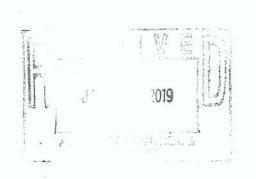
CK. 00	30	PA	III	NOTIFICA	TION OF A	NEW JER	SEY ABATEME AND 12:120	NT /	0/-	B	4 0.0	30-			
Date of Notification (1)			(1 0130)			Owner / Op			ALC.					
$\frac{-01}{2} / \frac{07}{2} / \frac{1}{2}$	19				Bayfront	Redevelop	ment LLC			SA LINE Name of Lines	Company to Marine				
Agencies Notified	Type of I	Votificat	tion		Street A										
☑ EPA	. ype 0. i	Initial				or Road ate, Zip Co		331.1	200	MC	2019	11.3/			
☐ DEP		Amen	100		Morris P	lains N.I.O.	ae 7950	114	and 1						
☑ DOH		Amen	dment	#	Name o	Morris Plains, NJ 07950 Name of Contact Telephone Number									
☑ DOL			gency v		William	Hague		1	973-455	2175		. A 			
					ACILITY I	NFORMAT	ION								
Name of Facility Whe	re Abater	ment is	Taking	Place (3)		Type of	Facility (4)								
550 Route 440 East Bu	uilding					School /K 42)									
Street Address						School (K-12) Subchapter 8 (Other than K-12)									
550 Route 440						V	Other (I.e	e., private &	cmmerci	ial					
	Caust 1	21		10			bldgs., h	omes, etc.)							
Oity (5)	County (6))		County Code	(7)	Square I		# Of Floo	rs	Buildi	ng Age				
Jersey City	Hudson						00,000		2	1					
						VACANT	Use (Prior i	t being den	nolished)		40 +	Ë			
Name of Monitoring F	irm Hired	by Bld	g. Owr	ner (8)	ASCM N										
			-			7									
AET Street Address						NORTHS	TAR CONT	RACTING O	ROUP, IN	NC.					
28 Pennell Road						Street Ad	ddress								
City, State, Zip Code															
Media, PA 19063						City Stat	ns Parkway te, Zip Code								
Project Mngr. For Mor	nitoring F	irm		Telephone Nu	mber	- City, Stat	te, zip Code	9							
Eric Sutherland				610-891-0114		East Han	over, NJ 079	936							
Sheduled Start Date (1	,	Sched	. Comp	letetion Date (11)		ne Number		License	Number					
$\frac{-01}{22}$	19	_0	06/	<u>30</u> /	19										
Occupancy Status Dur	ring Abot	omant /	Charle	()			84-8682				00860				
Facility Clos	sed/Vaca	ted Dur	ing En	tire Period of			OSHA Mon		D0115 11	. 20					
Abatement		tou Dui	g Lin	are reriod of		Street Ad	TAR CONTI	RACTING G	ROUP, IN	IC.					
Abatement I	Performe	d Outsi	de of N	Iormal Facility											
Hours - Des	cribe:					32 Willian	ns Parkway								
☑ Other - Desc	cribe:			PM		City, State, Zip Code									
Scope of Work (Check	All That	MON -	FRI			East Hand	over, NJ 079	936							
ocobe of AAOLK (CHECK	All Inat	Apply)									100000000000000000000000000000000000000				
Demolition		V	a a	Renovation	7	Full Cont	ainment wi	th Nametica							
≥3sf or ≥3lf			4	removation		Mini - End	ainment wi	in Negative	Pressure	•					
	260 If				7		Procedure	ę.							
					~		npted (*) an		ble Proce	dure					
Location of										RHEE					
Asbestos Contain	ina	Loca	70		Descript				Abateme	nt Type					
The second of the second	9	Norm		AS	Material	ontaining			R	_	E	E			
TO BE ABATED	2	Use	Contract of	a.	e., therma			Amount (Specify	E M	R	N	N			
in Facility		Sol	ely			facing, VA	T.	SF or LF)	O	P	C	C L			
(13)		by M				ellaneous)		0. 0. 1.	v	A	P	0			
		tenar		1.00.00		•			A	ï	s	s			
		Custo							L	R	U	U			
		Staff YES N									L	R			
AST BUILDING				PIPE & FITTING	2			0415							
AST BUILDING		THE REAL PROPERTY.		ROOF FLASHII				21 LF	✓						
AST BUILDING		THE OWNER OF TAXABLE PARTY.	-	JOINT COMPO				1450 SF 3050 SF	✓	닏	1 4				
AST BUILDING				ROOFING				85300 SF	7		1 !-	┼┼┤			
lame of Registered Wa	er		NJDEP Waste	Cubic	Name of F	Registered L									
ORTHSTAR CONTRAC	CTING G	ROUP, I		Hauler ID No.	Yards		LANDFILL	- and III							
ity State				NAME AND ADDRESS OF TAXABLE PARTY.	of Waste										
City, State EAST HANOVER, NJ						City. State			- Hamilton						
JOI HANOVER, NJ				1	Date	MORRISV	ILLE, PA								
completed by (Print or	Type)			Title											
	71.71						Signature	1	Į		Date				
teve Stiles				Project Manage	r		Sto	uca S	die &		04	/07/19			
SB-41					and the second			20-1-10	The same of the sa		01/	01119			

