CK 3100

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

RECEIVED

Date of Notification (1) 1 - 8 - 13		100				g Owner/Operator	(2)	113 JAN -9	PM 2:	58	,		
Agency Notified	Type Notification		1	Street 250	Address	t Park Ce				-			-
CKEPA CKDEP CDOL	점 Initial 다 Amended Amendment #		+	City, S	tate, Zip			& LICEN	SING	401	-		
©¥DOH □¥DCA	☐ Emergency (included justification)☐ Cancellation	ling	-		of Contac na M.	t. Rowe	7	Telephone Nu	mber	=			
				FACI	LITY INF	ORMATION						1000	1440014
Name of Facility Where	Abatement is Taking Pl	ace (3)			A Test		Type of Facility	(4)					
ACME Store Street Address	#7812						☐ School (K-12 ☐ Subchapter	2) 8 (Other than K-1 rivate & commerc	2) ial buildin	nas			
Long Beach E	Boulevard an	nd J	ero	me .	Aveni	ie ·	homes, etc.	)	iui bulluli	,go,			
City (5)							Square Feet	# of Floors	Bldg.	Age			
Beach Haven							20,000	1		+/	- 5	0	
County (6)			T			) (STATE USE	Current Use (P	rior if being demo	lished)				
Ocean				ONLY)	)		vacant				28	*	
Name of Monitoring Firm	Hired by Building Own	er	ASCM	No.			nent Contractor (		- 20				
(8) Health & S	Safety Srvcs	3.				Pepper	Environm	ental Se	rvice	es	, :	In	C.
Street Address 318 12th Str	reet					Street Address 2251 Fr	aley Str	eet				, i	
City, State, Zip Code						City, State, Zip (	Code						••••
Hammonton,	NJ 08037					Philadel	lphia, PA	19137					
Project Manager for Mor				ne No. 704	-8850	Telephone No. 215-533-	-5155	License No. 00848	N <sub>2</sub>				
Start Date (10) 1-17-13	Scheduled C	omplet		te (11)		Name of OSHA Health 8		Services	3				
Occupancy Status Durin	g Abatement (Check or	nly one)	1		* 3	Street Address							
☐ Facility Closed/Vacate ☐ Abatement Performed	ed During Entire Period	of Abat	tement			318 12th City, State, Zip (							
☐ Other – Describe:	Outside of Normal Fac	July 110	413			Hammonto	on, NJ 08	3037					
Scope of Work (Check a	II that apply)					C) Full	Containment with	Negative Pressu	ire				1200100
□ ≥ 3 sf or ≥ 3 lf □ ≥ 160 sf or ≥ 260 lf	12				novation nolition	☐ Mini- ☐ Glov	-Enclosure rebag Procedure						
		1	V35 5		1	LZL NOn-	-Exempted (*) an	d Non-Friable Pro	cedure	ΙΑ	bate	mer	nt
31			Locati								Ту		
Location Asbestos-Containin TO BE AI IN Fac (13	g Material (ACM) BATED cility	Use Ma	ed Sole iintena Custodi Staff? (12)	ly by nce/ ial		Description stos Containing M , thermal systems surfacing, VAT other miscelland	aterial (ACM) insulation, I, or	Amount (Specify SF or LF		Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A	1								
various areas				х	9x9 fl	oor tile(whit	e/blue/gray	7,300sf		х			
		-									-	$\dashv$	
			<u> </u>	-							7	7	
Name of Registered Was	ste Hauler	100000		Vaste F	lauler	Cubic Yards of	Name of Regis	stered Landfill					
Service Tran	sport	ID.	No.	2		Waste	A & L S	alvage	- ×				
City, State Morrisville	, PA					Disposal Date	City, State Libson,	ОН			11.704 00		
Completed by Jennifer Ni	Title	f Or	era	tio	ns /	Signature /	11 .		Date 1 - 8	-1	3		
JOHN TOT ME						gom !	luce						

State of New Jersey - Notification of Asbestos Abatement 2013 JAN 9 PM 2:58 (Pursuant to N.J.A.C. 8:60-7 and 12:120-7) 0/2618 Name of Building Owner/Operator (2) The Valley Hospital Date of Notification (1) January 3, 2013 Street Address Notification Type 223 North Van Dien Avenue Agencies Notified Initial Notification City, State, Zip Code EPA Amendment # 1 Ridgewood, NJ 07450-2736 DCA Telephone Number Name of Contact x DOL Emergency (including William Stasiak X DEP justification) x DOH FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) ☐Subchapter 8 (other than K-12) The Valley Hospital Other (i.e. private & commercial buildings, homes, etc.) Cheel 4th Floor - Neuro/Ortho Support Areas Sq. Feet: Unknown # of Floors: 4 Bldg. Age: 50+ years Street Address 223 North Van Dien Avenue Current Use (prior if being demolished): Hospital County Code (7) County (6) (State Use Only) City (5) Bergen Ridgewood GREENWOOD ABATEMENT CONSULTANTS, INC. Name of Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Colden Corporation Street Address **268 MAIN STREET** Street Address 28 Washington Street City State, ZipCode Butler, NJ 07405 City, State, Zip Code License Number Ballston Spa, NY 12020 Telephone Number Telephone Number 00840 Project Manager for Monitoring Firm 973-492-0477 347.435.3561 Name of OSHA Monitor Jim Miades Scheduled Completion Date (11) Scheduled Start Date (10) EMSL inc. February 11, 2013 February 1, 2013 Street Address Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement 1056 Stelton Road Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Piscataway, NJ 08854 Other - Describe: Weekends- Friday-Saturday-Sunday-Describe Phase 1- October 19, 2012- October 22, 2012- Completed Phase 2C- February 8, 2013 - February 11, 2013 Phase 3b- February 1, 2013 - February 11, 2013 x Full Containment with Negative Pressure Source of Work (Check all that apply) Mini-Enclosure Renovation Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure  $\geq$  3 sf or  $\geq$  3 lf Demolition □ > 160 sf or ≥ 260 Abatement Type Amount Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Is Location Normally Used Remove Repair Encap Enclose Location of Asbestos-Containing Solely by Maint./Custodial or LF) VAT, or other miscell.) Material (ACM) in Facility (13) Staff? (12) NA YES IXI 1,300 sf Cheel 4th Floor **VAT & Mastic** X Neuro/Ortho Support Areas Phases 2b,2c & 3b Name of Registered Landfill

Cubic Yards of Waste:

Marin Graure

Signature

Meadowfill Landfill

January 3, 2013

Disposal Date

2013

February 11,

City, State

Route 2, Box 68

Bridgeport, WVA

304-842-2784

GAC # 2012-355- Note: 2 & 3rd Phase

NJ DEP # 12561

Name of Reg. Waste Hauler

See Hauler Below # 1 & 2

Completed by (Print or Type)

