MAG

STATE OF NEW JERSEY	2
NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NJAC 8:60-7 AND 12:120-7	Checl # 0029

Date of Notification	(1) / <u>18</u>	21		D&R HO	Building C BOKEN, LL	wner / Ope C	erator (2)	A COLOR),E	G		Wil
Agencies Notified	Type of N	Notification		Street Ad	ddress //MERCE BL	VD		5.7				
☐ EPA ☐ DEP		Initial Amended		City, Sta	te, Zip Cod ADT, NJ 07	e				JAN	8	2019
☑ DOH ☑ DOL		Amendment Emergency Cancellation	w/ justification		Contact AS DINALL	0		Telepho 201-487-	ne Numb 5657	Colombia Colombia	OCA	
			F	ACILITY II	NFORMATI	ON						N Hayer La
Name of Facility Who 414 JEFFERSON STI	ere Abater REET	ment is Taking	Place (3)		Type of F	acility (4)						
Street Address 414 JEFFERSON STR	REET					School (K	ter 8 (Other	than K-1	2)			
						bldgs., ho	., private & omes, etc.)		31			
City (5) HOBOKEN	County (6 HUDSON		County Code	(7)		,500	# Of Floor	3	Buildin	g Age 40	+	
Name of Monitoring	Fi 11i	II. DII. O	101		RESIDEN	CE/HOUSE					1000	
Name of Monitoring AET	FIRM HIREC	d by Bldg. Ow	ner (8)	ASCM NO		TAR CONT	RACTING G	ROUP IN	IC.			
Street Address 907 Doolittle Drive					Street Ad			, 110	<u>.</u>			
City, State, Zip Code					32 William	ns Parkway						
Bridgewater, NJ 0880			1=			e, Zip Code)					
Project Mngr. For Mo Eric Southerland		-irm	Telephone Nu 610-891-0114	ımber	East Hand	over, NJ 079	936					
Sheduled Start Date			pletetion Date (1	/	Telephon							
/	/19		$/ \frac{30}{}$		973-88	84-8682			ſ	0860		
Occupancy Status Di	uring Abat	tement (Check ted During Er	Only 1)			OSHA Moni						
Abatemen	t				Street Ad		RACTING G	ROUP, IN	C.			
Abatement Hours - De		ed Outside of	Normal Facility		22 William	o Darlessa						
		_8:00AM - 4:30)PM		City, State	s Parkway , Zip Code						
Scope of Work (Chec	k All That	MON-FRI Apply)			East Hano	ver, NJ 079	36			-		
☐ Demolition	1	V	Renovation		Full Conta	ainment wi	th Negative	Pressure				
☐ ≥3sf or≥3l ☑ ≥160 sf or					Mini - End	losure		11000010	1			
<u> </u>	2200 II				Glovebag Non-Exem	Procedure	d Non-Fria	ble Proce	dure			
Location of		l ls				, , , , , , , , , , , , , , , , , , , ,						
Asbestos Conta		Location	As	Descript bestos - C	ontaining			Abateme R	nt Type	ĮΕ	ΙE	
TO BE ABATE	-n	Normally Used	//	Material			Amount	E	R	N	N	
in Facility		Solely		e., therma lation, sur	i systems facing, VAT	Γ.	(Specify SF or LF)	M	E P	C	C	
(13)		by Main-			ellaneous)		(V	Α	P	0	
		tenance/ Custodial						A L	l R	S	S	
		Staff (12)							IX.	L	R	
ROOF		YES NO N/A	ROOF & FLAS	HING			2,500 SF					
			TIIIVO			2,500 SF	✓ □		╁┼	+	\vdash	
Name of Registered V			NJDEP Waste	Cubic	Name of R	Registered I	andfill					
NORTHSTAR CONTR			Hauler ID No.	Yards		LANDFILL						
City, State				of Waste Disposal	City. State							
EAST HANOVER, NJ (07936			Date		ILLE, PA 10	967					
Completed by (Print o	r Type)		Title			Signature		1		Date	-	
Steve Stiles	-					V	1	1	-)	-		
ASB-41			Project Manage	er -		4sree	ensi	ar	_	0	1/04/	19

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

(X0032

Date of Notification (1)				Building Owner	Operator (2)	l pros	F	@ F	= 0	WE			
$\frac{01}{}$ $\frac{04}{}$ $\frac{19}{}$	9		FCA USA LLC Street Address										
Agencies Notified Type	of Notification			aaress XYSLER DRIVE			< :	angle our 2 version out annual to	Acres Management and and	and the state of t			
☐ EPA ☑				te, Zip Code		- 11	111	1111	0 /	2010			
DEP DEP				HILLS, MI 48326				JAN	8 %	2019			
☑ DOH	Amendment			Contact		Telepho	ne Nur	nber					
DOL _		w/ justification	MELISS	A MICHAELS		248-512-	3152	926108	OON!	Total a			
			FACILITY	INFORMATION				Lice	L. Chris	C. Constant			
Name of Facility Where Aba FCA ENGLEWOOD CLIFFS	atement is Taking	Place (3)		Type of Facility	(4)	-							
				□ Sc	hool (K-12)								
Street Address	22 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				bchapter 8 (Other	than K-12	2)						
330 SYLVAN AVENUE				☑ Ot	her (I.e., private &	cmmercia	aĺ						
City (5) Count	ty (6)	County Code	(7)	Square Feet	dgs., homes, etc.)		15						
ENGLEWOOD CLIFF BERG	EN	County Code	(1)	3,000	# Of Floor	rs 1	Build	ing Age	0 +				
					ior if being demol	ished)	†	7					
Name of Manifestor Et al.				VACANT	75.0	85							
Name of Monitoring Firm H GZA	ired by Bldg. Owr	ner (8)	ASCM N	Name of Abaten	ment Contractor (9))							
				Northstar Contr	racting Group Inc	.							
Street Address				Street Address									
55 Lane Road City, State, Zip Code				32 Williams Parkway									
Fairfield NJ 07004				City State 7in Code									
Project Mngr. For Monitorin	na Firm	Telephone Nu	ımher	City, State, Zip Code East Hanover NJ 07936									
Ben Sallemi	.9	973 774 3311	illibei	Last Hallover N.	3 07936								
Sheduled Start Date (10)		oletetion Date (*	11)	Telephone Num	ber	License Number							
$\frac{01}{21} / \frac{21}{21} / \frac{19}{21}$	_ 02_ /	/08/	19	9737723660									
Occupancy Status During A	hatement (Check	Only 1)		Name of OCUA				00860					
Facility Closed/V	acated During En	tire Period of		Name of OSHA I Northstar Contract									
Abatement	570			Street Address	cuing Group inc								
Abatement Perfo	rmed Outside of N	Normal Facility		32 Williams Park	way								
Hours - Describe Other - Describe:		AON EDI											
Other - Describe.	OAIVI - 4PIVI - I	MON - FRI		City, State, Zip C East Hanover, N.									
Scope of Work (Check All T	hat Apply)			Last Harlover, 142	07930			1-1-5					
☐ Demolition		D											
☐ ≥3sf or >3lf	~	Renovation		Full Containmer Mini - Enclosure	nt with Negative P	ressure							
			H	Glovebag Proce									
			V		*) and Non-Friable	Procedu	re						
Location of							2.22						
Asbestos Containing	Is Location		Descrip	tion of Containing		Abatemer	nt Type						
	Normally	1	Materia	5000 to 1000 to	Amount	R E	R	E N	E				
TO BE ABATED	Used		l.e., therm	al systems	(Specify	M	E	c	c				
in Facility (13)	Solely	ins	ulation, su	rfacing, VAT,	SF or LF)	0	P	Α	L				
(13)	by Main- tenance/	or	other mis	cellaneous)		V	Α	P	0				
	Custodial					A L	I R	S U	S				
	Staff (12)					_	K	L	U R				
PLDC 220 EVERNOR	YES NO N/A								-				
BLDG 330 EXTERIOR		WINDOW CAU	LK		300 LF	7							
				片		+	-						
Name of Registered Waste H		NJDEP Waste											
NEWARK CARTING		Hauler ID No.	. Yards GRAND CENTRAL SANITARY LANDFILL										
City, State		4509	of Waste										
NEWARK, NJ			Disposal Date	City. State PEN ARGILE, PA									
			Jule	LIV ANGILE, PA				/					
Completed by (Print or Type))	Title		Sign	nature /	7.0	/	Date					
Paul Mast		VICE PRESIDE	NT	1	77. 6h	-/							
ASB-41			THE REAL PROPERTY.		1/and	V			01	/04/19			

