61776 State of NJ Notification of Asbestos Abatement D&S Proj. #: MS 12-12 (Pursuant to NJAC 8:60 and 12:120) affroved N Dept of Health Senior Services Date of Notification (1) Name of Building Owner/Operator (2) 0 11 1/10 14 1/11 12 1 RENEE RUSSAW Agencies Notified Type Notification Street Address I EPA Initial 1208 W. 3RD STREET Amended DEP City, State, Zip Code Amendment #: M DOL Emergency PLAINFIELD, NJ X DOH (including Name of Contact Telephone Number justification) ☐ DCA RENEE RUSSAW Cancellation **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K-12) RENEB RUSSAW Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs,/Homes, etc. 1208 W. 3RD STREET # of Floors Souare Feet Bldg. Ada City (5) County (6) County Code (7) (State use only) Current Use (Prior if being demolished) PLAINFIELD UNION Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07/503 Project Manager for Monitoring Firm. Phone Number Telephone Number License Number 973-345-8020 00159 Name of OSHA Monitor Start Date (10) Schod. Completion Date (11) D & S Restoration, Inc. 01/05/12 Street Address Occupancy Status During Abatement (Check only one) 20 California Avenue Facility disensivacated itsiring entire period of abetement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Scope of Work (check all that apply) Full Containment winegative pressure >3 sf or >3 if **Rénovation** MInt-enclosure Glovebag procedure 2160 sf ur >260 lf Demolition Non-Exempted (\*) and Non-friable procedure Is location normally used solely by maintenance/oustodial Location of E asbestos-containing E 8 8 Description of asbestos-containing Amount n staff(12) material (acm) to be m n (Specify SF or LF) p material (ACM) C abated in facility (13) C O à Yes No a N/A v p e BASEMENT PIPE INSULATION 79 L F I X Registered Waste Hauler NJDEP Hauler to Cubic Yards of Wasle Name of Registered Landfill D & S RESTORATION, INC. 13506 1 YD TULLYTOWN, RESOURCE RECOVERY Cily, Sizin Disposal Date City, State PATERSON, NJ 07503 01/06/12 TULLYTOWN, PA Completed by (Print or Type) Title Signature Date BOGDAN JOLDZIC PRESIDENT 01/04/12 ASB-41 Do not use this form for asbestos licensure exempted activities.

hax:

Jan 4 2012 03:33pm P001/001

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

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Date of Notification			Name of B	Building Ow	ner/Operator (	2)	1:11:	Hardina.	1 1	1				
10  1  / 0  4			RENEE	RUSSAV	W					******				
Agencies Notified EPA	Type Notifica	ition	Street Add	ress				dha	7 201	19				
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	Amendment #	t	City, State,	Zip Code			ten.	RECTOR SEA	00		1	-		
⊠ DOL		,	PLAIN	FIELD, N	11			ASSESTOS LICE	CUSHAUL SSINO	4				
□ DOH	(including justification	,	Name of Co	ontact			** orbitationer	Fich charges a most	Telephon	TOTAL PROPERTY AND ADDRESS.	er			
☐ DCA	Cancellatio		RENEI	E RUSSA	W		t. ~ more m		Control of the second					
				FAC	CILITY INFORM	MATIO	N						. 02.10.10	
Name of facility wh	nere abatement	is taking p	place (3)					Type o	f Facility (					
RENEE RUSS	A 337								=	l (K - 12	200			
	-1 VV									apter 8 (			(-12)	
Street Address										(Private/0/ Homes,		ercial		
1208 W. 3RD S	STREET							Squar		# of Floo		В	ldg. A	\ge
City (5)		Co	unty (6)			Cou	inty Code (7)							
4						(Sta	ate use only)	Curre	nt Use (Pi	rior if bei	ng den	nolish	ed)	
PLAINFIELD			NION				<del></del>					and the last of the		
Name of Monitoring	g Firm Hired by	Bldg. Ow	ner (8)		ASCM No.		Name of Abateme	ent Contracto	or (9)					
							D & S RESTO	RATION,	INC.					
Street Address							Street Address				a Devinence			
							20 California							
City, State, Zip Code	e management of the state of th						City, State, Zip Coo							
							Paterson, NJ				3761			
Project Manager for	Monitoring Firm	n	P	hone Numb	ber		Telephone Numbe			License		per		
							973-345-802				0159			
Start Date (10)		Sche	ed. Complet	ion Date (1	1)		Name of OSHA M							
01/05/12		01/	12/12				D & S Restor	auon, mc.				_		
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	Vacated during						City, State, Zip Coo						_	
	rformed outside	of norma	Il facility hou	ırs-										
Describe:  Other-Describ	e: NORMAL F	IOURS					Paterson, NJ	07503						
Scope of Work (ch		(4.50)					Г	Full Conta	inment w	/negative	nress	ure		
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≥160 sf or ≥26		Demoliti					₫	Glovebag						
	3011		ion normally	used soleli				Non-Exer	npted (*)	and Non-	friable R	proce		
Location of asbestos-con	taining		itenance/cus						mount		e	e	E n	E
material (acm	) to be	staff(12	)		- Descript material		sbestos-containing	933	Specify S	F or	m	р	С	n
abated in facil	lity (13)	Yes	No	N/A		,	± ±	L	.F)		v	i	a p	Ľ
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Registered Waste Ha D & S RESTOR			DEP Hauler 3506		Cubic Yards of 1 YD	vvasie	Name of Registere TULLYTOWN		RCE RE	COVER	RY			
City, State				Disposal I			City, State	max social				La grade o	- 3	
PATERSON, NJ				01/06/1		-	TULLYTOW	N, PA						
Completed by (Print		Title	DENTO		Signature				8	Date				
BOGDAN JOLI		PRESI		for achast	os licensure ex	amata	Lactivities			01/04/	12	-		
ASB-41		DO HOLU	oc uno louil	וטו משטפשנו	os nochoule ex	CHIPIEL	dolly 1105.							

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

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Date of Notification (1)		SAN 101 S			Name	of Building	Owner/Operator (2	2)		megating.	- ,44- 1	4	
	06 /	12			Hou	sing Aut	hority of the Cit	y of Paterson	fer th Wa	E L	7	1.4	
Agencies Notified	Type Notificat  ☑ Initial	tion			Street A	Address	en Street.	则声		15			
⊠ EPA □ DEP	Amended			-		ate, Zip C	7.7.2.47.53.17.24.25.17.25	111 111			111		
DOA-(NJAC 5:16) DHSS	Amendme	1/1/2/12	uding		Pate	rson, NJ	07509	JU LI JAI	V 1 1 2012	Lander		-5-21 1/30	
DCA	justificatio				Name	of Contact	1		Telephone Nu	mber:			
(NJAC 5:23-8)	☐ Cancellation	on			Irma	Gorhan	1 💃	ASSI	S		_	888	
					FAC	ILITY IN	FORMATION		FICENSING				
Name of Facility Where	Abatement is Ta	aking P	Place	(3)				Type of Facility (4	4)	or transferance			
Building No. 4							v2	School (K-12)		(0)			
Street Address		***************************************				7,47		☐ Subchapter 8 ☐ Other (i.e., pri	vate & commer	cial build	ings,		
NJ21-1 Riverside	Terrace Devel	lopme	ent					homes, etc.)					
City (5)								Square Feet	# of Floors	35787	dg. A		
Paterson								5000	2 Floors		1970		
County (6)	-				Count	ty Code (7)	(STATE USE ONLY)	Current Use (Price	or if being demo	olished)			
Passaic								Vacant	- 02 M - 10 H - 12 M - 10 M - 1				
Name of Monitoring Fire	m Hired by Build	ling Ow	vner (8	3)	ASCM I	Vo.	Name of Abateme	ent Contractor (9)					
Langan Engineeri	ng & Environ	menta	al Sei	~V	0009	9	SMAC Corp.						
Street Address			1				Street Address						
River Drive Cente	r 1, 4th Floor						27 EAST 33 <sup>RI</sup>	STREET					
City, State, Zip Code			-				City, State, Zip Co						
Elmwood Park					N/A		PATERSON	NJ 07514					
Project Manager for Mo	nitoring Firm			Tele	phone I	No.	Telephone No.		License No.				
Vijay B. Patel				- 53	1-794		973-345-4055		01110				
Start Date (10)					tion Dat		Name of OSHA M						
01 / 16	/ _12_	01	_ /	21	_ / -	12_	EMSL ANAL	YTICAL, INC		1000			000
Occupancy Status Duri	ng Abatement (0	Check (	only o	ne)			Street Address						
☑ Facility Closed/Vaca	ated During Entir	re Perio	od of	Abate	ment		1056 SHELTO	and the same of th					
Abatement Perform Time of Abatement:	ed Outside of No AM	ormal F PM/	acility	Hour PM-	s - Des	cribe AM	City, State, Zip C						
Scope of Work (Check	all that apply)												
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>	,		☐ Re ☑ De				☐ Mini-End	tainment with Neg closure ig Procedure empted (*) and No		dure			
		- 1	lo.	Loca	tion	para de const	☐ Non-Exe	stripted ( ) and two	TI TIGOLO TI TOO		atem	ent T	vpe
Lacati	an of			Norma			Description (	of			T		Ť
Location Asbestos-Containing		1)		d Sol	ely by	Asbe	estos Containing Ma	aterial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
TO BE A	BATED				Staff?	(i.e., the	ermal systems insul VAT, or	ation, surfacing,	(Specify SF or LF)	ova	¥.	psc	uso
IN Fac				(12)			other miscellane	eous)	,	-		late	0
3.5			Yes	No	N/A		- 1						
Basement						Floor T	iles - Mastic 9in	x9in	90 SF	⊠			×
Thourghout - 5 Apa	artments					Gray D	uct Insulation		700 SF	×		Ø	
Basement - Crawl	Space					Pipe In	sulation		90 LF	⋈		Ø	
Name of Registered W	aste Hauler			13.5	NJDEP Hauler I 1859	D No.	Cubic Yards of Waste 10 Yards	Name of Regis					
City, State	Dataroon M.I.	- 0751	14		1003		Disposal Date 01/21/2012	City, State Morrisville	, PA				
27 E 33rd Street,			144				I COLORDON CONTROL OF			Date /			
	Completed By (Print or Type)  Borce Gjorsoski  Preside						Signature	. Gory	بعيا	Date /	6/2	or.	2

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

Check # 8091

Date of Notification (1)	2	I		uilding Owner/O		-		$C \leftarrow V$			.0	
1-4-1	2			lement	00	Park	+	Dplash (	D.	52	ď	
Agencies Notified Type Notification		5	Street Add	TO SECURE A PROPERTY OF	0			1 5 6 5	11	1. 1		5
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DEP Amended			City, State	, Zip Code		June de la		11 100000	21	di.		11
DOL Amendment #				Cler	ren	on	N.	JUNE CO	27	12_	_#	4
DOH justification)		1	Name of C	T	T	- V	1.	Telephone Number	er		- 1 -	1
DCA Cancellation		1.		Dan		an Kou	1/12	- NODESTUS CO.	GPATE.		-07	1
Name of Facility Where Abatement is Taking	Place (3)		FACILI	TY INFORMATION	ON	Type of Fa	acility (4	LICENSII	AUROI	-&	10000	
A Lange of Pacinity Where Abatement is really	<	501	las h	World			ol (K-12	-	-	And other Designation of the last of the l	-	
Street Address	· • ·	190	42 W	Wikie		Subc	hapter l	8 (Other than K-12)				
144 Bealin	Ro	50	1		`	Othe etc.)	r (i.e. pr	ivate & commercial t	ouildir	igs, h	omes	
City (5)	110	<u>u</u>	1			Square Fe	eet	# of Floors	Bld	g Ag	е	<del>-</del>
Clementon	NJ	-	080	21	8			1	1	0	<b>†</b> ·	_
County (6)	100	1	County C	ode (7)		Current U	se (Prio	r if being demolished		90		
County (o)		- 1	(STATÉ US	SE ONLY)		60	me	Bldg.				
Name of Monitoring Firm Hired by Building C	wner (8)		ASCM	No.	Name	of Abatem		tractor (9)				
EPC Technologies	Inc			N/A	EF	DC TE	chr	nologies :	Ton	e e		
Street Address		-	ــــــــــــــــــــــــــــــــــــــ			t Address		3				
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City, State, Zip Code				1	City, S	State, Zip C	ode			57 27	- 33	
4 (C) 하나 전화	085	5.3	3		Ne	w Eq	VOT	NJ ORS	533	3		
New Egypt NJ Project Manager for Monitoring Firm			Telephon	e No.	U.S. VALUE OF STREET	hone No.	1.	License No.		24.50 24.50		
Steve Schenken				58-3365		758.		5 003	394			
Start Date (10)	Scheduled					of OSHA		1			100	
1-19-12		1,0000000000000000000000000000000000000	7-13	۷			chi	nologies -	Dno	_		
Occupancy Status During Abatement (Check	k Only One	<del>)</del>				t Address		222				
Facility Closed/Vacated During Entire F	Period of A	baten	nent			lo, Be		DD 1				
Abatement Performed Outside of Norm	al Facility	Hours	S			State, Zip C		115 40 522				
Other – Describe:					IVE	<u>ப Eyy</u>	o't 1	NJ 08533				
Scope of Work (Check All That Apply)						_ `						
23 sf or ≥3 lf	The same of	enova					ontainm nclosure	ent with Negative Pre	essur	9		
≥160 sf or ≥260 lf	A D	emoli	tion			Glovel	oag Pro	cedure				
						Non-E	xempte	d (*) and Non-Friable				
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Location of	N	lorma	illy		escriptio				-1			
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EPC Technologies	Inc		170	00	war well				011		١.	
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New Egypt	N:				97-	12	Men	misville		71	_	
Completed by	Title	7.5-	. 0		Signat	7	: 1	Dat		9-	12	
Steve Schenken	YR	es	iden	7	3	le .	عظاع	- ne	1	1	1	
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# State of New Jersey NOTIFICATION OF ASSESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1)				Name	of Building Ov	mer/Operato	or (2)	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	10		7	IC I
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□ DEP 図 DOL	<ul> <li>Amended Amendment</li> </ul>	-4.4		City,	State, Zip Code		1, 1	· /				I
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⊠ DOH	justification	1)	.8	Name	of Contact	•5. 16	L	Telephone Nu	ımbe	100	L Ň	1
□ DCA	☐ Cancellatio	n		4- 0	CAPPADOL	A	1045	į.				
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Name of Facility Where A	batement is Taki	ing Place	(3)	- 210 (650)			Type of Facility	(4)				_
L. CAPPADONA					2 3		☐ School (K	-12)		1/4	59	
Street Address			19				☐ Subchapt	er 8 (Other than K-1	12)			i
128 PALSA AU	EUOE				- 3	8	U Other (i.e.	private & commerc	ial bu	uilding	is, ho	nes,
City (5)	¥		makee wee				Square Feet	<b>#</b> of Floors		Rida	Age	
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1-18-2012 Occupancy Status During	Abatamant (Ot	1-19	-20	212				onmental	Sei	rvi	ces	-
							Address					1
☐ Facility Closed/Vacate	ed During Entire	Period of	Abaten	nent		280	Huyler	St _				1
Abatement Performed Other – Describe:	8 Am - 5 PM	nal Facili	y Hours	•		City, S	tate, Zip Code	<del></del>				÷
						Sou	th Hacker	nsack ,N.	Ι.	076	606	1.
Scope of Work (Check All 1	That Apply)						3	, , , , , ,	-		000	1
☑ 23 sf or 23 lf	34	150 00000000000000000000000000000000000	Renova		50		Full Containm	ent with Negative P	Proces	100	*	
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***				*		28	Glovebag Pro	cedure	_		٠	1
•		T	Location		1		NOIFEASIIDIS	d (*) and Non-Friab	le Pro			<del>-  </del> -
Location of			Normali		1	_			1		emen ype	T
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TO BE ABATI	ED .		intenan todial S		(i.e. then	nai systems	insulation	Amount (Specify	1 20		9	-
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24												-
Name of Registered Waste I	Hauler		INJ	DEP W	aste Cut	oic Yards	Name of E	Registered Landfill		لنا		
DJM Transpo	rt ,Inc		Ha	uler ID		Vaste	1					
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South Kearny	м.J. (	1/032		9)	121	9-2012		urgh PA,	17	242		.
Completed by	• •	Title				Signature	I LICHD	Date		7.4		+
R. Veldran		Est	imat	or		R Yold	)		- 	- 17		

