

## NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1) December 31, 2012		Name of Building Owner/Operator (2) Eisco	
Agencies Notified <input checked="" type="checkbox"/> EPA <input type="checkbox"/> DEP <input checked="" type="checkbox"/> DOL <input checked="" type="checkbox"/> DOH <input type="checkbox"/> DCA	Type of Notification <input type="checkbox"/> Initial Notification <input type="checkbox"/> Amended Notification Amendment # _____ <input checked="" type="checkbox"/> Emergency (including justification) <input type="checkbox"/> Cancellation	Street Address 43 New Brunswick Avenue, Unit 5 City, State, Zip Code Hopelawn, NJ 08861 Name of Contact Kristen Wolansky Telephone Number _____	

## FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3) Residence			Type of Facility (4) <input type="checkbox"/> School (K-12) <input type="checkbox"/> Subchapter 8 (other than K12) <input type="checkbox"/> Other (i.e., private & commercial buildings, homes, etc.)		
Street Address 134 Jackson Street			Square feet 1500 sf		
City South River	County (6) Middlesex	County Code (7) (STATE USE ONLY)	# of Floors 2	Bldg. Age 80	
Name of Monitoring Firm Hired by Building Owner (8) Guardian Contracting, Inc.			Name of Abatement Contractor (9) Guardian Contracting, Inc.		
Street Address 1889 Rte. 9, Unit 61			Street Address 1889 Route 9, Unit 61		
City, State, Zip Code Toms River, NJ 08755			City, State, Zip Code Toms River, New Jersey 08755-1271		
Project Manager for Monitoring Firm Nicholas Fernicola		Telephone Number 732-349-9932	Telephone Number 732-349-9932		License Number 00624
Scheduled Start Date (10) 1/2/13		Scheduled Completion Date (11) 1/3/13		Name of OSHA Monitor E.M.S.L. Analytical	
Occupancy Status During Abatement (Check only one) <input checked="" type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input type="checkbox"/> Abatement Performed Outside of Normal Facility Hours <input type="checkbox"/> Other - Describe _____			Street Address 1056 Stelton Road		
			City, State, Zip Code Piscataway, New Jersey 08854		
Scope of Work (Check all that apply)					
<input checked="" type="checkbox"/> >3 sf or ≥3 lf		<input type="checkbox"/> Renovation		<input type="checkbox"/> Full Containment with Negative Pressure	
<input type="checkbox"/> ≥160 sf or ≥260 lf		<input checked="" type="checkbox"/> Demolition		<input type="checkbox"/> Mini-Enclosure	
				<input checked="" type="checkbox"/> Glovebag Procedure	
				<input type="checkbox"/> Non-Exempted (*) and Non-Friable Procedure	

Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13)	Is Location Normally used Solely by Maintenance/Custodial Staff (12)			Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	YES	NO	N/A			R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E
Basement		X		Asbestos pipe insulation	220 lf	X			
Basement		X		Window glazing	6 windows				

Name of Registered Waste Hauler Guardian Contracting, Inc.	NJDEP Waste Hauler ID No. 20223	Cubic Yards of Waste 3	Name of Registered Landfill T.R.R.F.
City, State Toms River, New Jersey	Disposal Date 1/4/13	City, State Tullytown, Pennsylvania	
Completed by (Print or Type) Nicholas Fernicola	Title Project Manager	Signature <i>Nicholas Fernicola</i>	Date 12/31/2012