Marin Graure

NJDEP Waste Hauler ID #

SENIOR PROJECT

See Below

MANAGER

Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405

Hauler #2) Newark Carting, Inc. - Newark, NJ 04509, NJ DEP # 19551

#### 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) October	3 2012				Name of Building Owner/Op The Valley Hospital	erator (2)		AN	600
Agencies Notified	0, 2012	Notification	Type		Street Address		٠ ديي	· · · · · · · · · · · · · · · · · · ·	D.
⊠ EPA				fication	223 North Van Dien A	venue	* <	1000	173
□ DCA				2122 PROGRAMMENT (1227)	City, State, Zip Code			C. C. C'm	100
x DOL		Emera	encv (i	ncluding	Ridgewood, NJ 074	50-273	6	100	S. 18
⊠ DEP		justific			Name of Contact	2.2	Telepho	ne Number	1100,
x DOH		Justine			William Stasiak			rearribally	~
				FACILITY IN	FORMATION				
Name of Facility Where Abate	ement is Tal	king Place (3)			Type of Facility (4)				
The Valley Hospital			W_000000000000000000000000000000000000		School (K-12)				
Cheel 4th Floor - Neu	iro/Ortho	Support	Areas		Subchapter 8 (other than K-				2
Street Address					Other (i.e. private & cor				
223 North Van Dien	Avenue				Sq. Feet: Unknown	# of Floo	rs: 4 Blo	<u>lg. Age:</u> 5	0+ years
City (5)	County (6	)	County	y Code (7)	Current Lies (prior if being de	maliahad	\. Haanii	ial .	
Ridgewood	Berger	1	(State	Use Only)	Current Use (prior if being de	monsnea	). nospii	ldi	
Name of Monitoring Firm Hire	d by Bldg. (	Owner (8)	ASCM	No.	Name of Contractor (9)	and a second of the second of	www.com.com.com.com.com.com.com.com.com.com		100
Colden Corporatio	n	2000 CO			GREENWOOD ABATE	MENT C	ONSULT	rants, in	C.
					-	1.7			
Street Address					Street Address				
28 Washington Stree	t				268 MAIN STREET			1000	
City, State, Zip Code	020				City State, ZipCode				
Ballston Spa, NY 12		Talashasa N	li andra a		Butler, NJ 07405		Lineman	M	
Project Manager for Monitorin  Jim Miades	<u>ig Film</u>	347.435.	m-noncern transporter		<u>Telephone Number</u> 973-492-0477		License 00840	Number	
Scheduled Start Date (10)		Scheduled C		n Data (11)	Name of OSHA Monitor		00040		
October 19, 2012		January			EMSL inc.				
Occupancy Status During A					Street Address				
Facility Closed/Vacate					4050 01 11 - D				
Abatement Performed	d Outside o	f Normal Faci	lity Hour	rs -	1056 Stelton Road				
Describe			- 2	2	City, State, Zip Code				
Other - Describe: We				iay-	Piscataway, NJ 08854				
Phase 1- October 19 Phase 2- TBD	, 2012- Oct	oper 22, 201	2		1/2				
Phase 3- TBD									
Source of Work (Check all that	t apply)					77 727			
	vicus Average A				x i	Full Conta	inment wit	th Negative F	ressure
≥ 3 sf or ≥ 3 h	f			Renovation		Mini-Enclo	sure		200000000000000000000000000000000000000
□ > 160 sf or > 2				Demolition	G	lovebag F	rocedure		
					No.	on-Exemp	ted (*) and	Non-Friable	Procedure
Location of Asbestos-Contain		cation Normal			bestos Containing Material	Amour		batement Typ	<u>e</u>
Material (ACM) in Facility (13)	Sole	ly by Maint./Cι ? (12)	istodial	VAT, or other mis	nal systems insulation, surfacing,	(Specification or LF)	ly SF R	emove Repair	Encap Enclose
	YES		NA	VAT, or other files	scen.)	01 117			
			-						
Cheel 4 <sup>th</sup> Floor Neuro/Ortho Support Area			X	VAT & Mastic		1,300	sf 🗵	,	
Neuro/Ortilo Support Area	13			VAI & Wastic		1,300	51	"	1 1 1
		_			······································	_	-		+
Name of Reg. Waste Hauler		NJDEP Was	io Haular	ID#	Cubic Yards of Waste:		Name of	Registered La	
See Hauler Below # 1 &	2	See Below		TID#	Cubic fards of Waste.		Meadov	vfill Landfill	Indilli
Hauler #1) Greenwood	Abateme	nt Consulta	nts, Inc	c Butler, NJ 0		sposal Da		City, Sta	
NJ DEP # 12	561				0	ctober	22, 2012	Route 2, Bridgepo	, Box 68 ort, WVA
Hauler #2) Newark Cart			04509,	NJ DEP # 19551		1 1 2		304-842	
Completed by (Print or Type)		<u>litle</u>		-	Signature		Date		
Marin Graure		SENIOR PI		<i>i</i>	Marin Graure	1)	Ucto	ber 3, 201	2
		MANAGER							// 

Check# 7912

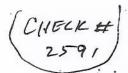
7912	МОТ	(Purs	TION O	NJAC 8:6	TOS ABATE	0)			2013 Asset	PEC	1. [	14/	<u> </u>
Pate of Notification (1)	A VE CU			uilding Ow Anoche	ner/Operator	(2)		4	20/3	AN -	9 <sub>F</sub>	Mo	· ,
gencies Notified Type Notification	: E.F. ().		reet Add 35 McA	ress Idoo Ave	enue 🗼				21	The	(*)		• •
EPA Initial DEP Amended Amendment #		Cit	ty, State, ersey C	Zip Code City, NJ 3	305					ICEN	(3)/	G	8
Emergency (ir justification)  DCA  Emergency (ir justification)  Cancellation	cluding	1 1 1 1 1 1 1 1 1	ame of C eresita	ontact Anoche				Tele	phone Num	aber			
	Place (2)		FACILI	TY INFOR	MATION	Typ	e of Facility (4			7			-
Name of Facility Where Abatement is Taking Residence	riace (3)						School (K-12 Subchapter	2)	er than K-12	2)			
Street Address 235 McAdoo Avenue					a.	×	Other (i.e. p etc.)	rivate &	commerci	al buildi			<b>3</b> ,
City (5) Jersey City				8			uare Feet 800	# of 2	Floors	80	ig. Ag ı +	je	
County (6)			ounty Co	ode (7) SE ONLY)			rrent Use (Pricesidence	or if bein	ng demolis	ned)			
Hudson Name of Monitoring Firm Hired by Building C	wner (8)	1	ASCM I	No.	Nam	e of A	batement Cor ast Haz Ma	tractor t Rem	(9) noval, Inc				
N/A Street Address	-		IN/A	10 T	Stree	et Add							
City, State, Zip Code					City,	State	, Zip Code n, NJ 07504	1					
Project Manager for Monitoring Firm		T	elephon	e No.	Tele	phone		•	License 1	No.			
Start Date (10)	Scheduled	Com	oletion D	ate (11)	Nam	e of C	SHA Monitor		00001		16.1		-
January 4, 2013	January	5, 20			1	me a	s above tress	-					
Occupancy Status During Abatement (Chec Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: Unoccupied Baseme	Period of Ab	ateme	ent				, Zip Code						
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovat				×	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure				e	
-	le l	Locatio	n			Eurol	Non Exompte		1810		Abate	ement	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	N Used Mair	ormall Solel ntenar odial S (12)	y y by nce/ staff?	Asbest (i.e.	Description Containing thermal system surfacing, other miscel	g Mate ems in VAT, o	sulation, or	(	Amount Specify F or LF)	Removal	Repair	Encapsulate	Liciosaie
	Yes	No	N/A		Pipe Inst	ulatio	in.		60 LF	x	-		-
Basement Boiler Room		×			Pipe inst	uialio	111						
											-		-
Name of Registered Waste Hauler East Coast Haz Mat Removal, Inc.		F	IJDEP W lauler ID J 419		Cubic Yard of Waste 1	061)	G.R.O	.W.S.	tered Land North In				
City, State Paterson, NJ 07504		Dec			Disposal D 01/05/20	13	City, St.	ville	9	D-4-			
Completed by James E. Unger	Title Proje	ct Ma	anager		Signa	ture	who	1/2		Date 01/03/	2013	3	

