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

			T., 75		.406.27171.15			ogranis se				
Date of Notification (1) 1/03/2012					Name of Build	de Nemo	Operator (2)					,
Agencies Notified		Notification	Туре		E.I. duPont	s	臣息	F. 1	19		11	1.
(x) EPA () DEP (x) DOL (x) DOH (x) DCA	e e	() Initial N (X) Amende () Cancelle	otification ed Certifica	tion	Rt 130	Company of the Compan	JAN	- 6	2012	25.04	The state of the s	
					City, State, Zip Deepwater	NJ 0806	9 -		er Silv		****	İ
					Name of Cont Bryan Mum			Tal N	umher			
				FACILITY IN	ORMATION	e Son						
Name of Facility Where Chambers Works	Abatement is	Taking Place	(3)		Type of Facilit () School (K- () Subchapte (x) Other (i.e.	12) r 8 (other th	an K-12) mmercial blde	as hom	nes, etc.			
Street Address Route 130					Sq. Feet							
City (5) Deepwater	County (6) Salem		County C (State Us		Bldg. Age OL	utside orior if being	demolished)	Che	mical N	/lanuf	factu	ıre
lame of Monitoring Firm Hired by Bldg. Owner B) Harvard Environmental Inc.							Name of Co County E					
Street Address 760 Pulaski Highwa	ay		L		Street Address 461 New C		ns Rd.					
City, State, Zip Code New Castle, DE 19	720				City State, Zip New Castle	Code , DE 1972	20					
Project Manager for Mor Wesley Morrison	nitoring Firm	Telephone (302) 326			Telephone Nu (302) 322-8			Licens 0057	se Numb	er		
Scheduled Start Date (1 1/03/2012	0)	Scheduled 3/31/2012		Date (11)	Name of OSH County Env		al Co.					
Occupancy Status Durin () Facility Closed/Vacat () Abatement Performe	ted During En ed Outside of I	tire Period of Normal Facilit	Abatement y Hours -		Street Address 461 New C		ns Rd					
Other - Describe Area	hours are		3:30 pm	l	City, State, Zip							
Source of Work (Check					New Castle	, DE 1972	20				201-5	
() Demolition (x) Ro () Large Proj. (>160 SF x) Full Containment with	enovation For >260 LF A	ACM) (x) SM F	Proj. (>25< Mini-Enclo	sure (x) Gl	ovebag Procedu	re	roj. (<25 SF c					
Containing Material (ACM)in Facility (13) UsedSolely by (i.e.ther insulation of therming Maint./CustodialStaff? (12) (12) YES NO NA (12) Otherming Material (12) Maint./CustodialStaff? (12) Otherming Material (13)			Description of (i.e.thermal sy insulation,surf othermiscell.)	stems	,	Specify SF or	LF)	Rem.	ment T	74	Enclose	
Thru-out plant	X			Thermal Syste	ms	600 LF/S	=		Х			
Thru-out plant	S. Picit		Thermal Syste		900 LF					X		
Thru-out plant	X			Floor Tile / Ma		1300 SF			Х			
NJDEP Waste Hauler ID # DuPont Company				ID#	Cubic Yards o	f Waste			of Reg. ont Cha			Vorks

<u>City, State</u> Deepwater, NJ			Disp. Date		City, State Deepwater, NJ
Completed by (Print or Type) Greg Godwin	Title Project Manager	Signature Greg Godwin		<u>Date</u> 1/03/201	2

Mail to:NJDEP-DSHW-BRRTPTelephone 609-984-6620C:\WORD\MYDOCS\ASBESTOS

401 E. State St., PO 4149/18/00 Trenton, NJ 08625-0414



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

				to NJAC 8				(F)	E M E	1 1	7 E	1 1	57
Date of Notification (1) 1/5/12				f Building (EDY HE									
Agencies Notified Type Notifie	cation		Street A	ddress	ROA	D		TU LI	JAN -	6 20	12		7
EPA Initial Amen	ded dment #	ŀ		ate, Zip Co		8084		1 - 1	ASSESTOR	College	9	-	N/E) MARKAGERO
	ency (including ation)		Name of	f Contact			- 1	_	Telephone	Number	. GI		_
DCA Cance	llation		100000000000000000000000000000000000000	DUCAT		ON	•				123	of a	
Name of Facility Where Abatement is KENNEDY STRATFORD	Taking Place (3)	FAGI	LITTINFO	KIVIAT	ION	-	acility (4)				-	-
Street Address							Sub	ool (K-12) chapter 8	(Other than h	<-12)			
31 E. LAUREL ROAD				350			X Oth etc.		ate & comme	ercial buil	dings	, hom	es,
City (5) STRATFORD, NJ							Square F >50,000	2000	# of Floors 4		3ldg. <i>1</i> 35	Age	
County (6) CAMDEN				Code (7) USE ONLY)		_	Current U HOSPI		f being demo	olished)			
Name of Monitoring Firm Hired by Bu CRITERION LABS	ilding Owner (8)		ASCM	1 No.			of Abatem		actor (9)				
Street Address 3370 PROGRESS DRIVE							Address INDUS	TRIAL B	LVD.		100000		
City, State, Zip Code BENSALEM, PA. 19020		-1111-200-000		6		tate, Zip C		18966					
Project Manager for Monitoring Firm MIKE PANEPRESSO		Telephor 215 24	ne No. 4-1300			one No. 322-2900)	License 00783					
Start Date (10) 1/20/12	t Date (10) Schedule						of OSHA	/lonitor					
Occupancy Status During Abatement	(Check Only On	e)					Address			emerce.			
Facility Closed/Vacated During E Abatement Performed Outside o Other – Describe: 7AM-11PM N	f Normal Facility					City, S	tate, Zip C	ode	DURT SUI	TEE	-		
Scope of Work (Check All That Apply)						WITCH	KLETON	, NJ 080					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	X R	enova emoliti				×	Mini-Er Gloveb	nclosure ag Proced	with Negativ lure and Non-Fr			e	
	1000	Locati	93310								Abate	ement	
Location of Asbestos-Containing Material (AC <u>TO BE ABATED</u> In Facility (13)	d Sole ntenar odial S (12)	ly by nce/ staff?		os Cont thermal surfa		laterial (A0 insulation T, or		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure	
The second secon	No	N/A					-		-		(U		
LAB ROOM	X		AS	SBES	TOS D	EBRIS		95 SF	Х				
		Care -								-			
Name of Registered Waste Hauler		10000	JDEP W	- F899/30 - I		Yards	Na	ame of Re	gistered Land	Ifill			
SERVICE TRANSPORT GROU	JP	1100000	auler ID 1990	No.	of Wa				LANDFIL	L			
City, State NEW CASTLE, DE					Dispos	sal Date		ty, State /AYNES	BURG, OF	1			
Completed by DAMIAN LAVELLE	Title PRO	ECT	MGR.		S	ignature	المراجعة	Li		Date 1/5/12			