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

B &amp; G Proj # 2012-240

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

Check # 5679

Date of Notification (1) December 29, 2012		Name of Building Owner/Operator (2) John & Patricia Custer							
Agencies Notified	Type Notification	Street Address 39 Tuscan Road							
<input type="checkbox"/> EPA <input type="checkbox"/> DEP <input type="checkbox"/> DOL  <input type="checkbox"/> DOH <input type="checkbox"/> DCA	<input type="checkbox"/> Initial <input type="checkbox"/> Amended Amendment # _____ <input type="checkbox"/> Emergency (including justification) <input type="checkbox"/> Cancellation	City, State, Zip Code Maplewood, NJ 07040							
		Name of Contact John & Patricia Custer							
		Telephone Number							
<b>FACILITY INFORMATION</b>									
Name of Facility Where Abatement is Taking Place (3) John & Patricia Custer		Type of Facility (4)							
Street Address 39 Tuscan Road		<input type="checkbox"/> School (K-12) <input type="checkbox"/> Subchapter 8 (Other than K-12) <input checked="" type="checkbox"/> Other (i.e. private & commercial buildings, homes, etc.)							
City (5) Maplewood		Square Feet	# of Floors						
County (6) Essex		County Code (7) (STATE USE ONLY) _____	Bldg. Age						
Name of Monitoring Firm Hired by Building Owner (8) n/a		ASCM No.	Name of Abatement Contractor (9) B & G Restoration, Inc.						
Street Address		Street Address 105 Ryerson Road							
City, State, Zip Code		City, State, Zip Code Lincoln Park, NJ 07035							
Project Manager for Monitoring Firm		Telephone No.	Telephone No. 973-696-6869						
			License No. 00378						
Start Date (10) 12/31/2012		Scheduled Completion Date (11) 01/01/2013							
Name of OSHA Monitor B & G Restoration, Inc.									
Occupancy Status During Abatement (Check Only One)		Street Address 105 Ryerson Road							
<input checked="" type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input type="checkbox"/> Abatement Performed Outside of Normal Facility Hours <input type="checkbox"/> Other - Describe: _____		City, State, Zip Code Lincoln Park, NJ 07035							
Scope of Work (Check All That Apply)									
<input checked="" type="checkbox"/> ≥3 sf or ≥3 lf <input type="checkbox"/> ≥160 sf or ≥260 lf		<input type="checkbox"/> Renovation <input type="checkbox"/> Demolition							
		<input type="checkbox"/> Full Containment with Negative Pressure <input type="checkbox"/> Mini-Enclosure <input type="checkbox"/> Glovebag Procedure <input type="checkbox"/> Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Basement			X	pipe insulation	180 lf	X			
Basement				boiler insulation	50 sqft	X			
Name of Registered Waste Hauler B & G Restoration, Inc.		NJDEP Waste Hauler ID No. 19563	Cubic Yards of Waste 3 yds	Name of Registered Landfill Tullytow Resource & Recovery Center					
City, State Lincoln Park, NJ		Disposal Date 01/01/2013		City, State Tullytown, PA					
Completed by Gordana Luna		Title Secretary/Treasurer		Signature			Date 12/29/2012		



B & G Proj # 2012-240

\*\*\*\*\* EMERGENCY \*\*\*\*\*

State of New Jersey  
NOTIFICATION OF ASBESTOS ABATEMENT  
(Pursuant to NJAC 8:26 and 12:120)

Check # 5679

DOL - 10 DAY

Date of Notification (1) December 29, 2012		Name of Building Owner (2) John & Patricia Custer							
Agencies Notified <input type="checkbox"/> EPA <input type="checkbox"/> DEP <input type="checkbox"/> DOL <input type="checkbox"/> DOH <input type="checkbox"/> LCA		Type Notification <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Amended <input type="checkbox"/> Amendment # <input type="checkbox"/> Emergency (including justification) <input type="checkbox"/> Cancellation							
Name of Facility Where Abatement is Taking Place (3) John & Patricia Custer		Street Address 39 Tuscan Road							
City (5) Maplewood		City, State, Zip Code Maplewood, NJ 07040							
County (6) Essex		County Code (7) (STATE USE ONLY)							
Name of Monitoring Firm Hired by Building Owner (8) n/a		ASCM No.							
Street Address		Name of Abatement Contractor (9) B & G Restoration, Inc.							
City, State, Zip Code		Street Address 105 Ryerson Road							
Project Manager for Monitoring Firm		City, State, Zip Code Lincoln Park, NJ 07035							
Telephone No.		Telephone No. 973-690-6869							
Start Date (10) 12/31/2012		License No. 00378							
Scheduled Completion Date (11) 01/01/2013		Name of OSHA Monitor B & G Restoration, Inc.							
Occupancy Status During Abatement (Check Only One) <input type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input type="checkbox"/> Abatement Performed Outside of Normal Facility Hours <input type="checkbox"/> Other - Describe		Street Address 105 Ryerson Road							
City, State, Zip Code Lincoln Park, NJ 07035									
Scope of Work (Check All That Apply) <input type="checkbox"/> $\geq 1$ sf or $\geq 3$ lf <input type="checkbox"/> $\geq 180$ sf or $\geq 250$ lf <input type="checkbox"/> Renovation <input type="checkbox"/> Demolition <input type="checkbox"/> Full Containment with Negative Pressure <input type="checkbox"/> Mini-Enclosure <input type="checkbox"/> Glovebag Procedure <input type="checkbox"/> Non-Exempted (*) and Non-Frangible Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type				
	Yes	No			N/A	Removal	Repair	Encapsulation	Enclosure
Basement			X	pipe insulation	180 lf	X			
Basement			X	boiler insulation	50 sqft	X			
Name of Registered Waste Hauler B & G Restoration Inc.		NJDEP Waste Hauler ID No 19563		Cubic Yards of Waste 3 yds		Name of Registered Landfill Tullytown Resource & Recovery Center			
City, State Lincoln Park NJ		Disposal Date 01/01/2013		City, State Tullytown, PA					
Completed by Gordana Luna		Title Secretary/Treasurer		Signature Gordana Luna		Date 12/29/2012			