MD 20619818796 -FOR 2013-

	1,000	10.50			<b></b>	0,					
Date of Notification (1)	411 17		Nai	me of Build	ing Owner/Operato	or (2)	-				
01-	04-13			AL	CATEL-1	1) (511	TECHAN	100	1 =	_	101
Agency Notified	Type Notification		Stre	cel Addies:	)			200	-	<del>&gt;</del> ,	500
<b>≝</b> EPA	O Initial	į.		60	MOUN	-11.1	1	7	2		. 19
ST DEP	O Amended		City	, State, Zip	Code	IHIN F	108.	,	(2		٠,
a DOL	Amendment #		100			1			4	,	
	☐ Emergency (inc	luding		MU	RRAY F	tILC.	NJ OF	974	1 2		
<b>™</b> DOH	justification)		Nar				Tolonhana Nine	har		3	)
Ø DCA	O Cancellation			LAR	ERY FED	5011-				7.00	
			FA		FORMATION	CRICO					لے
Name of Facility Where A	Abatement is Taking	Place (3)		TOILIT IN	ORMATION	Tuna -1 610	10	- 1	100	3	
						Type of Facility	(4)		-	2	
ALCATEZ Street Address	- LUCENI	TECH!	NOLO	GIES	INC	☐ School (K-12	?)		()	, ,	0
						Subchapter 8	(Other than K-12	)			4
600 HO	UNTAIN ,	Ave.					ivate & commercia	l building	s,		
0. 15.						homes, etc.)					
44 10 -	. 11		6			Square Feet	# of Floors	Bldg. A	(5)	777.870.5	
MURRI	14 HILL.	NJ.	079	774		300,000	5	69	- 1	-	
County (6)	14 Hice.		Cou	nty Code (7	7) (STATE USE	Current Use (Pr	ior if being demoli	shed)		_	
UNION	)		ONL	-Y)		1		Jiica)			
Name of Monitoring Firm		wner A	SCM No.		Name of About	OFFIC	53				
(0)		A CONTRACTOR OF THE PROPERTY O	JOIN 110.		The second of the second	nent Contractor (9	))				
"HILLMANNER	JURONMENT	AL			UNIPR	O,INC.					
Street Address					Street Address	( )					
1600 RT	. 27 EAS	7			173 V	100.10	X.i-				
City, State, Zip Code					City State Zin C	ARKUS	AVE.				
1/12/101	UT B	780Z					10.00	A -	_		
Project Manager for Monfile	loring Firm	Tolo	phone Me		MOOD	BRIDGE	License No.	070	45		
Start Date (10)		00	B / NO	). V	Telephone No.		License No.				
MIKE ME	LSON	170	8.688	3.7800	132-7	26.3111	006	15			
Start Date (10)	Scheduled	Completion	Date (11	1)	Name of OSHA I	Monitor			-		
OPEN	0	PEN			4	ر د که اورو	RONHENT				
Occupancy Status During	Abatement (Check	only one)			Street Address	HON ENV	IRONHENT!	26			
					929						
☐ Facility Closed/Vacated	During Entire Perio	d of Abatem	ent		1600	27,22 B	157				
☐ Abatement Performed C☐ Other – Describe:	Juiside of Normal Fa	acility Hours			City, State, Zip C	ode		177,730			
			2263		UNIO	N N.T.	07803				
Scope of Work (Check all I	that apply)					. , , , , ,	01003				_
□ ≥ 3 sf or ≥ 3 lf	948		O Po	novation	☐ Full C	ontainment with t	Negative Pressure				
□ ≥ 160 sf or ≥ 260 lf				molition	☐ Mini-E	nclosure	i.				
				omion	☐ Non-F	bag Procedure	Non-Friable Proce				
		Isla	cation		911011-0	xempled ( ) and	Non-rhable Proce		Abot		
Up thousand have	97 E.		nally					1	Abati Tu	pe	int
Location			olely by		Description of	r			Ti	-	П
Asbestos-Containing I TO BE ABA			nance/	Asbes	tos Containing Mal	lerial (ACM)	Amount		1	m	
IN Facilit		1	odial	(I.e.,	thermal systems i		(Specify	Z O	1 20	2	Enclosure
(13)	•	(1	ff? 21		surfacing, VAT, other miscellaned		SF or LF)	Kemova	Repair	ncapsulate	응
		11			outer miscellane	ous)		\secondary a	1	ula	Sur
	AND THE RESERVE OF THE PARTY OF	Yes N	O N/A							6	
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		+-+	+	-							
							S 1				
					Carlotte Mariana			-	+		-
Name of Registered Waste	Hauler	NIDER	Waste F	dauler	0.11.11		nana <del>Bara da paga</del> nasar		11	1	1
1		ID No.	waste F		Cubic Yards of Waste	Name of Register	red Landfill				
MEWARK CA	RTING INC	300000000000000000000000000000000000000				C 0					1
City, State	WITHUY INC	4	209			GROWS.	INC.				
	11-				Disposal Date	City, State					$\dashv$
MEWARK.	NU			1 /28		MADOW	1.15 01				
completed by	Title				Signature	IUZICISV	ILLE PA	·			
DAVIDT. TOLCH	IN PRES.	1		-	1	T-1		ate	ac -	_	
SB-41			- f-		david	1.1000	a l	21-09	1-1	3	
TR-3/	טט מס	1 026 (UIS 10	in for asl	pestos licer	nsure exempted ac	tivities.					

#### State of New Jersey - Notification of Asbestos Abatement

	Notification Type				. 8:60-7 and 12:120-7)				PECS.	/1.
Date of Notification (1)			U.		Name of Building Owner/C Dover Blackwell Re	operator (2)		2013	JAN	" ED
January 4, 2013			-		Street Address	July, IIIO			9 0	
Agencies Notified		Notification	Type		64 East Midland Av	onuo	2	1	17	12.2
/ 504						enue		44		2.58
EPA	1	Amend	ed Certi	fication	City, State, Zip Code			E /	150 14	
DCA		Emerger	ncy (incl	luding	Paramus, New Jei	rsey 07652	2		1CENSON	13.
X DOL				•	Name of Contact		Telenh	one N	umber 1/1/	10.
X DEP					Tom Allesandrello					
X DOH		La Carice	iicu	FACILITY INI			190			
	ant in Tak	ing Place (2)		PACILITIN	Type of Facility (4)				1844 · IN	~ 推出也
	Henris Lak	ing Flace (3)			School (K-12)					1965
Commercial Building						on K 12\				
Street Address		19			Subchapter 8 (other th			ot	٥١	
1-5 Blackwell Street					Other (i.e. private & con			des, eu	o.)	
1-3 Blackwell officer					Sq. Feet: Unknown	# OT F1001	S: <u>Bi</u>	ug. A	<u>ge:</u> 100 ye:	115
City (5) Dover	THE PARTY OF THE PROPERTY OF	1			Current Use (prior if being	demolished)	:			
Name of Monitoring Firm Hired	by Bldg, C	Owner (8)			Name of Contractor (9)					
<b>EnviroVision Consu</b>	ıltants	inc.	0007	9	GREENWOOD ABAT	EMENT CO	DNSUL	TAN	TS, INC.	
Street Address					Street Address					
20-21 Wagaraw Road	, Bldg #	34A								
					268 MAIN STREET					
City, State, Zip Code					City State, ZipCode					
Fairlawn, NJ 07410			100		Butler, NJ 07405					
Project Manager for Monitoring	Firm	Telephone I	Number		Telephone Number		License	e Num	ber	
Fred Larson		973-636	-9145		400 0477		0004	0		***
					973-492-0477		0084	<u> </u>		
Scheduled Start Date (10)					Name of OSHA Monitor					
January 15, 2013		January	25, 201	13	EMCL in a					
					EMSL inc.			-		
Occupancy Status During Al	oatement (	Check only of	ne)	- 1	Street Address				4	
Facility Closed/Vacate	ed During I	Entire Period	of Abater	ment	1056 Stelton Road					
Abatement Performed	Outside o	of Normal Fac	ility Hour	'S -	T. (20 ) T.			_		
Describe					City, State, Zip Code					
Other - Describe:					Piscataway, NJ 08	254				
2-2					Piscalaway, No oo	004				
5011 JAR-24										
Source of Work (Check all tha	t apply)			1 25	-					
						Full Cont	ainment	with N	Negative Press	ure
≥ 3 sf or ≥ 3 lf				Renovation	n	Mini-Enclo	sure			
				Demolition		Glovebag	Proced	ure		
□ ≥ 160 Si 0i ≥ 2	.00			20,110.11.01.	F	Non-Exemp	oted (*)	and No	on-Friable Pro	cedure
Location of Asbestos-Containi	ing Isla	ocation Norma	ally Used	Description of A	sbestos Containing Material	Amour		Abate	ment Type	
Material (ACM) in Facility (13)	Sole	ely by Maint./C	ustodial	(ACM) (i.e. then	mal systems insulation, surfaci	ng, (Specif		Demo	e Repair Encap	Enclose
material (vietry in vietry (viet				VAT, or other m	iscell.)	or LF)		Kemo	ve Repair Linear	Literage
	YE	S NO	NA				-=-			_
First Floor	X			VAT		4,200	SF	X		
							- 1		1 1	
Name of Reg. Waste Hauler		I NJDEP Wa	ste Haule	rID#	Cubic Yards of Waste:				istered Landfill	
See Hauler Below # 1 &	2					20	Mead	lowfil	I Landfill	-
		ement Cor	sultan	ts, Inc. – Butl	er, NJ 07405	Disposal Da		13	City, State Route 2, Box	68
NJ DEP #	12561					January	۷, ۷	10	Bridgeport, W	VA
Hauler #2) Newark Ca	erting. In	ic. – Newar	k, NJ 0	4509, NJ DEP	# 19551	V a			304-842-2784	E .
Hauter maj Hewark Ca									President of the second	
\$6°		500 E 6					100			N 1
Completed by (Print or Type)	-	Title			Signature		Date	-		14.4
Marin Graure		SENIOR I	PRO.IF	CT	me e.		Janu	ary 4	4, 2013	
mailli Ciaule	0.00	MANAGE		23 M 9	Marin Grau	re	18:50	1000		2,2,14
	- 7	MINIMAC							- 100 mg/s	



