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

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Date of Notification (1) 12/26/2016					f Building C tech evir				y		Li.	JAN	- 4	201	7 /
Agencies Notified	Type Notification			Street A			•				i				
X EPA	× Initial			284 sh	neffield s	treet					ASBE	ESTO	SCO	ONTE	OL 8
× EPA × DEP × DOL	Amended		ı	City, Sta	te, Zip Coo	de						LIC	ENS	NG	
× DOL	Amendment		_	mount	ienside,r	nj,0709	92								
X DOH	Emergency (justification)	including		Name of	Contact					Tel	ephone N	lumber			
DOH DCA	Cancellation			Eman	uel Hed	vat									
				FACI	LITY INFO	RMATI	ON								
Name of Facility Where A	batement is Takin	g Place (3)						Туре	of Facility (4	-)					
comercial building									School (K-12						
Street Address									Subchapter of Subchapter of Subchapter (i.e. pr				ildina	hom	00
247 parker ave									etc.)	IVALE (x comme	rcial DL	illulrig:	s, nom	85,
City (5)								Squar	e Feet	# 0	f Floors		Bldg.	Age	
clifton								N/A		N/A	A		N/A		
County (6)				County (Curre	nt Use (Prio	r if bei	ng demol	ished)			
passaic county				(STATE U	JSE ONLY)			CON	/IERCIAL						
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	1 No.		Name	of Aba	tement Cont	ractor	(9)				
N/A		1					EHV	V ABA	TEMENT	LLC					
Street Address			5.00				Street	Addres	SS						
							89 F	RANK	KLIN STR	EET					
City, State, Zip Code							City, S	tate, Z	p Code						
	2								N,NJ, 07	7524					
Project Manager for Moni	toring Firm		T	Telephor	ne No.		Teleph	none No	D.		License	No.			
E		•				333-5			01274						
Start Date _r (10)	Cor	mpletion I	Date (11)		Name	of OSF	A Monitor	THE COLUMN							
01/09/2017	201						TEMENT	LLC							
Occupancy Status During	Abatement (Chec	k Only One)	Street Addi					S						
Facility Closed/Vaca	ted During Entire F	Pariod of At	ator						EET						
Abatement Performe	ed Outside of Norm	nal Facility H	Hour	ement											
Other - Describe: _				City, State, Zip Code PATERSON,NJ,07						524					
Scope of Work (Check All	That Apply)									021					
× ≥3 sf or ≥3 lf		X Ro	nove	ation				Full Containment with Negative Pressure							
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		Transmiss .	moli				××	Full Containment with Negative Pressure Mini-Enclosure							
							×		vebag Proc						
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Location			Sole	lly ely by			scription					-	т.	1	\vdash
Asbestos-Containing I TO BE ABA		Main	tena	nce/			aining N systems				mount Specify	1 7		四	m
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(13)			(12)			other n	niscellar	neous)				Kemova	air	Encapsulate	Enclosure
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Name of Registered Waste Hauler					aste	Cubic	Yards		Name of F	Registe	ered Land	fill			1
Name of Registered Waste Hauler TRI STATE TRANSFER NJD Hau						of Was			MINER\	20000 4000			9		
	LN		N	I/A		N/A	- 1202		IVIIIVEK \	AEI	N I EKPI	KIDE	3	<u> </u>	
City, State							al Date		City, State						
1199 RANDALL AVE	BRONX NY					TBD			900 MIN	IERV	A RD V	VAYN	ESB	URG	ОН
Completed by		Title	Signature / Date					- 1							
					JECT MANAGER Who 12/26/2017					7					
					-		7.	111							