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

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Date of Notification ((In-		Name of	Building Ow	vner / Opera	tor (2)	00	E 0	(23)	n.a	F556 1					
01 / 04	/19	•			FCA USA LLC Street Address												
Agencies Notified	Type of h	latifia	tion.		_				11645				1.41				
☐ EPA	Type of N	Initia			-	RYSLER DRIV	The state of the s										
☐ DEP		7.5	nded		AUBURN	te, Zip Code N HILLS, MI 4	8326			JAI	1 8	2019					
☑ DOH		Ame	ndment	#		Contact	0320		Telepho	ne Numb	or		- 1"				
☑ DOL				w/ justification		A MICHAELS			248-512	3152	-unitary as the						
		Cano	ellation							A En	108.00	MITEL					
					FACILITY	INFORMATIO	N		4 4 2		17-12 - 17-14 - 17-14 - 17	e unu	King of the Co.				
Name of Facility Whe	ere Abater	nent is	Taking	Place (3)		Type of Fa	cility (4)			-							
							School (F	(-12)									
Street Address 340 SYLVAN AVENUE	_						Subchapt	ter 8 (Other	r than K-1	2)							
340 STEVAN AVENUE	=					V		., private &		al							
City (5)	County (6	5)		County Code	(7)	Square Fee		# Of Floo		I D. H.H.	- 1						
ENGLEWOOD CLIFF	BERGEN			Journey Cour	(*)		000	# UI F100	1	Buildin	g Age 40	+					
							e (Prior if b	eing demo	lished)	†	40						
N						VACANT											
Name of Monitoring I GZA	Firm Hired	d by BI	dg. Owr	ner (8)	ASCM N	Name of Al	patement Co	ontractor (9	9)								
GZA						Northstar C	Contracting	Group Inc									
Street Address						Street Add	ress										
55 Lane Road	-					32 Williams											
City, State, Zip Code Fairfield NJ 07004							V5//.										
Project Mngr. For Mo	nitorina E	irm		ITalanhana M		City, State,											
Ben Sallemi	intorning r	IIIII		Telephone Nu 973 774 3311	ımber	East Hanov	er NJ 0793	5									
Sheduled Start Date (10)	Sche	d. Comp	oletetion Date (11)	Telephone	Number		License Number								
01 / 24	/19	l _	02	/08/	19	9737723660	0		License Number								
/ /			/	/					00860								
Occupancy Status Du	iring Abat	ement	(Check	Only 1) tire Period of		Name of OS											
Abatement		iteu Du	iring En	tire Period of		Northstar Co											
		ed Outs	side of N	Normal Facility		Street Addr 32 Williams	22.00										
Hours - De	scribe:					or williams	1 annway										
Other - Des	scribe:	8AM -	4PM - N	MON - FRI		City, State,											
Scope of Work (Chec	le All Think	A 1 - V				East Hanove	er, NJ 07936										
ocope of work (chec	K All Illat	Apply)															
☐ Demolition			V	Renovation	~	Full Contain	nment with	Negative P	raccura								
☐ ≥3sf or ≥3lf						Mini - Enclo			1000010								
	≥260 If				$\overline{\checkmark}$	Glovebag P			Friable Procedure								
						Non-Exemp	ted (*) and	Non-Friable	e Procedu	ire							
Location of			ls		Descrir	otion of			Abatama	nt Tunn							
Asbestos Contai	ning	Loc	ation	_ A		Containing			Abateme R	I Type	ΙE	ľΕ					
TO DE	_		mally	1	Materia	I (ACM)		Amount	E	R	N	N					
TO BE ABATE	<u>.D</u>	0.0000	sed			al systems		(Specify	M	E	С	C					
in Facility (13)			olely Main	ins	ulation, su	rfacing, VAT	,	SF or LF)		Р	Α	L					
(13)		V	Main- ance/	Or	other mis	cellaneous)			V	Ą	P	0					
		35770	todial						A L	I R	S	S					
		100000000000000000000000000000000000000	ff (12)						_	K	U	U R					
DI DO A :		YES	NO N/A								-	1					
BLDG 340 GARAGE			THE RESERVE TO THE PERSON NAMED IN	PIPE INSULAT	ION			160 LF	V			1					
BLDG 340 SHOW ROC	VIVI			TRANSITE				500 SF	V								
Name of Registered W	/aste Hau			NJDEP Waste	Cubic	Name of Da	adell										
NEWARK CARTING		55 M.		Hauler ID No.													
					09 of Waste												
City, State		Disposal															
NEWARK, NJ				_	Date	PEN ARGILE	E, PA										
Completed by (Print o	r Type)			Title													
Paul Mast	· rype)			Title VICE PRESIDE	NT		Signature	/ 1.	/		Date						
0.000000000000000000000000000000000000				- IOE I IXEGIDE			-6	and t				047	04/40				
ASB-41	-				-							01/	04/19				

NOCK		NOT	IFICATIO	State of Nev ON OF ASBI It to NJAC	ESTOS AB	ATEN 2:120)	IENT			*****		<u> </u>	7
Date of Notification (1)			Name VA N	of Building (Owner/Oper t Orange	rator (2) neerina	1	— JAN		8 2()19	
Agencies Notified Type Notification EPA Initial	1		Street	Address Tremont a				i	1 1:11		ZaMT		- I
DEP Amended Amendmen Emergency	t #		City, S East	tate, Zip Co Orange,	de NJ 07018	3					.1	000-000000	
DOH justification Cancellation)	g		of Contact ban River	a			Te 9	elephone N 73-676-1	umber 000	ext 2	375	
Name of Facility Where Abatement is Takin VA NJHCS	ng Place	(3)	FAC	ILITY INFO	RMATION		Type of Facility	(4)					
Street Address 385 Tremont ave			***************************************				School (K- Subchapter Other (i.e. petc.)	8 (Oth	ner than K- & commer	12) cial bu	ildings	s, hon	ies,
City (5) East Orange, NJ 07018							Square Feet	# (of Floors		Bldg. 1968		
County (6) Essex				Code (7) USE ONLY)		. (Current Use (Pri	or if be	ing demoli	shed)			
Name of Monitoring Firm Hired by Building Environmental Consulting Group.	environmental Consulting Group.						Abatement Cor m Abt Corp	ntracto	r (9)				
Street Address 71 Arch Street	- (1)	j				ddress 68th St					ilion de		
City, State, Zip Code Paterson NJ 07522		7.00 - 1.	week weeks were		City	y, Sta Voods	te, Zip Code side - NY 113	377					
Project Manager for Monitoring Firm Fernando Villa	roject Manager for Monitoring Firm						ne No. 02-6986		License I	Vo.			
Start Date (10) 12/10/18	Schedu 03/31	led Coi /2019	mpletion	Date (11)	OSHA Monitor nmental Con	sultin	a Group				-		
Occupancy Status During Abatement (Chec Facility Closed/Vacated During Entire F					ldress 0x 8466		3		·····		ar III was I		
Abatement Performed Outside of Norm Other – Describe: 5pm to 2am	al Facilit	Abater y Hour	nent s		e, Zip Code on, NJ 07538								
Scope of Work (Check All That Apply)	50.77					alou(71, 140 07 300						
≥3 sf or ≥3 If ≥160 sf or ≥260 If		Renova Demolit				×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure						
Location of	100	Locati Vormal			Daniel			() ()	a record light	70110	Abate	ement pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole intenar todial S (12)	nce/	(i.e. th	Description Description Security of the Containing Security of the Contain Description Des	g Mate ems in VAT, o	erial (ACM) sulation, or	(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
Pipe Insulation	Yes	No	N/A		TOI							ate	ei ei
. The modulation				TSI			100	Х					

Name of Registered Waste Hauler Newark Carting, Inc.		H	JDEP Wa	Vo. 0	Cubic Yards	3	Name of R						LONG IN THE STATE OF
City, State 609 N Union Ave, Hillside, NJ 07205		4509	C	40 Disposal Dai 12/11/18	te	City, State	ate						
Completed by Ketsy Rodriguez	esent	ative	rdentown Rd, Morrisville, PA 1 Date 12/17/18					11					

CKAGA PA	D	NOTI	FICATIO	State of Ne ON OF ASE Int to NJAC	BESTOS	SABATE	EMENT (0)	100	EG	厚	N N	A E				
Date of Notification (1) 1/3/2019			Name 111-	of Building -113 Baya	Owner ard Str	Operato	r (2)			Les	1 1	- /2				
Agencies Notified Type Notification			Street	t Address East 18th					JAN	8	20	9				
EPA DEP DOL DOL Initial Amended Amendmen			City, S	State, Zip Co erson NJ	ode			£ .	Air Com	08 DF	MT	7, T.				
DOH justification Cancellation		ng	Name	of Contact ko Stanko			Manager	Te	Elephone N 173-570-2	umber						
Name of Facility Where Abatement is Takir	ng Place	(3)		CILITY INF			Type of Facil			-040						
N/A Street Address 111 Bayard Street		41			-		School (K-12) oter 8 (Ot	her than K- & commer	12) cial bu	ildings	s, hom	nes.			
City (5) New Brunswick							etc.) Square Feet 8,600		of Floors		Bldg.	Age	-			
County (6) Middlesex			County (STATE	Code (7) USE ONLY			Current Use (Prior if be	ing demoli	shed)	1070	-				
Name of Monitoring Firm Hired by Building	Owner (8	8)	ASC	CM No.		Name Che	of Abatement of Ckmark Indu	Contracto	r (9)							
Street Address						Street	t Address Morgan Dr									
City, State, Zip Code	54 Morgan Dr City, State, Zip Code Sparta NJ 07871															
Project Manager for Monitoring Firm			Telepho	one No.		Teleph	one No. 570-2645		License No. 01334							
Start Date (10) 1/16/2019	Schedu 1/23/2	iled Coi 2019	mpletion	Date (11)		Name	of OSHA Monit									
Occupancy Status During Abatement (Chec	00000000000000000000000000000000000000	0.000-2-500				Street	Address organ Dr	Strial								
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	eriod of al Facilit	Abaten ty Hour	nent s			City, St										
Scope of Work (Check All That Apply)						Spar	ta NJ 07871									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	(Commonwell)	Renova Demolit				×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
3		s Locati					Non-Exemp	led () an	u Non-Fhai	ole Pro	Abate	emeni	t			
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Use Ma	Normal ed Sole aintenar stodial S	ly by nce/	Asbesto (i.e. t	os Conta hermal	scription aining Ma systems ting, VAT	aterial (ACM) insulation.	(S	mount pecify	Re		pe Enca	Enc			
(13)	Yes	(12) No	N/A	-	other m	iscellane	eous)	51	or LF)	Removal	Repair	Encapsulate	Enclosure			
2nd floor right apartment 1st-		X			flo	or tiles		20	00 SF	X		· ·				
-bedroom																
Name of Registered Waste Hauler		N.	JDEP W	/aste	Cubic \	/ards	Name o	f Registe	red Landfill							
Atlantic Carting		H	auler ID	No.	of Was 2	te			gement							
City, State Wayne NJ					Disposa	al Date	City, Sta Tulley	ate town P	Ą							
Completed by Corey Stankovic	Title CEO)		1	Sig	gnature	Stark	· one	Da 1/	te /3/20	19					