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

	e of Notification (1) 01/04/2012 ncies Notified Type Notification					ding Owner/Operat Apartment & C		JAN - E	2010	201 110	11	
Agencies Notified	Type Notificati	on		Str	eet Addre	ss		7	2012			1
DEP DOL	Amended Amendmen		na		y, State, Zi d Bridge	p Code , NJ 08857	-	LHATTISH 3	<u> </u>		-	 -
DCA DCA	justification Cancellation	1)	9		me of Con nadette F			Telephone Mi	mhor	***************************************		=
Name of Facility When	Abstament in Tal	i Di-	(0)	F	ACILITY I	NFORMATION		* 3 %	W.			
Apartments Bldg.	e Abatement is Tai	ang Plac	e (3)				Type of Faci		A 745			
Street Address 40 A-D Cottonwoo	d Lane		3				Subchapt	er 8 (Other than K-	1 2) cial bu	uildin	gs,	
Old Bridge,							Square Feet 2000 SF		- 1	Bldg 60+	Age	
County (6) Middlesex					unty Code E ONLY)	(7) (STATE	Apartments		lished	i)		
Name of Monitoring Fir (8) N/A Street Address	m Hired by Buildin	g Owner		ASC	M No.		ment Contractor al Constructi					
						Street Address 1360 Clifton,	Avenue, PN	MB Suite 218		20015		
City, State, Zip Code						City, State, Zip C Clifton, NJ (Code					_
Project Manager for Mo	nitoring Firm	7	Tel	ephone	No.	Telephone No. 973-389-00	West live of	License No.		MIN'S IN		
Start Date (10) 01/13/2012		eduled 0 /14/20		etion D	ate (11)	Name of OSHA I	Monitor				1110	
Occupancy Status Duri	ng Abatement (Ch	eck only	one)			Street Address				_		_
Facility Closed/Vaca Abatement Performe	d Outside of Norm	eriod of al Facilit	Abati y Hot	ement		City, State, Zip C		MB Suite 218				
Other - Describe:						Clifton, NJ 0						
Scope of Work (Check a >3 sf or >3 if ≥160 sf or ≥260 if	ill that apply)		enovat emol			Mini-End Goveba	closure ig Procedure	Nega:ive Pressure				
Location	of	No	ocation ocatio	y				Non-Friable Proc		Abate	men pe	t
Asbestos-Containing M TO BE ABA IN Facility (13)	faterial (ACM)	Mair Cu s	itenar istodia itaff? (12)	ice/		Description of tos Containing Mate, thermal systems in surfacing, VAT, other miscellaneo	erial (ACM) nsulation, or	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
Crowl Space									<u> </u>	Ŀ	te	Ф
Crawl Space			X	Pipe/El	bow Insulation		230 LF	X			-	
Name of Registered Was Service Transport G		<u></u>		IJDEP V auler ID 20970		Cubic Yards of Waste 10	Name of Reg	istered Landfill	1_	1		
City, State New Castle, DE			-1 -	-0710		Disposal Date 01/14/2012	City, State	rg, OH 44688				
Completed By Crutarth Jagad	Title	sident				Signature	~ \\	Date 01/04/	2012			==

2040 11 D&S Proj. #: MS 12-06

	State of NJ	
Notification	of Asbestos	Abatement.
(Pursuant to	NJAC 8:60	and 12:120)

D&S Proj	.#: MS 12-06			(Purs	uant to NJAC	0est 0 8:6	os Abatement 30 and 12:120)		W R	1			
Date of Notification				Building Own	ner/Operator (2)			JAN - 6 2	012		Administration of the Control		
Agencies Notified EPA DEP	Type Notifica Initial Amended		Street Ad 9 CRE	dress STWOOD	LANE		-	ASSESTING COLLING	- 1		The state of the s		
☑ DOL☑ DOH☐ DCA	Amendment #	,	CLAR Name of 0	e, Zip Code KK, NJ 070- Contact I UHRIN	44		T .	Telephor	Technology is considerate	er	Jr.		
	Cancellatio	<u> </u>	30111		CILITY INFORM	ATIC	ON .						
Name of facility w	here abatement	is taking p	lace (3)					Type of Facility					
JOHN UHRIN		-71						<u> </u>	ol (K - 12 apter 8 (0	,	than I	/ 12\	
Street Address								Other	(Private/C	Comm			
9 CRESTWOO	DD LANE							Bldgs Square Feet	/Homes,		E	ldg. A	ige
City (5)			unty (6)				ounty Code (7) tate use only)	Current Use (P	rior if beir	ng der	nolish	ied)	
Name of Monitorin	g Firm Hired by				ASCM No.		Name of Abatement (Contractor (9)					
Street Address					-		D & S RESTORA	TION, INC.					
Street Address							Street Address 20 California Av	e					
City, State, Zip Cod	е					-	City, State, Zip Code	· ·					
							Paterson, NJ 07:	503					-
Project Manager for	Monitoring Firm	1		Phone Numb	er		73-345-8020		License	Num 0159			
Start Date (10)		Sche	d. Comple	tion Date (1	1)	-	Name of OSHA Monit		- 100				
01/12/12		01/2	0/12				D & S Restoration	on, Inc.			-		
Occupancy Status [20 California Ave	enue					
Abatement pe	d/vacated during erformed outside	of normal					City, State, Zip Code						
Other-Descrit	oe: NORMAL H					-	Paterson, NJ 075	503					
Scope of Work (ch		Renovatio Demolitio	n					ull Containment w fini-enclosure flovebag procedur lon-Exempted (*)	e			edure	
Location of asbestos-con material (acm) to be	by mainte staff(12)	n normally enance/cu	y used solely stodial			asbestos-containing	Amount (Specify S	For	R e m	R e p	Enc	E n c
abated in faci	iity (13)	Yes	No	N/A				LF)		v e	i r	a p	L
BASEMENT			LX.		PIPE INSUL	AT.	ION	8 L FT		X			
										ዙ		H	H
							1 701,0			H		H	片
							97						
Registered Waste H D & S RESTOR		NJDI 135	EP Hauler 506	1	YD	aste	Name of Registered L TULLYTOWN, R		COVER	Y			
City, State PATERSON, NJ	07503			Disposal Da 01/13/12		CONTRACT.	City, State TULLYTOWN, F	PA					
Completed by (Print BOGDAN JOLI		Title PRESID	ENT		Signature		*		Date 01/02/	12	-		
ASB-41	*	Do not use	e this form	for asbesto	s licensure exen	npted	d activities.						 .