Print Form

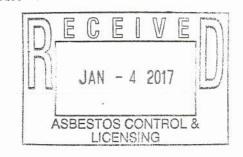


ASB-41

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

36	E		\mathbb{V}	In
JAN		Δ	2017	

Date of Notification (1)					Name	of Buildin	g Ow	ner/Operator (2)					
12 /	29 /	16						nications	/ Job #161	2-5098 Chec	F#885	CON	TRO	L &
Agencies Notified	Type Notifica	ation			Street	Address				1	LICEN	DIM	<u> </u>	
⊠ EPA					100	Greenw	ood	Avenue						
□ DOLWD	☐ Amended				City, S	State, Zip (Code							
□ DHSS	Amendm				Jen	kintown	, PA	19046						
☐ DCA (NJAC 5:23-8)	☐ Emergen justification		cluding			of Contac				Telephone Nu	ımber			
(143/10/3.23-0)	☐ Cancellat				Ale	x Baylor								
		100			FAC	CILITY IN	IFOF	RMATION						
Name of Facility Where A	batement is 7	Taking	Place	(3)					Type of Facility	(4)				
Verizon Market CO									School (K-1		400			
Street Address									Subchapter	8 (Other than K- rivate and comn	12) nercial h	uilding	ıs	
95 William Street									homes, etc.		noroiai b	aname	,	
City (5)									Square Feet	# of Floors	В	ldg. A	ge	
Newark														
County (6)					Coun	ty Code (7)(STA	TE USE ONLY)	Current Use (P	rior if being dem	olished)			
Essex									Offices		2			
Name of Monitoring Firm	Hired by Build	ding O	wner (8)	ASCM	No.	Nai	me of Abateme	ent Contractor (9)				
USA Environmental							A	bateTech, I	nc.					
Street Address							Stre	eet Address						
8436 Enterprise Ave).						3	0 Maple Ave	e. PO Box 25					
City, State, Zip Code							City	, State, Zip Co	ode					
Philadelphia, PA 19				L	umberton, N	NJ 08048								
Project Manager for Monit	Tele	phone	No.	Tel	ephone No.		License No.							
Mark Jenkins	2	5-365	-5810	6	09-265-2107									
Start Date (10)	5	Schedu	uled C	omple	tion Da	te (11)	Nar	me of OSHA N	lonitor					
1/_9_/	17_	_ 2	2 /	_17	_ / -	/ 17 EMSL Analytical								
Occupancy Status During						Street Address								
☐ Facility Closed/Vacate						0.00	2	00 Route 13	0 North					
☐ Abatement Performed Time of Abatement:							1	, State, Zip Co						
Time of Abatement	AIVI		<i>u</i>			/ (IVI	C	innaminsor	i, NJ 08077					
Scope of Work (Check all	that apply)		10.10					□ Eull Con	tainment with Ne	antive Pressure				
≥3 sf or ≥3 If			⊠ Re	novati	on			Mini-End		gative Flessure				
≥160 sf or ≥260 lf			☐ De					Gloveba	g Procedure	- Fishla Dassa	معدام			
								⊠ Non-Exe	mpted (*) and No	n-Friable Proce			- n t T	
1	- 5		. 277	Locat Iorma				Description of	of.		-	batem	-	
Location of Asbestos-Containing N		0		d Sole		Asbe	stos	Containing Ma		Amount	Remova	Repair	inc	Enclosure
TO BE ABA	TED	´		intena	nce/ Staff?	(i.e		rmal systems		(Specify	NOU	a:	aps	uso
IN Facility (13)	У		Ousi	(12)	otan:			surfacing, VAT her miscellane	* 1 to 2 to 1 to 1 to 1 to 1 to 1 to 1 to	SF or LF)	1 20		Encapsulate	re
(13)			Yes	No	N/A			1011111000110110	5457				Œ	
Please see attached						Please	see	attached		Please see				
										attached				
												П	П	П
Name of Registered Waste Hauler NJDEP Waste Hauler						Maste	e Cubic Yards of Name of Registered Landfill					H		
	e naulei				auler II		Wa		G.R.O.W.S					
AbateTech, Inc.					18750)	4							
City, State							1 3	posal Date	City, State	DΛ				
Lumberton, NJ							2	/17/17	Tullytown					
Completed By (Print or Ty		Title						Signature	MI		Date	19	1110)
Gwendolyn Trumbet	ti	Op	oerati	ons (Coord	inator					101	or 1	110	



