O .	_	NO	TIFIC. (Pur	ATION C	of New of ASBES	Jersey STOS ABA 60 and 12:	TEMEN 120)	T Pennsy	ECEII	VI I		$\overline{\mathcal{M}}$	ár 1
Date of Notification (1) 12/29/11					uilding Ov Tetsuya	wner/Opera a Fujita	ator (2)		JAN - 1 20			111	
	pe Notification		1	treet Add	lress eoak Dri	ive			UAN - 4 20)12		4	
EPA DEP X DOL	Initial Amended Amendment #	1	C	ity, State	, Zip Code		sey 07	079	ASBESTOS CONTRO	l. &		Promoting and	
DOH DCA	Emergency (ir justification) Cancellation		N	lame of C	Contact	a Fujita		- We draw	Totanhane Nimt	er			i,
						RMATION		65 W (4	**** 45 *** 4			1.0	9), 1
Name of Facility Where Aba Residence	tement is Taking	Place (3)						pe of Facility (4					
Street Address 67 Whiteoak Drive						11	×	Other (i.e. pr etc.)	rivate & commercial	buildi	ngs, h		·,
City (5) South Orange, New Je	ersey 07079						11	quare Feet 0,000	# of Floors	55			
County (6) Essex				County Co	ode (7) SE ONLY)		- H	ome	r if being demolishe	·a)		-	
Name of Monitoring Firm His Garden State Environ		wner (8)		ASCM	No.	L	ilich C	Abatement Con orporation	tractor (9)				
Street Address 555 Broad Street, Suit	te K					6		bride Avenu	е				
City, State, Zip Code Glen Rock, New Jerse	ey 07452.				***********	V	ity, Stat Voodla	e, Zip Code and Park, Ne	w Jersey 07424	ļ			
Project Manager for Monitor Bruce Wolf				Telephon 201-65			elephor 73-22	e No. 5-8400	License No 01104	٠.			
Start Date (10) 12/30/11		Schedule 01/04/1		pletion D	ate (11)			OSHA Monitor nvironmental	Labs				
Occupancy Status During A				V			treet Ac	Idress Coute 22 Wes	st	-			
Facility Closed/Vacate Abatement Performed Other – Describe: 7Al	Cutside of Norm	eriod of A al Facility	batem Hours	ent				e, Zip Code New Jersey	07083				
Scope of Work (Check All T									-				
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			enova emoliti				×	Mini-Enclosure	cedure				
								Non-Exempte	d (*) and Non-Friab		Abate		
		7.0	Locati Iormall	C-2007		Descr	iption o	f			Ty		
Location o Asbestos-Containing M TO BE ABAT In Facility (13)	aterial (ACM)	Mai Cust	d Sole intenar odial S (12)	nce/ Staff?	Asbest (i.e.	tos Contair thermal sy surfacin other mis	ning Ma stems ing, VAT	terial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Basemer	nt	Yes	No X	N/A		Clean-u	ip of A	CM	1,000 SF		Х		
										-	-		
				-									
Name of Registered Waste	Hauler		1000	JDEP W		Cubic Ya			Registered Landfill .W.S Landfill				
Lilich Corporation				8724		2 Disposa		City, Sta	1				
City, State Woodland Park, New	Jersey 07424					01/05/1	12	Morris	ville, Pennsylva	nia ate			
Completed by Tatiana Kalenikova		Title Vice	Presi	ident	+0		nature	range		2/29/	11		

Print Form

Facility (4) chool (K-12) ibohapter 8 (4) cher (i e priva c.) Feat O Use (Prior If contract oration e Avenue Code Park, New O A Monitor Inmental La	Other than K-1 to a commerce # of Floors 2 Tolenhane Nu Other than K-1 to a commerce # of Floors 2 Tolenhane Nu United Scommerce # of Floors 2 Tolenhane Nu United Scommerce # of Floors 2 Tolenhane Nu United Scommerce # of Floors 2 Tolenhane Nu # of Floors 2 Tolenhane Nu # of Floors 2 Tolenhane Nu # of Floors 1 Tolenhane Nu # of Floors 2 Tolenhane Nu	OVE mbor 2) lal build 55	dings		:5
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Park, New 00 A Monitor nmental La	License I 01104	STREET, STREET,			
00 A Monitor nmental La	01104				
nmental La	abs				
22 West					
Jersey 07	7083		-		_
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Exampled () and Non-File		Abato	omant /pe	
(ACM)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Claricanie
	1,000 SF		X	-	-
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		ill			
etter in					
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	Name of Re G.R.O.W	Name of Registered Landf G.R.O.W.S Landfill City State Morrisville, Pennsylva	Name of Registered Landfill G.R.O.W.S Landfill City State Morrisville, Pennsylvania	Name of Registered Landfill G.R.O.W.S.Landfill City State Morrisville, Pennsylvania	Name of Registered Landfill G.R.O.W.S.Landfill City State Morrisville, Pennsylvania

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Date of Notification (1)			Name	of Building Owne	r/Operato	(2)		Un IC	11 170	上	
12/29/11				S. EU		74 ST	E MI			_	
Agencies Notified Type Notification	٠,		250,000,000,000	Address			TU III J	AN - Z	20	12	11
□ EPA ☑ Initial				AAU OO	DEC	CHO A	AJE				Loanner of
DEP				tate, Zip Code			1 2	DESTAN AA			1
DOL Amendment a Emergency (i		-	-	rean e	<u>طر ,</u>	77.	10766	CENC.	NIROL	&	
DOH justification)	٠.			of Contact		,	Telepho	ne Numbe	10		
☐ DCA ☐ Cancellation				4s. Rot		SIN (
Name of Facility Where Abatement is Taking	Place (3)	FAC	ILITY INFORMA	TION	Type of Fac	Hilby (A)			Kalamarah	
MS. ROTHSTE		•,		- v						٠.	
Street Address	10					☐ Schoo	l (K-12) apter 8 (Other tha	an K-12\			
360 VANDERIN	ΛΔ	Δ.	1.5				(i.e. private & cor		uilding	s, hom	es,
City (5)	3.7	(10	-			etc.) Square Fee	t # of Floo		Dide	A==	
TEAN ECIL					- 1			ors .	Bldg.	age 94	0
County (6)			County	Code (7)		250	Prior if being de	amoliehed)		77	
BERGEN		- 1		USE ONLY)			RESIDER				
Name of Monitoring Firm Hired by Building O	wner (8)		LASC	M No.	Name		t Contractor (9)	1 40			
January Daniel Control	(0)		7.00		1770000		val Inc				
Street Address						Address	var inc		-		-
*						20124-1-124	h River	S+			1
City, State, Zip Code	-					tate, Zip Cod		<u> </u>		-	-
							ck ,N.J.	076	01	×.	. 1
Project Manager for Monitoring Firm		- 1	Telepho	one No.		one No.		ense No.	01		
				19		-329-7		00388			
Start Date (10)	Scheduk	ed Cor	mpletion	Date (11)	Name	of OSHA Mor	nitor	• . •			-
1/13/12		11	141	112.	Ome	ga Env	ironment	al Se	rvi	ces	
Occupancy Status/During Abatement (Check	Only Or	ie)	/		Street	Address			-		-
☐ Facility Closed/Vacated During Entire Pe	riod of	hater	nent		280	Huyle	er St				
□ Abatement Performed Outside of Norma	Eacility	Hour	S		City, S	tate, Zip Cod	e		1		\dashv
Other - Describe:	IVA	'			Sou	th Hacl	kensack	.N.J.	076	606	
Scope of Work (Check All That Apply)			-		1200			,			\neg
∠2 ≥3 sf or ≥3 lf	B F	enova	ation			Full Conta	ainment with Neg	ative Press	ure		
□ ≥160 sf or ≥260 lf		emoli			2	Mini-Endo	osure			77	
- 4		•				 Glovebag Non-Exen 	Procedure npted (*) and Nor	-Friable Pr	moodu	ma	
	la la	Looot	ian			TON EACH	T Jana No.	T- Habie (- 32.57/10	tement	\Box
Location of		Locati Iormal			escription					уре	
Asbestos-Containing Material (ACM)		d Sole		Asbestos Cor			Amoun	nt		m	
TO BE ABATED In Facility	0.000	intena odial S				insulation,	(Specif	y &	Z Z	Encapsulate	Enclosure
(13)		(12)			acing, VA miscellan		SF or L	Removal	Repair	psu	180
	Yes	No:	N/A	1			1	∞]	ate	100
0.1	100	140	IVA						-	-	\vdash
BASEMENT				THERMAR	1450	ATION	155	LF X			
•							•				
			 						+-	-	\vdash
Name of Registered Waste Hauler		I AI	JDEP W	facto: Cubir	Yards	Non	e of Registered L	andfill			
DJM Transport ,Inc		1 1 2 2 3 3 3	lauler ID		ete	and the same			S 54		, , ,
		2	2393		2/2	5 Cum	berland	Count	y I	ano	1111
City, State	7000				sal Date	City,	State				
South Kearny N.J. 0	/032				114/	Z Ne	wburgh H	PA, 17	7242	2	
Completed by	Title				Signature	1		Date		- 1	
J. MAIORANO	LSt	ıma	tor			MO	ionous	12	1/2	9/1	11