State of New Jersey - Notification of Asbestos Abatement

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7) GAC Project # 060-12 Client Project # Name of Building Owner/Operator (2) Date of Notification (1) RUTGERS, THE STATE UNIVERSITY OF NJ 2012 January 9, 2012 Notification Type Agencies Notified ☑Initial Notification ENVIRONMENTAL HEALTH & SAFETY DEPT. ☐ EPA ☐ Amended Notification 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS 4 **□**DCA ■ Emergency (including City, State, Zip Code X DOL PISCATAWAY, NJ 08854 justification) ■ DEP- No Longer REQUIRED Name of Contact ☐ Cancelled Telephone Number X DOH MICHAEL SMITH, ENV. **HEALTH & SAFETY** FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) ☐ School (K-12) **BLUMENTHAL HALL, BLDG#7493** ■ Subchapter 8 (other than K-12) Street Address ☑ Other (i.e. private & commercial buildings, homes, etc.) **NEWARK CAMPUS** # of Floors: 3 Bldg. Age: 80+ years Sq. Feet: N/A County (6) County Code (7) City (5) (State Use Only) Current Use (prior if being demolished): ACADEMIC **ESSEX** NEWARK Name of Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. 0098 ATC ASSOCIATES GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 268 MAIN STREET City State, ZipCode City, State, Zip Code BUTLER, NJ 07405 BURLINGTON, NJ 08016 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number 609-386-8800 **BRIAN KEARNY** 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor ENVIROVISION, INC. 01/20/12 01/23/12 Street Address Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD ☐ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe ☑Other - Describe: 5 PM FRI TO MON 5 AM (24 HR ACCESS AS NECESSARY) FAIRLAWN, NJ Scope of Work (Check all that apply) ■ Full Containment with Negative Pressure **⊠**Renovation ■ Mini-Enclosure  $\square \ge 3 \text{ sf or } \ge 3 \text{ lf}$ Glovebag Procedure ≥ 160 sf or ≥ 260 Demolition Non-Exempted (\*) and Non-Friable Procedure Description of Asbestos Containing Material Location of Asbestos-Containing Is Location Normally Used Amount Abatement Type Material (ACM) in Facility (13) Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing (Specify SF Remove Repair Encap Enclose Staff? (12) VAT, or other miscell.) or LF) YES NO NA 840 SF X 208 SUITE X VAT NJDEP Waste Hauler ID# Name of Registered Landfill Name of Reg. Waste Hauler 10 CY Cubic Yards of Waste: G.R.O.W.S. North Landfill See Hauler Below #1 & 2 See Below Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State 100 New Ford Mill 01/23/2012 NJDEP # 12561 Rd. Morrisville, Pa Hauler #2) Newark Carting, Inc., Newark, NJ 04509 19067 NJ DEP# 4509 215-736-1700 Signature Date Completed by (Print or Type) January 9, 2012 RAYMOND C. PEDALINO SENIOR PROJECT

MANAGER

APPROVED .

TETT Landoupe

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	7	NOTIFICATION	ale of New Jerse I OF ASBESTOS to NJAC 8:60 ar	ABATE	))	Jan Sig	nature	MUZ	1.0	-/Λ:
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Date of Notification ft;		Name of	Building Owner! FRK TR	Operator	(2) 5 19.	45-	A STATE OF THE PARTY OF THE PAR			
Agencies Notified Type Notification	9	Street A		n-ca	AUGHN 1	1 2012	3/1		,	
EPA MINISTER		City. Sta	te, Zp Code		5,5,5	07604	•			
DOL Amendment Emergency (instification)			Contact C	1	ADDEDTOS	Colo ROL & Telephone Num	ber			
OOH justification)  DCA Cencellation			c/+ >.	<u> </u>	AND DESCRIPTION OF REPORT OF PERSONS ASSESSED.	A constant to the constant of				_
Name of Facility Where Abatement is Takin	o Place (3		LITY INFORMAT	ION	Type of Facility (	4)	A Silve	Je 744 - 200		<u></u>
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118 TRRRACK AVE	<u>ک</u>				etc.)	orivate & commercia				<b>es</b> .
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County (8)  E F. 126-F.		County C	ode (?) ISE ONLY)		Current Use (Fri	or if being demolish	ed)			
Name of Monitoring Firm Hired by Building (	Ov.nar (8)	ASCM	I No.		of Abatement Cor ac Contracting				The state of the s	
Street Address					Address Lowell Road	,				
City. State, Zip Code					late, Zip Code	2450				
Project Manager for Monitoring Firm		Te:ephor	ne No.		Rock, N.J. 07	License No	).			
					262-5841	00156				
Siart Date (10)  i G / i	1 ]	d Completion (	Date (11)	Ome		ntal Services In	C.			
Occupancy Status During Abelement (Chec				1 ms.com.com.com.com	Address Huyler Street					
Facility Closed Vecaled During Entire S Abatement Performed Outside of Norm Cther ~ Describe:	Period of A	Hoors			tate, Zip Code kensack, NJ 0	7606				
Scope of Work (Check All That Apply)					1					
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IO SE ABATEC		odial Staff?	surfa	cing, VA	T. OF	SF or LF)	Remova	Repair	de	) Lilo
(13)		(12) 1.		miscellan			oval	JE J	Encapsulate	Emplosure
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CRAWLSPACE	+		1.1			, , , , , , , , ,	~		-	-
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Name of Registered Waste Hauter		NOEPW	aste ! Cubic	Yards	Name of	Registered f.andfill	L	<u> </u>		
Rovic Transport		Haular ID 20785				A Bethlehem La	ndfill	Cor	p.	
Cty. State Riverdale, New Jersey 07457			Disp	sal Date	City, Stat	e hem, PA 18015		,		
Completed by	T:fle		1	Signature	17/1	Cat	16	1,	,	~
R. McDonald	Pres	ident		1/4	1 Prol	/	10	11		~

### State of New Jersey

Date of Notification (1)   Skew Peter's College   Street Address   Skew Peter's College   Skew Address   Skew Peter's College   Skew Peter's Peter's College   Skew Peter's Peter's College   Skew Peter's			1			to NJAC					of the Contraction of the Contra	14	78	14	29	
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DOH	X DEP X DOL	× Amended	#5						a construction of		JAH 1	1 201	2		/	,
Type of Facility (A)   Type of Facility (A		justification)					ardi		l i i	AS	Telent	none Nun	nber			
Name of Facility Where Abstement is Taking Place (3) Prope Hall of St. Peter's College  Street Address 115 Glenwood Ave.    School (K-12)   Schobapter 8 (Other than K-12)   School (K-12)   Schobapter 8 (Other than K-12)   School (K-12)   Schobapter 8 (Other than K-12)   School (K-12)	LXI DCA	Caricellation						N			Livin	91113	The water to the same of	Total Control	_	
Subchapler 8 (Cher Han K-12)   Cher Han K-12			ig Place (3	3)					Туре		.,	Mineral Angelos				and the same of th
Square Feet		).			ē.				×	Subchapter Other (i.e. p	8 (Other t			dings,	home	es,
County (6)   County (6)   County Code (7)   County Code (7)   Current Use (Prior if being demolished)										are Feet	I STATE OF THE PARTY	oors	22/8		ge	
Health & safety Service   Slavco Construction Inc.   Street Address   Street Address   Street Address   Street Address   Street Address   City, State, Zip Code   Clity, State, Zip Code   Clity, State, Zip Code   Clity, State, Zip Code   Cliton, New Jersey 07011-1802   Clity, State, Zip Code   Clity, State   Clity, Stat	County (6)	, į							Curr	ent Use (Prio	or if being	demolish	ed)			
Street Address   164 Getty Ave.   165			Owner (8)		ASCM	l No.						·				
Hammonton, NJ 08037  Clifton, New Jersey 07011-1802  Project Manager for Monitoring Firm Mr. James Proctor  Scop-704-8850  G9-704-8850  G9-704-8850  G9-704-8850  G9-704-8850  G9-704-8850  G9-73-478-4848  JLicense No. 00724  Name of OSHA Monitor Slavco Construction Inc.  Street Address 164 Getty Ave. City, State, Zip Code Clifton, New Jersey 07011-1802  Scope of Work (Check All That Apply)  Saf or 23 if Selow S	Street Address	-X-1111 - V-1-318-3V - 3-1-2-3W	100000000000000000000000000000000000000		I											
Telephone No. 609-704-8850   973-478-4848   Diophysical Completion Date (11)   Scheduled Completion Date (11)   January 31st.,2012   Slavoc Construction Inc.		8037	7								07011-	1802		- 91-71		
October 24th, 2011  January 31st., 2012  Slavco Construction Inc.  Street Address 164 Getty Ave.  Facility Closed/Vacated During Entire Period of Abatement Performed Outside of Normal Facility Hours Other – Describe: 7:00AM-3:30PM  Scope of Work (Check All That Apply)  Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Foll Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and N	Project Manager for Mo	nitoring Firm											0.			
Street Address   164 Getty Ave.   164		1					1.00				n Inc.			20		
Abatement Type    Scope of Work (Check All That Apply)			ck Only Or	ne)												
Scope of Work (Check All That Apply)    3 sf or ≥3 lf	Abatement Perform	ned Outside of Norr						City, S	tate, 2	Zip Code						
≥3 sf or ≥3 if   ≥160 sf or ≥260 if   Pull Containment with Negative Pressure   Mini-Enclosure   Glovebag Procedure   Non-Exempted (*) and Non-Friable Procedure   Non-Exempted (*) and								Clifto	n, N	lew Jersey	07011-	1802				
S Location of Normally Used Solely by Maintenance/ Custodial Staff? (13)   Yes   No   N/A	≥3 sf or ≥3 lf	All That Apply)	-					×	M G	ini-Enclosure lovebag Proc	edure				e	
Location of Asbestos-Containing Material (ACM)   Used Solely by Maintenance/ Custodial Staff? (12)   Yes   No   N/A			Is	Location	on	1								Abate	ement	t
Boiler Room  X  Mud Fitting on Pipe  Z4LF  X  Boiler Insulation  Name of Registered Waste Hauler Slavco Construction Inc.  NDEP Waste Hauler ID No. 18508  City, State Clifton, New Jersey 07011-1802  Completed by  Title  Signature  Date A0440	Asbestos-Containin TO BE AB In Fac	g Material (ACM) BATED illity	Use Ma	Normall d Solel intenar todial S	y ly by nce/		tos Contai thermal s surfacii	ining M ystems ng, VA	fateria s insu T, or	lation,	(Spe	cify	Removal			Enclosure
Boiler Room    X   Mud Fitting on Pipe   24LF   X	D. 11 - 1		Yes	No			) ro o obin	a Inc	uloti	on	300	SE.	V .			
Boiler Room X Boiler Insulation 200SF X Name of Registered Waste Hauler Slavco Construction Inc.  City, State Clifton, New Jersey 07011-1802  Completed by Title Signature  Boiler Insulation 200SF X Solve Cubic Yards of Waste TBD Name of Registered Landfill G.R.O.W.S Landfill G.R.O.W.S Landfill G.R.O.W.S Landfill G.R.O.W.S Landfill Date Morrisville, Pa. 19067			-													
Name of Registered Waste Hauler Slavco Construction Inc.  NJDEP Waste Hauler ID No. 18508  NJDEP Waste Hauler ID No. 18508  City, State Clifton, New Jersey 07011-1802  Completed by  Title  NJDEP Waste Hauler ID No. 18508  Cubic Yards of Waste TBD  Name of Registered Landfill  G.R.O.W.S Landfill  City, State Morrisville,Pa. 19067  Date			52			, p										
Slavco Construction Inc.  Hauler ID No. 18508  Of Waste TBD  G.R.O.W.S Landfill  City, State Clifton, New Jersey 07011-1802  Completed by  Title  Signature  Date	Boiler F	Room	-		X		Boiler	insula	ation		200	5F	X			
City, State Clifton, New Jersey 07011-1802  Completed by  Title  Disposal Date TBD  City, State Morrisville,Pa. 19067  Date	Name			н	auler ID	THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TRANSPORT NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TRANSPORT NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TRANSPORT NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TRANSPORT NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TRANSPORT NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TRANSPORT NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TRANSPORT NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TRANSPORT	of Waste			SUSPENSION STATES	2001-000-000-000					-
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	Completed by			in. Ass	sistanc	e	Sig	1		20		Da 1/6				

State of New Jersey

Date of Notification (1)	1 2012		(Pursua	ant to NJ	ASBESTO IAC 8:60	and 12:1	20)	· · · · · · · · · ·	14-1	811	3	£	
October 21th, 2011			St. I	e of Build Peter's	ling Owne College	er/Operato	or (2)				7		17
Agencies Notified Type Notifi	to a distance of a first or and a second			t Addres	s edy Blvo	d							
X DEP X Amen			City,	State, Zip	Code		<u> </u>	0 111	CT 2 C	- 20	1-		
Emerg	dment # <u>4</u> jency (includir	ng			, New J	ersey						* 15	1
□ DOH justific     □ Cance	ation) llation		52330920.5	of Conta Chris B			ļ	***   Ta	lenhone N	umbe	r . · ·		*
Name of Facility Where Abatement is	T.11 BI		FA	CILITY	NFORMA	TION		un	1 1 1 1 1				ntrage 1
Pope Hall of St. Peter's College		(3)					Type of Faci		* 1.44 . Tag				
Street Address 115 Glenwood Ave.							Other (i	(K-12) pter 8 (Oth .e. private	er than K- & commer	12) cial bu	uilding	s, ho	mes,
City (5) Jersey City, New Jersey							etc.) Square Feet 15,000	# 0	f Floors		Bldg.	Age	e avec
County (6)			County	y Code (7	7)		Current Use	(Prior if bei	ng demolis	shed)			
Hudson  Name of Monitoring Firm Hired by Buil	ding Owner /9	2)		USE ON	LY)								
HEALTH & SAFETY SERVICE	ing Owner (8	5)	117	M No.		Slave	of Abatement co Construc	Contractor tion Inc.	(9)				
Street Address 318 TWELFTH STREET	-	20222-11				1.0000000000000000000000000000000000000	Address Getty Ave.						
City, State, Zip Code HAMMONTON, NEW JERSEY	)8037			70			tate, Zip Code n, New Jers		1-1802	-			
Project Manager for Monitoring Firm Mr. JAMES PROCTOR				one No. 04-885	0	551850000500	one No. 178-4848		License N	10.			
Start Date (10) November 1st,2011			mpletion 31st.,2	Date (11 011	1)	1 30000	of OSHA Monit			(FC			-
Occupancy Status During Abatement ( Facility Closed/Vacated During En				<del></del>		Street /	Address Betty Ave.				1.00		
Abatement Performed Outside of Other – Describe: isolated Basem	Normal Facility	v Hour	9	M-6:59AI	M Ags	City, St	ate, Zip Code	0704	4 4000		**		
Scope of Work (Check All That Apply)		-				Cilitor	n, New Jers	ey 0/01	1-1802	- mis-			
X ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	_	Renova Demolit				×	Full Contain Mini-Enclosi Glovebag Pi Non-Exemp	ure rocedure				ė	
Location of	83	Locati									Abat		it
Asbestos-Containing Material (ACM TO BE ABATED In Facility (13)	Mai	d Sole intenar odial S (12)	nce/		stos Conta thermal surfac		iterial (ACM) insulation, , or	(Sp	nount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A		0.1101 111	noocharic	ous,			vai	=	ulate	ure
Basement Boiler #1	X			Bree	ching C	onnecti	on & Pipe	48SF	&28 LF	x			
Basement Boiler #2	×			Bree	ching Co	onnecti	on & Pipe	48SF	& 28LF	x			
Basement Boiler #3	X			Breed	ching Co	onnectio	on & Pipe	30SF 8	% 30LF	x			
Basement Boiler # 4	X			Breed	ching Co	onnectio	on & Pipe	30 SF 8	% 30 LF	x			
lame of Registered Waste Hauler lavco Construction Inc.		Ha	IDEP Wa Juler ID 1 508		Cubic Y of Wast TBD			f Registere .W.S Lar					
lity, State lifton, New Jersey 07011-1802					Disposa TBD	I Date	City, Sta Morris	te ville,Pa.	19067				
completed by	Title	^	:		Sig	inature	200		Date	9 .			