Market Central Office 95 William Street Newark, NJ 07102

	BASE BID		
Location	Quantity	Number of Estimated Shifts	Total Dollar Amount *
8 th Floor-University, William, Arlington Streets Side & North Side	Removal of 1,530 SF of Exterior Brick Façade/Black Mastic and 76 LF of Pipe Fitting Insulation (4 Bays-Approx. 240 SF/12 LF of pipe fitting insulation each phase)		5
10 th Floor-University, William, Arlington Streets Side & North Side	Removal of 1,530 SF of Exterior Brick Façade/Black Mastic and 255 SF of Roofing (4 Bays-Approx. 240 SF/40 SF each phase)		
	TOTAL	BASE BID	Annual Control of the

All bids must include a breakdown of labor rates and material. Please include breakdown below:

CK 6934

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



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Date of Notification (1) 12/28/2016				of Building HUDSO				SOCIATI	ON, I	NC ASBE	CTO	0.0	ON	TRO	1 &
Agencies Notified Type Notification X EPA X Initial			Street A	Address WASHII	NGTON	N STRE	EET,	MANAGE	MEN	T-OFF	FE	EN:	SING	3	
DEP Amended Amendment			City, St	ate, Zip Co OKEN, N	ode										
□ Emergency □ justification) □ DCA □ Cancellation	-	3		of Contact X. LANC	OTTE,	MANA	GER		Tel	ephone	Numb	er			2000
			FAC	ILITY INF	ORMAT	ION							-		
Name of Facility Where Abatement is Takir HODSON TEA BUILDING CONDO			ION, II	NC.			_	of Facility (4 School (K-1)							
Street Address 1500 WASHINGTON STREET							×	Subchapter Other (i.e. pretc.)				build	lings,	home	es,
City (5) HOBOKEN								re Feet	# o	f Floors			ldg. A 905	ige	
County (6) HUDSON				Code (7) USE ONLY)			ent Use (Prio		ng demo	olishe	d)			
Name of Monitoring Firm Hired by Building THE OAK GROUP	Owner (8)	ASCN	M No.				tement Con							
Street Address 200 FEDERAL STREET, SUITE 2	24					Street 20 C		ss DRNIA AV	/ENU	E					
City, State, Zip Code CAMDEN, NJ 08103								ip Code N, NJ 07:	503						
Project Manager for Monitoring Firm ED EICHEN, CIH	- 1	Telepho 856-37	ne No. 77-0060		Teleph 973-3	one N	0.		Licens 01169						
Start Date (10) 1/9/2017	ed Con	npletion	Date (11)				HA Monitor	N. IN	C.			1,01100			
Occupancy Status During Abatement (Chec		(C.O.C.) (C.O.)	Street												
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other – Describe: NORMAL HOURS	Period of	Abaten	City, State, Zip Code												
								ERSON, NJ 07503							
Scope of Work (Check All That Apply) ≥3 sf or ≥3 if ≥160 sf or ≥260 if		Renova Demolit				×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure					е			
Location of		Locati Normal			Des	scription	of							ment pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma Cus	ed Sole aintenar todial S (12)	nce/ Staff?		tos Cont thermal surfac	aining M	aterial insula T, or		(8	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
EXTERIOR FACADE	Yes	No X	N/A	REI	MOVAI	OF C	OAT	ING	24	10 SF	2				
	EXTERIOR FACADE X						-,								
Name of Registered Waste Hauler D&S RESTORATION, INC.	Hauler ID No. of Wa			Yards ste (YDS)		Name of F				CE	REC	COV	ER		
City, State PATERSON, NJ 07503		Disposal Date City, State VARIOUS DATE TULLYTOWN, PA				200									
Completed by BOGDAN JOLDZIC	VT	3	S	ignature					Date	8/2	016				

Ch 4754

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

1	B	P	E	П	M	Print	Form
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7						Annual Property and Property an	
		JAN	1966	1	2017	111]]]