Date of Notification (1) 12/29/2011				of Building g Jin Ma			(2)		- 11	WB		31	200
Lacores I am	pe Notification		Street A					IAN	Company of the second of the	Entr-	///		
× EPA × DEP × DOL	Amended Amendment #			ate, Zip C e, New		07470		JAN .	4 20)12			
X DOH X DCA	Emergency (incligation) Cancellation	uding		f Contact				Teler	phone N	lümber	1	1	
Name of Facility Where Aba	tement is Taking Pl	are (3)	FACI	LITY INF	ORMATI	ON		and the state of t			-	_	
Commercial	toment to Taking I I	ucc (0)					Type of Facility School (K					- 2 1984	
Street Address 129 Market Street			1				× Subchapt	er 8 (Other private &	than K- commer	·12) cial bui	ldings	, hom	ies,
City (5) Paterson				1 *			Square Feet 20,000	# of F	loors		3ldg. /	Age	
County (6) Passaic			County (Code (7) USE ONLY)		Current Use (P Commercial		g demoli	shed)			
Name of Monitoring Firm Hir Westchester Environm		er (8)	ASCN 0012				ontracting, l		9)				
Street Address 307 North Walnut Stre	et					Street A	Address Valley Road	, Suite K					
City, State, Zip Code West Chester, PA 193	80						ate, Zip Code e, New Jers	ey 07470)				-1
Project Manager for Monitori Matthew Abraham	ng Firm		Telephoi (610) 4	ne No. 131-754	5	Telepho (973)	one No. 928-5040		License 00874	No.			
Start Date (10) 01/10/2012		neduled Co /23/2012		Date (11)			f OSHA Monito ontracting, L						
Occupancy Status During Ab	patement (Check Or	nly One)				Street A		C!t - 14					-
Facility Closed/Vacated Abatement Performed C Other – Describe: Work	Outside of Normal F	acility Hou	rs	7PM to 7/	AM	City, Sta	Valley Road ate, Zip Code e, New Jers	- HILLIAND CO.					
Scope of Work (Check All Th	nat Apply)					vvayii	e, ivew seis	ey 0/4/0				-	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		X Renov Demol				×	Full Containr Mini-Enclosu Glovebag Pro Non-Exempte	re ocedure				20	
	T	Is Loca	tion				Non-Exempte	and i	NOII-FII	DIE PIO	Abate	ement	
Location of Asbestos-Containing Mat	terial (ACM)	Norma Used Sol		Ashas		scription o	of iterial (ACM)	A.m.	ount		Ту	ре	
TO BE ABATE In Facility (13)		Maintena Custodial (12)	Staff?	(i.e.	thermal surfac	systems sing, VAT hiscellane	insulation, , or	(Spe	ecify or LF)	Remova	Repair	Encapsulate	Enclosure
		res No	N/A		200							ite	ю
Boiler Roon	n				See	Attache	ed			x			
Name of Registered Waste H	lauler	1000	NJDEP W		Cubic		Name of	Registere	d Landfi	11			-
Service Transport Grou	p, Inc.		Hauler ID 20990	NO.	of Was	te	Minerv	a Enterp	rises,	LLC			
City, State New Castle, Delaware					Disposa TBD	al Date	City, Sta Wayne	te sburg, C	hio				
Completed by Predrag Sarcev		itle /ice Pres	ident		Si	grature		·an	7.0	ate 2/29/2	011		

Date of Notification (1) 12/28/2011				Building C Halsey					7 14 11	W lin				
Agencies Notified Type Notification	on			lsey St.		į			M _ 4	2012	111	1		
DEP Amended Amended Amended		_		e, Zip Coo k, NJ 07			1	LASB	ESTOS CONTI	10L &	Ĺ			
□ DOH		1 100	Name of Robert				Ĺ	70 1545 mg	Telephone	Number				
Name of Facility Where Abatement is Tal	king Place (3)		FACIL	ITY INFO	RMATION	V 82.0		f Facility (4)						-
Market Halsey Urban Renewal		X		-				chool (K-12	•	16.40				
Street Address 165 Halsey St.							× o	ther (i.e. pri	Other than vate & comm		ildin	ıgs,	home	es,
City (5)							Square	c.) Feet	# of Floors		Bld	g. A	ge	-
Newark						- 1	2500		2		70			11.
County (6) Essex County			County C STATE U	ode (7) SE ONLY)		-	Curren	t Use (Prior	if being dem	iolished)		- The - 2-2		
Name of Monitoring Firm Hired by Buildin	ng Owner (8)		ASCM	No.	1000			ement Cont ontracting						
Street Address					100		Address	ant Ave						
City, State, Zip Code		- 1010					tate, Zip							
								07013					1	1
Project Manager for Monitoring Firm			Telephon	e No.			one No 689-62		0109	se No. 19				
Start Date (10) 1/10/2011	1/31/20		pletion D	Date (11)	1	Name o	of OSH	A Monitor						
Occupancy Status During Abatement (Cl	neck Only On	e)			1	Street	Address	5						
Facility Closed/Vacated During Enti Abatement Performed Outside of N Other – Describe: 8:00am - 4:00pm	ormal Facility	batem Hours	ent		_	City, St	tate, Zip	Code						
Scope of Work (Check All That Apply)							9						T.	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolit				×		-Enclosure rebag Proce	nt with Negatedure (*) and Non-				<u>.</u>	
	le le	Locati	on				1 14011	-Exempled	() and Non-	Habie	1900	bate	ment	t
Location of	1	lormal	ly			ription				-	_	Ту	pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma Cust	d Sole intenar odial S (12)	nce/ Staff?		tos Contai thermal s surfacii other mi	ystems	s insulat T, or		Amount (Specify SF or LF	굻	-	Repair	Encapsulate	Enclosure
1450.5	Yes	No	N/A		Concre	+ Diat	Horm		90 SF	x	+			
MER 9.5	X	-		_	Pipe I		100		60 LF	x	+	-		
MER 9.5	×		-		Pipe I				200 LF		+			
Halsey St. Bathroom, 2B Pump Room 2B	X		-	Pir	oe Insula		- 6	na	8 LF	x	+			-
Name of Registered Waste Hauler	^	IN	JDEP W		Cubic Y		<u> </u>		Registered La		-			
Pyramid Contracting Corp			lauler ID 2613	No.	of Wast	е		GROWS						
City, State Clifton, NJ 07013					Disposa	al Date		City, State Morrisvi		*				
Completed by Dimo Golcev	Title V. Pr	eside	ent		Sig	nature		/1(7	Date 12/28	3/20)11		

hood.

Date of Notification (1)	/29/11			Nam	e of Buildir	ng Owner/Operato Trustee	r (2) s of Princeto	on Univ	versity	JAN	_	A 2	012
Agencies Notified	Type Notifi	ication		Stre	et Address								
EPA SCR	Initial			_			. MacMillan	Buildin		ZBFZ	718.7	ONTR	01.0
DEP DOL		ment # <u> </u>		City,	State, Zip		rinceton, NJ	005/17			ICEN.	SING	UL Q
⊠ DOH	☐ Emerge justifica	ency (includ ation)	ing	Nam	e of Contac		iniccion, NJ		hone Num	hor	TV COM	So. erganya	-77-4
DCA	☐ Ćancella			1		Robert Ortego		Megas				•	-3/
				FA	CILITY IN	ORMATION							-
Name of Facility Where	Abatement is	Taking Pla	ce (3)				Type of Facili	ty (4)	V Company				
	Hoyt Cl	hemical	Labo	ratory			☐ School (K- ☑ Subchapte	12)	-than 1/1	2)			
Street Address	W	Villiam S	treet				Other (i.e., homes, et	private & c.)	commerc	ial bui			
City (5)	7		NIT				Square Feet	# of	Floors	B	ldg.		
County (6)	P	rinceton	, NJ	T Cou	intii Codo /	7) (STATE	28,000 Current Use (I	Prior if he	4	shed)		32	_
County (6)	lercer .				E ONLY)	I) (STATE	Current Ose (i		labs	Sileu)			
Name of Monitoring Firm	and a second second second	ilding Owne	r	ASCN	l No.	Name of Abaten	nent Contractor						
	ssociates					Ster	vens Enviror	mental	l Servic	es, I	nc.		
Street Address	Three Ter	rri Lane				Street Address	PO	Box 32	22				
City, State, Zip Code						City, State, Zip C							_
	urlington,	NJ 0801	6				Allentov	vn, NJ	08501				
Project Manager for Mon			0.00	ephone		Telephone No.	-0.000	Lice	nse No.	0040	2		-01-70
Michael		0 1 1 1	-		6-8800		59-9688			049	3		
Start Date (10) 10/10/11		Scheduled	2/10		ate (11)	Name of OSHA		MECS					
Occupancy Status Durin	g Abatement	(Check on			-	Street Address		ILUU					_
☐ Facility Closed/Vacate							PO:	Box 34	1				
☐ Abatement Performed ☑ Other - Describe: ☐			lity Hou	ırs		City, State, Zip C	Crosswic	ks, NJ	08515				
Scope of Work (Check a	Il that apply)		swell-se					odnika kan		SHIP STATE			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emoliti			☐ Mini-End ☐ Gloveba	ntainment with Ne closure ag Procedure empted (*) and N			5 0			
	7	Is	Locati	on		NOII-EX	empled () and iv	T TIADIC	e Flocedu	1	bate	ment	$\overline{}$
		1	Normall d Sole	y		Description of					Тур		
Location o Asbestos-Containing M	laterial (ACM)) Ma	intenar	ice/		Description of os Containing Mat	erial (ACM)		ount	70	Z)	ш	ш
TO BE ABAT IN Facility	ED		Staff?		(i.e.,	thermal systems in surfacing, VAT,		(Spe		Remova	Repair	Encapsulate	Enclosure
(13)			(12)			other miscellaneo		1	,	val	7	sule	sure
		Yes	No	N/A								te	
Ground to 3rd	d Floor		×		floor	tile,sheet floo	or/mastic	26,98	S5 SF	X			
Ground to 3rd	i Floor		×		fume	hood and bas	e cabinets	1,65	50 SF	x			
Exterior R			×		ro	of flashing m	aterial	1,15	0 SF	x			\exists
A Level F	loor		×			dryer door ga			6 SF	×			
Name of Registered Wast	te Hauler		1.0	JDEP V		Cubic Yards	Name of Reg	istered La	indfill				\neg
	e Disposa	1	_ -	lauler ID 172		of Waste 160 CU		T.R.	R.F., In	c.			_
City, State	amilton, N	J 08610				Disposal Date 2/10/12	City, State	Tully	ytown, I	PA	111 77		
Completed By		Title		1000		Signature	·-/	2 444	Date		_		
Mahlon E. Stev	vens	P	rojec	Man	ager	_///				12/29	9/11		_

