w	ツサー	104	0										L	Pr	rint F	
CK 3116	PAJ			ICATIOI Pursuant	tate of Ne N OF ASE t to NJAC	8:60 an	ABATE d 12:12	0)	IT (CE		I	0.15	The second second	
Date of Notification (1) 12/20/19		of Building Bay St Ll		Operator		14.14			1	100						
Agencies Notified		Address	LU			JAN -	2 20	20	11.							
⊠ EPA	✓ Initial		95 Christopher Columbus Blvd								re to set it assistants			 		
DEP DOL	Amended Amendmer	nt#			ate, Zip C y City, N				8	2 4 2	Light.	Anna Shili	15.1.	÷:		
□ DOH	Emergency	(including	,	Name o	To	Telephone Number										
DCA	justification Cancellatio		Stroble					0.0000	201-217-6626							
Name of Facility Where	Abatement is Taki	na Place (3)	FAC	ILITY INF	ORMAT	ION	Tve	no of Equility	(4)						
Former Manischevi		ing i lace (J)					Ty	pe of Facility School (K-							
Street Address									Subchapte	r 8 (Oth	er than K-1	2)				
143 Bay St.								X	etc.)	private	& commerci	al buil	dings,	hom	es,	
City (5) Square Formula 74352										# o	f Floors		ldg. <i>A</i> i0+	Age		
County (6)	County	Code (7)					1	if being demolished)								
Hudson				8	USE ONLY)		Abandoned for demolition								
Name of Monitoring Firm Vertex Environmen)	ASC	M No.			ame of Abatement Contractor (9)										
Street Address							nnuzzi Environmental Services, Inc.									
3322 US 22					135	Kini	Suite 102									
City, State, Zip Code Branchburg, NJ 088	874					State, Zip Code nelon, NJ 07405										
Project Manager for Mon	Telepho		Teleph		D-1100000000000000000000000000000000000	3	License No.									
Don Heim	732-414-2228					-5709		01228	•							
Start Date (10) 1/7/2020	npletion	Date (11)		110000000000000000000000000000000000000	Name of OSHA Monitor											
Occupancy Status During	Abatement (Che	020 ne)					nuzzi Environmental Services, Inc.									
Facility Closed/Vaca	ated During Entire	ment 135 I					Kinnelon Rd. Suite 102									
Abatement Perform Other – Describe:	ed Outside of Non	mal Facility	y Hour	S				te, Zip Code om, NJ 07405								
Scope of Work (Check A	Il That Apply)						KIIII	elor	11, NJ 0740	00		-				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Renova Demoli						Full Containm Mini-Enclosure Glovebag Pro- Non-Exempte		e Pressure iable Procedure							
		· Is	Locat	ion								Abatement Type				
Location Asbestos-Containing	lly ely by		escription of taining Material (ACM)						1)		Г					
TO BE ABA	intena todial			thermal	systems	s inst	ulation,	(5	Amount (Specify		ᄁ	Encapsulate	Enc			
(13)	(12)				cing, VA niscellan			SF	or LF)	Removal	Repair	psula	Enclosure			
Yes No				N/A							=		ate	co'		
Crawl Space					Pipe i	insulati	ion & s	soil beneath			452lf					
Name of Devictor 1184																
Name of Registered Was Yannuzzi Group, Inc	NJDEP Waste Cubic Ya Hauler ID No. of Waste					250000000000000000000000000000000000000		egistered Landfill								
City, State	7467		60	15.	GROWS Fairless											
Kinnelon, NJ			1/25/2	al Date 2020	City, State Morrisville, PA											
Completed by		S. I CAMPA-			ignatúre		1		Da	te						
John Mucha		Sr. P	rojec	t Mana	ger		<u>/</u>	X	$\langle \bot _$							
ASB-41 (R-06-08)							Do no	t use	this form for	asbest	os licensure	exer	npted	activi	ties.	

