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

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Date of Notification (1)		Name	of Buildin	ng Owner / Opera	ator (2)		e e i	777	1 1 1 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
1/7/19		Ocea	n Count	y College	\-/			V E	
Agencies Notified Type Notifica	ition		Address			1937			
DEP Initial			ge Drive				0001 1 -	0010	7
□ DOL □ Amen	ded		State & Zi	NJ 08754		ii lii	JAN 17	2019	1
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	ellation		ara Myei			Franks		hone No	
	*	FAC		VEORMATION		Land Land	1-32-	233-040	00 2104
Name of Facility Where Abatemen	nt is Taking Place	e (3)		Type of Fa	cility (4)				
Ocean County College				Schoo	I (K-12)				
Street Address				Subch	apter 8 (Other	than K-12)			
College Drive				○ Other ()	(i.e. private & c	commercial	buildings, ho	omes, et	(c.)
City (5)	County (O)	0		Square Fee		Floors	Bldg. A	Age	
		County C	ode (7)	NA.	Commence of the Commence of th	NA	NA		
Toms River	Ocean	NA			e (Prior if being	g demolishe	ed)		
Name of Monitoring Firm Hired by	Puilding Owner	(0)	IA O O MAN	College					
Tiger Environmental Inc.	Building Owner ((0)	ASCM N	David Control of the	patement Contr	ractor (9)			
Street Address			1	Street Addr	e Network Re	esolutions	s Contracti	ng, LL	С
234 20 th Ave					Hollow Roa	d PO Roy	70		
City, State & Zip Code			Marie	City, State 8	Zip Code	u, r O DOX	(70		
Brick, NJ 08724				Winslow,	NJ 08095				
Project Manager for Monitoring Fire Kelly Walton		ephone N		Telephone I		Lic	ense Numbe	r	
		8-862-43		609-567-06			012	263	
1/17/19	cheduled Comple	tion Date 22/19	(11)		SHA Monitor	91			
Occupancy Status During Abateme				Street Addre	lytical, Inc.				
Facility Closed/Vacated Du	iring Entire Perior	d of Abat	ement	200 Route	130 North				
Abatement Performed Outs	side of Normal H	ours - 7a	am to 3pn	City, State 8					
Describe:					on NJ 08077	7			
x Facility Occupied During Al									
Scope of Work (Check all that appl	y)								
x ≥3 sf or ≥3 lf		Dono					with Negativ	e Press	ure
≥160 sf ≥260 lf		Demo	vation			nclosure	70		
		Demic	muon			Bag Proced			g.
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Asbestos-Containing	No	rmally Use		Asbestos-Cor		(Spe		atemen	t Type
Material (ACM) TO BE ABATED		Solely by intenance	or	Material (A	CM)	SF or	-1 F)		m m
in Facility		stodial Sta		(i.e., thermal sinsulation, surfa-	systems		Remova	Repair	cap
(13)	Yes	(12) No N	V/A	or other miscel	laneous)		ova	air	Encapsulate
Outoido Cumposium I	1			1000					र्ल ।
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butside gyinnasium undergroi	una		x Asb	estos cement	pipe 4 in dia	100 l.f.	X		
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lame of Registered Waste Hauler		N.IDF	P Waste	Cubic Yards	Name of Poo	ristored Lon	Mell		
			er ID No.	of Waste	Name of Reg	jistered Lan	iuiiii		-
Bull Waste & Recycling, Inc.		2143		30	Salem Cou	nty Landf	ill		
ity, State				Disposal Date	City, State		- Control		
erlin, NJ				2/22/19	Alloway, Ne	ewJersev	7		
ompleted By (Print or Type)		Title		Signature	-	7	Date		
heodore S. Budzynski		Pres	ident	/	///	1	1/7/1	9	
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te of Notification (1) 2/27/18	Ct	reet Ad	dress					1.5%	ESTOS CON LICENSIA	MBOL. O	CI .	-	
encies Notified Type Notification									Lad to see the	44.1			
EPA Initial Amended Amendment #	C	ity, Stat	te, Zip C	ode NJ 07438				T = 1=1	phone Number			\dashv	
DOL Emergency (including	N	ame of	Contac	t				Leie	Brione realis				
] DOH justification		Joe Bo	olowsk	CORMATIC	N.							\neg	
DCA C	3)	FACI	LITY IN	FORMATIC	1		of Facility						
lame of Facility Where Abatement is Taking Place (3)						School (K- Subchapte	12) r 8 (Oth	er than K-12)	ildinas, l	nomes	5,	
Multi Family Residence			700-4			IXI (Other (i.e. etc.)	private o	X COMMISSION	Dida A	10	\dashv	
Street Address					_	Squa	re Feet	# 0	f Floors	Bldg. A	JC.		
