_		m - 70	4.400
	n.		-Arm
	-	31 14	Form

	NOTIFICA			W Jersey ESTOS ABA 8:60 and 12	ATEME 2:120)	NT	Chec	k#5719			_
G Proj # 2013-06	(Pur	suant to) MONO								
e of Notification (1)	N	ame of	Building Moor	Owner/Ope e	rator (2	201	JAN 17	PM 2: 5	8		\dashv
114/2013		treet Ac	dress			A.S.		•			_
encies Notified Type Notification	. 6	3 Egb	ert Av	enue		CAP.	& LICEI	LONI RO	L	é	
EPA Initial Amended	1	City, Sta Morris	te, Zip (town, l	ode NJ 07960		CD .		nhone Number			\dashv
DEP Amendment # Emergency (includi	ng	Vame 0	f Contac	t .	-		,				\dashv
DOH justification) Cancellation		Patric	ia Mod	FORMATIC)N	Type of Fac	ility (4)				
	e (3)	FAU				#	401				1
ame of Facility Where Abatement is Taking Plac Patricia Moore						Subch	(K-12) apter 8 (Oth (i.e. private 8	er than K-12) & commercial t	ouildings,	home	s,
Street Address						etc.)		f Floors	Bldg. A	ge	
63 Egbert Avenue						Square Fee	·				
City (5)				(7)		Current Us	e (Prior if be	eing demolishe	d)		
Morristown, NJ 07960		Count	y Code E USE O	NLY)	<u>:</u>	resident	ial	62-200-1122-2			
County (6) Morris			CM No.		Nam	ne of Abateme	ent Contracto	or (9)			
Morris Name of Monitoring Firm Hired by Building Own	er (8)	1		None and the		G Restor	ation, me				
n/a					Stre 10	et Address 5 Ryerson	Road				
Street Address					-	Ot-to Zin C	ode				
Ti- Code					Lir	ncoln Park,	NJ 07035	License N	0		
City, State, Zip Code		T Tolo	phone N	No.	Tel	ephone No.		00378	o .		100
Project Manager for Monitoring Firm		Tele	priorie	A700)	97	73-696-686 me of OSHA	Monitor				
T S	cheduled	Comple	tion Dat	e (11)	Na R	& G Resto	ration, Inc). 			
Start Date (10)	1/25/20	13			Ctr	reet Address					
01/25/2013 Occupancy Status During Abatement (Check	Only One)		7		11	05 Ryersor	n Road				
Occupancy Status During Facility Closed/Vacated During Entire Pe	eriod of Ab	atemen	t		Ci	the State Zip	Code	25			
Abatement Performed Outcome	al Facility F	lours			. L	incoln Par	k, NJ 070		<u>. </u>		
Other - Describe.								t with Negative	Pressure		
Scope of Work (Check All That Apply)	⊠ Re	enovatio	n			DKI Mini	-Enclosure				
N >3 efor≥3 lf		emolitio	n			Glov	ebag Proce	dure (*) and Non-Fri	able Proc	edure	<u>-</u>
≥160 sf or ≥260 lf						LI NOI	-Exemples,		1	Abate Tyl	
	Is	Locatio	n						\vdash		
	1	ormally d Solely	1	A-bactos	0	ription of ining Material	(ACM)	Amount (Specify	72	æ	Encapsulate
Location of Asbestos-Containing Material (ACM)	Ma	intenan	ce/	/: - th	armal S	ystems insula ng, VAT, or	ition,	SF or LF)	Removal	Repair	psu
TO BE ABATED	Cus	todial S (12)	tatt?.		surraci ther mi	iscellaneous)	1		/ <u>a</u>	-	ate
in Facility (13)		·	N/A		٠			40.16	X	-	+
	Yes	No	X		pipe	insulation		12 lf .	X	+-	\vdash
basement			X	thin duc	t insu	lation (wra	p & cut)	50 51	-+-	+-	+
basement		+-	+	-					-	+	+
	-	+	+	+				Registered La	ndfill	1_	
		1	NJDEP '	Waste	Cubic	Yards	Name of	w Resource	& Reco	overy	y Cer
			Hauler II	D No.	of Wa	1516	1				-
Name of Registered Waste Hauler		1	10563								
Name of Registered Waste Hauler B & G Restoration, Inc.			19563		Dispo	sal Date	City, Sta	wn, PA			
Name of Registered Waste Hauler B & G Restoration, Inc. City, State Lincoln Park, NJ			19563		01/28	sal Date 8/2013 Signature	Tullyto	wn, PA	Date 01/14	4/201	13

B & G Proj # 2013-10

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

Check # 5722

Date of Notification (1) 01/14/2013	0.0		Name	of Buildi	ng Owner/Operato	r(2)							
Agencies Notified Type Notificatio	n ,		Street 100	Address Madiso	n Avenue, Mea	ade C	2: 58						
DEP Amended Amendmen			City, S Morr	state, Zip istown,	Code NJ 07960	LICENSII	GTR€L.' VG		1.2.321				
DOH Emergency justification Cancellation	1)	ng	Name	of Conta	ct		Telephone I	lumbe	<u></u>				
Name of Facility Where Abatement is Taki	ng Place	(3)	FA	CILITY IN	FORMATION	Type of Facility	(4)		_	_	_		
Morristown Medical Center Street Address 100 Madison Avenue, Simon Win)0N		Su	<u>b</u> (3	School (K- Subchapte		-12) rcial bu	ıilding	ıs, hor	nes,		
City (5) Morristown, NJ 07960						etc.) Square Feet	# of Floors		Bldg.	Age			
County (6) Morris			County (STATE	Code (7) .n	Current Use (Pri	or if being demoi	ished)	۸1	S	ub		
Name of Monitoring Firm Hired by Building Birdsall Engineering	Owner (8)	ASC 001	M No. 7	7163 (O) S	of Abatement Co. G Restoration,	ntractor (9)	100	/0	7/1	~~		
Street Address 65 Jackson Drive					Street	Address Ryerson Road					-		
City, State, Zip Code Cranford, NJ 07016		-11			City, S	City, State, Zip Code Lincoln Park, NJ 07035							
Project Manager for Monitoring Firm Kevin Burns			7.000000000 Am 200	one No. 97-890	Teleph	Telephone No. License No. 973-696-6869 00378							
Start Date (10) 01/24/2013	Schedu 01/25			Date (11		Name of OSHA Monitor B & G Restoration, Inc.							
Occupancy Status During Abatement (Chec Facility Closed/Vacated During Entire					Street	Address Ryerson Road							
Abatement Performed Outside of Norr Other – Describe:	nal Facilit	ty Houn	s		City, St	tate, Zip Code oln Park, NJ 07	035						
Scope of Work (Check All That Apply)	n=d		20202										
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolii				Mini-Enclosure Glovebag Proc		*					
	ls	s Locati	ion			Non-Exempled	() and Non-Fila	DIE PIC	Abat	emen	t		
Location of Asbestos-Containing Material (ACM)		Normal ed Sole		Acho	Description of			-	T	уре	Г		
TO BE ABATED In Facility (13)		aintenar stodial S (12)			stos Containing Ma thermal systems surfacing, VAT other miscellane	insulation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure		
Retail Pharmacy area	Yes	No	N/A X		nino inovitati		05.11			ē	0		
Retail Pharmacy area	-	-	X		pipe insulati asbestos fittir		65 lf	X	_	_	_		
Retail Pharmacy area			X	Fibe	glass assoc w		12 fittings 25 lf	X	-				
ame of Registered Waste Hauler		T N	JDEP W	aste	Cubic Yards	Non/5	aminta						
& G Restoration, Inc.		Ha	auler ID 9563		of Waste		egistered Landfil Resource & F		ery (Cent	er		
ity, State ncoln Park, NJ					Disposal Date 01/25/2013	City, State Tullytown	n, PA	W.					
					The second secon	1	The state of the s						