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Print	Form

CKI	845 PA		NOT	IFICATION	State of N ON OF AS nt to NJA	BESTO	SABATE	EMENT 0)		EG			7 [
Date of Notificat	tion (1)				of Buildir Guevara		/Operato	r (2)	V III	PAL			
Agencies Notifie	ed Type Notification	1		Street	Address				1 1 1	JAN	8	201	9
⊠ EPA	☐ Initial									to the same	V arms		
DEP × DOL	Amended Amendmer	nt#			State, Zip o ey City,		O.E.		100	EEST(28 OC	MTF;	17.3
□ DOH	 Emergency justification 	(includir	ng		of Contac				Tolonhan	a Niversity			
DCA	Cancellatio			100000000000000000000000000000000000000	Guevara				Telephon	e Numb	er		
Name of Facility	Where Abatement is Taki	na Place	(2)	FA	CILITY IN	FORMA	TION						
Residential	Take to the second seco	ig i lace	(3)					Type of Facility	70.577				
Street Address								School (K-Subchapte Other (i.e. etc.)	12) r 8 (Other than private & com	n K-12) mercial t	ouilding	s, hor	nes,
City (5) Jersey City								Square Feet 1800	# of Floor	'S	Bldg.	Age	
County (6) Hudson					Code (7)			Current Use (Pri	US-50	nolished	200000000000000000000000000000000000000	,-	
	ing Firm Hired by Building	0	2)	100	USE ONL	y)		Commercial	Property				
Project Mana	ager	Owner (8	3)	ASC	M No.			of Abatement Cor tages Abatem					
Street Address							- 2000 X 0 45 50	Address N. Midland Ave	9				
City, State, Zip C	ode						City, S	tate, Zip Code					
Project Manager	for Monitoring Firm			Telepho	one No.			lle Brook, NJ (ise No.			
Start Date (10)							16 25	600-3184	0130				
1/2/19		1/6/19	9	mpletion	Date (11)	of OSHA Monitor	'						
processing	s During Abatement (Chec						Street /	Address					_
Abatement F Other – Desc	ed/Vacated During Entire F Performed Outside of Norm cribe:	Period of nal Facilit	of Abatement Cility Hours City, State, Zip Code										
Scope of Work (C	heck All That Apply)												
≥3 sf or ≥3 lf × ≥160 sf or ≥2			Renova Demoli				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure					re	
			Locat								Abat	emen	t
Asbestos-Con TO I	ocation of taining Material (ACM) BE ABATED n Facility (13)	Use Ma	Normal ed Sole aintena todial ((12)	ely by nce/	Asbes (i.e.	tos Cont thermal surfac	scription of aining Ma systems bing, VAT hiscellane	aterial (ACM) insulation, , or	Amount (Specify SF or LF)	Kemova		e Encapsulate	Enclosure
	Zin Live	Yes	No	N/A						<u>a</u>		late	Гe
	Kitchen		Х				VAT		120 SF	x			
	Hallway	Х					45 SF	x					
Namo of Darin	4100-1-1-										-		
Name of Registere All Stages Abat			100000	JDEP W auler ID		Cubic `of Was		1 120 1100	egistered Lan				\neg
City, State	ionent		10.000	036592		2 yd		Grand C	entral Sani	tary La	indfill		
Saddle Brook, I	NJ					Dispos TBD	al Date	City, State Pen Arg	yl, PA				
Completed by Richard Cristofo	ol	Title Presi	dent			Si	gnature		1-	Date	n		
		1	-0.5 A.				1101	11 11		1/1/19	1		

CK# 1161	AJ	NOT	TFICATION (Pursual	State of I ON OF AS nt to NJA	SBESTOS AC 8:60 a	S ABATE nd 12:12	(0)	7 - 12 - 27 - 12 - 12 - 12 - 12 - 12 - 1	EC			₩)- ()		
Date of Notification (1) 01/04/2019				of Buildir		/Operato	r (2)	11/2	7		***************************************					
Agencies Notified Type Notification	,		100000000000000000000000000000000000000	Niznik					۸۱,	N	3 2	019				
7,	!		Street	Address				1/2 12	- Carrier		-	D 1 60		95		
EPA Initial Amended			City S	State, Zip	Code			1	Property of the last of		at orms	5 5+511	+= 9			
X DOL Amendmen	t #		200400000000000000000000000000000000000	ris Plain		7950			ASSES	105 (105)			1			
DOH Emergency justification	(includir)	ng	-	of Contac				DE 61	Telepho	to be to to	mad a	S. Profesional		11 107 0 10		
DCA Cancellation			Jack						1 elephio	ille ivu	Tibei					
Name of Facility Where Abatement is Takin	- Dia-	(0)	FAC	CILITY IN	FORMAT	TION										
Private home	ig Place	(3)					Type of F	acility (4)								
Street Address		<u> </u>					Sch	ool (K-12)								
							X Othe	chapter 8 er (i.e. priv	(Other that	an K-1:	2) al bui	lding	: hom	100		
City (5)							etc.)							103,		
Morris Plains							Square F	eet	# of Floo	ors		Bldg.	Age			
County (6)			County	Code (7))		Current II	se (Prior	if hoine de	malial						
Morris			(STATE	USE ONL	(Y)		ourion o	30 (1 1101	e (Prior if being demolished)							
Name of Monitoring Firm Hired by Building	Owner (8	8)	ASC	M No.		Name	of Abateme	ent Contra	tractor (9)							
Street Address							oval Saf									
Street Address							Address									
City, State, Zip Code							osby Ave									
only, onate, zip code							tate, Zip Co									
Project Manager for Monitoring Firm			Telepho	one Ne			rson, NJ	07502								
			relepino	one ivo.		one No. 400-871	ř		nse N	ο.						
Start Date (10)	Schedu	iled Co	mpletion	Date (11)	100000000000000000000000000000000000000	of OSHA M		013	332						
01/14/2019	01/17	7/2019	9		,		as (9)	Onitor								
Occupancy Status During Abatement (Chec	k Only O	ne)					Address									
Facility Closed/Vacated During Entire F	eriod of	Abate	ment													
Abatement Performed Outside of Norm Other – Describe: 8:00am - 4:30pm	al Facilit	ty Hour	s			City, St	de									
Scope of Work (Check All That Apply)					_											
Total Control of the							<u> </u>									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	- December 1	Renova Demoli				×	Mini-End Gloveba	Containment with Negative Pressure Enclosure ebag Procedure Exempted (*) and Non-Friable Procedure								
	Is	s Locat	tion							· · · · · ·	,,,,	Abate				
Location of Asbestos-Containing Material (ACM)		Norma ed Sole			Des	scription of	of					Ту	ре			
TO BE ABATED	Ma	aintena	nce/	Asbes	thormal	aining Ma	aterial (ACN insulation,	A)	Amount				Ш	_		
In Facility (13)	Cus	todial (12)	Staff?	(1.0.	surfac	ing, VAT	. or		(Specify SF or LF		Remova	Re	Encapsulate	Enclosure		
(10)		Τ			other m	iscellane	eous)			<i>'</i>	lova	Repair	sula	osur		
	Yes	No	N/A								_		ite	œ.		
Basement	Basement								64 SF		x		х			
													^			
				V												
							4									
Name of Registered Waste Hauler		IN	JDEP W	aste	Cubic \	/arde	Non	no of D-	intered!	- Jen						
Removal Safety LLC		H	auler ID I	No.	of Wast		1000000		istered La	ndfill						
City, State		0	037007		2			ROWS	North							
Paterson, NJ					Dispose TBD	al Date		State								
Completed by	Title					noture	Mic	rrisville	, PA							
Lasko Veskov	Pres	ident				gnature colu	= be	floor		Date 01/		2019				

C/COCC041	531PA	M	NOT	FICATION (Pursuant to	OF ASE	aw Jerse BESTOS 3:60 and	ABATE	MENT))	A COLUMN TO THE PARTY OF THE PA		C	F		V	NA CAR
Date of Notification (1) 01/04/2019				Name of E	Building Shemic	Owner/Com	Operator opany	(2)		A CONTRACTOR OF THE PARTY OF TH	JAN		8	2019	
Agencies Notified	Type Notification	1		Street Add		l Avenu	10		1		The sale of the sale				
DEP DOL	Amended Amendmer			City, State Middles			3			<u> </u>	Lik	36 [E]	OOA ISM		7. 17.
DOH DCA	Emergency justification Postponed		ng	Name of		ct				lephone 7-249-0		ber			
Name of Eagility Whore Al	201aurau 1 - 7-11		751	FACILI	TY INF	ORMATI	ON						Sauce.		
Name of Facility Where Al DOW Chemical Boui	nd Brook - Bk	ng Place dg 202	(3)					Type of Facil	* * * *						
Street Address 65 Baekeland Avenu	e							文 Other (i.	K-12) oter 8 (Ott e. private	ner than & comn	K-12) nercial	buil	dings	, hom	ies,
City (5) Middlesex								Square Feet 7800	# c	f Floors	3	100	8ldg. <i>i</i> 5+	∆ge	
County (6) Middlesex				County Co	ide (7) E ONLY))		Current Use (Prior if be Plant	ing den	nolishe	d)			
Name of Monitoring Firm F One Source Safety &	lired by Building Health	Owner (8	3)	ASCM	No.		Name Brand	of Abatement (lenburg Ind	Contractor ustrial S	(9) Service	· Com	าตล	nv		
Street Address 140 S Village Ave, St	uite 130				11 > 2+4 *3 * 5 * 5 * 5 * 5 * 5 * 5 * 5 * 5 * 5		Street	Address Spillman D				.10			
City, State, Zip Code Exton, PA 19341							City, St	ate, Zip Code shem, PA 1							
Project Manager for Monito	ring Firm			Telephone 610-524-			Telepho	one No. 91-1800		Licens	se No.			1200	
Start Date (10) Postponed		Postp	oned	mpletion Dat	te (11)	OF			8						
Occupancy Status During A		- 2	- 3				Street A						-115		
Facility Closed/Vacate Abatement Performed Other – Describe. <u>DEI</u>	Outside of Norm	al Facilit	Abater y Hour	nent 3	ive 8015			10.50							
Scope of Work (Check All T	hat Apply)														
≥3 sf or ≥3 if X ≥160 sf or ≥260 if	7.77	X	Renova Demolii	ition ion		X Full Co X Glove X Non-E	ontainm bag Pro Exempte			sure	9				
			ls Loca	tion					1		T		Abate	ment	s
Location of Asbestos-Containing Ma	rioriol (ACM)	Us	Norma sed Sol				scription				-	-1	Ту	ре	
TO BE ABATE In Facility (13)	ED (AOIM)	Cu	laintena stodial (12)	Staff?	(A	CM) (i.e. sulation, s	therma	j, VAT, or	(S)	nount secify or LF)		Removal	Repair	Encapsulate	Enclosure
B 202		Yes	No	N/A X		Din-	lmoul	dian	00	0 00				0	
B 202				X			Insula Tile/M			0 SF	Х				
B 202							100000000000000000000000000000000000000			0 SF	X				
	B 202						f/Flash ansite	miA		00 SF	X	-			
B 202				X	. 1		ch Top	is		0 SF	X				
B 202	101 HOLY WILLIAM			X	The property		ow Ca		A Company of the State of the	SF	X				
Name of Registered Waste I Brandenburg Industrial			H	NJDEP Waste Cubic Yards Name Hauler ID No. of Waste GROV 21838 160				Name of GROW	ie of Registered Landfili WS North						
City, State Bethlehem, PA			1-	Disposal Date City, St											
Completed by Stephen Carne		Title Envir	onme	Morrisville, PA Signatura Partal Manager O1/04/201)19				