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State of NJ
Notification of Asbestos Abatement
(Pursuant to NJAC 8:60-7 and 12:120-7)

B & G proj. #:	2012-11		(1	oursuan'	t to NJAC 8	:60-7	and 12,120-7)	Check	# 5005				
Date of Notification	1 (1)	HN	ame of Build	dina Owne	r/Operator (2)	-	EDE	CEIV	BIL	M			
0 11 1/10 16	1/112	- 11	Michelle C					(b) (b) (c)					
Agencies Notified	Type Notificat		reet Addres				1 1111		2	111			
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☐ DEP	_ Initial		ity, State, Zi						1	1	1		
DOL	☐ Amendr	ment	Fair Lawr		10			SBESTOS CONTROL	. 3	and the second	Š		
□ DOH			me of Cont		10			Telephon				H(18 / 19 )	
_	☐ Cancella						- Dhair	ar Shillenia					
DCA			Michelle	Campbel	1				William .	4.000		-	
				FACII	LITY INFORM	ATION	I		*				
Name of facility wh	here abatement i	s taking pla	ce (3)					Type of Facility	(4) il (K - 12)				
Michelle Camp	ball								apter 8 (C	ther ti	han K	.12\	
Street Address	obell							A Comment of the Comm	apier o (C (Private/C			-12)	
Street Address									Homes, e				
14 Albert Aver	nue						51	Square Feet	# of Floor	rs	Bl	dg. A	ge
City (5)		Coun	ty (6)			68576	nty Code (7)						
	07110	P				(Sta	te use only)	Current Use (P residential	rior if bein	g dem	olish	ed)	
Fair Lawn, NJ Name of Monitorin		Berg Bldg Owne			ASCM No.		Name of Abatement				-		
	ig Filli Filled by	blug. Owne	1 (0)	1	ASCIVI INU.								
n/a						_	B & G Restoration	n, mc.					-
Street Address							105 Ryerson Roa	d					
City, State, Zip Coo	la .					-	City, State, Zip Code	· ·	-	-	-	-	
City, State, Zip Coc	ie						Lincoln Park, NJ	07035					
Project Manager fo	r Monitoring Firm	1	Pho	one Numbe	er .	-	Telephone Number	07033	License	Numb	er		
Project Manager 10	i wontoning i ini		.	one radino	<b>5</b> 1		973-696-6869		0378				
	. (10)	ICabad	. Completion	n Data /11		_	Name of OSHA Moni	tor	70			-1-11500	-
Scheduled Start Da	ate (10)	Sched	. Completion	II Date (11	,		B & G Restoration	on, Inc.					
1/17/2012	100000	1/18/2					Street Address						
Occupancy Status							105 Ryerson Roa	nd					
	d/vacated during	entire perio	od of abater	nent.			City, State, Zip Code			90.50-20			
Abatement p Describe:	erformed outside	of normal t	acility nours	S-		_							
Other-Descri	ibe:					-	Lincoln Park, NJ	07035					
Scope of Work (ch	heck all that appl	y)				- AND STATE							
Demolition	$\boxtimes$	Renovatio	n			□ F	full Containment w/neg	ative pressure		bag pr	oced	ıre	
$\boxtimes$ >3 sf or >3 lf	f 🔲	≥160 sf or	≥260 If			X I	Mini-enclosure		⊠ Non-fi	riable <sub>l</sub>	proce	dure	
Location of			n normally u							R	R	Е	E
asbestos-co	ntaining	by mainte staff(12)	enance/cust	odial	Description	on of a	sbestos-containing	Amount	NT	m	e p	n	n
material to b abated in fac		-			material (	(ACM)		(Specify S	or or	0	a	a	C
abateu iii iat	Sility (13)	Yes	No	N/A						v e	r	р	-
boiler room				X	pipe insulat	tion		20 lf		X			
boiler room				X	VAT/Masti	С		12 sqft		$\boxtimes$			
		la l											
Registered Waste			EP Hauler II	D# C	ubic Yards of \	Naste	Name of Registered		1242 27			•	
B & G Restorat	ion, Inc.	195			yard		Tullytown Resou	rce & Recovery	Center				
City, State	11.07025			Disposal D	ate		City, State						
Lincoln Park, N		T		1/18/12	Signature	_	Tullytown, PA		Date		eur au		
Completed by (Prin	nt or Type)	Title			Olgitalule		Gordana Luna		1/6/20	12			

#### tate of NJ f Asbestos Abatement AC 8:60-7 and 12:120-7)

		1 17/28	St
		6/190	Notification of
B & G proj. #:	2012-09		(Pursuant to NJA

B & G proj. #: 2012-09		(Fulsual	10 110/10 0.	3	The court of the companies of the court of t	Check	# 5004	71.,	_		
Date of Notification (1)		f Building Own	ner/Operator (2)	the second second	MD/E C	EIVE					
Agencies Notified Type Notificat  EPA Initial	Street A	ddress enmuir Aven		Committee of the second	JA	N 1 1 2012					
DEP Amenda	ment	ate, Zip Code	7960		L L	TAS Y GITAGO					
☑ DOH		ristown, NJ ( f Contact	77900		L	Telephon	e Number			1	
DCA Cancell	ation Jenr	ifer Beyrent		X	nor Maria Company secretarios es .	Party State - Gallerichter and		-		_	_
		FAC	CILITY INFORM	ATION			**2 44/34 <b>_5</b> 52 <sup>3</sup>				
Name of facility where abatement	is taking place (3		4 A 34				4) I (K - 12) apter 8 (Oth	er tha	ın K-1	(2)	
Estate of Teresa Mesler						☑ Other	(Private/Con	nmer		-,	
Street Address					10		Homes, etc.	1	Blde	g. Ag	e
13 Kenmuir Avenue				Count	y Code (7)	Square Feet	# 011 10013			j	
City (5)	County (6)			And the second	use only)	Current Use (P	rior if being	demo	lished	i)	
Morristown, NJ 07960  Name of Monitoring Firm Hired by	Morris  (Bldg Owner (8)		ASCM No.	1	Name of Abatemer	t Contractor (9)					
E	blug. Owner (9)				B & G Restorat	ion, Inc.					
n/a Street Address			-1		Street Address						
000000					105 Ryerson R						
City, State, Zip Code					ity, State, Zip Cod						
		Phone Nun	nhor		Lincoln Park,		License N	lumb	er		
Project Manager for Monitoring Fir	m	Priorie Nui	ilbei		973-696-6869		0378				
a L. I. I. Ota d Data (10)	ISched Co.	npletion Date	(11)		Name of OSHA Mo						
Scheduled Start Date (10)					B & G Restora	tion, Inc.					
1/16/2012	1/16/201:				105 Ryerson R	toad					
Occupancy Status During Abatem  Facility closed/vacated durin  Abatement performed outside	ng entire period of	abatement.			City, State, Zip Coo	de	144				
Describe:				- 1	Lincoln Park,	NJ 07033			_		=
Scope of Work (check all that ap  Demolition  3 sf or >3 If		) If		G	ull Containment w/	negative pressure	Gloveb		oroce		
Location of asbestos-containing		rmally used so			sbestos-containing	(Obecit)	SF or	e E o	Repa	E n c a	E n c
material to be abated in facility (13)	Yes	No N/A		, , ,	1	LF)		v e	i	р	L
basement			pipe insul	ation		80 lf			片	ዙ	ዙ
								片	H	H	片
								H	H	H	古
			4								
Registered Waste Hauler B & G Restoration, Inc.	NJDEP 19563	Hauler ID#	Cubic Yards o	f Waste		red Landfill source & Recove	ry Center				
City, State		(0.50)	al Date		City, State	Δ .					
Lincoln Park, NJ 07035		1/17	/12 Signature		Tullytown, P		Date				
Completed by (Print or Type) Gordana Luna	Title Treasurer				Gordana Lun	a .	1/5/20	12			-

B & G proj. #: 2012-07

# State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

Date of Notification	n (1)						5	es anni-industrial	Check #	5003	Visit at all the	yr +	
10 11 1/10 15	40/40/	ı	Name o	f Building	Owner/Operator (	(2)	1 7	VE @		p ===	F27		
Agencies Notified EPA	Type Noti	•	Harry Street A	McBride ddress	2								
☐ DEP	⊠ Init	ial		ranklin A			Common to the co	l JAN	1 1 20	112			
☑ DOL	Ame	endment		ewood, N			The state of the s				1	T	
□ DOH     □	_		Name of	Contact	13 07040			A STATE OF	Q 117 11.25	1 5	1		
☐ DCA	L Can	cellation	Harry	/ McBrid					lephone N	umber			1 7 7 7 7
			11411					- Secretaria					
Name of facility wh	ere abateme	nt is taking	nlace (3)		ACILITY INFORM	//ATI	ION					+/11.54	
Harry McBride			3 Pidoc (5)					Type of F	acility (4) School (K	- 12)			
Street Address						=			Subchapte	r 8 (Oth	ner tha	an K-1	2)
195 Franklin Av	/enue						4		Other (Priva Bldgs./Hom	ate/Cor	nmer	cial	
City (5)		TC	ounty (6)					Square F		Floors	T	Bldg	. Age
M. 1							County Code (7) State use only)	-					
Maplewood, NJ Name of Monitoring	07040 Firm Hired b	Bldg Ou	essex					residenti	lse (Prior if al	being	demoi	ished)	)
n/a	· ····································	y blug. Ov	viiei (8)		ASCM No.	15000	Name of Abatement	Contractor (9	)				
treet Address						_	B & G Restoration	n, Inc.					
ity, State, Zip Code	5 7,000					-	105 Ryerson Roa City, State, Zip Code	a					
oject Manager for N	Appitoring Fi-						Lincoln Park, NJ	07035					
ojest Manager 101 IV	nonitoring Fir	m	F	hone Num	ber		Telephone Number		Lice	nse Nu	mber		
heduled Start Date	(10)	I Cal	-10				973-696-6869		037				
	(10)	Sche	ed. Complet	ion Date (	11)		Name of OSHA Monitor						
/16/2012	ring Abeta	1/16	6/2012				Street Address	n, Inc.	-				
cupancy Status Dui	acated during	ent (Check	only one)				105 Ryerson Road	i					
Abatement perfo	ormed outside	of norma	I facility hou	ement. rs-			City, State, Zip Code					_	
Describe:  Other-Describe:						_							
cope of Work (check		y)					Lincoln Park, NJ (	07035					
Demolition		Renovati	on			٦.	Tull Contact						
>3 sf or >3 If		≥160 sf or	≥260 If				ull Containment w/negat	tive pressure					
Location of		Is locatio	n normally	used solely	/ <u> </u>	74			∐ Non	-friable	proc	edure	
asbestos-contain material to be	ing	by mainte staff(12)	enance/cust	odial	Description	of as	sbestos-containing	Amour	t	e	R	E	E
abated in facility	(13)	Yes	No	I NUO	material (AC	M)	occord containing	(Specin	y SF or	m	p	С	n
ement			140	N/A				LF)		V	i	a p	Ľ
oment					pipe insulation	1		115 lf		e	1		
t												F	1
							·						
						-							
stered Waste Haule & G Restoration, I		NJDE	P Hauler ID		bic Yards of Was	te	Name of Registered Lar	ndfill					
State		195			yards		Tullytown Resource	& Recove	y Center				
ncoln Park, NJ 07				isposal Da 1/17/12	ile		City, State						
pleted by (Print or T		Title			Signature	<u> </u>	Tullytown, PA		In				_
rdana Luna		Treasurer			AND COLORS OF STREET	4	Jordana Luna		Date 1/5/20	112			

16488

(VITY)

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

Date of Notification (1) 1/3/2012				wner/Operato	OLLECTS INC.		i// ir.'		-	
Agencies Notified Type Noti		Street	Address VATER ST				012			
X DOL Ame	II nded ndment # rgency (including	City, St	ate, Zip Code IDERE, N	e [	Land Cont.	ESTOS CONTR	OL &	- Teather trade	- Control of the Cont	
X DOH justif	ication) cellation	ALEX	of Contact CRESTAIN		La Adequate con	и пана <b>фо</b>	Number	<del></del>	J	
Name of Facility Where Abatement THE AUGUSTINIAN RECO		FAC	ILITY INFOR	RMATION	Type of Facility (	4)	and from the			
Street Address 743 WATER STREET			*****		Subchapter	8 (Other than rivate & comm		ldings	, hom	ies,
City (5) BELVIDERE	o 20				Square Feet 10,000	# of Floors		Bldg. / 80 yr	_	
County (6) WARREN			Code (7) USE ONLY)		Current Use (Price	or if being dem	olished)			
Name of Monitoring Firm Hired by B N/A	uilding Owner (8)	ASCI	M No.		of Abatement Con D BROTHERS		TING, II	NC.		
Street Address					Address RUTHERFORI	D BLVD.				B
City, State, Zip Code				100000000000000000000000000000000000000	State, Zip Code FTON, NJ 0701	4				
Project Manager for Monitoring Firm		Telepho	one No.		none No. -956-8700	Licens 0049	se No. 94			
Start Date (10) 01/13/2012	Scheduled ( 1/17/201)		Date (11)		of OSHA Monitor IE AS (9) ABO	VE				
Occupancy Status During Abatemer  Facility Closed/Vacated During Abatement Performed Outside Other – Describe: VACANT	Entire Period of Aba				Address State, Zip Code					
Scope of Work (Check All That Appl	у)				_					
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf		ovation nolition		2	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	edure			e	
		cation mally				( / a		Abate	ement pe	t
Location of Asbestos-Containing Material (A  TO BE ABATED In Facility (13)	CM) Used S Mainte Custodi (1	Solely by enance/ ial Staff? 12)	(i.e. the	Descriptions Containing Nermal system surfacing, VA ther miscellar	Material (ACM) s insulation, T, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
BASEMENT	, , ,	X	PIPE (E	NCAPSUL	ATE ONLY)	13 LF			Х	
Name of Registered Waste Hauler TWO BROTHERS CONTRACT	CTING	NJDEP W Hauler ID 18743	No. 2		WASTE	Registered Lan		G.R.C	).W.S	S.
City, State CLIFTON, NJ			515	Disposal Date /17/2012		SVILLE, PA		***		
Completed by MICHELE MLADENOVIC	Title SECRE	ETARY		Signature -	Mladenenii c	)	Date 1/3/20	12		



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

Check No.