STEVENS ENVIRONMENTEL SCRVICES INC

Date of Notification (1	9/29/11			Nar	ne of Build	ing Owner/Operato Trustee	or (2) es of Princet	on University	E [W		
Agencies Notified	Type Notificati	on		Stre	eet Address	3	7	112/1	24 dy 210 a -		-	
DEP DOL	✓ Initial ✓ Amended Amendmen			City	, State, Zip	Code	. MacMillar	TU LI JAN	- 4	- 20	12	-
DOH DCA	☐ Emergency justification ☐ Cancellation	n)	ing	Nan	ne of Conta			Telephane Nui	mber	NOTIA	1 0	_
				F.		FORMATION		-w.w. distribution	0.01	- :	-	
Name of Facility When	e Abatement is Tak	king Pla	ce (3)				Type of Faci					-
	Hoyt Chen	nical	Labo	rator	У		School (K	(-12)				
Street Address	W/;11	iam S	troot				Subchapt Other (i.e.	er 8 (Other than K- , private & commer	12) cial bu	ilding	ıs,	
City (5)	VV. 111	Iaili S	пеец				homes, e	tc.) # of Floors		Bldg.	Δοο	
Only (5)	Prin	ceton	, NJ				28,000	4		blug.	32	
County (6)	Mercer			Co	unty Code (E ONLY)	7) (STATE		Prior if being demo	lished)		
Name of Monitoring Fir	m Hired by Building	g Owne	r	ASC	/I No.	Name of Abaten	nent Contractor	(9)				
(8) ATC	Associates Inc	c		0-		Ster	vens Enviro	nmental Servic	ces, l	nc.		
Street Address	Three Terri	Lane				Street Address	PO	Box 322				
City, State, Zip Code	Desilie etc. NII	0001				City, State, Zip C		NII 00501				
	Burlington, NJ	0801					Allento	wn, NJ 08501				
Project Manager for Mo	el Keehn		115000	ephone	86-8800	Telephone No. (609) 25	59-9688	License No.	0049	13		
Start Date (10)		eduled			ate (11)	Name of OSHA			0047			
10/10/11			12/31		,		35	MECS				
Occupancy Status Duri	ing Abatement (Ch	eck onl	y one)			Street Address					2000000	_
☐ Facility Closed/Vaca								Box 341				_
☐ Abatement Performe Control Control		ial Facil	ity Hou	ırs		City, State, Zip C		ks, NJ 08515				
Scope of Work (Check ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	all that apply)		enovat emolitic			☐ Mini-End ☐ Gloveba	losure g Procedure	egative Pressure	ıre		10	,
Location	of	1 N	Location lormally d Solel	,		Description of			1	Abate Typ		
Asbestos-Containing TO BE ABA IN Facility (13)	Material (ACM) TED	Mai C	ntenan ustodia Staff? (12)	ce/	(i.e., i	os Containing Mate thermal systems in surfacing, VAT, other miscellaneou	erial (ACM) sulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A			14 			45.00	te	
Ground to 31			×			tile,sheet floo		26,985 SF	X			
Ground to 3r			×		fume	hood and base	cabinets	1,650 SF	X			
Exterior F		10.	×			of flashing ma		_1,150 SF	X			
A Level F			×			dryer door gas		6 SF	X			
Name of Registered Was				JDEP V auler ID		Cubic Yards of Waste	Name of Reg	is ered Landfill			-C	
	le Disposal		_ _	172	97	160 CU		/ T.R.R.F., In	ic.			_
City, State	amilton, NJ 0	8610				Disposal Date	City State	/ Tullytour !	ο Λ			
Completed By	Title					Sign style	+/	Tullytown, I	Α	-		_
Mahlon E. Ste	7 VLV2100		oject	Man	ager	1/1/			10/10	0/11		
2.41						-///						_

State of New Jersey

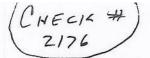
NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:20/N.J.A.C. 7:26-2.12)

Date of N 12/28/11	lotification (1):				wner/Operator (2) Education				W/ [1	
Agencies Notified	Type Notification	on Stree	t Addre	ss:	Data							
	Initial ☐ Amended		State, 7	Lip Code	:			JAN - 4	2012]][
ØEPA □ DEP	Amendment#:		ristown,		27.				2012	įl.a.	-101	
DOL.	☐ Emergency	4	e of Cor	ntact:			Telenhone	e Number:		i		
*	(including	Mike	e Laino				Apple 1	ASSESTUS CONT	10L &	1		
Ø DOH	justification) □ Cancellation	2					1	LICENSIN	3			
□ DCA	Cancellation					00000	TION	Walan.		Sect.		
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	D 1114 W/L A	hatamant is	Toking	Dlaga (3	FACILITY INFO		of Facility (4):				,	A
Name of	Facility Where A	Abatement is	Taking	Place (3	1).							
Street Ad	Elementary Scho	001					hool (K-12) bchapter 8 (Other than K	-12)				
	rest Avenue						her (i.e., private & comm		omes, e	tc.)		
City/ (5):		County (6):	- 1700	Count	y Code (7):							
Morristov		Morristown		07906		Squ	are Feet:	# of Floo	rs:			
1110111010					120	Bld	g. Age					
							rent Use : School					
Name of	Monitoring Firm	Hired by B	uilding	Owner:	ASCM No.:	Nan	ne of Abatement Conti	ractor (9):	WHEN-LINE			
Alpha En	vironmental					-		. *				
•							virocare Enterprise	es, inc				
Street Ad						Stre	et Address:					
3401 Fo	ster Avenue						8 Broadway					
City, Stat	te, Zip Code:					City	, State, Zip Code:					
						Nev	wark, NJ 07104					
	n, NY 112010 lanager for Mon	itarina Eirm			Telephone No.:		phone No.:	License No.:				
	anager for Mon e Ayandeji	nornig i iiii			917-517-1860	1000000	**************************************	01017				
		1			D . (11)		3) 485-4000	01017				
Start Date 01/07/12		01/09/		npletion	Date (11):	2000	ne of OSHA Monitor: eriSci					
Occupancy	y Status During Ab	patement (Che	eck only	one)			et Address:					
Facility	Closed/vacated Du ent Performed Out	aring Entire P	eriod of	Abatemen	t		East 30 th Street			-		-
Describe:	cht i chomica out	side of from		,			v York, New York, 10	0016				
□ Other												
Describe:												
15	Work (Check all th	at apply):					□ Full C	Containment with	Negat	ive Pr	essure	:
$\square \ge 3 \text{ sf } \alpha$	$or \ge 3 \text{ lf}$ $sf \text{ or } \ge 260 \text{ lf}$		3	🔀 Reno	vation		☐ Mini-	Enclosure bag Procedure				
(X) ≥ 160 s	sf or ≥ 260 lf			□ Dem	Olition		Non-E	exempted (*) and !	Non-Fr	iable F	roced	ure
			s Locat	ion							emen	t
	Location of		Norma	lly	D A -1 Com	escript	ion of			1	ype	
Asbestos	-Containing Mat		ed Sole		(i.e. therm	al syst	g Material (ACM) ems insulation,		2.0		m	-
	(ACM)	N	laintena		surf	acing,	VAT, or	Amount	Re	70	nc) ic
TC	BE ABATED		Custod Staff				llaneous)	(Specify	no	Repair	sde	los
	IN Facility		(12)					SF or LF)	Removal	₹	Encapsulat	Enclosure
	(13)	Yes	No	N/A							—	,,
1st and	2nd floor	100	X		Window caulk	ing		25 SF	X			
Name of	Registered Was	te Hauler:		100000000000000000000000000000000000000	EP Waste Hauler ID	No.:	Cubic Yards	Name of Regi			il:	
Newark				4506			of Waste:	Tullytown Re.	. racili	ıy		
City, Sta	ite: NJ 07102 Enviro	ocare	Disp	osal Dat	e:		City, State: Tullytown, PA					
Complet		carc		Title:		Sign	ature:	Date:				
Uju Obio				Presi			Obsereh	12/28/11				

-State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:20/N.J.A.C. 7:26-2.12)