Location of Asbestos Containing TO BE ABATED in Facility (13)	Is Location Normally Used Solely by Maintenance Custodia Staff (12		Description of Asbestos - Containing Material (ACM) (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatem R E M O V A L	R E P A I R	E N C A P S U L	E N C L O S U R
	YES NO N	A					1	
EAST BUILDING			TRANSITE	900 SF	7			
EAST BUILDING			VAT/MASTIC	1990 SF	7	T	1 1	





CK016238 PA	M		ICATIO	N OF ASBE	STOS			IT STATE		EG	T.		W1				
Date of Notification (1) 01-04-19			Name o	of Building O	wner/O	perator	(2)			JA	N	9 2	019				
Agencies Notified Type Notification EPA Initial				Address Hadley Ro	d.			ç 3		gama virtus in s	i wasaning	Same Silveria (Silveria)	27.504	- 4	- 1		
DEP Amended DOL Amendment				ate, Zip Cod Plainfield						LICINGRO							
DOH justification) DCA Cancellation		1		of Contact y Gazick						Telepho 856-6							
				ILITY INFOR	RMATIC	ON				000 0	20 2						
Name of Facility Where Abatement is Takir PSEG Essex Switching Station	g Place (3)				Type of Facility (4) School (K-12)											
Street Address 155 Raymond Blvd							Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildi						ildings	lings, homes,			
City (5) Newark												Bidg. /	Age				
County (6) Essex				Code (7) USE ONLY)				rent Use Introl Ho		f being d	lemoli	shed)					
Name of Monitoring Firm Hired by Building N/A	Owner (8)	ASCI N/A	M No.			ame of Abatement Contractor (9) VRS Environmental Services, Inc.										
Street Address N/A					Street	reet Address 7 Old Dock Rd											
City, State, Zip Code N/A						State, Zip Code phank, NY 11980											
Project Manager for Monitoring Firm N/A		Telepho N/A	ne No.		님 (B) (요가 보기) : 이 에 () : 이 이 () : ()					ense 136	No.	44446					
Start Date (10) 01-14-19	()								e of OSHA Monitor S Environmental Services, Inc.								
Occupancy Status During Abatement (Chec	k Only O	ne)				Street					0, 111						
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm	Period of	Abatem	nent					ock Rd									
X Other – Describe: Electrical circuit cabi	net	Hours			Zip Code , NY 11												
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf	N .	2000	··			x	X Full Containment with North Process										
≥160 sf or ≥260 lf	-	Renova Demoliti					Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedu							LIFE			
	1755	Locati											Abate	ement			
Location of Asbestos-Containing Material (ACM)		Normall d Solel		Asbestos		ription		ol (ACM)		A	-4	-	l ly	ре			
TO BE ABATED In Facility (13)	Cus	intenar todial S (12)		(i.e. the	ermal s surfacir other mis	ystems ng, VA7	insu T, or	lation,		Amour (Speci SF or L	fy	Removal	Repair	Encapsulate	Enclosure		
0-111	Yes	No	N/A		To links to se									е			
Control House		X		ARC	cabl	е			120 L	F	X						
										7 - 7 -							
Name of Registered Waste Hauler	N.	JDEP W	aste T	Cubic Ya	ards		Name	of Rea	istered L	andfi							
Waste Management	Ha	auler ID 273	No. o	of Waste				ess la		-anrum							
City, State Elizabeth, NJ 07201			Disposal Date TBD					e City, State Morrisville PA 19067									
Completed by Raymond Tutiven	rvisor	risor Signature Date 01-04-						19									