Σ.

Date of Notification (1)	1/13		Na	me of	Bullding M. E.	Ownerk	Sperator (	2) U / I	e c= 5 .		D	
Agencies Notified	Type Notification		Su	eel Ad	dress			A	1UNT	Act. 2013	- 1	0.
□ \$PA □ \$P □ \$OOL	☐ Amended  Amendment #  Emergency (incl	vdim	Cir	y, State					, 1, 7,		AN.	2
□ 00H	justification)  Cancellation		_				SHER			elephone Number	03,5	= PM
	1.4.			FACILI	TY INFO	TAKK	D.H	Yun	e of Facility (4)		1	10 150
Name of Facility Where	Abatement is Taking F カビルCビ	Place (3)	-				_	P	chool (K-12) Subchapter 8 (	Other than K-12) ate & commercial b	wiangi	, O. 10%
159	13th St.	·	==			===	=+	1	are Feel	# of Floors	Blog	(Se
Ciry (5) AVAL	€: -010	11.				-		10	00	H being demoksner	11 40	
County (6) CAGE			10	county ISE ON	Code (7 VLY)		\	-1100-1-00-1	VAC	ANT		
Name of Monitoring Firm	Hired by Building Ov	mer	AS	CM No	• •	Name	L.C.M	oni C	Contrador (9)			
Sireer Address	//		_=			Sveet	Address 9	· ,	SPRUC	E Ave.		
	_		=	===			ale, Zip C	∞6		E, NJ.08	05	ا ا
City, State. Zip Code		1 7	·	one No		Teleph	MAP one No.			License No.		
Project Manager for Mo		· · · · · _					6-7-		<u>-0472</u>	_0044		
S:an Date (10)		Jed Comp	delio	n Dale	(11)	J	n S E I	014	HIEM	M		
Occupancy Status Dur	no Abalement (Chec	k only one	)			Sueet	Address	, <	PRUCE	A UE .		<u>.                                    </u>
Facility Closed/Vaca	aled Dunna Entre Per	100 01 200		ent		City. S				=, N, 5, 0	805	2
Scope of Work (Check	all that apply)	Renov	vation	n .			MINI-EI	nclos	ure	gative Pressure	e	
3160 st of ≥260 H		Is Loc					INGFE	2011			~	a.errer
Location Aspessos Containin TO BE AS IN Face (13	g Malenal (ACM) BATED Dirty	Nom Used S Mainte Cust Sta	naily olely nanc	by æ/	Asbe (i.e	sios Co	escription ntaining M al system acing, VA myscellar	s insi T, of	Digition.	Amount (Specify SF & LF)	Hemoval	Rotes Response
1		Yes	НО	N/A				-,=		2000\$	×	
5101	na					TRI	WS IT	=				
								==			-	1
				-	-			_	76.	actioned anothin	1	<del>'</del>
Name of Registered	Waste Hauler	·1	7	-Lauler I	O No.	011	Waste		C, ~	1, C, M, C		
				Part Street	No.	Os	posal Dat	е	Woo	DBINE,	U, J	
MAPLES		Ne				=1=	Signatur	e na	. 10	Date /	14.	/13
TOSEPH K	MAPLE SINADE, N.J. 08052 Disposal Date WOODSINE, N.J. Competed By :: Time DIANER Signature Date 1/4/13											



10-				t to NJAC						REA	f. 1 .			
Date of Notification (1) Jan 3, 2013	17		Name New	of Building Jersey [	g Owner/ Dept. o	Operator f Enviro	(2) onmer	ntal Prote	2flon	REO	1 1 2	J pan	)	
Agencies Notified Type Notification	1			Address Sloatsb					-015	JAN _	PM	2:	50	
EPA Initial Amended Amendmer	+ #		City, St	tate, Zip C	Code			<i>*</i>	2	LICE.	Usid	1 10-8	) i	
Emergency justification	(includin	g		of Contact		0-1799			Total	LILLA	umber	3.118	1.	र न् <b>र्</b>
DCA Cancellatio			Steph	nen Ellis			Ti and the same of		4			_		
Name of Facility Where Abatement is Taki Ringwood State Park - Ringwood	ng Place Manor	(3)	FAC	ILITY INF	ORMAT	ION		of Facility (	ere.					
Street Address 1304 Sloatsburg Rd.							×	School (K-1 Subchapter Other (i.e. p	8 (Oth	er than K- & commer	12) cial bui	ldings	, hom	ies,
City (5) Ringwood, NJ 07456-1799		-						etc.) re Feet )	# o	f Floors		Bldg.	Age	
County (6)			County (STATE	Code (7) USE ONLY	y)		Curre	nt Use (Pride	or if bei	ng demoli	shed)			***************************************
Name of Monitoring Firm Hired by Building USA Environmental Management,	Owner (8	3)	001	M No. 12				tement Con						
Street Address 344 West State Street						Street 205 F		s West, St	uite 14	4		-		
City, State, Zip Code Trenton, New Jersey 08618								p Code J 07512						
Project Manager for Monitoring Firm William Weisgarber, Jr.		* 1		656-810		Teleph 973-8				License 01155	No.		9922-01II-0	
Start Date (10) Jan. 18, 2013	Schedu Jan. 2			Date (11)		Name o		IA Monitor						
Occupancy Status During Abatement (Chec				-		Street		s			ş .		-	
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	Period of nal Facilit	Abaten y Hours	nent s			City, St	ate, Zi	p Code						_
Scope of Work (Check All That Apply)   ≥3 sf or ≥3 if  ≥160 sf or ≥260 if	- Property	Renova		¥64		×		Containme i-Enclosure		Negative	Pressu	ire		
							Glo	vebag Proci -Exempted	edure	l Non-Fria	ble Pro	cedur	e	
Location of		s Locati Normal	ly		Des	scription	of						ement pe	t
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Ma Cus	ed Sole aintenar stodial S (12)	nce/ Staff?	Asbes (i.e.	tos Cont thermal surfac	aining Ma systems cing, VAT niscellane	aterial insulat f, or	(ACM) tion,	(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
Basement	Yes	No	N/A		\ /!b==4:	D					-		e	
Dasement	+^				vibrati	ion Dan	nper		6	SF	X			
Name of Registered Waste Hauler		LN	JDEP W	asta	Cubic `	Vorda		Name of D		-1115				
Academy Construction, Inc		H	auler ID 034422	No.	of Was			Name of R		17				
City, State Totowa, New Jersey						al Date 22, 2013	3	City, State Morrisvil	le, PA					
Completed by Frank Marino	Title VP o	f Oper	rations		Si	ignature	-			D	ate 01	/03/2	2013	