AS841 (R-06 08)

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



No  
check

STATE OF NEW JERSEY  
NOTIFICATION OF ASBESTOS ABATEMENT  
(PURSUANT TO NJAC 8:80-7 AND 12:120-7)

RECEIVED

Date of Notification (1) 11 / 30 / 12		Name of Building Owner / Operator Verizon		
Agencies Notified <input type="checkbox"/> EPA <input type="checkbox"/> DEP <input checked="" type="checkbox"/> DOH <input checked="" type="checkbox"/> DOL <input type="checkbox"/> DCA		Type of Notification <input type="checkbox"/> Initial <input type="checkbox"/> Amended <input type="checkbox"/> Amendment # <input type="checkbox"/> Emergency w/ justification <input checked="" type="checkbox"/> Cancellation		
Street Address 100 Greenwood ave.		City, State, Zip Code Jenkintown, PA. 19046		
Name of Contact Alex Baylor		Telephone Number		
FACILITY INFORMATION				
Name of Facility Where Abatement is Taking Place (3) Verizon		Type of Facility (4) <input type="checkbox"/> School (K-12) <input type="checkbox"/> Subchapter 8 (Other than K-12) <input checked="" type="checkbox"/> Other (i.e., private & commercial bldgs., homes, etc.)		
Street Address 220 West Broad Street		Square Feet 5,000		
City (5) Paulsboro	County (6) Camden	County Code (7)	# Of Floors 2	
Building Age 50+		Current Use (Prior if being demolished) Commercial		
Name of Monitoring Firm Hired by Bldg. Owner (8) USA Environmental management, Inc.		ASCM NO		
Street Address 8436 Enterprise Avenue		Name of Abatement Contractor (9) LVI Environmental Services Inc.		
City, State, Zip Code Philadelphia, PA. 19153		Street Address 462 Getty Avenue		
Project Mgr. For Monitoring Firm Mark Jenkins		City, State, Zip Code Clifton, NJ 07011		
Telephone Number 215.365.5810		Telephone Number 973-772-3660		
Sched. Start Date (10) 12 / 14 / 12		Sched. Completion Date (11) 12 / 26 / 12		
License Number 00117		Name of OSHA Monitor LVI Environmental Services Inc.		
Occupancy Status During Abatement (Check Only 1) <input checked="" type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input type="checkbox"/> Abatement Performed Outside of Normal Facility Hours - Describe: <input type="checkbox"/> Other - Describe: MON-FRI. 7:00AM-3:30PM		Street Address 462 Getty Avenue		
City, State, Zip Code Clifton, NJ 07011		City, State, Zip Code Clifton, NJ 07011		
Scope of Work (Check All That Apply) <input type="checkbox"/> Demolition <input type="checkbox"/> ≥3sf or ≥3lf <input checked="" type="checkbox"/> ≥160 sf or ≥260 lf <input checked="" type="checkbox"/> Renovation <input checked="" type="checkbox"/> Full Containment with Negative Pressure <input type="checkbox"/> Minj. Enclosure <input type="checkbox"/> Glovebag Procedure <input type="checkbox"/> Non-Exempted (*) and Non-Friable Procedure				
Location of Asbestos Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff (12)	Description of Asbestos - Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type R E M O V A L R E P A I R E N C A P S U L E N C L O S U R
Basement	<input checked="" type="checkbox"/>	Floor tile and mastic	2150SF	<input checked="" type="checkbox"/>
Battery Room	<input checked="" type="checkbox"/>	Floor tile and mastic	1150SF	<input checked="" type="checkbox"/>
Plant Storage	<input checked="" type="checkbox"/>	Floor tile and mastic	250SF	<input checked="" type="checkbox"/>
Name of Registered Waste Hauler Service/Transport Group 58 Pyles Lane		NJDEP Waste Hauler ID No. SW2117	Cubic Yards of Waste	Name of Registered Landfill Minerva Landfill
City, State New Castle, DE.		Disposal Date 12.30.12	City, State Waynesburg, OH. 44688	
Completed by (Print or Type) Marc Helm		Title Project Manager	Signature Marc Helm	Date 11/30/12