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

Cl# 2200

Date of Notification (1)	3 /	12		N		f Building (idge Sun		r/Operator (2 .LC	NEGI	E IVE				
Agencies Notified ☐ EPA ☑ DOLWD 5757 ☑ DHSS 5768	Type Notification ☐ Initial ☐ Amended Amendment				103 V City, Sta	ddress V. 57 th St ate, Zip Co t Beach,	de	8008	JAN.	- 8 - 2012				
☐ DCA (NJAC 5:23-8)	☐ Emergency justification) ☐ Cancellation)	ng	1	Name o	f Contact flessina		L.	August Life	Telephone Num	ber			
			-		FACI	LITY INF	ORN	ATION		= 521				
Name of Facility Where 103 W. 57th Stree		king Plac	ce (3	3)		1			Type of Facility (2)	Lat.		
Street Address 103 W. 57th Stree	t			440 9 82					Other (i.e., pr homes, etc.)	ivate and comme	ercial buil	dings g. Ag		
City (5) Brant Beach									Square Feet 1200	# of Floors	4	g. Ag 0+		
County (6) Ocean								USE ONLY)	Residential	or if being demol	isnea)			
Name of Monitoring Fir	m Hired by Buildir	ng Owne	er (8)	A	SCM N	lo.	BR	RISTOL EN	ent Contractor (9) VIRONMENTAL			<u> </u>		
Street Address							11	et Address 23 BEAVE			- <u> </u>			
City, State, Zip Code								State, Zip Co						
Project Manager for Mo	onitoring Firm			Telep	hone N	No.		ohone No. 5-788-6040)	License No. 00509				
Start Date (10) 1	1,000	heduled						e of OSHA N	Nonitor VIRONMENTA	L, INC.				
Occupancy Status Dur		heck on	ly on	ie)			Stree	et Address						
☐ Facility Closed/Vac	ated During Entire	Period	of A	baten	nent		11	23 BEAVE	R STREET					
Abatement Perform	ed Outside of Nor :AM	mal Fac _PM/_	cility	Hours _PM	s - Desc	cribe AM		State, Zip C			10			
Scope of Work (Check □ ≥3 sf or ≥3 lf ⊠ ≥160 sf or ≥260 lf	all that apply)			ovatio				☐ Mini-En	stainment with Ne closure ag Procedure empted (*) and No			10.		
			27.753	Locati					_		Ab	_	ent Ty	ype
Locati Asbestos-Containii TO BE A IN Fa (1:	ng Material (ACM) . <u>BATED</u> cility		Jsed Mair Custo	(12)	ly by nce/ Staff?	Asbe: (i.e	stos C ., ther sı	Description Containing M mal systems urfacing, VA er miscelland	aterial (ACM) insulation, Γ, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
			es	No	N/A					2000 SF	\boxtimes		П	П
Exterior Siding						Transite	e Sid	ing		2000 31				
						-								
								100-100-100-100-100-100-100-100-100-100						
Name of Registered V				N	JDEP I lauler II		Was		The second secon	istered Landfill		1		
City, State	SERVICE TRANSPORT GROUP, INC. ity, State NEW CASTLE, DE 19720					0	Disp	O Cu Yd Dosal Date 1/16/12	City, State	BURG, OH 446	588			
					"	Signature	0		Date /	,				
Completed By (Print of Gino Pizzigoni	r (ype)	Title Esti	mat	or				Lino	Pizzigon	ı l	1/3	110	2	

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

		(P	urs	uani	t to	o <u>N</u>	.J.A.	<u>C.</u> 8:60 and	12:12	20)		0#	2	199	10.10
Date of Notification								Owner / Operat			5 F II	TAD TO	1		
Associate Notified	12/30/11	ation.		Stre				partment of C	orrection	ons \ [-		VI 1			
Agencies Notified	Type Notific	cation			-		ess 1401		7		- A Dr. Don Ar was C. Do. of				
☐ DEP		al		-			& Zip (Code	- 3	iii ,	ΔN - 6	2012	-	1	
□ DOL	☐ Ame	ended Rev1					NJ 08		1	111 11 1	4M - 6	LUIL		1 mm 17 mg/	
M DON	12 - 22 - 22 - 22 - 22 - 22 - 22 - 22 -			Non		of Co	ontact				· ····································	Filest			
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								ODBIATION			AND AND AND ADDRESS OF THE PARTY OF THE PART		ost- hov-		
Name of Facility Wh	nere Abatem	ent is Taking F	Place		40	ILII	TINE	Type of Faci	lity (4)		What is			9.79	
		on to raining t		(0)				School							
Street Address										ther than K-					
Highbridge Rd. (off RT 130)								e & commer				etc.)	
0'' (5)		To	To		_		/ - >	Square Feet		# of Floors	В	ldg. Ag	· contract		
City (5)		County (6)	10	ounty	C	ode	(7)	10000		1	i a la ca all'		30-	+	
Yardville, NJ		Mercer						Correction		being demol	isnea)				
Name of Monitoring	Firm Hired	l hy Building Ow	ner (8	3)	-	ASC	CM No		Section 1	Contractor (2)		-	-	
			,,,,,	-,		, 100	JIVI 140	Bristol Env			,				
Street Address			-					Street Addre							
120 N. Warren St								1123 Beav							
								City, State &		e					
		Firm	Tele	phon	e N	Juml	her	Bristol, PA Telephone N			License N	umher			
Ryan Broadwate				-392				(215)788-6			00509	uniboi			
		Scheduled Co	mplet	ion D	ate	(11)	Name of OS	HA Moni	tor	<u> </u>				
				5/12				Bristol Env	-	ental Inc.					
					hat	omo	nt	Street Addre		4					
								City, State &	and the second second					15.00	
				Juio			o opini	Bristol, PA		0					
	te of Facility Where Abatement is Toden State Correctional et Address hbridge Rd. (off RT 130) (5) (5) Count Merci te of Monitoring Firm Hired by Build ironmental Connection et Address N. Warren St State & Zip Code nton, NJ 08608 ect Manager for Monitoring Firm n Broadwater eduled Start Date (10) 12/30/11 upancy Status During Abatement (C) Facility Closed/Vacated During Abatement Performed Outside of Describe: 5 PM to 1:30 AM Facility Occupied During Abatement of the off Work (Check all that apply) ≥3 sf or ≥3 If ≥160 sf ≥260 If Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13) Alaing Tank							12.1010.,171							
Scope of Work (Che	eck all that a	pply)					3,1127						-1000000		
N >2 of or >2 if	c .			Do		oti o				full Containm		egative	Pre	ssure	3
	den State Correctional et Address inbridge Rd. (off RT 130) (5) dville, NJ e of Monitoring Firm Hired by Buildifferonmental Connection et Address N. Warren St State & Zip Code iton, NJ 08608 et Manager for Monitoring Firm in Broadwater eduled Start Date (10) 12/30/11 upancy Status During Abatement (C) Facility Closed/Vacated During II Abatement Performed Outside of Describe: 5 PM to 1:30 AM Facility Occupied During Abatement of the of Work (Check all that apply) ≥3 sf or ≥3 If ≥160 sf ≥260 If Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13) Ming Tank					vatio olition				Mini-Enclosur Blove Bag Pr					
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Lo	cation of		Is	Loca	itio	n		Descriptio			Amount			ent T	
		ng		mally				Asbestos-Cor			(Specify	1	Г	Т	Ť
				Solely ntena				Material (A (i.e., thermal s		١	SF or LF)	₽.	מ	Encapsulate	Enclsoure
	n Facility		3-377 (0-377)	todial	St		1	nsulation, surfa-	cing, VA			Removal	Repair	apsu	ciso
	(13)		Yes	(12) No		N/A		or other miscel	laneous)			<u>a</u>	=	late	lre
CVM			res		+	IN/A		Non to soletic	. £!44!	_	0015				\vdash
GYM	w. 1925	100-20-	H		+	H	1	Pipe insulation Wrap and		S	32 LF	$+\boxtimes$	H	ዙ	ዙ
Holding Tank			H	H	+	H		Plaste			4 LF	H	M	H	H
1 ST Floor Classro	om		H		T	Ħ		Plaste			25 SF		d	H	Ħ
								1					Ī		
	m/=														
Name of Registered	Waste Hau	ler					Vaste	Cubic Yards	Name	of Registered	d Landfill		iona to	0,015	
Service Transpor	t Inc			13 15 15 15	aui 099		No.	of Waste 1 Cu yd	Grows	s Landfill					
City, State	ironmental Connection et Address N. Warren St State & Zip Code nton, NJ 08608 ect Manager for Monitoring Firm n Broadwater eduled Start Date (10) 12/30/11 upancy Status During Abatement (0 Facility Closed/Vacated During Abatement Performed Outside of Describe: 5 PM to 1:30 AM Facility Occupied During Abatement of the of Work (Check all that apply) ≥3 sf or ≥3 If ≥160 sf ≥260 If Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13) In Facility (13) In Facility (13) In Facility (13)							Disposal Date	City, St				77.5		
New Castle, DE	bridge Rd. (off RT 130) ville, NJ							1/5/12		ville PA					
Completed By (Print	or Type)				tle			Signature	.0			Date			
Gino Pizzigoni	i				-	ect		(1)	11			12/3	0/1	1	
				M	an	age	r	XI.	115	<					

NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to N.J.A.C. 8:60 and 12:120) Date of Notification (1) Name of Building Owner / Operator (2) 12/20/11 Sate of NJ Department of Corrections Agencies Notified Type Notification Street Address JAN - 6 2012 EPA PO Box 11401 DEP Initial City, State & Zip Code DOL /366 Amended Yardville, NJ 08620 DOH /359 Emergency Name of Contact Telephone Number DCA Cancellation Joseph E. May **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Garden State Correctional School (K-12) Street Address Subchapter 8 (Other than K-12) Highbridge Rd. (off RT 130) Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 100000 30+ Yardville, NJ Mercer Current Use (Prior if being demolished) Correctional Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Environmental Connection Bristol Environmental, Inc. Street Address Street Address 120 N. Warren St 1123 Beaver Street City, State & Zip Code City, State & Zip Code Trenton, NJ 08608 Bristol, PA 19007 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Ryan Broadwater 609-392-4200 (215)788-6040 00509 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 12/30/11 12/31/11 Bristol Environmental Inc. Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1123 Beaver Street X Abatement Performed Outside of Normal Hours - 7am to 3pm City, State & Zip Code Describe: 5 PM to 1:30 AM Bristol, PA 19007 Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 If Renovation Mini-Enclosure ≥160 sf ≥260 If Demolition Glove Bag Procedures Non-Exempted and Non-Friable Procedure Location of Is Location Description of Amount Abatement Type Asbestos-Containing Normally Used Asbestos-Containing (Specify Solely by Material (ACM) Material (ACM) SF or LF) Encapsulate Enclsoure TO BE ABATED Removal Maintenance or (i.e., thermal systems in Facility Custodial Staff? insulation, surfacing, VAT (13)(12)or other miscellaneous) Yes No N/A GYM X Pipe insulation fittings 32 LF Wrap and Cut Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Service Transport Inc. 20990 1 Cu yd A&L Salvage City. State Disposal Date City, State New Castle, DE 1/2/12 Lisbon, Ohio Completed By (Print or Type) Title Signature Date

Project

Manager

12/20/11

Gino Pizzigoni

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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

Cl#2199

Or all or		*												
Date of Notification			N	ame	of I	Build	ing O	wner / Operator tment of Corre	(2)	BIVI	EF	1		
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Agencies Notified	Type Notific	cation	190000	O B					IIMI -					
	□ Initio	si.					ip Co	de	III III JA	N - 6 2012	10	/		
DEP							J 086		5		-			
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⊠ DOH			1000	ose					ASBI	STOS CONTROL				
□ DCA	L Call	Celiation	3	szocza-	10000					LICENSING			_	
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Name of Facility W	/here Abatem	nent is Taking Pla	ice (3))				Type of Facility				- parecul	ure.	
	orrectional				10.00			School (K		- K 10\				
Street Address									er 8 (Other tha	III N-12)	aa bom	~~ ~	ta \	
Highbridge Rd.	(off RT 130)								mercial building			(6.)	
						-		Square Feet	# of Floo	ors	lldg. Ag			
City (5)		County (6)	Cou	inty (Cod	e (7)	1	100000		1		30+		
Yardville, NJ		Mercer						Current Use (F	Prior if being d	emolished)		8		
raravino, no								Correctional						
Name of Monitorin	a Firm Hired	by Building Owne	er (8)		A	SCN	No.	Name of Abate	ement Contrac	tor (9)				
Environmental	Connection	i	, ,					Bristol Envir	ronmental, l	nc.			Company of the last	
Street Address	oonnoono.						***********	Street Address	3					
120 N. Warren S	St.							1123 Beaver	Street			0 154		
			-				ni Mesanesan	City, State & Z	ip Code					
Trenton, NJ 086								Bristol, PA 1	9007					
		Firm	Telep	hone	Nu	ımbe	r	Telephone Nu	mber	License N	lumber			
Ryan Broadwat	er		609-3	392-	420	0		(215)788-604		00509				
		Scheduled Com	pletio	n Da	te (11)		Name of OSH						
		(Rev #		ONI				Bristol Envi	ronmental Ir	ic.				
Occupancy Status	During Abat	ement (Check on	ly one	9)				Street Address						
Facility Clo	osed/Vacated	I During Entire Pe	eriod (dA to	ate	ment	t	1123 Beaver				48001m0020		
Abatemen	t Performed	Outside of Norma	al Hou	ırs –	7ar	n to	3pm	City, State & Z	Zip Code					
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										ntainment with N	vegative	Pres	sure	E
≥3 sf or ≥3	3 If		\boxtimes			ation			Mini-En					
☐ ≥160 sf ≥2	260 If			Dei	mol	ition				ag Procedures		_		
									Non-Ex	empted and No				
	Location of	13		Loca				Description		Amount	Ab	atem	ent I	ype
A11774000				nally		ed		Asbestos-Cont		(Specify SF or LF)			m	
				olely				Material (AC (i.e., thermal sy		SF GILF)	교	70	nc	E
TC		2	Main			P. SERVICE	i	nsulation, surfac			Remova	Repair	sde	dsc
			Cusii	(12)				or other miscella			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	=	Encapsulate	Enclsoure
	(13)		Yes	No		I/A		#1 ##U#1 11015.55					le le	
0)/11				Ø	+	7	P	ipe insulation	fittings	32 LF		П	П	П
GYM			H	H	+	=	•	Wrap and				T	П	
			H	M	+	=		Plaster		4 LF			F	ī
Holding Tank			⊢		+	\dashv		Plaster		25 SF			Ħ	Ħ
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			Ц	님	11	4					H	ዙ	H	片
				ļļ				Outin Varia	Nome of Dec	istered Landfill				
Name of Register	red Waste Ha	uler		0.0000				Cubic Yards	Name of Reg	listered Landilli				
				1000	099	er ID	NO.	of Waste 1 Cu yd	Grows Lan	dfill				
	imental, inc	;. 			UJ	0	-		City, State	<u> </u>				
City, State								Disposal Date	Morrisville,	ΡΔ				
Bristol, PA		1020		1=				Ci	MOTI IS VIII C		Date	-	VIVIO	
					itle			Signature		, ,	100000000	30/1	1	
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to N.J.A.C. 8:60 and 12:120)