MITI	59		(P	ursuant	to NJAC 8:60 a	na 12:12	0)	1		JAN	- 4	2	117	-	Ш
Date of Notification (1) 1-3-17					f Building Owner er Lanning Sc			sance Sc	hool F	acilitie			232	-	acas proof
Agencies Notified	Type Notification Initial)) (1		Street A	ddress ederal Street	, Suite 1	146		AS	BEST	OS CO			L &	
X DEP X DOL	Amended Amendment		_		ate, Zip Code len, NJ 08103	3									
DOH DCA	Emergency justification) Cancellation				f Contact Millman				Tele	ephone I	Number	•	72		
				FACI	LITY INFORMA	TION									
Name of Facility Where Kipp Cooper Norcr Street Address								School (K-1	2)		40)				
740 Chestnut St.							×	Subchapter Other (i.e. p etc.)	orivate 8	& comme			51: 57.		s,
City (5) Camden							(C)	are Feet ,000	# of	Floors		Bld(. Ag	Э	
County (6) Camden					Code (7) USE ONLY)		Curr	ent Use (Pri ant	or if bei	ng demo	lished)				
Name of Monitoring Firm Pars Environmenta		Owner (8)		ASCM 0013		1		atement Cor nvironme			, Inc.				
Street Address 500 Horizon Drive,	Suite 540						Addre	ess ley Street							
City, State, Zip Code						City, S	State, 2	Zip Code	1						
Robbinsville, NJ 08 Project Manager for Mor	- Committee - Comm			Telepho	No			hia, PA 19	9137	11					
Firoz Jan			90-7277		hone N -533-			License 01166							
Start Date (10) 11-28-16	ed Con 7	npletion I	Date (11)	111100000000000000000000000000000000000		HA Monitor ironmenta									
Occupancy Status Durin	g Abatement (Chec	k Only Or	ne)		and the second second	ess	-				1 = 1				
Facility Closed/Vac Abatement Perform Other – Describe:	ed Outside of Norn	nal Facility	Abatem Hours	ent		on Drive, Zip Code	Suite	540					_		
		able stills				Rob	ille, NJ 08	8691							
Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ы rnat Apply)	-	Renova Demoliti			×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
		Is	Locati	on				ar Exempter	, Jane	211011-11	labic i i	3553	atem		
Location			Normall d Solel			escription							Туре	· 	
Asbestos-Containing TO BE AB, In Facil (13)	ATED `	Ma Cusi	intenar todial S (12)	ice/ staff?			s insul T, or	ation,	(S	mount pecify or LF)	Removal	Ixobaii		Encapsulate	Enclosure
1st flo	or	Yes	No	N/A X	vet	and ma	actio		2	00sf		+	+	+	
3rd & 4th fls.(7se				X	500	and ma				33sf	x	+	+	+	-
under radiators				^	vac	and mo	2300			7031	-	+	+	+	
		x	mas	tic glue	dots		5	00sf	х	+	-	-			
throughout Name of Registered Waste Hauler N						c Yards		Name of				_			
- Inc.					Hauler ID No of Waste			Name of Registered Landfill Minerva Landfill							
City, State Newark, DE					Disposal Date City, State Libson, OH										
Completed by Title					of Operations Signature Date										
40000000000000000000000000000000000000						UNI	<u> </u>				1 >	1	1		

740 Chestnut St.

DESCRIPTION OF MATERIAL	LOCATION OF MATERIAL	Amount Code** Code***
transite panels	1st floor kitchen area	60 SF REM
12/27/2016		
DESCRIPTION OF MATERIAL	LOCATION OF MATERIAL	Amount Code** Code***
duct insulation	basement & 1st floor	2,000 SF REM
1/3/2017		
DESCRIPTION OF MATERIAL	LOCATION OF MATERIAL	Amount Code** Code***
duct packing	basement	12 SF REM
The state of the s		
DESCRIPTION OF MATERIAL	LOCATION OF MATERIAL	Amount Code** Code***
pipe insulation	attic	80 LF REM