200					3:60 and 12:			RE	Op					
Date of Notification (1) 1/4/13					Owner/Opera / Resider		201	3 184	<u>Co</u>	of fra	L	)		
Agencies Notified Type Notification	on ·			Address I Burgee			. Arres	OAN	-9 p	PH 2:	5	ē.		
DEP Amended Amended Amendme		į,		ate, Zip Coo erton NJ C		4	R	Lic	ENS.	4/%	01	<u> </u>		
DOH Emergence justification Cancellati		'	Name o	of Contact				Tele	ephone I	Numbe	5			
		, 1	FAC	ILITY INFO	RMATION		1000		-	-		_		
Name of Facility Where Abatement is Tal Robert Stacer / Residence	king Place (	3)*				Ту	pe of Facility (			8.		*******		
Street Address 148 N Burgee	2	tii	11/2	*		×	Subchapter	8 (Othe	er than K comme	(-12) ercial bu	ildi	ngs, I	nome	es,
City (5) Tuckerton NJ 08087				190			quare Feet 000+	# of	Floors		Blo 35	dg. Ag	е	
County (6) Ocean			County (STATE	Code (7) USE ONLY)			urrent Use (Pridesidence	or if bei	ng demo	lished)				
Name of Monitoring Firm Hired by Buildin N/A	g Owner (8	)	ASC	M No.		me of A	Abatement Cor	ntractor	(9)					
Street Address					100000	eet Add	X42500000		•					
City, State, Zip Code							e, Zip Code erlin NJ 080	91						
Project Manager for Monitoring Firm		T	Telepho	one No.	Tel	ephone			License				-	
Start Date (10) 1/15/13	Schedu 1/21/1	ed Cor	npletion	Date (11)	Na		OSHA Monitor				*			
Occupancy Status During Abatement (Ch	eck Only O	ne)	7			eet Ado	iress		7	-				
Facility Closed/Vacated During Entire Abatement Performed Outside of No Other – Describe:	e Period of rmal Facilit	Abaten y Hours	nent	- poppose oppose	City	y, State	, Zip Code				- 27			-
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 if  ≥160 sf or ≥260 if	COMMON	Renova Demolit				日	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	edure						
	344 11 9953	Locati Normal	The second second									baten	nent	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Sole intenar todial S (12)	ly by nce/ Staff?	(i.e. ti	Descript os Containin hermal syste surfacing, other misce	g Mate ems ins VAT, o	sulation,	(S	mount pecify or LF)	Removal			Encapsulate	Enclosure
Exterior Siding	Tes	No	N/A X		Exterior	Sidino		160	00 SF	×	+	-	•	
					=xtonor		,	100		^	+	+	-	
											1			
Name of Registered Waste Hauler		LN	JDEP W	acto	Cubia Vard		1							
United Containers		H	auler ID 2459	No.	Cubic Yards of Waste 2	•	Name of F		ed Land	mii				
City, State Elm NJ			,		Disposal Da 1/21/13	ite	City, State Morrisvi		19067		77.5			
Completed by Anthony T Perna	Title Presi	dent	. 5590		Signate	ure			TI	Date 1/4/13	3			

				CATION	OF ASBEST to NJAC 8:6	TOS ABATE		358		2013	RE		-11
Date of Notification (1) 1/4/13					f Building Ow Mrs. Harris		(2)		N E	2013	JAN	- 0	1 5 4
Agencies Notified	Type Notification			Street A 56 Wa	ddress ayside Plac	ce			ನ		1) + a	<del>-y</del>	PM
DEP X DOL	Amended Amendment				ate, Zip Code lair NJ					ě.	10	NS	Bij Mo
DOH DCA	Emergency ( justification) Cancellation			Scott 9	f Contact Sloan, con	The second secon		Telep	hone N	umber			***
Name of Facility Where a	Abatement is Takin	g Place (	3)	FACI	LITY INFOR	MATION	Type of Facili	(E) (M)					
Street Address 56 Wayside Place				1.	Million William		Subchar	oter 8 (Other e. private &			dings	, hom	es,
City (5) Montclair					,		Square Feet 2000	# of F	loors	1	3ldg. / 50	\ge	
County (6) Essex					Code (7) USE ONLY)	_	Current Use (	Prior if being	demolis	shed)			
Name of Monitoring Firm	Hired by Building (	Owner (8)		ASCN	/ No.		of Abatement ( Environmer			С	12		
Street Address							Address Gate Drive, F	PO Box 48	33				
City, State, Zip Code			6				State, Zip Code wood, NJ 0	7418					
Project Manager for Mon	itoring Firm			Telepho			none No. 583-8500	10.8	icense 703	No.			
Start Date (10) 1/7/12	4	1/14/1	2	npletion I	Date (11)	Name	of OSHA Monit	tor				2000	
Occupancy Status During Facility Closed/Vac	5 (2)	7.4	352	ent		Street	Address						-
Abatement Perform  Other – Describe:						City, S	tate, Zip Code					0	
Scope of Work (Check A  ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	II That Apply)	-	Renova Demolit	70795050		×	Mini-Enclos Glovebag P					e	
Location	of	1000	Locati Normal	Sittem en		Description	of					pe pe	
Asbestos-Containing TO BE AB/ In Facil (13)	Material (ACM) ATED	Ma Cus	ed Sole intenar todial S (12)	nce/ staff?	(i.e. the		Material (ACM) s insulation, T, or	(Spe	ount ecify r LF)	Removal	Repair	Encapsulate	Enclosure
2nd floor ba	throom	Yes	No	N/A X	r	oipe insula	tion	20	LF	x			
2nd floor bath				x		oipe insula		20		х	, '		
								-		-			
Name of Registered Was Freehold Cartage	te Hauler		Н	JDEP W auler ID 5939		ubic Yards f Waste O	GRO	of Registere WS N Lan					
City, State Freehold NJ		6				isposal Date BD	City, S Morri	<sub>tate</sub> sville PA			s' =	×	
Completed by Andrew Scott Higgin	s	Title Presi	ident			Signature	9	ii.	12,000	ate /4/13			