CP#2199

Date of Notification			Na	ame (of Bui	Iding O	wner / Operator artment of Cor	(2)	56	E I W	B			
· · N-66-1	Type Notification		St	reet	Addre	Depa	irtifient of Cor	rections				111		
Agencies Notified	Type Notifica	ation	(4) (2) (2)		x 11			1111	JAI.	- 6 201	2	UI		
	☑ Initia	ì				Zip Co	ode	7 10 6	1	0 201		_		
Branch .						NJ 086								- 1
M DOL					, .				ASBEST	TOS CONTROL	8			
M DOH	1000000	57(1)(3)	N	ame	of Co	ntact			L	ICENSING Te	lephor	e Nu	mbe	r
			J	osep	h E.	May		450	Secure of the second	C				
			according to				DAMATION	-						
					ILII	YINFO	ORMATION	h. (4)						
Name of Facility W	here Abatem	ent is Taking Pla	ace (3)				Type of Facilit							-
	rrectional							ter 8 (Othe	rthan K-1	2)				
Street Address								privata 8	commerc	ial buildings	home	e et	~)	
Highbridge Rd.	(off RT 130)												0.,	\dashv
							Square Feet	1000000	f Floors	BIG	g. Age			
City (5)		County (6)	Cou	nty C	ode (7)	100000		1			30+		$\overline{}$
Yardville, NJ		Mercer					Current Use (I		ng demoli	shed)				
l'aldville, ite							Correctiona							
Name of Monitoring	a Firm Hired I	ov Building Own	er (8)		ASC	M No.	Name of Abat	ement Co	ntractor (9	9)				
Environmental (Connection	oy Damaning a mi	(-/				Bristol Envi	ronment	al, Inc.					
	Jointection				-		Street Addres	S						
	4						1123 Beave	r Street						
	Type Notification Notified Type Notification PA						City, State & 2	Zip Code						
Tranton N 1 086	Type Notification Type Notification Type Notification Type Notification Initial Amended Rev1 12/30/11 Cancellation Type Notification Amended Rev1 12/30/11 Cancellation Type Notification Initial Amended Rev1 12/30/11 Cancellation Type Notification Initial Amended Rev1 12/30/11 Cancellation County (Initial Cancellation County (Initial Cancellation County (Initial Cancellation County (Initial Councellation County (Initial County (Initial Councellation County (Initial County						Bristol, PA							
Preinct Manager fo	or Monitoring	Firm	Telepl	none	Num	per	Telephone Nu			License Nu	mber			
Project Manager ic	Initial Amended Rev1 12/30/11 Emergency Cancellation				200		(215)788-60	40		00509				
	Initial Amended Rev 12/30/11 COH CAN CANCELLATION Amended Rev 12/30/11 CANCELLATION CANCELLATION OF Facility Where Abatement is Takin State Correctional Address ridge Rd. (off RT 130) COUNTY (Mercer Of Monitoring Firm Hired by Building Conmental Connection Address Warren St tate & Zip Code On, NJ 08608 Manager for Monitoring Firm Broadwater Uled Start Date (10) 12/30/11 ancy Status During Abatement (Chr Facility Closed/Vacated During Er Abatement Performed Outside of Describe: 5 PM to 1:30 AM Facility Occupied During Abatement of Work (Check all that apply) ≥3 sf or ≥3 If ≥160 sf ≥260 If Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13) Ing Tank Correctional Address County (Mercer County (Mercer Occupied Data (County (Mercer Occupied			Market Street, Street, St.)	Name of OSH							
	DOL				,	,	Bristol Envi							
12/30/	During Abote	mont (Chack or	1/5/				Street Addres							
Occupancy Status	During Abate	During Entire P	eriod o	of Aba	ateme	ent	1123 Beave							
	Seu/vacaleu	outside of Norm	al Hou	ire _	7am t	o 3pm	City, State & 2							
V_S			ai 1100	113	r ann c	o opini	Bristol, PA							
							Bristoi, I A	13001						
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Scope of Work (CI	heck all that a	apply)						☐ Ful	I Containn	nent with Ne	gative	Pres	sure	
				Dor	ovati	on			ni-Enclosu		•			
			×					The state of the s		rocedures				
≥160 sf ≥2	:60 If		\Box	Der	nolitic	ori		No.	n-Evemnt	ed and Non-	Friable	Proc	edu	re
8000							Description	K-M	T	Amount		teme		
				ocat			Description Asbestos-Con			(Specify	7,00	T		ypo
				nally l	Used		Material (A			SF or LF)			m	m
			Maint				(i.e., thermal s				Remova	R	าса	Enclsoure
10		4	Custo				insulation, surface				Non	Repair	psc	sou
			0000	(12)			or other miscell				<u>a</u>	=	Encapsulate	Jге
	(10)		Yes	No	N/A								w	
				\boxtimes			Pipe insulation	fittings		32 LF				
GYM			H	H	H	+	Wrap and			-	T			
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Holding Tank				\boxtimes	누片	-				25 SF	T	X	Ħ	Ħ
1 ST Floor Class	room		141	X	┼屵	-	Plaste	<u> </u>		23 31	+片	H	Ħ	Ħ
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Name of Register	ed Waste Ha	uler		UNDERSONAL PROPERTY.			Cubic Yards	Name of	Registere	ed Landfill				
Tallio of regions				U (21)		ID No.	of Waste							
Service Transp	ort Inc.			20	990		1 Cu yd		Landfill					
City, State							Disposal Date	City, Sta						
New Castle, DE	T.						1/5/12	Morris	/Ille PA					
	Completed By (Print or Type)						Signature				Date			
[] [[[[[[[[[[[[[[[[[[P	rojec	t	(8)	1 /	-		12/3	30/1	1	
GIIIO FIZZIGO	no Pizzigoni					jer	1	103						

