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CHECK # 1090

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to N.J.A.C. 8:60 and 12:120)
Name of Building Owner / Operator (2)
NJ DOT

Address

Address Date of Notification (1) 1-09-14 Agencies Notified Type Notification M **EPA** П DEP Initial $\overline{\boxtimes}$ X DOL Amended X DOH. Emergency Telephone Number DCA Cancellation Steve Rugge FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) S.J. Regional Airport Property Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) Fostertown Road Square Feet # of Floors Bldg. Age County Code (7) City (5) County (6) Over 40 yrs. Multi Bldgs. Current Use (Prior if being demolished) Lumberton Burlington Old farm - closed ASCM No. Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) Mid Atlantic Abatement, LLC Street Address Street Address PO Box 1314 City, State & Zip Code City, State & Zip Code Cherry Hill, NJ 08003 License Number Project Manager for Monitoring Firm Telephone Number Telephone Number 609-567-0950 01187 Name of OSHA Monitor Scheduled Start Date (10) Scheduled Completion Date (11) 1-19-14 1-31-14 **EMSL Analytical** Street Address Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement 107 Haddon Ave. M Abatement Performed Outside of Normal Hours - 7am to 3pm City, State & Zip Code Describe: Westmont, NJ 08108 Facility Occupied During Abatement Full Containment with Negative Pressure Scope of Work (Check all that apply) Renovation X Mini-Enclosure ≥3 sf or ≥3 If \boxtimes Glove Bag Procedures ≥160 sf ≥260 lf Demolition Non-Exempted and Non-Friable Procedure Is Location Description of Amount Abatement Type Location of Normally Used Asbestos-Containing Asbestos-Containing (Specify Solely by SF or LF) Encapsulate Material (ACM) Material (ACM) Maintenance or Repair (i.e., thermal systems TO BE ABATED Custodial Staff? insulation, surfacing, VAT in Facility (12)or other miscellaneous) (13)Yes No N/A See attached summary See attached summary NJDEP Waste Cubic Yards Name of Registered Landfill Name of Registered Waste Hauler Hauler ID No. of Waste Salem County Landfill Bull Waste & Recycling, LLC Disposal Date City, State City. State 2/10/14 Alloway Township, NJ Berlin, NJ Completed By (Print or Type) Title Signature Date Theodore S. Budzynski Gen. Mgr. 1-09-14

NJDOT S.J. REGIONAL AIRPORT FOSTERTOWN ROAD

SURVEY SUMMARY

	SURVE	Y SUMMARY		. 10
STRUCTURE	LOCATION	TYPE	OUANTITY	3 0
Concrete building & wood stalls	Along walls	Transite panel	1,300 sf	MIN THE SOUTHOUT
Metal barn	Roof	Rolled roofing roof underlayment	1,370 sf 1,370 sf	\$ 5 B
Small building (between silos)	Outside wall	Windows glaze	4	TO SU
Block building	Roof & Exterior	Transite shingles Window glaze	400 sf 5	**,
Wood frame barn	Shop -ceiling	Transite panels	650 sf	
Frame Bdg. With various pipe	Wash area	Transite panels	1,570 sf	
Masonry Bldg. with stucco frame	Bathroom	Linoleum	90 sf	
	North, rear & south of parcel	Exterior Stucco	3,480 sf	1
	Basement	Pipe wrap	35 linear ft	1
	Pitch roof over front entry	Transite shingles	10 sf	
	Perimeter of chimney & flue	Tar	6 sf	
	Kitchen, LR, bedrooms (3) & basement	Exterior window caulking	15 windows	
	通过是在新兴的。			
Ranch with masonry & stucco	Kitchen, LR, Bedrooms (2), hallway & bath	Compound associated with drywall	4,000 sf	
	Perimeter of chimney on shed and seams on awning at rear	Tar with caulk	20 sf	d
	Shed roof	Gray rolled roofing with tar	70 sf	
	Shed roof - bottom layer	Rolled roofing with tar	70 sf	
Enomo homo	Detrumen etalle	Trongito nonela	2 000 of	
Frame barn	Between stalls Roof, loose pieces on fround & roof	Transite panels Transite shingles	3,000 sf 4,000 sf	,
Frame house	Bathroom #1	Tan marbled linoleum	40 sf	
	Basement	Flue packing	5 sf	
	Basement	Air cell pipe insulation	360 linear ft.	
	Porch, front of bldg	Transit siding	5,240 sf	
	Underneath transite siding, front of building	Siding underlayment	5,240 sf	

No halt

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

								CK#23733		6	٥,			
					State of Ne	w Jerse	ey ·		200		50			
10 v	N	OTIFIC	CATIO	N OF	ASBESTOS				19	10	***	٥,		
Chack				(Pursu	ant to NJAC	8:60 and	d 12:120)	CK#23733	350	AN,	' >	16		
Date of Notification (1)		3008	A 14,100,000		Name of Build	ding Owne	er/Operator (2)	d.	17	2-	4/	,		
1/15/2014					Current Den	nolition &	& Disposal Corp	. (owners rep)	10%	30	,	9.		
Agencies Notified T	ype Notificat	tion		-	Street Addres	ss			,	3	NX	- 5		
☑ EPA	☐ Initial				93 Route 539	9				14	6 P	2.		
☐ DEP	Amende	d Ame	ndment	#	City, State, Zi	ip Code				- 7	v	7		
□ DOL	☐ Emerger	ncy (inc	cluding		Allentown, N	NJ 08501								
□ DOH	justificat	ion)			Name of Con				Telep	hone	Numb	er		
DCA	☐ Cancella				Matt Lucas									
				F	ACILITY IN	FORMAT	TION		-			-		
Name of Facility Where Aba	tement is Ta	king Pl	ace (3)					Type of Facility (4)			245000			
PRIVATE RESIDENCES			·				19	School (K-12)						
Street Address								Subchapter 8 (Oth	er than	K-12	2)			
312 & 314 E. UNION STR	REET							Other (i.e., private	& com	merc	ial build	dings		
City (5)								Square Feet			Bldg.	_		
BURLINGTON CITY, NJ	T 08016							200						
County					County Code	(7) (STA	TE USE ONLY)	Current Use (Prior if be	eing de	molis	hed)			
BURLINTON							and the second s							
Name of Monitoring Firm Hir	red by Buildin	ng Own	er (8)		ASCM No.	Name of	Abatement Cont	ractor (9)						
	,	J =	1-7			1		RONMENTAL INC.						
Street Address						Street A								
							CK FOREST R	OAD						
			100				te, Zip Code							
							TON, NJ 0869	1						
Project Manager for Monitor	ina Firm	Teleni	hone N	0.		Telepho			Licen	se No	o.			
Tojoot manager for World				-7		609-890			00676					
Start Date (10)		Schen	luled C	omnleti	ion Date (11)		OSHA Monitor		100070					
1/14/2014		1/15/2		p.ot	= 2 (/	N/A	normanianianianianianiani							
Qcupancy Status During A	batement (C		SWITZELL NO.	<u> </u>		Street A	ddress							
Facility Closed/Vacated					ent									
Abatement performed outs					5.55 ⁸ (8)	City. Sta	ite, Zip Code			_	-			
ESSENTIAL PERSONNEL		.g .ioui	C 01 101-1			, o.a	,							
Scope of Work (Check all th								Full Containment	with Ne	gative	e Press	sure		
Scope of Work (Check all the $\geq 3 \text{ sf or } \geq 3 \text{ lf}$	ar abbis)				Renovat	tion		Mini-Enclosure			ocos cossifició X			
≥ 160 sf or ≥ 260 lf					Demoliti			Glovebag Procedu	ле					
☐ 2 100 SI 01 2 200 II								☐ Non-Exempted (*)		-Friat	ole Pro	cedur		
		le le	Locati	on			2.1				t Type			
			mally L		Description	n of Asbes	stos Containing			I				
Location of Asbestos-Co			Solely b				hermal systems	Amount (Specify SF o	디골	Z	nca	inc		
Material (ACM) TO BE Al Facility (13)	DATED III		enance		del management of the second		, VAT, or other	LF)	Removal	Repair	psu	Enclosure		
. donity (10)		dia Yes	Staff?	(12) N/A	· '	miscellane	eous)		à	15	Encapsulate	Гe		
BASEMENT		163	1	1000	PIPE INSUI	LATION		50 L.F.	X		1			
DI ROBINETT I			×											
		1												
Name of Registered Waste	Hauler			4	NJDEP Waste		Cubic Yards of	Name of Registered L	andfill					
					Hauler ID No.		Waste	CDOME						
TIMSTER TRUCKING					21079		1 YD.	GROWS						
City, State							Disposal Date	City, State						
WEST CREEK, NJ	1000		+				1/17/2014	MORRISVILLE,PA						
Completed By		Title				Signatur	9 -11	000	Date					
DAVID D'ANDREA		PRES	SIDEN	T		10	and	. Dadie	1/15	/2014				
ASB-41						7	0		195					

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+273		NO	TIFIC.	State ATION O suant to	of New F ASBES NJAC 8:	Jersey STOS AE :60 and 1	BATEN 12:120	ENT	RECE AN 17	1/	En				6)	
Date of Notification (1) 01/15/14			N S	ame of B	GALLC	wner/Op	erator 45	(2) A C -	AN 17	AM ~	.0					
	oe Notification		S 2	treet Add	iress NLEY A	AVE.		& L/	Tos co	· · · · ·	41					
EPA DEP DOL	Amended					ie GE, NJ	0792	0	ENSIN.	GAC	1				-12	
ĭ DOH	justification)	ncluding								Tele	nhone N	ımh	er I			
	Initial Amended Amendment # Emergency (including justification) Cancellation FACILITY INFORMATION acility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.) Square Feet Square Feet # of Floors Bldg. Age															
Name of Facility Where Abat Street Address	ement is Taking	Place (3)		>2					School (K-12 Subchapter 8	: :) 3 (Othe	r than K-	12)				
25 S. FINLEY AVE.								E 6	etc.)			cial				5,
City (5) BASKING RIDGE		Square Feet 2500								3						
County (6) SOMERSET		County Code (7) Current Use (STATE USE ONLY) RETAIL								r if beir	ng demol	ishe	d)			
Name of Monitoring Firm Hir	ed by Building C	Owner (8)		ASCM	No.				PROFE						4	
Street Address		***	1					Addres	SS DOVE CO	URT		Č.				
City, State, Zip Code			*						ip Code OD, NJ 08	3701	1					
Project Manager for Monitor	ing Firm	Telephone No. Telepho						hone No. Licens 668-9078 1200					•			
Start Date (10) 01/29/14		Schedule 01/30/1		pletion D	ate (11)				HA Monitor D PROFE	SSIO	NALS					
Occupancy Status During A	batement (Chec	k Only One	e)					Addre	ss DOVE CO	N IDT					1000	
Facility Closed/Vacated Abatement Performed Other – Describe:	d During Entire F Outside of Nom	Period of A nal Facility	batem Hours	ent			City, S	State, Z	ip Code OD, NJ 0							
Scope of Work (Check All T ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	hat Apply)		enova emoliti					Full Containment wit Mini-Enclosure Glovebag Procedure Non-Exempted (*) al				Friable Procedure			e	
	3	353	Locati	200		D	scriptio							Abate Ty	ment pe	
Location of Asbestos-Containing Ma TO BE ABATI In Facility (13)	aterial (ACM)	Use Mai	d Sole ntenar odial S (12)	ly by nce/		stos Cont thermal surfac	aining system cing, V	Materia ns insul	ation,	(mount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
BASEMEN	IT.	Yes	No	N/A		PIPE II	NSUL	ATIO	N		30 LF	-	X		35	
DASEIVIEN		1		-												
			-			10	Veril		Name of	Dogist	arad Lan	dfill				
Name of Registered Waste NEWARK CARTING	Hauler		H	IJDEP W lauler ID 4509		of Was			IESI		ered Lan	uiii				
City, State NEWARK, NJ						Dispos 01/27	sal Dat 7/14	е	City, Sta BETHL		M PA					
Completed by JOSEPH PERLSTEIN		Title OWN	IER			8	Signatu	re	1	/		Da 01	te /15/	14		

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

Print Form

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Date of Notification (1)			Vame of I	Building C → →	wner/Ope		2	uers		1	20		Fr.	T
Agencies Notified Type Notification		-	Street Ad	dress	100		KU				7	0	<i>چر۔</i> پ	2
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DEP Amended	ш.	1		e, Zip Coo		N	- , t-				Ç	. 5	2	
DOL Amendment Emergency		- -	Name of		K, 1			2091	Telonh	rna Nilim	her		•	_
DOH justification) DCA Cancellation			/1	COMACI					100000000000000000000000000000000000000	1(11	L.G.		-	
DCA Cancenation				1	RMATION	V							E_	
Name of Facility Where Abatement is Takin	g Place (3	3)					Туре	of Facility (4)					0.000	(S=-1/1)
Yours Reside	2)c							School (K-12)		15.40				
Street Address	^	~						Subchapter 8 Other (i.e. priv				ings,	home	5,
115 New Jerse	1	NO						etc.)	4 45 51		T DI	da 1		
City (5)	0							P Feet	# of Fi	jors	101	dg. A	7.0	
County (6)	-		County C	ode (7)			Curre	nt Use (Prior	if being	demolish	100	, -		
0000				SE ONLY)		- 1	(-	cray						
Name of Monitoring Firm Hired by Building	Owner (8)	 -	ASCM	No.				tement Contr	actor (9)		-20 000			
			1					ition Co., I	nc					
Street Address					1		Addres	se Rd.						
City, State, Zip Code								p Code						-
City, State, Zip Code					31. 0			r, New Jer	sey 07	722				
Project Manager for Monitoring Firm		т.	Telephon	e No.			one No	-		cense No).			\neg
					1 8	732	294 1	757	0	0029				
Start Date (10)			pletion D	ate (11)	1	Vame	of OSF	A Monitor				7/22-2-		
0ccupancy Status During Abatement (Chec	1-	3/-/	7			Ctroot	Addres							
					1	Street	Addres	55						l
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr	nal Facility	Abaten y Hours	nent S			City, S	tate, Z	ip Code						\dashv
Other - Describe:	Ipm	-			_									
Scope of Work (Check All That Apply)														
, ≥3 sf or ≥3 lf		Renova				F		Containmen	t with Ne	egative P	essur	е		
≥160 sf or ≥260 lf	4	Demolit	ion					i-Enclosure vebag Proce	dure					
						4		n-Exempted (lon-Friabl		Secretary of the second	land selection	
		Locati						1					ment pe	1
Location of Asbestos-Containing Material (ACM)		Normal ed Sole		Ashes	Desci tos Contair	ription		(ACM)	Amo	nunt			1	
TO BE ABATED	110 0150500	intena todial S	ALCO 1000 1		thermal sy	ystem	s insula		(Spe	cify	Re	R	nca	Enc
In Facility (13)	000	(12)			surfacir other mis				SF o	r LF)	Remova	Repair	Encapsulate	Enclosure
χ,	Yes	No	N/A								a .	7	ate	ē
m 11	100	110	8	<u> </u>	1.				900	M	1)		
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0 3			-											_
No. of Double-ord Wests (19-de-			JDEP W	acto	Cubic Ya	ards		Name of R	agistora	d Landell				_
Name of Registered Waste Hauler			lauler ID		of Waste)	G.R.O.W		u Lanunii				
Ace Insulation Co., Inc.		1	2086			1			v.3					
Colta Nook Now Jersey					Disposal			City, State Tullytown	n PA					
Colts Neck, New Jersey Completed by	Title				/- 3	nature	7_	lanytow	u, FA	Dat	el	1	-	
George Wuest	9000000	ident			J. Gright			0.1,00	_	1	113	1/1	U	
					/	Jus	2	Ju) Lort	222		110	1,		
ASB-41 (R-06-08)					ŗ	Do no	ot use t	his form for a	sbestos	licensure	exem	pted	activit	es.