No Fee

Date of Notification (1)					Name	of Buildin	ng Owner/Operator	(2)	Control Changers					
November 17, 201	11				PA c	f NY &	NJ, Newark L	iberty Intern	ational Airpo	rt				
Agency Notified	Type N	lotification				Address	3 911		1 W 15 1	11/1				
□ EPA	☑ Initia	al					, 2nd Floor	Commence of the commence of th						
Hot and president State Reg. 10 2004	<b>⊠</b> Ame					tate, Zip	118	ili IAM 1	1 0010					
⊠ DOL		endment # <b>1</b> ergency (includi	na				J 07114	U JAN 1	1 2012	$\exists j \mid z$				
<b>⊠</b> DOH	just	ification)	9			of Conta	79	and the second	Telephone Nu	mber				
□ DCA	☐ Can	cellation			Ralp	h Cam	pione	ASEESTOS	STATE OF THE STATE		ule Sele			
					FACI	LITY INF	ORMATION	LICEN	TOTAL CONTRACTOR OF THE PARTY O					
Name of Facility Where	Abateme	nt is Taking Pla	ce (3)				e e yezhoù (Peliko Ser	Type of Facility	(4)			COPPE C	7.	
Terminal B, B2 Elev	ator Lo	bby Mid Leve	el, B3	Conr	nector	Passen	ger Level	☐ School (K-1)	2)					
Street Address	A STATE OF STREET							☐ Subchapter	(Other than K-1	2)				
Terminal B, Newa	rk Libe	rty Internat	ional	Airp	ort			homes, etc.	rivate & commerci	iai buildin	igs,			
City (5)								Square Feet	# of Floors	Bldg.	Age	9		-
Newark								24000	2	40 -	+/-			
County (6)					County	Code (7	7) (STATE USE	Current Use (P	rlor if being demo	lished)	_			
Essex					ONLY)			Terminal						
Name of Monitoring Firm	n Hired b	v Building Own	er I	ASCN	1 No.		Name of Abatem	nent Contractor (	9)		-		-	
A of NY & NJ		,	1	N/A				toration Co.						
Street Address							Street Address							-
241 Erie Street, R	00m 23	6					223 Randoli	nh Avenue						
City, State, Zip Code	OOIII ZO						City, State, Zip (				-		_	-
Jersey City, NJ 07	7310						Clifton, NJ							
Project Manager for Mor		irm	Te	lepho	ne No.		Telephone No.		License No.	5 0 000			_	-
Ralph Campione	3		9078		24-689	98	973-478-468	1	00120					
Start Date (10)	-	Scheduled C					Name of OSHA	Monitor				-		
December 04, 201	1	January 3	1, 20	12	32 50		McCabe En	vironmental	Services, L.L.	.C.				
Occupancy Status Durin							Street Address				- 3			
		- F-41 B11					464 Valley E	Brook Avenue	9					
☐ Facility Closed/Vacat  ☐ Abatement Performed					ľ		City, State, Zip (	Code						10.00
Other - Describe:							Lyndhurst,	NJ 07071-199	98					
Scope of Work (Check a	III that ap	ply)					53 5 0	0 4 :	N 4					
☐ ≥ 3 sf or ≥ 3 lf					⊠ Ren	ovation		Containment with Enclosure	Negative Pressu	ire				
≥ 160 sf or ≥ 260 lf					☐ Dem	nolition	□ Glov	ebag Procedure	d Now Frieble Bre					
			HAMASAITS			T	□ Non-	-Exempted (*) an	d Non-Friable Pro	cedure	Α	bate	eme	nt
				Loca: lorma							L		ре	
Locati					ely by		Description							
Asbestos-Containii TO BE A		al (ACM)		intena	ance/		estos Containing M e., thermal systems		Amount (Specify		Z	חב	Encapsulate	m
IN Fac		1		Staff			surfacing, VA	T, or	SF or LF		Removal	Repair	apsı	Enclosure
(13	3)			(12)			other miscelland	eous)			val	=	ılate	ure
			Ves	Ma	T									
Terminal B, B2 Elevato	or Lobby	Mid Level	Yes	No	N/A	Firer	proofing		1.80	00 sq ft	X			
Terminal B, B3 Conne			$\Diamond$				oroofing			00 sq ft				
Terminal B, B3 Conne	Cioi Fas	seriger Lever	$\triangle$		-	1 110	Jiooning		0,40	00 00 10		-		
						-	N.				-	-	-	
Name of Registered Wa	ete Usula		NI I	DED	Waste F	laular	Cubic Yards of	Name of Regis	stered Landfill			L.,		
Name of Registered Wa	iste Haule	<b>?</b> Γ	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No.	waste r	laulei	Waste	Name of Regis	stered Landini					
Jimmy Byrne True	cking		19	555			100		nterprises, In	с.				
City, State							Disposal Date	City, State	0					
Bronx, NY							03/31/2011	Waynesbu	rg, OH				00.0	
Completed by		Title					Signature	112		Date				
G. Roger Woodma	an	Project M	anag	er			000			1/6/2	U12			

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) Date of Notification (1) HESS CORPORATION /11 Street Address JAN. 2012 Agencies Notified Type Notification 1 HESS PLAZA Initial Notification City, State, Zip Code **EPA** DEP WOODBRIDGE, NEW JERSEY 07095 Amended Notification #12 ASSESTOS COMTROL & DOL Cancellation Telenhone Number Chick Comit DOH On Hold Name of Contact 9 DCA EMERGENCY NOTIFICATION DAVID CERULO **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) HESS PLAZA Subchapter 8 (Other than K-12) Other (ie. private & commcl. bldgs., homes, etc.) Street Address Square Feet # of Floors Bldg. Age 1 HESS PLAZA 187 000 City (5) Current Use (Prior if being demolished) County (6) County Code (7) WOODBRIDGE MIDDLESEX (STATE USE ONLY) COMMERCIAL OFFICE Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) HILLMANN ENVIRONMENTAL PAR ENVIRONMENTAL CORPORATION 17 Street Address Street Address 1600 ROUTE 22 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code SUFFERN, NEW YORK 10901 UNION, NEW JERSEY 07083 Project Manager for Monitoring Firm License Number Telephone Number Telephone Number 845-369-7500 MIKE NEHLSEN 908-377-5644 Expected State Date (10) Name of OSHA Monitor Sched. Completion Date (11) /11 5/ 30/ 12 QUALITY ENVIRONMENTAL 11 / Month Day Year Year Day Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1376 ROUTE 9 W Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe: MON. - FRI. 6 PM - 2:30 AM City, State, Zip Code WAPPINGERS FALLS, NY 12590 Scope of Work (Check all that apply) Full Containment with Negative Pressure Mini-Enclo: Demolition Renovation >3SF OR LF Glovebag Procedure >160 SF OR Non-Friable Procedure Is Location Abatement Type Location of Description of Asbestos-Containing Material (ACM) Amount Asbestos-containing normally used REPAIR ENCAPSULE REMOVA (Specify solely by ICLOSURE Material (ACM) (ie. Thermal systems TO BE ABATED Maint/Custodial insulation, surfacing, VAT, SF or LF) Staff (12) or other miscellaneous) in Facility (13) Yes No N/A 3RD FLOOR - ENTIRE VAT & MASTIC 8.005 SF 3RD FLOOR - ENTIRE PIPE FITTINGS 75 LF X 3RD FLOOR - ENTIRE JOINT COMPOUND 12,180 SF X COVE BASE MASTIC 495 SF X 3RD FLOOR - ENTIRE X 3RD FLOOR - ENTIRE X TAR 25 SF X 2ND FLOOR- ENTIRE X VAT & MASTIC 8,005 SF X 495 SF COVE BASE MASTIC X 2ND FLOOR- ENTIRE X 2ND FLOOR- ENTIRE X JOINT COMPOUND 12,180 SF X X 2ND FLOOR- ENTIRE TAR 25 SF 2ND FLOOR- ENTIRE X PIPE FITTINGS INSULATION 380 LF X PLAZA-ENTIRE VAT & MASTIC 12,425 SF X X COVE BASE MASTIC 495 SE X PLAZA-ENTIRE X PLAZA-ENTIRE JOINT COMPOUND 18,820 SF X X PLAZA-ENTIRE ACCOUSTICAL PLASTER 7,275 SF X X 25 SF PLAZA-ENTIRE X TAR PLAZA-ENTIRE X PIPE FITTINGS INSULATION 200 LF X

1ST FLOOR-MECHANICAL ROOM

1ST FLOOR-MECHANICAL ROOM

1ST FLOOR-MECHANICAL ROOM

1ST FLOOR-MECHANICAL ROOM

1ST FLOOR -BOILER ROOM 1ST FLOOR-BOILER ROOM

1ST FLOOR - CAFETERIA

1ST FLOOR- CAFETERIA

1ST FLOOR - CAFETERIA

1ST FLOOR - CAFETERIA 13TH FLOOR - MER ROOM X

X

X

X

X

X

X

X

X

X

X

DUCT INSULATION

VIBRATION CLOTH

DUCT INSULATION

JOINT COMPOUND

COVE BASE MASTIC

PIPE INSULATION

DUCT INSULATION

VAT & MASTIC

**GASKETS** 

PIPE FITTINGS INSULATION

PIPE FITTINGS INSULATION

665 SF

207 LF

4 SF 10 SF

45 LF

240 SF

3,000 SF

5,700 SF

175 SF

25 LF

770 SF

X

X

X

X

X

X

X

X

X

X

Completed by (Print or Type) BENJAMIN SANCHEZ	Title		R OF OPER	RATIONS Signature	$\leq ///$	Da	ate /	19	1/12
City, State KEARNEY, NEW JERSEY				Disposal Date 6/23/11-05/15/2012	City, State/ MORINISVILLE	, PA		1	, /
Name of Registered Waste Hauler DJM TRANSPORT , LLC		Haule	P Waste er ID No. 26981	Cubic Yards of Waste 100	Name of Regis				
11TH FLOOR-PERIMETER WALL	ec es es introduc		X	TAR MASTIC		25 SF	X		
11TH FLOOR-THROUGHOUT			Х	PIPE FITTINGS		75 LF	Х		
11TH FLOOR PERIMETER			Х	COVE BASE MASTIC		55 SF	Х		
11TH FLOOR -ENTIRE			Х	JOINT COMPOUND		7,920 SF	X		
11TH FLOOR -ENTIRE			Х	VAT & MASTIC		8,000 SF	X		
1ST FLOOR STORAGE ROOM			- X	VAT & MASTIC		300 SF	X		
1ST FLOOR STORAGE ROOM			X	PIPE FITTINGS	1.70	13 LF	X		
1ST FLOOR HALLWAY			X	PIPE FITTINGS		20 LF	X		



State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) HESS CORPORATION Date of Notification (1) 0 1 Street Address /11 Type Notification 1 HESS PLAZA Agencies Notified Initial Notification City, State, Zip Code EPA WOODBRIDGE, NEW JERSEY 07095 DEP Amended Notification 2012 DOL Cancellation Name of Contact Telephone Number On Hold DOH **EMERGENCY NOTIFICATION** DAVID CERULO DCA ASBESTUS FACILITY INFORMATION Type of Facility (4) LILLITGING Name of Facility Where Abatement is Taking Place (3) School (K-12) Subchapter 8 (Other than K-12) HESS PLAZA Other (ie. private & commcl. bldgs., homes, etc.) # of Floors Bldg. Age Square Feet Street Address 42 187,000 1 HESS PLAZA County Code (7) Current Use (Prior if being demolished) County (6) City (5) COMMERCIAL OFFICE WOODBRIDGE MIDDLESEX (STATE USE ONLY) Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) PAR ENVIRONMENTAL CORPORATION 17 HILLMANN ENVIRONMENTAL Street Address Street Address 313 SPOOK ROCK ROAD 1600 ROUTE 22 City, State, Zip Code City, State, Zip Code SUFFERN, NEW YORK 10901 UNION, NEW JERSEY 07083 License Number Telephone Number Project Manager for Monitoring Firm Telephone Number 460 845-369-7500 908-377-5644 MIKE NEHLSEN Name of OSHA Monitor Sched. Completion Date (11) Expected State Date (10) QUALITY ENVIRONMENTAL 5 / 30/ 12 /11 6 / Day Year Year Month Day Street Address Occupancy Status During Abatement (Check only one) 1376 ROUTE 9 W Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: City, State, Zip Code MON. - FRI. 6:00 PM - 4:00 AM Other - Describe: WAPPINGERS FALLS, NY 12590 Full Containment with Negative Pressure Scope of Work (Check all that apply) Mini-Enclo:, Demolition Renovation Glovebag Procedure >3SF OR LF Non-Friable Procedure >160 SF OR Abatement Type Description of Asbestos-Location of Is Location Amount **ENCLOSURE** normally used Containing Material (ACM) ENCAPSULE Asbestos-containing REMOVAL REPAIR (Specify (ie. Thermal systems solely by Material (ACM) SF or LF) Maint/Custodial insulation, surfacing, VAT, TO BE ABATED or other miscellaneous) in Facility (13) Staff (12) Yes No N/A 8,005 SF VAT & MASTIC 3RD FLOOR - ENTIRE PIPE FITTINGS 75 LF X X 3RD FLOOR - ENTIRE 12,180 SF X 3RD FLOOR - ENTIRE JOINT COMPOUND X COVE BASE MASTIC 495 SF 3RD FLOOR - ENTIRE X 25 SF TAR 3RD FLOOR - ENTIRE IX 8.005 SF X VAT & MASTIC 2ND FLOOR- ENTIRE COVE BASE MASTIC 495 SF 2ND FLOOR- ENTIRE 12,180 SF JOINT COMPOUND X 2ND FLOOR- ENTIRE 25 SF 2ND FLOOR- ENTIRE X TAR 380 LF PIPE FITTINGS INSULATION 2ND FLOOR- ENTIRE X X VAT & MASTIC 12,425 SF PLAZA-ENTIRE 495 SF X COVE BASE MASTIC PLAZA-ENTIRE 18,820 SF JOINT COMPOUND PLAZA-ENTIRE X ACCOUSTICAL PLASTER 7,275 SF X X PLAZA-ENTIRE 25 SF PLAZA-ENTIRE X TAR PIPE FITTINGS INSULATION 200 LF PLAZA-ENTIRE X X 665 SF DUCT INSULATION 1ST FLOOR-MECHANICAL ROOM X 207 LF X 1ST FLOOR-MECHANICAL ROOM PIPE FITTINGS INSULATION X VIBRATION CLOTH 4 SF X 1ST FLOOR-MECHANICAL ROOM 10 SF X GASKETS X 1ST FLOOR-MECHANICAL ROOM 45 LF X 1ST FLOOR -BOILER ROOM X PIPE FITTINGS INSULATION 240 SF X DUCT INSULATION 1ST FLOOR-BOILER ROOM VAT & MASTIC 3,000 SF X 1ST FLOOR - CAFETERIA X 1ST FLOOR- CAFETERIA JOINT COMPOUND 5,700 SF X COVE BASE MASTIC 175 SF X 1ST FLOOR - CAFETERIA

PIPE INSULATION

Cubic Yards of Waste

X

NJDEP Waste

1ST FLOOR - CAFETERIA

Name of Registered Waste Hauler

25 LF

Name of Registered Landfill

ORT, LLC	Hauler ID No. 26981	1	GROWS LANDFILL	
, NEW JERSEY		Disposal Date 6/22/11-05/15/2012	City, State MORRISVILLE, PA	11
July (Print or Type) MIN SANCHEZ	Title DIRECTOR OF OPE	RATIONS Signature	Date	6/8/11



