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Date of Notification (1) 01/03/17					f Building (Realty A				1.1		Japan & president		-35-			
Agencies Notified	Type Notification			Street A						1	JAN	6	20	17		lak!
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EPA DEP DOL	Amended				ate, Zip Co		24				and a society					
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DOH DCA	justification) Cancellation				f Contact Gottlieb					le	lephone I	Numb	er			
	Carlochation				LITY INFO	RMATI	ON									
Name of Facility Where	Abatement is Taking	Place (3)	.,,,,				Туре	of Facility	(4)	187					
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Street Address									Subchapte Other (i.e.	r 8 (Oth	ner than k	(-12)	autile	dinge	hom	00
NE River Road &	East State Street							15.71	etc.)			Siciai				55,
City (5) Camden, NJ 08103	5							Squar	re Feet ,000	1	of Floors		1	ldg. A 38	(ge	
County (6)					Code (7)			Curre	nt Use (Pr	ior if be	ing demo	olished	1)			
Camden				(STATE	USE ONLY)	-			ndoned							
Name of Monitoring Firm Environmental Tes		wner (8)	ASCN n/a	A No.				tement Co tos Abat							
Street Address	rear and						Street A									
413 N. Black Horse	e Pike						71/25/07/20	to reserve	eral Stre	et			_			
City, State, Zip Code Runnemede, NJ 08	0070						City, St			_						
Project Manager for Mor				Telepho	no No		Telepho		NJ 0810	<u> </u>	License	o No	_	100		
Howard Zenobi	intorning i iiiii				B2 1311		856 6		(5)		01303					
Start Date (10)		Schedul	ed Cor		Date (11)				A Monitor		0100			-		
01/14/17		03/01/					Self r	nonit	or							
Occupancy Status Durin	g Abatement (Check	Only O	ne)				Street A	Addres	SS				1			
Abatement Perform	ated During Entire Pened Outside of Norma	riod of	Abater y Hour	nent s			City, St	ate, Zi	p Code				_			
Other - Describe:						_										
Scope of Work (Check A ≥3 sf or ≥3 If ≥160 sf or ≥260 If	Ali That Apply)	-	Renova Demoli				X	Min Glo	l Containm il-Enclosur vebag Pro n-Exempte	e cedure	000000 0000				e	
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Location			Norma ed Sole				scription							1)	/pe	
Asbestos-Containing TO BE AB In Facil (13)	ATED (lity	Ma	intena todial (12)	nce/ Staff?		thermal surfac	aining Ma systems cing, VAT niscellane	insula , or		(5	Amount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A											e	
Entire r	roof			X		Roofi	ng mate	erial		135	,000 SF	F :	X			
South and west pa	irts of structure			Х			TSI			7	26 LF		x			
West, south & east	parts of structu			Х			VAT			3,7	750 SF		x			
West part of			5	Х			noleum			30.00	00 SF		ĸ			
Name of Registered Was			01 0	JDEP W lauler ID		Cubic of Was					ered Land					
Voyager Trucking C	Corporation		100	033932	1000000	852			Comm	onwe	alth Env	viron	me	ntal	Syst	em
City, State Newark, NJ						Dispos	al Date ing		City, Star Hegins	te					18	
Completed by		Title				S	ignature	1	1	NA 7/15/55		Date				
Jeff Yekenchik		Own	er			-		1/2	1			01/0	2/-	17		

Date of Notification (1) 01/03/17				Building			5 50			r.ii			11.00		-
		-	Street A	Realty A	ASSOCIA	tes LLC					17				
Agencies Notified Type Notification	1			_{aaress} opper F	Soad				-	-4;	JAI	V	6	20	217
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DOH justification				Gottlieb					1616	phone	IVUITIDE				
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Name of Facility Where Abatement is Tak	ng Place (3)				According to the last of the l	Туре	of Facility (4)							
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NE River Road & East State Stre	eet						1/51	Other (i.e. pri etc.)	vate &	comme	ercial bi	nild	ings,	hom	es,
City (5)							Squar	e Feet	# of	Floors		BI	dg. A	ge	10-20-2
Camden, NJ 08105							135,		1			8	8		
County (6)				Code (7) USE ONLY	2			nt Use (Prior	if beir	ng demo	olished)				
Camden Name of Monitoring Firm Hired by Building	0		- 50		-	N-		ndoned		(0)					
Environmental Testing Consultar			ASCN n/a	1 No.				ement Contr tos Abater		A CONTRACTOR OF THE PARTY OF TH					
Street Address	11.5		II/a			Street A			пеп	LLU					
413 N. Black Horse Pike								s eral Street							
City, State, Zip Code			***	145		City, Sta	(10003-17))								
Runnemede, NJ 08078								NJ 08105							
Project Manager for Monitoring Firm			Telephor	ne No.		Telepho	one No),		License	e No.				12/20/20
Howard Zenobi			856 48	32 1311		856 6	30 3	288		0130	3				
Start Date (10)	1		npletion [Date (11)				A Monitor							
01/14/17	03/01/				-	Self n	nonit	or							
Occupancy Status During Abatement (Che	ck Only On	e)				Street A	Addres	S							
Facility Closed/Vacated During Entire	Period of A	baten	nent			01: 0:									
Abatement Performed Outside of Nor Other – Describe:	mai Facility	Hours	5			City, Sta	ate, Zi	p Code							
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 If			47			x			M		_				
≥3 \$1 or ≥3 11 ≥160 sf or ≥260 lf	_	enova						Containmen i-Enclosure	t with	Negativ	e Press	sure	9		
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	7200						NOF	-Exempted () and	Non-F	nable P		Abate	Contract Contract	
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Location of Asbestos-Containing Material (ACM)	Use	d Sole	ly by	Asbes	Des tos Conta	cription o		(ACM)	Ar	nount		T			
TO BE ABATED	1111	ntena odial S			thermal s	systems	insula		(S	pecify	Z e	1	R	nca	Enc
In Facility (13)		(12)				ing, VAT iiscellane			SF	or LF)	Kemova		Repair	Encapsulate	Enclosure
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				1400000	TIFICA		2500000		.000.001	nanolal von con		4	_		
West side of structure			X		Transite	wall p	anels	3	60	0 SF	Х	1			
South exterior side of structure			X			site deb	oris			SF	x				
Name of Registered Waste Hauler		1000	IJDEP W lauler ID		Cubic \ of Was			Name of Re							
Voyager Trucking Corporation		100	033932			rtedono	otha	Commor	iwea	Ith En	vironm	ner	ntal S	Syst	em:
City, State					Disposa			City, State							
Newark, NJ					Ongoi			Hegins, I	PA						
Completed by	Title	200			Si	gnature	1	1	(54-5-27)		Date				
Jeff Yekenchik	Own	er					1/2	1			01/02	2/1	/		

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

		(Pi	ursua	nt to N	JAC 8:	60 and 5:16)				N N		-	
			Nam	e of Bu	ilding Ov	vner/Operator	(2)	Homes					
ate of Notification (1)	/4/17		A STATE OF THE STA				Angelo	ne Homes	JAN	U 20	11		40
	Type Notification		Stre	et Addr	ess		7 Mari	on Rd Eas				_!	
gencies Notified	I Initial								The second second			8.	
EPA DEP	Amended Amendment #		City	, State,	Zip Code	Э Р-	rinceto	n. NJ 0854	0 ASSESTOS	160.000		_	
DOL	☐ Emergency (include	ling	_		- ntoot		IIICCIO	Te	lephone Number				
DOH	justification) Cancellation		Nar	ne of Co	Tosen	h Angelor	ne	_	<u> </u>			_	
] DCA	Carlocilation		1-	A OIL IT		RMATION							
		(0)		ACILIT	TINFOR	WIATION	Туре	of Facility (4)					
ame of Facility When	e Abatement is Taking P Reside	ace (3)						hool (K-12)	thor than K-12)				-
	Reside	Шпат					St.	ibchapter o (Cherner (i.e., priva	other than K-12) te & commercial b	ouildings	S.,		1
Street Address							l ho	omes, etc.)	# of Floors	Bldg. /			1
									7)+/-		
City (5)	Princeton,	NJ 08	540				.	2400	if being demolished			_	1
. (6)	Timeetox			County C	Code (7)	(STATE	Curre	ent use (Prior	II being demonstra			_	
	Princeton		_	JSE ÓN	L 17 _	Name of Abat	ement Co	ontractor (9)					
Name of Monitoring F	irm Hired by Building Ov	vner	AS	CM No.		Name of Aba	tevens]	Environme	ental Services	, Inc.			
(8)	MECS		- _			Street Addre							
Street Address						Silectridaio		PO Bo	x 322				
	PO Box 341				-	City, State, Z	ip Code		277 00501				
City, State, Zip Code	C	8515				O.,,, -		Allentown,	NJ 08501				-
	Crosswicks, NJ 0	0313 T	Teleph	none No		Telephone N	0.	100	License Ne-	0493			
Project Manager for	Weisgarber		(609) 298-	4070		259-9			0475			_
	W elsgal bel	uled Co	_	-		Name of OS	HA Monito	or ME	CS.				
Start Date (10)	1 222		20/1					IVIL					_
1/16/1	During Abatement (Chec	k only o	ne)			Street Addr	ess	PO Bo	ox 341				_
The second of th	I tool During Entire Pe	riou oi r	materi	nent		City, State,	Zin Code						
Abatement Perfo	ormed Outside of Norma	Facility	Hours	5		City, State,	2ip 0000 (Crosswicks	s, NJ 08515				_
Other - Describe	e:												
Scope of Work (Ch	eck all that apply)					□Fu	II Contain ni-Enclosi	ment with Neg	gative Pressure				
		Re	novatio	on					- Frieble Brocedi	ıre			
≥160 sf or ≥260) If	De	molitio	0		No	on-Exemp	ted (*) and No	n-Friable Procedu	Al	oatem	ent	
			ocatio								Туре		
			ormally I Solel			Descrip	tion of	I (ACM)	Amount			m	
Loc	ation of lining Material (ACM)	Mai	ntenan	ce/	Asbe	stos Containir e., thermal sys	tems insu	liation,	(Specify	Rer	공	Encapsulate	[
TO BE	E ABATED		ustodia Staff?	21	(1.0	surfacing other miso	VAI, OF		SF or LF)	Remova	Repair	sula	
IN	Facility (13)		(12)			other miso	ellarieous	,		2		ite	
	S# 2905#	Yes	No	N/A					25.10	100		-	-
		+	-	×	Т	hermal Pi	pe Insu	lation	25 lf	×			+
	Garage	-	-	×			AT		750 sf	×			+
Lower L	evel Basement	-	-	1~						-			+
		-	-	-	-								
		-	1	NJDEP	Waste -	Cubic Ya		Name of Re	gistered Landfill	4.044	1		
	red Waste Hauler			Hauler I	D No.	of Waste	IJ		GROWS L	andfil	<u> </u>		_
Name of Registe			100	1.8	292_			City, State					
Name of Registe Stevens En	vironmental Servi	ces, Ir	<u>.</u>			Disposal	Date	City, State		D. A.			
Name of Registe Stevens En	vironmental Servi		<u> </u>			Disposal 1/20		City, State	Morrisvill				=
Stevens En	vironmental Servio		<u> </u>			1/20		City, State	Morrisvill Date		4/17		=

ASB-44 MAR 00

^{*} Do not use this form for asbestos licensure exempted-activities.

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 9 19 Sears Holdings Agencies Notified Type Notification Street Address **⊠** EPA 3333Beverly Road ☑ DOLWD City, State, Zip Code ☑ DHSS Amendment #5-1/3/17 Hoffman Estates IL 60179 ☐ DCA ☐ Emergency (including Name of Contact (NJAC 5:23-8) justification) Telephone Number ☐ Cancellation FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Sears #1434 (Willowbrook Mall) School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 50 US Highway 46 homes, etc.) City (5) Square Feet # of Floors Bldg. Age wayne 300000 2 76 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Passaic Department Store Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Creative Environmental Solutions BRISTOL ENVIRONMENTAL, INC. Street Address Street Address 39 West 37th Street, 14th Floor 1123 BEAVER STREET City, State, Zip Code City, State, Zip Code New York NY 10018 BRISTOL, PA 19007 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Amarr Soler 212-290-6323 215-788-6040 00509 Start Date (10) 6N SITE 1/3/11 Scheduled Completion Date (11) Name of OSHA Monitor 10 / 3 / 16 BRISTOL ENVIRONMENTAL, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 1123 BEAVER STREET Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: AM- PM/9:00PM-8:00AM BRISTOL, PA 19007 Scope of Work (Check all that apply) ≥3 sf or ≥3 if
 ≥160 sf or ≥260 lf ✓ Mini-Enclosure✓ Glovebag Procedure □ Renovation Demolition ☐ Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Enclosure Removal Repair Encapsulate Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation. (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (12)other miscellaneous) Yes No N/A New Stock Room Area-2ND Floor П Spray-on Fireproofing 980 SF Middle Area of 2nd Floor X Spray-on Fireproofing 1560 SF X Outside New Stock Room Area-2nd X Spray-on Fireproofing 480 SF X Floor Middle area of first floor П \boxtimes Spray-on Fireproofing 3000 SF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste SERVICE TRANSPORT GROUP, INC. MINERVA LANDFILL 20990 30 City, State Disposal Date City, State NEW CASTLE, DE 19720 tbd WAYNESBURG, OH 44688 Completed By (Print or Type) Title Signature Pat Decaro Estimator 1/3/17 ASB-41

State of New Jersey

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

** OFF SITE TUESDAY 1/3/17, ON SITE 1/4/17

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Date of Notification (1) 9 / 1	9 / _	16			11-12-12-12-12-12-12-12-12-12-12-12-12-1	of Buildin ars Holdi	_	ner/Operator (2)		عًا وَا		Ü	10.0
	ype Notifica] Initial	ation				Address 3Beverly	/ Ro	ad	30 P		AN	6	2017	
☑ DOLWD ☑	Amended					State, Zip (-			<u> </u>	LVIA	===//		
☑ DHSS	Amendme	100						s IL 60179						
DCA (NJAC 5:23-8)	Emergen justification	cy (includ on)	ding		Name	of Contac	t			Telephone Nun	nber	. 11		-
] Cancellat				The same of the sa					Exercise to a to		, E.	0.0	38
					FAC	CILITY IN	IFOF	RMATION						
Name of Facility Where Aba			ace (3)					Type of Facility					
Sears #1434 (Willowb	rook Mal	11)							School (K-12) (Other than K-1	21			
Street Address										ivate and comme		ilding	JS,	
50 US Highway 46							0		homes, etc.)					
City (5)				7.5					Square Feet	# of Floors		dg. A	ge	
wayne									300000	2		76		
County (6)					Cour	nty Code (7	r)(STA	TE USE ONLY)	Current Use (Pri		lished)			
Passaic									Department	Store				
Name of Monitoring Firm His			er (8)	ASCM	No.	1000000		ent Contractor (9)					
Creative Environment	al Solution	ons							VIRONMENTA	_, INC.				
Street Address								eet Address						
39 West 37th Street, 14	^{‡th} Floor						100	123 BEAVE						
City, State, Zip Code							100	y, State, Zip Ci						
New York NY 10018								BRISTOL, PA	A 19007					
Project Manager for Monitor	ing Firm				ephone		1	ephone No.	2	License No.				
Amarr Soler	-/-/-				12-290			15-788-6040		00509				
Start Date (10) 60 SITE	1 1	Schedule	d Co				100000	me of OSHA N		1110				
	16	1	- '		<u> </u>	17_	-	RISTOLEN	VIRONMENTAL	_, INC.				
Occupancy Status During Al			34				and the same	eet Address						
Facility Closed/Vacated [*40.000	_	123 BEAVE					-	
Abatement Performed Ou Time of Abatement:						scribe		y, State, Zip Co BRISTOL, PA						
Scope of Work (Check all the	at annly)							J. (1010L, 17	(15001					e: 50
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	- app.y)		Ren Den				6		tainment with Neg closure g Procedure empted (*) and No		ure			
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Location of Asbestos-Containing Ma	terial (ACM	n		Sol	ely by	Ashe	etne	Description of Containing Ma		Amount	Re	Re	m n	En
TO BE ABATE					ance/		e., the	ermal systems	insulation,	(Specify	Remova	Repair	Encapsulate	Enclosure
IN Facility (13)			JUSIC	(12)	Staff?			surfacing, VAT her miscellane		SF or LF)	<u>a</u>	1 38	sula	ure
(13)		Y	es	No	N/A		O.	ner miscenarie	.043)				te	
2 nd floor						Vat/ma	stic			8000 SF				
Elevator Area (1st floor)				Q	\boxtimes	Mastic				20 SF				
1 st Floor Hallway					\boxtimes	Vat/ma	stic	1		150 SF				
st Floor Stockroom]		\boxtimes	Vat/ma	stic			700 SF				
Name of Registered Waste I	Hauler			139	NJDEP N		0.478330	oic Yards of	Name of Regis	tered Landfill				77
SERVICE TRANSPOR	T GROUP	, INC.		F	1auler II 20990		Wa	ste 0	MINERVA	ANDFILL				
City, State		38			20330		Dis	posal Date	City, State	UDO CULTAN	20			
NEW CASTLE, DE 197	20	22.1.1					t	od	WAYNESB	URG, OH 4468	58			
Completed By (Print or Type Pat Decaro)	Title Estin	mate	or				Signature	A.DeC		1/3	11	7	
								1 unc	C1-12 C	17	, ,		Ž	

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) 9 19 / 16 Sears Holdings Agencies Notified Type Notification Street Address 2017 X EPA □ Initial JAN 3333Beverly Road ☑ DOLWD City, State, Zip Code ☑ DHSS Amendment #5-1/3/17 Hoffman Estates IL 60179 ☐ DCA ☐ Emergency (including Name of Contact Telephone Number (NJAC 5:23-8) justification) ☐ Cancellation **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Sears #1434 (Willowbrook Mall) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 50 US Highway 46 homes, etc.) City (5) Square Feet # of Floors Bldg. Age 300000 2 76 wayne County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) County (6) Department Store Passaic Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, INC. Creative Environmental Solutions Street Address Street Address 39 West 37th Street, 14th Floor 1123 BEAVER STREET City, State, Zip Code City, State, Zip Code BRISTOL, PA 19007 New York NY 10018 Telephone No. License No. Project Manager for Monitoring Firm Telephone No. 212-290-6323 215-788-6040 00509 Amarr Soler Name of OSHA Monitor Start Date (10) ON SITE 1/5/17 Scheduled Completion Date (11) 10 / 3 / 16 1 / 20 / 17 BRISTOL ENVIRONMENTAL, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 1123 BEAVER STREET Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: AM- PM/9:00PM-8:00AM BRISTOL, PA 19007 Scope of Work (Check all that apply) □ Full Containment with Negative Pressure Mini-Enclosure ≥3 sf or ≥3 lf
 ≥160 sf or ≥260 lf ☐ Demolition ■ Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Description of Location of Repair Removal Encapsulate Used Solely by Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Maintenance/ (i.e., thermal systems insulation, (Specify TO BE ABATED Custodial Staff? surfacing, VAT, or SF or LF) IN Facility (12)other miscellaneous) (13)Yes No N/A X 360 SF 1st Floor Women's Clothing X Fireproofing X \boxtimes 500 SF 1st Floor Women's Clothing/Shoes Fireproofing Name of Registered Landfill Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Hauler ID No. Waste MINERVA LANDFILL SERVICE TRANSPORT GROUP, INC. . 30 20990 Disposal Date City, State City, State WAYNESBURG, OH 44688 tbd NEW CASTLE, DE 19720 Date Completed By (Print or Type) Title