			(1	ursuant	O NJAC	o:ou and	12:120	")	(K.	# 0	6	1 -	-	
Date of Notification (1)	***************************************		T		Building			- Carrier	\	_	41		-		
1115114	Ŧ N #6 #		_		1/icc	JA	1048	5	<u> </u>		70		_		〕
Agencies Notified	Type Notification			Street A	daress	١٠,		C	sect.		9	ż	JAN	ī	77
EPA EPA	Initial		+	City Sta	te, Zip Co	MCT	1010		rece		501	<u>,, </u>	=		<u>_</u>
DEP	Amended Amendment	#	_ \	1	000		er s	100	لديدة	07	71 %	0			-
DOH	Emergency (including	r	Name of	-	110	()	11/1	1	TA	enhone Nu	nber	703	,	A Marrie
DON	Cancellation		1	R	CO				V	_		Section 1			
				FACI	LITY INF	ORMAT	ON				7	55	- '	-	4
Name of Facility Where	–	g Place (3)						Туре	of Facility (4)		2		5	
Street Address	Kesiden	٧							School (K-1 Subchapter		er than K-1	2)	-		
	nmere	Ave						N)	Other (i.e. p etc.)				dings,	home	es,
City (5)	/- A)=	· · ·							re Feet	# 0	f Floors	В	ldg. A	ge	
County (6)	120, 10.)		County (20do (7)				100	166			5	74	
minas	チ				JSE ONLY)		120	ent Use (Pric	10	ing aemolisi	iea)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	1 No.		Name	of Aba	itement Con	~	(9)				-
							Ace	Insul	ation Co.,	Inc.					
Street Address								Addre	ss se Road						
City, State, Zip Code									ip Code						
									k, N.J. 07	722					
Project Manager for Mon	toring Firm			Telephor	ne No.		Teleph 732-	none N 294-1			License N 00029	0.			
Start Date (10)	. ://	Schedule			Date (11)		Name	of OSI	HA Monitor						
1-29 Occupancy Status During	Abatement (Cher	k Only On	7-	-14			Street	Addra	00						
Facility Closed/Vaca			200	nont			Sileet	Addre	55						
Abatement Perform	ed Outside of Norn	nal Facility					City, S	tate, Z	ip Code				-		
Other - Describe.	Ham-Iba														
Scope of Work (Check Al	l That Apply)		38					_		207710-000-0		*******			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova	10000000			-		I Containme		Negative F	ressu	re		
		7	smon	1011			F		ni-Enclosure ovebag Proc						
		1						No	n-Exempted	(*) an	d Non-Friab	le Pro			(C. C. C
			_ocat				Q1 (22)	923	1				Abate Ty		
Location Asbestos-Containing		Used	Sole	ly by	Asbes	De tos Con	scription taining N		(ACM)	Δ.	mount				
TO BE ABA	TED		ntena	nce/ Staff?	(i.e.	thermal	system:	s insula	ation,	(3	Specify	Re	D D	inca	E
In Facili (13)	ıy		(12)				cing, VA niscellar			Si	or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A					1			<u>a</u>		late	Гe
indoor b	coment			X	D)	~ i.	2001	7		15	QUE	X			
						he a	<u> </u>	1			A 61	1			
										- XX504X5					
Name of Registered Was			0.03100	IJDEP W lauler ID	(V) =	Oubic of Was	Yards ste)	Contribution Contri	Registe	ered Landfill				
Ace Insulation Co., I	nc.		\$0,0000	2086	v - 5 / v -		1	_	IESE						
City, State		25 (5) (5)				1 2	sal Date		City, State				- 53		
Colts Neck, New Jer Completed by	sey	T Titte				17	27-1	4	Bethleh	em, F					
George Wuest		Presid	lent			S	ignature	/.	Ima. s	1.1	Da	te	1.		
stil.		1						1	THE .	14.1	neg)	HU	110		
ASB-41 (R-06-08)							* Do no	t use t	his form for	asbest	os licensure	exem	pted a	ctivit	ies.

D	-
Print	Form

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

	13.33	(Pursuar	nt to NJA	C 8:60 and	12:12	0) (1K#	-2	DI	7		
Date of Notification (1)				g Owner/C	perator	(2)		5 A	110			-
Agencies Notified Type Notificatio	n	Street	Address	pot	Ne.	ptune s	sewe	- MB	the	2	ly	<u>i</u> _
	DEP Amended Amendment # Emergency (including justification)											
DOH justification	n)	100			<u>, OU</u>	18 360	1 7	+)no	lumber	72		ET).
		FAC	CILITY IN	FORMATI	ON		- 15			-		-
			,			Type of Facili	ty (4)		3	5		
1 1		-D4V	7.ty		_	Subchap	ter 8 (Oth	ner than K-	12)	ildings	han	**
City (5)	c) He					etc.) Square Feet		of Floors		Bldg.		iles,
County (6)		County	Code (7)			200		l	L	5+		
Mrcmoth		(STATE	USE ONL	'y)	\	Current Use (F		ing demol	shed)			22-02
Name of Monitoring Firm Hired by Building	Owner (8)	ASC	M No.	- T	Name	of Abatement	ontracto	r (9)			-	
Street Address						Insulation Co	o., Inc					
						Address ontrose Rd.				11-13-110		
City, State, Zip Code						ate, Zip Code		_			-	
Project Manager for Monitoring Firm		I = : · ·			-	Neck, New	Jersey	07722				
1 Toject Warrager for Wormtoning Pilm		Telepho	one No.			one No. 294 1757		License 00029	No.			
Start Date (10)	Scheduled Co	ompletion	Date (11))		of OSHA Monito	or	00029				
0ccupancy Status During Abatement (Che	1-2	7-14										
Facility Closed/Vacated During Entire					Street A	Address						
Abatement Performed Outside of Non Other – Describe:	mal Encilibe Have	ernent ers		_	City, St	ate, Zip Code						
Scope of Work (Check All That Apply)	1											
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Renov Demoi					Full Contains Mini-Enclosu Glovebag Pro Non-Exempte	re ocedure					
	Is Loca				-		T Contraction	214011111111111111111111111111111111111	1	Abate	ment	t
Location of Asbestos-Containing Material (ACM)	Norma Used Sol	ely by	Asha	Desc	ription o	of aterial (ACM)			-	Ту	pe	т—
TO BE ABATED In Facility	Maintena Custodial		(i.e	. thermal s	vstems.	insulation.	(S	mount pecify	Re	AD .	Enc	g
(13)	(12)			surfacir other mis	ig, va i scellane	ous)	SF	or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes No	N/A							a		ate	<u>a</u>
out door garage		14	Sic	licy			20	MC	V			
0 0	+	-		0_								
				100						_		
Name of Registered Waste Hauler		JDEP W		Cubic Ya		Name of	Register	ed Landfill		1		
Ace Insulation Co., Inc.	1 8	lauler ID I 2086	NO.	of Waste	1	G.R.O.						
City, State Colts Neck, New Jersey	···			Disposal	Date 27-/	City, Star						
Completed by	Title				ature	7 3,10	,	Da	te I			
George Wuest	President				Wo	as quile	f		115	1/1	-1	
ASB-41 (R-06-08)				*9	So not u	se this form for	asbesto	s licensure	exem	oted a	ctivitie	es.

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

asbestos under The Ving /

()°			The viney !
Date of Notification (1)	January 14, 2014	Name of Building Owner/Operator (2) Seminole Construction	Original send with
Agencies Notified X] EPA] DEP	Type of Notification [] Initial Notification [] Amended Notification	Street Address 128 Bartlett Avenue	There 23435
x] DOL	Amendment # [] Emergency (including	City, State, Zip Code West Creek, NJ 08092	70. 5
X] DOH] DCA	justification) [X] Cancellation	Name of Contact Joyce	Telephone Number

[] DCA [x] Cancel	llation	Joyce		1		\bigcirc
	FA	CILITY INFORM	MATION		60 7	
Residence	Place (3)		Type of	School ((k-12) US pter 8 (effection k-12)	CED N
	nue			homes,		buildings,
City	County (6)	County Code (7) (STATE USE ONI	Y) 20	56 sf	1 69	++40
Long Beach Twp.	Ocean			Use (Prior if being der Residence	molished)	
Name of Monitoring Firm Hired by Building C N/A	Owner (8)	ASCM No.		t Contractor (9) Guardian Contr	racting, Inc.	
Street Address			Street Address	1889 Route 9,	Unit 61	
FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Residence Street Address 1816 Waverly Avenue City County (6) Long Beach Twp. Ocean County (6) Long Beach Twp. Ocean N/A Street Address Street Address City, State, Zip Code Project Manager for Monitoring Firm Telephone Number Tourent Use (P Re Tourent Use (P Tourent Use (P Re Tourent Use (P		ew Jersey 08755-12	71			
Project Manager for Monitoring Firm	Telephone Numbe	т		· · · · · · · · · · · · · · · · · · ·	License Number 00624	
		etion Date (11)	Name of OSHA M	onitor E.M.S.L. Analy	ytical	
[X] Facility Closed/Vacated	During Entire Period of Al		Street Address	1056 Stelton R	.oad	
	Juiside of Normal Facility F	Hours	City, State, Zip Co		ew Jersey 08854	
FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Residence Street Address 1816 Waverly Avenue City Long Beach Twp. Ocean Name of Monitoring Firm Hired by Building Owner (8) N/A Street Address City, State, Zip Code City, State, Zip Code Project Manager for Monitoring Firm Telephone Number Telephone Number Telephone Number Telephone Ty32-34 Scheduled Start Date (10) 1/10/14 Occupancy Status During Abatement (Check only one) [x] Facility Closed/Vacated During Entire Period of Abatement [] Abatement Performed Outside of Normal Facility Hours [] Other - Describe Scope of Work (Check all that apply) [] [] Renovation [] Renovation [] Renovation		Containment with Neg i-Enclosure	ative Pressure			
	L 1 55000			rebag Procedure -Exempted (*) and Nor	n-Friable Procedure	

							20		Abat	ement	Type	
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13)	N	Is Locatic formally u Solely by tenance/C Staff (12)	sed y		Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)					R E P A I R	E N C A P S U L E	E N C L O S U R E
Exterior		X		Asbe	stos siding	5		1500 sf	X			
										-	F	
Name of Registered Waste Hauler Guardian Contracting, Inc.	N	NJDEP Was	ste Hauler 1 20223	D No.	Cubic Yar	ds of Waste	Name of Regist T.R.R.F.	tered Landfill				
City, State Toms River, New Jersey			Dispose 1/15/2			City, State Tullytown	n, Pennsylvani	ia ·				
Completed by (Print or Type) Nicholas Fernicola	Title Proje	ct Manag	ger	Signa	Tullytown, Pennsylvania					e 4/201	4	