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N.	P			to NJAC					RE	ra ra	V 2 n			
Date of Notification (1) 01/14/2013				of Building ship of L			(2)	2/	RE Name		\$ 1.	I.I		
	lotification		Street A	Address outh Liv	ingsto	n Ave		fi :	013 JAH	17 P	M 2	: 58	}	
DEP A	mended mendment #	2000		ate, Zip Co ston NJ)		8	& Lic	FWC	ijĴi	ROL	_	
Ŭ DOH _ ju	mergency (including stification) ancellation		Name of	of Contact					Teleph	one Nur	nber			
			FAC	ILITY INF	ORMAT	ION			1		-	, i +		
Name of Facility Where Abateme Monmouth Court Commun		(3)					prome	of Facility (School (K-1						
Street Address 11 Monmouth Ct.		A		1				Subchapter	8 (Other the	nan K-12 mmerci	2) al buil	dings	hom	es,
City (5) Livingston								e Feet	# of Flo	ors	E	ldg. A	\ge	
County (6) Essex				Code (7) USE ONLY)				or if being o					
Name of Monitoring Firm Hired by Environmentral Connection)	ASCN 0003				me of Abatement Contractor (9) avic Construction Corp							
Street Address 120 North Warren Street		-	1,	4.0			Addres Route	s 46 Suite	15					
City, State, Zip Code Trenton, New Jersey 0860	renton, New Jersey 08608						City, State, Zip Code Totowa, NJ 07512							
	oject Manager for Monitoring Firm					Teleph	one No).	2.30	cense N	0.			
Start Date (10) 01/25/2013	Schedu 01/27	led Con		92-4200 Date (11)		Name	of OSH	A Monitor struction						
Occupancy Status During Abaten			70				Addres		ООГР		-			- 22
Facility Closed/Vacated Duri Abatement Performed Outsi Other – Describe:	ng Entire Period of de of Normal Facilit	Abatem	nent				Route	46 Suite	15					
						The state of the s		J 07512						
Scope of Work (Check All That All ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	X	Renova Demoliti				×	Mini Glov	i-Enclosure vebag Prod		*				
l continue of	100	s Locati Normall			_								emeni pe	t
Location of Asbestos-Containing Material TO BE ABATED In Facility (13)	(ACM) Us	ed Solel aintenar stodial S (12)	ly by nce/ Staff?	Asbes (i.e.	tos Con thermal surfa	scription taining M I systems icing, VA miscellan	laterial s insulat T, or	(ACM) tion,	Amou (Spec SF or	ify	Removal	Repair	Encapsulate	Enclosure
Cofetania	Yes	No	N/A						05.1	_	_			
Cafeteria Cafeteria		X		V		Fitting o-cut TS		_	25 L 20 L		x		х	X
Garotona	<u> </u>		· •	votria	-cut re	or ripe		20 L		Α.				
Name of Registered Waste Haule	100000	JDEP Wauler ID			Yards	211000000	Name of	Registered	Landfill					
Savic Construction Corp				NO.	of Wa 10 yr			GROW	S					
City, State Totowa NJ	1/				Dispo	sal Date		City, State Morrise	e ville, PA					
Completed by Sava Savic	Title Pres	ident	25 (4)		- S	Signature	na	da	~ić	Dat 01	e /14/2	013		

State of New Jersey 1301-4593 NOTIFICATION OF ASBESTOS ABATEMENT Check #4886 (Pursuant to N.J.A.C. 8:60 and 12:120)

Agencies Notified Type Notification Street Address Street Address	
DEP	
□ DEP □ Initial City, State & Zip Code □ DOL □ Amended # Elmer, NJ □ DOH □ Emergency Name of Contact. Telephone N	
Name of Contact.	
Name of Contact.	
	umber
	O.
FACILITY INFORMATION	
Name of Facility Where Abatement is Taking Place (3) Type of Facility (4)	
Elmer Hospital School (K-12)	
Street Address Subchapter 8 (Other than K-12)	23
501 Front Street	tc.)
Square Feet # of Floors Bldg. Age	
City (5) County (6) County Code (7)	
Elmer Salim Current Use (Prior if being demolished)	
Bay	
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9)	
Health & Safety Services AbateTech, Inc.	
Street Address Street Address	
318 12 th Street PO Box 25	
City, State & Zip Code City, State & Zip Code	
Hammonton, NJ 08037 Lumberton, NJ 08048	
Project Manager for Monitoring Firm Telephone Number Telephone Number License Number	
Jim Proctor 609-704-8850 609-265-2107 00529	
Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor	
1/23/13 1/25/13 EMSL Analytical	
Occupancy Status During Abatement (Check only one) Street Address	
Facility Closed/Vacated During Entire Period of Abatement 108 Haddon Ave.	
Abatement Performed Outside of Normal Hours – City, State & Zip Code	
Describe: Westmont, NJ 08108	
Facility Occupied During Abatement	
Scope of Work (Check all that apply)	
Full Containment with Negative Pres	sure
☐ ≥3 sf or ≥3 lf ☐ Mini-Enclosure	sure
	sure
□ ≥3 sf or ≥3 lf □ Renovation □ Mini-Enclosure □ ≥160 sf ≥260 lf □ Demolition □ Glove Bag Procedures □ Non-Exempted and Non-Friable Procedures	
□ ≥3 sf or ≥3 lf □ Renovation □ Mini-Enclosure □ ≥160 sf ≥260 lf □ Demolition □ Glove Bag Procedures □ Non-Exempted and Non-Friable Procedures Location of Is Location Description of Amount Abatement	edure
≥3 sf or ≥3 lf Renovation Mini-Enclosure ≥160 sf ≥260 lf Demolition Glove Bag Procedures Non-Exempted and Non-Friable Procedures Non-Exempted and Non-Friable Procedures Location of Asbestos-Containing Is Location Normally Used Description of Asbestos-Containing Amount Abatement Asbestos-Containing Normally Used Asbestos-Containing (Specify	edure
⊇3 sf or ≥3 lf ☐ Renovation ☐ Mini-Enclosure ☐ ≥160 sf ≥260 lf ☐ Demolition ☐ Glove Bag Procedures ☐ Non-Exempted and Non-Friable Procedures ☐ Normally Used Asbestos-Containing Material (ACM) Amount Abatement Asbestos-Containing (Specify Material (ACM)	edure nt Type
⊇3 sf or ≥3 lf ☐ Renovation ☐ Mini-Enclosure ☐ ≥160 sf ≥260 lf ☐ Demolition ☐ Glove Bag Procedures ☐ Non-Exempted and Non-Friable Procedures ☐ Normally Used Asbestos-Containing Material (ACM) Amount Abatement Asbestos-Containing (Specify Material (ACM)	edure nt Type
⊇3 sf or ≥3 lf ☐ Renovation ☐ Mini-Enclosure ☐ ≥160 sf ≥260 lf ☐ Demolition ☐ Glove Bag Procedures ☐ Non-Exempted and Non-Friable Procedures ☐ Normally Used Asbestos-Containing Material (ACM) Amount Abatement Asbestos-Containing (Specify Material (ACM)	edure nt Type
≥3 sf or ≥3 lf	edure
≥3 sf or ≥3 lf	edure nt Type
≥3 sf or ≥3 lf	edure nt Type
≥3 sf or ≥3 lf	edure nt Type
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Noover