1			NOTI	Sta	te of New Jerse OF ASBESTOS	S ABATEMENT	I CALL	1 1	) [		WH I	-51
			(P	ursuant to h	NJAC 8:60-7 an	id 12:120-7)		y U	)  -	1	17/	
Date of Notification (1)	÷				CORPORATION	wner/Operator (2 ON		2.4				1
6 / 21	/11				Address			UΑ	N :		2012	
Agencies Notified Type	Notification				SS PLAZA	1				*******		
EPA	Initial Notification				State, Zip Code		-	ACOL	CTOC	CONT	ROL 8	
DEP X	Amended Notif Cancellation	ication		IWOO	DBRIDGE, NEV	W JERSEY 07095		DOLL		NSIM		
X DOL	On Hold			Name	of Contact		Telephone Num			At the summer		
DCA	EMERGENCY	NOTIFIC	CATIO	N DAVI	D CERULO	, , , , , , , , , , , , , , , , , , ,			-finance	Proposition of the Contract of		
				FACIL	ITY INFORMAT	TION						
Name of Facility Where Abatem	ent is Taking Pl	ace (3)				Type of Facility School (K						
UE00 DI 171							er 8 (Other than K	(-12)				
HESS PLAZA							private & commo		s., hor			
Street Address			rollies			Square Feet	# of Floors			Blo	ig. Age 42	
1 HESS PLAZA					0 1- (7)	187,000	13 for if being demol	ished)	-		42	
City (5)	County (6) MIDDLESEX				ty Code (7) USE ONLY)	COMMERCIAL		isneu	10			
WOODBRIDGE Name of Monitoring Firm Hired		ner (8)		(OIAIL	ASCM No.	Name of Abate	ment Contractor					
HILLMANN ENVIRONMENTAL	.,		and the same		17		MENTAL CORPO	DRATI	ON			
Street Address						Street Address 313 SPOOK RO	OCK BOAD					
1600 ROUTE 22						City, State, Zip	A HI MODEL A ARK ARK GOOD OF THE PARTY OF TH				-	
City, State, Zip Code UN	NION, NEW JER	SEY 070	083			SUFFERN, NE	W YORK 10901					
Project Manager for Monitoring Fi				Number		Telephone Nun	STATE OF THE STATE		lumbe	r		
MIKE NEHLSEN		908-3		111111111111111111111111111111111111111		845-369-7500	460					
Expected State Date (10)	54444			ion Date (1	1) 12	Name of OSHA QUALITY ENVI						
6 / 23 / Month Day Y	/11 rear N	5 . Nonth	/	30/ Day	Year	QUALITY LIVE	KONWENTAL					
Occupancy Status During Abatem	nent (Check only	one)				Street Address						
Facility Closed/Vacate	ed During Entire	Period of	f Abat	ement		1376 ROUTE 9	W					
Abatement Performed	Outside of Norr											
	MON FRI. 6:	00 PM - 2	ity Hoi 2:30 A	urs - Descri VM	be:	City, State, Zip						-
X . Other - Describe:	MON FRI. 6:	00 PM - 2	ity Hoi 2:30 A	urs - Descri			WAPPINGER	S FAL	LS, N	Y 1259	90	-
X - Other - Describe:	MON FRI. 6:	00 PM - 2	ity Hoi 2:30 A	AM [	X Full Conta	ainment with Nega	WAPPINGER	S FAL	LS, N	Y 1259	90	
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Completed by (Print or Type) BENJAMIN SANCHEZ	Title DIRECTOR OF OP	ERATIONS	Signature	XXX	Date	6	121	[1]
			17	100		7	1	



Sign of the

the management

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

<i>A</i>	(10	Name of Building O	wner/Operator (2)		V	C. E.S.O.		
		HESS CORPORATIO		170	P 1	17.7	7 13	process, 1
Date of Notification (1)				4		- 11/	- 1-	1111
7 / 22 /11  Agencies Notified Type Notification	n	Street Address 1 HESS PLAZA			*****			
EPA Initial Noti	fication	City, State, Zip Code		LAM	1.1	20	10	
	Notification #3	WOODBRIDGE, NEV	V JERSEY 07095	JAN	1 1	ZU	12	hat f
X DOL Cancellati	on		Telephône N	umbor		-		+ ;
X DOH On Hold	LOVE LIGHTICATION	Name of Contact  N DAVID CERULO	r elephone ivi	Margarith and the Princes	0.000			
DCA EMERGE	NCY NOTIFICATION				S CON ENSIN		ρ.	- 1
	- (0)	FACILITY INFORMAT	Type of Facility (4)	LIV	4.11.0115			
Name of Facility Where Abatement is Taki	ng Place (3)		School (K-12)	e e e e e e e e e e e e e e e e e e e	مردو المصادرة			
			Subchapter 8 (Other than	K-12)				
HESS PLAZA			X Other (ie. private & comm		s., hon	nes, e	etc.)	
Street Address			Square Feet # of Floors		2015 W. C. V. II	Blo	lg. Age	t
1 HESS PLAZA			187,000 13				42	
City (5) County (6	6)	County Code (7)	Current Use (Prior if being den	nolished	)			
WOODBRIDGE MIDDLES		(STATE USE ONLY)	COMMERCIAL OFFICE	(0)		200		
Name of Monitoring Firm Hired by Buildin	g Owner (8)	ASCM No.	Name of Abatement Contrac PAR ENVIRONMENTAL COR		ON			
HILLMANN ENVIRONMENTAL		17		OKATI	-	-		
Street Address			Street Address 313 SPOOK ROCK ROAD					
1600 ROUTE 22			City, State, Zip Code		27725 - 1-15			
City, State, Zip Code	JERSEY 07083		SUFFERN, NEW YORK 1090					
	Telephone f	Number		cense N	lumber			
Project Manager for Monitoring Firm	908-377-564		1	60				
MIKE NEHLSEN Expected State Date (10)	Sched. Completi		Name of OSHA Monitor					
6 / 23 / /11	5/	30/ 12	QUALITY ENVIRONMENTAL					
Month Day Year	Month	Day Year	<u> </u>					
Occupancy Status During Abatement (Check	k only one)		Street Address					
Facility Closed/Vacated During E	intire Period of Abat	ement	1376 ROUTE 9 W					
Abatement Performed Outside of	RI. 6:00 PM - 2:30 A	M	City, State, Zip Code					
X Other - Describe: MON FI	KI. 0.00 FW - 2.50 A	441	WAPPINGE	RS FAL	LS, NY	1259	90	
Scope of Work (Check all that apply)		X Full Cont	ainment with Negative Pressure					
Demolition X	Renovation	X Mini-Encl						
>3SF OR LF			Procedure					
X >160 SF OR			ble Procedure	1		Abate	ment T	vne
Location of	Is Location normally used	Description of A Containing Mater		70		-	-	ypc
Asbestos-containing Material (ACM)	solely by	(ie. Thermal sy	1	I E	REPAIR	Ŕ	É	
TO BE ABATED	Maint/Custodial	insulation, surfac	3 Table 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	REMOVAL	1	ENCAPSULE	ENCLOSURE	
in Facility (13)	Staff (12)	or other miscell	aneous)	15			R	
	Yes No N/A				+-	in	Im	
			8.005 SF	X	+-	-	+	
3RD FLOOR - ENTIRE		VAT & MASTIC	75 LF	X	+	-		
3RD FLOOR - ENTIRE		PIPE FITTINGS JOINT COMPOUND	12,180 SF	X				
3RD FLOOR - ENTIRE		COVE BASE MASTIC	495 SF	X				
3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE		TAR	25 SF	Х				
2ND FLOOR- ENTIRE	X	VAT & MASTIC	8,005 SF	X		_		
2ND FLOOR- ENTIRE		COVE BASE MASTIC	495 SF	X	-	-	-	
2ND FLOOR- ENTIRE		JOINT COMPOUND	12,180 SF	X	+	-	-	
2ND FLOOR- ENTIRE		TAR	25 SF 380 LF	X	-		+-	
2ND FLOOR- ENTIRE		PIPE FITTINGS INSULAT	12,425 SF	X	-	-	1	
PLAZA-ENTIRE		COVE BASE MASTIC	495 SF	X				
PLAZA-ENTIRE PLAZA-ENTIRE		JOINT COMPOUND	18,820 SF	Х				
PLAZA-ENTIRE		ACCOUSTICAL PLASTE	R 7,275 SF	Х				
PLAZA-ENTIRE		TAR ·	25 SF	X			_	
PLAZA-ENTIRE		PIPE FITTINGS INSULAT		X	-	-	-	
1ST FLOOR-MECHANICAL ROOM		DUCT INSULATION	665 SF ION 207 LF	X	-	-	+	
1ST FLOOR-MECHANICAL ROOM		PIPE FITTINGS INSULAT VIBRATION CLOTH	10N 207 LF	x	-	-		
1ST FLOOR-MECHANICAL ROOM		GASKETS	10 SF	X			1	
1ST FLOOR-MECHANICAL ROOM 1ST FLOOR -BOILER ROOM		PIPE FITTINGS INSULAT		Х				
1ST FLOOR -BOILER ROOM		DUCT INSULATION	240 SF	Х				
1ST FLOOR - CAFETERIA		VAT & MASTIC	3,000 SF	X			1	
1ST FLOOR- CAFETERIA		JOINT COMPOUND	5,700 SF	X	-	-	-	
1ST FLOOR - CAFETERIA		COVE BASE MASTIC	175 SF	X		-	-	
1ST FLOOR - CAFETERIA		PIPE INSULATION DUCT INSULATION	25 LF 770 SF	X	+	-	1	
12TH ELOOP - MER ROOM	l X	DUCT INSULATION	1110 01	10	1	1	1	Committee of the Commit

Registered Waste Hauler	NJDEP Waste Hauler ID No. 26981	Cubic Tards of Trace	Name of Registered Landfill GROWS LANDFILL	
city, State KEARNEY, NEW JERSEY		GIZSI IT SOLICE	MORRISVILLE, PA	122/11
Completed by (Print or Type) BENJAMIN SANCHEZ	Title DIRECTOR OF OPE	RATIONS Signature	XX	100/11



المرادد		I		State of New Jersey ATION OF ASBESTOS A uant to NJAC 8:60-7 and 1		hara and the same		, Variet della		No. of Concession, Name of Street, or other Persons, Name of Street, or ot	The state of the s
Date of Notification (1)				Name of Building Own HESS CORPORATION	March Commence of the Section of the	)					- 1860 A
8 / 22 /	11			Street Address		· /					37
	lotification			1 HESS PLAZA	110					4//	
DEP A DOL X DOH X C	nitial Notificatio Amended Notific Cancellation On Hold	cation		City, State, Zip Code WOODBRIDGE, NEW	JERSEY 07095	Telephone Nur	nber	1.31	ě.		
DCA E	MERGENCY N	OTIFIC	ATION	DAVID CERULO		l	11/1	āār.		1	<u> </u>
Name of Facility Where Abatement HESS PLAZA	nt is Taking Pl	ace (3)		FACILITY INFORMATIO	School (K- Subchapte	(4) 12) er 8 (Other than I					
Street Address					Square Feet	# of Floors	J. Diag	s., no		dg. Ag 42	
1 HESS PLAZA	Sounds (C)			County Code (7)	187,000	or if being demo	lished	n		42	
The state of the s	County (6)				COMMERCIAL (		mariou	,			
Name of Monitoring Firm Hired b	y Building Ow	ner (8)		50000000000000000000000000000000000000		ment Contracto			0.000		
HILLMANN ENVIRONMENTAL						MENTAL CORPO	DRATI	ON			
Street Address				1	Street Address 313 SPOOK RO	CK ROAD					
1600 ROUTE 22 City, State, Zip Code					City, State, Zip C		10.000.000				
	N, NEW JERS	EY 070	83	0.00	SUFFERN, NEV			51-3			
Project Manager for Monitoring Firm	1	Teleph	one Nur	nber T	Telephone Num		ense N	lumbe	r		
MIKE NEHLSEN			7-5644	The state of the s	345-369-7500	460					
Expected State Date (10) 6 / 23 / /	Scho	ed. Corr 5 /	-		Name of OSHA						
Month Day Yea	53.03	onth		Day Year	ZONEH I EIVEN	(0)1111/12					
Occupancy Status During Abatemen	nt (Check only	one)			Street Address						
Facility Closed/Vacated					376 ROUTE 9	w					
Abatement Performed C X Other - Describe: N	NON FRI. 6:0				City, State, Zip C	ode	200			-	
Scope of Work (Check all that apply Demolition >3SF OR LF X >160 SF OR Location of	X Rend	ovation	n I	X Full Contains X Mini-Enclox, X Glovebag Pr Non-Friable Description of Asbe	Procedure	tive Pressure	T		Abate	ment i	Гуре
Asbestos-containing Material (ACM) TO BE ABATED in Facility (13)	nor S Mair S	mally us solely by nt/Custo staff (12)	dial	Containing Material ( (ie. Thermal syste insulation, surfacing, or other miscellane	ems , VAT,	Amount (Specify SF or LF)	REMOVAL	REPAIR	ENCAPSULE	ENCLOSURE	
						0.005.05	-	-	-	-	
3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE		X		& MASTIC FITTINGS		8,005 SF 75 LF	X		-	-	
3RD FLOOR - ENTIRE		X	_	NT COMPOUND		12,180 SF	X				
3RD FLOOR - ENTIRE		X		/E BASE MASTIC		495 SF	Х		-	-	
3RD FLOOR - ENTIRE		X		& MASTIC		25 SF 8,005 SF	X	+-	-	-	
2ND FLOOR- ENTIRE 2ND FLOOR- ENTIRE		X		/E BASE MASTIC		495 SF	X	1	1	1	
2ND FLOOR- ENTIRE		X		NT COMPOUND		12,180 SF	Х				
2ND FLOOR- ENTIRE		X	_			25 SF	Х				
2ND FLOOR- ENTIRE		X		FITTINGS INSULATION	١	380 LF	X	-	-	-	
PLAZA-ENTIRE PLAZA-ENTIRE		X	_	& MASTIC /E BASE MASTIC		12,425 SF 495 SF	x	+-	-	+	
PLAZA-ENTIRE PLAZA-ENTIRE		1 x		NT COMPOUND		18,820 SF	X				
PLAZA-ENTIRE		X		COUSTICAL PLASTER		7,275 SF	Х				
PLAZA-ENTIRE		X				25 SF	X			-	
PLAZA-ENTIRE		X		FITTINGS INSULATION OT INSULATION		200 LF 665 SF	X	-		-	
1ST FLOOR-MECHANICAL ROOM  1ST FLOOR-MECHANICAL ROOM		X		FITTINGS INSULATION		207 LF	x	-			
1ST FLOOR-MECHANICAL ROOM		x		RATION CLOTH		4 SF	Х				
1ST FLOOR-MECHANICAL ROOM		X		KETS		10 SF	Х				
1ST FLOOR -BOILER ROOM		X		FITTINGS INSULATION		45 LF	X	-	-	-	
1ST FLOOR-BOILER ROOM		X		T INSULATION		240 SF	X	-	Eyyau.		
1ST FLOOR - CAFETERIA		l v	1///	& MASTIC	Service and the service of the servi	3 000 SF	1X		1	1	
1ST FLOOR- CAFFTERIA		X		& MASTIC NT COMPOUND		3,000 SF 5,700 SF	X	-			
1ST FLOOR- CAFETERIA 1ST FLOOR - CAFETERIA		X	JOI	& MASTIC NT COMPOUND /E BASE MASTIC			-				
		X	JOI CO'	NT COMPOUND		5,700 SF	Х				-

Registered Waste Hauler	NJDEP Waste Hauler ID No. 26981	Cubic Yards of Waste 1	Name of Registered Landfill GROWS LANDFILL	
ity, State KEARNEY, NEW JERSEY		Disposal Date 6/23/11-05/15/2012/	MORRISVILLE, PA	01 11
Completed by (Print or Type) BENJAMIN SANCHEZ	Title DIRECTOR OF OPE	RATIONS Signature	Date	8/22///