Date of Notice 12/23/1	3 otification			Building Ow odriguez	mer / O	perator (2)	SESTOS	AM 9.	
Agencies Notified			Street Ac	ddress			CE	Con 5	Ģ
X EPA X	Emergency !	Notification	4 David	Street			N.	SATA	
X DEP	Initial Notifica			te & Zip Coo	le		27	101. Da.	
X DOL	Amended No	otification	South F	River, NJ 0	8882		(4-7		
X DOH	Cancellation		Name of	Contact					Telephone Number
DCA			Mary R	odriguez					
DON			_	LITY INFO	RMAT	ION			
Name of Facility Where	Abatement is Ta	aking Place	: (3)			of Facility (4)			
	Residen	ice	3.8 - 80.			chool (K-12)		14.40)	
					S	ubchapter 8	(Other than	1 K-12)	and homos oto
	4 David S	treet							ngs, homes, etc.
					Squar	e Feet	# of Floo		Bldg. Age
City (5)	Count	y (6)	County Co	de (7)		2,000		2	60
South River		lesex			Curre	nt Use (Prio	r if being de	molished)	
South River	Initia	.5057			Hom				
Name of Monitoring Firm	Hired by Build	ing Owner	(8)	ASCM No.	Name	of Abateme	ent Contract	or (9)	
o						t Address			
Street Address						Schoolhou	se Road		
City Chata 9 7in Code						State & Zip (
City, State & Zip Code					Mon	roe Towns	hip, NJ 08	831	
Project Manager for Mo	nitoring Firm	Te	elephone N	lumber	732-	hone Numb 605-9062		License	Number 00714
Scheduled Start Date (1 12/23/13	0) Sched	uled Compl	letion Date 2/23/13	(11)	Name	e of OSHA Notal Abatem	lonitor ent Service	es, LLC	
Occupancy Status Durin X Facility Closed/ Abatement Perf	/acated During	Entire Peri	od of Abate	ement urs -	443 City,	t Address Schoolhou State & Zip	Code		
Describe: Are	ea Isolated Di	uring Aba	tement		Mon	roe Towns	ship, NJ 08	3831	
Scope of Work (Check			#\$					000 000	<u></u>
X Demolition	X	Renovation	n					with Negative	Pressure
Large Project							Enclosure		
X Quantity is ≥ 3 S	SF or > 3 LF A	CM				5.5	bag Proced		
Quantity is ≥ 16	50 SF or ≥ 260	LF ACM				Other	: Non-fria	ble	
	ion of		Is Location	n	D	escription of		Amount	Abatement Type
	Containing	1	Normally U			stos-Contain		(Specify	(Specify: Removal,
	I (ACM)		Solely by			aterial (ACM)		Square Feet	
	ABATED	N	Maintenanc	e or		hermal syste		or	or Enclosure)
	acility	0	Custodial S	taff? i		on, surfacing		Linear Feet)	
	3)		(12)		or othe	er miscellane	eous)		
(2)	Basement		N/A			TSI Pipe		110 LF	Removal
	ASSITION								
					- W	Io., va	Mosts	Name of Dog	gistered Landfill
Name of Registered W	aste Hauler	N		ste Hauler II)#	Cu. Yds. of		TRRF	giotorea Landini
Freehold Cartag				18693			0		
City, State						Disposal D	ate	City, State	Pa
Freehold, NJ							3/13	Tullytown,	Date
Completed By (Print or	Type)	Title				Signature	,		12/23/13
Dominick Tringa		Project N	Manager			Domi	nick Tr	inaali	12/23/13
						1501111	mont in	yu	

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

CKHA858%

Date of Notification (1)	114		Nan	e of Buildis	ng OwnerlOperator	(2)	rool is	见室		
Agency Natified	Type Notification		Stre	et Address				0	5	6
© EPA	□ Initial			777 , State, Zip		MUS	(4)	200	2/	9.
II DEP	Amended Amendment # 1		City	PARA	MUS .	VJ. 0	1652	200	•	9
ртбон ·	☐ Emergency (including isselfication)	ng	Nan	ne of Conta	a		Telephone Num	iber 1		, e
DCA	D Cancellation		IG	. Pui	læll_		L.			
	4		FA	CILITY IN	FORMATION		10		•	
Name of Facility Where ACRINE LET	Abatement is Taking Pla	ce (3)	0		2	Type of Facility	(4)			
ACKINE LEA	RNING G		100	INC		☐ School (K-12	8 (Other than K-12			
830 LIN	WOOD AUE	. W	EST			homes, etc.				
City (5) PARLAM	ر) ح	*	10			Square Feet 7500		Bidg. Age	SAR	2
County (6)					7) (STATE USE		rior if being demoli	shed)		11
	GEN		ON				DENCE			
Name of Monitoring Firm (8)	n Hired by Building Own	er A	No.	•	1	nent Contractor (
Street Address					Street Address	emoval I	пс			
Green				• 5		River St	:			
City, State, Zip Code					City, State, Zip		7 07601			
							J. 07601			
Project Manager for Mo	nibong Firm	Tel	ephone N	lo. ,	Telephone No. 201-329-		00388	***		
Start Date (10)	Scheduled C	ompletic	on Date (1	11)	Name of OSHA	Monitor				\neg
1-6- 20		17	114			vironmer	tal Inc			
Occupancy Status Duris					Street Address 280 Huy	ler St				
☐ Facility Closed/Vacat ☐ Abatement Performer ☐ Other — Describe: —	d Outside of Normal Fac	day Hou	rs	Ø.50	City, State, Zip (k, N.J. (07606		
Scope of Work (Check a	all that apply)						Negative Pressure		-2011 T.S.C5	
□ ≥ 3 sf or ≥ 3 lf ,2≥ 2 160 sf or ≥ 260 lf				Renovation Demolition	2 Mini	-Enclosure rebag Procedure	d Non-Friable Proc			
		ls	Location	1.	U NOR	-Exemples (*) all	I NON-FIEDS FIGO		Type	
. Locati			ormaliy I Solely b	y .	Description			П	Π.	\Box
Asbestos Containii TO BE A			ntenance/ ustodial		estos Containing M e., thermal systems	s insulation,	Amount (Specify	Rer	Repair	Enclosure
IN Fa		- 1	(12)		surfacing, VA other miscellan		SF or LF)	Removal	pair	ogur
	• • • • • • • • • • • • • • • • • • • •			-				-	8	,
77	r/Niser	Yes	No N	VA US	DUAL SYSTEM	C.b.estera	604	FX	+	+
1.7600	- Justic	\vdash	+7	THE	open system	TIP SU INT POLI		-	+	\forall
			-+							I
										Ш
Name of Registered Wa		ID I	000	te Hauter	Cubic Yards of Waste					
Best Remova	al Inc	1000	7109		1/20	/ 1	a Enterpr	ises		
Cay. State Hacker	nsack, N.J.	0760	01	0	Disposal Date	City. State Waynes!	ourg , Oh			
Completed by J. Maiorano	Title Estin	nato	r		Signature	aisnow	2	Date 10	20	14
			_						- 30	

	N	OTE (F			of ASE	estos abat 8:80 and 12:1	20) 20)	shack 4	839
12-24	-2013 ·			AL	Pin	E LEARN	ing Gre	COUP, IN	839 CAL WALL TO THE STATE OF TH
Agency Modified	Type Helliestics	•		77	Address	ARAMUS	ROAK)	RESTOS CON
DEPA DEP DOL	Similar D Amendes		- Incom		Steden Tito		14		CENCER
-B DOL	C Emigracy (neb) V	of Comb	2 , 10	7 076	Telaphate Mr	00
EDCA .	Consulation			All Indiana and Address of the Lot	THE REAL PROPERTY.	RCELL		٠	- 0
				FAC	LIVE	CRIMINON	Type of Facili	× 60	7
ALPINUG	LEARNING G	100	19P,	I,	w.c.		© School (K-	60. A 19600	2)
830 L	INWOOD AVENE	IE	W	557	-		factors, of	3	Bids.Ago .
PARV	tmus.	•					7500	3	113 98405
County (6)	GEN		·	Cours	by Codo (i	(STATE USE	RESIDE	SUCE	oliched)
	g From Hand by Building Ou	nút	ASC	J Ma.		Name of Abster	ment Contractor	(2)	
(Fig.)						Best R	emoval	Inc	
2 27						450 S.	River S	t	
Cay, 200-20 Co						Hacken	sack, N	.J. 07601	
Page Charge 6	or Ministratory Plans	I	elepha	mo No.		Telephone No. 201-329-	7444 -	00388	
35 (15)	Schoduled)	Mamo of OSHA Omega En	Months	ntal Inc	
1-6+2	014 1-17			1	· .	Street Address			
G Facility Closed?	Acceled During Entire Period			t		280 Huy			
O Charles Peril	= 7 AM - 5 PM			• • •				ck, N.J.	07606
Sapp of Mark (Ca D 2 3 of or 2 3 f B 2 100 of or 2 2 s			_			-8385	Englishme shap President	d Majorito Process el Majo-Frinklo Fre	•
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	section of tables, Manual (ACM) DE ADMIDE M. Facility. (13)	Ven - Ma	301 313 (12)		Asber (i.e.	Description of the control of the co	of desiral (ACM) " investation, of_ coss)	Amount Gpacify SF-cr-LP)	Energy unto Energy unto Rogar Romoval
Q a comment		Yes	Nb	NEA X	1/0-	+ MASTIC		400	5FX
BASEMENT C	RAWL PIPE CHASE			X	The same of the same of	ANIAC INSUL		500	LFX
Kitaten				X		LEUM		300	SF X
Best Reno	oval Inc	D	710	l Isste i 9	Santer ·	Cubic Yards of Winds	Name of Region	Enterpr	ises
Eacl	kensack, N.J.	076	01			1-17-14	Waynes!	ourg , Oh	
R. VELDR	AN Estim	ato	r			R. Voldiar	1		12-24-2013

		li en	1	110 00			100 70	7	A	_
Date of Notification (1)	4		A		Building Owner/Open		de Co	1	5	0
1/14/	14		\perp		C. KUJAWS	Ku	1000	4/4		
Agency Notified	Type Notification				5 BALOWIN	BUA	CAS.	ON	رح	\leq
DEP	☐ Amended		3	City, Sta	ite, Zip Code .		71.51	6 PO.		
II DEP III DOL	Amendment #	_			MILFORD	, NO. O	1640	~~~		
E DOH .	justification)	9	P		f Contact		Telephone Nu	0)	_	
□ DCA	☐ Cancellation		丄	MR	. DENNIS		1		_	-
	ě			FACIL	ITY INFORMATION					
Name of Facility Where		æ (3)	ė.		•	Type of Facility	r (4)			
MR. 1	CUJAW SICE				*	☐ School (K-1	2)	~ ·		
Street Address					:	2 Other (i.e. p	8 (Other than K-1 rivate & commercial	2) ial buildings	•	
295 BA	LOWIN AU	5				homes, etc.)			
City (5)		**		*		Square Feet	# of Floors	Bidg. A		· ·
, MEN +	41 FORD					1.2200	2		35	
County (6)					Code (7) (STATE USE		rior if being demo	ished)		
BER				ONLY			210en CE			
Name of Monitoring Firm	Hired by Building Owne	A	SCM	No.	San Charles Control of Control	stement Contractor				
(8)						Removal 1	nc			
Street Address				,	Street Addre		_			
,					450 City, State, 2	S.River St			0.000	
City, State, Zip Code	N.				Hack	ensack, N	J. 07601			
B. J. A. M		77.4	anhar	e No.	Telephone N		License No.			-
Project Manager for Mor	NEOLING FIRM	168	sprion	e No.		9-7444 -	00388			
Start Date (10)	Scheduled Co	mpletin	n Dat	e (11)	Name of OS	HA Monitor				
1/21/14		22/	10		Omega	Environme	ntal Inc			
Occupancy Status Durin			-	<u> </u>	Street Addre					
	. •		mont		280 H	uyler St				
☐ Facility Closed/Vacate ☐ Abatement Performer	4 Outeide of Mormal Faci	ity Hou	incir. Is		City, State, 7			07(0)		
D-Other - Describe: 9	MUTO SPM				South	Hackensa	ck, N.J.	07606		
Scope of Work (Check a	H that apply)					ull Containment with	h Negative Pressu	are .		
Ø≥3⊈or≥31				☐ Ren		Mini-Enclosure Stovebag Procedure		27		
□ ≥ 160 sf or ≥ 260 lf				a neu		Non-Exempted (*) au	nd Non-Friable Pro	cedure		
		Je I	Locati	on	a 8				Abate Ty	
		· No	omal	ly	Descrip	tion of			T	
. Locati Asbestos-Containi			Solei		Ashestes Containin	o Material (ACM)	Amount		Repair	Eng
TO BE A	BATED	C	ustodi	al	(i.e., thermal systems	vAT, or	(Specify SF or LF		Repair	noapaulat
IN Fa		- 4	(12)		other misc			· A	=	ulat.
(
· - ·		Yes	No	N/A	1 1 1 1 2 2 2	ALC INC LANGE	58	LE Y		\vdash
BASEMEN	τ.			P	THERMAL SYSTE	Mellibro Ni sha	7 8		+	+
	*						-	+	+	H
								+	+	\vdash
						. 1::	about 1 as diff			
Name of Registered Wa	aste Hauler	1 7777	DEP V No.	Naste I	fauter Cubic Yard Waste	1	istered Landfill			
Best Remova	al Inc		710	9	11/20	7 Minerv	a Enterp	rises		
		11	, 10		Disposal D	A Con State				
City, State Hacke	nsack, N.J.	076	01		1/22/	***	burg, 0	п		
Completed by	Title				Signafure	A		Date	4)	, L
J. Maiorano		ato	r		///	fois were	2	1 6//	1/	14
ACC 44		d area fin	is for	m for as	bestos licensure exen	pled activities.		1		

0x/4380

STATE OF NEW JERSEY

NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to N.J.A.C. 8:60 AND 12:120)