State of New Jersey 1212-456 NOTIFICATION OF ASBESTOS ABATEMENT Check # (Pursuant to N.J.A.C. 8:60 and 12:120)

1212-4588 Check #4822

Date of Notification	(1) 1/10/13		1	Vame	of Bu	uilding	Owner / Operat	tor ((2) <i>20</i>	13 JAN 17		Pro f				
Agencies Notified	Type Notific	ation			t Addı		irmaceuticai	Cor	poration		PH	2:5	Ó		-	
⊠ EPA	, , po rround	ation				ook La	ane :									
☐ DEP	☐ Initia	ıl.				& Zip (74	& LICEN	- 374	180	,			
□ DOL		nded #3	(Cher	ry Hi	II, NJ	08034			· LICEN	SHIP	110				
□ DOH		rgency	1	Vame	of Co	ontact	11				Te	lepho	ne A	lumb	er	
☐ DCA	☐ Can	cellation		John	Reb	er					ľ				7	
				FA	CILIT	Y INF	ORMATION			77	9					
Name of Facility Wh			lace (3				Type of Fac	ility	(4)							
West-Ward Phare	maceutical	S					School	(K-1	12)							
Street Address							Subcha	apter	8 (Other tha	an K-12)						
2 Esterbrook Lan	ie									nmercial buil	dings	, hom	es, e	etc.)		
							Square Fee	t	# of Flo	ors	Bld	g. Ag	е			
City (5)		County (6)	Cou	unty (Code	(7)										
Cherry Hill		Camden						e (Pri	ior if being d	emolished)						
	=	L		-1610018	Torri		Office									
Name of Monitoring 1 Source Safety 8	Firm Hired b	by Building Owi	ner (8)		ASC	CM No.	o. Name of Abatement Contractor (9) AbateTech, Inc.									
Street Address	x riedilii								ic.					_		
140 South Village	Ave. Suite	e 130					Street Address PO Box 25									
City, State & Zip Co							City, State & Zip Code									
Exton, PA 19341							Lumberton, NJ 08048									
Project Manager for	Monitoring F	irm	Telepl			ber	Telephone Number License Number									
Brian Hovendon	(40)		610-5				609-265-21					0052	9	1.61		
Scheduled Start Dat 1/7/13	e (10)	Scheduled Cor	npletioi 1/18/		te (11)	Name of OS EMSL Ana									
Occupancy Status D							Street Addre	_							i	
		During Entire P			ateme	nt	108 Haddo		220-01-020-							
	Performed O	utside of Norm	al Hou	rs			City, State 8									
Describe:							Westmont	, NJ	18108							
Facility Occu																
Scope of Work (Che	ck all that ap	ppiy)			10				Full Con	tainment with	n Neo	ative	Pres	eura		
≥3 sf or ≥3 lf			\boxtimes	Ren	ovatio	on		H	Mini-Ene			duvo	1 100	Jour	•	
≥160 sf ≥260) If		П		nolitio			Ħ		ag Procedure	25					
								Ø	Non-Exe	mpted and N	lon-F	riable	Pro	cedu	ire _	
95 SS 33	cation of			ocati			Descriptie			Amount		Aba	teme	ent-F	ype	
	os-Containin erial (ACM)	g	Norm	ally t lely t			Asbestos-Col	ntain	ning	(Specify		+		_		
	E ABATED	1	Mainte				Material (A (i.e., thermal			SF_or-L-F)	20	711	Enc	ᄪ	
	Facility		Custo			i	nsulation, surfa					Remova	Repai	aps	clos	
	(13)			(12)			or other miscel	llane	eous)			val	Ħ	Encapsulate	Enclosure	
			Yes	No	N/A									o o	l (t)	
Old Line 406 Area					M		Floor tile &			1,500 SI		$ \boxtimes $				
Old Equipment Pr	rep Area (2	31)	닖				Floor tile &			50 SF	-		Ц	Ц	Ш	
Old O2 Lab (165)			井	H		2X	layer Floor ti	le &	Mastrc	336 SF (N	[F)]		님	님	Н	
	H	H	H							H	님	님	H			
			H	H	H							H	뮈	H	H	
Name of Registered	Waste Haule	er l		IN.I	DEP V	Vaste	Cubic Yards	Na	ame of Regis	stered Landfi			Ш	Ш	ш	
, , , , , , , , , , , , , , , , , , ,				0.000	uler IE	STATE OF THE PARTY OF	of Waste		anio or regio	XOIOG EGITGII						
AbateTech, Inc.					1875	50	TBD	TF	RRF Landf	ill						
City, State							Disposal Date		ty, State							
Lumberton, NJ	- .			l-			1/18/13	Tu	ullytown, P	Ά			-			
Completed By (Print Gwen Trumbetti	or Type)			Titl	e f ice		Signature	1	100	/:	1000	ate	4.0			
Owen Humbetti				835 - 18	ord.		1		$\gamma \nu \nu \nu$		1	/10/	13			
	1977277			00	viu.			1	•							