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

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1	Lecks	(OB)
	LUCK	0031

Date of Notification	(1)		002 300 1000	(1. 0.1.00)	Name of Building Owner / Operator (2)											
01 / 07	/19				Bayfront Redevelopment LLC											
/	/					Street Address										
Agencies Notified	Type of I				115 Tabo	15 Tabor Road										
☑ EPA □ DEP		Init				te, Zip Coo		111	11 .1/	IN O	2019	11111				
□ DOH			ended	,,		5/1/3 Fiding, 140 07930										
☑ DOH			endment	# v/ justification		Name of Contact Villiam Hague Telephone Number 973-455-2175										
			ncellation		William	надие	DATE	400 fe								
		1			FACILITY II	NEORMAT	ION					Q1 .				
						VI OTTIMIZET	.014			the season of the season						
Name of Facility Wi	nere Abater	ment	is Taking	Place (3)		Type of I	Facility (4)									
550 Route 440 H Bu	ildina															
Street Address	liding					-	School (K									
ou out ridaress							Subchapt Other (Le	ter 8 (Other	than K-1	2)						
550 Route 440						Other (I.e., private & cmmercial bldgs., homes, etc.)										
City (5)	County (6	5)		County Code	(7)	Square F		# Of Floo		Buildir	na Aae					
. 0::							00,000		2	Junum	ig rigo					
Jersey City	Hudson						Use (Prior if	being den	nolished)	7	40 +	F				
Name of Monitoring	Eirm Hiro	d by E	Ida O	(0)	Lineri	VACANT										
The state of monitoring	, cum mirec	a by E	aug. Own	er (o)	ASCM NO	71										
AET						NORTHS	TAR CONTI	RACTING	ROUP IN	NC.						
Street Address					-	Street Ac										
28 Pennell Road						J	00 C									
City, State, Zip Code	е						ns Parkway									
Media, PA 19063 Project Mngr. For M	lanitarina F	71		T= 1		City, Stat	te, Zip Code									
Eric Sutherland	ionitoring F	·irm		Telephone Nu 610-891-0114		Foot Hon	01/07 NI L 070	200								
Sheduled Start Date	(10)	Sch	ed. Comp	letetion Date (over, NJ 079 ne Number	36	II iaaaaa	M	umber					
01 //22	/_ 19	1	06	30	/ 19	relephon	ie Number		License	Number						
//	/		/	/		973-8	84-8682				00860					
Occupancy Status D	Ouring Abat	emer	nt (Check	Only 1)			OSHA Moni									
Facility C	losed/Vaca	ited D	uring Ent	tire Period of			TAR CONTE	RACTING G	ROUP, IN	IC.						
		ad Ou	tside of N	lormal Facility		Street Ad	ldress									
Hours - D	escribe:	.u	tolde of it	ionnai racinty		32 William	ns Parkway									
	escribe: _	7:00	AM - 3:30	PM			e, Zip Code									
	-1-11-		N - FRI				over, NJ 079									
Scope of Work (Che	ck All That	Appl	y)			₹.										
☐ Demolition	ın .		V	Renovation		F 11 0 .										
☐ ≥3sf or ≥3			V	Reliovation	V		ainment wit	n Negative	Pressure	9						
≥160 sf or																
					7		npted (*) an		ble Proce	dure						
Location o							e 1970-1974 - 1970 - 1970 - 1970 - 1970 - 1970 - 1970 - 1970 - 1970 - 1970 - 1970 - 1970 - 1970 - 1970 - 1970									
Asbestos Cont	Total Control	1,	ls ocation		Descript				Abateme	nt Type	1000					
	s.iiiig	100000	ormally	As	sbestos - C Material			Amount	R E	B	E N	E				
TO BE ABAT	ED		Used	(1.	e., therma			(Specify	M	R	C	N C				
in Facility			Solely	insu	lation, sur	facing, VA		SF or LF)	0	P	A	L I				
(13)			/ Main-	or	other misc	ellaneous)			V	Α	P	0				
			nance/ istodial						Α	1	S	s				
			aff (12)						L	R	U	U				
			NO N/A							-	IL.	R				
H BUILDING	26.7		2	PIPE & FITTIN	G			472 LF	V		1					
H BUILDING	K			15 LF	V		1 7									
H BUILDING		JOINT COMPO	DUND			1425 SF	7									
H BUILDING ROOFING								69056 SF	V							
Name of Registered Waste Hauler NORTHSTAR CONTRACTING GROUP, INC. Hauler ID No. Y.							Registered L S LANDFILL	.andfill								
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City, State				55501	Disposal	City. State	9									
EAST HANOVER, NJ					Date	MORRISV										
Complete the Co.		1														
Completed by (Print or Type) Title						Signature Date										
Steve Stiles Project Manager							Ster	Net	7.		0.1	107/40				
ASB-41		1-11-	-	. Tojoot Mariage	,,		- well	100/1	M		01/	/07/19				