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

Data of Notification	(4)					<u>C.</u> 8:60 an	1	ALL PROPERTY.	CR #2	197	G parameter	and the
Date of Notification	12/20/11		Na S-	ame of B	Building	Owner / Opera	tor (2		EGFT	N/I P	Princip	7
Agencies Notified	Type Notific	cation		reet Add		artment of C	orrec	tions	E W E	WE	11)	-
☐ EPA	222		1000000) Box				IIM			7// //	
DEP DOL /366	Initia		2000		& Zip C			10 0	JAN - 6	2012		
 ✓ DOL /366 ✓ DOH /359 		ended			, NJ 08	620			0	2012	5	10150
DCA DCA		ergency cellation	()	me of C					Approve	Telepho	one Ni	mber
	L Can		Jo	sepn i	E. May				ASBESTOS CONTI	W.		3.00
Alama of E114 146				FACILI	TY INF	ORMATION	1	OFFICE OF THE PARTY OF THE PART				
Name of Facility Wh Garden State Co	rrectional	ent is Taking Pl	ace (3)			Type of Fac			The state of the s	Constitution of the same		-
Street Address	reotional			-					than K-12)			3415
Highbridge Rd. (d	off RT 130)							ommercial buildi	nas hom	es etc	.)
						Square Fee		# of F		Bldg. Ag		•-)
City (5)	County (Mercer ing Firm Hired by Building I Connection St Code 8608 for Monitoring Firm atter Date (10) Scheduled		Coun	ty Code	(7)	1000	00	-	1		30+	
Yardville, NJ		Mercer						r if being	demolished)			
						Correction						
Name of Monitoring	Firm Hired b	y Building Own	er (8)	AS	CM No.	Control of the contro	ateme	ent Contr	actor (9)		100	
Street Address	onnection					Bristol En		mental	, Inc.			
120 N. Warren St						Street Addre		root				
City, State & Zip Coo	le	March 2007	***************************************			City, State 8		1100000		1000		
Trenton, NJ 0860						Bristol, PA						
		irm	Telepho			Telephone N		er	License	Number		95
Ryan Broadwater Scheduled Start Date	The second secon	Sabadulad Cam	609-392		-	(215)788-6 Name of OS			00509			
12/30/11	(10)		12/31/1)	Bristol En			Inc			
Occupancy Status D	uring Abater			·	-	Street Addre		montai				
☐ Facility Close	ed/Vacated [During Entire Pe	eriod of A			1123 Beav		reet				
			Hours -	7am t	o 3pm	City, State &	Zip C	ode				
						Bristol, PA	1900	07				
Facility Occu Scope of Work (Chec												
roope or vvoik (Onec	m all that ap	Piy)						Full Co	ontainment with	Vegative I	Pressu	re
≥3 sf or ≥3 lf			⊠ R	enovati	on		П		nclosure			. •
≥160 sf ≥260	If		□ D	emolitio	n			Glove	Bag Procedures			
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	ation of s-Containing		Is Loc Normally			Descriptio		_	Amount	Aba	tement	Туре
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	Facility		Custodia			sulation, surfa	cing, \	/AT		Removal	Repair	Encapsulat
	(13)		Yes No			or other miscel	laneou	ıs)		a l	7	Encansulate
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ame of Registered V	Vaste Haule		1000	IJDEP V lauler ID	- NO.	Cubic Yards of Waste	Nam	e of Reg	istered Landfill			
ervice Transport	Inc.		1000	0990		Cu yd	A&I	. Salvag	ne .			
ty, State						Disposal Date		State			-	
ew Castle, DE						/2/12		on, Oh	io			
ompleted By (Print or	r Type)		174 (0.00)	itle		ignature	2			Date		
ino Pizzigoni			1000	roject		01- //	/		2	12/20	/11	
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CT1135	-1					(UB					

GI11352

NOTIFICATION OF ASBESTOS ABATEMENT

		(Purs	uant to NJAC	3 8:60-	7 and 12:120-7) [Fig. 17		M E	1	11	
Date of Notification 1/2/12	on (1)		Name of Bu Anna V		Owner/Operator n	(2)		V lle		The same of the sa	
Agencies Notified	Type Notifi	cation	Street Add	ress	· · · · · · · · · · · · · · · · · · ·		JAN - 6 2	0010	4	5 5 5	
[]EPA	[X]Initia		84 Cur	tis	Street		JAN - D Z	UIZ	i	1	
[]DEP	NOTIL	ication	City, Stat			10.6	A THE STATE OF THE	171 0	i	1	2000-10
[X]DOL	[]Amende Notif	d ication	Bloomf	ield	, NJ 07003	3	ASSESTOS CONTI LICENSING	IUL &	N. Park Line Turk		
[X] DOH	f Immon		Name of Co	ntact		Teleph	one Number	W lend	11/	-	
[]DCA	[]EMERGE		Anna	Vaug	hn						
			FAC	ILITY D	INFORMATION						
Name of Facility Wh	nere Abatemen	t is Tak	ing Place (3	3)		Type of Faci	ility (4)				*
Private						[]School					
Street Address		•					apter 8 (Other (i.e., privat				
84 Curtis St	treet						buildings, ho	mes,			
City (5)		County	(6)	Cou	nty Code (7)	1800	2	389	50	nge	
Bloomfield		Ess	sex	(ST	ATE USE ONLY)		(Prior if bei			shed)
Name of Monitoring	Firm hired b	y Buildir	ng ASCM No.		Name of Abate		to the state of th				_
Owner (3) N/A			67			ianagemen'				eer2614100.50	
Street Address					Street Addres 86 Chris	stopher S	t.				
City, State, Zip Co	de				City, State,						
					Montclai	r, NJ 07	042				
Project Manager for	Monitoring :		elephone Num	ber	Telephone Num (973)744			cense		oer	
	(10)			/**							
Scheduled Start Dat 1/11/12		1/12/1	oletion Date	(11)	Name of OSHA I	Monitor					
			∠ Dav Yea:	~	N/A						
Occupancy Status Du	ring Abatemen	nt (Check	only one)		Street Address	s					
[X]Facility Clo of Abatement []Abatement Pe	ıt										
	cribe: «OffHou	rs Descr	ipt»	LLY	City, State,	Zip Code					
Scope of Work (Chec			y Descript»								
[X]>3 sf or []>160 sf	≥3 1f	[[X]Renovatio		[]Mini- [X]Glove	Enclosure bag Procedure		Pressi	ıre		
			Is	T	[]Non-F	riable Proced	ure	Aha	teme	nt T	POV
Location			Location Normally		Descriptio					E	E
Asbestos-Con		1 -	Used	1	Asbestos-Cont Material (Amount	R	RE	C	C
Material TO BE AB			Solely By Main-		(i.e., thermal		(Specify SF or	M	PA	A P	P
In Faci	lity	C	tenance/ ustodial taff (12)		sulation, surfa or other miscel	acing, VAT,	LF)	V A L	I R	S U L	S U R
Basement		Yes	No N/A	Pin	e Insulat:	ion	10 lf	X			E
Basement			x	-			70 lf	-F-		х	
basement			-	Dal	e Heating	ripes	70 11	1		Λ	
				15.	: - v .	ht	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	. 1 1			
Name of Registered V AZTECH MANAG		NC H	JDEP Waste auler ID No. 7040	1	ic Yards Waste .25	G.R.O.W	istered Landf: .S.	.11			
City, State			7040	Die	posal Date	City, State			-	-	
Montclair, NJ	07042			H CONTRACTOR	/13/12		ille, PA	1906	7		
Completed By (Print	or Time! m:	tle			lei annui			Da.+ -		_	
Constantine V		reside	ent		Signature			Date 1/2/1	.2		