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

Cleck+ 1220

Date of Notification (1)		(PURSUA		Building Ov		ALCOHOL STREET	- M	UNIT.		<i>a.a.</i> c		
01 / 16 / 13		7 . 11 1	AT&T		門也	1.17-14	1 - :-	Denne og	Ä,			
Agencies Notified Type of N	otification		Street Ac		201-		hour End					
☐ EPA ☑	Initial	•	City, Stat	vay te, Zip Code STER, NJ	2013 JAI	V 17 PM	2.50					
□ / DOH □	Amended Amendment	#	Name of	Contact 4	Magazina.			ne Numb	per			
DOL		v/ justification			& LI	Wa Car Of Wall				25		
			ACILITY II	NFORMATIC	N	'-''	0					
Name of Facility Where Abaten	nent is Taking	Place (3)		Type of Fa	acility (4)			- 10	7.1. 1.1.	31		
AT&T		, ,				(40)				+ 355 Print		
Street Address			. 6.	1 8	School (K	(-12) ter 8 (Other	than K-1	2)				
1 AT&T WAY	¥				Other (I.e	., private & omes, etc.)			. P	25		
City (5) County (6 BEDMINSTER MORRIS)	County Code	(7)	Square Fe		# Of Floor	rs	Buildin				
DEDIVINGTER WORKIS					0,000 se (Prior if	f being dem	olished)	+ .	40+	5		
				Telephone	•	111111111111111111111111111111111111111		1 :-				
Name of Monitoring Firm Hired	by Bldg. Own	er (8)	ASCM NO	Name of A	batement	Contractor	(9)					
Alo				LVI Enviro	nmental Se	ervices Inc.				* .		
Street Address				Street Add	Iress							
104 E. 25TH Street City, State, Zip Code				462 Getty	Avenue		*		28 U S			
NEW YORK, NY		1		City, State								
Project Mngr. For Monitoring F DAVIS CHANG		Telephone Nu 212-353-8280		Clifton, NJ			30	N				
Sheduled Start Date (10) 02 / 01 / 13	Sched. Comp 02	oletetion Date (*	11)	Telephone	Number		License	Number				
$\left \frac{-02}{0} \right \frac{-01}{10} = \frac{10}{10}$	<u> </u>	//	- 13	973-77	2-3660			. (00117			
Occupancy Status During Abat			fi ii	Name of O					1			
Facility Closed/Vaca	ted During En	tire Period of		LVI Enviror		ervices Inc.						
☐ Abatement Performe	d Outside of N	Normal Facility							**			
Hours - Describe: Other - Describe:	5.00DM EDI	CLINI		462 GETT City, State								
		- 3014		CLIFTON,								
Scope of Work (Check All That	Apply)											
☐ Demolition	₹.	Renovation	V			th Negative	Pressur	е				
 ≥3sf or ≥3lf ≥160 sf or ≥260 lf 	V 31			Mini - Encl Glovebag			0 10 20	201				
2100 31 01 2200 11						nd Non-Fria	ble Proc	edure				
Location of	Is		Descript	ion of			Abatom	ent Type		•		
Asbestos Containing	Location	A	sbestos - C			/ :	R	Type	ĮΕ	E .		
Material (ACM)	Normally		Material			Amount	E.	R	N	N		
TO BE ABATED in Facility	Used Solely		e., therma	l systems⊸ facing, VAT		(Specify SF or LF)	M. O	E P	Ç	C		
(13)	by Main-			ellaneous)	•	SF OI LF)	· v	I A	A P	o L		
	tenance/	-		,			Α	11.	s	s		
	Custodial						L	R	U	U		
	Staff (12) YES NO N/A	at Service						-	<u> </u>	R		
KITCHEN		PIPE INSULAT	ION			200 LF	T)					
									1-2			
Name of Registered Waste Hau	er	NJDEP Waste	Cubic	Name of R	eaistered	Landfill		1 4				
NEWARK CARTING		Hauler ID No.	Yards of Waste	I.E.S.I		8						
City, State NEWARK, NJ			Disposal Date	City. State BETHELHA								
Completed by (Brint or Type)		Title			Signatura				Date			
Completed by (Print or Type) STEVEN STILES		PROJECT MAI	NAGER	, ,	Signature	ein (to	H	Date	01/16/13		

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

RECEIVED CL#2354

Date of Notification (1) 01/14/13				of Building ert Realty				any Inc.	PH 2:5	8			
Agencies Notified Type Notification	í		Street	Address Division	r								
X EPA X Initial Amended Amendment		_		State, Zip C ngton, NJ			2+ ,±%	& LIČEI	(31140)				
Emergency (justification) DCA Cancellation	including		100000000000000000000000000000000000000	of Contact d Marcor				Те	lephone Nur	nber			
			FA	CILITY INF	ORMAT	ION							
Name of Facility Where Abatement is Takin Firehouse Plaza Street Address	g Place (3))					Subc	ol (K-12) hapter 8 (Oth	ner than K-12	2)	■ 000000000000000000000000000000000000		y21
324-340 West Georges Street							Other etc.) Square Fe	r (i.e. private	& commerci		dg. A		.s,
City (5) Linden						2	20,000 +	- 2		50)+ 		
County (6) Union	10			ty Code (7) E USE ONL			Current Us Care Sta	se (Prior if be ation	ing demolish	ned)			
Name of Monitoring Firm Hired by Building	Owner (8)		AS	CM No.				ent Contractor racting Co			34		
Street Address			1_			Street A	ddress	Avenue		-			
City, State, Zip Code		City, State, Zip Code Clifton, NJ 07013											
Project Manager for Monitoring Firm		Telep	hone No.		Telepho	-		License No. 01099					
Start Date (10) 01/24/13	ed Co	mpleti	on Date (11)	Name of OSHA Monitor J&S Environmental Laboratories LLC						Vi		
Occupancy Status During Abatement (Chec					- W	Street A							-
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	Period of A nal Facility	Abate Hou	ement irs		222.00	City, Sta	ate, Zip Co , NJ 070	ode					
Scope of Work (Check All That Apply)						1							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Characteristic Co.		vation lition			×	Mini-En Gloveb	ntainment winclosure ag Procedure empted (*) a	9			9	
					-		Non-Ex	tempted () a	nu Non-Filai		Abate		t
Location of	1	Norm				escription o			()	-	Ту	ре	T
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma Cust	inten todia (12		(i.	e. therma surfa	ntaining Ma al systems acing, VAT miscellane	insulation , or	,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Docomont	Yes	No	-	'A	Boi	ler Laggi	ina		266 SF	X			\vdash
Basement & 1st Floor	-	X	-	-		ie Packir			14 SF	X			\vdash
Basement & 1st Floor	-	. ^	-			e Insulat			94 LF	Х			\vdash
1st Floor		×	_	-		Tar Pipe			12 LF	Х			
Name of Registered Waste Hauler		Ť	NJDE	P Waste	Cubi	c Yards		ame of Regis	tered Landfi	II	-		-
Pyramid Contracting Corp.			Haule 32613	r ID No. 3	of W	aste	G	i.R.O.W.S	, Inc.				
City, State Clifton, New Jersey					osal Date 25/13		ity, State lorrisville,	Pennsylva	ınia				
Completed by Dimo Golcev	Title Gene	eral	Mang	jer -		Signature	N	all		ate 1/14/	13		14
ASB-41 (R-06-08)	4				3 6	Do not	t use this	form for asbe	estos licensu	re exer	npted	activ	ities