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

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Date of Notification					000000000000000000000000000000000000000	Building O	wner / Ope	rator (2)							
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/	/				Street Ac	ddress			111)) L	5 6		\forall	5 IM		
Agencies Notified	Type of N	lotification	on		76 South	Street									
☐ EPA	V	Initial			City, Stat	te, Zip Code	е		117				111		
☐ DEP		Amend	led			hio 44308				IAN	- 1	2017			
☑ DOH		Amend	ment		Name of				Telepho			-1111	11-		
☑ DOL				v/ justification	Jim Hals				J. o.op.io.	10 1101112			MACRICAL		
l H	ΙĦ	Cancel				- ,									
					ACILITY IN	NFORMATIO	N.		AS	DESIU	SCU	UBU	- X		
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Name of Facility Wh	ere Abaten	nent is i	aking	Place (3)		Type of F	acility (4)								
						_	School (K								
Street Address								er 8 (Other							
315 EAST MAIN STR	EET					V	Other (I.e.	, private &	commerc	ial					
				8			bldgs., ho	mes, etc.)							
City (5)	County (6	i)		County Code	(7)	Square Fe	eet	# Of Floor	rs	Buildin	g Age				
WRIGHTSTOWN	BURLING'	TON									0				
						Current U	se (Prior if	being dem	nolished)	†					
						Telephone									
Name of Monitoring	Firm Hired	by Bldo	Own	er (8)	ASCM NO		7 1 010								
reame or monitoring		by Diag		(0)	AUGINI INC	1									
Environmental Health	Investigation	nns				NOPTHET	TAR CONTE	ACTING C	POLID IN	C					
Street Address	investigatio	7113	-					MUTING 6	ROUP. IN	U.					
						Street Ad	aress								
655 West Shore Trail															
City, State, Zip Code							s Parkway								
Sparta, NJ 07871						City, State	e, Zip Code								
Project Mngr. For Mo	onitoring F	irm		Telephone Nu	mber	1									
Dino Nappi		212-682-9271		East Hano	ver, NJ 070	36									
Sheduled Start Date	letetion Date (1	1)	THE RESERVE AND ADDRESS OF THE PARTY OF THE	e Number		License I	Number								
01/17_	/ 19 /	17													
///			973-88	34-8682			0	0860							
Occupancy Status D	uring Abate	ement (C	heck	Only 1)			OSHA Moni	tor			0000				
				tire Period of			AR CONTE		POUD IN	C					
Abatemen		tea Dain	ing Lin	ille i ellou oi				ACTING G	INCOP. IN	0.			$\overline{}$		
Start Barrier		d Outois	Ja . 6 h	lormal Facility		Street Add	aress								
						20 14/:11:	s Parkway								
	escribe:														
☑ Other - De	scribe:						, Zip Code								
						East Hano	ver, NJ 070	36							
Scope of Work (Ched	k All That	Apply)													
Demolition	n	4		Renovation		Full Conta	ainment wit	h Negative	Pressure						
≥3sf or ≥3	lf					Mini - Enc	losure								
≥160 sf or	≥260 If					Glovebag	Procedure								
					~	Non-Exem	pted (*) an	d Non-Fria	ble Proce	dure					
Location of		Is			Descript	ion of			Abateme	nt Type					
Asbestos Conta	ining	Loca	tion	As		ontaining			R	I	E	E	-		
		Norm			Material			Amount	E	R	N	N			
TO BE ABATI	ED	Use		0.	e., therma			(Specify	м	E	C	c			
in Facility		Sole				facing, VAT		SF or LF)	15.66	P	A	Ľ			
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		Staff							_	l IX	l,	R			
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Exterior Telephone Po	10		14	Transite Condu	IL			20 LF	7						
Name of Registered Waste Hauler NJDEP Waste					Cubic										
NEWARK CARTING				Hauler ID No.	Yards	I.E.S.I.							1		
				4509	of Waste	grave and the second of the se									
City, State					Disposal	posal City. State									
NEWARK, NJ					Date							-			
						SETTLEM, 177 10 100									
Completed by (Print of	or Type)			Title	Signature Date										
					Signature										
Steven Stiles				Droject Manage	r		111	000	XXX	2	1 0	110011	7		