	PA	In			NV	#1	108	5)						Р	rint F	
CK 691	19		NOTI)	FICATIO	N OF AS	lew Jerse BESTOS C 8:60 ar	ABATE	EMEN 20)	IT		C	E		Y	29.0	A CONTRACTOR	
Date of Notification (1) 12/31/19		Name of Building Owner/Operator (2) Burning Hollow, LLC JAN - 2 2020															
Agencies Notified	Street	Street Address 32263 Sandpiper Drive 7.500.0105.0000000															
DEP X DOL	Initial Amended Amendmer	nt #		City, St	City, State, Zip Code Millsboro, DE 19966												
X DOH □ DCA	Emergency justification Cancellatio	1)		Name	Name of Contact Telephone Number Brian Marston 973-632-2340												
			_	1.00		FORMAT	ION			9	73-03	2-23	+0				
Name of Facility Where A	Abatement is Taki	ng Place (3	3)	FAU	ILIIY IN	FURMAI	ION	Тур	e of Facility ((4)							
Street Address								×	School (K-1 Subchapter Other (i.e. p	8 (Oth	ner tha & com	n K-12 mercia) al bui	ldings	, hom	es,	
City (5) Woodbury									Bldg. Age 69								
County (6) Gloucester	County (STATE			Current Use (Prior if being demolished) Residence													
Name of Monitoring Firm Vertex	ASCI	M No.		Name of Abatement Contractor (9) ecoservices, LLC													
Street Address 700 Turner Industria				Street Address 303 B National Road													
City, State, Zip Code Aston, PA 19014				City, State, Zip Code Exton, PA 19341													
Project Manager for Moni Dave Turotsy	Telephone No. 610-558-8902			Teleph	none î	No.			nse No).		X-y-line-y-c					
Start Date (10) 1/2/20	mpletion Date (11)			484-872-8884 01161 Name of OSHA Monitor													
Occupancy Status During			EMSL Street Address														
Facility Closed/Vaca Abatement Performe	Control Contro			Route 130 North City, State, Zip Code													
Other – Describe: _						_			nson, NJ								
Scope of Work (Check All	That Apply)																
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ation tion			×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure												
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Is Location Normal Used Sole Maintenar Custodial S (12)					lly De ely by ince/ Staff? Asbestos Cont (i.e. thermal surfar			scription of aining Material (ACM) systems insulation, cing, VAT, or niscellaneous)					Abatemer Type				
											Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure	
Yes No Basement				N/A X	7					x		te					
										- 10	- LI		^				
Name of Registered Waste	e Hauler		NI NI	IDED W	aeto	Cubin	/ord-		I No			1=:		deren			
ecoservices, LLC	IJDEP Waste Cubic Yard of Waste 2					Name of R											
City, State					Disposal			al Date City, State									

TBD

Signature

Title

Sr. Project Manager

Exton, PA

Jack Bally

Completed by

Date

12/3/19

Morrisville, PA

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C/:	31/2019/TUE 10	:42 AM			*		D /	Y M.			-						
						PAX No. P. CO3											
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				(1)	Mensi	t to NJA	C 8:60 ar	nd 12:12	10)	' 1		7	4	· 1			
	Pale of Notification (1)				Name	of Buildin	g Owner	Operato	r (Z)				_/	/!			
Agencies Notified Type Notification						ing Holl	ow, LL(2		7	[1]		1	9 1		WE	
(SCOV)					Street Address 32263 Sandpiper Drive						WAIVE	(M	गुभ	()7	1	- L	
DEP Initial Amended Amended Amended Amended				1	City, S	late Zip C	ode				111			1			
Emergency (including				-		poro, DE				2020							
DOH Justification Concellation						of Contact					Telephone Number 973-632-2340						
M	ame of Facility Where A	Ibala mant la Yan				ILITY INF		IÓN			373-032-2	Trona					
F	lesidence	datement is let	ng Place (3	3)					10000	of Facility	(4)		i in afficiantly	di peri		(i)	
SI	reet Address								4	School (K-1	2) 8 (Other than K-	435					
0	. (5)								V	Other (l.e. p	remmos & stavito	cial bu	idings	, hom	96.		
	ly (5) Voodbury								Squa	re Fest	# of Floore	Т	Bldg. Age				
	sunty (6)				County	Code (7)			130	T	2 69						
Name of Monitoring Firm Hired by Building Owner (8)						USE ONLY	n		Curem Use (Prior if being demolished) Residence								
V	ertex		ASC	M No.		Nama	Name of Absternant Contractor (9) Scose rvices, LLC										
	reet Address						real Address										
_	00 Tumer Industria y, State, Zip Code					100000000000000000000000000000000000000	03 B National Road										
	ston, PA 19014						y, Slaie, Zip Code Ron, PA 19341										
Project Manager for Monitoring Firm						ne No.			Telephone No. License No.								
Dave Turotsy Start Date (10) I Scheduled Co					610-5			872-8		01161	01161						
1/2/20					pletion	Data (11)		Name of OSHA Monitor EMSL									
Occupancy Status During Absternant (Check Only One)								Street		55			-		-		
18	Facility Closed/Vacat Abstement Performe	balem	ent					North .			Si_						
Other - Describe:							_	City, State, Zip Code Cinnaminson, NJ							į		
	ope of Work (Check Al)	That Apply)											_				
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			the state of	\$11.Q1.Q	.				N-Erclosure	ocedure							
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	Ashestos, Corteinina s	ormali Solei	y		Dog	ealption of					Туре						
TO BE ABATED Meintens						A5068 (1.8.	mermal	aining Material (ACM) systems insulation,			Amount (Bpacify	20	7	Enc	5		
In Facility Custodial (12)					auria			cing, VAT, or niscellaneous)			SF or LF)	Restaura	Repair	Епсирвыме	Endowne		
Yes No						NIA						86.	<u>6</u> =		8		
Basement					Х		Pipe	insula	lion		180 LF	180 LF x					
			1														
NAC	ne of Registered Waste	Hauler		-													
	Services, LLC	2 · · · · · · · · · · · · · · · · · · ·			IDEP W		of Was				tegistered Landfill S Fairless Hill:						
	r, Slate						2 Dispos	al Date		City, State							
Ext	on, PA				TBD	~ Date		Morrisvi		PA							

Signature

Title Sr. Project Manager

ASB-41 (R-06-08)

Completed by Jack Bally

Do not use this form for asbestos licensure exempted activities.

Deta 12/3/19

City, State Morrisville, PA