Pat Decaro

Estimator

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

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Date of Notification (1)	19 /	16	- F			of Building	g Owner/Operator (ngs	2)	RIES	E		j	
Agencies Notified	Type Notific	ation			Street	t Address	7		11-11				
⊠ EPA		20			333	3Beverly	Road		TALL TALL	1	6 2	017	· ·
☑ DOLWD		ALL RESTRICTIONS		94		State, Zip C			1 1 IAT		U L	014	
□ DHSS		ent #4-12	-	6			tates IL 60179				4		-
DCA (ALLAC FIRE ALLAC)	☐ Emergen		ing	+		of Contac			Telephone Num	her.			
(NJAC 5:23-8)	justificati				rearric	or oomeo		and the	10.00		70	W =11	
	5/				FA	CILITY IN	IFORMATION						
Name of Facility Where A			ice (3)				Type of Facility (
Sears #1434 (Willo	wbrook Ma	II)				15		School (K-12) 3 (Other than K-12	2)			
Street Address								Other (i.e., pr	rivate and comme	rcial b	uildin	gs,	
50 US Highway 46								homes, etc.)					
City (5)								Square Feet	# of Floors	В	ldg. A	ge	
wayne								300000	2		76		
County (6)					Cour	nty Code (7	()(STATE USE ONLY)	Current Use (Pri	or if being demolis	shed)			
Passaic								Department	Store				
Name of Monitoring Firm	Hired by Build	dina Owne	er (8)		ASCM	No.	Name of Abateme	ent Contractor (9)					
Creative Environme		270	, ,				BRISTOL EN	VIRONMENTAL	_, INC.				
Street Address							Street Address						- 100
39 West 37th Street	14th Floor						1123 BEAVE	RSTREET	# =				
City, State, Zip Code	, 14 1 1001						City, State, Zip Co					21300	
A. 1	,						BRISTOL, PA						
New York NY 10018			-1-			*1	1	(19007	Tilianana Na				
Project Manager for Mon	itoring Firm		1	48.63	phone		Telephone No.		License No.				
Amarr Soler						-6323	215-788-6040		00509		74		
Start Date (10) ON SIT		Scheduled					Name of OSHA M						
10 / _3_ /	16	_ 1	/ _	20	_ / -	17	BRISTOL EN	VIRONMENTAL	_, INC.				
Occupancy Status During	Abatement (Check onl	y one	:)			Street Address						
☐ Facility Closed/Vacate							1123 BEAVE	R STREET					
Abatement Performed						scribe	City, State, Zip Co	ode					
Time of Abatement: _	AM	_PM/9:0	UPM-	8:0	<u>0</u> AM		BRISTOL, PA	19007					
Scope of Work (Check al	I that apply)												
□ >2 of or >2 If			Renov	vatio	20			tainment with Neg	ative Pressure				
			Demo					g Procedure					
		_					☐ Non-Exe	mpted (*) and Nor	n-Friable Procedu	re			
			Is Lo							Ab	atem	ent T	ype
Location		. 11	Nor sed S				Description of		A	R	R	Щ	m
Asbestos-Containing I TO BE ABA		1.	√ainte				stos Containing Ma ., thermal systems		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facilit		C	ustod		Staff?	(surfacing, VAT,		SF or LF)	laval	-	usc	Sun
(13)		-		12)	T	-	other miscellane	ous)				ate	0
-	2000	Ye	s I	No	N/A				AND THE RESERVE OF THE PARTY OF	4_	_	_	<u>_</u>
New Stock Room Are	a-2 ND Floor]			on Fireproofing		980 SF				
Middle Area of 2 nd Flo]_		Spray-c	on Fireproofing		1560 SF		Ш	Ш	
Outside New Stock R	oom Area-2	and]_		Spray-c	on Fireproofing		480 SF				
Middle area of first flo	oor				\boxtimes	Spray-c	n Fireproofing		3000 SF	\boxtimes			
Name of Registered Was	te Hauler			100	JDEP 1		Cubic Yards of	Name of Regist					
SERVICE TRANSPO	ORT GROUP	, INC.			auler II 2099 (Waste 30	MINERVA L	ANDFILL		06		
City, State							Disposal Date	City, State	19				
NEW CASTLE, DE 1	9720						tbd -	WAYNESB	URG, OH 44688	В			
Completed By (Print or Ty	/pe)	Title	= 13.00==				Signature	75 82 2	/ Da	ate /	,	1,,	,
Pat Decaro		Estim	ator				Patrice	k De Caro	/sl.	12/0	20/	16	R

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

MG CX			(Fu	Suam	LONGA	C 0.00	Jana J. 10	1		41	. 11		1.4
Date of Notification (1) 9 / 19	/ _ 16				of Building rs Holdin		r/Operator (2) E 192		-		
	lotification		-		Address			1:1	JAN	6	5011		
⊠ EPA ⊠ Initi					Beverly				lai.			-	-
☑ DOLWD . ☑ Am	enaea endment #4	12/20	1/16		tate, Zip C				1			2	
<u>⊠</u> 51,100	ergency (inc	And with the last of the last	1	Hoff	man Est	tates I	L 60179	1	MBalay.				
(NJAC 5:23-8) just	ification) ncellation	.aamg		Name	of Contact	t		il.	Telephone Nu	mber			
		•		FAC	ILITY IN	FORM	MATION						
Name of Facility Where Abateme	nt is Taking	Place	(3)					Type of Facility (4					
Sears #1434 (Willowbrook					15			School (K-12)	(O) 1 1	(2)			
Street Address								☐ Subchapter 8 ☐ Other (i.e., pri	(Other than K-	ı∠) ıercial b	uilding	IS.	
50 US Highway 46								homes, etc.)	vate and comm	.0.0.0.			
								Square Feet	# of Floors	В	ldg. A	ge	
City (5) wayne								300000	2		76		
County (6)				Coun	ty Code (7)(STATE	USE ONLY)	Current Use (Price	or if being demo	lished)			
Passaic								Department	Store				
Name of Monitoring Firm Hired b		wner (8)	ASCM I	No.			ent Contractor (9)	INC				
Creative Environmental S	olutions							VIRONMENTAL	., 1140.				
Street Address							et Address 23 BEAVEI	PSTREET					
39 West 37th Street, 14th F	loor					1	State, Zip Co				_		
City, State, Zip Code						No. 150	RISTOL, PA						
New York NY 10018			Tala	nhono l	No		ohone No.	. 10001	License No.				
Project Manager for Monitoring F	ırm		1000000	phone I 12-290		(23	5-788-6040	í	00509				
Amarr Soler Start Date (10) ON SITE (15)	@ School	uled C	4.7	tion Dat			e of OSHA M						
10 / 3 / 16) / _				VIRONMENTAL	., INC.		*		
Occupancy Status During Abater	nent (Check	only o	ne)			Stree	et Address						
☐ Facility Closed/Vacated Durin				ment		11	23 BEAVE	R STREET					
Abatement Performed Outside	e of Normal	Facility	Hou!	rs - Des	cribe	City,	State, Zip Co	ode					
Time of Abatement:AM	PM/	9:00P	M- <u>8:0</u>	<u>JU</u> AM	= /	BF	RISTOL, PA	19007					
Scope of Work (Check all that ap	ply)						⊠ Full Con	tainment with Neg	ative Pressure				
≥3 sf or ≥3 lf		⊠ Re	novat	ion			Mini-End	losure					
≥160 sf or ≥260 If		☐ De	moliti	on				g Procedure mpted (*) and Nor	n-Friable Proce	dure			
		ls	Loca	fion							batem	ent T	ype
Location of			Norma				Description of	of		70	72	m	Ш
Asbestos-Containing Materia	(ACM)			ely by	Asbe	estos C	ontaining Ma	aterial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
TO BE ABATED			intena todial	Staff?	(i.e	e., then	mal systems irfacing, VAT	insulation,	(Specify SF or LF)	ova	=	psu	INS(
IN Facility (13)		000	(12)				er miscellane		0. 0. 0.	-		llate	(D)
(13)		Yes	No	N/A							-	LU .	
2 nd floor				\boxtimes	Vat/ma	stic	111		8000 SF		-		
Elevator Area (1st floor)				\boxtimes	Mastic	\$100			20 SF	×			
1st Floor Hallway	12			\boxtimes	Vat/ma	stic			150 SF				
!st Floor Stockroom					Vat/ma	stic	**		700 SF	\boxtimes			
Name of Registered Waste Haul	er		1385	NJDEP !		0.0000000000000000000000000000000000000	c Yards of	Name of Regis					
SERVICE TRANSPORT G). 	1	dauler II 2099(Was		MINERVA I	LANDFILL				
City, State					•00		osal Date	City, State	LIBC OF 44	222		2	
NEW CASTLE, DE 19720						tb			URG, OH 446				
Completed By (Print or Type)	Title	2					Signature	2 De Caro	1.0	Date	50/	,,	
Pat Decaro	E	stima	tor				takes	l Dais	1 th	12/0	20/	16	

SITE 1/3/17

N/V OK		· ·	(Pu	rsuant	to NJA	C 8:60 and 5:16	5)	fg. 3		_ == + 1		
Date of Notification (1)				Name o	of Building	Owner/Operator (2	2)	Trail 4	6 L			
9 /	19 /	16		Sear	rs Holdin	gs	9					
Agencies Notified	Type Notification	on		Street	Address		5			6	20	17
⊠ EPA	Initial			3333	Beverly	Road		J. J.	AN	C	20	1.7
☑ DOLWD		PARTITE	Mersia C	City, S	ate, Zip C	ode					POST SPACE OF	
□ DHSS □	Amendmen			Hoff	man Est	ates IL 60179		1				E N
☐ DCA (NJAC 5:23-8)	☐ Emergency justification			Name	of Contact			Telephone Numbe	r	,		
(NJAC 3.23-6)	☐ Cancellation							1				
				FAC	ILITY IN	FORMATION			-			
Name of Facility Where A	Abatement is Tal	king Place	(3)				Type of Facility (
Sears #1434 (Willo	wbrook Mall)						School (K-12)	(Other than V 12)				
Street Address							☐ Subchapter 8	(Other than K-12) ivate and commerci	al bui	ilding	S,	
50 US Highway 46							homes, etc.)					
City (5)			1111				Square Feet	# of Floors	Blo	lg. Ag	je	
wayne							300000	2	7	6		
County (6)	5			Coun	ty Code (7)	(STATE USE ONLY)	Current Use (Price	or if being demolishe	ed)			
Passaic							Department	Store				
Name of Monitoring Firm	Hired by Buildin	g Owner ((8)	ASCM I	No.	Name of Abateme	ent Contractor (9)					10
Creative Environme						BRISTOL EN	VIRONMENTAL	_, INC.				
Street Address						Street Address						
39 West 37th Street,	. 14 th Floor					1123 BEAVE	R STREET					
City, State, Zip Code						City, State, Zip Co	ode				200	
New York NY 10018	3					BRISTOL, PA	19007					
Project Manager for Mon	itoring Firm		Tele	phone I	No.	Telephone No.		License No.				
Amarr Soler			2	2-290	-6323	215-788-6040	Ĭ.	00509				
Start Date (10) ON SITE	1/3/17 Sc	heduled C	omple	tion Da	te (11)	Name of OSHA N	lonitor					
10 / 3 /		1 /	20) _ /	17	BRISTOL EN	VIRONMENTAL	_, INC.				
Occupancy Status During						Street Address						
☐ Facility Closed/Vacate				ment		1123 BEAVE	R STREET					9
□ Pacinty closed vacate □ Abatement Performed	Outside of Non	mal Facilit	y Hou	s - Des	cribe	City, State, Zip Co						
Time of Abatement: _	AM	PM/ <u>9:00</u> P	M-8:0	MA <u>0</u> 0		BRISTOL, PA						
Scope of Work (Check al	I that apply)							82 0.09				
		_	52	2		⊠ Full Con	tainment with Neg	ative Pressure				
≥3 sf or ≥3 lf>160 sf or ≥260 lf		⊠ Re	novat	חסו חסו		Mini-End Gloveba	g Procedure					
☑ ≥100 St 01 ≥200 II			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			☐ Non-Exe	mpted (*) and No	n-Friable Procedure				
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Location			Norma	illy ely by	A = h =	Description of stos Containing Ma		Amount -	Re	Re	E D	En
Asbestos-Containing TO BE ABA		Ma	intena	ince/	(i.e	, thermal systems	insulation,	(Specify	Remova	Repair	cap	Enclosure
IN Facili		Cus	todial (12)	Staff?		surfacing, VAT	, or	SF or LF)	/a		Encapsulate	ure
(13)		Yes	No.	N/A		other miscellane	eous)				te	
		162		N/A	Firepro	ofing		360 SF	\boxtimes	П	П	
1st Floor Women's CI		ᆜᆜ	닏	-				500 SF				
1st Floor Women's Cl	lothing/Shoes	; <u> </u>	Ш		Firepro	oring		300 31				
	- S						Tay in	4	Ш	Ш	Ш	Ш
Name of Registered Was			100	JDEP \		Cubic Yards of Waste	Name of Regis					
SERVICE TRANSPO	ORT GROUP,	INC.		20990		30	MINERVA	LANDFILL				
City, State						Disposal Date	City, State	LIDO OH MORE				
NEW CASTLE, DE	19720					tbd	WAYNESB	URG, OH 44688				
Completed By (Print or T	ype)	Title	=1	5.0		Signature	· n · Cin	Dat	2/	50	/16	
Pat Decaro		Estima	tor			Patr	ich De Co	w/gl lo	1/0	- 0	110	

P016111

ASB-41 PO 16 [1] * Do not use this form for asbestos licensure exempted activities.*

** ON SITE ||3||7

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) Date of Notification (1) Sears Holdings 19 16 9 Street Address Type Notification Agencies Notified JAN 3333Beverly Road **⊠** EPA □ DOLWD City, State, Zip Code Amendment #3-11/4/16 X DHSS Hoffman Estates IL 60179 ☐ Emergency (including ☐ DCA Telephone Number Name of Contact (NJAC 5:23-8) justification) ☐ Cancellation **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Sears #1434 (Willowbrook Mall) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, homes, etc.) 50 US Highway 46 Square Feet # of Floors Bldg. Age City (5) 76 300000 wayne County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) County (6) Department Store Passaic Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. BRISTOL ENVIRONMENTAL, INC. Creative Environmental Solutions Street Address Street Address 1123 BEAVER STREET 39 West 37th Street, 14th Floor City, State, Zip Code City, State, Zip Code BRISTOL, PA 19007 New York NY 10018 Telephone No. License No. Telephone No. Project Manager for Monitoring Firm 00509 215-788-6040 212-290-6323 Amarr Soler Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) BRISTOL ENVIRONMENTAL, INC. ON HOLD-1-10 / 3 / 16 Street Address Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement 1123 BEAVER STREET Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code PM/9:00PM-8:00AM Time of Abatement: ____AM-___ BRISTOL, PA 19007 Scope of Work (Check all that apply) □ Renovation _ >3 sf or >3 lf ≥160 sf or ≥260 lf Demolition ☐ Non-Exempted (*) and Non-Friable Procedure Abatement Type Is Location Normally Description of Encapsulate Enclosure Location of Removal Repair Used Solely by Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Maintenance/ (Specify (i.e., thermal systems insulation, TO BE ABATED surfacing, VAT, or Custodial Staff? SF or LF) IN Facility (12)other miscellaneous) (13)Yes No N/A M 980 SF Spray-on Fireproofing New Stock Room Area-2ND Floor X X 1560 SF Spray-on Fireproofing X Middle Area of 2nd Floor X П 480 SF Outside New Stock Room Area-2nd Spray-on Fireproofing \boxtimes Floor 3000 SF X Spray-on Fireproofing П M Middle area of first floor Name of Registered Landfill NJDEP Waste Cubic Yards of Name of Registered Waste Hauler Waste Hauler ID No. MINERVA LANDFILL SERVICE TRANSPORT GROUP, INC. 20990 30 City, State Disposal Date City, State WAYNESBURG, OH 44688 tbd NEW CASTLE, DE 19720 Signature Title Completed By (Print or Type) Estimator Pat Decaro

State of New Jersey

Secretary Description of Asbestos-Containing Material (ACM) Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A N/A N/A N/A N/A Secretary N/A N					S	tate of N	lew Jersey		67				,
Sears Holdings	NO OK		ПОТ	IFIC. (P	ATION ursual	OF AS	BESTOS ABAT AC 8:60 and 5:10	EMENT	Flaz		1		
19	Date of Notification (1)			-	Name	of Buildin	ng Owner/Operator (2)	日本分子	-		155	
Agencies Notified		19 / 1	6		Se	ars Hold	ings		Δ1.	N	6 2	2017	
Separation	Agencies Notified	Type Notificatio	n		Stree	t Address			j				
Amendment #3_11/4/16					333	3Beverl	y Road		1-		~ ~ ~ ~ ~	errentalis errentalis	
Mornant Estates IL 60 F/3 Name of Facility Where Abatement is Taking Piace (3)	The state of the s			uac =	City,	State, Zip	Code		1. Descri		3.7		0.00
Name of Facility Where Abatement is Taking Place (3) Sears #1434 (Willowbrook Mall) Type of Facility (4) School (K-12) School (K-12	The state of the s				Но	ffman Es	states IL 60179		المسموس فمارو والمها والمستوسفين		7		
Name of Facility Where Abstement is Taking Place (3) Sears #1434 (Willow/brook Mall) School (K-12) Subchapler 8 (Other than K-12) Subchapler 9 (Other than K-12) Subchapler 8 (Other than K-12) Subchapler 9 (Other than K-12) Subchapler 8 (Other than	(NJAC 5:23-8)	justification)		9	Name	of Contac	at .		Telephone Nam	ber			
Sars #1434 (Willowbrook Mail)					FA	CILITY IN	NFORMATION						
School (K-12) Subchapter 8 (Other than K-12) Subchapter 8 (Other than K-12) Other (Le, private and commercial buildings, homes, etc.) Other (Le, private and commercial building	Name of Facility Where A	batement is Taki	ng Plac	e (3)			,	Type of Facility	(4)				
Street Address	N									Y			
Solid Register Sol	Street Address							Other (i.e., p	rivate and comme	rcial b	uildin	gs,	
County (6) Passaic	50 US Highway 46						*	homes, etc.)				
County (6)	City (5)								127 (AT 12 4 (A) 5 COV (A) (В		\ge	
Passaic	wayne			10							76		
Name of Monitoring Firm Hired by Building Owner (8)	County (6)				Cou	nty Code (7)(STATE USE ONLY)	Control Control of Control of the Co		snea)			
Street Address Str													
Street Address 1123 BEAVER STREET 123 BEAVER STREET 124 BEAVER STREET 125 BE				(8)	ASCM	No.							
1123 BEAVER STREET 1124 BEAVER STREET 125 BEAVE		ntal Solutions	;					VIRONIVIENTA	L, INC.			-	
City, State, Zip Code New York NY 10018 City, State, Zip Code BRISTOL, PA 19007 Project Manager for Monitoring Firm Amer Soler Telephone No. 212-290-6323 Telephone No. 00509 Start Date (10) 10 / 3 / 16 Scheduled Completion Date (11)		550						CTDEET	2				
New York NY 10018		14 th Floor									-		
Project Manager for Monitoring Firm Telephone No. 212-290-6323 215-788-6040 00509							25.0		**				
Amarr Soler 212-290-6323 215-788-6040 00509 Start Date (10)				1+1		Ma		13007	License No				
Start Date (10) 10 / 3 / 16 Scheduled Completion Date (11) Name of OSHA Monitor BRISTOL ENVIRONMENTAL, INC. Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Scope of Work (Check all that apply) 3		oring Firm		1	7.0 								
Docupancy Status During Abatement (Check only one) Street Address 1123 BEAVER STREET		10-4	l - ll - C	1 200						NT COLUMN			
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe ☐ Time of Abatement: ☐ AMPM/9:00 PM-8:00 AM ☐ PM/9:00 P						ite (11)	The first of the second		L, INC.				
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:AMPM/9:00PM-8:00AM		1 1					Street Address						
Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:AMPM/9:00 PM-8:00 AM					ment		1123 BEAVER	RSTREET					
Scope of Work (Check all that apply) Scope of Work (Abatement Performed	Outside of Norma	al Facilit	y Hou	rs - Des	scribe	City, State, Zip Co	ode					
≥3 sf or ≥3 lf	Time of Abatement:	AMPI	и/ <u>9:00</u> F	PM-8:0	MA <u>00</u>								
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Per No N/A Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Vat/mastic Security Vat/mastic Vat/mastic Vat/mastic Security	Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	that apply)	The same of the sa				Mini-Enc	losure Procedure		e			
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Yes No N/A Part Floor Hallway St Floor Stockroom Name of Registered Waste Hauler Asbestos Containing Material (ACM) Maintenance/ Custodial Staff? (12) Yes No N/A Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Wat/mastic 100 100 100 100 100 100 100 1			100							Ab	atem	ent T	ype
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Elevator Area (1st floor) Statistic Statis	(13)		Yes	1	N/A		other miscellane	ous) _.				te	
Elevator Area (1st floor) Start Floor Hallway Start Floor Stockroom Name of Registered Waste Hauler NJDEP Waste	2 nd floor					Vat/ma	stic		8000 SF	\boxtimes			
st Floor Hallway	e scoriecce	-)			\boxtimes	Mastic			20 SF	\boxtimes			
st Floor Stockroom	1st Floor Hallway					Vat/mas	stic		150 SF	\boxtimes			
Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste	a the reason with the day of the second					Vat/mas	stic		700 SF	\boxtimes			
MINERVA LANDFILL	Name of Registered Waste			10.733	JDEP V	Vaste							

Name of Registered Waste Hauler

SERVICE TRANSPORT GROUP, INC.