Date of Notification (1)		Name of Buildi	ng Owner/C	perator (2)	1	3	2, 3	1/2	11			
							of Education	n	Ço'	S.	1/2	
Agencies Notified		Notification	Гуре		Street Address				~	100	5	2
X EPA		Initial			601 Willow	Grove Str	reet			S	2	ا و
X DEP		Amende	d #		City, State, Zip	Code				(0)	N/X	5
⊠ DOL			ncy (includi	ng	Hackettstow	n, NJ 07	840				02	
X DOH		justificat Cancella			Name of Conta		- 1	Tol Nive	mho-		-	~
DCA				FACILITY IN		IIIEIII					-	
Name of Facility Where Abater	ment is Ta	iking Place (3)		Type of Facility	(4)						
Willow Grove Elementar	y Schoo	ol			School (K	(-12)						
Street Address						er 8 (Other	than K-12)					
601 Willow Grove Street	t				- '							
City (5) Co	unty (6)		County C		homes, e	그 1985년 전 시간이 아니다 나는 다음이	commercial b	uliaings,				1
Hackettstown Wa	arren		(State Us	e Only)								
Name of Monitoring Firm Hired		Owner (8)	ASCM No	<u>D.</u>	Name of Contra	-						
Westchester Environme	ntal		00127		MTM Metro	Corporati	ion					
Street Address					Street Address					300-10		A. C
307 N Walnut Street					135-137 Mc City State, Zipo							
City, State, Zip Code									200000			
West Chester, PA 19380					Paterson, N							
Project Manager for Monitoring	Firm	Telephone I	Number		Telephone Nur	- (ASS)		License		er		
Paul McCaa		610-431-7	545		973-742-50	20,000	00809					
Scheduled Start Date (10)		Scheduled (Completion	Date (11)	Name of OSH/							
1/10/14		1/12/14			MTM Metro		tion					
Occupancy Status During Aba	tement (C	heck only one	e)		Street Address	•						
					135-137 McBride Avenue							
Facility Closed/Vacated [City, State, Zip Code							
Abatement Performed Or	utside of N	Normal Facility	y Hours		Paterson, N	J 07501						
★ Other-Describe: unoc uno	cupied											
Source of Work (Check all that	apply)											
> 3 sf or > 3 lf	\times	Renovation	1	Full	Containment wit	h Negative	Pressure		i-Enclo			
× > 160 sf or > 260 lf		Demolition		× Non	-Exempted(*) &	Non-Friable	Procedure	☐ Glov	vebag l	Procedu	re	1
Location of Asbestos-		ation Normally		Description of		Amount (Specify SF or	LF)	Abate	ment Ty	pe	
Containing Material (ACM) in Facility (13)	Solely Staff?	by Maint./Cus (12)	stodial	thermal system surfacing, VAT	ns insulation, , or other							
15 15 150 a	YES	NO	N/A	miscell.)					Rem.	Rep.		Enclose
Main Office Main Office		-	X	Tile Mastic VAT		1483			×	-	 ×	+
wan Once				YAI	500 X							
Name of Reg. Waste Hauler		NJDEP Was	ste Hauler I	D#	Cubic Yards of Waste Name of Reg. Landfill							
MTM Metro Corporation		26552	oto i iduloi i		10			Tullytow				
City, State							Disp. Date			City, Sta	te	
Paterson, NJ 07501							1/13/14			ullytowr		2000
Completed by (Print or Type) Title					Signature Date							
Title												
Elizabeth Maslarkov Business Administrator					Elizabeth Maslarkov 1/09/14							

ASB-41

^{*} Do not use this form for asbestos licensure exmpted activities.

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:1267) ASSOCIATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:1267)

Date of Notice 1/10/14 Type Notificatio	n	Name of Buildi	ing Owner /	Operator (2)	ESTOS	M 9: 3	
Agencies Notified X EPA Emer X DEP X Initial X DOL Amer	gency Notification Notification nded Notification ellation	City, State & Z Teaneck, NJ Name of Conta	07666 act		ENSING	TROL	Telephone Number
DCA		Cory Beckw	ith				
		FACILITY	INFORMA	TION			
	ent is Taking Place esidence East 7 th Ave	(3)		of Facility (4 School (K-12 Subchapter 8 Other (i.e., p) 3 (Other than K	-12) ercial buildi	ings, homes, etc.
343 [EdSt / Ave			are Feet	# of Floors		Bldg. Age
City (5)	County (6)	County Code (7)		2,000	2		60
Roselle	Union				r if being demo	olished)	
Name of Monitoring Firm Hired b	y Building Owner	(8) ASCM	Glo	bal Abatem	ent Contractor ent Services		
Street Address				et Address Schoolhou	ise Road		
City, State & Zip Code			Mor		hip, NJ 0883		
Project Manager for Monitoring F	10000	elephone Numbe	732	phone Numb -605-9062		License	Number 00714
Scheduled Start Date (10) 1/21/14	Scheduled Compl 1	letion Date (11) /22/14	Nam Glo	e of OSHA N bal Abaten	Monitor nent Services	s, LLC	
Occupancy Status During Abate X Facility Closed/Vacated Abatement Performed O Describe: Area Isola Other - Describe:	During Entire Peri outside of Normal F	od of Abatement Facility Hours -	City	use Road Code ship, NJ 0883	31		
Scope of Work (Check all that ap Demolition Large Project X Quantity is ≥ 3 SF or ≥ 3	X Renovation3 LF ACM	1	i.	Mini-E X Glove	containment wite Enclosure Bebag Procedure Non-friable		e Pressure
Quantity is ≥ 160 SF or	≥ 260 LF ACM	Is Location	Г	escription of		Amount	Abatement Type
Location of Asbestos-Containir Material (ACM) TO BE ABATED in Facility (13)	N	Normally Used Solely by Maintenance or Custodial Staff? (12)	Asbe M (i.e., insulati	estos-Contair aterial (ACM) thermal syste on, surfacing er miscellane	ing) So ems , VAT Li	(Specify quare Feet or near Feet)	(Specify: Removal,
Baseme	nt	N/A		TSI Pipe		7 LF	Removal
Name of Registered Waste Hau Freehold Cartage	iler N	JDEP Waste Ha		Cu. Yds. of		me of Reg	jistered Landfill
City, State		Disposal Date City, Sta				ty, State	Pa
Freehold, NJ Completed By (Print or Type) Dominick Tringali	Title Project N	lanager		Signature	inick Trin		Date 1/10/14

01/09/2017 12:35PM FAX

sidie of now Jerby Notification of abetement

05:12PM NJ Asbe	stos Control	609.6	33,(2664		balle	1	14 4	.0.				
17 12:35PM FAX								2014			000	3/0	004
0		N		PIGATI	on of as	iow Jerboy BESTOS ABATE 3 8:00 and 12:11	MENT (TO T	17 17	40	6	Ò	
Date of Notification (1)	-					ng Owner/Operote	1 (2)	C	C_{α}	ب.			1
01/0/2				Pus	sale Cou	nty Building &	Ofounds	- 100	10/0	AY		2.10	
EPA ESPINON ADDRESS	Type Nethicalis	o n			ot Address Ponnsyl	vahia Ave		The state of the s		7	T	Cope N	T
DEP BOL	Amended Amendmen	8	2573		state, zip urson, N.			1	7 9	.4.			
图 DON 区 DCA	Emergency justification Cancellation	5	8	Non	s of Cente Jack Nig	ict		1 Cellis		A P			+
		, , , , , , , , , , , , , , , , , , ,		Tomas	N. T.	FORMATION	TW	AVER	MITT	ROW!			
Passaic County Cou	Abanament le Yali Altouse	thg Pince	(9)				Typoor Paul						-
Street Address 71 Hamilton Street							Subchipt Other (I.o	. (5) oris (Other private 8 16.)	lhea IC-1 commorei	2) ai bull	ding	3,	
City (6) Paterson							Square Peel 50000 SF	A GP P		16	ldg. Q⇔	Age	
County (0) Passaic				US!	unty Code EONLY)	(7) (BYATE	Courshouse	(Pilot II boli	g demail	hod)			Elean.
Name of Manifering Firm (8) Langan Bugineer	Hirod by Bullding	Owner .		ASCIV			nont Contractor			The Ca			400
Stroot Address		00		0002	19	DOWNED AND	I Construction	an, Ins.			+		K(2)
River Drive Center C	one, 4th Floor					1360 Cliffon		18 Sulfa	216				
Elmwood Park, NJ 0				100000		Cirion, NJ	07012						×==
Project Manager for Mon Vijny Patel	itofing Firm			-794-69	No. 00 # 4866	Telophama No. 973-389-00	89	Licon D06	oo No.				
Start Date (10) 01/10/2014		/13/20]		alien D	210 (11)	Name of OSHA DIA Genera		us lae			T	-	
Occupancy Stolus Guille	Abatomort (Chi	эск опіу	ona)		- 107	Street Addross		-					
Facility Closos/Vocate Abbicment Perfermed Cliner - Describe:	d During Entire P Outside of Norm	Ported or a	ABSI Hou	omoni ark		1360 Clifton Gily, Stato, Kip C Clifton, NJ 0	000	MB Suite	218				
Scope of Work (Ghask pl	that apply)			***************************************				-813		-		257	
2 = 3 of er = 3 if = 180 of or = 280 if		Re Do	ney8' Office	llon Ikion		R Gevebe	g Procedure	5000 T ababah			1		
			oced rmoli			I I NINK-E	rampine (°) and	Nan-Fine	III Proce	7		กละกใ	
Asbestos Containing Ma	f Horidi (AGM)	Usod	Solo	ly by	Ashco	e nelletresed low enhighed es	orlal (AGM)	Amai	ent.	\vdash	Tyl		
TO RE AGATI IN FECTILY (19)		6	12) (12)		(1.0.,	i amoleys loonodi TAV, gelasitus tenelisealm tedis	revialion, of	(Spor		Removal	(Region)	Encapsulate	Enclosure
		Yoa	Na	N/A						5	Ī		िले
First floor Room 100	11 m	X		-	Pipe Jo	THE PERSON NAMED IN COLUMN TWO	-Va-	4 LF	7	K	1		
First Noor Koom 146 Draund Noor Room L	7	X		+-	Pipe Jo	The second secon	3.5 LF X				÷		
			-	Pipe Jeints									
Name of Registered Wast Service Transport Ord				NJDEP Wosta Gubte Yards Haular ID No. 20970			Nome of Registered Lancill Minerya Landfill						
City, State					Dispessi Date			O Offy, State				10	
New Castle, DE	THE	-	2	Carrier .		03/13/2014 Signature	Waynesbu	rg, oh 4	D010		-		
Croterth Jaged	retarth Jagud President					- EL	4		01/10/2	014			
1941	4 6	DO NOT DAY	e भार	form	for ashest	os Hooneura exam	pled Scholelas,				1		25.12.20.2

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

-03/ x				MOITAC	OF ASE	ew Jersey BESTOS ABA 8:60 and 12:		NT	314 14 17 18 18 18 18 18 18 18 18 18 18 18 18 18		1/2			
Date of Notification (1) 12/27/2013	1					g Owner/Oper operty Comp) (nc	€ 30 × 2	٥.	(0		
	pe Notification		-	Street	Address			THE .	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1/2			=	
□ EPA □	Initial			-		ee Road NE			TO A		&c	===	_	
⊠ DOL	Amended Amendment #_	1	. [State, Zip nta Geo	Code rgia 30319			J. D.	0				
⊠ DOH	Emergency (in justification)	cluding		7	of Conta				Telephone Numb	er_	_		=-	
□ DCA	Cancellation			Seth 1	Morris				1.				_	
				FAC	CILITY IN	FORMATION						A STATE OF THE STA		
Name of Facility Where Abate Proposed Restaurant De	ement is Taking	Place	(3)					Type of Facility School (K-1:	44					
Street Address	pot I donney		-					Subchapter	8 (Other than K-1 2					
1760 Durham Road	4						_ L	Other (i.e., p homes, etc.	rivate & commercia)					
City (5)							1.00	Square Feet 100,000 SF	# of Floors Single Story	50 50	dg. A	ge		
South Plainfield County (6)				Cour	nty Code	(7) (STATE			for if being demolis	-				
Middlesex County					ONLY)		_ -		office/warehouse	e spa	ce		_	
Name of Monitoring Firm Hire	ed by Building (Owner		ASCM	No.	Name of Abatement Contractor (9) Valiant Associates, LLC								
(8) N/A Street Address		800 F 60		N/A		Street Addre								
Street Address						145 Mill S		t						
City, State, Zip Code						City, State, 2 Patersor	Zip Coo	de 07501						
Project Manager for Monitoria	ng Firm		Tele	phone	No.	Telephone N 973-553		1	License No. 01108					
Start Date (10)	Sched	duled Co	mple	tion Da	ite (11)	Name of OS								
01/08/2014		08/201						iates, LLC						
Occupancy Status During Ab Facility Closed/Vacated D				mont		Street Address 145 Mill S	317.X	t						
Abatement Performed Out						City, State, 2							-	
Other - Describe:						Paterson	, NJ	07501						
Scope of Work (Check all the	at apply)	Rei				Min	ni-Enclo	osure	gative Pressure					
≥160 sf or ≥260 lf		☐ De	emol	ition				Procedure mpted (*) and	Non-Friable Proce	dure				
		No	ocati rmall	y			727			P	Abate Typ	meint pe		
Location of Asbestos-Containing Mater	rial (ACM)	Used Main			Asbe	Description Descri	Mater	ial (ACM)	Amount			rn		
TO BE ABATED IN Facility		1000000	stodi taff?		(i.e	, thermal systems, \ surfacing, \			(Specify SF or LF)	Ren	Re	ncap	Enclosure	
(13)			(12)			other miscel				Removal	Repair	Encapsulate	sure	
		Yes	No	N/A						-		(i)		
Office area in DHL build	ding	100	110	X	ACM :	Black floor r	nastic		6,200 SF	X	000000			
Office area in DHL build	ding			X	12"x12	2" White Flo	or Til	es	60 SF	X				
Southern DHL Facade				Х	ACM	Transite Pan	els		2,000 SF	X		_		
				LIDES	Masta	Cubic Yards		Name of Rea	stered Landfill					
Name of Registered Waste H				NJDEP Hauler II 20970		of Waste	3	Minerva L						
Service Transport Group	p			209,/0		Disposal Da	ite	City, State	WEATERITY.					
City, State New Castle, DE						02/08/201	2553		rg, OH 44688					
Completed By	Title				25 1.37	Signatu	ire	a fi	. Date	2014			BC/ ENC.	
Miodrag Stamenovic	Pro	ject M	lana	ger		2110	iad	ing Col	Encen 01/13/	2014	_			

List of Asbestos Containing Materials to be Removed from the Following Location Note: Is location normally used by maintenance/custodial: N/A Proposed Restaurant Depot Facility 1760 Durham Rd., South Plainfield NJ.

