AP	PRI	OVE	= <u> </u>
DOH justificati	on)	onig	Nai Mi	me of Co arko S	ntact ankovic,	Project N	Manager	Te	lephone	Numb	er		
Name of Facility Where Abatement is Ta Lantern Hill Phase III	king Pla	ce (3)	F	ACILIT	Y INFORM	ATION	Type of Faci	lity (4)	P F	1	\\//=	E	I gar
Street Address 603 Mountain Ave					50		School Subcha	1 11 1	er than K	-12) rcial k	mikdir	ide h	The state of the s
City (5) New Providence							Square Feet 25,000		Floors	7	Bld	g. Age	
County (6) Union			Cour	nty Code	(7) ONLY)		Current Use (. 1	ng demol	ished	11 10 1	101	8
Name of Monitoring Firm Hired by BuildIn	g Owner	(8)	AS	SCM No.		Name o	f Abatement to	Contractor	LICE (9)	<u>-INIS</u>			_
Street Address						Street A	ddress					_	
City, State, Zip Code						City, Sta	guerite Lar te, Zip Ccde						
Project Manager for Monitoring Firm			Telep	hone No		Telephor	co, NJ 0708 ne No.		License	No.			
Start Date (10) February 24, 2017	Sched	uled C:	ompletio	n Date (11)	Name of	OSHA Monito)f	01265				
Occupancy Status During Abatement (Che	ck Only	One)				Street Ad							
Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other – Describe:	Period o mai Facil	f Abate ity Hou	ment rs			City, State	uerite Land e, Zip Code o, NJ 0708						
cope of Work (Check All That Apply)		-				TOWAG	0, 110 0708						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renov Demoi					Full Containm Mini-Enclosur Glovebag Pro	cedure					
* 2 12		s Locat		i			Non-Exempte	d (*) and N	on-Frlab	le Pro	Certification	re emen	+
Location of Asbestos-Containing Material (ACM)	Us	Norma ed Sole	ely by	A-4	Des	cription of						уре	•
TO BE ABATED In Facility (13)	Cus	aintena stodial ((12)	nce/ Staff?	(i	e. thermal : surfac	aining Mater systems ins ing, VAT, or iscellaneou	ulation,	Amor (Spec SF or	cify	Removal	Repair	Encapsulate	Enclosure
5 locations throughout building	Yes	No	N/A X		niae '					'al	7	llate	- Gun
			-		- hibe i	nsulation		70 L	F	Х			
										ĺ	-		
me of Registered Waste Hauler eigle Trucking Co.			IDEP W		Cubic Y	ards	Name of F	legistered (and Ell				
/, State		Ha	auler ID	No.	of Waste		TRRP.	- Grandied I	Langhii				
den, PA				City, State Tullytown, PA									
enter di		ompleted by arko Stankovic Project Mana					Date 2/23/2017						

				N OF AS				NT		E	C			\mathbb{W}	5
Date of Notification (1) February 23, 2017				of Building		/Operator	r (2)			F	EB	2	7	201	7
	tification			Address Maiden	Choice	Lane									
DEP DOL Am	ended endment #_1			tate, Zip C nsville, i		228				ASBE	STC	1100	-		ROL
DOH just	ergency (including ification) rcellation)		of Contact O Stank		roject N	vian	nager	Tele	phone	Numh	ar	1, 7 70		
Name of Facility Where Abatement	is Taking Place (31	FAC	ILITY INF	ORMA	TION	Гт.	pe of Facility (
Lantern Hill Phase III	is raining ridge (.,					i y	School (K-1.							
Street Address 603 Mountain Ave								Subchapter Other (i.e. p etc.)	8 (Other	r than k	(-12) ercial b	uild	lings	, hom	es,
City (5) New Providence								uare Feet 5,000	# of F	Floors			ldg. A	∤ge	
County (6) Union				Code (7) USE ONL	n		Cu	rrent Use (Pric	or if being	g demo	lished)			
Name of Monitoring Firm Hired by I	Building Owner (8))	ASC	M No.		Name BL C	of A	batement Con tracting Inc	tractor (9	9)			usep-		
Street Address						Street 5 Ma		lress Jerite Lane							
City, State, Zip Code					City, S Towa	itate,	, Zip Code , NJ 07082								
Project Manager for Monitoring Firm		Telepho		Teleph 973-		No. I-0153		License 01265	THE TOTAL THE STATE OF						
Start Date (10) February 28, 2017	3/20/2							SHA Monitor tracting Inc							
Occupancy Status During Abateme			Street Address 5 Marguerite La									•			
Facility Closed/Vacated During Abatement Performed Outside Other – Describe:	Entire Period of A of Normal Facility	Abater / Hour	lielit					Zip Code							
Scope of Work (Check All That App	ly)		Towaco, NJ 07082					, 140 07082	mper en av			-		-	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	(participant)	Renova Demoli					Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
	1 22	Locat	W. T. O. C. C.			him	4 /	1011-Exempled	() and .	NOTIFE T	IADIE F		bate	ment	
Location of Asbestos-Containing Material (A TO BE ABATED In Facility (13)	.CM) Use	torma d Sole intena odial ((12)	ely by ince/ Staff?		tos Con therma surfa	scription taining M systems cing, VAT niscelland	ateri inst T, or		(Spe	ount ecify or LF)	Nermova		Repair	e Encapsulate	Enclosure
	Yes	No	N/A X		20						8	-		late	ire
please see attached pag	se see attached pages										Х	1			
**															
Name of Registered Waste Hauler		IN	NJDEP Waste Cubic Yards Name of Registered			d Land	611	-							
Weigle Trucking Co.	lauler ID		of Wa 300			TRRP.	-9.0(0) 0	4 F81101							
City, State Linden, PA					Dispos	al Date		City, State Tullytow	City, State Tullytown, PA						
Completed by Marko Stankovic Title Project Manager					5	ignature	_		Date 2/23/2017						