City, State

NEW CASTLE, DE 19720

Name of Registered Landfill

Waste

10 No.
20990

Disposal Date

11 to the Signature

Signature

Name of Registered Landfill

Waste

MINERVA LANDFILL

City, State

WAYNESBURG, OH 44688

Completed By (Print or Type)
Pat Decaro

Estimator

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

NO OV			(P	ursua	nt to NJ.	AC 8:60 and 5:1	6)	Pq 3				
Date of Notification (1)						ng Owner/Operator (2)			,		2 = 1
9 /	19 / 1	6		Se	ars Hold	ings		MAI I	6	20	7	
Agencies Notified	Type Notification	1		Stree	et Address			3				1
⊠ EPA				33	33Bever	y Road	1					
⊠ DOLWD	☑ Amended	un 441	4140	City,	State, Zip	Code						
☑ DHSS	Amendment	- inches		Но	ffman Es	states IL 60179	ā_					
DCA (NJAC 5:23-8)	justification)	includir	iy	Nam	e of Conta	ct		Telephone Num	ber			
			-	FA	CILITY II	NFORMATION		14				
Name of Facility Where A	batement is Takir	ng Plac	e (3)	7			Type of Facility	(4)				
Sears #1434 (Willow		· ·					School (K-12					
Street Address							Subchapter 8	3 (Other than K-12 rivate and comme	?)	wildin	ac	
50 US Highway 46							homes, etc.)		TOIGH L	unum	93,	
City (5)							Square Feet	# of Floors	B	ldg. A	Age	-
wayne							300000	2		76		
County (6)				Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demoli	shed)			
Passaic						,	Department	Store				
Name of Monitoring Firm	Hired by Building	Owner	(8)	ASCM	No.	Name of Abateme						
Creative Environme	ntal Solutions						VIRONMENTAL	_, INC.				
Street Address	Yawasa	Series in the				Street Address						
39 West 37th Street,	14th Floor					1123 BEAVE						
City, State, Zip Code						City, State, Zip Co						
New York NY 10018						BRISTOL, PA	19007					
Project Manager for Monit	oring Firm		Tel	ephone	No.	Telephone No.		License No.				
Amarr Soler			2	12-290	-6323	215-788-6040		00509				
Start Date (10)	2	duled C	1000	4	ate (11)	Name of OSHA M	lonitor VIRONMENTAL	INC.				
			- 4					-,				
Occupancy Status During				20000		Street Address	CTREET					
☐ Facility Closed/Vacated ☐ Abatement Performed (During Entire Pe	to point	Abate	ement	ariba	1123 BEAVER					14	
Time of Abatement:	AMPM	1/9:00F	PM-8:	00AM	SCHOOL	City, State, Zip Co BRISTOL, PA						
Scope of Work (Check all t	hat apply)											
			9			⊠ Full Cont	ainment with Nega	ative Pressure				
≥3 sf or ≥3 lf ≥160 sf or >260 lf		⊠ Re					osure Procedure					
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TO BE ABAT IN Facility		Cus	0.0000000	Staff?	(10	surfacing, VAT,	or	SF or LF)	val	-	Encapsulate	Enclosure
(13)		Yes	(12) No	N/A		other miscellaned	ous)				ate	
1 ^{'st} Floor Women's Clot	thing			\boxtimes	Firepro	ofing		360 SF				
1st Floor Women's Clot					Firepro	ofing		500 SF	\boxtimes			
		П	П	П			8					
Name of Registered Waste	Hauler		IN	JDEP V	Vaste	Cubic Yards of	Name of Registe	ered Landfill	1			
SERVICE TRANSPOR		D	Н	auler ID		Waste 30	MINERVA L	ANDFILL				
City, State				20990		Disposal Date	City, State					
NEW CASTLE, DE 19	720					tbd	WAYNESBU	IRG, OH 44688				
						Signature	_	Dat	e	,	,	-
Completed By (Print or Type Pat Decaro	90	: stimat	or			Patrice	Q / 100	11/1	1/	4/	16	
rat Decaio		Junial				f write	2 1 . 2	(are/fe).	1/	1//		

ASB-41
MAY 11 PD / 6 / / * Do not use this form for asbestos licensure exempted activities.

Ck# 3119

NACK		140	(1	Pursu	ant to N	JAC 8:60 and 5:	16)	= 803				
Date of Notification (1) 9 / 19	1	16		2.22	me of Build Sears Hole	ing Owner/Operator dings	r (2)	J		times	-1	
⊠ EPA ⊠ Ini		ion			eet Address 333Bever	SIII. #844 (S. III		JAN	6 20	\1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	570
	nended iendmer	nt #2-10	/28/1	3	y, State, Zip		1 30					
Ed Dirico	ergency				loffman E	states IL 60179		A S				
(NJAC 5:23-8) jus	tification	1)		Nai	me of Conta	act	1	Telephone N	lumber			
				F	ACILITY	NFORMATION			**********			
Name of Facility Where Abateme	nt is Ta	king Pla	ce (3)	V - 80 U.S.			Type of Facility	(4)				
Sears #1434 (Willowbroo							School (K-12					
Street Address							Subchapter Other (i.e., p	rivate and com	-12) mercia	build	śings,	
50 US Highway 46							homes, etc.)		1	Dide	A	
City (5)							Square Feet 300000	# of Floors			. Age	ř
wayne				10		77/07475 1105 0111 14			1	76		
County (6)				Co	unty Code	(7)(STATE USE ONLY)	The second secon		olished	1)		
Passaic							Department					
Name of Monitoring Firm Hired by			r (8)	ASC	M No.		ent Contractor (9)					
Creative Environmental Sc	lution	S	f2				IVIRONMENTA	L, INC.				
Street Address						Street Address						
39 West 37th Street, 14th Fl	oor					1123 BEAVE	R STREET					
City, State, Zip Code						City, State, Zip C		554				
New York NY 10018						BRISTOL, PA	19007					
Project Manager for Monitoring Fir	m		Tel	ephone	e No.	Telephone No.		License No.				
Amarr Soler			2	12-29	0-6323	215-788-6040)	00509				
Start Date (10)	Sch	eduled (Comple	etion D	ate (11)	Name of OSHA N	Monitor					
10 / 3 / 16		3	/ _ 2	1_/	17	BRISTOL EN	VIRONMENTAL	, INC.				
Occupancy Status During Abateme	nt (Che	ck only	one)			Street Address						
☐ Facility Closed/Vacated During				ment		1123 BEAVER	RSTREET					
Abatement Performed Outside	of Norma	al Facilit	у Нои	s - De	scribe	City, State, Zip Co	ode					
Time of Abatement:AM	PI	V/ <u>9:00</u> F	PM- <u>8:0</u>	<u>G</u> AM		BRISTOL, PA						
Scope of Work (Check all that apply	/)											
N (60)		<u></u>					ainment with Nega	tive Pressure				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			novati molitic				osure Procedure					
≥ 160 st or ≥ 260 it			HIOHUC	11:		☐ Non-Exer	npted (*) and Non-	Friable Proced	ure			
		ls	Locat	on					At	atem	nent T	vpe
Location of			Vormal			Description of				1	1	Ť
Asbestos-Containing Material (A	CM)		d Sole intenai	-		tos Containing Mat thermal systems in		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
TO BE ABATED IN Facility		Cust	odial S	taff?	(1.6,	surfacing, VAT,		SF or LF)	avo	=	psu	Sur
(13)			(12)		-	other miscellaneo		500 S S S S S S S S S S S S S S S S S S			late	e
	1000	Yes	No	N/A	1						-	
st Floor Women's Clothing				\boxtimes	Fireproc	fing		360 SF	×			
st Floor Women's Clothing/Sh	oes				Fireproo	fing		500 SF	\boxtimes			
2							92					
	20							53				
ame of Registered Waste Hauler				DEP V	0.0000	Cubic Yards of	Name of Register	ed Landfill				
SERVICE TRANSPORT GROU	JP, INC). 	100000000000000000000000000000000000000	uler ID 20990		Waste 30	MINERVA LA	NDFILL		15		
ty, State					1	Disposal Date	City, State					
NEW CASTLE, DE 19720					-	tbd	WAYNESBUR	RG, OH 44688	3			
ompleted By (Print or Type)	Title		-			Signature	5 No. 2	/ Da		1		7
Pat Decaro	Es	timato	r			Patrick &	M. De ara/	fl 1	0/2	8/)	6	

								190				
Date of Notification (1)	19 /	16			e of Buildin	ng Owner/Operator	(2)	JAN	(5 20	17	
	Type Notificati			Stre	et Address			0730				10
Agencies Notified ⊠ EPA	I Initial	211			33Bever				4- 2			
☑ DOLWD				City	State, Zip				3 1	-		- 27
☑ DHSS	Amendmen	TANK TOWN TO STANK				states IL 60179		10°				
DCA	☐ Emergency justification		ng	Nam	e of Conta	ct		Telephone Nu	mber			
(NJAC 5:23-8)	Cancellation			-					El			57 10 10 10 10
				FA	CILITY II	NFORMATION	-					
Name of Facility Where A	batement is Tal	ing Pla	ce (3)				Type of Facility	(4)				
Sears #1434 (Willow		J					School (K-1		(0)			
Street Address	,						Subchapter Other (i.e., r	8 (Other than K-1 private and comm	(2) ercial	buildi	ngs,	
50 US Highway 46							homes, etc.					
City (5)							Square Feet	# of Floors		Bldg.	Age	
wayne						7	300000	2		76		
County (6)				Cou	inty Code (7)(STATE USE ONLY)	Current Use (P	rior if being demo	lished)		
Passaic							Departmen					
Name of Monitoring Firm	Hired by Buildin	Owne	r (8)	ASCN	No.	Name of Abatem						
Creative Environme						BRISTOL EN	VIRONMENTA	L, INC.				
Street Address						Street Address						
39 West 37th Street,	14th Floor					1123 BEAVE						
City, State, Zip Code						City, State, Zip C						
New York NY 10018						BRISTOL, PA	19007					
Project Manager for Monito	oring Firm		Tel	ephone	No.	Telephone No.		License No.				
Amarr Soler			2	12-290	0-6323	215-788-6040		00509				
Start Date (10)	Sch	eduled	Compl	etion D	ate (11)	Name of OSHA N		- E				
10 / 3 /	16	3	/ _2	1 /	17	BRISTOL EN	VIRONMENTA	L, INC.				
Occupancy Status During	Abatement (Che	ck only	one)			Street Address						
☐ Facility Closed/Vacated	During Entire F	eriod o	Abate	ement		1123 BEAVE	RSTREET					
M Abatement Performed C	Dutside of Norm	al Facili	ty Hou	rs - De	scribe	City, State, Zip Co	ode					
Time of Abatement:	AMP	vi/ <u>9:00</u>	PM-8:	DOAM		BRISTOL, PA	19007					
Scope of Work (Check all t	hat apply)					M F. II Cont	ainment with Neg	ofine Dressure				
		⊠ P	enovat	ion		Mini-Enc Mini-Enc	osure	alive Flessure				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			emoliti			☑ Glovebac	Procedure	. Frickle Decemb	150			
∆ _100 ci ci _200 ii	1.00					☐ Non-Exer	mpted (*) and No	n-Friable Procedu		L - L		-
			s Loca Norma			Description of			A	batem	1	
Location of		40	ed Sol		Asbe	stos Containing Mat	erial (ACM)	Amount	Ren	Repair	Enc	Enclosure
Asbestos-Containing Ma		Ma	intena		(i.e	, thermal systems i	nsulation,	(Specify SF or LF)	Remova	air	aps	losu
TO BE ABATE	ED	0	icodiai	Stall		surfacing, VAT,	OI ,	SF ULLI)	1 1		Encapsulate	Ге
TO BE ABATE IN Facility	ED .	Cus			1	other miscellaned	ous)			1	(D)	
	<u>ED</u>	Yes	(12) No	N/A	-	other miscellaned	ous)					
IN Facility (13)	<u>ED</u>		(12)	N/A	Vat/mas		ous)	8000 SF				_
IN Facility (13)	<u>D</u>		(12)	1	Vat/mas Mastic		ous)	8000 SF 20 SF				
IN Facility (13) 2nd floor Elevator Area (1st floor)	<u>D</u>		(12)			tic	ous)		-			
IN Facility (13) 2nd floor Elevator Area (1st floor) st Floor Hallway	<u>D</u>		(12)		Mastic	tic		20 SF 150 SF 700 SF	×			
IN Facility (13) and floor Elevator Area (1st floor) st Floor Hallway st Floor Stockroom	ΞD		(12) No	⊠ ⊠ ⊠ ⊠ JDEP \	Mastic Vat/mas Vat/mas	tic tic Cubic Yards of	Name of Regist	20 SF 150 SF 700 SF ered Landfill				
IN Facility (13) 2nd floor Elevator Area (1st floor) st Floor Hallway st Floor Stockroom	<u>ED</u>	Yes	(12) No	☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑	Mastic Vat/mas Vat/mas Vaste No.	tic tic	Name of Regist	20 SF 150 SF 700 SF ered Landfill				
IN Facility (13) 2nd floor Elevator Area (1st floor) st Floor Hallway st Floor Stockroom ame of Registered Waste (SERVICE TRANSPOR	<u>ED</u>	Yes	(12) No	⊠ ⊠ ⊠ ⊠ JDEP \	Mastic Vat/mas Vat/mas Vaste No.	etic tic Cubic Yards of Waste -	Name of Regist MINERVA L City, State	20 SF 150 SF 700 SF ered Landfill ANDFILL				
IN Facility (13) 2nd floor Elevator Area (1st floor) st Floor Hallway st Floor Stockroom lame of Registered Waste	ED Hauler T GROUP, IN	Yes	(12) No	☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑	Mastic Vat/mas Vat/mas Vaste No.	etic etic Cubic Yards of Waste - 30	Name of Regist MINERVA L City, State	20 SF 150 SF 700 SF ered Landfill				
IN Facility (13) 2nd floor Elevator Area (1st floor) st Floor Hallway st Floor Stockroom lame of Registered Waste SERVICE TRANSPOR ity, State NEW CASTLE, DE 197	Hauler T GROUP, IN	Yes	(12) No	☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑ ☑	Mastic Vat/mas Vat/mas Vaste No.	ctic Cubic Yards of Waste 30 Disposal Date tbd	Name of Regist MINERVA L City, State WAYNESBL	20 SF 150 SF 700 SF ered Landfill ANDFILL JRG, OH 44688				
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^{*} Do not use this form for asbestos licensure exempted activities.

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

NO OK.		NO.	TIFIC (P	ursua	nt to NJ	AC I	STOS ABA1 8:60 and 5:1	6)	P	91	7	ij	î:	
Date of Notification (1)	19 /	16			e of Buildin		wner/Operator ((2)				er-sec	en en.	
Agencies Notified ⊠ EPA	Type Notifica	ation			et Address 33Beveri		oad		1 1	JAN	Ĝ.	2017		47
☑ DOLWD ☑ DHSS		ent # <u>2-10/</u>		City,	State, Zip	Cod					29 OOM	TM.	1, 5.	
DCA (NJAC 5:23-8)	☐ Emergen justification ☐ Cancellat	on)	ig	Nam	e of Conta	ct				Telephone N	umber	(0		
12				FA	CILITY	NFO	RMATION			•				
Name of Facility Where A	batement is T	aking Plac	e (3)					Type of Fac	ility (4)				
Sears #1434 (Willow Street Address								Other (i.e	ter 8 (Other than K	-12) mercial l	ouildi	ngs,	
50 US Highway 46								homes, e	1000		1,	NI-I-	A	
City (5)								Square Feet 300000		# of Floors	1	3ldg. 76	Age	
wayne						-1.40=			/Dring	if being dem	oliched)			
County (6)				Con	inty Code (7)(51	ATE USE ONLY)	Departm			iolisiieu)			
Passaic				100/		1 616	ame of Abateme					-		
Name of Monitoring Firm			(8)	ASCIV	1 No.		BRISTOL EN			INC				
Creative Environme	ntal Solutio	ns					reet Address	VIICONNIEN	1,000					
Street Address 39 West 37 th Street,	14 th Floor		1				1123 BEAVE		· .			-		
City, State, Zip Code							ty, State, Zip Co							
New York NY 10018						1	BRISTOL, PA	19007		License No.				
Project Manager for Monit	oring Firm		-	phone		1000	lephone No.	*		00509				
Amarr Soler			1 -)-6323		215-788-6040			00303		- 37-6-		
Start Date (10) 10 / 3 /		cheduled C					me of OSHA M BRISTOL EN		TAL,	INC.				
Occupancy Status During	Abatement (C	heck only	one)			-	reet Address							
☐ Facility Closed/Vacated	During Entire	e Period of	Abate	ment		1	1123 BEAVER							
Abatement Performed (Time of Abatement:	Dutside of Nor	rmal Facilit	y Hour	s - Des	scribe	1	y, State, Zip Co BRISTOL, PA							
Scope of Work (Check all t	hat apply)		57					ainment with I	Negati	ve Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			novati molitio				☑ Glovebag	Procedure npted (*) and	Non-F	riable Proces	dure			
		17	Locati								Ab	atem	ent T	ype
Location of Asbestos-Containing M: TO BE ABATI IN Facility (13)	aterial (ACM)	Use	Normal d Sole intenar odial S (12)	ly by	Asbe (i.e	., the	Description of Containing Matermal systems in surfacing, VAT, her miscellaneo	erial (ACM) nsulation, or		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
(15)		Yes	No	N/A				-	4			_	_	
New Stock Room Area	-2 ND Floor			\boxtimes	7 153		ireproofing		1	980 SF				
widdle Area of 2 nd Floo	or			\boxtimes	Spray-o	n F	ireproofing			1560 SF	\boxtimes	Ш	Ш	Ш
Outside New Stock Roo	om Area-2n	d 🗆		\boxtimes	Spray-o	n Fi	ireproofing			480 SF				
fiddle area of first floo	r			\boxtimes	Spray-o		ireproofing			3000 SF	X			
lame of Registered Waste	Hauler			IDEP V		Cut	oic Yards of	Name of Re						
SERVICE TRANSPOR	T GROUP,	INC.		20990		3		City, State	ALAF	VOFILL				
city, State NEW CASTLE, DE 197	720						od	15.1	BUR	G, OH 4468	38			
ompleted By (Print or Type		Title	L				Signature	0.	2	1	ate	/	1,,	
Pat Decaro	,	Estimate	or				Patrick !	1.196	Mo	[jl]	10/0	28/	/6	