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Date of Notification (1)						Owner/O	1	1 1 1 1 Kingson and American	The second second		!					
1/3/12				vid .	And	cews		IIII- IAN	- 6 2012		a de la constante de la consta					
Agencies Notified							- 1	H WAN	0 2012	1						
[]EPA	[X]Initial		449 Baldwin Street					j.	entended and the second and the second							
[]DEP	Notifica	City	State	e, Zip	Code	- 1		OS CONTROL & CENSING		1						
[X] DOL	[]Amended	100000	Maplewood, NJ 07040					C CONTRACTOR CONTRACTOR AND	CO DOSCOLUES AND ESTABLISHED.	*******	J					
[X] DOH	Notifica	ation	Name of Contact						ne Number				-			
[]DCA	[]EMERGENC	Y			non-non-in-	irews		Tereprio	****		1, 12					
[]Don																
				FAC	LLITY	INFORMAT	ION									
Name of Facility Wr Private	nere Abatement	is Taki	ing Pl	ace (3)			Type of Faci	3 3 3							
Street Address					Vella e	[]Subchapter 8 (Other than K-12) [x]Other (i.e., private & commer-										
449 Baldwin	Street							cial l	ouildings, l	nomes,	etc.)				
City (5)		County	(6) County Code (7)					Square Feet # of Floors Bldg. Age 3000 2 76								
				SEX (STATE USE ONL)												
Name of Monitoring Owner (8)						ement Contractor (9) MANAGEMENT, Inc.										
N/A Street Address			0			Street	Addres									
Street Address							86 Christopher St.									
City, State, Zip Co	ode							Zip Code r, NJ 070	42							
Project Manager for Monitoring Firm Telephone Number N/A						Telephone Number License Number (973) 744-8800 00371										
Occupancy Status Du [X]Facility Clo of Abatement []Abatement Po Hours - Desc	Tear Mor rring Abatement osed/Vacated Du	(Check ring E le of No Descr	Day only ntire ormal ipt»	Year one) Period Facili	:	N/A Street	Address	Monitor s Zip Code								
Scope of Work (Chec [X]>3 sf or []>160 sf	: ≥3 lf	[ovation olition]]]Mini-l	Containment wi Enclosure bag Procedure riable Procedu		e Press	ure					
* £	Is Locati	on		Dass	anintic	n of		Aba	teme	nt :	Type					
Asbestos-Containing Material (ACM) TO BE ABATED In Facility				y n-e/al 12) N/A	ir	Asbest Mate (i.e., t sulation	erial (thermal , surfa	caining	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	NCAPSUL.	NCLOSURE			
Basement					Du	ct Ins	ulat	ion	19 sf	X						
											-	-	_			
		-	-	-				-								
Name of Registered AZTECH MANAG		~ н	JDEP Wauler	ID No.	11.00	bic Yard Waste		Name of Regi		lfill	1		L			
City, State Montclair, NJ	07042				0.000	sposal Da L/16/1		City, State Morrisvi	lle, PA	1906	57		1/2			
Completed By (Print Constantine V		le eside	ent			Sig	nature	1		Date 1/3/						

· Section ...

432

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

Date of Notification (1) January 04, 2012				Name of Building Owner/Operator (2) City of Camden CHECK # 4322								
Agencies Notified Type Notification			City of Camden CHECK # 4322 Street Address									
Ĭ EPA Ĭ	Room 213, City Hall											
DEP NOL	Amended Amendment #_	cluding		ate, Zip Code en, NJ 0810	1-5120	U JAN	6 2012			4		
Ĭ DOH DCA	Program joint mountain					ASBESTO:	Telephone	Number	1			
DCA L	Cancellation			en Perez	TION	LIGH	NSHig—		1 -			
Name of Facility Where Aba	atement is Taking F	Place (3)	ILIT I IN OKNI	TION	Type of Facility	(4)				-		
Dept. of Public Works	Building			School (K-								
Street Address 101 Newton Ave			er 8 (Other than private & comm		ildina	s hom	290					
City (5)						etc.) Square Feet	# of Floors					
Camden						24,000	2		Bldg. Age 75			
County (6) Camden							current Use (Prior if being demolished) Dept. of Public Works Building					
Name of Monitoring Firm His	ASCN	/ No.	Name	e of Abatement Contractor (9)								
USA Environmental						ade Environmental, LLC						
Street Address 344 West State Street					11.000000000000000000000000000000000000	t Address S. Lippincott Ave						
City, State, Zip Code Trenton, NJ 08618	West of the second			City, State, Zip Code Maple Shade, NJ 08052								
Project Manager for Monitori Bill Weisgarber	Telephoi 609-74	ne No. 13-0493	10,000,000,000,000	ohone No. License No755-0099 00842								
Start Date (10) January 13, 2012	ompletion i 7, 2012	Date (11)	Name EMS	e of OSHA Monitor SL								
Occupancy Status During At		Street Address										
Facility Closed/Vacated	107 Hadden Ave											
Abatement Performed (Other – Describe:	ırs			State, Zip Code stmont, New Jersey 08108								
Scope of Work (Check All Tr	hat Apply)				-					- 114.50		
≥3 sf or ≥3 If ≥160 sf or ≥260 If		vation	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
	ation			140II-Exemple	d () and Non-1	Abate			t			
Location of		Norm	ally		escription	of	4		Туре			
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (12) (12) Used So Mainter Custodia (12)			ance/			laterial (ACM) insulation,	Amount (Specify			Ē	ш	
				sur	acing, VA	T, or	SF or LF)	Remova	Repair	caps	Enclosure	
(13)		Yes No	N/A	otrier	miscellan	eous)		val	¥	Encapsulate	sure	
Evidence Storage-R	ear Room		XXX	Pip	e Insulat	tion	6 LF	xxx	-			
Evidence Storage-Rear Room			XXX		e Insulat				xxx			
Name of Registered Waste H	Hauler	\perp	NJDEP Wa	aste Cubi	c Yards	Name of	Registered Land	Ifill	L			
				No. of W		Grows Landfill						
City, State Mount Holly, New Jerse		Disp	Disposal Date City, State Tullytown, PA.									
Completed by Title William Lynch Owner				Signature Dat				Date	THE COLUMN TO SERVICE AND ADDRESS OF THE SERVIC			
William Lynch		4	re	ei O.	Lund	Januar	y 4, 2	2012	8 1			