PAID

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

Chh# 3492

Date of Notification (1)					Na	me of Puile	line	g Owner/Operator ((0)	- F	A	F	n n	A C	FI PA		
1 /	3 /	19	9					nmunications	.4)		Ų.	P	[] /				
Agencies Notified	Type Notific							mamoadons							1		
□ EPA	☐ Initial	cation			1	eet Addres	S-20	ntgomery Street			JAN	8	20	19			
□ DOLWD	☐ Amende				-	, State, Zi					UNIN				100		
□ DOH	Amenda			-				PA 15212			The first section	oners and	species for the	* - 4.			
☐ DCA (NJAC 5:23-8)	☐ Emerge justificat		ncludin	g		me of Cont	950				CEST.				Ã.		
(10/10 0.20 0)	☐ Cancella					nthony F		7		Telephon			100		0.75		
							-	FORMATION		412-03	03-402	1					
Name of Facility Where A	batement is	Takin	g Place	e (3)		ACILITI	114	TORWATION	Type of Facility	(4)							
Verizon Bernardsvi				,					School (K-12	(A) (1897)							
Street Address									☐ Subchapter 8	(Other tha	n K-12)						
147 Morristown Roa	ad								Other (i.e., properties)		ommer	cial b	uildin	gs,			
City (5)		-							Square Feet	# of Floo	ors	TR	dg. A	ne			
Bernardsville									25,588	3	,,,		+-50	(F)			
County (6)					Co	unty Code	(7))(STATE USE ONLY)	Current Use (Pri	or if being o	demolis	hed)	1377	-			
Somerset									Verizon Con								
Name of Monitoring Firm		lding (Owner	(8)	ASC	M No.		Name of Abateme	ent Contractor (9)				Denies				
USA Environmental	, Inc							BRISTOL EN	VIRONMENTAL	L, INC.							
Street Address								Street Address									
8436 Enterprise Ave)							1123 BEAVER STREET									
City, State, Zip Code								City, State, Zip Co	ity, State, Zip Code								
Philadelphia, PA 19				,				BRISTOL, PA	19007								
Project Manager for Monit Mark Jenkins	oring Firm			100	lephor			Telephone No.		License	No.						
Start Date (10)		0-1				55-5810		215-788-6040 00509									
1 /16 /						Date (11) 19		Name of OSHA M					- 60 III				
					17/				/IRONMENTAL	_, INC							
Occupancy Status During Facility Closed/Vacated								Street Address									
□ Abatement Performed	Outside of N	ormal	Facilit	Abai v Ho	urs - D	escribe	-	1123 BEAVER									
Time of Abatement: 8:	00AM-4:00	PM/	P	M- <u>_</u>	A	M		City, State, Zip Co									
Scope of Work (Check all	that apply)							BRISTOL, PA	19007			-311					
	ar appij)							☐ Full Conta	ainment with Neg	ative Press	ure						
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			⊠ Re □ De	2.2					osure		77375B						
			□ 00	111011	11011			☐ Glovebag ☒ Non-Exer	npted (*) and Nor	n-Friable Pr	ocedure						
			0.00		ation								atem	ent Ty	vne		
Location of Asbestos-Containing M		11		Norm	ally lely by			Description of									
TO BE ABAT	ED (ACIV	1)	Ma	inter	ance/	(i		tos Containing Mat thermal systems in		Amoui (Speci		Removal	Repair	nca	nclo		
IN Facility	r		Cust	odia: (12	I Staff?			surfacing, VAT,	or	SF or L		oval	Ξ.	Encapsulate	Enclosure		
(13)			Yes	No	-			other miscellaneo	ous)					late	· O		
Roof Vent											<u> </u>	_					
TOOT VOIL						Caulk				16 LF			Ш				
									П	П	П	П					
			П	П	П												
Name of Registered Waste	Hauler			_		Waste		Cubic Yards of	Name of Registe	ered Landfi	II	Ш					
SERVICE TRANSPOR		, INC				ID No.	-	Waste	MINERVA L								
City, State						10		Disposal Date	City, State					-			
YARDLEY, PA							1	TBD	WAYNESBL	JRG. OH							
Completed By (Print or Typ				1	Signature		, 011	Date	,								
Dillan DeCaro		Es	timat	or					Defano/	me.			-/	9			

PAUD

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

CK# 764

										C. L.	10			
Date of Notification (1) 01 /	04 /	19)		310000	e of Buildir erizon	ng Ov	wner/Operator	(2)		CE		V?	
Agencies Notified EPA	Type Notifi		_			et Address Verizon W				J	AN	8 20	19	The state of the s
☑ DOLWD ☑ DHSS					City,	State, Zip	Code	9					10	
□ DCA	☐ Emerge			-	Ba	sking Ric	dge,	NJ		Present Comment	the control of the co	marine,	Taxana	
(NJAC 5:23-8)	justifica		ioidani	9	Nam	e of Contac	ct			Telephone N	lumber	OAR	19 + 1	ii -
	☐ Cancella	ation			Jo	hnny De	Los	Santos		301-802-		drugs areas		
								RMATION		30.002	0112			
Name of Facility Where A	batement is	Taking	g Place	e (3)					Type of Facility	(4)				
Verizon									School (K-12					
Street Address									Subchapter	8 (Other than k	(-12)			
773 Summit Avenue	Э								Other (i.e., p	rivate and com	nmercial	buildin	ıgs,	
City (5)					T-11-27-20-20-20-20-20-20-20-20-20-20-20-20-20-				Square Feet	# of Floors		Bldg. A	Age	
Jersey City, NJ 070	37								10,000	3		50	.50	
County (6)		122			Cou	nty Code (7	7)(STA	ATE USE ONLY)	Current Use (Pr	ior if being den	nolished)		11/10
Hudson														
Name of Monitoring Firm	Hired by Bui	ilding C	Owner	(8)	ASCN	No.	Na	me of Abatem	ent Contractor (9)	()				
USA Environmental	Managaei	ment	Inc.				J	JVN Restora	tion Inc					
Street Address							Str	eet Address			-			
8436 Enterprise Ave	enue						4	7 Foster Ro	ad					
City, State, Zip Code							City	y, State, Zip C	ode			-15207-10		
Philadelphia, PA 19	153						S	Staten Island	NY 10309					
Project Manager for Monit	oring Firm			Te	lephone	No.	Tel	ephone No.		License No				
Mark Jenkins				1	215-365		7	18-605-6256	5	00774				
Start Date (10)					letion Da		Nar	me of OSHA N	Monitor					
//					8 /	19	T	estor Tech						
Occupancy Status During							Stre	eet Address						
☐ Facility Closed/Vacated	d During Ent	ire Per	iod of	Abat	ement		1	0 59 Jackso	n Avenue					
Abatement Performed Time of Abatement:	Outside of N	lormal PN	Facilit // <u>5:00</u>	y Hoi	urs - Des 1:30AM	scribe		y, State, Zip Co						
Scope of Work (Check all	that apply)				3							·		
≥3 sf or ≥3 if≥160 sf or ≥260 if			⊠ Re					☐ Mini-End ☐ Gloveba	tainment with Neg losure g Procedure mpted (*) and Nor					
				Loca								batem	ent T	vne
Location of Asbestos-Containing M		A \		Norm d So	ally lely by			Description of					1	1
TO BE ABAT		")	Ma	inten	ance/			Containing Ma rmal systems		Amount (Specify	Removal	Repair	nca	nclo
IN Facility	1		Cust	odia (12	Staff?	,	S	urfacing, VAT,	or	SF or LF)	oval	=	Encapsulate	Enclosure
(13)			Yes	No	Andrew Str.		oth	ner miscellane	ous)	45			late	е
3 rd Floor			\boxtimes			Window	v Cai	ulking		3 SF				
2 nd Floor			\boxtimes			Window	v Cau	ulking		3 SF				
No. of Contract Contr														
													П	
Name of Registered Waste	Hauler			TI	NJDEP I	Naste	Cub	ic Yards of	Name of Regist	tered Landfill		10		
Newark Carting				_ '	Hauler II NJ-56		Was		G.R.O.W.S.					
City, State								osal Date	City, State	-554050				
Hackettstown, NJ							01	1/20/19	Morrisville,	PA				
Completed By (Print or Typ	e)	Title						Signature	1 //		Date	132012-000		
Ralph Barnhardt		Pr	roject	Ma	nager			MAC	Alban,		21-	04	- 2	YK