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

No well

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

RECEIVED

Date of Notification (1) Jan 3, 2013	4	27		Name o	of Building	Owner/C	perator	(2)	Production	ARA.		*** A		
Agencies Notified	Type Notification			Street /	Address	ept. or	LITVITO	IIIIGIIIai	- FIGGERAL	UAN -9	PH	2: 5	0	
⊠ EPA	× Initial			1304	Sloatsbu	urg Rd.			(4)	Water at the same				12
DEP X DOL	Amended Amendment		_		ate, Zip Co vood, NJ		-1799		E	LICEN	ing.	N.O.		
☑ DOH DCA	Emergency justification) Cancellation	,			of Contact en Ellis				17	elephone N	Number			
Name of Capility Manage	Ab-4	DI (		FAC	ILITY INFO	ORMATI	ON							
Name of Facility Where Ringwood State Pa			3)						acility (4)					
Street Address 1304 Sloatsburg R						*		Sub	ool (K-12) chapter 8 (C er (i.e. privat			iilding	s, hon	ies,
City (5) Ringwood, NJ 074	56-1799		***************************************					Square F		of Floors		Bldg.	Age	
County (6)	100				Code (7) USE ONLY	)	_	Current Coffice	Jse (Prior if b	eing demo	lished)			
Name of Monitoring Firm USA Environmenta			)	ASC! 0011					ent Contract					
Street Address 344 West State Str	reet							Address Rt. 46 W	est, Suite	14				
City, State, Zip Code Trenton, New Jers	ey 08618							ate, Zip C va, NJ(						
Project Manager for Mo William Weisgarbe			1	Telepho (609)	one No. 656-810	1	Telepho 973-8	one No.	1	License 01155				
Start Date (10) Jan. 18, 2013		Schedul Jan. 2			Date (11)		Name o	of OSHA N	Monitor					
Occupancy Status Durin	ng Abatement (Chec	k Only O	ne)				Street A	Address				-		
Facility Closed/Vac X Abatement Perform Other – Describe:	cated During Entire Ined Outside of Norm	Period of a	Abaten / Hours	nent			City, Sta	ate, Zip C	ode		- 4			
Scope of Work (Check A	All That Apply)							-	****		-			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		=	Renova Demolit				×	Mini-Er Gloveb	ntainment w nclosure ag Procedur empted (*) a	e			ire	
Location		50	Locati				0.20		, , , , , , , , , , , , , , , , , , ,			Aba	temen ype	t
Location Asbestos-Containing	Material (ACM)	Use	d Sole	ly by		tos Conta		aterial (AC		Amount			T <sub>m</sub>	
TO BE AB In Faci (13)	lity	100000000	todial 9 (12)		(i.e.	surfac	systems ing, VAT niscellane			(Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A									ē	
Basem	ent	X				Vibrati	on Dan	nper		6 SF	X		-	
			- 5			-							-	2.
		-						**				-		
Name of Registered Was	ste Hauler		I N	JDEP W	lasta	Cubic \	Varde	I Ne	me of Regis	tored Land	6II			
Academy Constructi			Н	auler ID 034422	No.	of Was		11	ROWS LA		1111			
City, State Totowa, New Jersey	,						al Date 2, 2013		ty, State orrisville, I	PA				
Completed by Frank Marino		Title VP o	f Ope	rations		Si	gnature	/ee			Date 0	1/03	/2013	3

#### State of New Jersey - Notification of Asbestos Abatement

20			(Pursu	ant to <u>N.J.A.C</u> . 8	8:60-7 and 12:120-7)		,	REC	Ch		
Date of Notification (1)					Name of Building Owner/O		2012	10.		EL	)
January 3, 2013 Agencies Notified		Notification 7			Street Address 250 Woodbridge Ce	4		JAN -	9 P	1 2: :	38
EPA DCA x DOL X DEP		☑Amende ☐ Emerge justifica	d Certif ency (in ation)	fication # 1	City, State, Zip Code Woodbridge, New .  Name of Contact Kelly Webb	Jersey 0	7095-1	F 64	, C#1	1100	l.
x DOH		□ Cancel	led	FACILITY INFO			Τ				-
Name of Facility Where Abate Woodbridge Center I  1st & 2nd Floors Street Address	ement is Tak Vlall- For	ing Place (3) mer Fortui	noff Sp		Type of Facility (4)  School (K-12)  Subchapter 8 (other than  Other (i.e. private & 6	commercial	buildings	, homes,	etc.)		
250 Woodbridge Cen	ter Drive	)			Sq. Feet: Unknown	# of Floo	ors: 2 E	slag. Ag	<u>e:</u> 5	0 year	S
City (5) Woodbridge	County (6)	-0		Code (7) Jse Only)	Current Use (prior if being	demolished	d):				
Name of Monitoring Firm Hire Criterion Laborato			ASCM	No.	Name of Contractor (9)  GREENWOOD ABAT	EMENT (	CONSU	LTANT	S, IN	C	
Street Address					Street Address		- 1	87			
3370 Progress Drive	, Suite J			3.5	268 MAIN STREET						
City, State, Zip Code				7 188 40	City State, ZipCode Butler, NJ 07405						
Bensalem, PA 1902		Talanhana N	lumbor		Telephone Number	<del></del>	Licens	se Numb	er		
Project Manager for Monitorin Mike Panepresso	ng Firm	Telephone N 215.244.1			973-492-0477		0084				8
Scheduled Start Date (10)		Scheduled C	ompletio	n Date (11)	Name of OSHA Monitor						
January 12, 2013		January			EMSL inc.						
Occupancy Status During A	Abatement (	Check only or	ne)		Street Address						
Facility Closed/Vacat					1056 Stelton Road City, State, Zip Code						
Other – Describe:					Piscataway, NJ 08	854					
Source of Work (Check all th	at apply)					Full Conta	ainment v	with Neg	ative P	ressure	
≥ 3 sf or ≥ 3 □≥ 160 sf or ≥				Renovation Demolition		Mini-End Glovebag x Non-Exc	losure Procedi	ure			
Location of Asbestos-Contain Material (ACM) in Facility (13	3) Sole	ocation Normal ely by Maint./Co f? (12)	ustodial	Description of Asb (ACM) (i.e. therm VAT, or other miso	pestos Containing Material al systems insulation, surfact cell.)	Amo	unt cify SF	Abater	nent Ty	pe	Enclose
1 <sup>st</sup> Floor 2 <sup>nd</sup> Floor	YES	s NO	NA X	Transite Pan Transite Pan		100000000000000000000000000000000000000	SF SF	X	T		
and tall age of the				and the last							
Name of Reg. Waste Hauler See Hauler Below # 1 8		NJDEP Was See Belov		r ID#	Cubic Yards of Waste:	30	GRO	e of Regi	ndfill		
Hauler #1) Greenwo NJ DEP # Hauler #2) Newark C	<b># 12561</b>	200		in the second		<u>Disposal</u> <b>Januar</b>		013	Bridge	tate 2, Box 6 port, WV 2-2784	VA .
Completed by (Print or Type Marin Graure		Title SENIOR P MANAGE	₹	СТ	Signature Marin Grau	re	<u>Date</u>	nuary	3, 20	13	
GAC # 2012-364- N	ote: Sch	edule Cha	nge	* ****							