				N OF ASB	ESTOS	ABATE		T 2	(KA	#	16	6	8
Date of Notification (1) 2/20/2017				of Building en State				unity Deve	lopm	ent	11	14		U
Agencies Notified Type	e Notification			Address ummit A	venue				Topologica de la companya de la comp	n E	C	E		V/ F
DEP DOL	Amended Amendment #_ Emergency (including	_		ate, Zip Co y City, N		04				图			-	
DOH DCA	justification) Cancellation	,		of Contact Morale	S				Tel	ephone Nu	ımber	2	21	
Name of Facility Where Abate	ment is Taking Place (3)	FAC	ILITY INFO	ORMAT	ION	Туре	e of Facility (4)	ASB	EST			
Commercial Property Street Address								School (K-1 Subchapter		er than K-1		ENS	SING	-
184 Hobart Avenue							×	Other (i.e. p etc.)	rivate	& commerc	ial buil			es,
City (5) Bayonne			S-1000000-1000				1	are Feet ,900+	:	f Floors 2+		3ldg. <i>A</i> 50-		
County (6) Hudson				Code (7) USE ONLY)		Curr	ent Use (Prid pty	r if bei	ng demolis	hed)			
Name of Monitoring Firm Hired	by Building Owner (8)	ASC	ЛNo.				atement Con Contracting						
Street Address						Street 32 W		ess Way						
City, State, Zip Code								Zip Code d Park, NJ	0742	24				
Project Manager for Monitoring		Telepho	ne No.		Teleph 973-3				License 1	No.				
Start Date (10) 3/2/17	Schedul 3/5/17	ed Con						HA Monitor on Consul	tants	Inc.				
Occupancy Status During Abat		0000 0	Street /					ss						
Facility Closed/Vacated D Abatement Performed Ou Other – Describe:	uring Entire Period of tside of Normal Facility	Abaten y Hours	ement 20-21 Wagaraw Rd. City, State, Zip Code Fair Lawn, NJ 0741						y. 33-L					
Scope of Work (Check All That	Apply)		Fair Lawn, NJ 0/4											
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	and the same of th	Renova Demolit				×	Mi	II Containme ni-Enclosure ovebag Proc on-Exempted	edure				e	
		Locati Normal				25 10						Abate		
Location of Asbestos-Containing Mater TO BE ABATED In Facility (13)	ial (ACM) Use Ma	ed Sole iintenar todial S (12)	ly by nce/		os Cont thermal surfac	systems cing, VA	otion of ng Material (ACM) tems insulation, , VAT, or ellaneous)			mount pecify or LF)	Removal	Repair	Ericapsulate	Enclosure
Roof	Yes	No	N/A X	R:	uilt I In	Roof N	Antor	ial	5.0	00 SF	v		Ö	
Roof	Root					NOO! N	nater	Idi	5,0	00 31	X			
Name of Registered Waste Hau	ıler	100	JDEP W	100000000000000000000000000000000000000	Cubic		-	Name of R	egiste	red Landfil				\dashv
Unicorn Contracting Corp	•	1 0 2 2 3 3 3	Hauler ID No. of Waste 5+ Tullytown Resource F				source R	ecove	ery F	acilit	У			
City, State Woodland Park, New Jers	sey				Dispos	al Date)	City, State Tullytow						
Completed by Dimo Golcev	eral M	anager		S	ignature	7,	16	1	P	ate 20/20)17			

	KIL	47	1		ICATION	ate of Ne I OF ASB to NJAC	ESTOS	ABATI		т		DE	G	E		\mathbb{V}
A SECURITY OF	te of Notification (1) 10/2017					f Building vood Pr			or (2)				FEB	2	7 2	917
Ag	encies Notified	Type Notification X Initial	1		Street A	ddress Stelton i	rd					ASB	EST	OS C	ON	TRO
×	EPA DEP DOL	Amended Amendmen		_		ate, Zip Co away N						-		- EP4	D:145	Ż.
R	DOH DCA	Emergency justification Cancellatio)		Name of frank	f Contact					Те	lephone Nur	nber			
			2020 AV 11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		FACI	LITY INF	ORMATI	ON								
100000	me of Facility Where ivate Property	Abatement is Taki	ng Place (3	3)					Тур	e of Facility (School (K-1						
Str	eet Address								×			er than K-12 & commerci		dings,	hom	es,
	y (5) omerville NJ								Squ 250	iare Feet 00	# 0	f Floors		ldg. <i>A</i> 50	\ge	
0.000	unty (6) omerset County					Code (7) USE ONLY	2		Cun	rent Use (Pri	or if be	ing demolish	ned)			
Na N/	me of Monitoring Firm A	Hired by Building	Owner (8)		ASCN N/A	/ No.				oatement Cor lutions Ser						
Str N/	eet Address A								t Addr	ess st Street						
City N/	/, State, Zip Code A									Zip Code rgen NJ 0	7047			230.2		
Pro N/	ject Manager for Mon A	itoring Firm			Telepho N/A	ne No.			hone	No. 9685		License N 01320	0.			
	rt Date (10) 21/2017		Schedule 2/30/20		mpletion 1	Date (11)	7			SHA Monitor onmental l	Labor	atories				
Oc	cupancy Status During	g Abatement (Che	ck Only Or	ne)	~ ~0	1000)	/		t Addr						- 1	
×	Facility Closed/Vaca Abatement Perform									ute 22 We: Zip Code	st 					
	Other - Describe: _							Uni	on NJ	J 07803						
Scc X	ope of Work (Check A ≥3 sf or ≥3 If ≥160 sf or ≥260 If	II I nat Apply)		Renova Demoli					× M G	ull Containmolini-Enclosure lini-Enclosure lovebag Procon-Exempted	e cedure				e	
	Location	of		Locat	377		De		6						ement pe	t
	Location Asbestos-Containing TO BE ABA In Facili (13)	Material (ACM) ATED	Use Ma Cust	d Sole intena todial ((12)	ely by nce/ Staff?		tos Cont	systen	Materians insu AT, or	1	(5	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
	Baseme	ent	Yes	No	N/A X		Pine	Insul	ation			0 LF	X			
	Dasellie	J11L	+ 1				i ihe	n Iouli	GHOIT			.U LI	X			
			+								Esquera e		1^			
			-													
Nar	ne of Registered Was	te Hauler		TN	JDEP W	aste	Cubic	Yards		Name of	Registe	ered Landfill				
	work Corting Inc				lauler ID		of Was			ICEC D						