		MC	(Pursuant to NJAC 8:60-7	and 12:120-7):	exmensión-econometros	and ether than	de asse	No.	
		-	Name of Building	Owner/Operator (					Control of the
Date of Notification (1)			HESS CORPORAT	NOI	BIET	P 1	11	13.7	- F
8 / 25	/11		Street Address		日加造門	9 1		17	TE INVI
Agencies Notified Ty	pe Notification		1 HESS PLAZA	j	3				-=.// 1//
EPA	Initial Notificati	on	City, State, Zip Cod	e				•	41 14
DEP X	Amended Notif	ication #45	WOODBRIDGE, N	EW JERSEY 0709	5 [] <i>U</i>		11	201	2 11 111
X DOL	Cancellation				1=-				1.71
X DOH	On Hold EMERGENCY	NOTIFICAT	Name of Contact TON DAVID CERULO	_ [ ]	Telephone N	umber			
		NOTIFICAT		- 1			CONT		
Name of Facility Where Abate	ment is Taking D	lace (3)	FACILITY INFORMA	Type of Facilit	Care Care Control Control	LICE	VSING		
Hame of Facility Where Abate	ment is raning i	iace (5)		School (K		-			The state of the s
HESS PLAZA					er 8 (Other than	K-12		****	G.
					private & comn			omes	etc.)
Street Address				Square Feet	# of Floors		<u> </u>		3ldg. Age
1 HESS PLAZA				187,000	13				42
City (5)	County (6)		County Code (7)		rior if being dem	olishe	d)		
WOODBRIDGE	MIDDLESEX		(STATE USE ONLY)	COMMERCIAL					
Name of Monitoring Firm Hire HILLMANN ENVIRONMENTAL	d by Building Ow	ner (8)	ASCM No.	Name of Abate					
Street Address	***************************************		17	PAR ENVIRON	MENTAL CORF	ORA	ION		
1600 ROUTE 22				Street Address 313 SPOOK RO	OCK ROAD				
City, State, Zip Code				City, State, Zip					
- Santa Persandan Amerika Pensandan	NION, NEW JERS	SEY 07083		SUFFERN, NEV					
Project Manager for Monitoring F	irm	Telephone	Number	Telephone Num	ber Lic	ense	Numbe	er	
MIKE NEHLSEN		908-377-5	644	845-369-7500	46	0			
Expected State Date (10)	The state of the s		etion Date (11)	Name of OSHA	Monitor				
6 / 23 / Month Day	/11 /ear M	5 / onth	30/ 12 Day Year	QUALITY ENVI	RONMENTAL				
Occupancy Status During Abater			Day rear	Street Address					
Facility Closed/Vacat			atement	1376 ROUTE 9	w				
Abatement Performe	d Outside of Norm	al Facility H	lours - Describe:		SYS				
X Other - Describe:	MON FRI. 6:0	DPM - 2:30	AM	City, State, Zip C					
Scope of Work (Check all that ap	nolu)		X Full Cont	 ainment with Nega	WAPPINGER	SFAL	LS, N	Y 125	190
Demolition		ovation	X Mini-Encl		iive Piessuie				
>3SF OR LF				Procedure					
X >160 SF OR			Non-Friat	ole Procedure		ayean ala			
Location of	4	Location	Description of As				_	-	ement Type
Asbestos-containing Material (ACM)		mally used olely by	Containing Materi (ie. Thermal sy		Amount	四四	R	E	E
TO BE ABATED	Lanca Cal	t/Custodial	insulation, surfaci		(Specify SF or LF)	REMOVAL	REPAIR	ENCAPSUL	ENCLOSUR
in Facility (13)	s	taff (12)	or other miscella		0. 0. 2. 7	A	1"	USO	USC
	Yes	No N/A			l.			m	R
							-	1_	
3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE		X	VAT & MASTIC PIPE FITTINGS		8,005 SF	X	-	-	
3RD FLOOR - ENTIRE		x	JOINT COMPOUND		75 LF 12,180 SF	X	-	+	-
3RD FLOOR - ENTIRE			COVE BASE MASTIC		495 SF	X		†	-
3RD FLOOR - ENTIRE			TAR		25 SF	X			
2ND FLOOR- ENTIRE			VAT & MASTIC		8,005 SF	Х			
2ND FLOOR ENTIRE			COVE BASE MASTIC		495 SF	X	-		
2ND FLOOR- ENTIRE 2ND FLOOR- ENTIRE		X X	JOINT COMPOUND TAR		12,180 SF 25 SF	X	-	-	
2ND FLOOR- ENTIRE			PIPE FITTINGS INSULATION		380 LF	X	-		<del>                                     </del>
PLAZA-ENTIRE			VAT & MASTIC		12,425 SF	X			
PLAZA-ENTIRE			COVE BASE MASTIC		495 SF	X			
PLAZA-ENTIRE			JOINT COMPOUND		18,820 SF	Х			
PLAZA-ENTIRE PLAZA-ENTIRE			ACCOUSTICAL PLASTER		7,275 SF	X			
PLAZA-ENTIRE PLAZA-ENTIRE			TAR PIPE FITTINGS INSULATIO		25 SF 200 LF	X	-		
1ST FLOOR-MECHANICAL ROO	м		DUCT INSULATION		65 SF	X			
1ST FLOOR-MECHANICAL ROO			PIPE FITTINGS INSULATIO		207 LF	X			
1ST FLOOR-MECHANICAL ROO			VIBRATION CLOTH		SF	Х			
1ST FLOOR-MECHANICAL ROO	M		GASKETS		10 SF	X			
1ST FLOOR -BOILER ROOM 1ST FLOOR-BOILER ROOM			PIPE FITTINGS INSULATION		15 LF	X			
1ST FLOOR - CAFETERIA			OUCT INSULATION /AT & MASTIC		240 SF 3,000 SF	X	-		
1ST FLOOR- CAFETERIA		-	IOINT COMPOUND		,700 SF	X	$\dashv$	-	
1ST FLOOR - CAFETERIA			COVE BASE MASTIC		75 SF	X			10.100
1ST FLOOR - CAFETERIA			PIPE INSULATION		5 LF	Х			
13TH FLOOR - MER ROOM		X C	DUCT INSULATION	17	70 SF	X		1	

State of New Jersey

ie of Registered Waste Hauler im TRANSPORT , LLC	NJDEP Waste Hauler ID No. 26981	Cubic Yards of Waste 1	Name of Registered Landfill GROWS LANDFILL	
City, State KEARNEY, NEW JERSEY	; d	Disposal Date 6/23/11-05/15/2012	MORRISVILLE PA	-
Completed by (Print or Type) BENJAMIN SANCHEZ	Title DIRECTOR OF OPE	Signature Signature	FASO 100 8/25/11	



				NOTI	State of New Jerse FICATION OF ASBESTOS ursuant to NJAC 8:60-7 and	ABATEME	NT.	EGF				Ţ,	71
Date of Notification (1)				(r	Name of Building O	ner/Opera					- // -		
9 /	9 /11				Street Address			TUAN		2012		110	Д.
Agencies Notified	Type Notification		15551Ad4		1 HESS PLAZA		12 6					110000	
EPA DEP	Initial Notifi  X Amended Notifi  Cancellatio	Votifica		#6	City, State, Zip Code WOODBRIDGE, NEV	/ JERSEY	07095	ASBESTOS	CON NSIN		į.	į	
X DOL	X On Hold	111			Name of Contact			Telephone Nurr	ber		THE WAY IN	LAMBITA S	-
DCA	EMERGEN	ICY N	OTIFI	CATIC					16 p. m. to	AFF II			
		- 01-	(2)		FACILITY INFORMAT	Type of F	acility	(4)			Total I	-	
Name of Facility Where	Abatement is Takin	ig Pia	ce (s	,		-	ool (K-	17.07					
HESS PLAZA								r 8 (Other than K					
				and the second		X Othe Square		rivate & commo	l. bldg	s., hor		g. Ag	e
Street Address 1 HESS PLAZA						187,0		13				42	
City (5)	County (6)	)			County Code (7)			or if being demo	lished	)			
WOODBRIDGE	MIDDLESE		- 10	لـــــا	(STATE USE ONLY)	COMMER		FFICE nent Contractor	(9)		55-27/2		
Name of Monitoring Firm HILLMANN ENVIRONME		g Own	er (8)		ASCM No.			ENTAL CORPO		ON			
Street Address						Street Add				=			
1600 ROUTE 22						313 SPO							
City, State, Zip Code	UNION, NEW	IFRS	EY 07	083		City, State		ode / YORK 10901					
Project Manager for Monit					Number	Telephone			nse N	umbei			
MIKE NEHLSEN			908-3	377-56	14	845-369-7	23/12/2019	460					
Expected State Date (10		Sche		mplet	on Date (11) 30/ 12	Name of O		Monitor ONMENTAL					
6 / Month Day	23 / /11 Year	Mo	- 11	,	Day Year								
Occupancy Status During	Abatement (Check	only o	ne)			Street Add		M					
Facility Closed	d/Vacated During En erformed Outside of I	itire Pe Norma	enod al Fac	ot Aba	ement urs - Describe:	1370 KOC	JIL 3						
X Other - Descri						City, State	e, Zip C		2501		/ 105	00	
					X Full Conta	inment with	h Nega	WAPPINGERS tive Pressure	FAL	LS, N1	125	90	
Scope of Work (Check all Demolition	that apply)	Reno	vation	1	X Mini-Enclo		ii nega	ive i ressure					
>3SF OR LF	[	1				Procedure							
X >160 SF OR					Non-Friab	le Procedu	re		T	-	Ahate	ment	Type
Location Asbestos-co	5-100-00		Locat		Containing Materi			Amount	沼		11	-	1
Material (A	ACM)		olely l		(ie. Thermal sy			(Specify SF or LF)	REMOVAL	REPAIR	ENCAPSU	ENCLOS	
TO BE ABA in Facility		THE RESERVE	t/Cus taff (1		insulation, surfaci or other miscella			SF OI LF)	A	70	IUS		
in t dointy	(10)	Yes								<u> </u>	Fi	ᇛ	
					VAT & MACTIC			8,005 SF	X	-	-	+-	
3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE				X	VAT & MASTIC PIPE FITTINGS			75 LF	X				
3RD FLOOR - ENTIRE				Х	JOINT COMPOUND			12,180 SF	X	-	_	-	
3RD FLOOR - ENTIRE				X	COVE BASE MASTIC			495 SF 25 SF	X		$\vdash$	$\vdash$	
3RD FLOOR - ENTIRE 2ND FLOOR- ENTIRE				X	TAR VAT & MASTIC	VA		8,005 SF	Х				
2ND FLOOR- ENTIRE				X	COVE BASE MASTIC			495 SF	Х		_	-	
2ND FLOOR- ENTIRE				X	JOINT COMPOUND			12,180 SF 25 SF	X	-	-	-	
2ND FLOOR- ENTIRE		-	-	X	TAR PIPE FITTINGS INSULAT	ON		380 LF	X				
2ND FLOOR- ENTIRE PLAZA-ENTIRE				X	VAT & MASTIC			12,425 SF	Х				
PLAZA-ENTIRE				Х	COVE BASE MASTIC			495 SF	X	+-	-	-	
PLAZA-ENTIRE		-	_	X	JOINT COMPOUND  ACCOUSTICAL PLASTER	?		18,820 SF 7,275 SF	X		1	1	
PLAZA-ENTIRE PLAZA-ENTIRE				X	TAR ,			25 SF	Х				
PLAZA-ENTIRE				Х	PIPE FITTINGS INSULATION	N		200 LF	X	+-	-	-	
1ST FLOOR-MECHANIC		-	-	X	DUCT INSULATION PIPE FITTINGS INSULATION	ON		665 SF 207 LF	X	-	-	-	
1ST FLOOR-MECHANIC				X	VIBRATION CLOTH			4 SF	Х				
1ST FLOOR-MECHANIC	AL ROOM			Х	GASKETS			10 SF	X	-	-	-	
1ST FLOOR -BOILER RO		-		X	PIPE FITTINGS INSULATION	אכ		45 LF 240 SF	X	+	-	-	
1ST FLOOR-BOILER RO				X	VAT & MASTIC			3,000 SF	X				
1ST FLOOR - CAFETER				Х	JOINT COMPOUND			5,700 SF	X			-	
1ST FLOOR - CAFETER	RIA			X	COVE BASE MASTIC			175 SF 25 LF	X	-	-	-	
1ST FLOOR - CAFETER				X	PIPE INSULATION DUCT INSULATION			770 SF	X				SANSAN MARKATAN
1274 5 000 1750 00		400000	1	1						_		_	

" Registered Waste Hauler (RANSPORT , LLC	NJDEP Waste Hauler ID No. 26981	Cubic Yards of Waste 1	Name of Registered Landfill GROWS LANDFILL	
City, State KEARNEY, NEW JERSEY		Disposal Date 6/23/11-05/15/2012	MORPHAVILLE, PA	A 1
Completed by (Print or Type) BENJAMIN SANCHEZ	Title DIRECTOR OF OPER	RATIONS Signature	Date 4-	9-11