* Do not use this form for exhector licensure exempted entivities

PP 16/11

CR# 3/14

(Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) Notification (1) 19 / Sears Holdings 9 Type Notification Street Address Agencies Notified M Initial **⊠** EPA 3333Beverly Road JAN DOLWD City, State, Zip Code Amendment #<u>\$-10/20/16</u> ☑ DHSS Hoffman Estates IL 60179 Emergency (including) ☐ DCA Name of Contact Telephone Number justification) (NJAC 5:23-8) Cancellation **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Sears #1434 (Willowbrook Mall) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, homes, etc.) 50 US Highway 46 Square Feet # of Floors Bldg. Age City (5) 300000 2 76 wayne County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) County (6) Department Store Passaic Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. BRISTOL ENVIRONMENTAL, INC. Creative Environmental Solutions Street Address Street Address 1123 BEAVER STREET 39 West 37th Street, 14th Floor City, State, Zip Code City, State, Zip Code BRISTOL, PA 19007 New York NY 10018 Telephone No. License No. Project Manager for Monitoring Firm Telephone No. 212-290-6323 215-788-6040 00509 Amarr Soler Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) BRISTOL ENVIRONMENTAL, INC. 10 / 3 / 16 Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 1123 BEAVER STREET City, State, Zip Code Time of Abatement: ____AM-_ PM/9:00PM-8:00AM BRISTOL, PA 19007 cope of Work (Check all that apply) □ Full Containment with Negative Pressure ✓ Mini-Enclosure
 ✓ Glovebag Proce] >3 sf or >3 ff Renovation Glovebag Procedure Demolition >160 sf or >260 If Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Description of Location of Encapsulate Removal Used Solely by Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Maintenance/ (i.e., thermal systems insulation, (Specify TO BE ABATED Custodial Staff? surfacing, VAT, or SF or LF) IN Facility (12)other miscellaneous) (13)Yes No N/A Fireproofing 360 SF X X Floor Women's Clothing П Name of Registered Landfill Cubic Yards of NJDEP Waste e of Registered Waste Hauler Hauler ID No. Waste MINERVA LANDFILL RVICE TRANSPORT GROUP, INC. 20990 30 Disposal Date City, State WAYNESBURG, OH 44688 tbd W CASTLE, DE 19720 Signature Title pleted By (Print or Type) Estimator Decaro

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			(Pur	suant	to NJ	AC 8:60 and 5:1	6)	8 q 2				
Date of Notification (1)			Î	Vame o	f Buildin	ng Owner/Operator	(2)	J	0.9			
	16			Sears	s Hold	ings		TER	IS (1) TE	a pot
			- 5	Street A	ddress		7,000		5	Ü		2 11
Agencies Notified Type Not ⊠ EPA □ Initial						y Road	E-constant	4				to the Land
⊠ noi wp ⊠ Amen	ded				ite, Zip		91			201	7	111
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(NJAC 5:23-8) justific	70						į.	ASBESTO	os co	INTE	OL	8.
				FACI	LITY II	VFORMATION	. <u>L</u>	LIC	ENS	140		
Name of Facility Where Abatement	is Taking	Place	(3)				Type of Facilit	y (4)				W
Sears #1434 (Willowbrook N			• •				School (K-		(6)			
Street Address							Subchapter	r 8 (Other than K- private and comr	-12) nercia	l build	linas.	
l .							homes, etc		1101010	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3-,	
50 US Highway 46				-			Square Feet	# of Floors		Bldg	. Age	
City (5)							300000	2		76		
wayne County (6)			(County	Code (7)(STATE USE ONLY)	Current Use (F	rior if being dem	olished	3)		
County (6)					reletion M	ment IS	Departmen	nt Store				
Passaic Name of Monitoring Firm Hired by Bu	illding Ov	ner (F	B) AS	CM No		Name of Abatem	ent Contractor (9	9)				
Creative Environmental Solu	fions	1	'	//			VIRONMENTA					
						Street Address						
Street Address 39 West 37th Street, 14th Floor	r					1123 BEAVE	RSTREET					
						City, State, Zip Co	ode					
City, State, Zip Code New York NY 10018						BRISTOL, PA	19007					
Project Manager for Monitoring Firm			Telepho	one No.		Telephone No.		License No.				
Amarr Soler			212-2	290-63	23	215-785-6040		00509				
	Schedule	ed Cor	mpletion	Date (11)	Name of OSHA M						
Start Date (10) 10 / 3 / 16			21_			BRISTOL EN	MRONMENTA	L, IKC.				
						Street Address						
Occupancy Status During Abatement Facility Closed/Vacated During Ent	tire Period	of At	natemen	nt		1123 BEAVER	STREET					
☐ Facility Closed/Vacated Duffing Cff ☐ Abatement Performed Outside of N	Jormal Fa	cility t	Hours - I	Describ	e	City, State, Zip Co						
Time of Abatement:AM	PM/9:	00PM	- <u>8:00</u> Af	VI		BRISTOL, PA						
					(p				- 7			
Scope of Work (Check all that apply)							ainment with Neg	ative Pressure				
] ≥3 sf or ≥3 lf			vation			Mini-Encl Glovebag	Procedure					
≥160 sf or ≥260 lf		Demo	Dillion			☐ Non-Exer	npted (*) and No	n-Friable Procedu	ıre			
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TO BE ABATED	1 0		ial Staff	Sec. (1)	(1.6.,	surfacing, VAT,	or l	SF or LF)	Val	-	Insc	Sure
IN Facility (13)		(12)			other miscellaneo	us)				ate	
V7	Ye	es h	Vo N/	Α						-	_	-
d floor				Va	t/mast	ic		8000 SF			Ш	Ш
		TE		Ma	stic			20 SF	\boxtimes			
evator Area (1st floor)		1-			tmasti	ic		150 SF				
Floor Hallway		1						700 SF		П	П	П
Floor Stockroom					t/masti		Name of Registe					_
me of Registered Waste Hauler				Waste		Subic Yards of Vaste	MINERVA L					
SERVICE TRANSPORT GROUP	, INC.		2099		1	30		MULIEL				_
y, State						Disposal Date	City, State	IDO 011 11050				
IEW CASTLE, DE 19720						tbd	WAYNESBL	JRG, OH 44688		, X.º		
npleted By (Print or Type)	Title					Signature	0 00	C-A Dat	/	1		
	Estim	ator				Potrick.	J. D. Con	0/12/1	10/2	0//	6	
at Decaro						120.0070		11	1	1		

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Date of Notification (1) 9 / 19	/ 16		N	Sears Ho	lding Owner/Ope oldings	rator	(2)		1 3			
Agencies Notified Type № EPA ⊠ Initi	lotification al		S	treet Addre	ss erly Road			JAN 6	2017			
☑ DOLWD ☑ Ame	ended endment # <u>1</u>	-10/20	1/3/2	ity, State, Z		. 70	;					
□ DCA □ Eme	ergency (inc	7		ame of Cor	Estates IL 60	1/3		Telephone f	Vumber			7
(110) 10 0100 07	fication) cellation		1.				20 51	-	*			4
				FACILITY	INFORMATIO	M		18				
Name of Facility Where Abatemer		Place	(3)				Type of Facility ☐ School (K-12					
Sears #1434 (Willowbrook	Mall)						Subchapter 8	Other than #				
Street Address							Other (i.e., pr homes, etc.)		mercia	l buil	dings	1
50 US Highway 46							Square Feet	# of Floors		Bldg	g. Ag	9
City (5)							300000	2		7		
County (6)			To	ounty Code	(7)(STATE USE O	NLY)	Current Use (Pri	or if being dem	nolished	i)		
Passaic					2.11		Department	Store				
Name of Monitoring Firm Hired by	Building Ow	ner (8) ASC	CM No.	Name of Aba	ateme	ent Contractor (9)					
Creative Environmental Sol					BRISTOL	.EN	VIRONMENTAL	., INC.				
Street Address					Street Addre							
39 West 37th Street, 14th Flo	or						RSTREET					
City, State, Zip Code					City, State, Z							
New York NY 10018					BRISTOL		19007	,				
Project Manager for Monitoring Firm	1		Telephor		Telephone N			License No.				
Amarr Soler				90-6323	215-788-6			00509				
Start Date (10)	Schedule				Name of OSH		'IRONMENTAL,	INC				
10 / 3 / 16							TROTEILER TAL,	neo.				
Occupancy Status During Abatemer	it (Check or	nly one	∍)		Street Addres		CTREET					
Facility Closed/Vacated During E	ntire Period	of Ab	atement	escribe								
Abatement Performed Outside of Time of Abatement:AM	PM/9:0	OPM-	8:00 AM	escribe	City, State, Zig BRISTOL,							
scope of Work (Check all that apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If	\boxtimes	Renov Demo		8		Enclo ebag	inment with Negat sure Procedure pted (*) and Non-F		IIFA			
		le Lor	cation			ACIII	pted () and recipi	TIADIC 1 10000		naten	nent T	Type
Location of		Norr	nally		Descriptio		B			_	1	
Asbestos-Containing Material (AC TO BE ABATED IN Facility (13)	IVI)	Mainte ustodia (1)		. (i.€	estos Containing e., thermal systen surfacing, V other miscella	ns ins AT, o	sulation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
ew Stock Room Area-2 ND Floo	Ye	s N		-	n Fireproofin	g		980 SF	Ø			
ddle Area of 2 nd Floor					n Fireproofing			1560 SF	×			
itside New Stock Room Area-		10		-	n Fireproofing			480 SF	\boxtimes			
OF.		뉴			n Fireproofing			3000 SF				
idle area of first floor ne of Registered Waste Hauler		17	NJDEP		Cubic Yards of		Name of Registere	d Landfill				-
ERVICE TRANSPORT GROUP	P, INC.		Hauler II 20990	O No.	Waste 30		MINERVA LAN	IDFILL				
State					Disposal Date	1	Dity, State	- OU ((CDD				
EW CASTLE, DE 19720					tbd		WAYNESBURG					
npleted By (Print or Type)	Title Estima	tor			Signature	1	J. De Con	fil Dai	te 10 /20	//	6	
IL DECAID					1 10000	70	71	11	1 +		_	

11 PD16/11

^{*} Do not use this form for ashestos linensure exempted artivities

Cl#3095

NACW				(Pur	suant to r	JAC 8.80 and 5.	10/	.,	9	· · <u>_</u>		
Date of Notification (1)	19 /	16		P	Name of Bui	lding Owner/Operator	(2)	ME	G		1 1	7 1
9 / _							н	11/1/			-	
Agencies Notified	Type Notific	ation		5	Street Addre					20		
Ø EPA 1062	⊠ Initial	_			3333Beve				JAN	6	201	7
DOLWD 1048	Amender Amendm			0	City, State, Z							
☑ DHSS/055	☐ Emergen		luding			Estates IL 60179		-	W. Then			
□ DCA (NJAC 5:23-8)	justificati	on)		N	ame of Con	tact		Telephone		er /_		(A)
					FACILITY	INFORMATION					2-11-72	
vame of Facility Where At	hatement is T	akino F	Place (3)			Type of Facility	(4)				-
Sears #1434 (Willow	sproof Mal	11	,				School (K-1					
LEADY TO THE STATE OF THE STATE	EDI DON IIID.	.,					Subchapter				21.12	
Street Address							Other (i.e., p		mmerc	ial bu	uaing	5,
50 US Highway 46							Square Feet	# of Floor:		RIG	ig. Ag	
ity (5)							300000	2	5		19. Ay 16	6
wayne				To	ounty Code	(7)(STATE USE ONLY)	Current Use (Pr	rior if being de	molish	eď)		
ounty (6)						10	Department			:60 		
Passaic ame of Monitoring Firm H	ired by Buildi	ng Owi	ner (8)	ASC	CM No.	Name of Abateme	ent Contractor (9)			-		
oreztive Environmen	tal Solution	าร	17/			1	VIRONMENTA					
	- JOINETON					Street Address						
reet Address 39 West 37 th Street, 1	4th Elean					1123 BEAVER	RSTREET					
	me [1001					City, State, Zip Co	ode				-	
y, State, Zip Code						BRISTOL, PA						
lew York NY 10018	ing Eirm		T	elephor	ne No	Telephone No.		License No	1.			
ject Manager for Monitor	nig Film				90-6323	215-788-6040		00509				
marr Soler	Set	neduler			Date (11)	Name of OSHA Mo	onitor					_
n Date (10) 10 / 3 /					17_	BRISTOL ENV		, IHC.				
						Street Address						
upancy Status During Ab acility Closed/Vacated D	urina Entira I	Period (of Abat	ement		1123 BEAVER	STREET					
Pacifity Closed/Vacated Displayment Performed Out	teide of North	al Faci	ility Ho	urs - De	escribe	City, State, Zip Coo						
Time of Abatement:	AMP	M/9Ph/	-BAM			BRISTOL, PA						
be of Work (Check all that	t apply)				0	⊠ Eull Contai	inment with Nega	five Processes				
		X R	Renovat	tion		Mini-Enclos	sure	I leasure				
3 sf or <u>></u> 3 lf 160 sf or <u>></u> 260 lf			emoliti				Procedure					
.000.01.01000						☐ Non-Exem	pted (*) and Non-I	Friable Proced				
			s Loca Norma						A	baten	nent T	ype
Location of	1-1 /6 05 **		ed Sole	-	Achee	Description of tos Containing Mater	ial (ACM)	Amount	Re	Repair	En	En
bestos-Containing Mater TO BE ABATED	riai (ACM)	Ma	aintena	nce/	(i.e.	thermal systems ins	ulation,	(Specify	Remova	pair	Encapsulate	Enclosure
IN Facility		Cus	todial	Staff?	, , , ,	surfacing, VAT, or	•	SF or LF)	val		Sul	Sure
(13)		Yes	(12) No	N/A	1	other miscellaneous	5)				ate	-
Stock Room Area-2 ND	Floor		П	×	Spray-or	Fireproofing		980 SF	×			
SLUCK ROOM AND -					1 /5	Fireproofing		1560 SF	Ø			
is New Stock Room	Area.2nd			-				480 SF				
	WICE-7110					Fireproofing		3000 SF			7	
area of first floor			Ц			Fireproofing	lame of Registere	3345 P. J. B. H				니
if Registered Waste Haul				IDEP V Juler ID		Cubic Yards of Naste						
VICE TRANSPORT G	ROUP, INC			20990		30	MINERVA LAN	KDLIFF				_
ite							ity, State					
CASTLE, DE 19720						tbd /	WAYNESBUR					
ed By (Print or Type)	Title				201	Signature	1611	Dat	e /in	1;		
	Fs	timato	30			1 MALLES	JA 10/ 11/11	1/ 19	1/19	11/1		1

Ch# 3095

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

NO OV				(Pur	suant to N	JAC 8:60 and 5:	16)			Pg	2	2
Date of Notification (1)	19 /	16			Name of Build Sears Hol	ding Owner/Operator Idings	(2)	JAI	1	5 2)17	
⊠ EPA	ype Notific ☑ Initial ☐ Amender				Street Addres	rly Road						1
☑ DOLWD L ☑ DHSS	Amendm			10	City, State, Zi		1					
□ DCA] Emergen		luding	-		Estates IL 60179		Telephone	n feli ima i	205		
(NJAC 5:23-8)	justificati Cancellat			1	lame of Cont	3CI		relephone	e reumi	jer		
					FACILITY	INFORMATION						
Name of Facility Where Aba	tement is T	aking	Place	(3)			Type of Facility	4				
Sears #1434 (Willowb	rook Mal	[)					☐ School (K-12 ☐ Subchapter 8	(Other ther	V 101			
Street Address				3		-	Other (i.e., pr	ivate and co	mmero	ial bi	uilding	gs,
50 US Highway 46							homes, etc.)					
City (5)	10						Square Feet	# of Floor	S	BI	dg. A	ge
wayne							300000	2			76	
County (6)				(County Code	(7)(STATE USE ONLY)	Current Use (Price		molish	eď)	Gill-ri-	
Passaic							Department	Store				
Vame of Monitoring Firm Hire	d by Buildi	ng Ow	ner (8)	AS	CM No.	Name of Abateme				(2) 39		
Creative Environmenta	I Solution	is			<u> </u>		VIRONMENTAL	, INC.				
treet Address						Street Address						
39 West 37th Street, 14th	Floor					1123 BEAVER			- 5			
ty, State, Zip Code						City, State, Zip Co						
New York NY 10018						BRISTOL, PA	19007					
oject Manager for Monitoring	Firm		1	elepho	ne No.	Telephone No.		License No).			
Amarr Soler					90-6323	215-788-6040		00509				
art Date (10)					Date (11)	Name of OSHA Mic		**************************************				
10 / _3_ / _16	_ -	3	1_	21	/17	BRISTOL ERV	IRONMENTAL,	IRC.				
coupancy Status During Abate	ement (Che	eck on	y one)			Street Address						
Facility Closed/Vacated Duri	ing Entire F	Period	of Aba	tement	les .	1123 BEAVER	STREET					
Abatement Performed Outside Time of Abatement:Ah	de of Norm NP	al Fac M/ <u>9</u> P₩	lity Ho	urs - D	escribe	City, State, Zip Cod BRISTOL, PA 1						
ope of Work (Check all that a							nment with Negativ	e Pressure				
≥3 sf or ≥3 lf >160 sf or ≥260 lf		-	enova emolii		F 1	Mini-Enclos Glovebag F	Procedure		2			
	92				1	□ Non-Exemp	oted (*) and Non-Fr	lable Proced		7		
			s Loca Norma			Description of			-	_	nent ') ype
Location of sbestos-Containing Material	(ACM)	Us	ed So	ely by		os Containing Mater		Amount	Removal	Repair	Encapsulate	Enclosure
TO BE ABATED	,		ainten:	snce/ Staff?	(i.e.,	thermal systems insi surfacing, VAT, or		(Specify SF or LF)	VOU	air	aps	losu
IN Facility		Ous	(12)			other miscellaneous	s)	SF UI LF)	1 10	-	ulat	Ire.
(13)		Yes	No	N/A							e	
oor				Ø	Vat/masti	С	/ -	8000 SF	Ø			
itor Area (1st floor)				\boxtimes	Mastic			20 SF	×			
oor Hallway				\boxtimes	Vat/mastic			150 SF				
por Stockroom				\boxtimes	Vat/mastic			700 SF		П		
of Registered Waste Hauler			H	JDEP V auler ID 20990	No. W	4	ame of Registered MINERVA LAND					
ate / CASTLE, DE 19720					Di	sposal Date Ci	ty, State WAYNESBURG,	OH 44688				
ted By (Print or Type)	Title					Signature //7	16/11/	Dat		1		-
Decaro		timato	or			Turul?	Nelli	(9/19	111	L	