04509

Disposal Date

City, State

Newark Carting Inc

ISES Bethlehem Rd Landfill

City, State

Po Box 5670 2335 Applebutter Rd Bethlehem PA Completed by Title Signature Date Marcos Regato President 2/10/2017

CK1146	N			OF ASBE O NJAC 8				01.1						
Date of Notification (1) 2/10/2017				Building Cood Prop			(2)	The state of the s		EG				73
Agencies Notified Type Notification			Street Ad	dress telton rd	I			Vi 2004 mann		FEB	27	201	7	
EPA Initial Amended Amendment #				e, Zip Cod away NJ	ie					SDESTO	0.00	N. 1970	V.O.:	
DOH Emergency (ii justification) DCA Cancellation	ncluding		Name of frank	Contact					Télé	phone Nur	nber	INTI NG	:OE	Čt
			FACIL	ITY INFO	RMATI	ON								
Name of Facility Where Abatement is Taking Private Property	Place (3)						Туре	of Facility (School (K-1	2)		53			
Street Address							×	Subchapter Other (i.e. p etc.)			al build			s,
City (5) Somerville NJ							Squa 250	are Feet 0	# of 2	Floors	10000	ldg. A 50	ge	
County (6) Somerset County			County C	Code (7) ISE ONLY)			Cum	ent Use (Prid	or if bei	ng demolish	ned)			
Name of Monitoring Firm Hired by Building O N/A	wner (8)		ASCM N/A	l No.				atement Cor utions Ser						
Street Address N/A						Street 1435		ess t Street						
City, State, Zip Code N/A		-						Zip Code gen NJ 07	7047					
Project Manager for Monitoring Firm N/A			Γelephor N/A	ne No.		Teleph 201-	none N 552-9			License N 01320	lo.			
	Schedule 2/30/20			Date (11)		185 2777 6379		HA Monitor onmental l	Labora	atories				
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire P						Street 2333	7	ess ite 22 We	st					
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe:	al Facility	Hours			_			Zip Code 07803						
Scope of Work (Check All That Apply)	VI. 11141111									-				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovat emoliti				Þ	M G	ull Containmoini-Enclosure lovebag Procon-Exempte	e cedure				е	
		Locatio	70000										ement pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Mai	d Solel ntenar odial S (12)	y by ice/		os Con thermal surfa	scription taining N system cing, VA niscella	Materia s insu AT, or		(8	mount Specify F or LF)	Removal	Repair	Encapsulate	Endosure
	Yes	No	N/A		<u> </u>					0.15	1,,		Ф	
Basement			X		Pipe	Insula	ation			0 LF	X			
		1						The f	D	d 1 d 61				
Name of Registered Waste Hauler Newark Carting Inc		H	JDEP W auler ID 1509	110-71-116	of Wa	Yards ste				ered Landfil nem Rd L		11 -	*	
City, State Po Box 5670					Dispo	sal Date)	City, Stat 2335 A		utter Rd I	Bethle	ehem	PA	
Completed by Marcos Regato	Title Presid	dent			8	Signatur	Mark	m/h	100	- //	ate 110/20	017		

Marcos Regato

CKIIDI

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

(KH 1151

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e of Notification (1)		Nar 64	ne of Buil -66-69th	ding Owner/ Street L	Operator (2	2)) <u>E</u>				1
13/2017 encies Notified Type Notification		Stre	eet Addre					,	FEE	3 2	7 20	17	-
EPA Initial Amended		City	v. State, Z										
DOL Amendment # Emergency (included)	uding		me of Co					Teleph	none Numbe	O SG	ONT SING	ROL	- 8
DOH justification) DCA Cancellation				YINFORMA	TION								
ame of Facility Where Abatement is Taking Pl	lace (3)		FACILIT	I INT OTHER			acility (4)						
rivate Property						☐ Sub	ool (K-12) chapter 8	10than	than K-12) commercial	building	js, ho	mes,	200000
reet Address						Othetc. Square F)	# of F			. Age		-
ty (5)						200SF		1	I sliebo	+50			
outtenberg ounty (6)		C	ounty Coo	de (7) ONLY)					g demolishe	a)			
ludson ame of Monitoring Firm Hired by Building Ow	vner (8)	\dashv	ASCM N	lo.	Name	of Abaten	nent Contr ons Serv	ractor (ices L	9) LC				
N/A			IN/A		Stree	t Address 5 51st S							
treet Address N/A					City	State, Zip	Code	- /-					
ity, State, Zip Code N/A					Nor	th Berge ohone No.	n NJ 07	047	License No).			_
Project Manager for Monitoring Firm		1	elephone N/A		201	-552-96			01320				
Start Date (10)	Scheduled 2/17/201		pletion Da	ate (11)	Iris	e of OSHA Environi	mental L	abora	atories				_
2/15/2017 Occupancy Status During Abatement (Check					Stree	et Address 33 Route	22 Wes	st					
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Normal Other – Describe:	eriod of At	batem	ent		City,	State, Zip	Code						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Squarest	enova emolit				Mini	-Enclosur	e codura	n Negative F)	
	1					NOI	I-EXEMPLE	l () ui			Abate Ty	ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	Locat Norma d Sole intena todial (12)	lly ely by ance/ Staff?	(i.e. th	Descript Containing ermal system surfacing, other misce	g Material ems insula VAT, or	(ACM) ation,	(Amount Specify F or LF)	Removal	Repair	Encapsulate	
(1-)	Yes	No	N/A			1			400SF	X			-
Exterior			X		Shing	gies		-	.0001				
													1
	+							10.	Jarod Londi	SII .			
		-	NJDEP V		Cubic Yard of Waste	ds			tered Landi ehem Rd		ill		
Name of Registered Waste Hauler			Hauler ID) NO.									
Newark Carting Inc) NO.	Disposal [Date	City, St	tate	buttor Da	Roth		n PA	
	Title		Hauler ID) NO.	The Marine State of the Control of t	Date along	City, St 2335	Apple		Beth	leher	n PA	4