Nomel

Date of Notification (1) 01/11/2013				Building C LEY COL		Operator (2)	2013 1	TVE	'n				
Agencies Notified Type Notification			Street Ad 44 RI	ddress FLE CAM	P ROA	AD	S.	2013 JAN 17	PM 2.	_				
☐ EPA ☐ Initial ☐ DEP ☐ Amended ☐ Amendment #		_		te, Zip Coo		07424		Z L/CF	All France					
DI DOH justification) DI DCA □ Cancellation				LESSAND	RELLO)		i Telecitorie,	Milliper	4				
N	DI (0)		FACII	LITY INFO	RMATI		T/ (F 106 .	(A)						
Name of Facility Where Abatement is Taking BERKELEY COLLEGE BUILDING# 5 Street Address								12) r 8 (Other than h		dinan	hom			
44 RIFLE CAMP ROAD City (5) WOODLAND PARK							etc.) Square Feet	# of Floors	E	3ldg. /		35,		
County (6) PASSAIC		T	County C	Code (7)		- 3		ior if being demo			÷	\neg		
Name of Monitoring Firm Hired by Building C			ASCM	l No.		Name o	me of Abatement Contractor (9)							
ENVIROVISION CONSULTANTS, INC	•		0079											
Street Address 20-21 WAGARAW ROAD BUILDING 3	4A					Street Address 11-02 QUEENS PLAZA SOUTH								
City, State, Zip Code FAIR LAWN, NJ 07410					City, State, Zip Code LONG ISLAND CITY, NY 11101									
Project Manager for Monitoring Firm FREDERICK LARSON		Telephor 973-6	ne No. 36-9145		Telepho 718-3	ne No. 49-0900	Licens 0085		2					
	Schedule 01/31/2		mpletion Date (11) Name of OSHA Monitor ROLLAND BARNHART											
Occupancy Status During Abatement (Check	Only One	e)		M 11.239.01.0		Street A	Address	UE						
☐ Facility Closed/Vacated During Entire P ☐ Abatement Performed Outside of Norma ☐ Other – Describe: OCCUPIED NJAC	al Facility	Hour	rs	HOURS W	ITH	City, Sta	ate, Zip Code							
WEEKENDS & EVE Scope of Work (Check All That Apply)	NING I	FN	ECESSAI	RY TO F	INISH	1 50011								
 ≧3 sf or ≥3 lf ≥160 sf or ≥260 lf 		enov emol	ation			<u> </u>	Mini-Enclosus Glovebag Pro	ocedure						
	Τ.		·			Non-Exempted (*) and Non-Friable Proce					emen	t		
Location of	N	Loca Iorma	ally		De	scription	of		_	T	уре	,		
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	ntena			os Con thermal surfa	taining Ma	aterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure		
LOWER, GRUND & SECOND FLOOR	165	X	10//	PIPE	INSUL	ATION		3,150 LF	X		100			
LOWER, GROUND & SECOND FLOOR	X		VAT				1,065 SF							
GROUND FLOOR	х		PIPE I	NSULA	ATION		41 LF	х						
72					8.5									
Name of Registered Waste Hauler ATC	NJDEP W Hauler ID 04181		of Wa	: Yards aste YARDS		f Registered Lan								
City, State SHIRLEY, NY						sal Date 17/2012	City, Sta	SBURG, OH						
Completed by ANN ALI	INISTRATIVE Signature Date 01/10/2013						3							

EMERGENCY
State of New Jersey

State of New Jersey

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

Check # 5721

k G Proj # 2013-09	1101			NJAC 8:60 at	nd 12:120)) <i>1</i> % E	CEL	1/2	. 12				
ate of Notification (1)		Na A	ame of B	uilding Owner ingleton	Operator 2	(2) 1013 JA	N 17 1	- 11	7.50			_	
gencies Notified Type Notification		St	treet Add	ress Iside AVen	ue 🎜	1.5			ं २४				
EPA Initial Amended Amendment #_		C	ity, State	, Zip Code d, NJ 07060		& L	CEN	illig	ROL				
DOH Emergency (in justification)	cluding	N	ame of C					Tele	phone Numb	25			
DCA Cancellation				TY INFORMA	TION		Facility (4)						-
ame of Facility Where Abatement is Taking Andre Singleton	Place (3)				74	☐ Scl	hool (K-12)	er than K-12)				
treet Address 1131 Hillside Avenue						Square	ner (i.e. pri :.)	vate 8	commercial		g. Ag		s,
ity (5)						-							
Plainfield, NJ 07060 County (6)		6	County Co	ode (7) SE ONLY)		reside	ntial		ng demolishe	d)			
JNION lame of Monitoring Firm Hired by Building O	wner (8)		ASCM	No.	Name B &	Name of Abatement Contractor (9) B & G Restoration, Inc.							
n/a Street Address					Street 105	reet Address 05 Ryerson Road							
City, State, Zip Code					· City, S	State, Zip coln Parl	Code k, NJ 07	035					
Project Manager for Monitoring Firm		7	Telephon	e No.	Telep 973	hone No. -696-68	69		License No 00378				
Start Date (10)	Scheduled 01/15/20	Com	pletion D	ate (11)	Name B &	e of OSHA	Monitor oration,	Inc.			0		
01/15/2013 Occupancy Status During Abatement (Check						t Address							
Facility Closed/vacated During Entire P Abatement Performed Outside of Norm Other – Describe:	eriod of Ab	oatem	nent		City,	State, Zip	n Road Code k, NJ 07	035					
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova				Mini	-Enclosure	edure	h Negative Pr nd Non-Friabl	e Pro		e	
		Locati	-03/2/201									pe	` _
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Mair Custo	ntena odial ((12)	ely by nce/ Staff?	s	Description Containing mal system urfacing, V ner miscell	Material ms insula AT, or	(ACM) tion,		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	
	Yes	No	N/A		ipe insu	lation			30 If	х			Ť
basement	+		X	The state of the state of	oiler insu				32 sf	X			1
basement	17	-	+^					- 1		1			I
	+												1
Name of Registered Waste Hauler B & G Restoration, Inc.		1	NJDEP V Hauler ID 19563	vasic	ubic Yards Waste	S	Tullyto	w Re	tered Landfill source & F	leco	very	Cen	nte
City, State Lincoln Park, NJ					isposal Da 1/16/201	13	City, Sta Tullyto			ite			
Completed by Gordana Luna	Title	oton.	/Treas	urer (Signat	ure /	181	1		/14/	2013	3	±.

MO# 20613906527

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT	
(Pursuant to NJAC 8:60 and 5:16)	