City (5)						150	0		ing demolished)				
Jersey City	T	County	y Code	(7) N// X/	1,00-128-0	Vac	ent Use (F cant	1101 11 00	5				1
County (6)			E USE O	NL1/	Nam	- C A b	etement (ontracto	or (9)				1
Hudson Name of Monitoring Firm Hired by Building Owner	(8)	ASO	CM No.		No	va De	velopme	ent Gro	iup,inc.				1
Name of Management					Stre	et Addr	_{ess} nsend S	Street					1
Street Address					014	Ctoto	7in Code	1					1
City, State, Zip Code					Ne	w Bru	ınswick,	NJ 08	901 License No.			-	1
		Tele	phone N	10.	Tel	ephone	No. 3655		01284				
Project Manager for Monitoring Firm					73	mo of C	SHA Mor	nitor					
Sch	eduled C	Complet	tion Dat	e (11)		MCA) (II V III -	30000					-
	30/19				Sti	reet Ado	dress						
Chetus During Abatement (Check Of	ily One)	toment					edith Pl. e, Zip Coo						7.760
Facility Closed/Vacated During Entire Perior Abatement Performed Outside of Normal F Other – Describe:					F	ry, State	away, N	J 0885					_
Scope of Work (Check All That Apply)	a-1a-34					H	Full Con Mini-En	tainmen	t with Negative I	Pressure			
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≥ 25 si or ≥ 260 lf						×	Non-Ex	empted) and Ivon		Abater		
	ls l	Location	n		1320000	ription	oľ		0.00		- ,,		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Used	ormally d Solely intenan- odial St (12)	y by ce/	(i.e. th	ermal s	ining Mi	aterial (Ac insulation T, or	cM)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	1
(13)	Yes	No	N/A		SSM				1125 SF	K			1
	163		×			d up r			2100 SF	K			T
roof	-		×		tı	ransite	e		163 SF	K	1		T
facade	+		×			VAT			100 0				1
1st floor	+	-						Name 0	f Registered Lar	ndfill			
Name of Registered Waste Hauler			NJDEP Hauler I	Waste D No.	of Wa	Yards aste			NS,Inc.				
Nova Development Group, Inc.	10.00		NJ-80	7	10 Disp	osal Da	te	City, St	ate				
City State					Jan	uary 2	019	Morri	sville, PA	Date			
New Brunswick, NJ	Title	9				Signat	ure	Still	MT	12/2	7/18		_
Completed by		esider											

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City, State, Zip Code			and deleted		Glay, 8	into, 20 Gode and Park, N.J					
Project Manager for Monitoring Firm	Constitution in		Telepix	anii Ng.	Teleph	one No.	Liganae N	D.	-		
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Name of Registered Waste Hauter Newark Carting, Inc.	-	N.	CENT	No. of Wee	aria		Registered Lancius				-
Newark, N.J. 07108		04	608	Dispas	S Chin	City Big	Centrel Sanitary	Lan	divi	maning.	