State of New Jersey

		N	-		OF ASBE to NJAC 8			700	Ole	ch	_ 1(01	7	5	
Date of Notification (1) 2/16/17					Building (n Tomas		Operator	(2)			me	C	E	[<u> </u>
Agencies Notified	Type Notification			Street A	ddress						IX-				
EPA DEP DOL	X Initial Amended Amendment				te, Zip Co eth, NJ		3			Cate dis-		FEB	2	7 20	17
× DOH	Emergency justification)			Name of	Contact					Tel	ephone Nu	mber	20.0		
DCA	Cancellation			Marily	n Tomas	sovic						1.1/	_ N	NUN	
				FACI	LITY INFO	DRMATI	ION			1	- Continue de la cont	L. I	DOMESTIC OF		1
Name of Facility Where House Street Address	Abatement is Takir	ng Place (3)					☐ So	f Facility (4 chool (K-1) ubchapter	2)	er than K-1	2)			
dieernadiess								100	ther (i.e. p c.)	rivate 8	& commerc				S,
City (5) Elizabeth								Square 2200	Feet	# of	Floors		ldg. A O	ge	
County (6)					Code (7)				t Use (Pric	r if bei	ng demolis	hed)			
Union				(STATE L	JSE ONLY)	-									
Name of Monitoring Firn	n Hired by Building	Owner (8)		ASCN	1 No.		ABS	Enviro			(9) rices, LL(2			
Street Address							PO E		3, 4 E G	ate D	rive				
City, State, Zip Code							1,000	State, Zip Iwood,	Code NJ 074	18					
Project Manager for Mor	nitoring Firm			Telepho	ne No.			hone No. -764-22			License 1	١٥.			
Start Date (10) 2/25/17		Schedule 3/25/17		npletion I	Date (11)		Name	of OSHA	A Monitor						
Occupancy Status Durin	g Abatement (Che	ck Only On	e)				Street	Address	i						
Facility Closed/Vac Abatement Perform Other – Describe:	ned Outside of Norr						City, S	State, Zip	Code	-					
Scope of Work (Check A	All That Apply)		-												
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		Yes	No	N/A										е	
basem	ent			X		pipe	insula	ation		5	50 LF	X			
Name of Registered Wa	ste Hauler		IN	JDEP W	/aste	Cubic	Yards	T	Name of I	Registe	ered Landfi	1	Summer of the second		
Freehold Cartage			Н	lauler ID 5939		of Wa				0.50	ks Landf				
City, State Freehold, NJ						Dispo	sal Date)	City, State Birdsbo		A			9355-116	
Completed by		Title				5	Signature	e ///	7		0.745	ate			

President

2/16/17

A. Scott Higgins

STOS ABATEMENT :60 and 12:120)	C Doal	16179
:60 and 12:120)	(Hell	10117

Date of Notification (1)					Building Ov											
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Agencies Notified	Type Notification		-	treet Ad	more and the same						٢	= (9 1	= U	U	
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Name of Facility Where	Abatement is Taking	Place (3)		FACIL	ITT INFOR	XIVIATI	ON	Туре о	f Facility (4)	-			We su wise			
Old Animal Shelter	to diomonition in a mini	,						Пѕ	chool (K-12)							
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Detail Associates				0001	2		100000000000000000000000000000000000000		onmental S	serv	ices, L	LC				
Street Address							2000/201/201/201/201/201/201/201/201/201	Addres:		o Di	rivo					
300 Grand Avenue									3, 4 E Gat	le Di	ive					-
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Project Manager for Mon				elephor	ie No. 69-6708			hone No -764-2:			703	C 140.				
Stephen Jaraczews	SKI	Scheduled					100000000000000000000000000000000000000		A Monitor							
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Other - Describe:																
Scope of Work (Check A	III That Apply)									444.55						
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× ≥160 sf or ≥260 lf			noliti				-		i-Enclosure vebag Proce	duro						
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		le Le	ocatio	n .											ment	
	- of		rmall			D	escriptio	n of				-		Ту	pe	-
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TO BE AB	ATED	Maint Custoo			(i.e. 1		al system acing, V		ition,		Specify or LF)		Rem	Repair	cap	nclo
In Faci (13)		((12)				miscella			0,	0, 2, ,		Removal	pair	Encapsulate	Enclosure
()		Yes	No	N/A									-		te	0
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Old Animal She	elter (vacant)			Х		trar	isite pa	aneis		4,	30 31		^_			
	377															
Name of Registered Wa	ste Hauler		N.	JDEP W	/aste	Cubi	c Yards		Name of R	egiste	ered Lar	ndfill				
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Freehold Cartage			1:	5939		TBD										
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Freehold, NJ		Titl				IDL		re	1	٥, ١	, ,	Dat	e			
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A. Scott Higgins		Fresia	CIII													