Date of Notification (1)				Name	of Buildin	g Owner/	Operator (2	2) 1177	III/ED					
	14 / 13	3		Maril	yn D'Am	brosio								
Agencies Notified	Type Notification				Address	010310		2013 JAN 1	7 PM 2:58				-	
□ EPA				678 R	iver Roa	d		4	111 2:58					
☑ DOLWD É	Amended Amendment #	ŧ	*	City,	State, Zip	Code		-1100	Telèphone Num					
DCA	☐ Emergency (i			Fair F	Iaven, NJ	07704		& LICE	Killing Mat					
(NJAC 5:23-8)	justification)			Name	of Contac	ct			Telephone Num	ber			_	
	Cancellation			Maril	yn D'Am	brosio								
				FA	CILITY II	VFORMA	ATION		•					
Name of Facility Where	Abatement is Takir	g Place	(3)					Type of Facility						
Private house	The state of the s							School (K-1	2) 8 (Other than K-1 2))				
Street Address								Other (i.e.,	private and comme	rcial bu	ilding	S,		
678 River Road								homes, etc.	<u> </u>					
City (5)								Square Feet	# of Floors	BI	dg. A	ge		
Fair Haven, NJ 07704 County (6)				Cour	ty Code (7)	/CTATE I	CE ONLY	Current Hea (D	rior if being demoli	a b a d\				
13050				Coun	ty Code (1)	(STATE O	SE ONLT)	Current Use (P	nor it being demoir	srieu)				
Monmouth Name of Monitoring Firm	n Hired by Building	Owner ('8) T	ASCM	No	Name	of Abateme	ent Contractor (9	1			-	_	
	g	O WITTON (AGGIVI	NO.			ent Contractor (9	7					
Street Address						Gr Tec			·					
						Street Address 576 Valley Rd #283								
City, State, Zip Code						ate, Zip Co								
	.,,						, NJ 0747							
Project Manager for Mor	nitoring Firm		Tele	phone	No.		one No.		License No.		-			
						973-63	8-1777		01127					
Start Date (10)		duled C				Name	of OSHA M	lonitor	4					
	13	01/	_ 27	/	13	Enviro	vision Co	nsultants,Inc						
Occupancy Status Durin					-	_	Address							
□ Facility Closed/Vacat						20-21	Wagaraw	Road, Bldg .#	34A					
Abatement Performe					cribe AM	City, St	ate, Zip Co	ode						
		140			VINI.	Fair La	wn, NJ 0'							
Scope of Work (Check a	II that apply)					H		o and decontami tainment with Ne						
		X Re	novati	on		Н	Mini-Enc	losure	gative Flessure					
☐ ≥ 160 sf or ≥260 lf		☐ De	molitic	n		M	Glovebag	g Procedure	on-Friable Procedu	ro.				
		Is	Local	ion	Т		Non-Exe	inpled () and Ni	T Trable 1 Toceuc	-	atem	ont T	uno	
Location		1	Vorma	lly		De	scription o	of			-	T	Ť	
Asbestos-Containing TO BE AB			d Sole intens			stos Con	taining Mar	terial (ACM)	Amount	Rem	Repair	Enca	ncl	
IN Faci	THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAM	50000000	todial	Staff?	(1.6	e., therma surfa	l systems i cing, VAT,	insulation, or	(Specify SIF or LF)	Remova	a:	Encapsulate	Enclosure	
(13)			(12)	1	-		miscellane			<u> </u>		ate	(ii)	
		Yes	No	N/A								1078.0		
Basement				\boxtimes	Pipe ins	ulation			110 LF	X				
										П	П	П	П	
		10	П				Marie Company Control (Miles			1			ī	
		+=-		분		·				ᆜᆜ				
N) L	lle le 15 t	10111		- Factor	ļ		Ш	L	Ш	
Name of Registered Wa	ste Hauler		NJI	JEP Wasti	Hauler ID No	Cubic Ya	ards of Wast	e Name of Regi	stered Landfill					
Gr Tech LLC			(003378	35	TB		T.R.R.F. Inc			1790	testerer	*a sisal	
City, State						Disposa		City, State						
Wayne, NJ 07470						TB	- 1	Tullytown, P	Α					
Completed By (Print or 1	Гуре) Tit	e .				Sig	gnature	he Ven		ate				
N.Jevtic	Ow	ner					1/2 W	he Nen	01	/14/20	13			
ASB-41	Care II Care Care Care Care Care Care Care Care	S 8	000			VALUE TO 1						-		

	0 ((Pur	suant to	NJAC 8:	60 and	1 12:120)	- CH	16	2953				
Date of Notification (1) 1/12/13		,			Building O oro Pub			25.00	11.11.11	714	2700g				
Agencies Notified Typ	e Notification		0.000	reet Add	dress verly Ra	ncoca	s Roa	<i>∠⊍/3</i> d	JAN 17	DM				16	
EPA DEP DOL	Initial Amended Amendment #		C	ity, State	e, Zip Cod oro NJ	e (14 J.	91901	<i>FF</i>	2:58				
☑ DOH □ DCA □	Emergency (includir justification) Cancellation	ng	100	ame of 0 ynne 0	Contact Calloway	/			LICENS	ملم ا	ohona Num	hor_			
		(0) \$		FACIL	ITY INFO	RMATI	ON	Time	of Facility (4)					1521130	
Name of Facility Where Abate Hawthorne Elementary		(3)							of Facility (4)						
Street Address								X S	School (K-12) Subchapter 8	(Othe	ther than K-12) a & commercial buildings, home				
84 Hampshire Lane	"								tc.)						s,
City (5) Willingboro NJ 08046								Squar 1000		# of	Floors	35	dg. Ag 5+	ge	
County (6) Burlington				ounty C	ode (7) SE ONLY)		Current Use (Prior if being demolished)								2
Name of Monitoring Firm Hire	ed by Building Owner	(8)	1	ASCM	No.		Name of Abatement Contractor (9) Pernaco Inc								
Street Address 1253 North Church St			1				770000000000000000000000000000000000000	Street Address PO Box 329							
City, State, Zip Code								City, State, Zip Code							
Moorestown NJ 08057							Wes	est Berlin NJ 08091							
Project Manager for Monitori Jim Guilardi	ng Firm		856-840-8815 8					hone No 753-9			License N 00727	0.			
Start Date (10)			Comp	oletion D	ate (11)		7000		A Monitor			0.			
1/14/13	1/25						Sam								
Occupancy Status During At								t Addres	i S						×
Facility Closed/Vacated Abatement Performed (Other – Describe: Exte	Outside of Normal Fac	of Aba	ateme ours	ent		_	City,	State, Zi	p Code						
Scope of Work (Check All Th	nat Apply)					The second									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	×		novati				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure								
									n-Exempted		d Non-Friat	_			
			ocatio										Abate Ty	ment pe	
Location of Asbestos-Containing Ma TO BE ABATE In Facility (13)	Used : Maint Custoo	tenan	ely by Asbestos Contact (i.e. thermal surfa other r			ntaining Il systen acing, V	tems insulation,			mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure	
		es	No	N/A							20.01	+	_		
Exterior So	_		Х	roof	ing ty	pe sof	fit mat	erial	1	20 Sf	x			-	
	+								- 15 ± 2 ± 2						
		_													
Name of Registered Waste United Containers	Hauler		NJDEP Waste Hauler ID No. 22459 Cubic Yard of Waste				Section 1								
City, State Elm NJ			Disposal Date 1/25/13												
Completed by Anthony T Perna	e Signature Date 1/12/13					3									

of Notification (1) 1~10-	13	21	South Address S. C.	·	lomday 1	LiDOA3
y Not find ype Notification A GAT-litial F G Amended Amendment # E Emergendy (injustricebon) A G Cancellation		Name of Re	and 2 de Corde ManaS of Contact OTTY INFORMATION	Mion Rane	MAIVERA	320VFD
of Facility Where Abatement is Taking	Pain	ling 1 R	pacl	Type of Feeilty School (K-1. Subchapter Source (I.e. p homes, old Square Feat	2) 8 (Other than K-12) rivals & commercial bu .)	
of Monitoring Firm Hired by Building C PC Technologie	Owner AS	COUNTY CM No.		Single tement Contractor	family Du	
Address P.O. Box 337 State Zip Econ Very Egypt NJ Mahaper for Monitoring Firm	0853	hone No.	Telephone N	P.O. Bo	NO 08	533 39 V
pandy Status During Absternant (Chec	k only one)	<u>5</u>	Name of OS	o. Box	337.	<u> </u>
ittly dosest/set outside of Normal terment Performed Outside of Normal for Oceanite of Work (Chack so that apply) of or \$ 3 if 50 of or \$ 250 if	Facility Hours	•	Wec	Egypt Le Containment with Lini-Enclosure	h Negative Pressure	DS33
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Non Used S Mainto Cusi Sta	cation naily lotely by nance/ lodial 1877	Doscripti Appestos Containing (I.o., thermal syste surfacing, other miscri	Material (ACM) mas insulation, VAT, or	Amount (Specify SF or LF)	Encapsulate Removal
Heavor Walls	Yes	N/A	Stolling St	ingles.	600 S	*
o of Registered Woode Houler PC Technologies	NUDE ID No	P WILLIAM H	tauler Cubic Yards Waste		e Manager	nest