Location of Asbestos Containing TO BE ABATED in Facility (13)	Is Location Normally Used Solely by Maintenance/ Custodial Staff (12)	Description of Asbestos - Containing Material (ACM) (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatem R E M O V A L	R E P A I R	E N C A P S U	E N C L O S U R
	YES NO N/A				+	+	+
H BUILDING		TRANSITE	225 SF	7	1 1		
BUILDING		ROOF TAR	300 SF	V	1 7	1 7	1 +
BUILDING		VAT/MASTIC	16640 SF	V		士片	1 7
			1 1				



K765			NO					STOS ABA' 8:60 and 5:1		*.;				Wi 				
Date of Notification (1) 01 /	07 /	19				ne of Buildi erizon	ng O	wner/Operator	(2)		JA	N (4	2019				
Agencies Notified ⊠ EPA ⊠ DOLWD	Type Notific ☐ Initial ☑ Amende	∍d			1	eet Address Verizon V	Vay			9 8.7	ASSESTOS CONTROLA LIGENSINS							
☑ DHSS	Amenda		A	-0.0	32	, State, Zip asking Ri			- 100		o with the	and have a facility of the control o	Capital V	* 10 Va. 1				
☐ DCA (NJAC 5:23-8)	☐ Emerge justificat		cludin	g	_	ne of Conta	_	, 140		17	alanhana	Mirmal						
(107.10 0.20 0)	☐ Cancella					rian Kings		rv		Telephone Number 301-802-5112								
								RMATION			301-002	511		_				
Name of Facility Where A	batement is	Takino	Place	e (3)	- '	ACILITI	AI C	TRIVIATION	Type of Facility	, (4)								
Verizon		•		. (-/					School (K-1	0.5								
Street Address							-		Subchapter	8 (0								
34 Alden Street									Other (i.e., phomes, etc.)	priva \	ite and co	mmer	cial b	uilding	IS,			
City (5)									Square Feet		# of Floor	S	F	Bldg. A	ne .			
Cranford, NJ 07016									10,000		3	•		50	90			
County (6)					Co	unty Code (7)(S7	TATE USE ONLY)	Current Use (P	rior	if being de	emolis						
Union																		
Name of Monitoring Firm I	- 5	_		(8)	ASC	M No.	N	ame of Abateme	ent Contractor (9	9)								
USA Environmental	Managaer	ment l	lnc.					JVN Restora										
Street Address							St	reet Address										
8436 Enterprise Ave	nue							47 Foster Ro	ad									
City, State, Zip Code							Ci	ty, State, Zip Co	ode	5-25								
Philadelphia, PA 191								Staten Island	NY 10309									
Project Manager for Monito	oring Firm			Te	lephon	e No.	Te	elephone No.			License N	lo.						
Mark Jenkins				:	215-36	5-5810		718-605-6256			00774							
Start Date (10)						ate (11)	Na	ame of OSHA N	lonitor									
01 / _28 / _	19_	_ 0	3_/	_3	31_ /	19		Testor Tech										
Occupancy Status During							St	reet Address										
☐ Facility Closed/Vacated	During Enti	ire Peri	iod of	Abat	ement			10 59 Jackso	n Avenue									
Abatement Performed (Time of Abatement:	Outside of N AM	ormal I PM	Facility 1/ <u>5:00</u>	y Ho PM-	urs - De 1:30	escribe 1	0.000	ty, State, Zip Co LIC NY 11101										
Scope of Work (Check all t	that apply)																	
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf			⊠ Re □ De	nova molif				☐ Mini-Enc	losure Procedure	h Negative Pressure nd Non-Friable Procedure								
W PASSOCIATION					ation			and any first the first of the second of the					1	ateme	ent T	vpe		
Location o Asbestos-Containing M		A)		lorm d So	ally lely by	Asha		Description o								1		
TO BE ABAT	ED	"	Ma	inten	ance/	(i.e		Containing Mar ermal systems i			Amount (Specify		Removal	Repair	Encapsulate	Enclosure		
IN Facility (13)			Cust	odia (12	l Staff?)			surfacing, VAT,	or	4.5	SF or LF		val	=	lusc	sure		
(13)			Yes	No			01	ther miscellaned	ous)						ate	w		
Basement Boiler Roon	n		\boxtimes			Duct In	sula	ation	0		400 SF	: -: "						
Basement Boiler Roon	n		\boxtimes			Pipe Ins	sula	ition			35 LF							
Basement Ventilating	Room		\boxtimes			Caulkin	g				3 SF							
										П	П							
Name of Registered Waste	NJDEP	Waste	Cu	bic Yards of	Name of Regis	stere	d Landfill					_						
Newark Carting					Hauler		10000	este	G.R.O.W.S., Inc.									
City, State		-			NJ-5	00		posal Date	City, State									
Hackettstown, NJ	Hackettstown, NJ							2/28/19	Morrisville,PA									
Completed By (Print or Typ	e)	Title						Signature	11			Date		1,100				
Ralph Barnhardt			oject	Ма	nager			MIMI	hel-					07 -	- 20	910		