ASB-41

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

Date of Notification (1)		(I ONOOAI		Building Owr			IC!	AFF	0	, ,	10
01 / 03 / 17				820		, ,	powercas	AND REAL PROPERTY.	P E	N N	-
Agencies Notified Type of N	lotification		Street Ad	ldress)	<u> </u>	U V	
□ EPA ☑	Initial		City, Stat	e, Zip Code			In	11			
DEP	Amended		CLIFTON	, NJ 07012				1	AN -	1 20	17
□ DOH □ DOL □	Amendment	# v/ justification	Name of				Telepho	ne Numb	oer		
	Cancellation	w justification	JESSE E.	AKLES			1 .	Encountry agreement		-	
		F	ACILITY IN	FORMATION				AODE	3TO3 (ONT	ROL
Name of Facility Where Abaten	antin Tables	DI (2)		l= (=	/ 41				LICEN	SING	-
Name of Facility where Abatem	nent is raking	Place (3)		Type of Fac	ility (4)						
				■ 100 100 000	chool (K						
Street Address						er 8 (Other					
						, private & mes, etc.)		aı			
City (5) County (6	5)	County Code	(7)	Square Feet		# Of Floor		Buildin	g Age		
CLIFTON PASSAIC				1,50			2	1			
				Current Use RESIDENCE		being den	nolished)		40 -	+	
Name of Monitoring Firm Hired	by Bldg. Own	er (8)	ASCM NO								
AET		50.39		NODTHAT							
AET Street Address				NORTHSTAI Street Addre		CACTING G	ROUP, IN	IC.			
907 Doolittle Drive				Oli GGL Addre	,33						
City, State, Zip Code				32 Williams F							
Bridgewater, NJ 08807 Project Mngr. For Monitoring F	i em	Talanhana No	and here	City, State, 2	Zip Code						
Eric Houseknecth	irm	Telephone Nu 908-218-1108	mber	East Hanove	r NJ 079	36					
Sheduled Start Date (10)	1)	Telephone Number License Number									
01 / 24 / 17		973-884-8682 00860									
Occupancy Status During Abat		Name of OSHA Monitor									
Facility Closed/Vaca				NORTHSTAF			ROUP, IN	C.			
Abatement	0.2 0.01 10			Street Addre							
Abatement Performe Hours - Describe:	d Outside of N	ormal Facility		32 Williams Parkway							
Other - Describe:	7:00AM-3:30P	M		City, State, Z							
				East Hanove	r, NJ 0793	36					
Scope of Work (Check All That	Apply)										
Demolition	✓	Renovation	7	Full Contain	ment wit	h Negative	Pressure	E			
≥3sf or≥3lf ≥3sf or≥3lf				Mini - Enclos	sure						
≥160 sf or ≥260 lf				Glovebag Pr Non-Exempt		d Non-Eria	hla Proce	dure			
				Woll-Exclipt	ca () am	a ivoii-i iia	DIC I TOCC	uuie			
Location of	Is		Descripti				Abateme	nt Type	1-	1_	
Asbestos Containing	Location Normally	As	bestos - C Material (Amount	R E	R	E N	E	
TO BE ABATED	Used	(1.6	e., thermal	A STOCKED AND A	- 1	(Specify	M	E	C	c	
in Facility	Solely			facing, VAT,		SF or LF)	0	Р	А	L	
(13)	by Main- tenance/	ord	other misc	ellaneous)			V A	A	P	o s	
	Custodial						L	R	U	U	
	Staff (12)						2000		L	R	
BASEMENT	YES NO N/A	VAT/MASTIC				800 SF				-	_
er sement		VATAVIASTIC				000 SF	7	H	1 +	+	=
											<u> </u>
Name of Dayleters IVI ()		N.IDES.III	0.11								
Name of Registered Waste Haul NEWARK CARTING	ier	NJDEP Waste Hauler ID No.		Name of Reg	istered L	andfill.					
			of Waste	1.2.0.1.							
City, State				City. State							
NEWARK, NJ			Date	BETHLEHEM	, PA 1810	05	~5				
Completed by (Print or Type)		Title		Si	gnature		11.		Date		
					A /_	w	XI.C				
Steve Stiles ASB-41		Project Manage	r		- U	wh	mi	× /	01	/03/17	7