Location of ACM to abated in facility	Description of ACM (i.e thermal systems insulation, surfacing, VAT or other miscellaneous)	Amount (Specify SF or LF)
Perimeter roof	Roof flashing	1200 SF
2 Canopies on west side loading dock areas	Built-up roof	960 SF

CK oqual

09601.				IJAC 8:60 a			<i>a.</i> -	1		ą.	
Date of Notification (1)	!			Building Owner		(2)	337	THE	1	1	
Agency/Notified	Type Notification		Street Ad	dress		S. 1	200	à	۲_	" 100000 100000 100000000000000000000000	
DEP DEP DOL	☐ Initial ☐ Arpended			e, Zip Code	NTA	Je 10	OAD C		8/1/2		4
E DOH	mendment # Emergency (incluing justification)	ding	Name of		N	1 0	Tolophono Alum	100		ور	
□ DCA	□ Cancellation		2/4		ern	icy			-		
Name of Facility Where A	Abatement is Taking F	Place (3)	PACILIT	YINFORMATI	ON	Type of Facili	ty (4)				\dashv
KAMPA	rcK					☐ School (K-	524.4				
Street Address	YASC ROA	1)				☐ Subchapte	r 8 (Other than K-12 private & commercia	!) al building:	S,		
City (5) NCWAN	1/		7			Square Feet	# of Floors	Bldg. A			+
County (6)				ode (7) (STATE	USE	Current Use (Prior if being demoli		تها		\dashv
Name of Monitoring Firm	SCV Hirod by Building Ou	TASS	ONLY)			MHAUE	ritumin				
(8) EHT	Hiled by Building Ow	ner ASC	M No.	Name	W /	ent Contractor		st.	. [. 1	11
Street Address Wes	+ CHone	TILA	al	Street A	Address	(E X	, -	<u> </u>	V	,,,,,	
City, State, Zip Code	Man 7	ense		City, St	ate, Zip C	ode		11.	7		-
Project Manager for Moni		0,00	one No.	Télepho	ne No.	ctts	License No.	70 \			\dashv
Start Date (10)		Completion D	ate (11)	Yo8-	f OSHA N	Agnitor Agnitor	0076	8			_
Occupancy Status During	Abatament (Charles	/14		13	140						
☐ Facility Closed/Vacated	Durina Entire Period	of Abatemen	.+	Street A	ddress		E.				
☐ Abatement Performed	Outside of Normal Fac	aility Hours		City, Sta	ite, Zip Co	ode					7
Scope of Work (Check all		• • • •	/		1					-	-
□ ≥ 3 of or ≥ 3 if □ ≥ 160 sf or ≥ 260 if			Renovat Demoliti		☐ Mini-E	inclosure bag Procedure	n Negative Pressure				
		Is Locat	tion		□ Non-E	xempted (*) an	d Non-Friable Proce		Abater	nent	-
Location		Norma Used Sole	elv by	Desc	cription of			-	Тур	е	+
Asbestos-Containing TO BE ABA	ATED	Maintena Custod	nce/ /	Asbestos Conta (i.e., thermal s	systems in	nsulation,	Amount (Specify	20		E E	1
IN Facili (13)	ity	Staff1 (12)	60	surfaci other mi	ng, VAT, scellaneo	or ous)	SF or LF)	Removal	Repair	Encapsulate	•
0 1		Yes No	N/A					=	1 8	e	
Boilen Ko	OBL		1	51			60 sy 61	2 X	1		1
									H	+	-
Name of Registered Waste	Hauler	NJDEP V	Vaste Haule	r Cubic Ya	rds of	Name of Regis	torod Lau JCII				1
Waste MAN	ascment	ID No.	73	Waste	30 01	6 No 4					
City, State	NJ			Disposal	Date /	City State	Villa A	A			1
Completed by MACA	FAMIN A	nesi	lent	Signature	81/	1/1/11		ate //	, /,	1/	-
ASB-41		use this form	for asbesto	s licensure exe	mpted Ac	tivities	2	1/1	11	7]

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Date of Notification (1) 1-14-14					Building C EL DIN		perator	(2)	9	A 7	2 /4		2		
Agencies Notified	Type Notification			Street Add	dress RVARI	D DR				Ç.		1	2		
DEP DOL	Initial Amended Amendment		_	City, State WENO	e, Zip Coo NAH, N	de IJ 0809	0				S. C. A. C.	7	, ,	`C	
DOH DCA	justification) Cancellation			lame of 0	Contact EL DIN	IOVI				Tala		Oskar V	1))	
				FACIL	ITY INFO	RMATIC	N					(
Name of Facility Where RES. HOUSE	Abatement is Takin	g Place (3)						Турк	e of Facility (4 School (K-1: Subchapter	2)	er than K-12) }			
Street Address 333 HARVARD DI	R								Other (i.e. p etc.)	rivate 8	commerci	al build			s,
City (5) WENONAH			2-11/1-52					200		2	Floors	4	dg. A 5	ge 	
County (6) GLOUCESTER	1.500			County C	ode (7) SE ONLY)			Cun NA	rent Use (Prid	or if bei	ng dennolist	ned)			
Name of Monitoring Fin Horizon Environm		Owner (8)		ASCM	No.		Name	of Ab	eatement Con ED ENVIRO	tractor ONME	(9) NTAL				
Street Address							Street 570		ess MS RUN						
City, State, Zip Code Thorofare, NJ 080)86						City, S MUI	State,	Zip Code A HILL NJ	08062	2				
Project Manager for Mo	onitoring Firm		1	Telephon	e No.		Telepi 610-		No. -4676		License N 01145	cense No. 1145			
Start Date (10) 1-27-14		Scheduler 2-27-14							SHA Monitor						
Occupancy Status Duri	ng Abatement (Che	k Only One	4)				Street	Addr	ess						
Facility Closed/Va	cated During Entire med Outside of Non	Period of A	batem			_	City, S	State,	130 NORT Zip Code //INSON	H					
Scope of Work (Check	All That Apply)	4													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emoliti	75000 C 4 C					full Containm fini-Enclosure Blovebag Pro- Ion-Exempte	e cedure				e	
		1							ton Exemple	<u> </u>	a rion i na		1880 TEST	emen	t
			Locati ormal			1000	0.000 <u>48.82</u> 200						Ty	pe	
Asbestos-Containin TO BE A In Fac (13	ng Material (ACM) BATED cility	Used Mai	d Sole ntenar odial S (12)	ly by nce/		tos Cont thermal surfa		Mater ns ins AT, or		(\$	mount Specify For LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A										66	
1ST FL	OOR			X			VAT			6	00 SF	X			
1ST FL		Х			MASTI				00 SF	X					
1ST AND 2N	ND FLOOR		HEPA '			EPA V	AC WI	ET V	VIPE	20	000 SF	X			
Name of Registered W ASSURED ENVIR		RVICES	1 1	JDEP W lauler ID		Cubic of Wa	Yards ste	402-			ered Landfi STE IMP		L LA	NDF	ILL
City, State MULLICA HILL NJ				Dispo	sal Date	e T	City, Sta	te RIAL,	PA						
Completed by JOHN ZUMBO	SIDE	NT	-		Signatur	U	Zu	l	D	ate 1-14-1	4				

arra Color

Date of Notification (1) 1-14-14		Na (ame of E COMP	Building O REHEN	wner/Op ISIVE	perator PROP	(2) PER	TY MANA	GEME	NT JAK	y	1	<u> </u>	
Agencies Notified Type Notification EPA Initial		St 6	reet Add 600 BE	dress RLIN C	ROSS	KEYS	RC	AD	Ç.	155700	17 0	4/2	10	
DEP Amended Amendment		Ci	ity, State SICKLE	e, Zip Cod ERVILLE	e E NJ 0	8081		TY MANA OAD		CEN	CONT	٠ ٠ ٠,	3>	
DOH justification) Cancellation	including	N:	ame of (Contact ZUMBO					Tele	ephone Nu	imbei 7	21		
			FACIL	ITY INFO	RMATIC	ON	-	F 104 -	(4)			_		
Name of Facility Where Abatement is Takin RES. HOUSE	g Place (3)						H	se of Facility School (K-Subchapte	12)	er than K-1	. (2)			
Street Address 571 Berlin Cross Keys Road							\frac{1}{2}	Other (i.e. etc.)	private 8	k commerc	cial build			s,
City (5) SICKLERVILLE NJ 08081							20	uare Feet 100	2	Floors	4	dg. A 5	ge 	
County (6) GLOUCESTER			ounty C	ode (7) SE ONLY)		_	N/	- 572.0			shed)			
Name of Monitoring Firm Hired by Building NA	Owner (8)		ASCM	No.		Name ASS	of Al	batement Co ED ENVIF	ntractor RONME	(9) ENTAL				
Street Address						Street 570		ress EMS RUN				35		
City, State, Zip Code						City, S MUL	State,	Zip Code A HILL N	J 0806	2				
Project Manager for Monitoring Firm		T	elephon	e No.		Teleph 610-		No. I-4676		License 01145	icense No. 11145			
Start Date (10) 1-24-14	Scheduled 1-26-14	Completion Date (11) Name						SHA Monito	r					
Occupancy Status During Abatement (Chec	k Only One)					Street Address								
Facility Closed/Vacated During Entire			ent			200	RT	130 NOR	TH					
Abatement Performed Outside of Norr Other – Describe:	nal Facility H	ours)) 				, Zip Code MINSON						
Scope of Work (Check All That Apply)					1880		7							
≥3 sf or ≥3 if ≥160 sf or ≥260 if		Property Committee	novation					Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure						
	T							Non-Exemple	eu () an	G NOIH II	able Fio		emen	t
Location of	1.00	ocatio rmally	2.70		Dec	scription	n of					T	/pe	
Asbestos-Containing Material (ACM)	Used : Maint			Asbest	os Cont	aining I	Mate	rial (ACM)		mount	1		m m	m
TO BE ABATED In Facility	Custoo	dial St	50111100en	(ı.e.	surfac	cing, VA	AT, o	sulation, r		Specify F or LF)	Removal	Repair	caps	Enclosure
(13)		(12)			other n	niscella	neou	ıs)			oval	Bi-	Encapsulate	ure
	Yes	No	N/A						-	NOD OF			-	
OUT SIDE SIDING			Х			SIDING	.i 		20	000 SF	X	-	-	
										E.		_	-	-
	\perp								-			-	┝	-
		NJDEP Waste C			Cubic	Yards		Name	of Regist	ered Land	lfill	L		L_
Name of Registered Waste Hauler ASSURED ENVIRONMENTAL SE	0.000	auler ID		of Wa					STE IM		LLA	NDF	ILL	
City, State MULLICA HILL NJ				1-29			City, St IMPE	ate RIAL,	PA	85				
Completed by JOHN ZUMBO	IDE	VT		5	Signatur	re)	4/	no		Date 1-14-1	4			

No wick

Date of Notification (1) 01/13/2014		Name of Building Owner/Operator (2) New Jersey Institute of Technology Street Address 323 Dr. Martin Luther King Jr. Blvd.										73	4		
kan Bura sama anda ana ana	Type Notification		+	Street Ad	ldress						<u>ن</u> ت	, (E.		>
EPA DEP	Initial Amended		-		. Martin	and the same of	r King .	Jr. BIV	/a.		000	2	7		-
× DOL	Amendment		_		k, NJ 07						* 6	000		0	
ĭ DOH	Emergency (justification)	including	Ī	Name of						Tel	ephone Nu	niber !	7	0 12:3	4
☐ DCA	Cancellation				eph Me					1 -		7-	<u> </u>	ii ii	
Name of Facility Where A	batement is Takin	g Place (3))	FACIL	ITY INFO	PRMATI	ON	Туре	of Facility (4)		0	80.		
NJIT-ME Bldg.									School (K-1	2)			-		
Street Address 200 Central Avenue				0 2				Ħ ·	Subchapter Other (i.e. p				dings,	home	es,
City (5)								Squa	etc.) re Feet	# 0	f Floors	Е	ldg. A	ge	
Newark						9		75,0		3			50 Y	ears	
County (6) Essex				County C	ode (7) ISE ONLY)			Curre	nt Use (Pri	or if bei	ng demolis	hed)			
Name of Monitoring Firm Health & Safety Serv		Owner (8)		ASCM 00117					tement Cor t Haz Ma).			
Street Address 318 12th Street								Addres	ss Street						
City, State, Zip Code				97					ip Code	**************************************					
Hammonton, NJ 080	037						16.75-000175		NJ 0750	4					
Project Manager for Moni Mr. Jim Proctor	toring Firm			Telephor 609-70	ne No. 4-8850		1	none N 345-0			License 1 00507	No.			
Start Date (10)			mpletion E	Date (11)		1.1010000000000000000000000000000000000	0.200	A Monitor							
January 2, 2014 Occupancy Status During	Abatamant (Char	Januar		, 2014				Addres	above						
Facility Closed/Vaca Abatement Performe Other – Describe:	ted During Entire	Period of A	bate						ip Code	-		*****			
Scope of Work (Check All	That Apply)				7000						-				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	tenov emol				2	Min	ll Containm ni-Enclosuro ovebag Pro n-Exempte	e cedure				· 0	
		Is	Loca	tion				_ NO	II-Exemple	u () ai	U NOII-FIIA	Die Pic	Abat	emen	t
Location	of	N	Norma	ally		De	scription	n of				-	Ty	/pe	
Asbestos-Containing <u>TO BE ABA</u> In Facilii (13)	TED	Ma	intena	Staff?		thermal surfa	taining M I system cing, VA miscellar	s insula AT, or					Repair	Encapsulate	Enclosure
* ::-*		Yes	No	N/A				•			· ·	Removal		ate	6
Room 1	19		Х			F	loor Ti	le	-1-20-0	2,0	000 SF	X			
Room 1	19		X			Wa	all Plas	ter		6	00 SF	X			
Corridor adjacent	X		00-4000-5000-	Wa	all Plas	ter		6	00 SF	x					
Room 1	19		Х			Wa	all Plas	ter		2,0	000 SF	х			
Name of Registered Was Freehold Cartage	te Hauler			NJDEP W Hauler ID 13206		of Wa	Yards iste Cyd's		Name of G.R.O.		ered Landfi Inc.	11	See Heel		
City, State Freehold, NJ						Dispo	sal Date 0-2014		City, Star		K				
Completed by James E. Unger	ct M	anager			Signatur	m	91	14		ate 1/13/	2014				
ASB-41 (R-06-08)					5	1	* Do n	ot use	this form fo	r asbes	tos licensu	re exe	mpted	activ	ities.