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

Date of Notification (1)				Name	of Building	Owner/Onerator (*	2) 177	1 12 10 1		- 100 T					
1 / 4 / 12					Name of Building Owner/Operator (2) THE CLAYTON FAMILY, LLC										
Agencies Notified	on		Street Address												
₩ EPA			219 LAKE AVENUE IJAN - 6 2000												
DEP DCA (NJAC 5:16)			City, State, Zip Code												
	nt# (including	HEAD	NJ 08742	1				Lane .	1						
DCA	1)			Telephone Numbe											
(NJAC 5:23-8)	☐ Cancellatio	n		7.	JIM CLAYTON										
FACILITY INFORMATION												+			
Name of Facility Where Abatement is Taking Place (3) Type of Facility (4)															
			0.00	1.7											
FORMER A&P	CKOCE	KY 210	KE	School (K-12) Subchapter 8 (Other than K-12)											
	- A best.:	_				Other (i.e., private & commercial buildings,									
City (5)	D HAFUO	t				homes, etc.)									
	~					Square Feet # of Floors Bldg. Age									
POINT PLEA	SANT			10		15,000 + 1 50 + yrs						S,			
		9		Coun	ty Code (7)	7)(STATE USE ONLY) Current Use (Prior if being demolished)									
Name of Monitoring Firm H	liend by Duildie		D) [ASCM I	VI-	FORMER GROCERY STORE									
	ig Owner (NO.	Name of Abatement Contractor (9)												
NIA Street Address						FINISHING TOUCH ASBESTOS ABATEMENT CORP., INC.									
						17 THOMPSON STREET									
City, State, Zip Code						City, State, Zip Code									
						WEST LONG BRANCH, NJ 07764									
Project Manager for Monito	oring Firm		Tele	phone I	No.	Telephone No. License No.									
Alk						732-222-8372 00040									
Start Date (10)		neduled C				Name of OSHA Monitor									
1 1 21 1	12		24	_ / <u>I</u>		Alu									
Occupancy Status During	Abatement (Cl	heck only o	ne)			Street Address	Wilder Street								
Facility Closed/Vacated															
Abatement Performed (Outside of Nor	mal Facility	Hour	s - Des	cribe	City, State, Zip Co	ode		est two ex-						
Time of Abatement:	AM	_PM/	_PIVI-	<u> </u>	4M										
Scope of Work (Check all t	that apply)														
≥3 sf or ≥3 lf		D Re	novati	on		Full Con	tainment with Neg	gative Pressure							
≥160 sf or ≥260 lf		☐ De	0.000			Gloveba	g Procedure								
						Non-Exe	mpted (*) and No	n-Friable Procedure		161777					
			Locat			Abatemen					nt Ty	pe			
Location of		1	iorma d Sole			Description of			R	R	т	ш			
TO BE ABATED Mainten						stos Containing Ma rmal systems insula		Amount (Specify		Repair	nca	nclo			
IN Facility Custodia						VAT, or	***	SF or LF)	Removal	7	Encapsulate	Enclosure			
(13)		Yes	No	N/A		other miscellane	ous)				ate	· ·			
MAIN FLOOR				×	TAY		-	6,4755ft.	N	П	П	П			
Title (COOK					IMI			जान्डन्ता.		귀	H	금			
										믜	븨	ᆜ			
									Ш	Ш	니	Ш			
Name of Registered Waste Hauler NJDEP Waste						Cubic Yards of	Name of Regis	stered Landfill							
SAKOUTIS BROTHERS DISPOSAL 21243					No.	Waste GROWS NORTH LANDFILL									
City, State						Disposal Date									
COLTS NECK, NJ						1-25-12	MORRISVILLE, PA 19067								
Completed By (Print or Type) Title						S/ghature /	S/ghature / / Date								
JOSEPH P. MILLER PRESIDENT						1/1 M//	10/2		·4-	12					
JOSEPH F. MILL	EK	1112316				MILL	<i>y</i>			. , ,		-			

ASB-41 JUL 01

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

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 01/03/2012 Bergen Engineering Co. Agencies Notified Type Notification Street Address 375 Murray Hill Parkway **EPA** Initial City, State, Zip Code × DEP Amended ASBESTOS CONTROL × DOL Amendment # East Rutherford, NJ 07073 × Emergency (including Name of Contact DOH justification) James O'Donnell DCA Cancellation FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, 1 Exchange Place X etc.) City (5) Square Feet # of Floors Bldg. Age Jersey City County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) Hudson Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. VMC Company Inc. Street Address Street Address 208 Piaget Ave. City, State, Zip Code City, State, Zip Code Clifton NJ 07011 Project Manager for Monitoring Firm Telephone No. License No. Telephone No. 973-253-8828 00704 Start Date (10) Name of OSHA Monitor Scheduled Completion Date (11) 01/06/2012 01/05/2012 VMC CO inc. Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Renovation Full Containment with Negative Pressure × ≥160 sf or ≥260 lf Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Туре Normally Description of Location of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Encapsulate Maintenance/ Enclosure (i.e. thermal systems insulation, TO BE ABATED (Specify Remova Repair **Custodial Staff?** SF or LF) In Facility surfacing, VAT, or (12)other miscellaneous) (13)Yes No N/A 100 LF Level B-3 X Pipe insulation VAT 100 SF Garage entrance X

NJDEP Waste

Hauler ID No.

05409

Title

President

Cubic Yards

Disposal Date

Signature

of Waste

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

IESI

City, State Bethleheem, PA

Name of Registered Landfill

Date

Newark Carting

City, State

Newark NJ

Completed by

Voytek Roszkowski

Name of Registered Waste Hauler