MERGENLY		200000				. 7	6	
Bank and the second	- HOPFO	A TIME A	of New Jersey F ASBEST 03 AB	ATEMENT	na	4100		
REMEMBER - MAIL IN HAP		şuant to	NJAC 8:60 and 12	2:120)	2013 10 10	-70	D	AY.
ate of Notification (1)			Bullding Owner/Opera		17	PH 2.	1	
	<u> </u>	to proper	Southi	Sew !	tomes 14	NINI		13
gency Notified Type Notification		Stroot A	Odryss 79 11	001	Ais de	1/Kall		- I-
DEP GAmenced		City Sto	ite. Zip Gode	<u>unon</u>	THE POPULAR	VERY		-
LDOL Amendmant#			Mano	SQUE	LVXAJVER	0876	30,	WEI
(DOH Lastification)	cluding	Name of	Contact		Tatophone Numb		111	JA CT
CCA D Cancellation		GRE	tchen 0'1	lane 🦪	34		a	
		FACIL	TY INFORMATION			<u>.</u>		
arrie of Facility (Where Abstement is Taking	-			Type of Friedli				
SINGK TOMIL	A Dr	ارنه	9	☐ School (K-1	12) 8 (Other than K-12)			
726 Deur	n Pain	+ Ro	and	homes, etc.	odvata & commercio) (hulldings		
y (5)			_	Square Feet	# of Floors	Blog. Age		
BRICK NJ	50	877.	3			60	-(-	
ounty (6)			ado (7) (STATE USE	**************************************	Prior if being demolish	ied)	delano	\neg
() Cean		ONLY)		Single 1		se lline	1 .	
of Menitoring Firm Hired by Building C		M No.	Name of Abete	ment Confractor	. 4			
EPC Technologie	3	MA	Street Address		nologies,	Lac		
PO, Box 337			Sueet Adulta	P.O. Bo	~ 337			
V State Zie Code			City State, Zip	Code				-1
New Egypt NI	08233	SWEET TARREST STEPS		Equat		3533		
olect Managor for Mohiloring Firm	United States Contact States Con-	one No.	Telaphone No.	326 ~	Lizonse No.	2011		
Steve. Schenker	Completion D	758-33	65 609-758 Name of OSHA		1 00,	374	٠	
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1-15-15	'd1 - 1	2	1 5 40	Techo	4003100	1 40		1
supporcy Status During Abatement (Check	orly one)	5	Street Address		iologies.	L7C.		_
	L 3/	<u>5</u>	Street Address	o. Bex	337	L.7(
Facility Clased/Vacated During Entire Perfo Abgrement Performed Outside of Normal P	od of Abetemen	<u>)</u>	Street Address P. (Gity, State, Zip	o. Bex	337	1522		
e-uity Clased/Viscaled During Entire Perio Abathment Performed Outside of Normal P Other Describe	od of Abetemen	<u>.</u>	Street Address	o. Bex	337	3533		
Facility Clased/Várcaled During Entire Porto Abatement Performed Outside of Normal F Other Describe Doe of Work (Check Bil Unit Apply)	od of Abetemen		Steel Address P. (City. State. Zip Vec.) O Futl	O. Bex Code Egypf Containment with	337	3533	L	
estility Closed/Viscated During Entire Porto Abatement Performed Outside of Normal F Other Describe oc of Work (Check Bil that apply) 3 st or ≥ 3 if	od of Abetemen	B Reneva	Street Address P. City, State, Zip Necu Display Ston Display Glob	Code Sypf Containment with Bridging Procedure	NJ OE			
estility Closed/Viscated During Entire Porto Abatement Performed Outside of Normal F Other Describe oc of Work (Check Bil that apply)	od of Abelemer acility Hours	Renova Comoli	Street Address P. City, State, Zip Necu Display Ston Display Glob	Code Sypf Containment with Bridging Procedure	337 NJ 08	aie	**************************************	ni
Figurity Closed/Viscated During Entire Performed Abahament Performed Outside of Normal Figure 2 Describe Descri	od of Abetemen	Renova Ocmoli	Steet Address P. (City. State. 2:p New OFull of Mini ion Glov	Code Egyp f Containment with Brickonure Pebag Procedure Exempted (*) an	NJ OE	nie Vai	ж ал е Тура	ď
Facility Closed/Vacaled During Entire Period Abatement Performed Outside of Normal F Other Describe Doe of Work (Check bil that apply) 2.3 of at 2.3 if 7.160 et at 2.260 if	od of Abetemer acility Hours Is Local Norma	Renova Cornolisi	Steel Address P. (City. State. Zip Vec.) Discription Description	Code Egyp f Containment with Snotoaure rebag Procadure. Exempted (*) an	NT OE Nugative Pressum d Non-Friable Proced	nie Vai	Тура	Г
Asbestos-Corraming Material (ACM) TO BE AHATED	is Local Norma Used Both Maintena Custod	Cornols Cornol	Street Address City. State. Zip Vecu D Full dion D Glos Chora Controlling M (r.o., thermal systems	Code Egyp f Containment with Sinclosure Patent (*) an of attantal (ACM) Insulation,	NJ 08 Nugative Pressure d Non-Friable Proced	No.	Тура	Г
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:120)