MAY 11

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 5:16)

ate of Notification (1) 1	0 ncluding g Place (33)	Street Ad 1 Faye City, Stat Consl Name of David FACIL	ette St., \$ e, Zip Cochohocke Contact Sochac LITY INF	Suite 300 de n, PA 19428 ki ORMATION	Other (i.e., printed homes, etc.) Square Feet 40,000 Current Use (Printed homes)		al build	ings,		
SEPA DOLWD DHSS DCA (NJAC 5:23-8) Name of Facility Where Abatement is Taking Former ACME Street Address 731 N. Delsea Dr. City (5) Glassboro, NJ 08028 County (6) Gloucester Name of Monitoring Firm Hired by Building AET Street Address 28 N. Pennell Rd. City, State, Zip Code Media, PA 19063 Project Manager for Monitoring Firm Dave Turotsy Start Date (10) 1 / 30 / 14 Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Time of Abatement: 7AMPM/3: Scope of Work (Check all that apply) □ >3 sf or ≥3 If	g Place (33)	1 Faye City, Stat Consl Name of David FACII	ette St., \$ e, Zip Cochohocke Contact Sochac LITY INF	ki ORMATION STATE USE ONLY)	☐ School (K-12) ☐ Subchapter 8 ☑ Other (i.e., pri homes, etc.) Square Feet 40,000 Current Use (Pri Vacant	Telephone Number (Other than K-12) vate and commercial # of Floors	al build	ings,		
SEPA DOLWD DHSS DCA (NJAC 5:23-8) Name of Facility Where Abatement is Taking Former ACME Street Address 731 N. Delsea Dr. City (5) Glassboro, NJ 08028 County (6) Gloucester Name of Monitoring Firm Hired by Building AET Street Address 28 N. Pennell Rd. City, State, Zip Code Media, PA 19063 Project Manager for Monitoring Firm Dave Turotsy Start Date (10) 1 / 30 / 14 Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Time of Abatement: 7AMPM/3: Scope of Work (Check all that apply) □ >3 sf or ≥3 If	g Place (33)	1 Faye City, Stat Consl Name of David FACII	ette St., \$ e, Zip Cochohocke Contact Sochac LITY INF	ki ORMATION STATE USE ONLY)	☐ School (K-12) ☐ Subchapter 8 ☑ Other (i.e., pri homes, etc.) Square Feet 40,000 Current Use (Pri Vacant	Telephone Number (Other than K-12) vate and commercial # of Floors	al build	ings,		
DOLWD DOLWD DHSS DCA (NJAC 5:23-8) DCA (DCA (NJAC 5:23-8) DCA (DCA (DCA (DCA (DCA (DCA (DCA (DCA	g Place (3)	City, Stat Consl Name of David FACIL County	e, Zip Coo nohocke Contact Sochac LITY INFO	ki ORMATION STATE USE ONLY)	☐ School (K-12) ☐ Subchapter 8 ☑ Other (i.e., pri homes, etc.) Square Feet 40,000 Current Use (Pri Vacant	Telephone Number (Other than K-12) vate and commercial # of Floors	al build	ings,		
Amendment #6 □ DCA (NJAC 5:23-8) □ DCA (NJAC 5:23-8) □ Emergency (in justification) □ Cancellation Name of Facility Where Abatement is Taking Former ACME Street Address 731 N. Delsea Dr. City (5) Glassboro, NJ 08028 County (6) Gloucester Name of Monitoring Firm Hired by Building AET Street Address 28 N. Pennell Rd. City, State, Zip Code Media, PA 19063 Project Manager for Monitoring Firm Dave Turotsy Start Date (10) □ 1 / 30 / 14 Occupancy Status During Abatement (Che □ Facility Closed/Vacated During Entire P □ Abatement Performed Outside of Norm Time of Abatement: 7AMPM/3: Scope of Work (Check all that apply) □ >3 sf or ≥3 If	g Place (3)	Consl Name of David FACIL County	Code (7)(ki ORMATION STATE USE ONLY)	☐ School (K-12) ☐ Subchapter 8 ☑ Other (i.e., pri homes, etc.) Square Feet 40,000 Current Use (Pri Vacant	(Other than K-12) vate and commercial # of Floors	al build	Age		
□ DCA (NJAC 5:23-8) □ Emergency (in justification) □ Cancellation Name of Facility Where Abatement is Taking Former ACME Street Address 731 N. Delsea Dr. City (5) Glassboro, NJ 08028 County (6) Gloucester Name of Monitoring Firm Hired by Building AET Street Address 28 N. Pennell Rd. City, State, Zip Code Media, PA 19063 Project Manager for Monitoring Firm Dave Turotsy Start Date (10) □ 1 / 30 / 14 Occupancy Status During Abatement (Che □ Facility Closed/Vacated During Entire P □ Abatement Performed Outside of Norm Time of Abatement: 7AMPM/3: Scope of Work (Check all that apply) □ >3 sf or ≥3 If	g Place (3)	Parid FACIL County ASCM N	Contact Sochac LITY INFO	ki ORMATION	☐ School (K-12) ☐ Subchapter 8 ☑ Other (i.e., pri homes, etc.) Square Feet 40,000 Current Use (Pri Vacant	(Other than K-12) vate and commercial # of Floors	al build	Age		
Scope of Work (Check all that apply) Same Name (NJAC 5:23-8) justification Cancellation Cancellation	g Place (3)	FACIL County ASCM N	Sochac LITY INFO	ORMATION	☐ School (K-12) ☐ Subchapter 8 ☑ Other (i.e., pri homes, etc.) Square Feet 40,000 Current Use (Pri Vacant	(Other than K-12) vate and commercial # of Floors	al build	Age		
Name of Facility Where Abatement is Taking Former ACME Street Address 731 N. Delsea Dr. City (5) Glassboro, NJ 08028 County (6) Gloucester Name of Monitoring Firm Hired by Building AET Street Address 28 N. Pennell Rd. City, State, Zip Code Media, PA 19063 Project Manager for Monitoring Firm Dave Turotsy Start Date (10) 1 / 30 / 14 Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Time of Abatement: 7AMPM/3: Scope of Work (Check all that apply) □ >3 sf or ≥3 If			County ASCM N	Code (7)(ORMATION	☐ School (K-12) ☐ Subchapter 8 ☑ Other (i.e., pri homes, etc.) Square Feet 40,000 Current Use (Pri Vacant	(Other than K-12) vate and commerci	Bldg 43	Age		
Former ACME Street Address 731 N. Delsea Dr. City (5) Glassboro, NJ 08028 County (6) Gloucester Name of Monitoring Firm Hired by Building AET Street Address 28 N. Pennell Rd. City, State, Zip Code Media, PA 19063 Project Manager for Monitoring Firm Dave Turotsy Start Date (10) 1 / 30 / 14 Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Time of Abatement: 7AMPM/3: Scope of Work (Check all that apply) >3 sf or >3 lf			County	Code (7)(STATE USE ONLY)	☐ School (K-12) ☐ Subchapter 8 ☑ Other (i.e., pri homes, etc.) Square Feet 40,000 Current Use (Pri Vacant	(Other than K-12) vate and commerci	Bldg 43	Age		
Former ACME Street Address 731 N. Delsea Dr. City (5) Glassboro, NJ 08028 County (6) Gloucester Name of Monitoring Firm Hired by Building AET Street Address 28 N. Pennell Rd. City, State, Zip Code Media, PA 19063 Project Manager for Monitoring Firm Dave Turotsy Start Date (10) 1 / 30 / 14 Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Time of Abatement: 7AMPM/3: Scope of Work (Check all that apply) >3 sf or >3 lf			ASCM N			☐ School (K-12) ☐ Subchapter 8 ☑ Other (i.e., pri homes, etc.) Square Feet 40,000 Current Use (Pri Vacant	(Other than K-12) vate and commerci	Bldg 43	Age		
Former ACME Street Address 731 N. Delsea Dr. City (5) Glassboro, NJ 08028 County (6) Gloucester Name of Monitoring Firm Hired by Building AET Street Address 28 N. Pennell Rd. City, State, Zip Code Media, PA 19063 Project Manager for Monitoring Firm Dave Turotsy Start Date (10) 1 / 30 / 14 Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Time of Abatement: 7AMPM/3: Scope of Work (Check all that apply) >3 sf or >3 lf			ASCM N			Subchapter 8 Other (i.e., pri homes, etc.) Square Feet 40,000 Current Use (Pri Vacant	(Other than K-12) vate and commerci # of Floors 1	Bldg 43	Age		
Street Address 731 N. Delsea Dr. City (5) Glassboro, NJ 08028 County (6) Gloucester Name of Monitoring Firm Hired by Building AET Street Address 28 N. Pennell Rd. City, State, Zip Code Media, PA 19063 Project Manager for Monitoring Firm Dave Turotsy Start Date (10) Sche Coccupancy Status During Abatement (Che Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Time of Abatement: 7AM PM/3: Scope of Work (Check all that apply) >3 sf or >3 lf	Owner (8	3) /	ASCM N			Other (i.e., printed homes, etc.) Square Feet 40,000 Current Use (Printed homes)	# of Floors	Bldg 43	Age		-
731 N. Delsea Dr. City (5) Glassboro, NJ 08028 County (6) Gloucester Name of Monitoring Firm Hired by Building AET Street Address 28 N. Pennell Rd. City, State, Zip Code Media, PA 19063 Project Manager for Monitoring Firm Dave Turotsy Start Date (10) / Sche Occupancy Status During Abatement (Che	Owner (8	3) /	ASCM N			homes, etc.) Square Feet 40,000 Current Use (Priv	# of Floors	Bldg 43	Age		_
City (5) Glassboro, NJ 08028 County (6) Gloucester Name of Monitoring Firm Hired by Building AET Street Address 28 N. Pennell Rd. City, State, Zip Code Media, PA 19063 Project Manager for Monitoring Firm Dave Turotsy Start Date (10)	Owner (8	3) /	ASCM N			Square Feet 40,000 Current Use (Price Vacant	1	43	1000000		
Glassboro, NJ 08028 County (6) Gloucester Name of Monitoring Firm Hired by Building AET Street Address 28 N. Pennell Rd. City, State, Zip Code Media, PA 19063 Project Manager for Monitoring Firm Dave Turotsy Start Date (10) 1 / 30 / 14 Coccupancy Status During Abatement (Che Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Time of Abatement: 7AMPM/3: Scope of Work (Check all that apply) □ >3 sf or ≥3 If	Owner (8	3) /	ASCM N			40,000 Current Use (Pric	1	43	1000000		- 1
County (6) Gloucester Name of Monitoring Firm Hired by Building AET Street Address 28 N. Pennell Rd. City, State, Zip Code Media, PA 19063 Project Manager for Monitoring Firm Dave Turotsy Start Date (10) / Sche Schell	Owner (8	3) /	ASCM N			Current Use (Pric		ed)			- 1
Gloucester Name of Monitoring Firm Hired by Building AET Street Address 28 N. Pennell Rd. City, State, Zip Code Media, PA 19063 Project Manager for Monitoring Firm Dave Turotsy Start Date (10) / Sche Occupancy Status During Abatement (Che ✓ Facility Closed/Vacated During Entire P ☐ Abatement Performed Outside of Norm Time of Abatement:PM/3: Scope of Work (Check all that apply) ☐ >3 sf or ≥3 If	Owner (8	3) /	ASCM N			Vacant	of it boing domestic.				\dashv
Name of Monitoring Firm Hired by Building AET Street Address 28 N. Pennell Rd. City, State, Zip Code Media, PA 19063 Project Manager for Monitoring Firm Dave Turotsy Start Date (10) 1 / 30 / 14 Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Time of Abatement: 7AMPM/3: Scope of Work (Check all that apply) > 3 sf or > 3 lf	Owner (8	3) /		0.	Name of Abotom			92			
AET Street Address 28 N. Pennell Rd. City, State, Zip Code Media, PA 19063 Project Manager for Monitoring Firm Dave Turotsy Start Date (10)	Owner (8	3) /		0.	Alama of Abatama			_	_		\dashv
AET Street Address 28 N. Pennell Rd. City, State, Zip Code Media, PA 19063 Project Manager for Monitoring Firm Dave Turotsy Start Date (10)			NA			ent Contractor (9)					
Street Address 28 N. Pennell Rd. City, State, Zip Code Media, PA 19063 Project Manager for Monitoring Firm Dave Turotsy Start Date (10) / 30					Alliance Env	ironmental Sys	tems				
28 N. Pennell Rd. City, State, Zip Code Media, PA 19063 Project Manager for Monitoring Firm Dave Turotsy Start Date (10) / Sche Sche Sche Sche Sche Sche Sche Pacility Closed/Vacated During Entire P Abatement Performed Outside of Norm Time of Abatement: PM/3: Scope of Work (Check all that apply) >3 sf or ≥3 If					Street Address						
City, State, Zip Code Media, PA 19063 Project Manager for Monitoring Firm Dave Turotsy Start Date (10)					550 East Uni	on St.					
Media, PA 19063 Project Manager for Monitoring Firm Dave Turotsy Start Date (10) Sche 1 / 30 / 14 Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Time of Abatement: 7AMPM/3: Scope of Work (Check all that apply) > 3 sf or ≥3 If					City, State, Zip C	ode					
Project Manager for Monitoring Firm Dave Turotsy Start Date (10) Sche 1 / 30 / 14 Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Time of Abatement: 7AMPM/3: Scope of Work (Check all that apply) > 3 sf or ≥3 If					West Cheste						
Dave Turotsy Start Date (10)		T-1-	-bana N		Telephone No.		License No.				
Start Date (10) Sche		Discount of the last	phone N	\$1847 E. UN	610-701-900	n	00508				
			10-891-0	SAMPLE STATE OF THE SAMPLE		Š.,	1 3333				_
Occupancy Status During Abatement (Che ☐ Facility Closed/Vacated During Entire P ☐ Abatement Performed Outside of Norm Time of Abatement: 7AMPM/3: Scope of Work (Check all that apply) ☐ >3 sf or ≥3 lf	eduled Co			58 38	Name of OSHA	MOTINO					
 ☑ Facility Closed/Vacated During Entire P ☐ Abatement Performed Outside of Norm Time of Abatement: 7AMPM/3: Scope of Work (Check all that apply) ☐ >3 sf or >3 lf 	2 /	_21	1_/_	14	AET			100			_
 ☑ Facility Closed/Vacated During Entire P ☐ Abatement Performed Outside of Norm Time of Abatement: 7AMPM/3: Scope of Work (Check all that apply) ☐ >3 sf or >3 lf 	eck only o	one)			Street Address						
Abatement Performed Outside of Norm Time of Abatement: <u>7</u> AMPM/ <u>3</u> : Scope of Work (Check all that apply) ⇒3 sf or ≥3 lf	Period of	Abate	ment		28 N. Penne	l Road					
Time of Abatement: 7AMPM/3: Scope of Work (Check all that apply) >3 sf or >3 lf	al Facility	v Hou	rs - Desc	ribe	City, State, Zip C	Code					
Scope of Work (Check all that apply) ☐ >3 sf or ≥3 lf	:30PM		AM	0.404,149-0	Media, PA 1						
☐ >3 sf or ≥3 lf											
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 						ntainment with Ne	gative Pressure				
	⊠ Re				☐ Mini-En						
	☐ De	emoliti	ion		☐ Gloveb	ag Procedure	on-Friable Procedu	re			
					☐ Non-EX	empted () and it	I I I I I I I I I I I I I I I I I I I	Aha	teme	nt Ty	pe
		Loca			5	- 5					_
Location of		Norma	ally lely by	A-6-	Description estos Containing N	01 Natorial (ACM)	Amount	Removal	Repair	in l	Enclosure
Asbestos-Containing Material (ACM)			ance/	Asbe	e., thermal system	s insulation,	(Specify	non	air	aps	los
TO BE ABATED IN Facility	Cus	stodia	I Staff?	(surfacing, VA	T, or	SF or LF)	<u>a</u>		Encapsulate	ure
(13)		(12	2)		other miscellar	neous)		4		हि	
\$ C	Yes	No	N/A						_		_
Main Floor				Floor T	ile Mastic		32,000	\boxtimes			
Main Floor		-							П	П	
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	A STEEL			-							
				10/2-24-	Cubic Yards of	Name of Rec	istered Landfill	10.			
Name of Registered Waste Hauler			NJDEP Hauler I		Waste	G 2439	l Imperial				
N.E.T.S.			1894		45	and the second second	i imperiar				
City, State					Disposal Date	City, State					
Hazelton, PA					TBD	Imperial,	PA				
					Signature	1 alt		ate /		1	
Completed by (1 tint of 1)po)	Title	-4			Jiginalaro	ZIII		1/1	ch	11	11
Mark Griffin	Title							1//	1/	•	/
ASB-41	Title Estim	ator						/			