								7.7500 F 72		11-	1	L' In	10° 1	0.0		P. Charles
Date of N	lotification (1):					wner/Operator (2) of Education		25]]	IS (b)		W	E,	m
Agencies	Type Notificat	tion		t Addre		of Education				111	TH					
Notified	() Initial	25/00/0		azel St								JAN	fi	nam	1	
MEPA	☐ Amended				Zip Code);			<i>i</i> ;	15	Yash	UF(II	4	2012	- 1	donate d
DEP	Amendment#:	.		ristowi							1				- 1	
DOL	☐ Emergency		Nam	e of Co	ntact:	W E			Telenh	one l	Num	belselst(100 20	TRAL 6		
	(including	.	Mike	e Laino					5.7			LIC	CENSIN	G		
DOH	justification □ Cancellation		8 0						1	-		A service of the serv	-			
DCA	L Cancellation					E. CH. ITV INF	20344	TION	9.3 Far-		570.00	* - ALME	beaution.	4.00		-
Nome of I	Facility Where	Abotom	nant ia	Tolsins	Dlaga (FACILITY INFO		e of Facility	(A)·		•					
	wn High Schoo		nent is	Taking	g Flace (.	5).		63-00-000 (100 m) (100 m) (100 m) (100 m)	370.20							
Street Ade		01	-					chool (K-12) abchapter 8 (n V 1	2)					
50 Early S								ther (i.e., pri				ouildings l	nomes	etc.)		
City/ (5):		County	y (6):		Coun	y Code (7):		95 905				1000000		,		
Morristo	wn	Morri			07906		Squ	are Feet:				# of Floo	ors:			
							Bld	g. Age								
								rent Use : S	School							
Name of I	Monitoring Fire	m Hired	by B	uilding	Owner:	ASCM No.:		ne of Abate		ntra	ctor (9):				
Alpha En	vironmental		******			EMSL 11506	-		, ,	•	T					
0 11							- Company	virocare I		ises,	, inc					
Street Add							Stre	et Address:								
3401 Fos	ster Avenue						358	8 Broad	wav							
City, State	e, Zip Code:	1255				****	19070303457	, State, Zip								
								wark, NJ								
	n, NY 11210		г.			T.1			Service Attorner Pro-	- 1	I in	nse No.:				
	anager for Mon	nitoring	Firm:			Telephone No.: 917-517-1860	Tele	ephone No.								
Olumide	Ayandeji					917-317-1800		3) 485-4000			010	17				
Start Date 01/07/12	(10):		chedul 1/09/1		npletion	Date (11):	1,00,000	ne of OSHA eriSci	A Monito	or:						
Occupancy	Status During A	batemen	nt (Chec	ck only	one)			et Address:					. 11			
. Facility C	Closed/vacated D	uring En	ntire Pe	riod of A	Abatemen	t	117	East 30th S	Street							
	nt Performed Out	tside of l	Normal	Facility	/ Hours			, State, Zip					100		- 9755	
Describe:							Nev	v York, Ne	w York,	100	16					
□ Other																
Describe:																
Scope of W	ork (Check all th	nat apply	/):				700		or.	10				· .		
□ > 3 efor	r > 3 lf				 Reno	vation						ment with	i Nega	tive Pr	essure)
160 sf	$r \ge 3$ lf for ≥ 260 lf				☐ Demo	olition			\Box Glo	veba	ag Pr	ocedure				
	4			-					Non	ı-Exe	mpte	d (*) and	Non-Fi		roced	
7	ocation of			Locat Normal		De	script	ion of							pe	ι
	Containing Mat	terial		d Sole		Asbestos Cont	aining	Material	(ACM)				-	1	F-	_
A30C3103-1	(ACM)	iciiai		intena		(i.e., therma	ıl syste	ems insula	tion,	- 1			70		E	団
TO	BE ABATED			ustodi				VAT, or			257	mount	Removal	Repair	Encapsulat	Enclosure
	N Facility			Staff	,	otner	misce	llaneous)				pecify	104	pai.	psu	ISO
	(13)			(12)	T						SF	or LF)	2	"	llat	Ire
1st and 2	- d floor		Yes	No	N/A					+	10	CE	N/	+	-	-
1st and 2	na Hoor			X		Window caulking	ng				12	SF	X	-		
													1			
Name of R Newark C	Registered Wast arting	te Haul	er:		NJDE 4506	P Waste Hauler ID	No.:	Cubic Ya of Waste				e of Regi ytown Re			1:	
City, State Newark N	:: J 07102 Enviro	ocare		Dispo	osal Date	:		City, Star Tullytow			V.					
Completed				1	Title:		Signa	ture:				Date:				
Uju Obior					Presid	ent	- S	Ohis	vol.	· S		12/29/11				

Date of Notification (1) December 30, 201	1				Building Holdin			(2) F P E	Che	ck# 428	327			
Agencies Notified	Type Notification			Street Ad	ddress croft W	21/			11 19					*****
EPA DEP DOL	Initial Amended Amendment Emergency		- L	City, Sta Mount	te, Zip Co Laurel I	de)54	JAN -		esticate and				
DOH DCA	justification) Cancellation		100	Name of Stephe	Contact en Rose	man		ASBESTOS (lephone Nu	mner			
N (5 7) 144		DI (0)		FACIL	ITY INFO	ORMATI	ON	LICEN	SING					
Name of Facility Where Vacant Building/Fo		g Place (3)				i dies	20	Type of Facility	litterion 4	S-1	75.50			
Street Address						Rea			er 8 (Oth	er than K-1 & commerc		dings	home	es,
101 Gaither Drive								etc.) Square Feet	310 - 01 - 01 - 01 - 01	f Floors		Ildg. A		
Mount Laurel								2000	1	1110010	10000	0	.9.0	
County (6) Burlington				County C (STATE U	ode (7) ISE ONLY)			Current Use (P Bank	rior if be	ing demolis	hed)			
Name of Monitoring Firm MECS	m Hired by Building (Owner (8)		ASCM	No.			of Abatement Colle de Environme						
Street Address PO Box 341								Address Lippincott A	ve					
City, State, Zip Code Chesterfield, NJ 0	8515							tate, Zip Code e Shade, NJ	08052	<u> </u>				
Project Manager for Mo Bill Weisgarber	nitoring Firm			Telephor 609-29	ne No. 8-3420			one No. 755-0099		License N 00842	lo.			
Start Date (10) 1/12/2012		Scheduled 1/20/201		pletion D	Date (11)		Name EMS	of OSHA Monito L	r					
Occupancy Status Durin	ng Abatement (Chec	k Only One)	3-13-3-3-11-				Address	No. St. Committee					
× Facility Closed/Vac	cated During Entire I	Period of Ab	atem	ent			3700	Haddon Ave						
Other – Describe:				-		_		tmont, New	Jersey	08108				
Scope of Work (Check /	All That Apply)				LI		Įχ	1		Nonethia I				
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			novat moliti	2000 A				Mini-Enclosu Glovebag Pr	re ocedure					
		Τ						Non-Exempt	ed (*) ar	o Non-Friat	JIE PIO	Newson was	ement	
Locatio	n of	. No	ocation	y		Des	cription	of				Ту	ре	
Asbestos-Containing TO BE AB In Fact (13)	g Material (ACM) BATED ility	Custo	tenar	ice/		tos Conta thermal surfac	aining M	laterial (ACM) s insulation, T, or	(amount Specify F or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A									te	(D
Throug				xxx		Sheetro		013			xxx			
Heater F	Room	-		XXX		Flo	oor Tile	-			XXX			
Name of Registered Wa Robinson Waste	ste Hauler		Ha	JDEP Wa auler ID I		Cubic of Was		Name of Grows	575.0	ered Landfil ill	L			
City, State Bellmawr, NJ			117				al Date	City, Sta		A ,				
Completed by William Lynch		Title Owner				Si	ignature	1	Pre	Da	ate 2-30-2	2011		
•							10,00	11/	,			150		



			(, ,			C 8:60 and 12:12		<i>IJ</i>		17	Hay	11)
Date of Notification (1)	29/11			Nam	ne of Build	ing Owner/Operator	14 CONTI	RETINA	1 0	0.0	1	
Agencies Notified	Type Notification	n		Stre	et Addres:	\$ 1		7 0/11	L' L	UIZ	11	
Ø:₽A					15	5 RT, 5	0	. [-	
Ø.DeP	Amended			City.	State, Zip			ASBESTOS O	Outo			=
Ø DOF	Amendment Emergency		-			-FENFIE	LD, NI	S LIGEN	SING	JL &		
□ 00H ·	justification		ig	Nam	e of Conta	icl :	A .	T Talanhone Numb	# NYME	-	and the same	
□ cov .	Cancellation					E BREUN	المنطقة المرا				_	- 1
							16					_
	٠٠.			FA	CILTY IN	FORMATION						1
Name of Facility Where Al	batement is Tak	ing Plac	e (3)				Type of Facility	(4)	8012W-00	907231 Coo		
RES IDEA	UCE:						School (K-1	2)				
Street Address								8 (Other than K-12				
8-10 N	, SHOR	E K	D,				homes, etc.	private & commercia	al build	dings		
City (5)							Square Feet	# of Floors	TBI	dg A	oc	\dashv
Marr	YORA						200			•	•	
County (6)			,	Cou	nty Code	7) (STATE	Current Use (P	nor if being demolis	hed)			-
LOPER	× مرا		<u> </u>	USE	ONLY)	2.1. 7.	VA	CANT				
Name of Monitoring Firm F	lired by Building	Owner		ASCM	No.	Name of Abatem	nent Contractor (9) .	,			
(6) N/	/A				-	1 Ku	FMCO I	UC,				
Street Address			=			Street Address						=
						369	S, SPRUC	€ DUE,				
City, State, Zip Code					-	City, State, Zip C						=-
City, State. Zip Code						Moo	LE SHA.	DE, N.J.	080	5	2	
Project Manager for Monito	vina Firm		Tele	phone	No	Telephone No.		License No.				=
Project Manager for Monito	ang rum		1,510	p one			9-0472		74	*		
2 - 5 - 10	T C.X	duled C		vào:h-	10 (11)	Name of OSHA N				===		=
Start Date (10)	SCH		16 /	1/2		798	EPH KL	EMM				_
Occupancy Status During	Abatement (Che	ck only	one)			Street Address	<u> </u>	1 -				
★ Facility Closed/Vacated	Dunng Entire P	enod of	Abater	ment		369	S, SPA	-ULF & U.C.				_
Abatement Performed C	Dutside of Norma	al Facilit	y Hour	s		City, State, Zip Ci	ode	70 2		Market 1		
[] Other - Describe:						MA	DLE SI	LODE, N.	J ,	08	05	2
Scope of Work (Check all t	that apply)											
	7.0. 503			(%)			tainment with Ne	gative Pressure				
23 st or 23 lt			novation			☐ Mini-End	closure ig Procedure					1
∑ ≥160 st or ≥260 it		K) De	HOIOG			Non-Exe	empted (*) and No	n-Friable Procedu	e			
		Isl	ocatio	n					1	bale	ment	
*1			omally			0				Typ	æ	
Location of	anal (ACM)	F 575 250 500	Solely		Achae	Description of tos Containing Mate	147 TANKSTONE CAN SE	Amount				
Asbestos-Containing Mat TO BE ABATEI			stodia			thermal systems in		(Specify	20	20	5	5
IN Facility	-		Staff?			surfacing, VAT,		SF or LF)	Remova	Repair	130	Enckisate
(13)			(12)			other miscellaneo	(ax		Vá.	1 =	Encapsulate	8
	``	Yes	No	N/A							n,	
CID I.I				χ	1	RANSITE		800 #	X			
SIDIN	<u>u</u>	-		Δ		UN NITTO			+			
										-		-
Name of Registered Waste	Hauler			JOEP V		Cubic Yards	~	stered Landfill				
KLEMCO 3	INC.		H	J 9		of Waste	1 Cim	, C, M.V.	٥.			
O. Cross			-14			Disposal Date	City, State			_		
MAPLES	SHADE	, W	,5	8		.5		DBINE, N	1, 5	, "		
Completed By	Title					Signature	1	Date		/		
JOSEPH KL	A THEOREM	1	111)		Jours	n Kelin	n 12/	29/	11		
COSELLY	- (1			=1=(1===			-			