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

NIDCIC			(1	Pursu	ant to NJ	AC	8:60 and 5:1	16)		9		_	t doubless		
Date of Notification (1)				Nar	ne of Buildi	ng C	Owner/Operator	(2)	H JA	N 8	201	9	l li		
	_ 1	8		1000			contraction of the contraction o	ny / Job #18	10-5399 Che	eck#			i.		
Agencies Notified Type Noti	ification	1			et Address		201800 1/E11		Commence of the commence of th	11.15 G	INTE	ignos s Isolana	-4 1		
☑ EPA ☐ Initial				1000			ce- Building A	4		JCEMS					
☑ DOLWD ☑ Amend		_			, State, Zip					104.2011					
☐ DHSS Amend				100	orristown										
DCA Emerg		nciuai	ng		ne of Conta				Telephone I	Vumher					
☐ Cance				Jo	ohn Greco	0			201-602-						
			2001-2-2	100			DRMATION		201-002-	1433		-	7.37.5		
Name of Facility Where Abatement is	s Takin	n Plan	ce (3)		ACILIT II	NFC	RIVIATION	Type of Equilit	(4)		C 7211000				
JCP&L- Freehold		ig i iu	30 (3)					Type of Facility ☐ School (K-	5 (71.15)						
Street Address								☐ Subchapter	r 8 (Other than h	(-12)					
44 Dutch Lane Road								Other (i.e.,	private and com	mercial l	buildin	ıgs,			
City (5)			-12/10/5					homes, etc	# of Floors		21- /	\			
Freehold, NJ								Square reet	# 01 F1001S		Bldg. A	age			
County (6)				Cor	inty Code (7	7)/97	TATE USE ONLY)	Current Hea /F	Prior if being den	1:-14\					
Monmouth				000	inty code (/	1 101	ATE OSE ONET)	No transport of the Control of the C		nolisnea)					
Name of Monitoring Firm Hired by Bu	ildina (Owner	(8)	ASCN	1 No	Substation Name of Abatement Contractor (9)									
1 Source Safety & Health, Inc			(0)	710011	1110.		AbateTech, I		"						
Street Address	The state of the s						reet Address	110.							
140 S. Village Ave. Suite 130				27.00	30 Maple Ave	PO Boy 25									
City, State, Zip Code							ty, State, Zip Co								
Exton, PA 19341			100				Lumberton, N								
Project Manager for Monitoring Firm			Tel	ephone	No.	-	lephone No.								
Brian Hovendon	F190.8-1-1				1-5525		609-265-2107								
Start Date (10)	Sched	úled (Comple	etion Da	ate (11)	-	me of OSHA M		.00025			2112-100			
10 /29 /18					19	100000	EMSL Analyti								
Occupancy Status During Abatement	(Check	only	one)			_	reet Address								
☐ Facility Closed/Vacated During Ent	ire Per	iod of	Abate	ment			200 Route 130) North							
☐ Abatement Performed Outside of N	lormal	Facilit	y Hou	rsDes	scribe		y, State, Zip Co	200				-1-6	-		
Time of Abatement:AM	PN	Λ/	PM		_AM	1000000	Cinnaminson								
Scope of Work (Check all that apply)								,							
≥3 sf or ≥3 lf		M D	novat	ion			Full Conta	ainment with Ne	gative Pressure						
☐ ≥160 sf or ≥260 lf			molitic				☐ Mini-Enclo	osure Procedure							
		8-8					Non-Exen	npted (*) and No	n-Friable Proce	dure					
			Locat							Al	atem	ent T	уре		
Location of Asbestos-Containing Material (ACM	n)		Norma ed Sole		Ashaa		Description of		•	R	R	ш	ш		
TO BE ABATED	"	Ma	intena	nce/			Containing Mate ermal systems in		Amount (Specify	Removal	Repair	Encapsulate	Enclosure		
IN Facility		Cus	todial ((12)	Staff?		S	surfacing, VAT,	or	SF or LF)	va va	-	usc	sure		
(13)		Yes	No	N/A	1	oti	her miscellaneo	us)				ate	(D		
Exterior Pole JC1140MAR	-			-			8				-		_		
Exterior Fole 3C 1140MAR			Ш		Asbesto	s ri	sers		16 LF						
										П	П	П	П		
		П	П												
Name of Registered Waste Hauler			I N	JDEP V	Vaste	Cub	oic Yards of	Name of Regis	torod Landfill	\Box	Ш	Ш	Ц		
AbateTech, Inc.			10000	auler ID	27.20	Was		G.R.O.W.S							
City, State				18750		2			. Lanuill						
						D:	annal D-t-	0:4. 0:-1							
Lumberton, NJ							oosal Date	City, State Tullytown	ΡΔ						
	Title						oosal Date /31/19 Signature	City, State Tullytown,		Date		14-7-4			

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

NOCK		NC				SBESTOS AB IAC 8:60 and 5			(5)		W.	
Date of Notification (1)	18	3		Nai	me of Build	ing Owner/Operato	or (2)	+1804 5300 ¹	JAN	8, 48	2019	9
Agencies Notified Type Noti							Sity 01 NO 7301	7#1004-5300	Cnec	K #		
☑ EPA ☐ Initial	ilication				et Address			- L			en oraș	
☑ DOLWD ☑ Amend	ded			- K	EHS, 27 I	Road 1, Bldg. 40	086 Livingston	Campus (No.		i CAN Alten	√73.	4. 4
	ment #	4			, State, Zip			***************************************	F		12.00	to the second
☐ DCA ☐ Emerg		- ncludi	ng			y, NJ 08854						
(NJAC 5:23-8) justific				is more	ne of Conta			Telephone N	umber			
☐ Cance	llation			M	ichael F.	Smith		848-445-2	2550			
				F	ACILITY I	NFORMATION						
Name of Facility Where Abatement is	s Taking	g Plac	ce (3)				Type of Facility	(4)				
Rutgers- Livingston Campus	- Bldg	s. 40	86, 4	087 &	4155		School (K-1					
Street Address			771		_ water		Subchapter	8 (Other than K	-12)			
27 Road #1							Other (i.e., plane) homes, etc.	orivate and comm	nercial	buildir	ngs,	
City (5)							Square Feet	# of Floors	T	Bldg.	Λσο.	
Piscataway, NJ 08854							oquaio i cot	4		60+	100	
County (6)				Cou	inty Code (7)(STATE USE ONLY)	Current Use (P	rior if being dem	olichod			
Middlesex					, , , , ,	· // OWN I GOL ONE !/	Academic	nor it being dem	olisticu	,		
Name of Monitoring Firm Hired by Bu	ildina O	wner	(8)	ASCN	/ No	Name of Abatem	nent Contractor (9	\				
Health & Safety Services			(-)	117	070000	AbateTech,		,				
Street Address						Street Address	mc.					
PO Box 365							- DO D 25					
City, State, Zip Code	4						e. PO Box 25					
Berlin, NJ 08009						City, State, Zip C						
Project Manager for Monitoring Firm	-		Tal		Na	Lumberton,	NJ 08048					
James Proctor				ephone	2-1311	Telephone No.	_	License No.				
	Cahadi	.11 0				609-265-210		00529				
<u>7</u> / <u>25</u> / <u>18</u>	1	/	_ 3	1 /	ate (11)	Name of OSHA N	Maria Pila		*			
Occupancy Status During Abatement	(Check	only	one)	-30-3	/	Street Address						
☐ Facility Closed/Vacated During Ent	ire Peri	od_of-	Abate	ment		200 Route 13	80 North					
Abatement Performed Outside of N	lormal F	acilit	y Hou	rs - Des	scribe	City, State, Zip C	ode					
Time of Abatement:AM Scope of Work (Check all that apply)	PM/		PM-		_AM	Cinnaminsor	n, NJ 08077					
(A) 5A						☐ Full Con	tainment with Neg	ative Pressure				
≥3 sf or ≥3 lf≥160 sf or >260 lf		The same of the sa	novati			Mini-End	closure	auto i recoure				
≥ 100 si di ≥200 li	L	De	molitic	on		⊠ Gloveba	g Procedure mpted (*) and No	a Eriabla Brassa				
		Is	Locat	ion	T	M IAOII-EXC	impled () and No	I-Fliable Proced				
Location of		١	Norma	lly		Description of	of .			atem	1	T .
Asbestos-Containing Material (ACN	/I)		d Sole intena			stos Containing Ma	terial (ACM)	Amount	Remova	Repair	Enc	Enclosure
TO BE ABATED IN Facility			odial S		(i.e.	, thermal systems		(Specify	Von	air	aps	los
(13)	L		(12)			surfacing, VAT other miscellane		SF or LF)	<u>n</u>		Encapsulate	ure
	1	Yes	No	N/A			1				te	
See Attached]		\boxtimes		See Atta	ched		See Attached				
	[П		П
									1			
	Г											
Name of Registered Waste Hauler				JDEP V	Vaste	Cubic Yards of	Name of Regist	ered Landfill		1 -		ш
AbateTech, Inc.			1,720,000	auler ID 18750	No.	Waste 40	Fairless La					
City, State						Disposal Date	City, State	olove i	-4-			
Lumberton, NJ						1/31/19	Tullytown,	PA				_
Completed By (Print or Type)	Title					Signature	1	D	ate	~		()
Gwendolyn Trumbetti	Ope	eratio	ons C	oordi	nator	COM	10		12-	31	-1	Ŏ

JAN 8 2019

Location of ACM	Used for Maint.	Description of ACM	Amount Abat	ement Type
Building #4086	NO	Roof Flashing	125 SF	Removal
Building #4086	NO	Floor tile	6,884 SF	Removal
Building #4087	NO	Floor tile	7,732 SF	Removal
Building #4087	NO	Mastic	43 SF	Removal
Building #4087	NO	Furnace Gasket	5 LF	Removal
Building #4087	NO	Furnace Door Packing	2 SF	Removal
Building #4087	NO	Roof Flashing	125 SF	Removal
Building #4155	NO	Transite Ceiling Panels	1,400 SF	Removal
Building #4122	NO	Complete Wet Demolit	ion & Disposal as ACN	l Removal
Building #4089	NO	Complete Wet Demolit	ion & Disposal as ACM	Removal
Building #4090	NO	Complete Wet Demolit	ion & Disposal as ACM	Removal
Building #4102	NO	Complete Wet Demoliti	ion & Disposal as ACM	Removal
Building #4103	NO	Complete Wet Demoliti	ion & Disposal as ACM	Removal
Building #4127	NO	Complete Wet Demoliti	on & Disposal as ACM	Removal
Building #4155	NO	Complete Wet Demoliti	on & Disposal as ACM	Removal
Building 5022 Kiln	NO	Complete Wet Demoliti	on & Disposal as ACM	Removal