10	-						
1	110	1	17.50	8 3			
	170	300	2 44	3 3	1	Section.	-

Date of Nutification (1) 01/03/13 Ck: 2429 \$200		Name of Building Owner/Operator (2) IFF Inc.  Street Address POR POR 9												
Agencies Notified Type Notification			Street Ac				ι.	6.0	ŭ,	7 6	11 2	: 58	9	
EPA   X Initial   Amended   Amendment				te, Zip Co New Je		07735			ě L	I S : C : ICENS!	MITE MG	81.		
□ Emergency     istification)     □ DCA     □ Cancellation			Name of Gary S	Contact tapperfe	enne		,		Tel	ephone Nu	mber		-	
		1	-	ITY INFO		ION								
Name of Facility Where Abatement is Takin International Flavors & Fragrances Street Address 1515 State Route 36		)			84			of Facility (4 School (K-1) Subchapter Other (i.e. p	2) 8 (Oth	er than K-1 & commerc	2) ial build	dings	, hom	es,
City (5) Union Beach, New Jersey 07735							Square Feet         # of Floors         BI           10,000         3         55			ldg. 5+	Age			
County (6) Monmouth	·		County C	ode (7) ISE ONLY)			Current Use (Prior if being demolished) Manufacturing Company						ar .	
Name of Monitoring Firm Hired by Building Garden State Environmental	Owner (8)							ement Con oration	tractor	(9)				
Street Address 555 Broad Street, Suite K	555 Broad Street, Suite K						Addres McBrid	s de Avenu	ie					
City, State, Zip Code Glen Rock, New Jersey 07452						State, Zip Code odland Park, New Jersey 07424								
Project Manager for Monitoring Firm Bruce Wolf		Telephor 201-65	ne No.			ephone No. License No. (3-225-8400 01104								
Start Date (10) 01/18/13	ed Co	Completion Date (11) Name					ne of OSHA Monitor S Environmental Labs							
Occupancy Status During Abatement (Chec Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe: 5PM Start	Period of A	bate				2333 City, S	tate, Zi	s e 22 Wes p Code w Jersey		3				
Scope of Work (Check All That Apply)						01110	11, 110		0,00					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	enov emol				×	Min Glo	Containme i-Enclosure vebag Prod i-Exempted	e cedure				re	
	ls	Loca	tion							***************************************			temen	it
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai Cust	intena todial (12)	ely by ance/ Staff?		tos Cor therma surf	Description of ontaining Material (ACM) Amount (Specify stracing, VAT, or er miscellaneous)				Specify	Removal	Repair	e Encapsulate	Enclosure
Laboratorii 244	Yes	No	N/A			Elbows				30	X	-	-	-
	Laboratory 214				- 1	inoleur			1 3	880 SF	X	-	-	-
Laboratory 214	X	-	т		e Fume		de de		00 SF	X	-	+		
Laboratory 214										X	-	-		
Laboratory 214  Name of Registered Waste Hauler	X	N IDED W												
Lilich Corporation	Literates ID No.   at Monto					G.R.O.W.S Landfill								
City, State Woodland Park, NJ 07424				osal Date 8/13		City, State Morrisv		ennsylva	nia					
Completed by Tatiana Kaenikova	President Signature 01/03/13							13	la.					

	Repai	,	Removal		Amount (Specify SF or LF)	M)	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	by ce/	lormall d Solel intenan odial S (12)	Use Mai	Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)
<u>.</u>	]		<u> </u>					N/A	No	es	
		+	X	+	30 SF		Transite Counter Tops		X		Laboratory 150
+	_	+	Х	$\forall$	6 each	-	TSI (t's)		X		Laboratory 150
++		$\dagger$		7							
			_		o cacii					1	(

2013 JAN -9 PM 2:58

		N	OTIFIC (Pui	ATION	OF ASBE o NJAC 8	STOS A	12:120	MENT ))	F ~ ~ ~		KH!	17	5	6	>
Date of Notification (1)					Building C				the has the						
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Ď DOH ☐	justification) Cancellation			Eric K	eisewett	er									
<u> </u>				FACIL	ITY INFO	RMATIC	NC								
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410 Main Street									etc.)				. 270	10-75	.5,
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Project Manager for Monitoring	g Firm		- 1	relephoi n/a	ne No.			hone No -706-7			License No 01088	Ο.			
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Lillie Lazarevich		Sec	retary				M	Lli	Jez	)n	$\sqrt{1}$	-4-20	13		_

State of New Jersey
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CK# 4762

Date of Notification (1) 1-4-2013		- 1			Owner/Op	- litter		APPRO			7			
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Name of the late o	(m)		FACE	ITY INF	ORMATIO		pe of Facility (	is .						
Name of Facility Where Abatement is Ta House for Demo	iong made (a)					,,,								
Street Addresss		_				-	School (K-1) Subchapter	2) 8 (Olher then K-1	(Z)					
1050 Rt. 202				43		2	Other (i.e. p	rivate & commen	alej buik	lings,	hon.	86,		
City (5)						S	etc.)	# of Floors	B	dg. A	(g)a			
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Name of Monitoring Firm Hired by Builds	ig Owner (8)		ASCM	No.			Abstement Con	7.0				1880		
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1-7-2013	1-8-201					0.10000	Contracting,	LLC						
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Facility Closed/Vacated During Entity Abatement Performed Outside of N					·  -		a, Zip Code							
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≥160 sf or ≥260 च		ernolid					Mini-Enclosure Glovebeg Proc							
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Location of Ashestos-Containing Material (ACM) TO BE ASATED in Facility (13)	Listed Meir Custo	Solel Menen Indias S (12)	y by		etos Corta Simentalis statisci		erial (ACM) sulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosura		
•	Yes	No	NA							L.	3			
Basement			X	As	bestos	Pipe Ins	ulation	100 LF ·	X					
Basement			X		Fumace	e Insulat	tion	20 SF	X					
1st Floor Kitchen & Hallway			X	- 1,50	12x	12 Tiles		140 SF	X					
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Name of Registered Waste Hauter			IDEP W		Cubic Y		1 Deservices	Registered Landi						
Jadar Contracting, LLC			033137		TBD	-		'S Landfill						
City, Stale		-			Disposa	al Date	City, Stat		7					
Lincoln Park, NJ 07035					TBD		Mome	ille, PA 1906						
Completed by	Title				Si	S O O	. ()		leie 1-4-20	42				
Line Lazarevich	Secre	stary			N	ull	urkaz	enous	1-4-20	13		_		

#### NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7)

						SWEET STREET	RECE	F II & prop game.		Check	# 7	027
Date of Notification 1	<sup>(1)</sup> /4/13		Name of		g Owner	r/Operator (2)						ese ane
Agencies Notified	Type of Notifica	6		Address Hoes L	ane W	N. P.	13 JAN -9		,			
[ ] DEP [X] DOL [X] DOH	Notificatio [] Emergency [] Amended Notificatio	F		ate, Zip itaway		8854	& LICEN	Can I RaL ISING				
• •	Notificatio	I N	Name o	of Contac	ot .			Telephone N	umber	=10000000		
[] DCA	[] Cancellation	on J	John	Fata			2					
	1				FACILIT	TY INFORMATION		- Company of the Comp				0 0
Name of Facility Wh UMDNJ - Res		aking Pla	ace (3)				Type of Faci	lity (4) ool (K-12) ochapter 8 (Othe er (i.e. private a	er than K-12)			
Street Address 675 Hoes Land	e West						TIOI	nes, etc.)				
City (5)	-	County	(6)		Co	unty Code (7)	Square Feet 180000	# of Flo		ldg. Ag 50	е	
Piscataway	<u> </u>	Midd	lesex		(ST	TATE USE ONLY)	Office/lab/cla		emolished)		-	
Name of Monitoring Horizon Enviro	18일 시간 [17] IEO IEO IEO (17) (17) (17) IEO		er /	ASCM N	0.	Name of Abatem	강조() 12 발 및 본지의 18 개 및 장면 2017 (	<sup>(9)</sup> ronmental §	Services I	nc		
Street Address	minorital Grou	<u> </u>				Street Address	upitor Envi	Torritoritary	JC1 V10C3, 1	110.		
301 9th St.						3	3 Lynn Cou	rt				
City, State, Zip Cod						City, State, Zip C		L NIL 0700				
West Deptford Project Manager for		Tolo	nhone	Number	.—	Telephone Numb		k, NJ 0703	License	Numbo	r	
r rojoot managor to	monitoring ( intr			3-0800			973-709-02	200	Liociisc		085	52
Scheduled Start Date 1/14/		ed. Comp	oletion 21/13		)	Name of OSHA		onmental L	aboratorie	s. LL	 C	
Occupancy Status D						Street Address		9		-		
[] Facility Clo	sed/Vacated During Performed Outside (	Entire P of Norma	eriod o	of Abater ity Hours	nent		2333 Route	22 West				
De	scribe: EVENIX escribe: partially vac	<b>S</b>				City, State, Zip C	ode Union, NJ (	7083				
Scope of Work (Che	ck all that apply)											
[] Demolition [] ≥3 sf or ≥3	lf			[]	Renova	ation	[x]	Full Containmen Mini – Enclosure Blovebag Proce	Э	e Press	ure	
[x] ≥160 sf or								Non – Friable P				
			Locat rmally			Descr	ription of				ater	ment
Locat Asbestos –	ion of		Solely				Containing al (ACM)		Amount (Specify	R	R	100000
Materia	I (ACM)	17.00000000	ial Staf				nal systems		SF or LF)	E M	E P	N
TO BE A			Т				urfacing, VAT, iscellaneous)			O V	A	A P
(1		Yes	No	N/A		or other mi	iocciianocuo,			A	R	S
Room 113			x		Floor t	ile and mastic			320	X		U
						= 14		The second second				
Name of Registered Jupiter Environ		100000	JDEP V auler II		1000	ubic Yards Waste		gistered Landfil Landfill	l I			
			04782		Die	3 sposal Date						
	IJ					25/13	Waynesi	ourg, OH				
Completed By (Print		Title Gen	eral	Manag	ger	Signature	6	_	Date 1/4/1	3		
Name of Registered Jupiter Environ City, State Lincoln Park, N Completed By (Print Pane Repic ASB-411	imental Service	Title	auler II 04782	O No.	Of Dis	Waste 3 sposal Date 25/13	Minerva City, State	Landfill	Date	3		

DO	1				
1 1 1	٤.,	la.	111	Pa	pro.