Da f Notification (1) 1/14/2013		Name of Building Owner/Operator (2) MAB Waste								
Agencies Notified Type of Notifica [x] EPA [] Initia	l Notification	Street Address			M 17 PM 2:	58		10		
[x] DOL Amer	nded Notification	City, State, Zip C	ade Forke	d River, NJ 0873	ida Vojeka je 11k	31				
[x] DOH justif	gency (including ication) ellation	Name of Contact Mike			Telephone Number		•			
[]	FA	CILITY INFOR	MATION							
Name of Facility Where Abatement is Taking Marina	g Place (3)			Type of Facility (4	School (k-12) Subchapter 8 (ot	her than	k12)			
Street Address 116 Oregon Aven	ue			[x]	Other (i.e., priva	te & con	nmerci	al buil	dings,	
City	County (6) Ocean	County Code (7) (STATE USE ON	LY)	Square feet 3000 sf Current Use (Prior	# of Floors Bldg. Age f 2 60 Prior if being demolshed)					
Name of Monitoring Firm Hired by Building		ASCM No.	Name of	Marin Abatement Contract Guard		Inc		1		
N/A Street Address			Street Address 1889 Route 9, Unit 61							
City, State, Zip Code					Zip Code Toms River, New Jersey 08755-1					
Project Manager for Monitoring Firm	Telephone Numb	er	732-34	Telephone Number License Number 732-349-9932 00624						
Scheduled Start Date (10) 1/14/13	Scheduled Comp 1/16/13	letion Date (11)			S.L. Analytical					
	conly one) cd During Entire Period of Outside of Normal Facility		Street A	1056 ate, Zip Code	Stelton Road away, New Jerse	ey 0885	54		1	
Scope of Work (Check all that apply) $ \begin{bmatrix}] >3 \text{ sf or } \ge 3 \text{ lf} \\ [x] \ge 160 \text{ sf or } \ge 260 \text{ lf} $		ovation olition	[. [. [x	Mini-Enclosure Glovebag Proce			re			
				+		Abate	ment '	Гуре		
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> in facility (13)	al (i	Description of the control of the co	ntaining ACM) systems urfacing, or	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E		
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8.										
Name of Registered Waste Hauler Guardian Contracting, Inc.	NJDEP Waste Hau 20223	5	Yards of Wa	T.R.R.F.	stered Landfill .					
City, State Toms River, New Jersey		posal Date 7/13	City, S Tully	tate town, Pennsylvan	nia	177	ă,			
Completed by (Print or Type) Nicholas Fernicola	Title Project Manager	Signature	ichi	1 For	1	Date 1/14	/2013	3	,7.	
	*Do not use this fo	orm for asbestos lic	ensure exe	npted detivities.						

					e of New Jersey		Para	1/12/	Che	ck #	# <u>8</u>	06	<u> </u>			
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			7.6		Building Owner/C	LUIJ	JAN 17	PH DE	Dept of Healt				rices			
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City, State, Zip Code						Gle	Rock, N.J.	07452								
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City, State, Zip Code							tate, Zip Co Rock, N		452					
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Project Manager for Monitoring Firm			Telephon	e No.	- 1		one No. 262-5841		License No. 00156					
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Name of Facility Will Hess Corporatio		ent is Taking P	iace (3)			Type of Facili						
Street Address								oter 8 (Other th	an K-12)				
615 River Road								and the second of the second s	mmercial buildin	gs, hom	ies, e	etc.)	
							Square Feet	# of Flo	oors	Bldg. Ag	е		
City (5)		County (6)	Co	unty	Code	(7)							
Edgewater		Bergen						(Prior if being o	demolished)			2000000	
							Offices						
Name of Monitoring	Firm Hired b	y Building Owr	ner (8))	AS	CM No		tement Contra					
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Project Manager for	Monitoring F	irm			Num		Telephone Nu		License N	lumber			
Dave Turotsy Scheduled Start Da	to (10)	Scheduled Cor			AET		(215)788-60 Name of OSH	Commence of the Commence of th	00509				
1/11/201			1/16/			')		ironmental l	nc.				
Occupancy Status I						1	Street Addres		4			- 6	
Facility Clos	ed/Vacated	During Entire P	eriod	of Ab		ent	1123 Beave						
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Describe:		Ab -4 7	A B.S. A.	- 2.2	0.08		Bristol, PA	19007					
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Offices			П	П			Mastic		250 SF		П	П	П
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Name of Registered	Waste Haul	er		100/000		Waste		Name of Reg	istered Landfill				
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Bristol Environmental, Inc. 1870 City, State						33	Disposal Date	City, State			-	-	_
Bristol, PA							1/16/2013	Morrisville,	PA				+
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State of New Jersey APPROVED! TOM VOORHEES, WJ DOH NJDI

Date

1/11/13

NOTIFICATION OF ASBESTOS ABATEMENT J. #2393 (Pursuant to N.J.A.C. 8:60 and 12:120) Name of Building Owner / Operator (2) Date of Notification (1) 2013 JAN 17 PM 2: 56 Hess Corporation 1/10/2013 Street Address Type Notification Agencies Notified One Hess Plaza **EPA** \boxtimes City, State & Zip Code DEP Initial Woodbridge, NJ 07095 Amended Ø DOL Telephone Number Name of Contact \boxtimes Emergency DOH M John Philbin Cancellation DCA **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Hess Corporation Subchapter 8 (Other than K-12) Street Address Öther (i.e. private & commercial buildings, homes, etc.) 615 River Road # of Floors Bldg. Age Square Feet County Code (7) County (6) City (5) Current Use (Prior if being demolished) Bergen Edgewater Offices Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Bristol Environmental, Inc. AET Inc. Street Address Street Address 1123 Beaver Street 28 N. Pennell Road City, State & Zip Code City, State & Zip Code Bristol, PA 19007 Media, PA 19063 License Number Telephone Number Telephone Number Project Manager for Monitoring Firm 00509 (215)788-6040 800-9696AET Dave Turotsy Name of OSHA Monitor Scheduled Completion Date (11) Scheduled Start Date (10) Bristol Environmental Inc. 1/16/2013 1/11/2013 Street Address Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement 1123 Beaver Street City, State & Zip Code Abatement Performed Outside of Normal Hours -Bristol, PA 19007 Describe: Facility Occupied During Abatement 7 AM to 3:30 PM Scope of Work (Check all that apply) Full Containment with Negative Pressure \boxtimes Mini-Enclosure Renovation ≥3 sf or ≥3 lf Glove Bag Procedures Demolition ≥160 sf ≥260 lf Non-Exempted and Non-Friable Procedure Abatement Type Amount Description of Is Location Location of (Specify Asbestos-Containing Normally Used Asbestos-Containing SF or LF) Encapsulat Material (ACM) Solely by Material (ACM) Remova (i.e., thermal systems Maintenance or TO BE ABATED insulation, surfacing, VAT **Custodial Staff?** in Facility or other miscellaneous) (12)(13)No N/A Yes 500 SF X Floor tile M Offices Joint compound assoc. with sheet 800 SF Offices multiple areas Name of Registered Landfill NJDEP Waste Cubic Yards Name of Registered Waste Hauler of Waste Hauler ID No. **GROWS Landfill** 20 20990 Service Transport Inc. City, State Disposal Date City, State Morrisville, PA

1/16/2013

Signature

Title

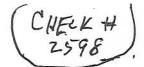
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Manager

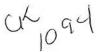
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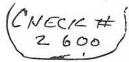


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Street Address		10.70					Street Address 235 Virginia ave.									
City, State, Zip Code							City, State, Zip Code Jersey City NJ. 07304					11				
Project Manager for Monitoring		T	Telephone	No.			none No. 33885	5		License No 01174),					
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State of New Jersey NOTIFICATION OF ASBESTOR ABATEMENT NOTIFICATION OF ASBESTOR ABATEMENT NAME OF THE PROPERTY OF THE PROPERT

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Union				SCM No	i	Newne	Name of Abatement Contractor (8)							
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n/a							Street Address							
Street Address						22 Troy Lane								
n/8 City, State, Zip Code							City, State, Zip Code Lincoln Park, NJ 07035							
n/a						Telephone No. License No.								
Project Manager for Monitoring Firm				Telephone No.			973-706-7950 01193							
n/a						Name of OSHA Monitor								
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