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

Date of Notification (1) 11 / 30 / 12 <b>PROJECT POSTPONED</b>		Name of Building Owner / Operator (2) Verizon	
Agencies Notified <input type="checkbox"/> EPA <input type="checkbox"/> DEP <input checked="" type="checkbox"/> DOH <input checked="" type="checkbox"/> DOL <input type="checkbox"/> DCA		Type of Notification <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Amended <input type="checkbox"/> Amendment # <input type="checkbox"/> Emergency w/ justification <input type="checkbox"/> Cancellation	
Street Address 100 Greenwood ave.		City, State, Zip Code Jenkintown, PA. 19046	
Name of Contact Alex Baylor		Telephone Number	

2013 JAN 4 PM 2:58  
 ASBESTOS CONTROL & LICENSING

FACILITY INFORMATION					
Name of Facility Where Abatement is Taking Place (3) Verizon			Type of Facility (4) <input type="checkbox"/> School (K-12) <input type="checkbox"/> Subchapter 8 (Other than K-12) <input checked="" type="checkbox"/> Other (i.e., private & commercial bldgs., homes, etc.)		
Street Address 220 West Broad Street			Building Age 50+		
City (5) Paulsboro	County (6) Camden	County Code (7)	Square Feet 5,000	# Of Floors 2	Current Use (Prior if being demolished) Commercial
Name of Monitoring Firm Hired by Bldg. Owner (8) USA Environmental management, Inc.			Name of Abatement Contractor (9) LVI Environmental Services Inc.		
Street Address 8436 Enterprise Avenue			Street Address		
City, State, Zip Code Philadelphia, PA. 19153			462 Getty Avenue		
Project Mngr. For Monitoring Firm Mark Jenkins			City, State, Zip Code Clifton, NJ 07011		
Telephone Number 215.365.5810			Telephone Number 973-772-3660		
License Number 00117					
Sched. Start Date (10) 12 / 14 / 12			Sched. Completion Date (11) 12 / 26 / 12		
Occupancy Status During Abatement (Check Only 1) <input checked="" type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input type="checkbox"/> Abatement Performed Outside of Normal Facility Hours - Describe: <input type="checkbox"/> Other - Describe: MON-FRI. 7:00AM-3:30PM			Name of OSHA Monitor LVI Environmental Services Inc.		
			Street Address 462 Getty Avenue		
			City, State, Zip Code Clifton, NJ 07011		

Scope of Work (Check All That Apply)			
<input type="checkbox"/> Demolition	<input checked="" type="checkbox"/> Renovation	<input checked="" type="checkbox"/> Full Containment with Negative Pressure	
<input type="checkbox"/> ≥3sf or ≥3lf		<input type="checkbox"/> Mini - Enclosure	
<input checked="" type="checkbox"/> ≥160 sf or ≥260 lf		<input type="checkbox"/> Glovebag Procedure	
		<input checked="" type="checkbox"/> Non-Exempted (*) and Non-Friable Procedure	