7 HA 7	684			State	of New Jer	rsey			"0	PEN	NOTI	FIC	411	ON	l
Alock.	,	NOTI	Purs	TION O	F ASBESTO NJAC 8:60	os AE and 1	12:120)			7 11		Ū.		Date of	
Date of Notification (1)	12016			me of B SE&G	uilding Own	er/Op	erator (2)		-e-min i	L. John Steller, Stellerson				
Agencies Notified	Type Notification			eet Add	iress	DAD				JA	N 5	2017			
EPA DEP	Initial Amended Amendment #		Cit	ty, State	, Zip Code PLAINFIE	ELD.	NJ 07	7080		.sk	108.00		- 11 vc	C	
▼ DOL	Emergency (in justification)	cluding	Na	ame of C	Contact }	/		-61	lar.	Telep	hone Nrimh	~*			
□ DCA	Cancellation		_	FACILI	TY INFORM										
Name of Facility Where	Abatement is Taking	Place (3)						□ so	Facility (4 chool (K-12	2)					
Street Address	2 numan	× 10	2/	VD				Si Of	inchanter !	3 (Other	than K-12) commercial	buildir	ngs, h	omes	,
City (5)	AYMON	D I) [VD				Square	Feet	# of F	loors 1		g. Ag	e 2 4	D<
NEW A	ARK		TC	ounty C	ode (7)			Curren	500 t Use (Prio	r if being	demolishe	d) '			
ESS	EX			TATE US	SE ONLY) _		_	- £ Abata	Su ement Con	2,7	CH	51/	97	ON)
Name of Monitoring Firm ENVIRONMENTAL		wner (8)		ASCM 0045	No.		UNIC	QUE S'	YSTEMS	OF A	MERICA				
Street Address 64 BROAD STREE	ET							Address WHITE	S EHEAD A	VE.					
City, State, Zip Code MATAWAN, NJ 07								State, Zip ITH RI	Code VER, NJ	08882	2				
Project Manager for Mo			- C.	elephon 32-29	e No. 0-2217			none No 432-83			License No 01111				
Start Date (10)	16	Scheduled	Comp 30		Date (11)		UNIC	QUE S		S OF A	MERICA				
Occupancy Status Duri					,		Street 396	Addres WHITE	s EHEAD A	AVE.					
Abatement Perfor	cated During Entire P med Outside of Norma Millusary a	al Facility H	ours	250	ly		City, S	State, Zi			2				
Scope of Work (Check	/	/	10.00						RAP -						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Rer Der	novati	ion on				Full Min	Containm i-Enclosure vehag Pro	ent with e cedure	Negative P				
							2	Nor	n-Exempte	d (*) and	l Non-Friabl		Abate	ement	
Locati	on of	No	rmally	y	ar = 00 00		scriptio						Ту	pe	
Asbestos-Containir TO BE A In Fa	ng Material (ACM) .BATED cility	Used Main Custor	tenan	ice/		ermal surfa	I systen	ns insula	(ACM) ation,	(S	mount specify or LF)	Remova	Repair	Encapsulate	Enclosure
(1:	3)	Yes	No	N/A		Julei i	HISCOR	aricous				<u>a</u>		ate	Te
outside	VALITS		X		wiR	E	50	ock		2	52 LF	X			
			,									-			-
		-													
Name of Registered W	Vaste Hauler		10100	JDEP V auler ID		Cubic of Wa	c Yards				ered Landfill				
WASTE MANAGE	MENT		1000	125	4	ANYX	2	0	GROV	9000 Waters	KIH				
City, State ELIZABETH, NJ						7	osal Da	>		RISVILI	_E, PA	nto.	/		
Completed by CAROL RAIMO		Title OFFIC	E N	IANAC	SER	6	Signati	ire Kak	2 X	ris,	no	2/	14	//	6

CK# 1736

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

"OPEN NOTIFICATION"

1/4/28/7 PSE&G	3.11	
11/1001	111	
Agencies Notified Type Notification Street Address 4000 HADLEY ROAD JAN 6 2017		
EPA Initial City, State, Zip Code SOUTH PLAINFIELD, NJ 07080		
Emergency (including Name of Contact Telephone Number		
DOH DCA Cancellation JOHN D'ANGELO FACILITY INFORMATION		
Name of Facility Where Abatement is Taking Place (3) Type of Facility (4)		
School (K-12) Subchapter 8 (Other than K-12)		
Street Address Other (i.e. private & commercial built	tings, ho	mes,
City (5)	lidg. Age	
NEWARK County (6) County Code (7) Current Use (Prior if being demolished)		
ESSEX (STATE USE ONLY)		
Name of Monitoring Firm Hired by Building Owner (8) ENVIRONMENTAL TACTICS ASCM No. O045 Name of Abatement Contractor (9) UNIQUE SYSTEMS OF AMERICA		
Street Address Street Address		
04 BROAD STREET		
MATAWAN, NJ 07747 SOUTH RIVER, NJ 08882		
Project Manager for Monitoring Firm Telephone No. Telephone No. 732-432-8350 License No. 01111		
Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor UNIQUE SYSTEMS OF AMERICA		
Occupancy Status During Abatement (Check Only One) Street Address		
Facility Closed/Vacated During Entire Period of Abatement		
Abatement Performed Outside of Normal Facility Hours Other - Describe: Mesessary aperators only SOUTH RIVER, NJ 08882		
Scope of Work (Check All That Apply)		
≥3 sf or ≥3 lf		
Non-Exempted (*) and Non-Friable Pr	Abater	
Is Location Normally Description of	Тур	е
Used Solely by Ashestos Containing Material (ACM) Amount	D D	Enca
In Facility Custodial Staff? Surfacing, VAT, or surfacing, VAT, or ethor miscellaneous)	Repair	Enclosure Encapsulate
Yes No N/A		ate e
OUTSIDE VAUITS X WIRE SOCK 2524	5	
120 47		
OLD 26KV DOG HOUSE X ACM CAUIKING 120 LF >	e 1	4 010
26 FU HOUSE-CONTROL ROOM X ACM FLOOR COVERING 2490 SF >		
26 KV HOUSE-CONTROL ROOM X ACM Floor COVER: NO 2490 SF) 11 11 11 X TRANSITE Floor PANELS 580 SF)		
26 KV House-Control Room X ACM Floor Caver: Na 2490 SF X 11 11 X TRANS: TE Floor Panels 580 SF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste CROWS NORTH		
26 KV House-Control Room X ACM Floor Cover: Na 2490 SF X Name of Registered Waste Hauler WASTE MANAGEMENT NAME OF ROOM X ACM Floor Cover: Na 2490 SF X Name of Registered Waste Hauler Unit of Waste Hauler ID No. 1125 Disposal Date City, State		
26 KV House-Control Room X ACM Floor Caver: Na 3490 SF X Name of Registered Waste Hauler WASTE MANAGEMENT NOTE: Name of Registered Landfill Hauler ID No. 1125 ROOF FLOOR CAVER: NA 3490 SF X PROSITE Floor PANELS SEO SF X Name of Registered Landfill Hauler ID No. 1125 ROOF FLOOR PANELS SEO SF X Name of Registered Landfill GROWS NORTH		/

					Charles Woods					
#1.1.410	NOTIFI (Pr	CATION OF	f New Jersey ASBESTOS AB JAC 8:60 and	BATEMENT 12:120)		EGE	V	Eng		
77 UU90/ ste of Notification (1) 12/16/16		Name of Build	ding Owner/Op	erator (2) TER		NAM 6	2017			-
encies Notified Type Notification		Street Addres		0 (10)					ka	
EPA Initial Amended Amendment #		City, State, Z	Zip Code STFÎE	LD IN		090	YTPO IB	LA		
Emergency (injustification)	ncluding	Name of Cor	ntact		T	ple				
DCA Cancellation			Y INFORMATIO	Type of F	acility (4)					
ame of Facility Where Abatement is Taking	Place (3)			Sch	ool (K-12)	Other than K-12) te & commercial b	uildinas	, hoπ	nes,	
reet Address				etc.)	# of Floors				
WESTFIELD				Square F	00	2 being demolished	Bldg.	48		
ounty (6) UNION		County Coo (STATE USE	de (7) E ONLY)	_ Pts	MOGN.	CE			, 1	**
lame of Monitoring Firm Hired by Building	Owner (8)	ASCM N	lo.	Name of Abaten	Nent Contra	dir-INDIA	V MI	lov) 10	1
treet Address				Street Address						
Sity, State, Zip Code				City, State, Zip	Control of the Control	J 0.15701				
		Telephone	e No.	Telephone No.	,,	License No.				
Project Manager for Monitoring Firm				Name of OSHA	652 Monitor	,	-			
Start Date (10)	12/1	Completion Da	ate (11)	GORAN	166					
Occupancy Status During Abatement (Che	eck Only One)	atement		144 Mi	14 0				_	-
Facility Closed/Vacated During Entire Abatement Performed Outside of No Other – Describe:	rmal Facility H	ours		City, State, Zip	rson	NJ OA.	SV	}		
Scope of Work (Check All That Apply)	_/_		24	Full	Containmer	nt with Negative Pr	ressure			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Rer Der	novation molition		TC V	-Enclosure	edure (*) and Non-Friabl	e Proce	edure		
_			- C	Nor	-Exempled	() and Non I was	A	bate	Henr	
Leading of	No	ocation rmally		Description of ontaining Material	(ACM)	Amount		Ĩ		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Main Custo	Solely by tenance/ dial Staff? (12)	(i.e. therr	nal systems insula rfacing, VAT, or er miscellaneous)	ition,	(Specify SF or LF)	Removal	Repair	Encapsulate	
(13)	Yes	No N/A				Vols	V	-	Ф	-
FIRSTALOOR		V		TSI		KO LF	Y			
·										-
					1	Registered Landfi	11			1
Name of Registered Waste Hauler		NJDEP \	D No. of	ubic Yards Waste	TA.	RS HILL	15			
INDIAN ANDOW INDU	STRICS	3600	360 D	TBD isposal Date	City, Sta	te ISVILL	p_	P	7	
Name of Registered Visite Hadist INDIAN ANDOW INDUS City, State PATERSON Completed by GORAN TGE	NJ			TBD Signature	, MORK	131/2	Date	/10	1	-
Completed by Cap Aar 1146	Title	VP	0	Signature	X		12/	16	//,k	2
A OVER 1		¥ /		* Do not use	e this form for	or asbestos licens	ure exe	mpte	d acti	V



	N			to NJAC 8				(k±	+0	19	_			
Date of Notification (1) 12/02/16		44.5		Building C Hudson I			(2)		E			V			
Agencies Notified Type Notification			Street Ac	idress				lini							
EPA Initial			2 Com	merce S	St .					IAN	6 2	201	7		- 11
DEP Amended				te, Zip Cod				-	1						
DOL Amendment #		-	Branch	nberg, N	J 0887	6				والمتحضية وال		estera			
Emergency (in justification) DCA Cancellation	ciuding	11.0		Contact				-	/-Tele	phone N	lumber		シレム	4.	Contract Co
DCA Cancellation			Tony F	erreira				· L			11000	-			material
N 25 W M N N N N N N N N N N N N N N N N N N	DI (0)		FACIL	LITY INFO	RMATIC	N	-			100		_	_		
Name of Facility Where Abatement is Taking Residential House	Place (3))					Type o	of Facility (4	+)						
Street Address								School (K-1: Subchapter		r than K	-12\				
Street Address							× C	Other (i.e. p				ıildi	ngs, l	home	s,
City (5)								tc.) e Feet	# of	Floors		Blo	ig. Ag	ge	_
Harrison							2000		2)+		
County (6)			County C	Code (7) USE ONLY)	,			nt Use (Pric		ig demo	lished)				
Essex								dential H		(2)					
Name of Monitoring Firm Hired by Building On n/a	wner (8)		ASCM	No.				ement Con Contracti							
Street Address	S-18-17-17-17-1						Addres		19 1110						
n/a								de Ave							
City, State, Zip Code	-					City, S	tate, Zi	o Code				_			\neg
n/a						M. C.		J 07026							
Project Manager for Monitoring Firm		1	Telephor	ne No.		(0).	none No			License		3			
n/a			n/a				160.60			01255	5	161143			
	Schedule 12/30/1		pletion [Date (11)				A Monitor Contracti	na Inc		C				
Occupancy Status During Abatement (Check		7.5					Addres		ilg ilio						
			ent					de Ave							
Abatement Performed Outside of Norma	I Facility	Hours				55	itate, Zi								
Other – Describe:						Gari	field, N	J 07026							
Scope of Work (Check All That Apply)	(Sand					IS	7							-	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	enovat emoliti				Ê		Containme i-Enclosure		Negativ	e Pres	sure	9		
2 100 \$1 01 2200 11		emond	1011			F	Glo	vebag Prod	edure				2004 = 0403 +0		
			-				■ Nor	n-Exempted	(*) and	Non-Fr	nable F			ment	
		Location Lormali	200									,	Ту		
Location of Asbestos-Containing Material (ACM)		d Sole		Ashest	Des os Conta	cription		(ACM)	Aı	mount				ш	
TO BE ABATED		intenar			thermal	system	s insula		(S	pecify	1 2	0	R	inca	Enc
In Facility (13)	Ouse	(12)	Juli I		surfac other m	cing, VA	(T, or neous)		SF	or LF)	1	Domous	Repair	Encapsulate	Enclosure
(10)	Yes	No	N/A		J		,				2	2	7	ate	Ге
Basement	- 50		X		Pine	Insula	tion		20	00 LF	x				
Basement			X			oor Til				00 SF	К				
Basement			X			ng Pla			15	50 SF	К				
1st Floor Living Room		-	X			II Plas				50 SF	K				
Name of Registered Waste Hauler		N	JDEP W	/aste	Cubic			Name of							
Harmony Contracting Inc		Н	lauler ID		of Was	ste		GROW	e 1						
City, State		0	33137		TBD	al Date		City, Stat	е						Total Medica
Garfield, NJ					TBD	Date		Morrisy		Α					
Completed by	Title				10	ignatur	e		****		Date		U-102		
Kristina Caporino		etary			K	Just	100 C	ZODEDIN	2		12/0	2/1	6		
	-				- 12		-	-							

ADDITIONAL ACM QUANTITIES FOR PROPERTY LOCATED

AT

426 JERSEY ST HARRISON, NEW JERSEY

- 1) 1st Floor Dining Room Grey Plaster 100 Square Feet
- 2) 2nd Floor Bedroom Left Grey Plaster 200 Square Feet
- 3) 2nd Floor Bedroom Right Grey Plaster 240 Square Feet
- 4) Front Roof Roof Flashing 30 Square Feet

1/# agra		(Pur	suant to	NJAC 8:60 a	and 12:120))	****					
Date of Notification (1) JANUARY 4, 2017		N E	ame of Bu	uilding Owne AN BROS.	r/Operator . CONTF	(2) RACTOR	S	n),EGI	3 1	VI		1
Agencies Notified Type Notification	77.2759		treet Add	ress LE STRÉE	ETANG			DI LAN	6	2017		-
EPA Initial DEP Amended Amendment #_		0	city, State, OLD BR	Zip Code IDGE, NJ			- In 1	. val		CASA*		-
Emergency (inc justification)	cluding		lame of C	ontact RENNAN				Telephone Numb	eront igan	ITHC		
DCA Cancellation			FACILI	TY INFORM	ATION	1 =	= - :!!:L : /A\		H-			-
Name of Facility Where Abatement is Taking F NURSERY FARM OFFICE (VA Street Address	Place (3) NCANT	, SE	ET FOR	DEMO)		Sch	acility (4) nool (K-12) ochapter 8 ner (i.e. priv	(Other than K-12) vate & commercial	buildin	igs, ho	omes,	
4 POLHEMUSTOWN ROAD						etc	.)	# of Floors	Bld	g. Age		
City (5) ALLENTOWN, NJ 08501								2		+/-		
County (6) MONMOUTH			County Co	ode (7) SE ONLY)		SING	E FAMI	if being demolishe LY DWELLING	:d) i			
Name of Monitoring Firm Hired by Building On MONMOUTH COUNTY PARK WIL	wner (8)	PLY	ASCM	No.	Nam EP	e of Abater C TECHI	ment Contr NOLOGI	actor (9) ES, INC.				
Street Address						et Address D. BOX 3	37					
City, State, Zip Code						State, Zip		3533				
Project Manager for Monitoring Firm		T	Telephon	e No.	100000000000000000000000000000000000000	phone No. 9-758-33		License No 00394).			
Start Date (10)	Scheduled JAN 31			Date (11)		ne of OSHA		IES, INC				
JAN 16, 2017 Occupancy Status During Abatement (Check		Ÿ	1.1	1	Stre	et Address	i					
			ment	_33	1	O. BOX 3						
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe:	al Facility	Hour	'S			, State, Zip EW EGY		8533				
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	processory.	enov emol				× Mini	-Enclosure				е	
						ELL INOI	-LXCIIIptoc	. () G		Abate	ement	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	inten	ally lely by ance/ I Staff?	(i.e. th	Descrip s Containing termal systal surfacing, other misce	ng Material ems insula VAT, or	(ACM)	Amount (Specify SF or LF)	Removal	Repair	e Encapsulate	Enclosure
	Yes	No	N/A					105	X			
1ST FLOOR UTILITY ROOM	X			The second second second		MENT BO		4 SF 2 SF	X			
BASEMENT	X					LD PAP		20 SF	Z		-	
EXTERIOR SMALL ROOF				F	ROOF FL	ASHING	1	20 31	-			
Name of Registered Waste Hauler		1	NJDEP \		Cubic Yar	ds		Registered Landfi				-li-
EPC TECHNOLOGIES, INC.			Hauler II 17000) No.	of Waste	Doto	WAST City, Sta	E MANAGEME	ENT ()FP	A	_
City, State NEW EGYPT, NJ					Disposal I	1/17		RISVILLE, PA	ate			
Completed by STEVE SCHENKER	Title PRE	ESID	ENT			ature	Sche	11	1/3/17	7		