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 7:26-2.12)

			Name of Buildin	ng Owner/Operator (2				
	Notification	Type	St. Clare's Hea	alth Systems	JAN _	4 20	12	U
					<u></u>		1	Server 1
	()Initial N	otification	City, State, Zip	Code	ASELSTOS (CONTROL	-	- !
	() Cancel	led Notification No.6			LICEN	SING	Ğı,	
	(/			A	Phone	The state of the s	-	
				124 Mary 124 A				
atement is	Taking Place (FACILITY (3)		(0)				
		~/						
			() Subchapter 8	(other than K-12)				
		- W	(X) Other (i.e. p	orivate & commercial I	oldgs., homes, e	etc.		
County (6)		County Code (7)	Sq. Feet 100,00	00 SF No. of Flo	ors: 3			
Morris		(State Use Only)			010. 0			
			Bldg. Age 6	8 yrs				
			Current Ose (pri	or it being demolished	d) Offices			
red by Bldg	j. Owner (8)	ASCM No.		Name of C	Contractor (9)			
estigations	i, Inc	00104	Ta:	Superior	Abatement, Inc			
				rius Sta A				
			2 Heliderson Di	rive, Ste A				
			City State, Zip C	ode .			-	
			West Caldwell,	NJ 07006				
ing Firm	Telephone N	Vumber	Telephone Numb	per	I Linamaa Niver			
			(973) 808-1616	Jei -		iber		
	Cohodulad C	Samulatian Data (44)	ļ			- 1		
	12/31/2012							
patement (Check only one	э)	Street Address	nent, mc.				
During Entir	re Period of Al	patement	2 Henderson Dr	ive, Ste. A				
will be per	rformed while	ours –	01.01.71.0					
be placed	to isolate the	work areas from the	West Caldwell	ode N.I. 07006				- VALUE OF THE
			, , , , , , , , , , , , , , , , , , ,	10 07 000				
at apply)		MINESCAL DISTRICT						
vation								
vation >260 LF A	CM)()SM Pr	oj. (>25<160 SF or >10 <2	260 LF ACM) ()	Minor Proj. (<25 SF a	or <10 I F ACM)			
>260 LF A	essure (X)	oj. (>25<160 SF or >10 <2 Mini-Enclosure (x) Glove	bag Procedure ()	Minor Proj. (<25 SF o	e for Asbestos R	Roof Ren	noval.	
>260 LF Adegative Pre	essure (X) ocation Norma	Mini-Enclosure (x) Glove ally Used Description of	ACM (i.e. thermal	Minor Proj. (<25 SF of Non-friable Procedure Amount (Specify SF	e for Asbestos R	Roof Ren	noval. /pe	
>260 LF Adegative Precining Is L	essure (X)	Mini-Enclosure (x) Glove ally Used Description of systems insula	ACM (i.e. thermal ation, surfacing,	Non-friable Procedure	e for Asbestos R	Roof Ren	noval. /pe	-
>260 LF Adegative Precining Is L	essure (X) ocation Norma ely by Maint./C ff? (12)	Mini-Enclosure (x) Glove ally Used Description of systems insular VAT, or other	bag Procedure () ACM (i.e. thermal ation, surfacing, miscell.)	Non-friable Procedure	e for Asbestos R	Roof Ren	/pe	Enclose
>260 LF Adegative Pre- ning Is L Sole State	essure (X) ocation Norma ely by Maint./C ff? (12)	Mini-Enclosure (x) Glove ally Used Description of systems insula VAT, or other NO X Spray-on Fire	ACM (i.e. thermal ation, surfacing, miscell.)	Non-friable Procedure	or LF) Abate	Roof Ren ement Ty	/pe	Enclos
>260 LF Adegative Pre- ning Is L Sole State	essure (X) ocation Norma ely by Maint./C ff? (12)	Mini-Enclosure (x) Glove ally Used Description of systems insula VAT, or other NO X Spray-on Fire X Pipe and Fitti	bag Procedure () ACM (i.e. thermal ation, surfacing, miscell.) proofing ng Insulation	Amount (Specify SF 20,280 SF 4,000 LF	e for Asbestos R or LF) Abate Rem. X	Roof Ren ement Ty	/pe	Enclos
>260 LF Adegative Pre- ning Is L Sole State	essure (X) ocation Norma ely by Maint./C ff? (12)	Mini-Enclosure (x) Glove ally Used Description of systems insula VAT, or other NO X Spray-on Fire X Pipe and Fitti X VAT & Mastic	bag Procedure () ACM (i.e. thermal ation, surfacing, miscell.) proofing ng Insulation	Amount (Specify SF 20,280 SF 4,000 LF 20,000 SF	e for Asbestos R or LF) Abate Rem. X X	Roof Ren ement Ty	/pe	Enclose
>260 LF Adegative Pre- ning Is L Sole State	essure (X) ocation Norma ely by Maint./C ff? (12)	Mini-Enclosure (x) Glove ally Used Description of systems insula VAT, or other NO X Spray-on Fire X Pipe and Fitti	bag Procedure () ACM (i.e. thermal ation, surfacing, miscell.) proofing ng Insulation	Amount (Specify SF 20,280 SF 4,000 LF	e for Asbestos R or LF) Abate Rem. X	Roof Ren ement Ty	/pe	Enclose
>260 LF Adegative Pre- ning Is L Sole State	essure (X) ocation Norma ely by Maint./C ff? (12) YES	Mini-Enclosure (x) Glove ally Used Custodial NO X Spray-on Fire X Pipe and Fitti X VAT & Mastic X Mastic on Con	bag Procedure () ACM (i.e. thermal ation, surfacing, miscell.) proofing ng Insulation	Amount (Specify SF 20,280 SF 4,000 LF 20,000 SF	e for Asbestos R or LF) Abate Rem. X X	Roof Ren ement Ty	/pe	Enclose
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Amended Notification No. 2: Additional 700 SF of Mastic on Concrete Block

Amended Notification No. 3: Additional 1,750 SF added to the original 250 SF of VAT & Mastic on 1st Floor.

Amended Notification No. 4: Additional 12,000 SF added to the 2,000 SF of VAT & Mastic on 1st Floor.

Amended Notification No. 5: Additional 6,000 SF added to VAT/Mastic on 1st Floor and change to Completion Date from 5/31/2011 to New Completion Date of 12/31/2011

Amended Notification No. 6: Change to Completion Date from 12/31/2011 to New Completion Date of 12/31/2012.

8386

Print Form

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Date of Notification (1) 12/29/2011	*				Building Ov R CHEV	wner/Opera /ROLET	itor (2)	邓		<u> </u>	15		-
Agencies Notified	Type Notification			Street Ad 606 RC	dress OUTE 10				JAN 4	2012		IJ	
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DOH DCA	Emergency (in justification) Cancellation	ncluding		Name of JEFF K	Contact COLLAR	-		* 200 (10 (10 (10 (10 (10 (10 (10 (10 (10 (Telenhine i	Vilmber			
				FACIL	ITY INFOR	RMATION	~ and						
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County (6) ESSEX	,			County C	ode (7) SE ONLY)		Curre	nt Use (Pric	r if being demo	lished)			
Name of Monitoring Firm Hired by Building Owner (8) SKY ENVIRONMENTAL Street Address				ASCM	No.		me of Abatement Contractor (9) NVIRONMENTAL CONTRACTORS INC.						
Street Address 140 BOULEVARD				1		(V) (Table)	eet Address 35 WATCHUNG AVENUE						
City, State, Zip Code MT. LAKES NJ 070		WE				State, Zip Code ST ORANGE NJ 07052							
Project Manager for Mon LEON	itoring Firm			973-769-6946 973				ne No. License No. 00559					
Start Date (10) 01/09/2012		Schedule 01/13/2		npletion D	Date (11)		Name of OSHA Monitor LONG ISALND ANALYTICAL						
Occupancy Status During	Abatement (Check	Only Or	ne)				eet Addre						
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City, State			1,			Disposal D	Date	City, State Tullytov	e vn/ Morrisvill	e, PA			
Linden, NJ Completed by Slawomir Kielczewski Title President				3 10 10 10 10 10 10 10 10 10 10 10 10 10		Signa	ature			Date			