State of New Jersey

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 01 04 1 19 PERTH AMBOY BOARD OF EDUCATION JAN 9 2019 Agencies Notified Type Notification Street Address **⊠** EPA ☐ Initial 178 BARRACKS STREET □ DEP City, State, Zip Code □ DCA (NJAC 5:16) Amendment #1 ☐ DHSS☐ DCA PERTH AMBOY, NJ 08861 ☐ Emergency (including justification) Name of Contact Telephone Number (NJAC 5:23-8) Cancellation Derek J. Jess 732-376-6200 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Perth Amboy High School School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private & commercial buildings, 300 Eagle Avenue homes, etc.) City (5) Square Feet # of Floors Bldg. Age

Perth Amboy, NJ 08861								1950)						
County (6)				Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demolis	hed)						
Middlesex							High School	ol							
Name of Monitoring Firm Hired by Build	ding Ov	wner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)				- 177				
AHERA Consultants, Inc.				0005	57	APS Contrac	ting, Inc.								
Street Address			3-0777			Street Address									
36 N. Quail Hill Blvd						155-161 Pennsylvania Avenue									
City, State, Zip Code				- 15591-1		City, State, Zip Code									
Galloway, NJ 08205						Paterson, NJ 07503									
Project Manager for Monitoring Firm			Tel	ephone	No.	Telephone No. License No.									
Donna D'Errico			6	09-652	-1833	973-754-1980	į.	01-287							
Start Date (10)	Schedu	led C	ompl	etion Da	te (11)	Name of OSHA M	lonitor					-			
01 /14 /19		T-12		1_/_	19	APS Contract	ting, Inc.								
Occupancy Status During Abatement (0		7.1				Street Address									
☐ Facility Closed/Vacated During Entir						155-161 Pennsylvania Avenue									
Abatement Performed Outside of No Time of Abatement:AM	ormal F	acility	Hou	ırs - Des ı	cribe	City, State, Zip Co	ode								
					Alvi	Paterson, NJ	NJ 07503								
Scope of Work (Check all that apply)				54T == H		ПЕПО									
	0	⊠ Re	nova	tion		☐ Mini-Enc	ainment with Neg losure	gative Pressure							
≥160 sf or ≥260 lf		_ De	molit	ion		☐ Glovebag	g Procedure								
		Is	Loca	ation		Non-Exe Non-Exe	mpted (*) and No	n-Friable Procedur	1						
Location of		١	lorm	ally		Description o	f		Aba	atem	ent T	ype			
Asbestos-Containing Material (ACM	1)			lely by ance/		estos Containing Ma	terial (ACM)	Amount	Re	Re	m	m			
TO BE ABATED IN Facility				Staff?	(i.e., the	ermal systems insula VAT, or	ition, surfacing,	(Specify	Removal	Repair	cap	Enclosure			
(13)			(12)	-	other miscellane	ous)	SF or LF)	val	-3.	Encapsulate	sure			
5.70.50		Yes	No	N/A			#####################################				te				
Throughout theBuilding Elevation	n		\boxtimes	\boxtimes	Caulkir	ng Material All W	indows	4,000 LF							
Throughout theBuilding Elevatio	n		\boxtimes	\boxtimes	AsbCo	ntaminated Trans	slucent	280 Panels							
										П	П	П			
Name of Registered Waste Hauler				NJDEP \	Naste	Cubic Yards of	Name of Regis	stered Landfill		_					
APS Contractors, Inc.				Hauler II		Waste	Grows Lar								
City, State				21259)	10 Yards Disposal Date	City, State								
Paterson, New Jersey						01/30/2019	Morrisville	, PA 19067							
Completed By (Print or Type)					Signature		Dat	e							
Svetozar Savreski	eside	nt			he	1-01		, 1.	1/1	0					
ASB-41						91/10	as little	1	14	11	7_				
JUL 01	* D	o not	use t	his form	for asbes	tos licensure exemp	ted activities.								