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

CIC#1184	(0)					8:60 and 5:16) ·			-		
Date of Notification (1)	22 / 16				and the second	Owner/Operator (2 f Middlesex		GE I-V				
Agencies Notified	Type Notification			Street A	ddress ayard Str	reet		JAN 6 20	17			
☑ DOLWD	Amended Amendment #			City, Sta	ate, Zip Co						i	
☐ DCA	☐ Emergency (incl	uding	-		f Contact	on, no sees.		Telephone Number			1	
(NJAC 5:23-8)	justification)				Sendner							
		i de car		FACI	I ITY INF	ORMATION						
Name of Facility Where	Abatement is Taking I	Place (3)				Type of Facility (4)				
Wolfson Parking I							School (K-12)	Other than K 12)				
Street Address							Subchapter 8 (Other (i.e., priv	vate and commercia	al buile	dings	,	
150 Neilson Street							homes, etc.)					
City (5)							Square Feet	# of Floors		g. Age	9	
New Brunswick, N	IJ 08901						210,000	5		972		_
County (6)				County	y Code (7)	(STATE USE ONLY)		r if being demolishe	ea)			
Middlesex					т		Parking Gara	ige			-	
Name of Monitoring Fire	m Hired by Building O	wner (8) /	ASCM N	10.	Name of Abateme						
CME Associates						Street Address	011363, 1116.			-		-
Street Address 3759 US Hwy 1 Sc	outh - Suite 100					322 Beers St						
City, State, Zip Code						City, State, Zip Co						
Monmouth Juncti	on, NJ 08852					Keyport, NJ	07735	Lisanas No				_
Project Manager for Mo	onitoring Firm			phone N		Telephone No.		License No.				
Behram Turan				32-951-		732-739-1200		1093		-		-
Start Date (10) 1 /3				tion Dat /		Name of OSHA N N/A	vionitor					
Occupancy Status Duri		only o	ne)			Street Address						
☐ Facility Closed/Vaca	ated During Entire Per	iod of A	Abate	ment	.,							
Abatement Perform Time of Abatement	ed Outside of Normal :PN	Facility //	Hour PM-	s - Desc /	AM	City, State, Zip C	ode					
Scope of Work (Check	all that apply)			-	7		ntainment with Neg	ative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		☐ Re ☑ De				☐ Mini-En	ag Procedure	n-Friable Procedure	Э			
		le	Loca	tion		23 11011 221	- T			atem	ent Ty	/ре
Locati	on of	١	Norma	ally .		Description		A	Re	Re	Εn	En
Asbestos-Containir	ng Material (ACM)			ely by ance/	Asbe	stos Containing M e., thermal systems	aterial (ACM) s insulation.	Amount (Specify	Removal	Repair	Encapsulate	Enclosure
TO BE A		Cus		Staff?	(surfacing, VA	T, or	SF or LF)	/al		sula	ure
(13		Yes	(12) No			other miscellan	eous)				te	
Office Area					Floorin	g & Associated	l Mastic	500 SF				
Office Area - Hall &	Slop Sink				12x12	Green VAT & M	astic All Layer	50 SF				
Office Area - Hall &				\boxtimes	Floor T	ile & Mastic un	der 12x12	50 SF				
Office Area					12x12	Off White VAT &		180 SF				
Name of Registered W	/aste Hauler			NJDEP		Cubic Yards of	Name of Regis				AND STORY	
Freehold Cartage				Hauler I S226		Waste 40	Cumberla	nd County Land	fill			
City, State				3220	J	Disposal Date	City, State	7 (2) 2 () () () () () () () ()				
Freehold, NJ						2/28/2017	Newburgh	, PA			,	
Completed By (Print of	r Type) Titl	е	71. 1			Signature	71		ate /	17/	111	,
Thomas Camard		Projec	t Mai	nager		4	u u		2/0	1/	10	

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

Name of Facility Where Abatement is Taking	Place (3)		The second secon	JAN 6 20)17	The same of the sa	
Location of	Norn	Location nally Use olely by	sed	Description of	ABBESTOS CONT	1	ement	4
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Mai	ntenano odial St (12)	ce/	Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	(Specify SF or LF)	Removal	Encapsulate	Enclosure
	Yes	No	N/A	or a Wall Densing	960 SF			
Office Area				Glue to Wood Wall Paneling				
Exterior				Asphalt Filler at Bld/Sidewalk Joint	. 200 Li	-		
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Date of Notification (1) JANUARY 4, 2017		N:	ame of B	uilding Owr	ner/Operator S. CONTF	(2) RACTOF	RS		and the second second second			and the	24
Agencies Notified Type Notification	J. 226	27.0	treet Add	ress LE STRE	ET.				6 년	i W	E		
EPA X Initial Amended Amendment #			W. C. P.	, Zip Code RIDGE, N	J 08857		2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		IAN E				
□ Emergency (ine justification) □ DCA □ Cancellation	cluding			RENNAN					phone Nun				
Land .			FACILI	ITY INFORI	MATION	Tuna of	Facility (4)		251US U 40.544				
Street Address	Place (3) /ANCAN	NT, S	SET FO	OR DEMO	D)	Sc Su X Ot	hool (K-12) bchapter 8 her (i.e. pri	(Othe	r than K-12	2)	ngs, h	omes	4
45 PINEHILL ROAD City (5)						Square		# of 2	Floors		ig. Aq) +/-	е	
MILLSTONE, NJ 08535 County (6)			County C	ode (7) SE ONLY)			Use (Prior						
MONMOUTH Name of Monitoring Firm Hired by Building O	wner (8)		ASCM		Nam	e of Abate	ment Cont	ractor	(9)				
MONMOUTH COUNTY PARK WII	LL SUPI	PLY	FIRM			C TECH	NOLOGI	ES,	NC.				
Street Address					P.C	D. BOX 3	337						
City, State, Zip Code						State, Zip W EGYI	Code PT, NJ 0	8533					
Project Manager for Monitoring Firm			Telephor	ne No.		phone No 9-758-33			License N 00394	No.			
Start Date (10) JAN 16, 2017	Schedule			Date (11)		ne of OSH.	A Monitor	IES,	INC				
Occupancy Status During Abatement (Check					1 7 3 5 5	et Address							
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm	eriod of A al Facility	baten Hours	nent s		City	, State, Zip		8533	· · · · · · · · · · · · · · · · · · ·				
Other - Describe:					- Nie	EVV EG I	F1, NO 0		,				
Scope of Work (Check All That Apply) × ≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	lumand.	enova emoli				Min	Containme i-Enclosure vebag Prod n-Exempted	e edure				e	
				T		INOI	I-EXEMPLE	1 () (10 11011 111		Abate	ement	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma Cusi	(12)	lly ely by ince/ Staff?	Asbesto (i.e. 1	Descript os Containin thermal syste surfacing, other misce	g Material ems insula VAT, or	(ACM) ation,		Amount (Specify SF or LF)	Removal	Repair	e Encapsulate	Enclosure
	Yes	No	N/A	10"\12	" FLOOR	TILES/N	/ASTIC	1	220 SF	X			
BASEMENT	X			12 112	TEOOK	TILLOTT	717 10 110						
				-									
Name of Registered Waste Hauler			NJDEP \		Cubic Yard of Waste	ds			stered Land		OF P	Α	
EPC TECHNOLOGIES, INC. City, State			17000		Disposal Dis		City, Sta	te RISVI	LLE, PA			-0-45-110	
NEW EGYPT, NJ Completed by STEVE SCHENKER	Title	SID	ENT		Signa		Schen	l		Date 1/4/17	7		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) 2017 JAN BRENNAN BROS. CONTRACTORS **JANUARY 4, 2017** Street Address Agencies Notified Type Notification ADDESTON 28 MAPLE STREET EPA Initial City, State, Zip Code Amended DEP OLD BRIDGE, NJ 08857 Amendment # × DOL Telephone Number Emergency (including Name of Contact justification) DOH MIKE BRENNAN Cancellation DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) (VANCANT, SET FOR DEMO) SINGLE FAMILY DWELLING School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, Street Address 207 MILLSTONE ROAD etc.) Blda, Age Square Feet # of Floors City (5) 70 +/-2 MILLSTONE, NJ 08535 Current Use (Prior if being demolished) County Code (7) County (6) SINGLE FAMILY DWELLING (STATE USE ONLY) MONMOUTH Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. EPC TECHNOLOGIES, INC. FIRM MONMOUTH COUNTY PARK WILL SUPPLY Street Address Street Address P.O. BOX 337 City, State, Zip Code City, State, Zip Code NEW EGYPT, NJ 08533 License No. Telephone No. Telephone No. Project Manager for Monitoring Firm 00394 609-758-3365 Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) EPC TECHNOLOGIES, INC JAN 31, 2017 JAN 16, 2017 Street Address Occupancy Status During Abatement (Check Only One) P.O. BOX 337 Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours NEW EGYPT, NJ 08533 Other - Describe: Scope of Work (Check All That Apply) Full Containment with Negative Pressure Renovation × ≥3 sf or ≥3 lf Mini-Enclosure Demolition ≥160 sf or ≥260 lf Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Туре Is Location Normally Description of Location of Used Solely by Asbestos Containing Material (ACM) Amount Encapsulate Asbestos-Containing Material (ACM) Maintenance/ (Specify Removal (i.e. thermal systems insulation, TO BE ABATED SF or LF) Custodial Staff? surfacing, VAT, or In Facility (12)other miscellaneous) (13)N/A Yes No 8 SF TRANSITE CEMENT BOARD X BASEMENT X PAPER WRAP ON AIR DUCT 20 LF X BASEMENT Х 40 SF BOILER INSULATION & BRICK X BASEMENT X 9"X9" FLOOR TILES 1220 SF X BASEMENT STAIRWELL Name of Registered Landfill NJDEP Waste Cubic Yards Name of Registered Waste Hauler of Waste Hauler ID No. WASTE MANAGEMENT OF PA EPC TECHNOLOGIES, INC. 1 17000 City, State Disposal Date City, State MORRISVILLE, PA BY 01/31/17 NEW EGYPT, NJ Date Signature Title Completed by 1/4/17 PRESIDENT STEVE SCHENKER

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

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7)

| Name of Building Owner/Operator (2) Date of Notification (1) Karin Diana-Toder 12/30/2016

Agencies Notified	Type Notifi	cation	Sta	ceet 2	Addres	5	_		1	AN	6 2	2017	Ì	land bown
[]EPA	[X] Initia	L							2 4 U	AIN		The Control		504-
[]DEP	Notif:	ication			tate,					a a merce	e _{al} ryman i	ene		i.
	[]Amended		0	len	Rid	lge,	NJ,07028	1	:53E	STEE	001	The	1-51	
[X]DOL	Notif:	ication	Na	me of	Conta	ct		Telephor	ne Number	April 1 Mary 1		-		
[X]DOH	[]EMERGE	NCY					-Toder							
[]DCA	[]Cancel	lation	1											
	[]cancer		11_		FACILI	TY IN	FORMATION							
Name of Facility W	here Abatemer	t is Tak	ing	Place	e (3)			Type of Facil	ity (4)					
Karin Diana								[]School	(K-12)	1.7.	77	121		
						-		[]Subchap	ter 8 (Oth	er th	com	.12) merci	al	
Street Address								buildings,	homes, et	(c.)				
								Square Feet	# of Flo	oors	Bldg	. Ag	е	
City (5)		County	(6))			ty Code (7)	1800	2		1	75		
Glen Ridge		Ess				(STA	TE USE ONLY)	Current Use	(Prior if b	eing	demo.	Lishe	ed)	
Gren mage														
Name of Monitoring	Firm hired h	ov Build:	ing	ASCM	No.			ment Contracto						
Owner (8)			22.11				AZTECH N	MANAGEMEN'I	, Inc.					
N/A							Street Addres	S						
Street Address								stopher St	5.					
						_	City, State,							
City, State, Zip C	Code						Montclai	ir, NJ 070)42					
										Trice	nse N	umbe	r	
Project Manager fo	or Monitoring	Firm			Numbe	r	Telephone Num				371			
			N/	A										-
Scheduled Start Da	ate (10) S	ched. Co	mple	tion			Name of OSHA	Monitor						
01 10	2017	01	11	L	2017		N/A							
Month Day Occupancy Status I	Year	Month	Da Ck C		Year		Street Addres	SS						
Occupancy Status I	losed/Vacate	d During	Ent	ire P	eriod									
of Abatem	ent					3.7	City, State,	Zin Code						
[]Abatement Hours - De		tside oi	NOT	mai r	actiti	·Y	City, State,	DIP STORE						
[]other - De														
Scope of Work (Ch		apply)		-				. Containment v	.i+h Nogati	170 D7	-055111	re		
			535	1 Dana	vation		[]Full []Mini	. Containment v Enclosure	WILLI Negaci	.00				
[X]≥3 sf	or >3 lf f or >260 lf				lition		[X]Glov	re-bag Procedu	re					
[]2100 0							[]Non-	Friable Proces	dure		Abat	cemer	t T	vpe
			Lo	Is catio	on		Descripti	ion of					E N	E
	ion of Containing			rmall Used	Ly		Asbestos-Co	ntaining	Amoui		RE	RE	C	C
	al (ACM)	D-	S	colely	ance/		Material (i.e., therma	(ACM)	(Spec:	2	M	E P A	A P	LO
	ABATED	_ B	Cu	stodi	al	ir	sulation, sur	facing, VAT,	LF)		VA	I	S	S
	cility 13)	V	es	Mo No	N/A		or other misc	ellaneous)			L	R	L	RE
				1200			T1-	+:07	75 1	.स	X		·	
Basement					X	PI	pe Insula	CTOIL	+					
											-			
2										10'	7.7			
Name of Registere	ed Waste Haul	er	100000	DEP W			bic Yards	Name of Re	gistered L	andii.	TT	TNC	,	
AZTECH MAN				uler 1704	ID No.	0.	Waste 1.2	Minery	ra Enter	-5-1	.50	T 2.4.C		
1			1	_ , 0 .			isposal Date	City, Stat	e		-			
Montclair,	NJ 0704	2					01/12/201	7 Waynes	sburg, (Dhic	44	688	S	
Mon corarry	_,, 0 , 0 , 1					-		1	1	Į.) = + =			
Completed By (Pr		Title	10				Signath	re 4/./	//	100)ate 12/30		.6	
Dimitri G		Con	tro	lle	r		1/1/1/	m/ h ///						

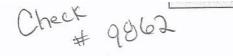
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rate of Notification (1)		100000000000000000000000000000000000000	ne of Bui		ner/Operator	(2)	7		JAN		6 2	017		
gencies Notified Type Notification		Stre	et Addre	ess					A	SEEST	58.6	QN.	TEGI		
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DEP Amended				Zip Code NJ 070	an.					+					1
DOL Amendment #	cluding	1	ne of Co		130			T	Teler	hone Nur	nber				
DOH justification)		10,000	arbara l												
DCA Cancellation		3		Y INFOR	MATION	_								-	-
ame of Facility Where Abatement is Taking	Place (3)						Type of Facilit								
Private Dwelling						1	Subchap	tor 8	(Other	r than K-1	2)	Ildina	ic hor	noc	
treet Address						1	Other (i.e etc.)	e. priv	ate &	commerci	iai bu			1165,	
4.75		-				t	Square Feet			Floors			. Age		
ity (5) Vestfield NJ 07090							N/A		N/A			N/A			
County (6)			unty Co	de (7) E ONLY)		-	Current Use (Private Dw			g demolis	hed)				
Union	(0)	1	ASCM N	lo.	Name	le c	of Abatement			(9)					
Name of Monitoring Firm Hired by Building C BioterrA Solution	Jwner (8)		AGOIN I	ю.			Contractir								
Bioterra Solution		_					Address OX 734				ċ				
1130 W Chestnut Street							ate, Zip Code							-	-
City, State, Zip Code Union NJ 07083					Wo	000	dland Park	NJ (742						
Project Manager for Monitoring Firm		Te	elephone	No.	14	32.	one No.			License	No.				
Rick Eustaquio		1	73-494			_	692-6298			01266					
Start Date (10)	Scheduled 01-16-20		letion Da	ate (11)			of OSHA Mon x Contracti		LC						933
01-11-2017 Occupancy Status During Abatement (Chec					Stre	et	Address								
FIllin ClassdA/acated During Entire	Period of Ab	ateme	ent		100		30X 734							-	
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	nal Facility H	lours					tate, Zip Code dland Park) 074	24					
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Section 1	novati molitic				SI I	Mini-Encl	osure	edure	h Negative					
							Non-Exer	npted	(*) ar	nd Non-Fr	iable	Proc	Abater	nent	
	ls L	ocatio	on										Тур		
Location of		Solel			Descript	tio	n of	0		Amount				ш	
Asbestos-Containing Material (ACM)	Main	tenan	ice/	Asbest (i.e.	thermal systematical	ten	Material (ACN ns insulation,	')		Specify		Rer	Re	ncal	Elicipania
TO BE ABATED In Facility	Custo	dial S (12)	taff?		surfacing, other misce	V	AT, or		5	F or LF)		Remova	Repair	Encapsulate	neo
(13)	\		N/A		Other Hisoc		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					<u> </u>		te	G
5.1	Yes	No	N/A		Joint Cor	mı	oound		(35 SF		Х			
Bedroom			^												
															_
									D- '	stored I s-	dell				
Name of Registered Waste Hauler			JDEP W		Cubic Yar	ds				SIEIEU LAF	IUIIII				
			6184		9 CY										
City, State			~		Disposal Dis		^			PA					
Woodland Park NJ 07424	()					_	//			$\overline{}$	Dat	е			
Completed by		act NA	anagei		Oigil		Mer	_		/	01	-02-	2017	7	
Woodland Park NJ 07424	Title Proje	Fa)	lauler ID	No.	of Waste 9 CY	Da 01	Gl te Cit 7 M	ROV y, Sta	VS.	PA	Dat		2017		

Print Form

CK# 3069

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Date of Notification (1)					er/Operator	(2)			Aumonatoria		NAMES OF THE OWNER, OWN	711	
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Agencies Notified Type Notification			eet Add	tress	+ Ac	. Ч	Reli	ij JA	/N E	201	7	100	
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M DOH justification)	dung	Na	eme of t	Contact	6,7		1	-1 - Felepin	MIE PALILI	ಟ್ಟಿದ್ದೇ .			- 1
DCA Canceliation			_		FATION					-			
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Name of Facility Where Abatement is Taking P		0	1 1				School (K-12						Į
The Fe-ber Company Street Address	V100	-6-	7			II.	Subchapter & Other (i.e. pri	3 (Other th	ian K-12) mmercia	buildi	ngs, l	rome	6.
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Cdunty (6)		(S	TATE U	SE ONLY)		0	Hile Bu	ildi	9				and continue
Name of Monitoring Firm Hired by Building Ow	ner (8)	· · solida	ASCM	No.	Y		batement Con		440				No com Spens
		4					dation Co.,	MC					
Street Address						t Add	ress rose Rd						1
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City, State, Zip Code							ck, New Je	rsey					200
Project Manager for Monitoring Firm		1 76	slaphon	e No.	Telep	hone	No.	į Li	cense No)_			1
1 TO GOOD MALE AND TO SEE THE		į			732	294	1757	00	0029				
Start Date (10)	cheduled	Comp	letion [Date (11)	Name	e of C	SHA Monitor						1
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Occupancy Status During Abatement (Check	Only One)	-			Stree	at Add	ress						77.11.00
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In Facility		12)	a)1 !	-	surfacing, V ther miscella			SF or	(LF)	novi	Repair	nsd	osu
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Name of Registered Waste Hauler		2	JOEP Wauler ID		Cubic Yards of Waste	,	1	Landfill	a worse				
Ace Insulation Co., Inc.		12	2086			/							
City, State					Disposal Da	ie T	City, Stat Easton						
Colts Neck, New Jersey	-				1/9/1	+	Eastuil	1111		de	(
Completed by	Title Secret	tanı"	Ггазег	irer	l' Signata		. /		120	1/2	11	7	
Bree McGuire	Secret	cai y	110000	<i></i>	1 1	9	WA		}	110	11	1	