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

Date of Notification (1)						Building C		Operator (2	)				544.15	10.72 -0.	
	44					dress		17		一百,	-11	11/7	II.,		ice.
_	111 Notification		Week to the second			LAZA					!	W	15		
	nitial Notificatio	n		City.	State	, Zip Code			F=\ \ \	-				111111	
DEP X	Amended Notific		<b>‡</b> 7					SEY 07095		. 7	1	2012	)		
W 1000	Cancellation			-					J 100			LUIL		11-/	
A	On Hold	IOTIFIC	ATION			Contact ERULO			Telephone Nur	nber					
DCAI	EMERGENCY N	MOTIFIC	AHON				TION		ASEL			6 H I	V.	1	+
Name of Facility Where Abateme	- ti- Taking Di	202 /2\		FACIL	LITY	INFORMA		of Facility			VSING		X		- 7
Name of Facility Where Abateme	III IS TAKING FI	ace (3)					Турс	School (K-		********			-		3
HESS PLAZA					-		x	Subchapte	er 8 (Other than I			mes		orthogo -	je i
Street Address								uare Feet	# of Floors		30., 110		ldg. A		
1 HESS PLAZA								187,000	13				42		
City (5)	County (6)		T	Coun	ty C	ode (7)	Curre	ent Use (Pri	ior if being demo	olished	1)				
WOODBRIDGE	VIIDDLESEX			(STATE	E USI	E ONLY)		MERCIAL O	PARTICIPATION OF THE PROPERTY						
Name of Monitoring Firm Hired b	y Building Ow	ner (8)			Α	SCM No. 17			ment Contracto MENTAL CORPO		ION	1587470		9,898	100000
Street Address							Stree	et Address							2.519000
1600 ROUTE 22								SPOOK RO							
City, State, Zip Code		W-IF F	2/10					State, Zip (							
The state of the s	ON, NEW JERS	_					_		V YORK 10901		leant -				_
Project Manager for Monitoring Firm	n		one N				1 .	phone Num	ber Lice	ense N	Numbe	er .			
MIKE NEHLSEN	10.1	908-37			141			369-7500 e of OSHA				-			
Expected State Date (10) 6 / 23 / /	11	ea. Con 5 /		n Date (1 30/	11)	12			RONMENTAL						
Month Day Yea		onth		Day		Year	1000								
Occupancy Status During Abateme							100000000000000000000000000000000000000	t Address							
Facility Closed/Vacated							1376	ROUTE 9	W						
Abatement Performed C					ribe:		City	State, Zip C	`ada			3341.30	C-Sum		
X Other - Describe:	MON FRI. 6:00	J PINI - 2	.30 AN	1			City,	State, Zip C	WAPPINGER	S FAL	LS, N	Y 125	90		
Scope of Work (Check all that apply	0					Full Conta	i ainmen	t with Nega	tive Pressure						
Demolition		ovation				Mini-Encl	O: ,								
>3SF OR LF	,				X	Gloveba									
X   >160 SF OR						Non-Friat				T		Abate	man	t Type	
Location of Asbestos-containing	100	Location mally us	30/70 3			ription of As ning Materi			Amount	N			_		
Material (ACM)	7.000	olely by				Thermal sy			(Specify	REMOVAL	REPAIR	ENCAPSULE	ENCLOSURE		
TO BE ABATED	- 1	nt/Custo	4	in	sulat	ion, surfac	ing, VA	т,	SF or LF)	18	É	PS	100		
in Facility (13)		taff (12			or oth	ner miscella	aneous	)		15		E	S		
	Yes	No I	I/A							+	+-	1111	1		
ADD SLOOP SATIRE		-	1	AT & MAS	STIC				8,005 SF	x	+-	+	+		
3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE			_	PE FITTI					75 LF	X	+	+-	+		-
3RD FLOOR - ENTIRE		5		DINT COM					12,180 SF	X					
3RD FLOOR - ENTIRE		)	C	OVE BAS	E MA	ASTIC			495 SF	Х					
3RD FLOOR - ENTIRE		)		AR .			(F)//		25 SF	X	1	-	+		
2ND FLOOR- ENTIRE				AT & MAS					8,005 SF 495 SF	X	+-	+-	+-		
2ND FLOOR- ENTIRE		1		OVE BAS					12.180 SF	x	+-	-	+		ille e e
2ND FLOOR- ENTIRE 2ND FLOOR- ENTIRE		2		AR	VIPO	OND	-		25 SF	X	+		1		
2ND FLOOR- ENTIRE		1	_		NGS	INSULAT	ON		380 LF	X					02
PLAZA-ENTIRE		X		AT & MAS	-				12,425 SF	Х					
PLAZA-ENTIRE		×	C	OVE BAS	E MA	ASTIC			495 SF	Х	_		1		
PLAZA-ENTIRE		X		DINT COM					18,820 SF	X	-	-	+		_
PLAZA-ENTIRE		X			CAL	PLASTE	₹		7,275 SF 25 SF	X	+	+	+		-
PLAZA-ENTIRE		X		AR DE EITTI		INSULATION	NC		200 LF	x	+	+	+		
PLAZA-ENTIRE  1ST FLOOR-MECHANICAL ROOM		X		JCT INSU			-		665 SF	X	1	1	+		
1ST FLOOR-WECHANICAL ROOM		X				INSULATION	NC		207 LF	X					
1ST FLOOR-MECHANICAL ROOM		X		BRATION					4 SF	X			L		
1ST FLOOR-MECHANICAL ROOM		X		ASKETS					10 SF	X		-	-		
1ST FLOOR -BOILER ROOM		×	-			INSULATION	NC		45 LF	X	-		+		
1ST FLOOR-BOILER ROOM		X		JCT INSU		ION	-		240 SF	X	-	-	+		
1ST FLOOR - CAFETERIA		X		AT & MAS		IND			3,000 SF 5,700 SF	X	-		+		
1ST FLOOR - CAFETERIA 1ST FLOOR - CAFETERIA		l x		OVE BAS			-		175 SF	X	1	1	1		97.
1ST FLOOR - CAFETERIA		X		PE INSUL					25 LF	X	T				THE STATE
13TH FLOOR - MER ROOM		X		JCT INSL					770 SF	Х					
					-	The second from the second second									

Completed by (Print or Type) BENJAMIN SANCHEZ	Title DIRE	CTOR	OF OPER	RATIONS Signature	XXX	C	Date	91	26/1
City, State KEARNEY, NEW JERSEY				Disposal Date 6/23/11-05/15/2012	City, State			01	1.
Name of Registered Waste Hauler DJM TRANSPORT , LLC	-	NJDEP Hauler 26		Cubic Yards of Waste 1	Name of Regis				
1ST FLOOR STORAGE ROOM			X	VAT & MASTIC		300 SF	X		
of FLOOR STORAGE ROOM			X	PIPE FITTINGS		13 LF	X		
LOOR HALLWAY			X	PIPE FITTINGS		20 LF	X		



1.					<b>IFICATION</b>	OF		S ABATEMENT ad 12:120-7)	and the second of the second	of the part	cathan break	an ottak da	والادوان والموائد	S = 1 + 1 + 1 + 1 + 1
Date of Notification (1)					Nam	e of		wner/Operator (2	FAE	5 [E			E	
9 /	28 /11				Stree	et Ad	Idress		11,27,	W (#				
Agencies Notified	Type Notification	n			1 HE	SSF	PLAZA		100					
EPA DEP X DOL	Initial Noti X Amended Cancellati	Notific		#8			e, Zip Code RIDGE, NE	W JERSEY 07095		A, N		20	TZ.	
X DOH DCA	On Hold EMERGER	NCY N	IOTIF	CATION		15.000	Contact ERULO		Telephone Nur	to the same	S CU	MIRC ING	L &	nontil)
					FACII	LITY	INFORMA		Les essertations and the				- and other	
Name of Facility Where	Abatement is Taki	ng Pla	ice (3	3)				Type of Facility		a selection of	1 (22)	and the second		
HESS PLAZA									er 8 (Other than private & commo		ıs ho	mes.	etc.)	
Street Address						STATE OF		Square Feet	# of Floors	T	0., 110		dg. Ag	e
1 HESS PLAZA								187,000	13				42	22
City (5) WOODBRIDGE	County (6						ode (7) SE ONLY)	Current Use (Pr	ior if being demo	olished	)			
Name of Monitoring Fi			ner (8	)	•	1	ASCM No.	Name of Abate	ment Contracto	r (9)	CHRISTY	100000000	37456	
HILLMANN ENVIRONM		350	700				17		MENTAL CORPO	ORATI	ON			
Street Address			V-1212			ST-1//62		Street Address	20K DO 45					
1600 ROUTE 22								313 SPOOK RO				-	-	
City, State, Zip Code	LINION MEM	IEDO	EV 0	7082				City, State, Zip SUFFERN, NEV						
Project Manager for Mor	UNION, NEW	JERS	-		Number			Telephone Num		ense N	lumbe	er		
MIKE NEHLSEN	morning / min			377-56				845-369-7500	460					
Expected State Date (1	0)	Sche			ion Date (1	11)		Name of OSHA	Monitor					
6/	23 / /11		5	1	30/	- 52	12	QUALITY ENVI	RONMENTAL					
Month Day			onth		Day		Year	Street Address					-	
Occupancy Status Durin	g Abatement (Check ed/Vacated During E			of Abo	tament			1376 ROUTE 9	w					
	ed/vacated During El Performed Outside of					ribe:		IO/O NOO! E O						
X Other - Desc					SAT. & SU			City, State, Zip	Code					
Demolition >3SF OR LF X >160 SF OR	X	Reno				X	Mini-Encl Gloveba Non-Fria	g Procedure ble Procedure	ative Pressure			Abote	mont	Type
Locatio			Local nally			TO 100 TO	cription of A sining Mater		Amount	70	70		ment	]
Asbestos-co Material			olely		·		Thermal s		(Specify	M	REPAIR	NO.	NO.	
TO BE A				todial	in		ition, surfac		SF or LF)	REMOVA	É	ENCAPS	ENCLOS	
in Facilit	y (13)		taff (1	-		or of	ther miscell	aneous)		15		ULE	URE	
		Yes	No	N/A					<b></b>	+	+	1111	1m	
2DD ELOOP, ENTIRE		-	-	X	VAT & MAS	STIC	,	<del></del>	8,005 SF	x	1		1	
3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE		-		x	PIPE FITTI				75 LF	X				
3RD FLOOR - ENTIRE				Х	JOINT CO	_			12,180 SF	Х				
3RD FLOOR - ENTIRE				Х	COVE BAS	SE M	ASTIC	2000	495 SF	X	-	1	-	
3RD FLOOR - ENTIRE				X	TAR	CTIC			25 SF 8,005 SF	X	-	+-	+	
2ND FLOOR-ENTIRE		-	-	X	COVE BAS	_			495 SF	x	-	-	1	
2ND FLOOR- ENTIRE 2ND FLOOR- ENTIRE				X	JOINT CO				12,180 SF	X			1	
2ND FLOOR- ENTIRE				X	TAR				25 SF	Х				
2ND FLOOR- ENTIRE	100000			Х	A 40 (19 (5))	INGS	INSULAT	ION	380 LF	Х			1	
PLAZA-ENTIRE					VAT & MAS	-			12,425 SF	X	-	-	-	
PLAZA-ENTIRE				-	COVE BAS	-			495 SF	X	-	-	-	
PLAZA-ENTIRE		-		X	JOINT COL		UND L PLASTE	P	18,820 SF 7,275 SF	X	-	+	-	
PLAZA-ENTIRE PLAZA-ENTIRE		-	-	X	TAR	· ·	LICASIC		25 SF	X	1			
PLAZA-ENTIRE				1		NGS	INSULATI	ON	200 LF	Х				
1ST FLOOR-MECHANIC	CAL ROOM			-	DUCT INS				665 SF	Х				
1ST FLOOR-MECHANIC				-			INSULATI	ON	207 LF	X	-	-	-	
1ST FLOOR-MECHANIC					VIBRATION		.ОТН		4 SF	X	-	-	-	
1ST FLOOR-MECHANIC		-		X	GASKETS DIDE EITTI		INSULATI	ON	10 SF 45 LF	X	-	-	+	
1ST FLOOR -BOILER R		-		1	DUCT INSI				240 SF	x	-	-	1	
1ST FLOOR - CAFETER				X	VAT & MAS		-		3,000 SF	X			I	
1ST FLOOR- CAFETER				X	JOINT CO				5,700 SF	X				
1ST FLOOR - CAFETER	RIA			-	COVE BAS				175 SF	Х		1	-	
1ST FLOOR - CAFETER				_	PIPE INSU				25 LF	X	-		-	
13TH FLOOR - MER RO	MOO			X	DUCT INSI	ULA"	HON		770 SF	X	_		1	

Completed by (Print or Type) BENJAMIN SANCHEZ	Title	CTOR	OF OPER	RATIONS	110		Date 9	12	8/ /l
City, State KEARNEY, NEW JERSEY				Disposal Date 6/23/11-05/15/2012	City, State MORRISVILLE,	-		1	-111
me of Registered Waste Hauler NJDEP Wast M TRANSPORT , LLC Hauler ID No 26981			ID No.	Cubic Yards of Waste 1	Name of Registe GROWS LANDI				
ST FLOOR STORAGE ROOM			X	VAT & MASTIC		300 SF	X		
FLOOR STORAGE ROOM			X	PIPE FITTINGS		13 LF	Х		
LOOR HALLWAY			X	PIPE FITTINGS		20 LF	X		



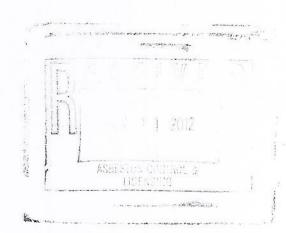
				Y		11 1			1	
7		NOT	State of New Jerse	ABATEMENT		1				
			Pursuant to NJAC 8:60-7 and Name of Building Ov HESS CORPORATIO	d 12:120-7) wner/Operator (2	600	: 1	2012	1	1	
Date of Notification (1)			Street Address	111	N JAN	1			-	1 1
10 / 14 /11 Agencies Notified Type Notification	ion		1 HESS PLAZA			o and	TREE .	ů Či	.)-	and the same of th
DEP Amende	tification d Notificati	on	City, State, Zip Code WOODBRIDGE, NEV	V JERSEY 07095	ASBEST	ICENS!	NG		2 12 19 1 W	
X DOL Cancella X DOH X On Hold			Name of Contact		Tolonhone Nur	nher	No. Bell Co. Co.	4	main/Emails	and down
A 3011	ENCY NOT	TIFICATI		ry No		er =				
		(8)	FACILITY INFORMAT		-//)				-	
Name of Facility Where Abatement is Ta	king Place	(3)		Type of Facility School (K						
HESS PLAZA					er 8 (Other than I		s., home	es, etc	c.)	104574
Street Address 1 HESS PLAZA				Square Feet 187,000	# of Floors				. Age	1
City (5) County	(6)		County Code (7)		ior if being demo	lished)				
WOODBRIDGE MIDDLE		(0)	(STATE USE ONLY) ASCM No.	Name of Abate	OFFICE ment Contracto	r (9)				
Name of Monitoring Firm Hired by Build HILLMANN ENVIRONMENTAL	ing Owner	(8)	17		MENTAL CORPO	2013/150	NC			
Street Address				Street Address	OCK BOAD					
1600 ROUTE 22 City, State, Zip Code	-			City, State, Zip						
UNION, NEV	V JERSEY	07083		SUFFERN, NEV				an Digital		
Project Manager for Monitoring Firm	1000		Number	Telephone Num	ber Lice	ense Nu	umber			
MIKE NEHLSEN		08-377-50 Comple	644 tion Date (11)	845-369-7500 Name of OSHA					3355	
Expected State Date (10) 6 / 23 / /11	Julieu.	5 /	30/ 12	QUALITY ENVI						
Month Day Year  Occupancy Status During Abatement (Chec	Month		Day Year	Street Address						
Facility Closed/Vacated During  Abatement Performed Outside of	Entire Perio	od of Aba		1376 ROUTE 9	w	.=,				
X Other - Describe: MON F	RI. 6 PM -	2:30 AM	SAT. & SUN 7AM-3:30PM	City, State, Zip		C EALL	e NV 1	2500	ř.	
Scope of Work (Check all that apply)			Full Conta	 inment with Nega	WAPPINGER tive Pressure	5 FALL	.5, 141 1	2590	r.	
Demolition X	Renovat	tion	Mini-Enclo	7						
>3SF OR LF				Procedure le Procedure						
X >160 SF OR	Islo	cation	Description of As			T	Ab	atem	ent T	уре
<b>Asbestos-containing</b>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	lly used	Containing Materia	al (ACM)	Amount	RE	R	T Z	EN	
Material (ACM) TO BE ABATED		ely by Custodial	(ie. Thermal sys insulation, surfacil		(Specify SF or LF)	MOVAL	PAIR	ENCAPSIII	ENCLOSURE	
in Facility (13)	A 1000 CO	f (12)	or other miscella			AL	~ 0	=	SUR	
	Yes No	o N/A				+-		n	m ]	
3RD FLOOR - ENTIRE		x	VAT & MASTIC		8,005 SF	x				
3RD FLOOR - ENTIRE		Х	PIPE FITTINGS		75 LF	X			-00	
3RD FLOOR - ENTIRE		X	JOINT COMPOUND  COVE BASE MASTIC		12,180 SF 495 SF	X		+		
3RD FLOOR - ENTIRE 3RD FLOOR - ENTIRE	++	X	TAR		25 SF	X				
2ND FLOOR- ENTIRE		Х	VAT & MASTIC		8,005 SF	X		4		
2ND FLOOR- ENTIRE	++	X	JOINT COMPOUND		495 SF 12,180 SF	X	-	-		
2ND FLOOR- ENTIRE 2ND FLOOR- ENTIRE	++	X	TAR		25 SF	X		7		
2ND FLOOR- ENTIRE	++	X	PIPE FITTINGS INSULATION	ON	380 LF	Х				
PLAZA-ENTIRE		Х	VAT & MASTIC		12,425 SF	X		-		
PLAZA-ENTIRE		X	COVE BASE MASTIC		495 SF 18,820 SF	X	-	+		
PLAZA-ENTIRE PLAZA-ENTIRE	++	X	JOINT COMPOUND  ACCOUSTICAL PLASTER	!	7,275 SF	x		+		
PLAZA-ENTIRE PLAZA-ENTIRE		X	TAR ·	×-1	25 SF	X				
PLAZA-ENTIRE		Х	PIPE FITTINGS INSULATION	ON	200 LF	X		-		
1ST FLOOR-MECHANICAL ROOM		X	DUCT INSULATION PIPE FITTINGS INSULATION	)N	665 SF 207 LF	X	-	+		-
1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-MECHANICAL ROOM	+	X	VIBRATION CLOTH	<u> </u>	4 SF	x				
1ST FLOOR-MECHANICAL ROOM		X	GASKETS		10 SF	Х				
1ST FLOOR -BOILER ROOM		Х	PIPE FITTINGS INSULATION	N	45 LF	X				
1ST FLOOR-BOILER ROOM			DUCT INSULATION		240 SF	X	-	-		
1ST FLOOR - CAFETERIA	+-+	X	VAT & MASTIC JOINT COMPOUND		3,000 SF 5,700 SF	X		+		-
1ST FLOOR- CAFETERIA 1ST FLOOR - CAFETERIA	+-	X	COVE BASE MASTIC		175 SF	X				
1ST FLOOR - CAFETERIA		X	PIPE INSULATION		25 LF	Х				
13TH FLOOR - MER ROOM		X	DUCT INSULATION		770 SF	X				