State of New Jersey

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Date of Notification (1)			Name	AI	wner/Operator		1	2.97	14		1		
Agencies Notified / Type Notification □ EPA □ Initial	,			Address Weby	SHOPE	est_	ASBESTOS COI LICENSII	ITROL IG	&	-1	11000		
□ DEP □ Amended			City, S	ate, Zip Cod	9	1	1900 miles (1900 miles)			-	-		
DOL Amendment Emergency			B	ASKING	s Rio	COEMPLI	07920						
DOH justification)			Name	of Contact			Telephone Nu	mber	- CMM3		147		
□ DCA □ Cancellation			4	W33	7								
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Project Manager for Monitoring Firm	and a	1	Telepho	ne No		Hackensack , N.J. 07601 Telephone No. License No.							
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			- / .		Street	Address	- HARLING PARTY - CONTRACTOR -						
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm	Period of	Abaten	ment		Street 280	Address Huyler	- HARLING PARTY - CONTRACTOR -	361					
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm	Period of	Abaten	ment		Street 280 City, S	Address Huyler state, Zip Code	St						
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Date of Notification (1) December 20,2011					vner/Operato national, Ir		t to the second	ngan believe mit state of the population of	escala vila	er week of	er (i '	1	
Agencies Notified	Type Notification			Street A	^{ddress} olumbia T	urnpike		In)E	GEIV	/ E			
EPA DEP DOL	Amended Amendment				te, Zip Code town, Nev	v Jersey 0	7962		JAN - 4 2	012			
☑ DOH DCA	Emergency (i justification) Cancellation	nciuaing		Name of John N	Contact Iojka				Telephone Nu	mber		1	2
Name of Facility Where	Abatement is Taking	Place (3)		FACI	LITY INFOR	MATION	Type	of Facility (4)	SBESTOS CONTR LICENSING	OL &			
Former Colonial Co			ing					THE RESIDENCE OF THE PARTY OF T) desired a secondario	antina -		لـــا	4
Street Address 75 & 150 Kellogg S	treet						×	Subchapter 8	(Other than K-1 vate & commerce	2)		home	es,
City (5) Jersey City				4				re Feet	# of Floors	100	Bldg. A	ge	
County (6) Hudson					Code (7) JSE ONLY)		1 1		if being demolis				
Name of Monitoring Firm	Hired by Building C	wner (8)		ASCM		Name	of Aba	bando l tement Contr	ned Blo	dg,			
Consulting Serivce						Slavco Construction Inc.							
Street Address 26 Lornezo Court	47					Street Address 164 Getty Ave.							
City, State, Zip Code Aberdeen Townshi	p, New Jersey 0	7747					y, State, Zip Code ifton, New Jersey 07011-1802						
Project Manager for Mor Michael Chain	nitoring Firm			Telephor		4 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	hone No. License No. 00724						
Start Date (10)			Completion Date (11) Na				ne of OSHA Monitor						
Occupancy Status Durin				. ~	200		t Addres		7777	9			
	ated During Entire P ned Outside of Norma 7:00AM-3:30PM					City,		ip Code	07011 1900				
Scope of Work (Check A	all That Apply)					- Cint	OH, INC	ew Jersey (07011-1802		<u>]t </u>	_	-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	novat moliti				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure				e		
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TO BE AB In Faci (13)	lity	Custo		0.0000000000000000000000000000000000000		ermal system surfacing, V ther miscella	AT, or	ation,	(Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
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						of Waste BD		TAX COMPANIES CAN INC.	.S Landfill				
City, State Clifton, New Jersey 07011-1802					1000	Disposal Date BD	9	City, State Morrisville	e,Pa. 19067				
Completed by Vivian D. Jurcevic	Ass	sistanc	e	Signatur		1.072 Ju		ate 2/20/1	11				

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Date of Notification (1) December 20,2011			Building Own well Interna			GE			The section of	ıt.		
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X DEP Amended Amendment	S. C. C.			te, Zip Code cown, New	Jersey 07	962	UMII -			- A CERTAIN STA		
DOH Emergency justification) Cancellation	1		Name of John M				ASBESTO	lephone No	umber	أحسد		
			FACIL	LITY INFORM	ATION			cediline pe	P.74		8	
Name of Facility Where Abatement is Takin Former Colonial Concrete & Harsin					- 4	Type of Fac	44		* . *		o April	
Street Address 75 & 150 Kellogg Street								ner than K- & commer		dings,	home	es,
City (5) Jersey City	±:	******		2		Square Feet 13,100	1 # 0	of Floors	5	ldg. A	ge	
County (6) Hudson			County C	Code (7) ISE ONLY)		Current Use		-				
Name of Monitoring Firm Hired by Building Consulting Serivces of		ASCM	No.		Abano of Abatement co Constru	Contracto	r (9)	•				
Street Address 26 Lornezo Court			9.		et Address 4 Getty Ave.							
City, State, Zip Code Aberdeen Township, New Jersey (4 10	4.3		State, Zip Code con, New Jersey 07011-1802							
Project Manager for Monitoring Firm Michael Chain			Telephone No. Telep			none No. 478-4848	License No.					
Start Date (10)	Schedule		npletion [Date (11)		of OSHA Mor			7			
Occupancy Status During Abatement (Chec			100			Address			******	-	-	
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm	Period of A	batem				Getty Ave. tate, Zip Code	Э			1 5		- 2
Other – Describe: 7:00AM-3:30PM					Clifto	on, New Je	rsey 070	11-1802			294	
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	1				· [>			nd Non-Fria				
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Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	d Sole ntenar odial S (12)	nce/ Staff?	(i.e. ther				Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure	
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Colonial Concrete			X		Vat	hing		500 SF	X			
Colonial Concrete		X		oof & Flas			105SF	x			-	
Harsimus Bldg. Rm#1, Roof	1	X			of & Mastic		050SF	X				
Name of Registered Waste Hauler Interstate Waste Services (Non-Fria	Н	JDEP Wauler ID 3571		ibic Yards Waste BD	s Name of Registered Landfill Eagle Sanitation							
City, State Jersey City, NJ 07306				Di:	sposal Date BD		State th Berge	n, NJ				
Completed by Title Vivian D. Jurcevic Admin. As				e	Signature	an A.)a.		Date 12/20/1	11		77-5%

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Date of Notification (1	1/29/11				ilding Owner/Operat			2012			7
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DOH .	justification			Name of Cor	ntact					5-171 D.F.	
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Name of Facility Where	e Abatement is Ta	aking Plac	ce (3)			Type of Faci	lity (4)				
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Street Address	6 CENT	RAL	LUE			Other (i.e	ter 8 (Other than K- ., private & commer	12) cial bu	uilding	js,	
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LAPE	MAY			USE ONLY)		Current Use	(Prior if being demo	lished)		
Name of Monitoring Firm (8)	n Hired by Buildin	ng Owner	AS	SCM No.	Name of Abater	ment Contractor	(9)				
) A					FMCO I	NE,				
Street Address					Street Address	S,SPRU	,= 1UE.				
City, State, Zip Code					City, State, Zip C	Code					
Design Many Control						PLE SHA	DEINJ	, 08	05	Ž	
Project Manager for Mo	nitoring Firm		l gleph	one No.	Telephone No.	License No. 00444					
Start Date (10)	Sch	neduled C	ompletion	Date (11)	Name of OSHA	Monitor			===	_	=
Occupancy Status Durin		1/17	/	·		EPH K	LEMM				
Facility Closed/Vacate	ed During Entire I	Period of	Abateme	nt	Street Address	S, SP	nous duc.				
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REMEMBER — MAIL IN HA	· Pinterment All	remark to NJAC	8:50-7 and 12:120-7	2006	10 L – 10 L	JA'	Y	-	
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Date of Notification	on (1)		Name of Bu	ildir	ng Owner/Operato	r (2)	GEII	7 B	Freeze	- I	
12/7/11 -Amer	nded 12/28		Tetsuy				6611	y E		1.	
Agencies Notified	Type Notific	ation	Street Add	ress		11 111			11 1 11 1		
[X]EPA	[X]Initial	nation			ak Drive		JAN - 4 20)12	IJj	Company Company	
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Name of Facility Wh Private	ere Abatement	is Takin	g Place (3	3)		Type of Faci	L (K-12)				1
Street Address 67 Whiteoak	Drive					[x]Other	apter 8 (Othe (i.e., priva buildings, h	ate & c	omme	r-	
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						Current Use Residen		eing de	moli	shec	1)
Name of Monitoring (Owner (8) N/A	Firm hired by	Building	ASCM No.			tement Contractor (9) MANAGEMENT, Inc.					
Street Address			07		Street Addres		and the second s		-		
					86 Chris	stopher St.					
City, State, Zip Co	de		a		City, State, Montclai	Zip Code	042				
Project Manager for	Monitoring Fi	rm Tele	ephone Numb	per	Telephone Number (973) 744		I	icense		ber	
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city, State Montclair, NJ	07042				sposal Date 12/21/11	City, State Morrisvi	lle, PA	1906	7		
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Tare of Notification (12	1/29/11			lame of Byild	ing Owner/Operator 1727/477=C)	1 Cont	WOAN NO	2012			
Ager Jes Notified X DF X DOC	Type: Notificati	1#	- 0	treet Addres	5 RT, 5	0	ASEESTOS CUMIT	UL &			
= 00m = 0.2.	Emergency justification	1)		arne of Conta		A Complete	-Telephone:Nilast	Wet and	- Charles	emonstered .	
Name of Facility When	e Abatement is Tak	ing Place	(3)	FACILITY IN	FORMATION	Type of Facility	(4)				
RESIDO 2650	ENCE	1 1 1	τ				8 (Other than K-12 Invate & commercia		mgs.		
	N CITY					Square Feet	# of Floors	Bis	ig A	yr	
N. 181	May			County Code USE ONLY)	(7) (STATE	Current Use (P	nor if being demolis	nest:			
Turner of Monitoring Fir) Owner	AS	CM No	1	Pent Contractor (9					
meet Address				3695,5 PRUCE DUE.						PPROPERTY COLORS	
r. State Zip Code					City, State, Zip C	000e	ST2000, C, N, 5 CO412				
The event Alamager for the	onitoring Firm		Telepho	one No	Telephone No 856 - 77	79-0472 License No 20444					
11.9/	,		ompletion	Date (11) 2	Name of OSHA N	JOHN KL	EMM				
X Facility Closed Vaca Aparement Performe	ated During Entire F	Penoa of A	batemer	าเ	Street Address 3 6 9 City, State, Zip C		10cf 200.		10,000		
Other Geschick	en Obtaide of North	ar racinty			MA	APLE SI	10DE, N.	5.	28	. S 2	
ODE of WORK (Check Tight stion givit ▼ 2160 stion 2200 tr	all (nat apply)	☐ Ren	iovation notition		☐ Mini-End	ag Procedure	gative Pressure on-Friable Procedu	n.			
		. Nor	mally					1	Látei 171		
Is Locate Normally Used Solet Maintenan Custode Staff? (12)				by by Description of Asbestos Containing Material (ACM) Amount (i.e., thermal systems insulation, (Specify					Xr, L	Charles and	
Yes No				/A	Onic in		2500 p	×			
SIDING					RANSITE						
										ļ	
Turne of Respisions Ad	JNC ,		Haule	P Waste II No. 904	Cubic Yards of Waste		stered Landfill	Δ.			
	SNADE	- , N	,) -		Disposal Date	City, State	DSINE, N	/, J			
Jacob V	/ L = _ Tid	e V	IP		Signature	er Kelin	n 12/	29	11		