Date of Notification (1) 01/04/13 Ck: 2442 \$200	***************************************	Name of Building Owner/Operator (2) Elizabeth Board  Street Address 500 North Broad Street													
Agencies Notified Type Notification  X EPA Initial			Street A	Address orth Bro	ad St	reet		A.							
DEP Amended Amendment		_		ate, Zip Co eth, Nev		sey 072	02		É L	ICENS	8 4 7	110	L		
☒ DOH   ☐ Emergency justification)     ☒ DCA   ☐ Cancellation				f Contact d Kenne	dy		Telephone Number								
Name of Facility Where Abatement is Takin Abraham Lincoln School # 14	g Place (3)		FAC	ILITY INFO	ORMA	TION	Type of Facility (4)								
Street Address 50 Grove Street							×	Other (i.e. p	K-12) ter 8 (Other than K-12) e. private & commercial building				s, hon	ies,	
City (5) Elizabeth, New Jersey 07202					**			etc.) are Feet 000	# of 2	Floors		Bldg. 55+	Age		
County (6) Union			County (STATE	Code (7) USE ONLY	)		Current Use (Prior if being demolished) School								
Name of Monitoring Firm Hired by Building Detail Associates	Owner (8)		ASCN	ИNo.			e of Abatement Contractor (9) h Corporation								
Street Address 300 Grand Avenue		Street 606 I					ess ride Avenu	e							
City, State, Zip Code Englewood, New Jersey 07631						State, Zip Code odland Park, New Jersey 07424									
Project Manager for Monitoring Firm Stephen Jaraczewski		Telepho 201-56	ne No. 69-6708		Teleph	phone No. License No. 3-225-8400 01104					4				
Start Date (10) 01/18/13	Start Date (10) Scheduled (							SHA Monitor ronmental	Labs						
Occupancy Status During Abatement (Chec						Street 2333		ess ute 22 Wes	t						
Abatement Performed Outside of Norm  Other – Describe: 5PM Start	nal Facility h	lours	lent			City, St	tate, 2	Zip Code ew Jersey		3					
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 If  ≥160 sf or ≥260 If	1000	W. 100 TO TO THE	vation ×					ull Containme ini-Enclosure lovebag Proce on-Exempted	edure				e		
Location of	0.000	ocati	200									Abat	emen pe	t	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Used Main Custo	tenar	taff?		os Cor therma surfa	escription Itaining M I systems Icing, VA miscelland	lateria insul T, or	lation,	(SI	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure	
Gymnasium	ies	X	N/A	Pipe Ir	nsulat	ion on I	HVA	C units	30	0 LF	X		,"		
						1 - <del>1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -</del>								-	
Name of Registered Waste Hauler Lilich Corporation	ma p	Ha	JDEP Wauler ID		Cubic of Wa	Yards ste		Name of R G.R.O.W	S						
City, State Woodland Park, NJ 07424	1,				sal Date 3/13		City, State Morrisvill	he, Pe	nnsylvar	nia					
Completed by Tatiana Kaenikova	esic	lent	4	\$	Signature		Mar	1	Da		3	-			

Jan 4 2013 02:55pm P001/001

		,			vner/Operator	Au		75	Ded C			$\neg$		
oate of Notification (1) 01/04/13 Ck: 2441 \$200		Na Pa	me of Bu ark 80 7	ilding Ov FIC c/o	mer/Operator	Compani	祥 2:50	N Dept. of H		18				
gencies Notified Type Notification	· c	Str	eet Addr 50 Pehl	ėss	11 11 64	1.82 (3	- VO	Date: 114	(signal		1:50	7		
EPA Initial Amended Amendment#		Ch Si	y, State, addle B	Zip Code	lew Jersey	07663	NG NOL							
[K] Emergency (inc	uding	Na	me of Co	ontect	<del></del>		Tol	Newn't	er					
DOH justification)  DCA Cancellation		Jo	hn Cer											
	lana (3)		FACILIT	Y INFOR	MOTAM	Type of Fa	cility (4)					-		
lame of Facility Where Abatement is Taking P Park 80 TIC Street Address	ale (0)					School Subc	ol (K-12) hapter 8 (Oth	er than K-12)	h. dele	or h	<b>1</b>			
160 Pehle Avenue						etc.)		& commercial						
City (5) Saddle Brook, New Jersey 07663						Square Fe 20,000	2	f Floors	55	g. Age +	2			
County (6) Bergen			ounty Co				se (Prior if be rcial Buildin	ing demolishe ng	kd)					
Name of Monitoring Firm Hired by Building Ow Environmental Design Inc.	ner (8)		ASCM N	lo.		e of Abateme h Corpora	ent Contractor	(9)				*		
Street Address 5434 Kings Avenue Suite 101				•		Address McBride	Avenue	#1 11				II.		
City. State, Zip Code Pennsauken, New Jersey 08109			-	City, Woo	y, State, Zip Code coodland Park, New Jersey 07424					6.1				
Project Manager for Monitoring Firm Tom Pruno		elephone			ephone No. License No. 73-225-8400 01104									
Start Date (10)	chedule 1/10/1	d Com	pletion D			Name of OSHA Monitor J&S Environmental Labs								
01/09/13 Occupancy Status During Absternent (Check			-		Stree	Street Address								
Facility Closed/Vacated During Entire Pa	riod of A	batem	ent		City.	33 Route 2 State, Zip C	ode	00						
Other - Describe: 6PM Start					- Un	ion, New J	lersey 070	83	V.,					
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 ff ≥160 sf or ≥260 lf		enovat emoliti				Mini-E Glovel	nciosure oag Procedur	ith Negative F e and Non-Friab			)			
	le	Locati	on		1				- 2	Abate Ty	ment			
Location of	1	Vormall	ly		Descripti	ion of								
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Cus	d Sole intenar todial \$ (12)	nce/ Staff?	Asbes (i.e.	tos Containing thermal syste surfacing, other misce	ems insulatio VAT, or	n,	Amount (Specify SF or LF)		Repair	Encapsulate	Enclosure		
	Yes	No	N/A		Carall aire	SHIPAG		7 LF	X	-	_			
2nd FL CLS Conference Room		×			Small pipe	e mungs		7 61	1			Г		
		-			- 17	-								
	1		+			-	-	#3 -#						
Name of Registered Waste Hauler Lilich Corporation	1	1	JUDEP W Hauler ID 8724		Cubic Yard of Waste 2		Name of Regions	istered Landfill	11		6 1			
City, State Woodland Park, NJ 07424		' 				Disposal Date City, State 1/1/1/13 Morrisyille, Pennsylvania						8		
Completed by Tatiana Kaeniková	Titte	-	ident		Signa		10	10	ate 1/04/	13	1 - 1 - 1	175		