MOCE			NO			N OF A	New Jersey SBESTOS ABA IAC 8:60 and 5:1	TEMENT	JEGI	5]		200 100 100 100	
Date of Notification (1)	24 /	40					ing Owner/Operator		IAN	0	2010		
/	31 /	18			В	orough o	of Spring Lake He	ights / Job #18	11-5414 Che	ck#	2015		12
Agencies Notified	Type Notifi	ication			Stre	et Address	3		70000				
⊠ EPA	☐ Initial				55	55 Bright	on Avenue		A TEMOS	SOCI			i.
⊠ DOLWD ⊠ DHSS	Amenda Amenda		3		City,	State, Zip	Code	0.00	HILLER CON CONTRACTOR	Pi vily			
□ DCA	☐ Emerge			10	S	oring Lak	e Heights, NJ 07	762	***				
(NJAC 5:23-8)	justifica		oraan	19	Nam	e of Conta	oct		Telephone Nur	nber			
	☐ Cancella	ation			Br	yan Kee	shan		732-229-40				
Name of Facility Miles All					FA	ACILITY	NFORMATION						
Name of Facility Where Al			Plac	e (3)				Type of Facility (
Spring Lake Heights	Pump St	aton						School (K-12) Subchapter 8		2)			
Street Address								Other (i.e., pri			uildin	gs,	
506 6th Avenue								homes, etc.)					
City (5) Spring Lake								Square Feet	# of Floors	В	ldg. A	Age	
County (6)													
Monmouth					Cou	inty Code (7)(STATE USE ONLY)	Current Use (Price		ished)			
	East L. D. II	L.II	V-10-20-20-20-20-20-20-20-20-20-20-20-20-20	(0)	1.000		T.	Pump Statio	n				
Name of Monitoring Firm F	iired by Buil	laing O	wner	(8)	ASCN	1 No.	Name of Abateme	50 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -					
Street Address							AbateTech, In	nc.					
Street Address							Street Address						
City, State, Zip Code							30 Maple Ave						
Oity, Otate, Zip Code							City, State, Zip Co						
Project Manager for Monito	ring Firm		-	LTol	ephone	No	Lumberton, N	IJ 08048	Tr.				
	anig i min			100	ephone	NO.	Telephone No. 609-265-2107		License No.				
Start Date (10)	T	Schedu	Iled C	omple	ation Da	ate (11)	Name of OSHA M	2	00529				
_12 / 3 /						19	EMSL Analyti						
Occupancy Status During A		/					Street Address			-			
☐ Facility Closed/Vacated					ment	and the same and the same of t	200 Route 130	Morth					
Abatement Performed O	utside-of.No	ormal-F	acilit	Hou	rs - Des	scribe	City, State, Zip Co				(7.57)		
Time of Abatement:							Cinnaminson,						
Scope of Work (Check all th	nat apply)		-				Omnaminson,	, 140 00077					
	11.37						☐ Full Conta	ainment with Nega	tive Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 				novat molitic			☐ Mini-Enclo	Dropoduro					
							⊠ Non-Exen	npted (*) and Non-	Friable Procedu	re			
				Local			The state of the s			Ab	atem	ent T	ype
Location of		.		orma	lly ely by		Description of			-	_	_	T
Asbestos-Containing Ma TO BE ABATE		"		intena		Asbe	stos Containing Mate ., thermal systems in	erial (ACM)	Amount (Specify	Removal	Repair	nca	nclo
IN Facility			Cust		Staff?	(1.0	surfacing, VAT,	or	SF or LF)	oval	=	Encapsulate	Enclosure
(13)		-	V	(12)	T 11/4	-	other miscellaneo	us)	•			late	O
Exterior Roof			Yes	No	N/A	T	200			-	_	_	-
Exterior Roof		-				Transite			700		Ш	Ш	Ш
		- 11		Ц									
] [
		1											
Name of Registered Waste I	Hauler			530	JDEP V		Cubic Yards of	Name of Registe	red Landfill				
AbateTech, Inc.				Н	auler IE 18750	SE GARACTER CANAL	Waste 25	G.R.O.W.S. L					
City, State					10100		Disposal Date	City, State					
Lumberton, NJ							1/31/19	Tullytown, P	Δ				

ASB-41 MAY 11

Completed By (Print or Type)

Gwendolyn Trumbetti

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

Operations Coordinator

1/31/19

Signature

Tullytown, PA

Date

12/31/18

		A L	\TIE1	~ ·	State o	f New Jersey				. !!	13	150
MOCK		N	OTIFI (CATI Pursu	ON OF A	ASBESTOS ABA IJAC 8:60 and 5:	ATEMENT 16)				25.5	40 70
Date of Notification (1)				Na	me of Buil	ding Owner/Operator	r (2)	HI JA	VI-	37	2019	
/	31 /	18		F	Robert W	ood Johnson Ho	spital / Job #18	302-5265 Che	cks#			
Agencies Notified	Type Notification	on		Str	eet Addres	SS		· /w.755	105	CACIN	19.	
⊠ EPA	☐ Initial			(ne Robe	ert Wood Johnson	n Place		437	Sad.		
☑ DOLWD ☑ DHSS	Amended Amendment	ь 44.4		City	y, State, Z	ip Code						
□ DCA	Emergency	_	ina	N	lew Brun	swick, NJ 08901						
(NJAC 5:23-8)	justification)		iiig		ne of Con	Particular designation of the property of the property of the particular of the part		Telephone Nur	nhor			_
	☐ Cancellation	1		K	risten B	ell		732-937-87				
				F	ACILITY	INFORMATION		1.02.00.01	-			
Name of Facility Where At		ing Pla	ce (3)				Type of Facility	(4)				
Robert Wood Johns	on Hospital						School (K-12	7				
Street Address							☐ Subchapter	3 (Other than K-1.	2)			
One Robert Wood Jo	ohnson Place						Other (i.e., p	rivate and comme	ercial I	buildi	ngs,	
City (5)							Square Feet	# of Floors	1	Bldg.	Δαρ	
New Brunswick							- 4444.0 / 550	" 01 1 10013	Ι,	Jiug.	nge	
County (6)				Co	unty Code	(7)(STATE USE ONLY)	Current Use (Pr	or if being demoli	shed)			
Middlesex							Hospital	arm a amig a amion	011007			
Name of Monitoring Firm H		Owne	r (8)	ASC	√l No.	Name of Abatem	ent Contractor (9)					
Omega Environment	al					AbateTech, I						
Street Address						Street Address			_			
280 Huylar Street						30 Maple Ave	e. PO Box 25					
City, State, Zip Code						City, State, Zip Co						
South Hackensack, N		/			1	Lumberton, N	NJ 08048					
Project Manager for Monitor	ring Firm	1	Tel	ephone	No.	Telephone No.		License No.	-			
Geiser Fajardo	-1	£	257.7		9-8700	609-265-2107		00529				
Start Date (10)	Sche				ate (11)	Name of OSHA M	lonitor					
4 /30 / _	- Y			1_/	19	EMSL Analyti	ical					
Occupancy Status During A						Street Address						
Facility Closed/Vacated I	During Entire Pe	ciod of	Abate	ment		200 Route 13	0 North					
Abatement Performed On Time of Abatement:	utside of Norma	l Facili M/	ty Hou PM-			City, State, Zip Co	de					
	-	101/	_PIVI		_AM	Cinnaminson	, NJ 08077					
Scope of Work (Check all the	at apply)				-10:		124 97 (64)00000					
≥3 sf or ≥3 If		⊠ Re	enovati	on		☐ Full Conta	ainment with Nega	tive Pressure				
≥160 sf or ≥260 lf		☐ De	emolitic	n		☐ Glovebag	Procedure					
		1.	1			Non-Exen	npted (*) and Non	Friable Procedur	е			
Location of		1	Locat Vorma			Description			Ab	atem	ent T	ype
Asbestos-Containing Mat	erial (ACM)	Use	d Sole	ly by	Asbe	Description of estos Containing Mate		Amount	Re	Re	En	Ш
TO BE ABATE	D		intena todial 3			e., thermal systems in	sulation.	(Specify	Removal	Repair	cap	clos
IN Facility (13)		Ous	(12)	Jan:		surfacing, VAT, other miscellaneo		SF or LF)	val	,	Encapsulate	Enclosure
		Yes	No	N/A	1	other miscellaneo	us)				ate	
Exterior 2 nd Floor 58 Bui	lding		\boxtimes		Windov	v Caulk/glazing		300 LF				
3 rd Floor						v Caulk/glazing		390 LF				
4 th Floor						v Caulk/glazing		930 LF				
ED Area						le and mastic		600 SF				
Name of Registered Waste H	auler	_		IDEP V		Cubic Yards of	Name of Registe			Ш	Ш	Ш
AbateTech, Inc.			Ha	uler ID 18750	No.	Waste 40	G.R.O.W.S. I					
City, State				.0.00		Disposal Date	City, State		- 1.00			_
Lumberton, NJ						1/31/19	Tullytown, P	A				

Completed By (Print or Type)