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

m.	E	C			Par	it Eo	rm.
		JAN	- /	1	2017	1	
	CDI	CTO	30.0	101	VTR	21.6	

								% 			J. J	AN .	- 4	201	7
Date of Notification (1) 1/3/2017				Name o Resid	f Building ence	Owner/C	Operator	(2)		1					•
Agencies Notified	Type Notification			Street A	ddress						ASBES				ROL
Z EPA	☑ Initial		-	City Sta	to Zin Co	do						LICE	NSI	NG	
DEP DOL	Amended Amendment	#			ate, Zip Co ood, NJ										
_	Emergency				f Contact	07020				Te	lephone Nur	nber		77.5	
DOH DCA	justification) Cancellation			Oliver											
				FACI	LITY INFO	RMATI	ON								
Name of Facility Where A Residence	Abatement is Takin	g Place (3)					Туре	of Facility (4	1)					
Street Address									School (K-1: Subchapter		or than V 1	21			
Street Address								X	Other (i.e. p etc.)				dings,	home	es,
City (5)								2007/04/00/00	re Feet	11 222	f Floors	1,8	ldg. A	ge	
Fanwood County (6)				Cauatus	Cada (7)			180	V.V.	2		-	0		
Union					Code (7) USE ONLY)	5	_	Curre	ent Use (Pric	ritbe	ing demolist	iea)			
Name of Monitoring Firm	사람들은 아이는 아이를 보고 있다면서 10mm (Fig. 1)	Owner (8)		ASCN	ΛNo.		100000000000000000000000000000000000000		tement Con		(9)				
A. Seine Lighthouse	Solutions				183-183-1				nk Service	es					
Street Address PO Box 354							Street		ss erty Avenu	Δ.					
City, State, Zip Code									ip Code				-		
South Orange, NJ 0						100000000000000000000000000000000000000		J 07205							
Project Manager for Moni		Telepho			Teleph				License N	0.					
Sarah Calandra	10		49-2666			462-7			01316						
Start Date (10) 1/23/2017		1/27/20		A. Seine					HA Monitor _ighthouse	e Sol	utions, LL	С			
Occupancy Status During	Abatement (Chec	k Only On	e)	Street Address PO Box 354											
Facility Closed/Vaca				ement											
Abatement Performe Other – Describe: _	ed Outside of Norm	iai Facility	Hours	City, State, Zip Code South Orange, NJ)7079						
Scope of Work (Check All	That Apply)						3001	ui Oia	alige, No C	17079					
≥3 sf or ≥3 lf	a la consecutiva de la consecutiva della consecu	⊠ R	enova	tion] Fu	I Containment with Negative Pressure						
≥160 sf or ≥260 lf			emolit					Mi	ni-Enclosure		1.50	10000			
									ovebag Proc n-Exempted			le Pro	cedur	e	
		Is	Locati	on									Abate	ement	
Location	of		lormal			De	scription	of					Ту	ре	
Asbestos-Containing I TO BE ABA			d Sole intenar				taining N system		I (ACM)		mount Specify	70		En	m
In Facilit		Cust	odial 5 (12)	Staff?	(1.6.	surfa	cing, VA	T, or			F or LF)	Remova	Repair	caps	Enclosure
(13)		V		T NI/A		other n	niscellar	neous)				oval	air	Encapsulate	sure
		Yes	No	N/A							4.5015				
baseme	ent		X				pipe				150lf	X			
Name of Registered Waste Hauler					/aste No.	Cubic of Was			0.2147	2020 2000 - 2000 - 200	ered Landfill				
Newark Carting			100.0	4509	. 10.	O. vvd.			Waste N	Mana	gement L	andfi	II		
City, State							sal Date		City, State						
East Orange, NJ						1/31/			Penn A	gyle					
Completed by Ron Brink		Title Presi	dant		Signature Date										
NOI DIIIK							1 1								