State of New Jersey

		NOT	(Purs	uant to	NJAC 8:60	and 12:12	20)		al	ec	L	16	21	8	9	
Date of Notification (1) 2/20/17				me of B yndi P	25	ner/Operato	or (2)		<u> </u>		NE	C	E		W	
Agencies Notified	Type Notification		St	reet Add	ress					1		-				
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				FACILI	TY INFOR	MATION	1 -		Facility (4)			Lul	UE:	NS	INC3	
Name of Facility Where house	e Abatement is Taking	Place (3)						l Sch	nool (K-12)	er than K-1	(2)				
Street Address							×	Oth etc	ier (i.e. pri .)	vate 8	commerc	cial bui				
City (5) Hackettstown							2	quare I		2	Floors		70	g. Ag	e 	
County (6) Warren				ounty Co	ode (7) SE ONLY)						ng demolis	shed)	_ =			
Name of Monitoring Fi	rm Hired by Building (Owner (8)		ASCM	No.	Nan AB	ne of 3S E	Abater nviror	nent Cont nmental	ractor Serv	⁽⁹⁾ ices, LL	С				
Street Address								idress x 483	, 4 E Ga	ate D	rive					
City, State, Zip Code								te, Zip ood, I	Code NJ 0741	18						
Project Manager for M	onitoring Firm		T	elephon	e No.			ne No. 64-22	76		License 703	No.				
Start Date (10) 3/1/17		Scheduled 3/25/17	Comp	oletion D	ate (11)	Nar	me of	OSHA	. Monitor							
Occupancy Status Du	ring Abatement (Chec)			Stre	eet Ad	ddress								
Facility Closed/V Abatement Perfo	acated During Entire I rmed Outside of Norn basement	Period of Ab nal Facility H	ateme lours	ent		City	y, Sta	te, Zip	Code							
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≥3 sf or ≥3 lf × ≥160 sf or ≥260		-	novati molitic				×	Mini-	Enclosure	edure	n Negative)	
			ocatio			Sales (D. C. C. S.							A	Abate Ty	ment oe	
Asbestos-Contain TO BE In F	tion of ing Material (ACM) <u>ABATED</u> acility 13)	Used Main Custo	Solel	y by ice/	(i.e. t	Descrip os Containir hermal syst surfacing, other misce	ng Ma tems , VAT	aterial (insulati , or	ACM)	(Amount Specify F or LF)	Koniove	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A							130 LF	X				
base	ement			X		pipe ins	ulati	ion		-	130 LF		1			
				105014		Cubic Var	de		Name of	Regis	tered Land	dfill				
Name of Registered ' Freehold Cartage			Н	JDEP W auler ID 5939		Cubic Yar of Waste TBD	ua				rks Land					
City, State Freehold, NJ						Disposal Dis	Date		City, Sta		PA					
Completed by		Title	dont			Signa	ature	1	1			Date 2/20)/17	7		

President

A. Scott Higgins

Name of Building Owner/Operator (2) Date of Notification (1) Rafael Guadalupe 02/21/17 Street Address Agencies Notified Type Notification **EPA** Initial City, State, Zip Code Amended DEP Belleville, NJ 07109 Amendment # × DOL Emergency (including Telephone Number OS CONTROL Name of Contact justification) DOH Mr. Rafael Guadalupe Cancellation DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) Residential School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, # of Floors Bldg. Age Square Feet City (5) 50 +1.500 +2 Belleville Current Use (Prior if being demolished) County Code (7) County (6) (STATE USE ONLY) Residence Essex Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) J.R. Contracting & Environmental Consulting, Inc. Street Address Street Address 1141 Route 23 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 License No. Telephone No. Telephone No. Project Manager for Monitoring Firm 00408 973-628-9200 Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) Enviro Vision Consultants, Inc. 03/02/17 Street Address Occupancy Status During Abatement (Check Only One) 20-21 Wagaraw Road, Bldg. #35E Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours Fair Lawn, NJ 07410 Other - Describe: Scope of Work (Check All That Apply) Full Containment with Negative Pressure Renovation ≥3 sf or ≥3 lf Mini-Enclosure Demolition ≥160 sf or ≥260 lf Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Type Normally Description of Location of Used Solely by Asbestos Containing Material (ACM) Amount Encapsulate Asbestos-Containing Material (ACM) Maintenance/ (Specify Removal (i.e. thermal systems insulation, TO BE ABATED Custodial Staff? surfacing, VAT, or SF or LF) In Facility (12)other miscellaneous) (13)N/A Yes No 68 LF X X Pipe Insulation Basement Name of Registered Landfill NJDEP Waste Cubic Yards Name of Registered Waste Hauler of Waste Hauler ID No. Grand Central Landfill J.R. Contracting & Environmental Consul., Inc. 5 17819 City, State Disposal Date City, State Pen Argyl, Pennsylvania Wavne, New Jersey Date Signature Completed by 02/21/17 Project Manager Jerry Bijelonic