Gwendolyn Trumbetti

Operations Coordinator

Signature

Date |

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

NOCE			NO					8:60 and 5:1	[전경] (1.1.1 [X.) [20] [X.) [X.] [X.] [X.] [X.] [X.] [X.] [X.] [X.]	4		1070	1,746	And of the last
Date of Notification (1)					Nan	ne of Buildin	ng C	Owner/Operator	(2)	JAN	-8	2019		
12/	31 /	1	8		1		770	26		Job#1809-5384	Chec	k#		
Agencies Notified EPA	Type Notif		n		Stre	et Address		Street, SUite 2		A ESTO:				
☑ DOLWD						State, Zip					1 ++ 0 0	RESERVE		
☑ DHSS □ DCA	Amenda Emerge		-	20	Ta	mpa, FL	336	609						
(NJAC 5:23-8)	justifica		iriciuuli	ig	Nam	e of Contac	ct			Telephone Nur	nber			
**************************************	☐ Cancell	ation			CI	ris Walsl	h			609-517-57				
					F/	CILITY	NFC	ORMATION					- 127	
Name of Facility Where A	batement is	Takir	ng Plac	e (3)					Type of Facility	(4)				
Stockton Seaview H	lotel & Go	If Clu	ub						School (K-1					
Street Address									☐ Subchapter	8 (Other than K-1				
401 South New York	Road								homes, etc.	orivate and commo	ercial b	ouildin	gs,	
City (5)									Square Feet	# of Floors	TE	Bldg. A	\ae	
Galloway, NJ 08205													3	
County (6)				7	Cou	nty Code (7	7)(S7	TATE USE ONLY)	Current Use (Pr	rior if being demol	ished)			
Atlantic								•	Hotel					
Name of Monitoring Firm H		lding	Owner	(8)	ASCM	No.	N	ame of Abateme	ent Contractor (9))				
Heath & Safety Serv	ices				,		1	AbateTech, In	nc.					
Street Address							Street Address							
PO Box 365								30 Maple Ave	e. PO Box 25					
City, State, Zip Code							Ci	ty, State, Zip Co	ode					
Berlin, NJ 08009							Lumberton, NJ 08048							
Project Manager for Monito	oring Firm			Tel	ephone	No.	Telephone No. License No.							
Jim Proctor				6	09-704	-8850		609-265-2107		00529				
Start Date (10)	2000	Sched				ite (11)	Na	me of OSHA M	onitor				- 72	
10 /15 / _	18		1 /	3	1_/	19	1	EMSL Analyti	cal					
Occupancy Status During A							Str	reet Address						
☐ Facility Closed/Vacated	During Enti	ire Pe	riod of	Abate	ment		2	200 Route 130	0 North					
Abatement Performed C	Outside of N	ormal	Facilit	y Hou	rs - Des	cribe	Cit	y, State, Zip Co	de	72				
Time of Abatement:		P	VI/	PIM		AM	(Cinnaminson,	, NJ 08077					
Scope of Work (Check all the	nat apply)						()							
≥3 sf or ≥3 lf			⊠ Re	novat	ion				ainment with Neg	ative Pressure	8.5			
≥160 sf or ≥260 lf			☐ De						Procedure					
								☐ Non-Exen	npted (*) and No	n-Friable Procedu	re			
Location of				Loca Norma							Ab	atem	ent T	уре
Asbestos-Containing Ma		1)	Use	d Sol	ely by	Asbes	stos	Description of Containing Mate		Amount	Re	Re	E	E
TO BE ABATE	<u>ED</u>		100000000000000000000000000000000000000	intena	nce/ Staff?		, the	ermal systems in	nsulation,	(Specify	Removal	Repair	Encapsulate	Enclosure
IN Facility (13)			Cusi	(12)	Otali !			surfacing, VAT, her miscellaneo		SF or LF)	'a		sula	ure
()			Yes	No	N/A		Ot	nei miscenaneo	ius)				te	
Regency Wing 1st FI.						Accoust	tica	I Fire proofin	g	2,500 SF				
Regency Wing 2nd Fl.					\boxtimes	Accoust	tica	I Fire proofin	g	2,500 SF		П	П	П
Regency Wing 3 rd FI.						Accoust	ica	I Fire proofin	g	2,500 SF				
Bay Wing 3 rd Fl.					×	Accoust	ica	I Fire proofin	g	2,500 SF		П	П	П
Name of Registered Waste	Hauler			IN	JDEP V			oic Yards of	Name of Regist		1-4		_	_
AbateTech, Inc.				H	auler ID	garanean.	Wa		G.R.O.W.S.					
City, State					18750		Disp	posal Date	City, State					
Lumberton, NJ								/31/19	Tullytown,	PA				
Completed By (Print or Type	e)	Title						Signature	A.	Da	te			
Gwendolyn Trumbetti		15.55		ons (Coordi	nator		J. J	MV^0		713	11	8	

JAN 8 2019

	Location of ACM	Used for Ma	int.	Description of ACM	Amoun	it .	Abaten	nent Type
	Dining Room	NO		ustical material on plaste	r	3,000 SF		Removal
1	Regency Wing	NO	35 -4	Plaster		72 SF		Removal
f	Regency Wing	NO		Elbows		54 total		Removal

State o NOTIFICATION OF (Pursuant to NJAC 8:60 and 5:16)

of New Jersey	1 44	E	P	S	1
ASBESTOS ABATEMENT			. 9		-

NOCK		1	ITO					ESTOS ABA 8:60 and 5:1			57	i!	177-		A Comment	
Date of Notification (1)					Nan	ne of Buildi	ng C	Owner/Operator	(2)	JAI	4	8	2019		1113	
	31 /	18	_		M	illville Pu	blic	Schools / J	ob #1707-517	9 Check#					07.4	
Agencies Notified	Type Notifi	ication			Stre	et Address				E. (12.3)	(Y : C;)	7,777	dire i	1	4	
⊠ EPA	☐ Initial				10	1 North 3	grd S	Street		1.	CH		vic	4.11		
☑ DOLWD ☑ DHSS		ed ment # 10			City,	State, Zip	Coc	de			- estat y	* - * A	1.4745		45	
□ DCA	☐ Emerge				M	illville, NJ	J 08	332								
(NJAC 5:23-8)	justifica		aumg		Nam	e of Contac	ct			Telephone	Numb	er				
	☐ Cancella	ation			В	ob Ryan				609-858	-5395	5				
					F/	CILITY II	VFC	DRMATION								
Name of Facility Where A	Abatement is	Taking P	Place	(3)					Type of Facility	y (4)						
Millville Senior High	h School								School (K-							
Street Address										r 8 (Other than I private and con		ial h	uildin	ac		
200 North Wade Blv	/d.								homes, etc		interc	iai D	unam	ys,		
City (5)									Square Feet	# of Floors		В	ldg. A	ige		
Millville									200,000	2			50+			
County (6)					Cou	inty Code (7	7)(S7	TATE USE ONLY)	Current Use (F	rior if being der	nolish	ed)				
Cumberland									Education							
Name of Monitoring Firm			200)	ASCM	No.	Na	ame of Abateme	ent Contractor (9	9)						
	Brinkerhoff Environmental Services, Inc.							AbateTech, I	nc.							
Street Address					reet Address											
1805 Atlantic Avenu				-	30 Maple Ave	THE COURSE CONTRACT C										
City, State, Zip Code	••							ty, State, Zip Co		100						
Manasquan, NJ 087							Lumberton, NJ 08048									
Project Manager for Monit	oring Firm			4	phone		Telephone No. License No.									
Gary W. Fleming		2 1 1 12	-	2000	700-7-300,000	3-2225		609-265-2107		00529			520			
Start Date (10)4 /2 / _		Schedule 1			tion Da /	- 07 T		ime of OSHA M E MSL Analyti								
Occupancy Status During							Str	reet Address								
Facility Closed/Vacated	During Enti	re Period	of Ab	oaten	nent		2	200 Route 130	0 North							
Abatement Performed (Time of Abatement: 7A	Outside of No	ormal Fac	cility h	Hours	Des	scribe		y, State, Zip Co								
	1	0.001 101-	1 2 / 5/19				(Cinnaminson	, NJ 08077							
Scope of Work (Check all t	that apply)							T Full Control		: D	3					
≥3 sf or ≥3 lf			Reno	vatio	n			☐ Mini-Encl	ainment with Ne osure	gative Pressure						
≥160 sf or ≥260 lf			Dem	olitio	n			Glovebag	Procedure		17.5					
		T	le L	ocati	00	I		M Non-Exen	npted (*) and No	n-Friable Proce	eaure	•••				
Location o	f		No	rmall	y			Description of			-	_	_	ent T	1	
Asbestos-Containing M	laterial (ACM		Jsed : Maint					Containing Mat	erial (ACM)	Amount	81	Removal	Repair	Enc	Enclosure	
TO BE ABAT IN Facility		100	ustoc			(i.e.		ermal systems ir surfacing, VAT,		(Specify		SVOL	air	aps	losu	
(13)			(12)				her miscellaneo		SF or LF)	1	<u>=</u>		Encapsulate	Гe	
		Ye	es	No	N/A						- 1			Ф		
See Attached						See Atta	che	ed		See Attach	ed					
			Г								-		П	П		
											_	_] [_	
			+		177						-		Ш			
Name of Deal to the						<u> </u>										
Name of Registered Waste	Hauler			100	DEP V		Cub	oic Yards of	Name of Regis							
AbateTech, Inc.				111111111111111111111111111111111111111	18750		1	2	G.R.O.W.S	. Landfill						
City, State								posal Date	City, State	1920,000						
Lumberton, NJ							1.	/31/19	Tullytown,	PA						
Completed By (Print or Typ	1	Title		200 L 2000	- 5 - 2200	2 22		Signature	N		Date		5	0	7	
Gwendolyn Trumbett	.1	Oper	ation	ns C	oordi	nator		LVW	(1)		12	13	511	10	6	

Location of ACM	Used for Maint.	Description of ACM	Amount	Abatement Type
Room D105	NO	Transite Panels	9 SF	Removal
Room D104	NO	Transite Panels	9 SF	Removal
Room D103	NO	Transite Panels	10 SF	Removal
Room D103	NO	Cove Base Mastic	8 LF	Removal
Room D101	NO	Transite Panels	10 SF	Removal
Room D101	NO	Cove Base Mastic	8 LF	Removal
Room D102	NO	Transite Panels	19 SF	Removal
Room D102	NO	Cove Base Mastic	7 LF	Removal
Room D113/114	NO	Transite Panels	60 SF	Removal
Room D113/114	NO	Chalkboards & Mastic	50 SF	Removal
Room D113/114	NO	Transite Door Panels	30 SF	Removal
(2) Storage Rms. & I	Hall NO	Floor tile & Mastic	150 SF	Removal
Throughout	NO	Door Caulk	10 SF	Removal
Auditorium	NO	Cement Panels	500 SF	Removal
Auditorium	NO	Roof Drain Fitting	1 each	Removal
Cafeteria	NO	White window glazing	2,436 LF	Removal
Cafeteria	NO	Transom Panels	30 SF	Removal
Cafeteria	NO	Window sills	228 SF	Removal
Cafeteria	NO	Floor tile & Mastic	550 SF	Removal
Cafeteria	NO	Fire Stop	9 SF	Removal
Cafeteria	NO	Interior Door Caulking	668 LF	Removal
Cafeteria	NO	Black Pipe wrap	300 LF	Removal
Cafeteria	NO	Caulk on block wall	10 LF	Removal
Cafeteria	NO	Door Caulking	50 LF	Removal
Cafeteria	NO	White window glazing	420 LF	Removal
D113/114	NO	Cove Base Mastic	640 LF	Removal

JAN 8 2019

Location of ACM	Used for Maint.	Description of ACM	Amount	Abatement Type
D113/114	NO	Door Caulk	576 LF	Removal
D113/114	NO	Wall Caulk	180 LF	Removal
Auditorium	NO	Door Caulk	350 SF	Removal
Exterior	NO	Transite Debris	13,000 SF	Removal