Date of Notification (1)	. 11	N	lame of	Building (Owner/	Operator (2	2)		nit			W	E	170
Agencies Notified Type Notification	- 11	- 5	Street Ac	ddress		pace		Vil.	en	7				H
EPA	interior				10	71	Ç	oun	ty	Road	15	23	3	
DEP Amended Amendment #		C	ity, Sta	te, Zip Co	de L	10.00	1				0.0	0	7 7	west 1
Emergency (ir		- /a N	lame of	Contact	S. L.	lem	ins	STOP	Tele	ephone Nur	nber R	01 2	12	
DOH justification) Cancellation			-	ces	Po	2900	0		ora.	Tines	tar	OL &		-
Name of Facility Where Abatement is Taking	Place (3)			LITY 10 FC	RMAT	IOM)		of Facility	(4)	Strate of the state of				_=
a . O .	Fare	200				ı		School (K-						
Street Address			_	Å			S	Subchapter	r 8 (Othe	er than K-1: & commerci		linge	homo	
	wic	K	Ko	<u>nad</u>			e	tc.)					esultsesee	.5,
City (5) (1) hitalonica	/	١٦.	7	000	388		Squar	e Feet	# 01	Floors	В	ldg. A	ge () †	
County (6)				Code (7)	300		Currer	nt Use (Pri	or if bei	ng demolisi	ned)	0	01	-
Hunterdon		(JSE ONLY)	_			-	RN					
Name of Monitoring Firm Hired by Building O EPC TECHNOLOGIES, INC	wner (8)		ASCM N/A	l No.				ement Co						
Street Address						Street A								
P.O. BOX 337 City, State, Zip Code				%):		P.O. E		->	***************************************					
NEW EGYPT, NJ 08533								PT, NJ (08533					
Project Manager for Monitoring Firm STEVE SCHENKER	0		elephor 609-75	ne No. 58-3365		Telepho 609-7				License N 00394	0.			
() 0010	Scheduled	Com	pletion [Date (11)				A Monitor		NC				
Occupancy Status During Abatement (Check	Only One	Ω	Ч,	901	2_	Street A		HNOLOG	51E3, 1					
Facility Closed/Vacated During Entire P			ent			P.O. E								
Abatement Performed Outside of Norma Other – Describe:	al Facility I	Hours			_	City, Sta NEW		p Code PT, NJ (08533					
Scope of Work (Check All That Apply)		•									177.5		-	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	average .	enovat emolitic				E	Min Glo	i-Enclosur vebag Pro	e cedure	Negative F				
	T						Nor	n-Exempte	d (*) an	d Non-Friat		28 m. m. 1000	ment	
I washing of		ocation or mally			D.	escription of	of					Ту		
Location of Asbestos-Containing Material (ACM)	Used	Solel	y by		os Cor	ntaining Ma	aterial		1000	mount	_		m	m
TO BE ABATED In Facility	Custo	dial S		(i.e.	surf	al systems acing, VAT	, or	tion,		Specify or LF)	Remova	Repair	caps	Enclosure
(13)	-	(12)			other	miscellane	eous)				oval	ar.	Encapsulate	sure
	Yes	No	N/A		-	<u> </u>						_	,,,	
Old Barn	-		X	Sid	ing	Shi	<u>isle</u>	5	_4	<u>00 Si</u>	X		_	
						M						-		
	-										-		-	
Name of Registered Waste Hauler		N.	JDEP W	/aste	Cubi	c Yards		Name of	Registe	ered Landfil	1	L		T _i
EPC TECHNOLOGIES, INC			auler ID 000	No.	of W	aste ,-	3	WAST	E MAN	NAGEME	NT O	F PA		
City, State NEW EGYPT, NJ 08533						osal Date	7	City, Sta		E, PA				
Completed by	Title		-MATO-2			Signature		10	1	A	ate	_		
STEVE SCHENKER	PRES	IDEN	IT.			2	lec.	10c	he	h	12	3	3-	11

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						The roperator	Lines							
2/29/2011	T Marrie Man			k Fujii eet Add		1 1		14:1	4 0040					1
Agency Notified	Type Notification Initial Amended		877	Norga	ate Drive e, Zip Coo	e de		J JAN	- 4 2012		-			-
DEP NOL	Amendment #		Rid	gewoo	od, NJ 0	7450		ASBESTO:	S CONTROL &				_	-
	Emergency (including justification)		Na	me of (Contact		The same of	LIC	ETelephone Num	ber				
MODOH DCA	☐ Cancellation		Ric	k Fuji	i	1 1	17 100	Them was being						-
			F	ACILIT	Y INFOR	RMAT10N					, M			
Name of Facility Where	Abatement is Taking Place	(3)					00	pe of Facility (School (K-12) Subchapter 8	4) (Other than K-1 2 vate & commercia) I building:	s,			
							a	homes, etc.)						
77 Norgate Drive							Sq	uare Feet	# of Floors	Bldg. A	\ge			
City (5)						7.	50	SF						
Ridgewood, NJ 07450 County (6)				ounty C	ode (7) (STATE USE		Irrent Use (Pr	or if being demol	ished)		10.41		
Bergen	11 D 11 II - D 000000	1 10	SCM N	0		Name of Abatem	patement Contractor (9)							
Name of Monitoring Firm Hired by Building Owner 8) ENVIYO V 500				o. 	F	LICI CORP								_
Street Address						Street Address	SS							
							Y STREET						-	
0-21 WAGARAW ROAD City, State, Zip Code						City, State, Zip								
FAIR LAWN, NJ 074	110					PASSAIC, NJ	I I I I I I I I I I I I I I I I I I I						_	
Project Managerfor Mo	nitoring Firm	200000000000000000000000000000000000000	cpilotio ital			Telephone No.	No. License No.							
WILLY MORALES			3-636-2008 973-614-1266											-
Start Date (10)	Scheduled Cor	npletio	n Date	(1 1)			IVIO	intoi						
01/04/2012	01/04/2012					RICI CORP Street Address								_
Occupancy Status Duri	ng Abatement (Check only	one)					carr	DEET						
D E - Wh. ClassoMaca	ted During Entire Period of	Abate	ment		4	41 LIBERTY S								
☐ Abatement Performe ☐ Other - Describe	ed Outside of Normal Facili	ity Hou	rs			PASSAIC, NJ					-			_
Scope of Work (Check -: 3 sf or ~: 3 lf -: 1 60 sf or ~: 260 lf	all that apply)			⊠ Reno □ Dem	****	☐ Min	i-Er	iclosure	Negative Pressu					_
											A		mer pe	ıt
Asbestos-Contain TO BE IN I	ation of ning Material (ACM) <u>ABATED</u> Facility (13)	Use Mai	Location Loc	y ly by nce/ al	Asbes (i.e.	Description stos Containing N , thermal system surfacing, V/ other miscella	Mate ns in AT,	sulation, or	Amoun (Specif SF or Lf	y	Removal		Encapsulate	Eliciosdie
		Yes	No	N/A			_		FOCE		x	-		
Attic				x	PIPE II	NSULATION			50 SF		^	-		
					-									
Name of Registered Waste Hauter			JDEP V No. 051	Waste I	l Hauler	Cubic Yards of Waste	of	G.R.O.W.S.	stered Landfill					
RICI CORP		129	031			Disposal Date		City, State	- 1					
City, State						TBD		MORRISVI	LLE, PA					_
PASSAIC, NJ						Signature /	,	7 -	Dan	Date				
Completed by	DDECIDEN	Т				Ki	2	en y	-	12/29/	201	1		_
RISTO TRAJKOV ASB-41	ISTO TRAJKOV PRESIDENT			m for a	sbestos I	icensure exempt	ed a	activities.						