Date of Notification (1) JANUARY 3, 2017		N	Name of E	Building Owner	er/Operator	(2) ACTO	RS						
Agencies Notified Type Notification		5	Street Add	dress	1 6					j v		1	
□ EPA 🗴 Initial		11.02		PLE STRE	ET		11.						
DEP Amended Amendment #_				e, Zip Code RIDGE, NJ	08857				1 A KI	6 201	7		
Emergency (inc justification)	luding	1	Name of 0	Contact					phone Nu		-		
DCA Cancellation				RENNAN									
Name of Facility Where Abatement is Taking P	lace (3)		FACIL	ITY INFORM	ATION	Туре о	f Facility (4)		ke of each	6			. 1
SINGLE FAMILY DWELLING (\	/ANC/	ANT,	SET F	OR DEMC))	T S	chool (K-12) ubchapter 8	(Other	r than K-1	2)			
Street Address 213 DAVIS STATION ROAD						一 0	ther (i.e. pri	vate &	commerc	ial build	ings,	nome	S,
City (5)	Λ					Square		# of 2	Floors		dg. Ag) +/-	ge	
UPPER FREEHOLD TWP., NJ 0851 County (6)	4		County C	ode (7)		Currer	nt Use (Prior	if bein	g demolis	shed)		_	
MONMOUTH				SE ONLY) _			SLE FAMI			NG			
Name of Monitoring Firm Hired by Building Ow MONMOUTH COUNTY PARK WIL		PLY	ASCM FIRM				ement Contr						
Street Address			1	2).		Addres							
						BOX							
City, State, Zip Code					200000000000000000000000000000000000000	State, Zi _l V EGY	o Code PT, NJ 08	3533					
Project Manager for Monitoring Firm			Telephon	e No.		hone No -758-3			License 00394	No.			
	chedule		npletion D	Date (11)	TO SECURITION OF THE PARTY OF T		IA Monitor HNOLOGI	IES. I	NC				
JAN 13, 2017 Occupancy Status During Abatement (Check C						t Addres							
Facility Closed/Vacated During Entire Pe			nent		P.O	. BOX	337						
Abatement Performed Outside of Normal Other – Describe:	Facility	Hours	5		100	State, Zi N EGY	p Code 'PT, NJ 0	8533					
Scope of Work (Check All That Apply)	S-100000					_							
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	71-7-67-92				L	△I Not	n-Exempted	(*) and	a Non-File	able Pro		emeni	
		Locat Vormal			Descriptio	n of					Т	ре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	intena todial (12)	ely by nce/ Staff?	(i.e. the	Containing ermal systen surfacing, V ther miscella	Material ns insula AT, or		(5	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
1ST FLOOR MECHANICAL ROOM	X	140	INCA	WRA	PPED All	R DUC	TS	5	60 LF	X			
3RD FLOOR BACK ROOM	^	X			(12" FLO				50 SF	X			
SIND I EGGIN BAGIN NOOM													
Name of Registered Waste Hauler			NJDEP W		Cubic Yards of Waste	***	Name of I						
EPC TECHNOLOGIES, INC.		100	Hauler ID 17000		2		WASTE		NAGEM	IENT C)FP	Α	
City, State NEW EGYPT, NJ					Disposal Dat 3Y 01/31/		City, State		LE, PA				
Completed by STEVE SCHENKER	Title PRE	SIDE	ENT	,	Signatu	ire				Date 1/3/17	8		

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ite of Notification (1) 1/03/2017		Nam	e of Build vnship (ling Owner/of Deptfor	Operator d	(2)				AN	6	2017	1	
pencies Notified Type Notification		Stree	et Addres	s per Street				U U	U	AIV	U	2017		-
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Emergency (including justification)	ling	An	ne of Cor drew R	icco					Telep	TROUT T				
DCA L		F	FACILITY	INFORMA	TION	T	ype of Fa	cility (4)						
ame of Facility Where Abatement is Taking Pla /acant Residence	ce (3)			-		E	School	ol (K-12)	(Other	than K	(-12) ercial l	ouilding	s, hor	nes,
treet Address 198 Park Avenue						5	etc.) Square Fe			Floors		Bldg.		
City (5) Westville				(7)		-	Current Us	se (Prio	r if bein	g demo	olishe	d)		
County (6)		(S	ounty Cod TATE USE	ONLY)			SFD							
Gloucester Name of Monitoring Firm Hired by Building Own	er (8)		ASCM N	0.	Nam	ne o	f Abateme Constru	ent Con action	Corp	(9)				
Street Address					Stre	eet A	Address Creek Ro	oad						
					City	, St	ate, Zip C	ode	1					
City, State, Zip Code							one No.	0803	1	Licen).		
Project Manager for Monitoring Firm			elephone		85	6.4	66.6452 of OSHA			0120)4 ——			
Start Date (10) 01/13/2017 S	cheduled 2/10/20	Comp 117	pletion Da	ate (11)	Ar	ndr	ew Ricc	0	722					
Occupancy Status During Abatement (Check C	Only One)	0.00		28	82 (Creek R							
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal Other – Describe:	riod of Ab Facility h	atem Hours	ent		Cit B	ty, S Sellr	State, Zip (nawr, N	Code J 0803	31					
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Re X De	enova	tion ion				Mini-	Enclosu	re	0		Pressure		4
							× Non-	Exempt	ed (*) a	ina ivoi	1-1 1101	ole Proc	Abate	ment
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	Locati lormal d Sole intena odial (12)	lly ely by ince/ Staff?	(i.e. th	Descri s Contain ermal sy: surfacing other mis	ning ester a. V	Material (ns insulat AT, or	ACM) ion,		Amoui (Speci SF or L	fy	Removal	Repair	Encapsulate
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Exterior		X			Truine.									
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				Monto	Cubic Y	'ard	S	Name	of Reg	gistered	Land	fill		
Name of Registered Waste Hauler Ricco Construction Corp	10.31		NJDEP \ Hauler II 28909) No.	of Wast	te		Sale	m Co					
City, State					Disposa TBD			City, Allo	State way, N	۸J		Date		
Bellmawr, NJ Completed by Andrew Ricco	Title	ner			Sig	igna	ture	us	ph	in	_	01/03	/201	7

THERMAL INSULATION

1-5-17

Nume of Regulated Landill

Waynesburg,

Minerva Enterprises , LLC

NUIDEP Wagte Hasi

17109

Estimator De not use shirtern for motor SF

44688

2-28-16

BASEMENT

Completed by

R. NELDRAN

Name of Registered Values Fields

Best Removal Inc

Hackensack , N.J. 07601

State of New Jersey

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NO CK		8			30 and 12:12		11			# 37 A BILLAN		
Date of Notification (1)				Building Ov 2 CH	vner/Operato	or (2)	~ ~		ΔN	6	201	7
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DEP Amended Amendment #_	1	- 2	- 1	e, Zip Code		1		-	1	- 17	71	7
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			FACIL	ITY INFOR	RMATION	TTue	be of Facility (4	\				`
Name of Facility Where Abatement is Taking I	Place (3)					Тур						
RESIDENCE Street Address						1	School (K-12 Subchapter 8	(Other than K-12)				
						D	✓ Other (i.e. pr ➤ etc.)	ivate & commercial	buildi	ngs, i	nomes	,
City (5)	-						uare Feet	# of Floors	Blo	dg. Ag		
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County (6)				ode (7) SE ONLY)		Cu)	SELLCE	1.00			
Name of Monitoring Firm Hired by Building Ov	wner (8)		ASCM	No.	Nam	e of A	batement Cont					
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Street Address					Stre	et Add	ress	/ 0000	1			
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City, State, Zip Code							JTO L	NJC	000	6	50	5
Project Manager for Monitoring Firm		T	elephor	ne No.		phone		License No	_			
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	Scheduled	Com	oletion [Date (11)	W. C. C. C.		SHA Monitor		1.1			
Occupancy Status During Abatement (Check	Only One	1 /		211		et Add		MACY IT C	+76			
Facility Closed/Vacated During Entire Pe			ent		2	.OC	205	130				
Abatement Performed Outside of Norma	al Facility H	Hours					, Zip Code		_		-	
Other – Describe:					- Ci	NIL	MMIN	SON N	ا ك	05	50	1.
Scope of Work (Check All That Apply)			Ø				Full Containme	ent with Negative Pr	ecci ir	·e		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novat moliti					Mini-Enclosure	•	Coour			
	/						Glovebag Prod Non-Exempted	cedure I (*) and Non-Friable	e Proc	cedur	э	
	ls I	ocatio	n								ment	
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Asbestos-Containing Material (ACM) TO BE ABATED	' Mair	Solel	ce/		os Containing hermal syste			Amount (Specify	Re	מג	Enc	E
In Facility	100000000000000000000000000000000000000	dial S (12)	taff?	(surfacing, other miscel	VAT, c	or	SF or LF)	Remova	Repair	Encapsulate	Enclosure
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		LN	JDEP V	Vacto	Cubic Yard	9	Name of	Registered Landfill				
Name of Registered Waste Hauler			auler ID		of Waste		0			C		
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City, State					JAR		140	ilsvill	E	- 4	2	= =
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	(1	<u>'</u>	* D	not !!	see this form for	r asbestos licensure	e exen	npted	activi	ties.
ASB-41 (R-06-08)					D	J HOL U	oc mo ihmi lo	. agoodios nochisare	JAGII			

CHECU # 406

State of New Jersey Notification of Asbestos Abatement

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

Date of Notification (1) 12/30/16				Name of Build	ing Owner/	Operato	r (2)	Ē	l V	
Agencies Notified	Notification Initial no		1	Street Address 9 Entin Road						The same
⊠ EPA □ DCA	☐ Amende ☐ Emerger	cy notifi	ication	City, State, .Zip Code Parsippany NJ 0705		4 4	JAN	6	2017	7
☑ DOL ☑ DEP ☑DOH	☐ Cancelle	d		Name of Contact: Larry Rowe		Jelenhar		-	NTRO	11.7
<u> </u>			FACILITY IN	FORMATION				-1-54		
Name of Facility Where Abatement Q/C Trailer	is Taking Place	(3)		Type of Facility (4) School (K-12)						+1.000
Street Address 176 Mount Pisgah Avenue			# # # # # # # # # # # # # # # # # # #	□ Subchapter 8 (oth ☑ Other (i.e. private Sf 400 Floors 1 Current Use (prior if b	& commercial b .Age;45		mes, et	C.		
City (5) County (6) Oxford Warren	3)		ty Code (7) Use Only)	2 Current Ose (prior in t	Jellig demonstret	., .				
Name of Monitoring Firm Hired by EN/A	sidg. Owner (8)	ASCN	/ No.	Name of Contractor (SBL Contracting Inc	9)					
Street Address				Street Address 5 Marguerite Lane						
City, State, Zip Cod				City State, Zip Code Towaco 07082						
Projec Manager for Monitoring Firm	<u>Telephone</u>	Number		Telephone Number 973-901-0153		<u>License I</u> 01265	Numbe	Ţ		
Scheduled Start Date (10) 01/09 17/2017	Scheduled 01/13/17	Comple	tion Date (11)	Name of OSHA Moni BL Contracting Inc.	tor					
Occupancy Status During Abatemer Facility Closed/Vacated During Abatement Performed Outside of	Entire Period of	Abaten		Street Address 5 Marguerite Lane						
Describe				City, State, Zip Code	8 4					
□Other – Describe:			ω,	Towaco, NJ 07082						
Source of Work (Check all that appl	<u>y)</u>								2000	
$\square \ge 3$ sf or ≥ 3 lf $\boxtimes \ge 160$ sf or ≥ 260 lf			☐ Renovation ☑ Demolition	i = = = = = = = = = = = = = = = = = = =	Non Exampted I Mini-Enclosure Glove bag Proce I Full Containme	dure ent with Neg	ative P	ressur	е	12
Containing Material (ACM) in Facility (13)	s Location Norm Ised Solely by flaint/Custodial S 12) YES NO		Material (ACM)	sbestos Containing (i.e. thermal systems icing, VAT, or other	Amount (Spec	cify SF or		ve Rep	Type	
First floor	TES NO	X	Window calk		200 LF		X			
			1							
Name of Reg. Waste Hauler Waste Management of Pennsylvania	NJDEP Wast 0036784	e Hauler	ID#	Cubic Yards of Waste 3		Name of Re	egistere	d Land	fill	
					Disposal Dat	e		State		
					01/13/17		Tully	rtown,	PA	
Completed by (Print or Type) Nedo Vasilic	Title President			Signature Nedo V	acida	<u>Date</u> 12/30/20	16		- V	

MON			(Purs	uant t	o NJAC	8:60 and 5:1	6)	j	mil					7
Date of Notification (1)			IN	ame of	Building (Owner/Operat	tor (2)		111	JAN	6	201	7	
	/22/16							Maglaras!	44	OAN	- 0	201	/	- / L
Agencies Notified	Type Notification		S	treet A	ddress				1,90	TOTO :	Tell Williams	e e e e e e e e e e e e e e e e e e e		1
	☐ Initial		_						**********	F1115	000	-		26
EPA DEP	Amended Amendment #	1	_ 0	City, Sta	te, Zip Co	de	C	NII 0791	71	many and many the	1000	انا س		2000 02-
⊠ DOL	Emergency (in	ncluding	_				Spa	rta, NJ 078	Telephone	Number				-
M DOH □ DCA	justification) Cancellation		I	lame of	f Contact	ph Angelo	nne.		relephone	Number				
LILLA	Caricellation			18-1-18-2			nic				-			-
				FACI	LITY INFO	RMATION	-17	ype of Facility (4	()			_		\dashv
Name of Facility Where	Abatement is Takir	ng Place (3)				111	School (K-12)	*/					
	Res	identia					F	Subchapter 8	(Other tha	n K-12)	a. ildin	ac		
Street Address							128	Other (i.e., priv	rate & com	imerciai				
							- S	Square Feet	# of Floo	rs		. Age		
City (5)	Belmar	NJ 08	3540				_ _	2500	2		_	75+	/	
County (6)	Deimai	, 1,000				(STATE		Current Use (Pric	or if being o	lemolishe	ed)			
M	onmouth		_	USE C							_			_
Name of Monitoring Fire		Owner	A	SCM N	lo.	Name of Aba	temen	nt Contractor (9)	omtol C	mri ooc	Inc			2
(8)	NA		_ _					ns Environm	ientai Se	ervices	, IIIC	_		=
Street Address						Street Addre	ess	PO B	ox 322					
						01 01-1- 7	Can		UA 322				_	=
City, State, Zip Code						City, State, Z	ip Cod	Allentown	. NJ 08:	501				_
			Talor	ohone N		Telephone N	lo.		License					=
Project Manager for M	onitoring Firm				9-9688			9-9688			493			_
	I Sch	neduled C	_			Name of OS								
Start Date (10) 12/7/16	301		/20/1		1	2000 No. 10 No.			ECS					
Occupancy Status Du	ring Abatement (Ch				7	Street Addr	ess		0.41					
Facility Closed/Vac	ated During Entire	Period-of-	Abater	ment_	/			PO B	ox 341				_	=
☐ Abatement Perform	ned Outside of Norn	nal Facilit	y Hour	S		City, State, 2	Zip Co	de . 1	- NIT 09	0515				
Other - Describe:	8am-4pm							Crosswick	s, NJ U	5313				=
Scope of Work (Chec	k all that apply)					□Fu	I Conta	ainment with Neg	gative Pres	sure				
≥3 sf or ≥3 lf			enovati			☐ Mir	i-Encl	osure						
≥160 sf or ≥260 lf		X De	emolitio	n		☐ GIO	ovebag n-Exer	g Procedure mpted (*) and No	n-Friable F	Procedure	е			
		Isl	Locatio	on							A	oater		
			omally			Descript	ion of					Тур		\dashv
Location Asbestos-Containing	on of on Material (ACM)		d Solel ntenan		Asbes	tos Containin	g Mate	erial (ACM)	Amou		_		9	m
TO BE A	BATED		ustodia Staff?		(i.e.	, thermal syst surfacing.	ems in	sulation,	(Spec		Remova	Repair	cap	nclo
IN Fac			(12)			other misce					ova	air	Encapsulate	Enclosure
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					10/	I Oubis Van	40	Name of Reg	istered Lar	ndfill				
Name of Registered				NJDEP Hauler I		Cubic Yard of Waste		Name of Neg			4511			
Stevens Enviro	onmental Servi	ices, In	<u>c.</u>	18	292	6 CU		Cit. Ctata	GROW	O Lai	UIIII			
City, State						Disposal D		City, State	Marri	sville,	РΔ			
	Allentown					1/20/1			IVIOITI	Date,	111			_
Completed By		Title	\	at 11.4.	20.00	Signa	lure				12/3	1/1	6	
Mahlon E.	Stevens	<u>t</u>	rojec	ji ivla	nager	_							-	

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

MIN CX:			(Pui	rsuant	to NJAC	8:60 and 5:16)		MEG	E		Ī.	111
Date of Notification (1)	22/16			Name	of Building	Owner/Operator	(2) Maglaras	114/1	To the training		-	el-wa
Agencies Notified	Type Notification		+	Street	Address		1114514145	JAN	(5 20	17	_
EPA DEP	Initial		-	City, S	tate, Zip C			1 Salanda da Salanda da Salanda			NO. 1 1915	=
DOL .	Amendment #						Sparta, NJ 07		28.0	31/7		ř¢
DOH DCA	justification) Cancellation			Name	of Contact	Jeff		Telephone Numb	er			
				FAC	ILITY INF	ORMATION						
Name of Facility Where		Place dentia					Type of Facility School (K-12	2)				
Street Address							Subchapter of Other (i.e., pohomes, etc.)	8 (Other than K-12 rivate & commercia) al build	ings,		
City (5)	Belmar,	NII Oʻ	7710				Square Feet 2500	# of Floors	Blo	ig. Ag		
County (6)		113 0	1/19	Coun	ty Code (7	7) (STATE		ior if being demolis	hed)	10		
	nmouth	Duno-	_	ASCM	_	Name of Abaten	nent Contractor (9)				_
Name of Monitoring Firm (8)	NA	JWHEI	1	ASCIVI	INO.		and the second of the second o	nental Service	es, In	c.		
Street Address						Street Address	PO E	30x 322				
City, State, Zip Code						City, State, Zip C	Code	n, NJ 08501				
Project Manager for Mo	nitoring Firm		Tele	phone	No.	Telephone No.		License Ne.				
Start Date (10)		duled C			9-9688 te (11)	(609) 2: Name of OSHA	59-9688 Monitor	0	0493			
12/7/16	John		2/31/		(11)			ECS				
Occupancy Status During Facility Closed/Vaca		ck only	one)			Street Address	PO E	30x 341				
☐ Abatement Performe ☐ Other - Describe:	d Outside of Norma					City, State, Zip (s, NJ .08515				
Scope of Work (Check												_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enovati emolitio			Mini-En	intainment with Ne inclosure lag Procedure	gative Pressure on-Friable Procedu	re			
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Location		Used	Solel	y by	Ashoo	Description of tos Containing Ma		Amount				
Asbestos-Containing TO BE ABA IN Facilit (13)	TED	C	ustodia Staff? (12)			, thermal systems surfacing, VAT other miscellane	insulation, , or	(Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A				2000 -5	1.5		6	
Exteri	or			×		Transite Sic	ning	2000 sf	×			
5												
Name of Registered Wa	aste Hauler		1 1	NJDEP '		Cubic Yards	Name of Reg	istered Landfill				
Stevens Environ		es, Inc). F	Hauler II 182	2 No. 292	of Waste 6 CU		GROWS Lat	ndfill			
City, State	Allentown,			10/		Disposal Date 12/31/16	City, State/	Morrisville,	PA			
Completed By	Anentown,		-			Signature	11/	Date		0/2		
Completed by					nager	////	1 //	18	11/2	1/16		