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

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

	N	and the second		OF ASBESTOS to NJAC 8:60 at			,	ME	C E		\mathbb{V}	E
Date of Notification (1) 2/13/2017				Building Owner ood Propertie		(2)			cp c		0017	
Agencies Notified Type Notification		100	Street Ad 1260 S	ddress stelton Rd					han had hi	- 1	40 i s	
EPA X Initial Amended Amendment X Amendment X X X X X X X X X	#			te, Zip Code away NJ				ASBES	STOS			DL 8
DOH Emergency (in justification) DCA Cancellation	including	1183		Contact nelchowski			Т	Telephone Nur	STATE OF THE PARTY.			
Garicellation				LITY INFORMA	TION		1	-				
Name of Facility Where Abatement is Taking Private Property	Place (3)				Тур	e of Facility (4) School (K-12)					
Street Address						×	Subchapter 8 Other (i.e. priv	(Other than K-1: ate & commerci	2) al build	lings,	home	s,
City (5) Jackson						Squ 280	etc.) are Feet	# of Floors		ldg. A	ge	
County (6)			County C	Code (7)		0.7312.517		f being demolis				
Ocean						- C A L	atement Contra	adas (O)				
Name of Monitoring Firm Hired by Building C N/A	Jwner (8)		ASCM N/A	I No.	ACM	1 Sol	utions Servi					
Street Address N/A					Street 1435		ess it Street					
City, State, Zip Code N/A							Zip Code rgen NJ 070	47			Çî	
Project Manager for Monitoring Firm N/A		4.5	Telephor N/A	ne No.	Telepl 201-		No. 9685	License N 01320	lo.			
Start Date (10) 2/23/2017	Schedule 2/26/20		npletion (Date (11)			SHA Monitor onmental La	boratories				
Occupancy Status During Abatement (Chec	k Only Or	ne)			Street	Addr	ess					
➤ Facility Closed/Vacated During Entire F	Period of	Abatem	ent				ute 22 West					
Abatement Performed Outside of Norm Other – Describe:	nai Facility	Hours					Zip Code J 07803					
Scope of Work (Check All That Apply)					-	7						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit			5	N G	fini-Enclosure Blovebag Proced	t with Negative I dure *) and Non-Frial			۵	
	I le	Locati	00				IOII-EXCITIPICA (/ did rion i ria	1	Abate	ement	
Location of	1	Normal	ly		Description	n of			_	Ту	pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole intenar todial S (12)	nce/ Staff?	Asbestos Co (i.e. therm sur	ntaining !	Materi Is insu AT, or	ulation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A	ļ				FOODE	-			
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					1. W		10	alabara d I (C	1			
Name of Registered Waste Hauler Newark Carting Inc		H	IJDEP W lauler ID 4509		vaste		1	egistered Landfi hlehem Rd L		II		
City, State Po Box 5670				Disp	oosal Date	9	City, State 2335 App	olebutter Rd	Bethle	ehem	PA	
Completed by Marcos Regato	Title Pres	ident			Signatur		corle	10	ate /13/20			
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Agencies Notified	Type Notification	1 [St	reet Add		HURTES	(100 m)		AH 1 2	-6.45		1
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DOL DOL	Amendment #_ Emergency (inc	luding			/Ren	ton 1	NJ	Telephone Numh				
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County (6)	107) 10	7	C	ounty C	ode (7)	Curren	t Use (Prio	r if being demolishe	d)			
Mer	Cer		(S	TATE U	SE ONLY)			(0)				_
Name of Monitoring Firm	Hired by Building Ow	ner (8)		ASCM	No.	Name of Abate	ement Cont	hoolegi	05	•	In	2
EPC C	s und la	1162			14/14	Street Address	166	17110107			266	-
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Project Manager for Mo	eithri g Firm		- 1	elephon		Telephone No 609 758			13	P	4	
Stene 2	chenker	cheduled			758-3365 Date (11)	Name of OSH			-	0 1	-	
Start Date (10)	2017	Mak		17.	2017	EPC	- Tecl	nnologies	I	nc		
Occupancy Status Durin						Street Address		727				
Escility Closed Vac	ated During Entire Pe	riod of Ab	ateme	ent		City, State, Zip	Box	331				-
☐ Abatement Perform ☐ Other – Describe:	ned Outside of Norma	Facility F	lours	7.0		New E	-	ALT C	185	53	3	
Scope of Work (Check	All That Apply)					1	JIPI	700				
	All Hat Apply)	→ Re	novati	on				ent with Negative Pr	essur	e		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		/	molitic			☐ Glo	i-Enclosure vebag Prod	ædure				
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		ls L	ocatio	n						Abate Ty		
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In Fac		Custo	(12)	an?		acing, VAT, or miscellaneous)		SF or LF)	Remova	Repair	Encapsulate	Enclosure
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					Lasta Costs	c Yards	Name of	Registered Landfill				
Name of Registered W	aste Hauler			JDEP Wauler ID	Idoto	aste 11	1	te Manager		4	c 1	AIC
EPC Te	chnologies	>		170		Q 7	City, Sta	to		. 0		7.
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Steve Sch	en Kee	Pres	sid	ent		Sleens	DCK	che	d.	33	-1	+
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Date of Notification (1) Agencies Notified Type Notification Type Notification Initial Amended Amendment Emergency (justification) DCA Cancellation			Street 34	of Building O	arg	perator O Vich Vich	3anh, Bild 297	15	ASBES	LICEN	CON	D17 TROL	8
Name of Facility Where Abatement is Taking Street Address City (5)	g Place ((3)	FAC	CILITY INFOR	RMATIO	ON	Type of Facility School (K- Subchapte Other (i.e. etc.)	-12) er 8 (Oth private	er than I	K-12) ercial bu			ies,
County (6)				Code (7) USE ONLY)			Square Feet Current Use (Pr	for if bei	2	olished)	Bldg.	7	
Name of Monitoring Firm Hired by Building C	wner (8		•	M No.			of Abatement Co Industries In	ntractor	(9)				
Street Address City, State, Zip Code						P.O.	Address Box 915 tate, Zip Code	00700					
Project Manager for Monitoring Firm			Telepho	one No.		Teleph	, New Jersey one No. 899-7499	00723	License 01196				
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire P Abatement Performed Outside of Normal Other – Describe:	Only O	ne) Abatem	nent	Date (11)	_	Street /	of OSHA Monitor Address ate, Zip Code						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoliti					Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure	-			re	
1 8 1		Location Normall										temen ype	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Solel intenan todial S (12)	y by ice/ taff?	(i.e. the	conta ermal s surfaci	cription ining Ma ystems ng, VAT scelland	aterial (ACM) insulation, r, or	(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
	162	NO	N/A	inter	Tor	plo	SHC	150	SF				
Name of Registered Waste Hauler		NI NI	JDEP W	/asta C	Cubic Y	ardo	Name of	Pagisto	ed Les	1611			
Brick Industries Inc.		Ha	auler ID 602	No. o	of Wast	4	GROW	'S Inc.	eu Lanu	J1111			
City, State Brick, New Jersey					Disposa	Date	City, Stat	е					
Completed by Eric Plackis	Title Presi	ident			Sig	nature	GUN			Date	10	1	7