Completed by (Print or Type) BENJAMIN SANCHEZ	Title DIRE		OF OPER	RATIONS	Signature	8 V X		ate	101	14/11		
City, State KEARNEY, NEW JERSEY				Disposal ( 6/23/11-05	5/15/2012	City, State				1.11		
Name of Registered Waste Hauler DJM TRANSPORT , LLC		Hauler		Cubic Yar	ds of Waste 1	GROWS LAN	stered Landfill IDFILL					
ST FLOOR STORAGE ROOM			X	VAT & MA	ASTIC		300 SF	X				
FLOOR STORAGE ROOM		X				PIPE FITT			13 LF	X		
JOR HALLWAY			X	PIPE FITTINGS			20 LF	X				



					OF ASBESTOS NJAC 8:60-7 ar		FIF	0 [	1	11//	E L
Date of Notification (1)					e of Building O S CORPORATION	wner/Operator (2 ON		9 12			
11 / 4	/11			Stree	et Address			F-1	- 4		11111
Agencies Notified T	Type Notificatio	n		1 HE	SS PLAZA	j	U III JA	W	11	201	2 [[]
EPA [	Initial Noti	ification		City,	State, Zip Code		<del></del>				1
DEP	Amended	Notification	# 10			W JERSEY 07095	i Lan	07/01	000	Trends	
X DOL	Cancellati	ion								TROL	હ
X DOH	On Hold	NOV NOTIC	CATION		e of Contact		Telephone Nur	nber .	11011	u	wideling according to the control
DCA L	EMERGE	NCY NOTIF	CATION		ID CERULO			22	armit in	Q.F	STREET, Str. 2
Name of Facility Where Abat	tement is Taki	na Place (3	1	FACI	LITY INFORMAT	Type of Facility	(4)				y serging
value of Facility Where Abat	tement is raki	ing i lace (o	,			School (K					
HESS PLAZA							er 8 (Other than I	<b>(-12)</b>			
							private & commo	l. bldg	s., ho		
Street Address						Square Feet	# of Floors			В	ldg. Age
I HESS PLAZA						187,000	13	<u>.</u>	,		42
City (5)	County (6 MIDDLES	2000			rty Code (7) E USE ONLY)	COMMERCIAL	for if being demo	lished	)		
VOODBRIDGE Name of Monitoring Firm Hir				(SIAII	ASCM No.		ment Contracto	r (9)		-	
HILLMANN ENVIRONMENTA	Harris and a contract that the con-	y Owner (o)			17		MENTAL CORPO		ION		
Street Address						Street Address					
600 ROUTE 22						313 SPOOK RO				200012-12	
City, State, Zip Code						City, State, Zip					
	UNION, NEW					SUFFERN, NE			love t		
Project Manager for Monitoring	g Firm	1.323	phone Nu			Telephone Num	ber Lice	ense N	umbe	er	
MIKE NEHLSEN			377-5644		7.	845-369-7500 Name of OSHA					
expected State Date (10)	/11	Sched. Co	ompletior 5 /	30/	1)	QUALITY ENVI					
Month Day	Year	Month		Day	Year	GOVERN EIVE	COMMENTAL				
Occupancy Status During Abat			eroese com			Street Address					
Facility Closed/Vac Abatement Perform						1376 ROUTE 9	W				
X Other - Describe:	MON FR	RI. 6 PM - 2:3	30 AM			City, State, Zip (	Code				
>3SF OR LF X >160 SF OR						Procedure					
Location of		Is Locat									
Asbestos-containii					Description of As	sbestos-	Amount		-		ment Type
Material (ACM)	2.70	normally	used		ontaining Materi	sbestos- al (ACM)	Amount (Specify	REN	-		
Material (ACM) TO BE ABATED			used by	С		sbestos- al (ACM) stems	Amount (Specify SF or LF)	REMOV	-		
		normally i	used by todial	C	ontaining Materi (ie. Thermal sy	sbestos- al (ACM) stems ng, VAT,	(Specify	REMOVAL	REPAIR	ENCAPSU	ENCLOSU
TO BE ABATED		normally i solely t Maint/Cus Staff (1	used by todial	C	ontaining Materi (ie. Thermal sy sulation, surfaci	sbestos- al (ACM) stems ng, VAT,	(Specify	REMOVAL	-	ENCAPSU	ENCLOS
TO BE ABATED in Facility (13)		normally i solely t Maint/Cus Staff (1	todial 2)	in	ontaining Materi (ie. Thermal syn sulation, surfacil or other miscella	sbestos- al (ACM) stems ng, VAT,	(Specify SF or LF)		-	ENCAPSU	ENCLOSU
TO BE ABATED in Facility (13) RD FLOOR - ENTIRE		normally i solely t Maint/Cus Staff (1	used by todial 2) N/A X VA	in AT & MAS	ontaining Materi- (ie. Thermal synsulation, surfaci- or other miscella	sbestos- al (ACM) stems ng, VAT,	(Specify	X	-	ENCAPSU	ENCLOSU
TO BE ABATED in Facility (13)  RD FLOOR - ENTIRE RD FLOOR - ENTIRE		normally i solely t Maint/Cus Staff (1	by todial 2) N/A X VA	In AT & MAS	ontaining Materi- (ie. Thermal synsulation, surfaci- or other miscella	sbestos- al (ACM) stems ng, VAT,	(Specify SF or LF) 8,005 SF		-	ENCAPSU	ENCLOSU
TO BE ABATED in Facility (13)  RD FLOOR - ENTIRE RD FLOOR - ENTIRE RD FLOOR - ENTIRE		normally i solely t Maint/Cus Staff (1	used by todial 2) N/A X VA X PIF X JO X CC	IT & MASPE FITTII	ontaining Materia (ie. Thermal synsulation, surfaci- or other miscella STIC NGS	sbestos- al (ACM) stems ng, VAT,	(Specify SF or LF) 8,005 SF 75 LF 12,180 SF 495 SF	X X X	-	ENCAPSU	ENCLOSU
TO BE ABATED in Facility (13)  RD FLOOR - ENTIRE		normally i solely t Maint/Cus Staff (1	used by todial 2) N/A  X VA X PIF X JO X CC X TA	IT & MAS PE FITTII PINT CON OVE BAS	ontaining Materia (ie. Thermal synatulation, surfaction of other miscella  STIC NGS MPOUND E MASTIC	sbestos- al (ACM) stems ng, VAT,	(Specify SF or LF) 8,005 SF 75 LF 12,180 SF 495 SF 25 SF	X X X X	-	ENCAPSU	ENCLOSU
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KEARNEY, NEW JERSEY Completed by (Print or Type)	Title			6/23/11-05	5/15/2012 Signature	MORRISVILL		Date	11/2	1/11
City, State				Disposal [		City, State				
Name of Registered Waste Hauler DJM TRANSPORT , LLC		NJDEP Hauler 26		Cubic Yar	ds of Waste 1	Name of Reg GROWS LAN	istered Landfill IDFILL			
1ST FLOOR STORAGE ROOM			X	VAT & MA	ASTIC		300 SF	X		131.5
ST FLOOR STORAGE ROOM			X	PIPE FITT	INGS		13 LF	X		



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Name of Facility Where Abatement	t is Taking Pla	ace (3)				Type of Facility School (K						
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11 / 7 / /1	200	5	1	30/	12 Year	QUALITY ENVI	RONMENTAL					
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X Other - Describe: M	ION FRI. 6 P	M - 2:3	MA 0			City, State, Zip (	WAPPINGER	S FAL	LS. N	Y 125	90	
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PLAZA-ENTIRE			X F X V X V	FAR PIPE FITTI FAT & MAS COVE BAS IOINT COM	NGS INSULATI STIC SE MASTIC MPOUND		12,180 SF 25 SF 380 LF 12,425 SF 495 SF 18,820 SF 7,275 SF 25 SF	X X X X X X				
PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE			X	PIPE FITTI /AT & MAS COVE BAS IOINT COM ACCOUST FAR PIPE FITTI	NGS INSULATION TO THE MASTIC MPOUND ICAL PLASTER NGS INSULATION TO THE MASS INSULATION TO T	₹	12,180 SF 25 SF 380 LF 12,425 SF 495 SF 18,820 SF 7,275 SF 25 SF 200 LF	X X X X X X X				
PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE 1ST FLOOR-MECHANICAL ROOM			X	PIPE FITTI /AT & MAS COVE BAS IOINT COM ACCOUST FAR PIPE FITTI DUCT INSI	NGS INSULATION STIC SE MASTIC MPOUND ICAL PLASTER NGS INSULATION	R	12,180 SF 25 SF 380 LF 12,425 SF 495 SF 18,820 SF 7,275 SF 25 SF 200 LF 665 SF	X X X X X X X X				
PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-MECHANICAL ROOM			X	PIPE FITTI AT & MAS COVE BAS COUNT COM ACCOUNT FAR PIPE FITTI DUCT INSI	NGS INSULATION SE MASTIC MPOUND ICAL PLASTER NGS INSULATION NGS INSULATION NGS INSULATION	R	12,180 SF 25 SF 380 LF 12,425 SF 495 SF 18,820 SF 7,275 SF 25 SF 200 LF	X X X X X X X				
PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE 1ST FLOOR-MECHANICAL ROOM			X	PIPE FITTI /AT & MAS COVE BAS IOINT COM ACCOUST FAR PIPE FITTI DUCT INSI	NGS INSULATION STIC SE MASTIC MPOUND ICAL PLASTER NGS INSULATION NGS INSULATION NGS INSULATION NGS INSULATION	R	12,180 SF 25 SF 380 LF 12,425 SF 495 SF 18,820 SF 7,275 SF 25 SF 200 LF 665 SF 207 LF	X X X X X X X X X X X X				
PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-BOILER ROOM			X	PIPE FITTI AT & MAS COVE BAS C	NGS INSULATION SE MASTIC MPOUND ICAL PLASTER NGS INSULATION NGS INSULATION NGS INSULATION NGS INSULATION NGS INSULATION	R DN DN	12,180 SF 25 SF 380 LF 12,425 SF 495 SF 18,820 SF 7,275 SF 25 SF 200 LF 665 SF 207 LF 4 SF 10 SF 45 LF	X X X X X X X X X X X X X				
PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-BOILER ROOM 1ST FLOOR-BOILER ROOM			X	FAR PIPE FITTI /AT & MAX COVE BAS OINT COI ACCOUST FAR PIPE FITTI //IBRATION GASKETS PIPE FITTI //IBRATION GASKETS PIPE FITTI //IBRATION GASKETS PIPE FITTI //IBRATION GASKETS //IRRATION CONTROL //IRRATIO	NGS INSULATION STIC SE MASTIC MPOUND ICAL PLASTEI NGS INSULATION NGS INSULATION NGS INSULATION NGS INSULATION NGS INSULATION	R DN DN	12,180 SF 25 SF 380 LF 12,425 SF 495 SF 18,820 SF 7,275 SF 25 SF 200 LF 665 SF 207 LF 4 SF 10 SF 45 LF 240 SF	X X X X X X X X X X X X X X X X X X X				
PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR -BOILER ROOM 1ST FLOOR-BOILER ROOM 1ST FLOOR - CAFETERIA			X	FAR PIPE FITTI /AT & MAS COVE BAS OINT COP ACCOUST FAR PIPE FITTI /IBRATION GASKETS PIPE FITTI /IBRATION GASKETS PIPE FITTI /IBRATION GASKETS AT & MAS /AT & MAS	NGS INSULATION STIC SE MASTIC MPOUND ICAL PLASTEI NGS INSULATION NGS INSULATION NGS INSULATION NGS INSULATION NGS INSULATION STIC	R DN DN	12,180 SF 25 SF 380 LF 12,425 SF 495 SF 18,820 SF 7,275 SF 25 SF 200 LF 665 SF 207 LF 4 SF 10 SF 45 LF 240 SF 3,000 SF	X X X X X X X X X X X X X X X X X X X				
PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-BOILER ROOM 1ST FLOOR-BOILER ROOM 1ST FLOOR-CAFETERIA 1ST FLOOR- CAFETERIA			X	FAR PIPE FITTI /AT & MAS COVE BAS COVE	NGS INSULATION STIC SE MASTIC MPOUND ICAL PLASTEI NGS INSULATION NGS INSULATION NGS INSULATION NGS INSULATION NGS INSULATION STIC	R DN DN	12,180 SF 25 SF 380 LF 12,425 SF 495 SF 18,820 SF 7,275 SF 25 SF 200 LF 665 SF 207 LF 4 SF 10 SF 45 LF 240 SF	X X X X X X X X X X X X X X X X X X X				
PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR -BOILER ROOM 1ST FLOOR-BOILER ROOM 1ST FLOOR - CAFETERIA			X	FAR PIPE FITTI /AT & MAS COVE BAS COVE	NGS INSULATION SE MASTIC MPOUND ICAL PLASTER NGS INSULATION NGS INSULATION NGS INSULATION NGS INSULATION STIC MPOUND SE MASTIC LATION	R DN DN	12,180 SF 25 SF 380 LF 12,425 SF 495 SF 18,820 SF 7,275 SF 25 SF 200 LF 665 SF 207 LF 4 SF 10 SF 45 LF 240 SF 3,000 SF 5,700 SF	X X X X X X X X X X X X X X X X X X X				
PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE PLAZA-ENTIRE 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-MECHANICAL ROOM 1ST FLOOR-BOILER ROOM 1ST FLOOR-BOILER ROOM 1ST FLOOR - CAFETERIA 1ST FLOOR - CAFETERIA			X	FAR PIPE FITTI /AT & MAS COVE BAS	NGS INSULATION STIC SE MASTIC MPOUND ICAL PLASTES MGS INSULATION NGS INSULATION NGS INSULATION STIC MPOUND SE MASTIC LATION JLATION JLATION JLATION JLATION JLATION JLATION JLATION JLATION JLATION	R DN DN	12,180 SF 25 SF 380 LF 12,425 SF 495 SF 18,820 SF 7,275 SF 25 SF 200 LF 665 SF 207 LF 4 SF 10 SF 45 LF 240 SF 3,000 SF 5,700 SF	X X X X X X X X X X X X X X X X X X X				

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1ST FLOOR STORAGE ROOM	((0.500		X	VAT & M	ASTIC		300 SF	X		
Name of Registered Waste Hauler DJM TRANSPORT , LLC		Haule	P Waste or ID No. 26981	Cubic Ya	rds of Waste 1	Name of Regi GROWS LAN	istered Landfill			
City, State KEARNEY, NEW JERSEY				Disposal 6/23/11-0	Date 5/15/2012	City, State	E, PA		,	,
Completed by (Print or Type) BENJAMIN SANCHEZ	Title	CTOR	OF OPER	RATIONS	Signature	SXA		Date	117	4/11