Check 1252

ata of Notification	(1)		Na	me of	f Building	ow Ow	ner / Operator (2										
Jale of Notification (1)					irak				IAN A	0010	1 111						
			ddress			13 IU UI	JAN - 4	2012									
gencies Notified	Type Notifica	Lion			rray Av	enu	е :										
⊠ EPA			Cit	v Sta	ate & Zip	Cod	е	ACDICATOR OFFICE A									
□ DEP □ DEP		ded			on, NJ			ASBESTOS CONTROL & LICENSING elephone Number									
□ DOL	. P. F. S. B.				f Contact	t			LIGHNOI	Telephone	Num	per .					
□ DOH	gency			Sirak	•						6-						
DCA	☐ Cano	ellation						THE PROPERTY OF THE PARTY OF TH		C vertice	- Andrew Street	- 44/6					
				FACI	LITY IN	IFOF	RMATION				- Magazana	-					
L	Iboro Abateme	ent is Taking Pla	ce (3)				Type of Facility	(4)				1					
Name of Facility Where Abatement is Taking Place (3) Residence							School (K-12) Subchapter 8 (Other than K-12)										
Street Address							Subchapter	8 (Other than	K-12)	nas homes	etc.)						
EVER AMERICAN CONTRACTOR CONTRACTOR							Other (i.e. private & commercial buildings, homes, etc.)										
116 Murray Ave	nue						Square Feet	# of Floor	S	Bldg. Age	_						
		County (6)	Cour	County Code (7)			1500		1	5	0						
City (5)		County (6)	Cour	County come (1)			Current Use (Pr	Jse (Prior if being demolished)									
Hamilton		Mercer					Residence										
				20022	1400141	la.	Name of Abatement Contractor (9)										
Name of Monitorin	g Firm Hired b	y Building Own	er (8)		ASCM N	VO.	ALDUA FNVI	ALPHA ENVIRONMENTAL									
March March 1995							Street Address				****						
Street Address							2129 Rt 33										
							City State & 7i	n Code									
City, State & Zip C	Code						City, State & Zip Code Hamilton, NJ										
					Nimbor		Telephone Nun	umber License Number									
Project Manager f	or Monitoring	Firm	Teleph	none	Number		215-295-1004			01091							
				1 17	(4.4)		Name of OSHA Monitor										
Scheduled Start Date (10) Scheduled Completion Date (11)							EMSL Analyt										
1/04/2012 1/05/2011							Street Address			and the second s							
Occupancy Status	s During Abate	ement (Check or	nly one)			107 Haddon Avenue										
Encility C	loced/Vacated	During Entire F	ellog c	A LUC	temeni		City, State & Z				04110.47						
Abatemer	nt Performed (Outside of Norma	al Hou	ırs –	am to 3	pm											
Describe:							Westmont, N	17 00 100									
☐ Facility O	ccupied Durin	g Abatement	120000	amps and the													
Scope of Work (C	Check all that a	apply)					ſ	T Full Con	tainment wit	h Negative	Pressi	ure					
Scope of Work (c	SHOOK CILL STORY	11 27					==	Mini-End	losure								
☐ ≥3 sf or ≥	:3 If		\boxtimes		novation		<u> </u>	es	able Precedure								
≥160 sf ≥				Der	nolition		l										
M = 100 31 =	.200							Non-Exe		Non-Friable	1000	nt Type					
			Is	Locat	ion	-	Description of										
	Location of	ina			Used		Asbestos-Cont	aining	(Specify SF or LF)			m ,					
Asb	estos-Contain Material (ACM)	ing		olely			Material (AC	(M)	SF OF LF)			ncapsulat					
	O BE ABATE		Main	Maintenance or			(i.e., thermal sy	stems	Remova			sq					
1	in Facility	_	Cust		Staff?	i	nsulation, surfac or other miscella	ing, vAi		Va.	Repair	Encapsulate					
		(12)			or other miscella	illeous)				Œ.							
	(13)		Yes	No	N/A				130sf			TIT					
Vitabor		19					VAT		13031			_ _					
Kitchen				100000				N (D)	intered Land	Hfill							
Name of Registe	ared Waste Ha	auler			JDEP W	100000000000000000000000000000000000000	Cubic Yards	Name of Reg	istereu Lant	ATTITIS .							
Name of Registe	SIEU WASIE IIE			17/1/16	auler ID	No.	of Waste	C	dfill								
ALPHA ENVIRONMENTAL 003					033330		1	Grows Landfill									
	CIGIGICIALY						Disposal Date	City, State									
City, State																	
Hamilton M.I							1/10/2011	Morrisville	FA	Date							
Hamilton, NJ					itle	-11/25/5-5	Signature										
Completed By (Print or Type)					M		Rod Richardson	Rad Richardson				12/26/11					
Rod Richards	5011							25.00									

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

Print Form

Date of Notification (1) 30 December 2011		-	Name of	Building (Owner/O	perator ((2)	JAN	1 - 4 20	12	الما			
Agencies Notified Type Notification	1	Street Address Carlton Street, P.O. Box 4262 ASBESTOS CONTROL &									The second second second			
EPA Initial DEP X Amended Amendment		City, Sta	te, Zip Co	de	9	FICENSING								
➤ DOH Emergency (Emergency (including justification) Cancellation					3.	Telephone Number							
	51 (6)		FACI	LITY INFO	RMATIC	NC	T 1 F-	-1116 · /4\						
Name of Facility Where Abatement is Takin Haddonfield Substation Street Address							Subcl	ol (K-12) napter 8 (C	Other than K-		linas	home		
Washington Avenue & Kings Highwan	vay						etc.)						<u> </u>	
City (5) Haddonfield							Square Fe N/A	1	f of Floors N/A	Bldg. Age 43				
County (6) Camden				Code (7) JSE ONLY)		-	Current Use (Prior if being demolished) Electrical Substation Manhole							
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCM	No.			ame of Abatement Contractor (9) flattiola Services, LLC							
Street Address				-		Address B Lucon	Road							
City, State, Zip Code				ate, Zip Co ack, PA										
Project Manager for Monitoring Firm	1	Telephone No.			Telephone No. License No. 01077									
Start Date (10) 13 January 2012	Com	The state of the s	Date (11)		1.0700000000000000000000000000000000000	me of OSHA Monitor attiola Services, LLC								
Occupancy Status During Abatement (Chec							Address B Lucon	Road						
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other – Describe:	Hours	ent		_		ity, State, Zip Code Skippack, PA 19474								
Scope of Work (Check All That Apply)		THE WAR												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	enova emolit				××	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
	1	-			-	Non-Exempted (*) and Non-Friable Procedure Abatement							-	
	ocati ormal			-	escription of ntaining Material (ACM) al systems insulation, acing, VAT, or miscellaneous)			Amount (Specify SF or LF)		Туре				
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Sole ntenar odial S (12)	ly by nce/		tos Cont thermal surfac						Repair	Encapsulate	Enclosure		
Manhole A	Yes	NO	INA	Wran ir	nsulatio	on on e	electric ca	ble	24 LF	x				
Manhole B					ation on electric cable			24 LF	х					
Name of Registered Waste Hauler	N						Name of Registered Landfill							
American Disposal Systems, Inc.	120,000	Hauler ID No. of W SW2069			JP Mascaro - Pioneer Crossin				sing					
City, State PO Box 348, Lumberton, NJ 08048		Disposa				c City, State 727 Red Lane Rd, Birdsboro, PA								
Completed by Caroline M. Harper	Title Project Manager					Signature Date 12/30/11								

State of New Jersey

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

		01-2			Name of I	Building C	wner/Ope	rator (2)	- Making Anderson	arms in	1	ci -	0			
Date of Notification (1) December 30, 2011					Name of Building Owner/Operator (2) Ralco Builders E E FONTE 4895											
			Notification			Street Address 392 Pine Avenue										
[] DEP [x] DOL	led Notification Iment # ency (including			City, State, Zip Code Manasquan, NJ 08736												
[X] DOH [] DCA	cation) llation	ation)			Name of Contact Neil Ducharme			e Telephone Number,								
				EACH	ITV IX	NFORM	ATION	- i		and the same of th						
Name of Facility When	A hatamant is Taking	Dlace (3)		FACII		NFORM	ATION	Type of	Facility (4)	and the second second second			- Parant			
	Residence	Tiace (5)							[]	School (k-12) Subchapter 8 (oth	er than	k12)				
Street Address	140 Ocean Bay Bl	vd.							[x]	Other (i.e., private homes, etc.)	e & cor	nmerci	al build	lings,		
City	County (6)				County Code (7) (STATE USE ONLY)				200 sf	# of Floors	Bldg	Age 6	0			
Toms Riv	ver	Ocean	Ocean						t Use (Prior if Residen	being demolishd) ce						
	irm Hired by Building	Owner (8	3)		ASCM No).	Name of	Abateme	nt Contractor		Inc.					
Street Address	N/A						Street A	idress		oute 9, Unit 61						
City, State, Zip Code							City, Sta	te, Zip Co	ode		007	55 10	71			
							Telepho	ne Numbe		iver, New Jerse License N		33-12	5/1			
1 Toject Wanager 10. Monteoning					n Data /1	1)	00624									
Scheduled Start Date (10) Scheduled Complement 01/02/12 01/03/12					E.M.S.L. Analytical											
Occupancy Status Dur	ring Abatement (Check Facility Closed/Vacate	only one	e) Entire Perio	d of Aba	tement		Street A	ddress	1056 St	elton Road						
Ĺĺ	Abatement Performed	Outside o	of Normal Fa	cility Ho	ours		City, Sta	ate, Zip C	ode Piscatav	way, New Jerse	y 088	54				
Scope of Work (Chec	k all that apply)				-		[]			with Negative Pre	ssure					
0.00					[] Mini-Enclosure											
[] [x]	>3 sf or ≥3 lf ≥160 sf or ≥260 lf		F 1	Renovat Demolit			[x]			and Non-Friable	Procedi	ıre _				
[,,]		Ī									Abat	ement	Туре			
			Is Location		Descript						R	R	Е	Е		
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility			Normally used Solely by Maintenance/Custodial Staff				sbestos-Containing Material (ACM)			Amount (Specify SF or LF)	E	E P	N C	N C		
						al (i.e., thermainsulation,					М	A	Α	L		
											v	I R	PS	OS		
	13)		(12)			VA					A	K	U	U		
			**************************************			Asbestos siding					L		L E	R E		
			YES NO N/A							1150 sf	X		E	L		
Exterior		-	X		ASDE	Stos Sidii	15									
			INDER III	11 1	ID Me	Cubia V	ards of Wa	ste N	ame of Regist	ered Landfill	1		<u> </u>			
Name of Registered Y Guardia	Waste Hauler n Contracting, Inc.		NJDEP Waste 20)223		3			T.R.R.F.							
City, State	20000 1000			Dispos 01/04	sal Date		City, S Tully	town.	ennsylvani	a /						
Completed by (Print or Type) Title					Signat	ture	clad	04	0 -	1	Date 12/2	: 30/11				
Nicholas	s Fernicola	Proje	cu ivianage	1	1	Vii	1 1/ 10/	1/								

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