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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(NJAC 5:23-8)	justificat	(7)			1	e of Contact bert Orte			Telephone N	lumber			
1							NFORMATION					-	
Name of Facility Where A	hatement is	Taking	Place	(3)	T PA	CILITI	NFORMATION	Tune of Facility	(4)				
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Street Address	y i neston	C LIDI	ary	-				Subchapter 8		(-12)			
Washington Rd								Other (i.e., p	rivate and com		uildin	gs,	
City (5)								homes, etc.)					
Princeton								Square Feet	# of Floors	E	Bidg. A	age	
		100000000000000000000000000000000000000			-1-2			1,000,000	8		70		
County (6) MERCER					Cou	nty Code (7	7)(STATE USE ONLY)		ior if being den	nolished)			
	Uland his Dec	I-1: O		(0)	10011		T	Library					
Name of Monitoring Firm ATC Group Services		laing O	wner	(8)	ASCM	7 (A-17- 2 1-5)	1	ent Contractor (9)					
Street Address	S LLC				000	98		VIRONMENTA	L, INC.	C. May C. Commission			
Three Terri Center							Street Address		23				
							1123 BEAVE						
City, State, Zip Code	c						City, State, Zip C						
Burlington, NJ 0801 Project Manager for Monit				1-1			BRISTOL, PA	19007					
	oring Firm			1	ephone		Telephone No.		License No				
Michael Keehn						3-8800	215-788-6040		00509				
Start Date (10)						ate (11)	Name of OSHA N		12222				
/13/		description of	N.	/ ***	<u>L</u> !	-	BRISTOL EN	VIRONMENTAL	_, INC.				
Occupancy Status During			25///				Street Address						
Facility Closed/Vacated							1123 BEAVE	R STREET					
Abatement Performed Time of Abatement:							City, State, Zip Co	ode					
			/ <u>3.00</u>	r IVI-I	.30AIVI		BRISTOL, PA	19007					
Scope of Work (Check all	that apply)						□ F. II C	-1	:				
≥3 sf or ≥3 lf		1	⊠ Re	novat	ion		☐ Mini-Enc	ainment with Neg losure	ative Pressure	F.			
≥160 sf or ≥260 lf		[☐ De	moliti	on		☐ Gloveba	g Procedure					
				•				mpted (*) and Nor	n-Friable Proce				
Location o				Loca Norma						At	patem	ent T	ype
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TO BE ABAT	ED				ince/ Staff?		., thermal systems i	insulation,	(Specify	Removal	pair	cap	Enclosure
IN Facility (13)			Cust	(12)	Stall?		surfacing, VAT, other miscellane		SF or LF)	<u>a</u>		Encapsulate	ure
(15)			Yes	No	N/A	1	other miscellane	ous)				ŧ	
Level B Hallway outsid	de room B	7L	П	\boxtimes		Floor til	e and mastic		200 SF		t_{T}	П	T
Level C Hallway outsid			$\overline{\Box}$				e and mastic		200 SF				
- 1 - 1 - 1											H		
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City, State			-		20990)	Disposal Date	City, State					-
NEW CASTLE, DE							- loposal Date		LE, PA 1906	67			
Completed By (Print or Typ	e)	Title					Signature	, , ,		Date /			
Brian Scafiro			timat	or			Brian X	Celiro /	il	2/1	7/1	17	