ASB-41 MAR 00

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

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	JAN	6	2017	les ³

Date of Notification (1) Separation (2) Care	(1/# 4140)	(Pursuan	t to NJAC	8:60 and 12:120	0)	IAN	6	20	17	
Agendas Notified Spe Spe Spe Notification Speet Address CLERALON CR. Speed Annended Ann		Nari	ne of Buildin		TATE	1 1				
DCA Cancellation SIMB FACILITY INFORMATION	DEP Initial Amended Amendment # Emergency (including	City,	State, Zip	8 CLER Code LERMON	emon n	08711		313 343 		=
Name of Facility Where Abatement is Taking Place (3) KESINCE NICE Street Address Subol (K:12) Subol (K:12) Subolapter 6 (Other than K-12) Subolation		INGIII					5			_
Street Address Street Address Stree		FA	CILITY IN	FORMATION						
County (6) County (6) County (7) (STATE Count Use (Prior if being demolished) VIALAL T Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) Name of Abatement Contractor (9) KLC/M.C. J.M.C. Street Address City, State, Zip Code	Street Address	e (3)			School (K-1 Subchapter Other (i.e.,)	12) r 8 (Other than K-12) private & commercia)	l build			
County (6) CAPE MAY Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Monitoring Firm Telephone No. Street Address Street Address Street Address Street Address City, State, Zip Code MAPLE HADL MACHALT City, State, Zip Code Maple City, State, Zip Code City, State City,						# of Floors				
Name of Monitoring Firm Hired by Building Owner (8) Street Address Street Ad	County (6)	Cou	inty Code (E ONLY)	7) (STATE	Current Use (F					
Street Address Stre		ASCN	No.	Name of Abatem						=
Steel Notices Steel Stee		_ _			MO I	MC				_
Project Manager for Monitoring Firm Telephone No. Telephone No. Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor Name of N	Street Address			369		RICE ALE				
Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor VI A	City, State, Zip Code					ADE WIJ (280	57	7	
Start Date (10)	Project Manager for Monitoring Firm	Telephone	No.	Telephone No.	19-0472		Ч			
Abatement Performed Outside of Normal Facility Hours City, State, Zip Code	1-12-17	9-12	ate (11)	Name of OSHA N						
Salif Renovation Renovat	▼ Facility Closed/Vacated During Entire Period of	Abatement			ode	a Significant				=
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Yes No N/A Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A TRAWSITE TRAWSITE TRAWSITE TRAWSITE TRAWSITE TRAWSITE TRAWSITE Transport Type Abatement Type Abatement Type Abatement Type Transport Type Transport Type Transport Type Abatement Type Abatement Type Abatement Type Transport Type Transport Type Abatement Type Transport Type Transport Type Transport Type Transport Type Abatement Type Transport Type Transport Type Transport Type Transport Type Abatement Type Transport Type Abatement Type Abatement Type Transport Type Transport Type Transport Typ	□ >3 sf or >3 lf □ Re			Mini-End	closure ag Procedure					
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Name of Registered Waste Hauler KUTMCO DWC City, State MAPLE SHADE N. J TRAWSITE Z500 5 = X LUbic Yards Of Waste Of Waste Cubic Yards Of Waste Of Waste City, State Disposal Date City, State WASHER N. J	Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility No Used Mair Ct	ormally I Solely by htenance/ ustodial Staff?		tos Containing Mat thermal systems in surfacing, VAT,	erial (ACM) nsulation, or	(Specify	Removal			Enclosure
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City, State WAPLE SHADE N. J Haufer ID No. of Waste 3 V DS C. M. C. M. V. A Disposal Date City, State WAPLE SHADE N. J WAPLE SHADE N. J	510INI6	X		I KCAM 211		<u>C)005</u>	٨	-		
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City, State Disposal Date City, State WOOD DIVILE NI. T	Name of Registered Waste Hauler	Hauler IC	No.	of Waste	Name of Reg		И			
MANCE SHAPE NO	City, State	-1116	4		City, State	NIBIALE	nI.	T		
Date	Completed By Title	2400,5	I	Signature.	Drong.) ~	7		

OK# 5197

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Date of Notification (1) 01/03/17					Building O ge Man			2)								
Agencies Notified	Type Notification			treet Add	iress sland A	ve, Sui	ite 2	93								
EPA DEP DOL	Initial Amended Amendment		C	ity, State	, Zip Cod NJ 070	de										
× DOH DCA	Emergency (justification) Cancellation	including	11200	lame of C Sarah	Contact					Tele	phone No	umber				
				FACILI	TY INFO	RMATIC			E 10. (4)							
Name of Facility Where Union Street Address		g Place (3)				1.1		Sc St	Facility (4) thool (K-12) bchapter 8 her (i.e. pri) 3 (Othe	er than K-	·12)	ldir	nas k	ome	
							E	∑ Ot etc		ivate o	Comme					
City (5) Union City							(Square	Feet	# of	Floors		Bld	g. Ag	е	
County (6) Hudson				County Co	ode (7) SE ONLY)				Use (Prior family dv			ished)				
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCM	No.				ment Cont							
Street Address		2					Street A 6 WHI		OVE CO	URT						
City, State, Zip Code					-11 10 -1		City, Sta		Code D, NJ 08	3701						
Project Manager for Mo	nitoring Firm		T	elephon	e No.		Telepho				License 1200	No.				
Start Date (10) 1/13/17		Scheduled 1/16/17		pletion D	ate (11)				A Monitor PROFES	SSIO	NALS					
Occupancy Status Duris	eg Abatement (Chec	ck Only One	e)				Street A			UDT						
Facility Closed/Val Abatement Perform	cated During Entire ned Outside of Norr	Period of Al nal Facility	batem Hours	ent			City, Sta	atė, Zip		15.00						-
X Other – Describe:						-	LAKE	WOC	D, NJ 08	3701				0500		
Scope of Work (Check	All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enovat emoliti				×	Mini Glov	Containme -Enclosure /ebag Proc -Exempted	edure						
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Location Asbestos-Containin TO BE All In Fac (13	g Material (ACM) BATED cility	Mai	d Solei ntenar odial S (12)	nce/		tos Cont thermal surfac	scription taining M systems cing, VAI niscelland	aterial insulat I, or		(3	mount Specify F or LF)	Zelloval		Repair	Encapsulate	Enclosure
INTER	RIOR					Boile	r Insula	ation			50sf	x			e	
INTE	(IOI)	-											7			
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Name of Registered W	aste Hauler			JDEP W		9-93-99/2011	Yards	5-2	Name of	Regist	ered Lan	dfill				
NEWARK CARTIN	G		10000	lauler ID 4509	No.	of Wa		9 . 1	IESI							
City, State NEWARK, NJ						1/16/	sal Date	, =	City, Stat BETHL		И РА	-				
Completed by JOSEPH PERLST	EIN	Title OWN	IER			S	Signature					Date				

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(Netification (1)	Nan	ne of Building	Owner/Operator (2	HAWN	EXCAUATION	10	l leter-		
Agencies Notified Type Notification	Stre	eet Address	O. Box	198	SEESTON CONT.	ROL 8	=	=	
□ ₱A □ Amended □ Amendment #	City	y, State, Zip Co	APE MAS		Telephone Number			=	
DOL Emergency (including justification)	Na	me of Contact	MM		Telephone Telephone		-	=	
DCA Caricellation	F	FACILITY INF	ORMATION	Type of Facility (4	4)				
Name of Facility Where Abatement is Taking Place (3)			School (K-12)		uildings			
Street Address				Square Feet	# of Floors	Bldg. A			
City (5) STONE HARBON	e		CTATE	1500 Current Use (Pri	or if being demolished				1
County (6)		County Code (USE ONLY)		VAC	AUIT		_		1
Name of Monitoring Firm Hired by Building Owner	AS	SCM No.	Name of Abater	nent Contractor (9)	JC	14			1
(8) N.A			Street Address		CE AUE				
Street Address			City State, Zip	Code	*/ >	780	50	<u>, </u>	
City, State, Zip Code		Ne	Telephone No.	CC J.	License No.				
Project Manager for Monitoring Firm		none No.	1856-7	79-0472	2009	49			-
Start Date (10) Scheduled C	ompletic	on Date (11)	Name of OSHA	Mornio					-
1-13-17 (Check only	20 - (one)		Street Address	s					_
Occupancy Status During Abatement (Facility Closed/Vacated During Entire Period of Abatement Performed Outside of Normal Facility Abatement Performed Outside of Normal Facility		nent S	City, State, Zip	Code					_
Abatement Performed Outside 6.44					a softwo Dressiffe				
Scope of Work (Check all that apply)	Renovatio	on	Mini-	Containment with N Enclosure ebag Procedure		'e			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	emolition	n	Non-	Exempted (*) and I	Non-Friable Procedur	At	aten Typ	ent	
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility	Location Normally and Solety aintenance Custodia Staff? (12)	y by ce/ Ast	Description bestos Containing e., thermal syster surfacing, V other miscella	Material (ACM) ns insulation, AT, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	
(13)	No.	N/A	1.15	175	750035	X			
SIDING		X	TRANS) ()				_	-
	-				_	+	-	-	1
Name of Registered Waste Hauler		NJDEP Waste Hauler ID No.	Cubic Yards of Waste	C.	Registered Landfill M. C. M.), #	1		_
KITHCO INC		17904	Disposal Da	City, State	SOUBINE				
City, State MADLE SHADE Title	M.)	Signatu		Date	13/1	7		
Completed By MICHAEL KLEUM S	UP.			activities		1-1-			

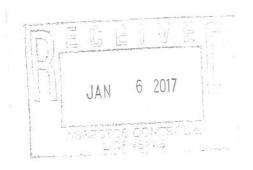
W# 21953	NOT	(Pursi	uant to I	ASBESTOS NJAC 8:60 an	d 12:120)					9 15	2 11		
Date of Notification (1) 1/3/2017		Na No	me of Bu JDEP (uilding Owner/ OFFICE OF	Operator (RESOL	(2) JRC	E DEVELO	PMENT	rij J	AN	6	2017	
Agencies Notified Type Notificatio	n		eet Addr O. BO						155		100	Fin C	57,1
EPA Initial DEP Amended Amendme	nt # 2	Cit	y, State, RENTO	Zip Code N, NJ 0862	25			L	a	LUGE	. 458	112	
Emergenc justification	y (including n)	0.000	ame of C					Teleph	one Numb	er			
DCA Cancellation	on	200100		TY INFORMA	TION								
Name of Facility Where Abatement is Tak RESIDENCE & GARAGE	ting Place (3)		PAOILI	THE OTHER		Туре	of Facility (4) School (K-12) Subchapter 8	1	han K-12)				
Street Address D&R CANAL STATE PARK -						×	Other (i.e. prinetc.) are Feet	vate & co	ommercial		g. Ag		,
City (5) FRANKLIN TOWNSHIP						i i i i i i i i i i i i i i i i i i i							
County (6) SOMERSET		Co (S	ounty Co	ode (7) SE ONLY)			rent Use (Prior			·u)			
Name of Monitoring Firm Hired by Buildin USA ENVIRONMENTAL MANA	ng Owner (8) GEMENT, IN	VC.	ASCM !	No.	TW	O BF	atement Control OTHERS (ractor (9)) RACTING	3			
Street Address 344 WEST STATE STREET					A	/REE	LAND AVE	NUE					
City, State, Zip Code TRENTON, NJ 08618			85		City, S	State,	Zip Code A, NJ 07512		-				
Project Manager for Monitoring Firm WILLIAM WEISGARBER			elephone			-956	-8700		icense No 00494).			
Start Date (10) 1/10/2017	Scheduled		pletion D	ate (11)			SHA Monitor AS (9) ABO	/E					
Occupancy Status During Abatement (C	heck Only One)			Stree	t Add	ress						
Facility Closed/Vacated During Ent Abatement Performed Outside of N Other – Describe: VACANT	ire Period of Al Iormal Facility I	oateme Hours	ent		City,	State	, Zip Code						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	The state of the s	enovat emoliti				×	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	edure				Э	
	Is	Locatio	on				NOTECOMPLEX	1			Abate	ment pe	:
Location of Asbestos-Containing Material (ACM TO BE ABATED In Facility (13)	Used Mai	ormall d Solel ntenar odial S (12)	ly by nce/	, s	Description Descri	Mate ms in: /AT, o	sulation,	(Sp	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A							X			
SEE ATTACHED													
Name of Registered Waste Hauler TWO BROTHERS CONTRACT	TING	i i	NJDEP V Hauler ID 18743	No. of	ubic Yard: Waste	S			red Landfi NAGEME		3.R.(D.W.	.S.
City, State	100 0776-074		10740	D	isposal Da 23/2017		City, Sta		LE, PA			1)	
TOTOWA, NJ Completed by	Title				Signat		- /	1		ate /3/20	47		

ate of Notification (1) 2/22/2016 gencies Notified Type Notification Initial Amended Amendment # 1 Emergency (including justification) Cancellation Identity Where Abatement is Taking Place (3) RESIDENCE & GARAGE Street Address D&R CANAL STATE PARK - City (5) FRANKLIN TOWNSHIP County (6) SOMERSET Name of Monitoring Firm Hired by Building Owner (8) USA ENVIRONMENTAL MANAGEMENT, INC. Street Address 344 WEST STATE STREET City, State, Zip Code TRENTON, NJ 08618	NJII Stree P.C City TR Narr AL	DEP O eet Addre O. BOX y, State, 2 RENTO me of Co	Zip Code N, NJ 0862 Intact IE Y INFORMAT	RESOL	Type of F	acility (4) pol (K-12) chapter 8 (er (i.e. priva	JAN Telephone Nu Other than K- ate & commer	3 000 umber				
Initial DEP DOL Amended Amendment # 1 Emergency (including justification) Cancellation Idame of Facility Where Abatement is Taking Place (3) RESIDENCE & GARAGE Street Address D&R CANAL STATE PARK - City (5) FRANKLIN TOWNSHIP County (6) SOMERSET Name of Monitoring Firm Hired by Building Owner (8) USA ENVIRONMENTAL MANAGEMENT, INC Street Address 344 WEST STATE STREET City, State, Zip Code	P.C. Cityy TR Narra AL	O. BOX /, State, 2 RENTO me of Co _ PAYN FACILIT bunty County Coun	Zip Code N, NJ 0862 Intact IE Y INFORMAT		School Subo	acility (4) pol (K-12) chapter 8 (er (i.e. priva	Telephone Nu	3 000 umber	N71			
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Name of Monitoring Firm Hired by Building Owner (8) USA ENVIRONMENTAL MANAGEMENT, INC Street Address 344 WEST STATE STREET City, State, Zip Code	1 1	ASCM N		-			f being demol	isnea)				
Street Address 344 WEST STATE STREET City, State, Zip Code			lo.	Name	of Abatem O BROT	ent Contra HERS C	ontractor (9)	ING				
City, State, Zip Code				Stree 11 \	t Address /REELAN	ND AVE	NUE					
TRENTON, NJ 08618				City,	State, Zip (Code IJ 07512						
Project Manager for Monitoring Firm		elephone			ohone No. 3-956-870	00	License 0049					
WILLIAM WEISGARBER Start Date (10) Scheduled C				Nam	e of OSHA ME AS (Monitor	 E					
ON HOLD 1/6/2017					et Address	3)7123						
Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Performed Outside of Normal Facility Holling Other – Describe: VACANT	ateme	ent			State, Zip	Code						_
Scope of Work (Check All That Apply)	novati	ion on			X Mini-	Enclosure	nt with Negati edure (*) and Non-F				e	
									A	Abate Ty		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) No Used Maint Custod	tenan dial S (12)	ly by nce/ Staff?	SI	mal syste irfacing,	g Material (ems insulat	ACM)	Amount (Specify SF or LF		Removal	Repair	Encapsulate	-
100	No	N/A							Х			
SEE ATTACHED												
			-									-
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Name of Registered Waste Hauler TWO BROTHERS CONTRACTING	H	NJDEP W Hauler ID 18743	No. o	ubic Yar Waste 20	us		E MANAGI		NT G	6.R.0	D.W.	Ş
City, State		10140	D	isposal [6/2017		City, Sta	te RISVILLE, F	PA	-			
TOTOWA, NJ Completed by VIVECA RAMOS Title PROJ			3	Sign	1		10		te			_

Date of Notification (1) 12/12/2016		Nan NJ	me of B	uilding Owner/ OFFICE OF	Operator (RESOL	2) JRCE	DEVELO	PMEN	NT		001	7	111	
Agencies Notified Type Notification			eet Add O. BO	ress X 420					JAN	6	201	1	15-	
EPA Initial Amended Amendment #_		100 mm		, Zip Code DN, NJ 0862	25				15F	10.5				
Emergency (indiginal justification) DCA Emergency (indiginal justification) Cancellation	cluding		me of C					Telep	hone N	lumbe	er			
			FACILI	TY INFORMA	TION		. = //							
Name of Facility Where Abatement is Taking RESIDENCE & GARAGE Street Address	Place (3)						of Facility (4) School (K-12) Subchapter 8 Other (i.e. pri) (Other	than K	(-12) ercial b	ouildin	ıas, h	omes	,
D&R CANAL STATE PARK -						6	etc.) re Feet		Floors			g. Ag		
City (5) FRANKLIN TOWNSHIP	,							IF Is a las	a domo	lleboo	1)			
County (6) SOMERSET			ounty Co	ode (7) SE ONLY)		Curre	nt Use (Prior	t bein	g aemo	nsnec	1)			
Name of Monitoring Firm Hired by Building Ox	vner (8)		ASCM	No.	Name	of Aba	tement Cont	ractor (9) BACT	TING				
USA ENVIRONMENTAL MANAGEM	ΛΕΝΤ, IN	C.		27		Addres		JOINI	IVACI	11140				_
Street Address 344 WEST STATE STREET					11 V	REEL	AND AVE	NUE						
City, State, Zip Code TRENTON, NJ 08618					TOT	OWA	ip Code , NJ 07512	2		81				_
Project Manager for Monitoring Firm WILLIAM WEISGARBER		02336	elephon 09-65	e No. 6-8101	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	hone N -956-8			Licens 0049					
Start Date (10)	Scheduled	Comp	letion D	ate (11)	20020000		HA Monitor S (9) ABO	VΕ	2					
Occupancy Status During Abatement (Check	Only One)	-			Stree	t Addre	ss							
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe: VACANT	eriod of Aba	ateme ours	nt		City,	State, Z	Zip Code							
Scope of Work (Check All That Apply)											Say.			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novatio nolitio			Court Court	× M	ull Containme ini-Enclosure lovebag Proc	e cedure						
	T					의 No	on-Exempted	d (*) an	d Non-I	-nable		Abate		
		catio			_							Ту	ре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Main Custoo	Solely tenand dial St (12)	by by ce/taff?	St	Description Descri	Materians insufAT, or	lation,	(mount Specify F or LF		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A							_	Х			
SEE ATTACHED														
	-						i.							
Name of Registered Waste Hauler TWO BROTHERS CONTRACTING	3	Ha	JDEP Wauler ID	No. of	ubic Yards Waste 20	i	Name of WAST					3.R.C	D.W.	S.
City, State TOTOWA, NJ			=0 1/5)		isposal Da 6/2017	te	City, Sta		LE, F	PA		4		
Completed by VIVECA RAMOS	Title PROJ	ECT	C00	RDINATOR	Signati		ca f	Lar	l-n-	Da - 12	ite 2/12/:	2016)	

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

NJDEP D&R Canal State Park 13 April Lane Franklin Township, NJ 08873



Residence, Franklin Tov	wnship, NJ	
Material	Location	Quantity
Drywall Joint Compound	Throughout 1st Floor & Stairwell	5,800 SF
Floor Tile & Assoc. Mastic (multi-layer tile)	101, 101A, 105, 105A, 106, 106A, 108, 108A, 108B, 108C, H102	1,067 SF
Brown Adhesive Associated with Wood Wall Paneling	103	264 SF
Grey Cementitious Wall Panels	001	45 SF
Black Tar Wrapped Pipe Insulation	001	5 LF
Corrugated Paper Pipe Insulation	001	80 LF
Black Tar Flashing at Chimney & Vents	Exterior Roof	16 SF
Window Glazing	Exterior/Windows	27 Units/36 LF per
Duct (Imbedded in Concrete Slab)	Buried in Concrete Slab	140 LF

Garage, 13 April Lane, Franklin Tow	vnship, NJ	
Material	Location	Quantity
Black Mineral Coat Rolled Roofing	Exterior Roof	550 SF
Black Tar Flashing at Roof Edges	Exterior Roof	100 LF