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

MOCK		Ν	ITO	FICAT (Purs	ION OF A	ASBESTOS AE	SATEMENT 5:16)			1. 1.			
Date of Notification (1)12 /18					Name of Building Owner/Operator (2) Pinelands Regional School District / Job #4305 5350 Ct - 1 //								
Agencies Notified Type Notification					Pinelands Regional School District / Job #1808-5359 Check # Street Address								
⊠ EPA □ In	☐ Initial								10.00		V + 4 4-		
☑ DOLWD ☑ Ar						ntown Road							
	Amendment #5 ☐ Emergency (including					City, State, Zip Code							
DCA Er (NJAC 5:23-8) Er	ding			Harbor, NJ									
	(NJAC 5:23-8) justification) Cancellation				ame of Cont		Telephone Number						
			Kevin Mad			856-662-9500							
Name of Facility Where Abateme	ent is Takin	- DI			FACILITY	INFORMATION							
Pinelands Junior High Sc	bool	ng Pi	ace (3	3)			Type of Facilit						
Street Address	11001						School (K-	School (K-12)					
590 Nugentown Road							Subchapte	Subchapter 8 (Other than K-12)					
City (5)							homes, etc	Other (i.e., private and commercial buildings, homes, etc.)					
Little Egg Harbor, NJ							Square Feet	F			Age	Č.	
County (6)								blug.			3		
Ocean				C	ounty Code ((7)(STATE USE ONLY)	Current Use (Prior if being demolished)						
							(and a string derivation)						
Name of Monitoring Firm Hired by TTI Environmental	Building (Owne	er (8)	ASC	M No.	Name of Abaten	nent Contractor (9	ntractor (9)					
Street Address					AbateTech, Inc.								
1253 North Church Street					Street Address								
City, State, Zip Code					30 Maple Ave. PO Box 25								
Moorestown, NJ 08057					City, State, Zip Code								
						Lumberton,	NJ 08048						
Project Manager for Monitoring Fir Jim Guilardi	m		10	lephon		Telephone No.		License No.					
Start Date (10)			0-8800	609-265-2107	7	00529							
					ate (11)	Name of OSHA N	Monitor						
	<u>8 / 22 / 18 1 / 31</u>						ical						
Occupancy Status During Abateme	ent (Check	only	one)			Street Address							
Facility Closed/Vacated During	Entire Peri	iod o	f Abat	ement		200 Route 13	0 North						
Time of Abatement	Abatement Performed Outside of Normal Facility Hours Time of Abatement:AMPM/PM				scribe	City, State, Zip Code							
			PIV	1	_AM	Cinnaminson							
Scope of Work (Check all that apply	/)												
≥3 sf or ≥3 lf	D	⊠ R€	enova	tion		Full Cont	ainment with Neg	ative Pressure					
△ ≥160 sf or ≥260 lf					☐ Glovebag Procedure								
						Non-Exer Non-Exer	mpted (*) and Nor	n-Friable Procedur	re				
Location of			s Loca Norma					Abatemen				vne	
Asbestos-Containing Material (A	CM)	Use	ed Sol	ely by	Ashasi	Description of tos Containing Mat				1		T	
TO BE ABATED IN Facility			intena	ince/ Staff?	(i.e.,	thermal systems in	sulation	Amount (Specify	Removal	Repair	nca	nclo	
(13)		Cus	(12)	Stall?		surfacing, VAT,	or	SE or LE)		=-	Encapsulate	Enclosure	
		Yes	No	N/A	1	other miscellaneo	us)				late	G,	
Various Bathroom/Locker Roo	ms [\boxtimes		Bathroon	n fixture caulk			-				
Cafeteria						se Mastic		600 LF					
					OOVE Das	se Mastic		400 LF	400 LF				
		-											
Name of Registered Waste Hauler				JDEP V	Vanta C								
AbateTech, Inc.			H	auler ID	No. V	Cubic Yards of Vaste	Name of Registe						
City, State 187				18750	50 40 Fairless Landfill								
Lumberton, NJ						Disposal Date 1/31/19	City, State Tullytown, P	Δ.					
Completed By (Print or Type)	Title					Signature	ranytown, P						
Gwendolyn Trumbetti	Operations Coordinator					Oignature (AX	Date	2	, .	0		
SB-41	11 12 200		AND THE STREET				V 1 / 1 1	113	13	111	V		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

JAN

(Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 12 31 State of NJ Department of Treasury / Job #18/10-5404 Check 18 Agencies Notified Type Notification Street Address **⊠** EPA ☐ Initial 50 Barrack Street **⊠** DOLWD City, State, Zip Code ☑ DHSS Amendment #3 Trenton, NJ 08608 ☑ DCA ☐ Emergency (including (NJAC 5:23-8) justification) Name of Contact Telephone Number ☐ Cancellation Mike Wilson 609-512-2345 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) **Executive State House** School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 125 West State Street homes, etc.) City (5) Square Feet # of Floors Bldg. Age Trenton, NJ County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Mercer Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Langan Engineering AbateTech, Inc. Street Address Street Address 300 Kimball Drive 30 Maple Ave. PO Box 25 City, State, Zip Code City, State, Zip Code Parsippany, NJ 07054 Lumberton, NJ 08048 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Vijay Patel 973-560-4900 609-265-2107 00529 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor _11 / 12 / 18 __1__ / _31 / 19 **EMSL Analytical** Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-___PM/___PM-___AM Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ☑ Full Containment with Negative Pressure $\square \ge 3$ sf or ≥ 3 If □ Renovation ☐ Mini-Enclosure ≥160 sf or >260 lf ☐ Demolition ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Removal Encapsulate Enclosure 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) (13)(12)other miscellaneous) Yes No N/A SEE ATTACHED SEE П X SEE ATTACHED \boxtimes ATTACHED П П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. AbateTech, Inc. Waste G.R.O.W.S. Landfill 18750 40 City, State Disposal Date City, State Lumberton, NJ 1/31/19 Tullytown, PA

Completed By (Print or Type)

Gwendolyn Trumbetti

Operations Coordinator

Signature

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Location of ACM	Used for Maint.	Description of ACM	Amount	Abatement Type
Governor's Office	NO	Plaster	1,250 SF	Removal
Governor's Office	NO	Duct Insulation	50 SF	Removal
Governor's Office	NO	Vapor Barrier	150 SF	Removal
2 nd Floor	NO	Plaster	2,100 SF	Removal
2 nd Floor	NO	Duct Insulation	150 SF	Removal
2 nd Floor	NO	Vapor Barrier	150 SF	Removal
Building Entrance	NO	Plaster	1,900 SF	Removal
Exterior	NO	Roofing Material	600 SF	Removal
Throughout	NO	Window Caulk	200 LF	Removal
Executive Offices	NO	Ceiling Plaster	120 SF	Removal
Executive Offices	NO	Pipe Insulation	15 LF	Removal
Executive Offices	NO ·	Black Mastic	320 SF	Removal

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

NO CK	NO					STOS ABA 8:60 and 5:1				E				
Date of Notification (1) 12 / 28 /	Name of Building Owner/Operator (2) South Plainfield School District/ Job #1812-5425 Check #10927 2019													
	Type Notification ☐ Initial ☑ Amended				Street Address 125 Jackson Avenue						the datases			
								f se	-857K	8.0%	INT.			
☑ DHSS Amend	lment #1			City, State, Zip Code							aracá Portago	77 -		
	ency (includ	ing				d, NJ 07080								
(NJAC 5:23-8) justifica		ne of Conta				Telephone Number								
Cancel	To	om Wiggii	ns			908-217	7-2394							
			F	ACILITY II	NFC	RMATION								
Name of Facility Where Abatement is		ce (3)					Type of Facility	(4)						
South Plainfield BOE- Field I	louse						School (K-12)							
Street Address								chapter 8 (Other than K-12)						
401 Avon Avenue			Other (i.e., private and commercial buildings, homes, etc.)											
City (5) South Plainfield, NJ				Sq			Square Feet	# of Floor	S	Bldg	Age			
County (6)			Col	County Code (7)(STATE USE ONLY)			Current Head							
Middesex			1000	inty Code (/	1)(01)	ATE USE UNLT)	Section 10 and Columbia Columbia Columbia	(Prior if being demolished)						
Name of Monitoring Firm Hired by Bu	ilding Owne	r /9\	ASCA	Field House								-		
Omega Environmental	namy Owne	(0)	ASCIV	SCM No. Name of Abatement Contractor (9)										
Street Address				AbateTech, Inc.										
280 Huylar Street				Street Address										
City, State, Zip Code				30 Maple Ave. PO Box 25 City, State, Zip Code										
South Hackensack, NJ 07606														
Project Manager for Monitoring Firm		Tol	anh a a a	N/a										
Geiser Fajardo			ephone			lephone No.	License No.							
	Cabadulad			9-8700		509-265-2107	11	00529						
1 / _7_ / _19	Scheduled (3,000	me of OSHA M	20.73 17.70.00							
		/			EMSL Analyti	cal								
Occupancy Status During Abatement					Str	eet Address								
Facility Closed/Vacated During Ent	ire Period of	Abate	ment		2	00 Route 130	North							
Abatement Performed Outside of N Time of Abatement:AM	iormai Facili PM/	ty Hou PM	rs - Des	SCribe AM		y, State, Zip Co								
The state of the s			-VIVI	C	innaminson,	, NJ 08077								
Scope of Work (Check all that apply)							·							
≥3 sf or ≥3 lf	⊠ Re	enovat	ion											
☐ ≥160 sf or ≥260 lf	□ De	emoliti	on											
							npted (*) and No	n-Friable Proc	cedure					
Location of	1.00	s Loca Norma				_			A	Abatement Type				
Location of Normal Asbestos-Containing Material (ACM) Used Sole				Ashes	stos (Description of Containing Mate			700	Re	四四	四		
TO BE ABATED	Ma	aintena				rmal systems in			1 -	Repair	cap	clos		
IN Facility (13)	Cus	(12)	Staff?		surfacing, VAT, or		SF or LF)		'	Encapsulate	Enclosure			
(13)	Yes	No	N/A	1	Otr	ner miscellaneo	us)				ate			
Restroom				Expansi	on .	Joint Compo	und	64 LF	D					
Restroom				Pipe Inst		ulation		25 LF						
Restroom					or			25 LF 🔲 🗆						
Restroom		П		Window	Gla	zina		70 LF 🛛 🖂 🖂						
Name of Registered Waste Hauler	JDEP V				Name of Bogic		I Z	1						
AbateTech, Inc.	auler IE	P Waste Cubic Yards of Cubic Yards of Company Name of Registered Landful G.R.O.W.S. Landfill												
City, State	18750	8750 25												
Lumberton, NJ				osal Date	City, State	DA								
	T:41-				1/		Tullytown,	PA						
Completed By (Print or Type)	Title					Signature	la Aar		Date			0		
Gwendolyn Trumbetti	Operati	ons (oordi	nator		X	///W		19	120		8		