Location of Asbestos Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff (12)	Description of Asbestos - Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
				R E M O V A L	R E P A I R	E N C A P S U L	E N C L O S U R
	YES NO N/A						
Basement	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Floor tile and mastic	2150SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Battery Room	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Floor tile and mastic	1150SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plant Storage	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Floor tile and mastic	250SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Name of Registered Waste Hauler Service Transport Group 58 Pyles Lane	NJDEP Waste Hauler ID No. SW2117	Cubic Yards of Waste	Name of Registered Landfill Minerva Landfill
City, State New Castle, DE.	Disposal Date 12.30.12	City, State 8955 Minerva Road Waynesburg, OH. 44688	

Completed by (Print or Type) Marc Heim	Title Project Manager	Signature <i>Marc Heim</i>	Date 11/30/12
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**STATE OF NEW JERSEY  
NOTIFICATION OF ASBESTOS ABATEMENT  
(PURSUANT TO NJAC 8:60-7 AND 12:120-7)**

RECEIVED  
2013 JAN -4 PM 2:58  
ENVIRONMENTAL CONTROL & LICENSING

Date of Notification (1) 11 / 30 / 12		Name of Building Owner / Operator (2) Verizon	
Agencies Notified <input type="checkbox"/> EPA <input type="checkbox"/> DEP <input checked="" type="checkbox"/> DOH <input checked="" type="checkbox"/> DOL <input type="checkbox"/> DCA		Type of Notification <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Amended <input type="checkbox"/> Amendment # <input type="checkbox"/> Emergency w/ justification <input type="checkbox"/> Cancellation	
Street Address 100 Greenwood ave.		City, State, Zip Code Jenkintown, PA. 19046	
Name of Contact Alex Baylor		Telephone Number	

FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Verizon		Type of Facility (4) <input type="checkbox"/> School (K-12) <input type="checkbox"/> Subchapter 8 (Other than K-12) <input checked="" type="checkbox"/> Other (i.e., private & commercial bldgs., homes, etc.)	
Street Address 220 West Broad Street		Building Age 50+	
City (5) Paulsboro	County (6) Camden	County Code (7)	Square Feet 5,000
			# Of Floors 2
			Current Use (Prior if being demolished) Commercial
Name of Monitoring Firm Hired by Bldg. Owner (8) USA Environmental management, Inc.		Name of Abatement Contractor (9) LVI Environmental Services Inc.	
Street Address 8436 Enterprise Avenue		Street Address	
City, State, Zip Code Philadelphia, PA. 19153		462 Getty Avenue	
Project Mng. For Monitoring Firm Mark Jenkins		City, State, Zip Code Clifton, NJ 07011	
Telephone Number 215.365.5810		Telephone Number 973-772-3660	
Sched. Start Date (10) 12 / 14 / 12		Sched. Completion Date (11) 12 / 26 / 12	
Sched. Completion Date (11) 12 / 26 / 12		License Number 00117	
Occupancy Status During Abatement (Check Only 1) <input checked="" type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input type="checkbox"/> Abatement Performed Outside of Normal Facility Hours - Describe: <input type="checkbox"/> Other - Describe: MON-FRI. 7:00AM-3:30PM		Name of OSHA Monitor LVI Environmental Services Inc.	
		Street Address 462 Getty Avenue	
		City, State, Zip Code Clifton, NJ 07011	

Scope of Work (Check All That Apply)

<input type="checkbox"/> Demolition	<input checked="" type="checkbox"/> Renovation	<input checked="" type="checkbox"/> Full Containment with Negative Pressure
<input type="checkbox"/> >3sf or >3lf		<input type="checkbox"/> Mini - Enclosure
<input checked="" type="checkbox"/> >160 sf or >260 lf		<input type="checkbox"/> Glovebag Procedure
		<input type="checkbox"/> Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff (12) YES NO N/A	Description of Asbestos - Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
				R E M O V A L	R E P A I R	E N C A P S U L	E N C L O S U R
Basement	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Floor tile and mastic	2150SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Battery Room	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Floor tile and mastic	1150SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plant Storage	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Floor tile and mastic	250SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Name of Registered Waste Hauler Service Transport Group 58 Pyles Lane		NJDEP Waste Hauler ID No. SW2117	Cubic Yards of Waste	Name of Registered Landfill Minerva Landfill	
City, State New Castle, DE.		Disposal Date 12.30.12	City, State Waynesburg, OH. 44688		
Completed by (Print or Type) Marc Helm		Title Project Manager	Signature <i>Marc Helm</i>		Date 11/30/12