Date of Notification (1)			Ti	Name of	f Building	Owner/Operator (2	2)	(1)	7.	1				
	14 1 14	_	Clinton Township Sewer Authority											
Agencies Notified	Type Notification		- 1	Street A		`			()	2				
□ EPA	☑ Initial					eaver ave	R1		5	(0)		1		
Ø DOLWD	Amended Amendment #			-	ate, Zip Co					0	2	7		
DOH □ DCA	☐ Emergency (inc	cluding		C,	lintor	NJ	08809			1/	13	_		
(NJAC 5:23-8)	justification)			^	f Contact			Telephone Numb	er	~~	10	2		
	☐ Cancellation			Pe	ter 6	reiger		<u>,</u> ?			-	_		
				FACI	LITY IN	FORMATION			_		•	_		
Name of Facility Where A	batement is Taking	Place (3)				Type of Facility (
OAK KNOILS E	asement						☐ School (K-12)) (Other than K-12)	40					
Street Address	21 1 -						Other (i.e., pr	ivate and commerc	cial bui	ldings	ri.			
Lot 57	Block 8	2.13					homes, etc.)		DIA	a Aa		_		
							Square Feet	# of Floors	Bia	g. Age	3			
Clinton				Count	Codo (7)	(STATE USE ONLY)	Current Use (Pri	or if being demolish	ned)					
County (6)				County	y Code (1)	(STATE OSL ONLT)	Open field	1	,					
Hunterdon Name of Monitoring Firm	Lized by Building C	wnor /8	1	ASCM N	lo.	Name of Abateme						\dashv		
Name of Monitoring Firm	Hired by Building C	wilei (o	" "	AGOINI IN	ю.			Services TNC						
Street Address						Street Address		DETUILED FIVE				\neg		
Street Address						450 S	River St							
City, State, Zip Code						City, State, Zip Co	ode							
City, State, Zip Code						Hacken	sack N	J 07601 License No.						
Project Manager for Mon	itoring Firm		Telep	ohone N	lo.	Telephone No.	,,	License No.						
i rojost manager iai man						201-931-0	313	01148						
Start Date (10)	Sched	uled Co	mplet	ion Date	e (11)	Name of OSHA N					75-75-			
11211	14 _	1_/	22	_ / _	14	Omesa	ENVIONME	intal						
Occupancy Status During	Abatement (Check	c only or	ne)											
☐ Facility Closed/Vacate	ed During Entire Per	riod of A	baten	nent		280	Huyler ST	<u> </u>						
Abatement Performed	Outside of Normal	Facility	Hours	s - Desc	ribe	280 City, State, Zip C	ode							
Time of Abatement: _ > Work 1S 00	TSIDE IN	a F	210	T	uvi	S. Hacken	sack NJ	07606				_		
Scope of Work (Check a			• •			☐ Full Con	tainment with Neg	native Pressure						
⊠ ≥3 sf or ≥3 lf		⊠ Rer	novatio	on		☐ Mini-End	2/3	gativo i rossairo						
☐ ≥160 sf or ≥260 lf		☐ Der	nolitio	n		☐ Gloveba	ng Procedure	n-Friable Procedur	e					
		le	Locat	ion		E NOII-EX	Simpled () dird i to		1	ateme	nt Ty	ре		
Location	of .	(A)	lormal	A. C.		Description	of					_		
Asbestos-Containing		0.7337070	d Sole ntena			stos Containing M		Amount (Specify	Removal	Repair	വ	nclo		
TO BE ABA		100000000000000000000000000000000000000		Staff?	(1.6	e., thermal systems surfacing, VAT		SF or LF)	oval	=	Encapsulate	Enclosure		
(13)	ity		(12)	1		other miscellane					ate			
		Yes	No	N/A					rAs		$\overline{\Box}$	\exists		
DAK KNOWS ENSO	ment			区	Tra	ansite Seu	ver pipe	124	囟	Ш	믜	믜		
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				$\overline{\Box}$										
Name of Registered Was	ete Hauler			JDEP V	Vaste	Cubic Yards of	Name of Regi	stered Landfill						
A STATE OF THE PARTY OF THE PAR	age congress	110	H	lauler IE		Waste	1.0	Enterplises I	nc					
Express was	te Jervice	LIL		ing 8	104	Disposal Date	City State		. ,			\neg		
City, State						2.000.00.00.00	Mamesh	ung OHio						
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Newalk M	<u> </u>					Signature	1.4411520	ID:	ate			_		
A STATE OF THE STA	Type) Titl	e O ope	ī			Signature	Waynesb.	Di Di	ate 14/1	 /				

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

Date of Notification (1) 01-13-14					Building Ov Plumbii		perator	(2)	. 4	- 4/9	JAN.		11			
Agencies Notified	Type Notification			treet Add	iress Iumbus I	기.			<u> </u>	85°	1	PA	<	S		
EPA DEP DOL	Initial Amended Amendment	#	C	ity, State Roselle	, Zip Code Park, N	J,072	04			10	JAN 1	1/2	5.	n n		
DOH DCA	Emergency (injustification) Cancellation	ncluding		lame of C Troy Ma						Tele	phent I	Wimbe	r			
				FACILI	TY INFOR	MATI	ON									
Name of Facility Where A Viking Plumbing Street Address	Abatement is Taking	Place (3)						S s	of Facility (4 chool (K-12 ubchapter other (i.e. p	2) : 8 (Othe	er than k	(-12)	uildi	nge l	ome	
107 Columbus Pl								Square	tc.)	# of	Floors	ercial D	Blo	lg. Ag		
Roselle Park			10	County Co	ode (7)			600	nt Use (Prio	1 or if bei	na demo	olished	75			_
County (6) Union	•		7	STATE US	SE ONLY)			Com	mercial							
Name of Monitoring Firm	Hired by Building (Owner (8)		ASCM	No.				ement Con ow Indus		(9)			200000000000000000000000000000000000000		
Street Address								Addres Mill St		100						
City, State, Zip Code								State, Zi	p Code NJ,07501	1	1					
Project Manager for Mor	nitoring Firm		T	Telephon	e No.			hone No -653-9			Licens					
Start Date (10)	Scheduled 02-24-14		pletion D	ate (11)				A Monitor	tries						\neg	
01-24-14 Occupancy Status Durin	a Abatement (Chec							Addres								\dashv
Facility Closed/Vac Abatement Perform	ated During Entire	Period of Aba	atem	ent			City,	Mill S State, Zi	p Code	<u></u>	-					
Other – Describe:							Pat	erson,	NJ.0750	1						
Scope of Work (Check A	All That Apply)	□ Rer	nova	tion			Full Containment with Negative Pressure									
≥160 sf or ≥260 lf		✓ Der	noliti	ion			Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Fria					Eriable				
		Т						1401	II-Exemple	u () ai	d Non-i	Tiable			ment	
			ocati rmal			<u>12</u> 9						L		Ту	ре	
Asbestos-Containing TO BE AB In Fac	1						escription ntaining al systen acing, V miscella	Material ns insula AT, or		(Amount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A			. ,	-			600			_		
Roo		X			Ho	ofing A	ACIVI			600	-	x				
			-							,						
Name of Registered Wa		JDEP W	50000	L. V. S.	c Yards		Name of						S. 12-23			
Atlantic Carting		lauler ID 26085	No.	TBE	IBD			Waste Management Inc								
City, State Wayne,NJ	or and the second				Disposal Date City, State TBD City, State Tullytown,PA											
Completed by Goran J.Igev	Title Signature Date 01-11-1					14	4									

*			NOTIFICAT	ION OF AS		EY ABATEMEN ND 12:120-7		heck	H	160	20	
Date of Notificatio	n (1)	95	(i ditabili	VII	Building O	wner / Oper			10/4	4	Q_{∞}	5
A complete Modified	Tuna of N	-Aifin-Ain-		Street Ad			\$6) ~v,	2	Ay,	11	-
Agencies Notified EPA	ype of N ☑	otification Initial		76 South	te, Zip Code	Δ			CO'N	/>		\leftrightarrow
DEP	I Å	Amended		Akron, Or		•		*	10	2 /	%.	~
☑ DOH		Amendment	#	Name of				Telephor	PENCT	nber	<i>*</i> ?:	
☑ DOL		Emergency w Cancellation		Jim Hals	•					18/2	£ .	5
				ACILITY IN	NFORMATI					Ç	9	
Name of Facility V	/here Abaten	nent is Taking	Place (3)		Type of F	Facility (4) School (K	-12)	w			9 3	
Street Address					1 🗇	Subchapte	er 8 (Other					
1 SUNSET ROAD			1		V	bldgs., ho	, private & mes, etc.)					
City (5) MOUNTAIN LAKES	County (6 MORRIS	5)	County Code	(7)	Square F		# Of Floor	500	Build	ding Age	# 23	
					Telephone	Jse (Prior if e Pole	being dem	olished)				
Name of Monitorin	g Firm Hired	l by Bldg. Own	er (8)	ASCM NO		0 1 010						
Environmental Hea	Ith Investigation	ons			LVI Demo	olition Service	es Inc.					
Street Address					Street Ad	Idress						
655 West Shore Tra					20 14616	Davies						
City, State, Zip Co Sparta, NJ 07871	ae					ns Parkway e, Zip Code				-		
Project Mngr. For	Monitoring F	irm	Telephone Nu 212-682-9271	mber	1	over, NJ 070						
Dino Nappi Sheduled Start Da	to (10)	Isched Comr	letetion Date (1	1)		e Number	30	License	Numb	er		
01 / 28	14_	01	29_/	14		84-8682				00860		
Occupancy Status	During Abat	tement (Check	Only 1)			OSHA Moni	tor					
(1)		ated During En	tire Period of			lition Service	es Inc.					
Abatem	C 222				Street Ad	Idress						2000
		ed Outside of I _ Monday 8:00 :	Normal Facility		32 William	ns Parkway						
		_ Ivioriday 6.00	am to 4,00 pm		City, Stat	e, Zip Code						
Scope of Work (Cl	neck All That	Apply)			East Hand	over, NJ 070	30		-			
☐ Demolit	ion	v	Renovation		Full Cont	ainment wit	h Negative	Pressure				
✓ >3sf or			Kenovation	H	Mini - En		iii itogalivo	· recount	8			
	or ≥260 If					Procedure						
				V	Non-Exer	mpted (*) an	d Non-Fria	ble Proce	dure			
Location		ls		Descrip				Abateme	nt Tyr			
Asbestos Co	ntaining	Location	As		Containing		1000 30	R	_	. E	E	
TO DE 40	ATED	Normally	,	Material			Amount	E M	R	N	N	
TO BE AB in Facil		Used Solely			al systems rfacing, VA	т	(Specify SF or LF)	1700	P	Ā	C	
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		Custodial						L	R	U	U	
		<u>Staff (12)</u>							_	L	R	
Exterior Tolombon	Dole	YES NO N/A	Transite Pipe				20 LF	V	-	, -	\dashv	\neg
Exterior Telephone	r vie	 	Transite Pipe				20 LF	<u> </u>	+	++-	$\dashv +$	
			1									
Name of Registere NEWARK CARTING		ıler	Cubic Yards of Waste	I.E.S.I.	Registered	Landfill						
City, State NEWARK, NJ	-	City. Stat	te HEM, PA 181	105								
Completed by (Pri		Signature			_	Dat	ρ.					
Completed by (Pri	in or type)		Title	NAGED		Ac	TA C	D		Jac	01/15	5/14