ASB-41 MAY 11 B SIG /20 WS

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

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Date of Notification (1)						ing Owner/Operator	(5)((5))	11/2/				
/	30 /	17		F	Princeton	University-Office	e of Design an	d Construction				
Agencies Notified	Type Notification	on		Str	eet Address	5		THE FE	B 8	27	201	7
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(NJAC 5:23-8)	justification)		ing		ne of Conta			Telephone Nu	manufathir brooks			and the surfaces
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Name of Facility Where Aba	atement is Tak	ing Pla	ce (3)	-	AOILITT	IN ORMATION	Type of Facility	/ (Δ)				
Princeton University-		100	10. 23				School (K-1	2000				
Street Address		•			-		─ Subchapter	8 (Other than K-1	2)			
Washington Rd							Other (i.e., plane) homes, etc.	private and comm	ercial	buildi	ngs,	
City (5)							Square Feet	# of Floors		Bldg.	۸۵٥	
Princeton							1,000,000	8		70	Age	
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MERCER					unity code (THOTATE OUE ONE T	Library	nor it being dernor	isileu,	,		
Name of Monitoring Firm His	red by Building	Owne	r (8)	ASCI	M No.	Name of Abatem		\				
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Three Terri Center						1123 BEAVE	D STDEET					
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Burlington, NJ 08016						BRISTOL, PA						
Project Manager for Monitori	ing Firm		Tel	ephone	e No	Telephone No.	(15007	License No.				
Michael Keehn				15	6-8800	215-788-6040		00509				
Start Date (10)	Sche	duled I			ate (11)	Name of OSHA M		00509				
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☐ Abatement Performed Ou					scribe	1123 BEAVE						
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Scope of Work (Check all tha	t apply)					BRISTOL, PA	19007					
scope of work (Check all tha	r apply)					☐ Full Cont	ainment with Neg	ative Pressure				
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ompleted By (Print or Type)	Title	-				Signature	navytanistastastastä Tillia	Date	2		-	
Brian Scafiro		timat	or				Sealing	101	/3	1		

ASB-41 BS16/20 NS

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

NOTIFICATION OF ASBESTOS ABATEMENT MO#24219186377 (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 20 / 17 02 Tower DBW REO II LLC Type Notification Street Address Agencies Notified ASBESTOS CONTROL X Initial ☐ EPA LICENSING X DOLWD Amended City, State, Zip Code X DHSS Amendment # West New York, NJ 07093 Emergency (including □ DCA Name of Contact Telephone Number (NJAC 5:23-8) justification) Cancellation Neil Harreveld FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Private house Subchapter 8 (Other than K-1 2) Street Address Other (i.e., private and commercial buildings. homes, etc.) Square Feet # of Floors Bldg. Age City (5) West New York, NJ 07093 County Code (7) (STATE USE ONLY) | Current Use (Prior if being demolished) County (6) Hudson Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 Project Manager for Monitoring Firm Telephone No. License No. Telephone No. 01127 973-638-1777 Scheduled Completion Date (11) Start Date (10) Name of OSHA Monitor 03 / 01 / 17 03 / 02 / 17 Envirovision Consultants, Inc Occupancy Status During Abatement (Check only one) Street Address ▼ Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Road, Bldg .# 35E Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: AM- PM/ PM_ AM Fair Lawn, NJ 07410 Clean up and decontamination with negative pressure Scope of Work (Check all that apply) Full Containment with Negative Pressure >3 sf or >3 lf Mini-Enclosure Renovation Glovebag Procedure Tent with Negative Pressure > 160 sf or >260 lf Demolition Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Repair Used Solely by Remova Encapsulate Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SIF or LF) (12)(13)other miscellaneous) Yes No N/A \boxtimes Pipe insulation-wrap&cut 100 LF Crawl space П П NJDEP Waste Hauler ID No. Cubic Yards of Waste Name of Registered Landfill Name of Registered Waste Hauler 0033785 TBD T.R.R.F. Inc Gr Tech LLC Disposal Date City, State City, State Tullytown, PA TBD Wayne, NJ 07470 Date Completed By (Print or Type) Title Signature ewic Wenad 02/20/17 N.Jevtic Owner

State of New Jersey

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Date of Notification (1) 2/20 17					f Building												
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Agencies Notified T	ype Notification			Street A	ddress		111	ted last									
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					•	Mac Contracting Inc.								
Total Address					186 Vreeland Ave.									
TV, State , Sip Code					Cây, Mid	State, Zip land Par	Code k, N.J.							
Toyaci Manager for Monitoring Firm		1	elaphen	à No.	Telephone No. Doonse No. 201-262-5841 00156							-		
Cort Date (FI)	Schadule	d Colom	pletten C	Neder (11)	Nam Orr	a d oski oga Em	Montor Aronment	al Services inc.				-		
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DOH DCA	justification) Cancellation	500	100	ric Pla	ackis									_				
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Name of Monitoring Firs	Priled by Ballating Ov	mer (o)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Brick Industries Inc.												
Street Address						Street Address P.O. Box 915												
City, State, Zip Code						City, State, Zip Code Brick, New Jersey 08723												
							k, New hone No		8/23	License N	n.			-				
Project Manager for Mo	ne No.	(73	2)899-7	499		01196												
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(NJAC 5:23-8)	justification				Name	of Contact				one Numb	er						
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					FAC	ILITY IN	FORMATION	٧									
Name of Facility Where	Abatement is Ta	aking Pl	lace (3	()					Type of Facility (4)							
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Ocean						, , , ,	Residence										
Name of Monitoring Firm	Hired by Buildi	ina Owr	ner (8)	Т	ASCM I	No.	Name of Aba	teme	ent Contractor (9)				aen				
N/A		9							ntracting, Inc.								
Street Address				_			Street Address										
Street Address							1889 Route 9, Unit 61										
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City, State, Zip Code							Toms River, New Jersey 08755										
Desired Manager for Mon	itorina Firm			Tolo	phone I	No	Telephone No. License No.										
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≥3 sf or ≥3 lf			Ren			on Mini-Enclosure											
≥160 sf or ≥260 lf] Dem	olitio	ion Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure												
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Name of Registered Wa	ste Hauler			1	NJDEP I	Waste	Cubic Yards	of	Name of Regis	stered Landfill							
Guardian Contract				10.00	Hauler II	D No.	Waste	2,573	T.R.R.F.								
					20223	3	Disposal Dat	to	City, State			_					
City, State	lowoo:						03/07/17			, Pennsylvania							
Toms River, New J		I							Tullytown		1						
Completed By (Print or		Title					Signato	re		1	ate /		. ~				
Nicholas Fernicola	1	Pro	ject l	viar	ager			L	The		7/3	10/	()				