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

- 1	6	110.
Che	ck H	1681

Date of Notifica	ation (1) 16 / 14				Building Ow WOOD JOH			· 7,	SA		
/ _	_/			Street Ad			~	19 10	1.7	1/2.	
Agencies Notif		otification			IE STREET			AA		PEA	
	EPA	Initial Amended			e, Zip Code , NJ 07065		ಿ ಎನ್ನಿ	°c. '	PL	0	
	ОН	Amendment #		Name of 0			Œ.	Felenhar	Al. Al	<u>ن</u>	
	OCL 🛛	Emergency w	justification	LAUREL	HOLDER-NO	DEL		١	-171	. 42	
	.	Cancellation	FA	ACILITY IN	FORMATIO	N		175	No TO	21	
Nome of Facility	ty Where Abaten	ant in Takina l	Plane (2)		Tune of Es	aility (4)			•	٠٧	
	D JOHNSON HO	1760-1761 HAMM	Place (3)		Type of Fa	icility (4)					
					1,000	School (K			.,		
Street Address 865 STONE ST							er 8 (Other , private &				
OUS STONE ST	TCE!					bldgs., ho	mes, etc.)				
City (5) RAHWAY	County (6 UNION)	County Code ((7)	Square Fe	et .000	# Of Floor		Buildin	g Age 40+	
RAHWAT	JONION						being dem	positive translation	t	40.	
					HOSPITAL	10					
Name of Monit	oring Firm Hired	by Bldg. Owner	er (8)	ASCM NO	Name of A	batement	Contractor	(9)			
OMEGA ENVIR	RONMENTAL				LVI DEMO	LITION SE	RVICES IN	D .			
Street Address					Street Add						
280 HUYLER S					20 10/11 1 10	MC DADIO	///				
City, State, Zip SO. HACKENS	ACK N.I.07606				City, State	MS PARKV					
	For Monitoring F	irm	Telephone Nu	mber	1	, _ ,					
GEISER FAJAF	RDO		201-489-8700		EAST HAN		07936				
01 /	20 / 14	Sched. Comp	letetion Date (1 30	1) 14	Telephone	Number		License I	Number		
/_	20 / 14	<u> </u>	/		973-88	4-8682			C	0860	
	atus During Aba					SHA Moni					
	ility Closed/Vaca tement	ited During Ent	ire Period of		Street Add		RVICES INC	<i>j</i> .			
	tement Performe	ed Outside of N	ormal Facility		Street Add	11033					
	ırs - Describe:				32 WILLIA						
☑ Othe	er - Describe: _	_MON-FRI 7:00AM-3:30Pl	М		City, State EAST HAN						
Scope of Work	(Check All That										
□ Dem	nolition	7	Renovation	V	Full Conta	inment wit	h Negative	Pressure			
≥3st	f or_>3If	-			Mini - Enc	losure	•				
☑ ≥160	0 sf or <u>≥</u> 260 If				Glovebag		d Non-Fria	ble Proce	dura		
				Ц	NOII-EXCIII	pteu () an	u Non-rna	DIE FIOCE	uuie		
	tion of	ls		Descript				Abateme	nt Type	1-	1-
	Containing	Location Normally	As	bestos - C Material			Amount	R E	R	E N	E N
	al (ACM) ABATED	Used	. (I.	e., therma			(Specify	M	E	c	c
	acility	Solely			facing, VAT	,	SF or LF)	0	P	Α	L
(13)	by Main-	ore	other misc	ellaneous)			V	A	P	0
		tenance/ Custodial						A L	I R	S U	S U
		Staff (12)						7		L	R
		YES NO N/A					222.05			1	
STAIR 5 STAIR 5 - 1ST	FLOOP		VAT/MASTIC FITTINGS				300 SF 8 LF	<u> </u>	H	1-4	++-
01AIK 3 - 131	LOOK		TITINGS	·			J		H	1 +	1 1
	tered Waste Hau	iler	NJDEP Waste	60.0	Name of R	egistered	Landfill				
NEWARK CAR	TING		Hauler ID No.	Yards of Waste	IESI						
City, State		8)		Disposal	City. State						- 1
NEWARK, NJ				Date	BETHLEH	±M, PA					
Completed by			Title			Signature				Date	
STEVE STILES	3		PROJECT MAI	NAGER		Sto	as	Q)		01/16/14

No doct	NO		ATION C	e of New of ASBES NJAC 8:	STOS A	BATEN		Sar STOCK	PS	CS/1	2			
Date of Notification (1) January 13,2014				Building Ov th Housi			(2) (3)	1500	AN 1	,	50			
Agencies Notified Type Notification		1 7	treet Add	dress ple Ave.				Sac STO	250	AM 9.	60			
▼ EPA Initial ▼ DEP ▼ Amended ▼ DOL Amendment	#_1			e, Zip Code th, New		y 0720	1		NSIA	ATRO	,			
☐ Emergency justification) ☐ DCA ☐ Cancellation	i) (2)	1	lame of 0	Contact e Medei	ros				Teler	hone No	ımber		_	
			FACIL	ITY INFO	RMATIC	ON								
Name of Facility Where Abatement is Takin Elizabeth Housing Authority	ig Place (3)						F s	f Facility (4) chool (K-12 ubchapter 8)	than K-	12)			
Street Address 688 Maple Ave.							o et	ther (i.e. pri c.)	vate &	commerc	cial build			s,
City (5) Elizabeth							Square 200,0	00	10	Floors	5	dg. Aq 0+	je 	
County (6) Essex			County C STATE U	ode (7) SE ONLY)		_		t Use (Prior erty Build		g demolis	shed)			5
Name of Monitoring Firm Hired by Building Certified Health Safety Service	Owner (8)		ASCM	No.				ement Cont estruction		9)				
Street Address 1902 Taylor Lane							Address Getty A	The same of the sa						
City, State, Zip Code Cinnaminson, New Jersey 08077		93					tate, Zip n, Nev	Code v Jersey	0701	-1802				
Project Manager for Monitoring Firm Harry Smith	ne al	23	Telephon 856-49	e No. 8-1488		00000000000000000000000000000000000000	one No 478-48			License 00724	No.			
Start Date (10) January 21,2014	Schedule			Date (11)				A Monitor struction	Inc.					
Occupancy Status During Abatement (Che	ck Only On	e)				100000000000000000000000000000000000000	Address							
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe: Monday-Friday 7:00	mal Facility	Hours	ent	ā.		City, S	Getty /	Code	0701	1_1802				
						Clifton, New Jersey 07011-1802								
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		tenovat emoliti				5	Min Glo	Containme -Enclosure vebag Proc	edure					
	1000	Locati	32.23.63										ment pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Location of Used tos-Containing Material (ACM) TO BE ABATED						n of Material is insula AT, or neous)	(ACM) tion,	(S	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A		Disc	e Insula	ation			9LF	x	-	_	
Boiler Room	Boiler Room X									JLI"	1			
Name of Registered Waste Hauler		IN	IJDEP W	/aste	Cubic	Yards		Name of	Registe	red Land	ifill	<u></u>		
Slavco Construction Inc.	Hauler ID No. of			-5141-41-			G.R.O.W.S Landfill							
City, State Clifton, New Jersey 07011-1802					TBD			City, Stat Morrisv		a				
Completed by Vivian D. Jurcevic	1		Signatu	re UUY	200	ırcu	ii	Date Janua	ry 13	,201	4			

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

ch# 1619				o NJAC 8))	1/4	10	1	', ,	3-C	75%	1
Date of Notification (1) January 7,2014				Building Coth Hous			(2) / 3)	ASOF.	AN I	>	FO	1		
Agencies Notified Type Not		-	treet Ad 88 Ma	dress ple Ave				4/10	050	AM S	2.60			
DOL Ame	ended endment#			e, Zip Coo eth, New		y 0720	01	ASBEST	NOVA	GRO	*6			
DOH Justi	ergency (including fication) cellation			Contact e Mede	iros				Tolo	nhana A	lumbar		. 0.	
			FACIL	ITY INFO	RMATI	ON			1 -					
Name of Facility Where Abatement Elizabeth Housing Authority Street Address		· · · · · · · · · · · · · · · · · · ·						of Facility (4) school (K-12 subchapter 8) 3 (Othe				• 100711400	
688 Maple Ave.								other (i.e. pri tc.)	vate &	comme	rcial buil	dings,	nome	es,
City (5) Elizabeth	9						Square 200,0	e Feet 000	# of 10	Floors	1 32	ldg. <i>F</i> 0+	ge	
County (6) Essex		104 255.000		ode (7) SE ONLY)				nt Use (Prior erty Buildi		g demol	ished)			
Name of Monitoring Firm Hired by R Certified Health Safety Serv			ASCM	No.				ement Contr ostruction		(9)				
Street Address 1902 Taylor Lane							Addres Getty							
City, State, Zip Code Cinnaminson, New Jersey C	8077					5 - Contract - Contrac	itate, Zij on, Ne	o Code w Jersey	0701	1-1802				
Project Manager for Monitoring Fire	2.000	elephon 56-82	e No. 9-4463		100000000000000000000000000000000000000	none No 478-48			License 00724					
Start Date (10) January 17,2014	Scheduled January			ate (11)				A Monitor astruction	Inc.		1000			
Occupancy Status During Abateme Facility Closed/Vacated During	N 15 10 10		nt				Addres Getty							
Abatement Performed Outside Other – Describe: Monday-Fri	of Normal Facility H			,		100000000000000000000000000000000000000	state, Zip	o Code w Jersey	0701	1-1802			3	
Scope of Work (Check All That App	oly)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novatio molition				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedur						' A		
	1	ocation						·	() and	HOIT	able i ic		ement	
Location of	No	rmally			De	scription	of					T	ре	
Asbestos-Containing Material (A TO BE ABATED In Facility (13)	Maint Custoo	Solely tenanc dial Sta (12)	æ/		os Con thermal surfa	taining N system cing, VA miscellar	/laterial s insula \T, or		(S	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
Boiler Room			х		Pipe	Insula	ation			9LF	x	T		
	\neg			•							1			
			120-21											
Name of Registered Waste Hauler Slavco Construction Inc.	Ha	DEP W		of Wa	Yards iste		10.00	me of Registered La R.O.W.S Landfi		dfill	1	J	1	
City, State	18	508		TBD	sal Date	3	City, State							
Clifton, New Jersey 07011-1	Disposal TBD						Morrisvi		a		,			
Completed by Vivian D. Jurcevic	ce Manager Signature Signature January 7,2014													

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

2014-08 B & G proj. #:

EMERGENCY*** NO HEAT

				EME	RGEN	ICY	*** NO HEAT	Check	#6356				_
Date of Notification	3/14		Julie C	Cordero	ner/Operator	(2)	·		,				
Agencies Notified EPA DEP	Type Notifica Initial	tion	Street Ad 11 No	dress orth 16th S	treet				ふ				
☑ DOL	Amend	ment		e, Zip Code oect Park,	NJ 07508		a č	4. 019	190		•	۱ هر	
DOH □ DCA	☐ Cancel		Julie	Contact Cordero			ચેલું કે	Telephon	e Number	(-\)	<u>^</u>		
	L			FAC	ILITY INFOR	RMATION	N	- 100°C	9.				č.
Name of facility will Julie Cordero		is taking pl	ace (3)					Subch	apter 3 (Oth			-12)	
Street Address 11 North 16th	Street							Bldgs.	Private/Con Homes, etc				
City (5)		T Cou	nty (6)			T Cou	inty Code (7)	Square Feet	# of Floors		BI	dg. A	ge
Prospect Par	k		assaic		5	100000000000000000000000000000000000000	ate use only)	Current Use (P residential	rior if being	dem	olishe	ed)	
Name of Monitorin	N/A	Bldg. Own	er (8)		ASCM No.		B & G Restorati Street Address 105 Ryerson Ro	on, Inc.					
City, State, Zip Cod	le						City, State, Zip Code Lincoln Park, N						
Project Manager fo	r Monitoring Firm	n		Phone Num	ber		Telephone Number 973-696-6869		License N 0378	umb	er		
Scheduled Start Da	ite (10)	Sche	d. Compl	etion Date (1	1)		Name of OSHA Mor						
01/14/2014		01	/15/20	14			B & G Restorati	ion, me.				_	
Occupancy Status I Facility closed Abatement per Describe:		entire per	iod of ab	atement.			105 Ryerson Ro City, State, Zip Code		re.				
Other-Descri							Lincoln Park, N	IJ 07035	1				
Scope of Work (ch Demolition 3 sf or >3 tf		y) Renovati >160 sf or					Full Containment w/ne	gative pressure	wrap & Gloveba	g pro	cedu		
Location of asbestos-cor material to be abated in fac	ntaining		n norma enance/o	lly used sole custodial	Descrip	otion of a	sbestos-containing	Amount (Specify S LF)	F or	R e m o v	Repair	Encap	E n c L
basement					pipe insu	lation		21 lf		0			
				1	 					뷔	닏	부	쓔
				#	-				I I	井	屵	Η	#
					1					Ħ	Ħ	一	盲
Registered \Vaste F B & G Restoration			EP Haule 563		Subic Yards o	of Waste		Landfill urce & Recovery	Center				
City, State Lincoln Park, N	II 07035			Disposal I	Date 15/2014		City, State Tullytown, PA						
Completed by (Prin		Title	/T	<u></u>	Signature		Ciordana Luna		Date 01/08/2	01/			