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

PAID	N		CATION	of New Je OF ASBEST to NJAC 8:60	OS ABATE		•		F (7)		ak.	#1066
Date of Notification (1) 01//13/2018			Name of Clara \	Building Own	er/Operato	r (2)			G		7.7		
Agencies Notified Type Notification		3	Street A	ddress	i.				-		11411	i	
EPA Initial Amended Amendment #				te, Zip Code , NJ, 07036				JAN	1-1-	7 6	2019		
Emergency (in			-1-11-500/10.11 4	Contact	,			Telephone	Mrimb	er		*	
DOH justification) Cancellation			Clara \					4	rydrib				
			FACII	LITY INFORM	ATION								-
Name of Facility Where Abatement is Taking Residential Property	Place (3)					Туре	e of Facility (4)						
Street Address			-) (Other than h vate & comme		ouildi	ngs, l	home	s,
City (5) Linden						Squa 1,80	are Feet	# of Floors 2		1000	dg. Aq 948	ge	
County (6) Union				Code (7) USE ONLY)		Curr	ent Use (Prior	if being demo	olished	i)			
Name of Monitoring Firm Hired by Building Ov	vner (8)		ASCM	l No.			atement Contr ontracting I						
Street Address						t Addre Soutl	ess h 5th St.						
City, State, Zip Code				0			Zip Code , NJ, 07206	3					
Project Manager for Monitoring Firm			Γelephor	ne No.	10000000	hone N -906-4		Licens 0135					
0.00 To 10 T	Schedule 01/08/2		pletion (Date (11)			SHA Monitor onmental La	aboratories	, Inc.	12			
Occupancy Status During Abatement (Check	88				100000000000000000000000000000000000000	t Addre	ess ute 22 West	t					
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Norma Other – Describe: OCCUPIED			en				Zip Code J, 07083						
Scope of Work (Check All That Apply)													
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Location of Asbestos-Containing Material (ACM)	Used	ormall d Solel ntenar	y by		Descriptio	Materia		Amount		ת	Ту		ш
TO BE ABATED In Facility (13)	Custo	odial S (12)	taff?	s	rmal systen urfacing, V ner miscella	AT, or		(Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure
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Basement			X		VAT			10 SF	2	ζ			
Name of Registered Waste Hauler Danvic Contarcting LLC.		Н	JDEP W auler ID 7574		ubic Yards Waste		Name of R Fairless	legistered Lar Landfill	ndfill				
City, State Elizabeth, New Jersey					sposal Dat	е	City, State Morrisvil						
Completed by Jeymy Donneys	Title Owne	er			Signatu	re	10		Date 01/		019		

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Date of Notification (1) 1-9-2019				of Building delez Int					J	AN	1 7	7 20)19	
Agencies Notified Type Notification EPA Initial				Address Deafores	st Aven	ue			1	e (e cons		۷.	113	**
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DOH justification) Cancellation	ricidalii	9	Glenr	of Contact Stock					elephone 32-331					
Name of Facility Where Abatement is Taking Commercial	Place	(3)	FAC	CILITY INF	ORMAT	ION	Type of Facility	(4)			2 - /2			
Street Address 100 Deaforest Avenue							School (K Subchapte Other (i.e.	er 8 (Oth	her than & comm	K-12 nercia) il buil	dings	, hom	es,
City (5) East Hanover, NJ 07936							etc.) Square Feet 100000	3	of Floors			3ldg. /	Age	
County (6) Morris				Code (7) USE ONLY	0		Current Use (P	rior if be	ing dem	olish				
Name of Monitoring Firm Hired by Building C	wner (8)	ASC	M No.			of Abatement Co			, LL	 C			
Street Address						Street	Address Virginia Aveni							
City, State, Zip Code							tate, Zip Code by City, NJ 07	304						
Project Manager for Monitoring Firm			Telepho	one No.		Teleph	one No. 333-8855		Licens 0117					
1-9-2019	2-10-2	019	npletion	Date (11)			of OSHA Monito n Environmer		rvices,	, LLC				
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire Pe	eriod of	Ahaten	nent				Address /irginia Avenu	ie						
Other – Describe:	I Facility	y Hours	s				ate, Zip Code by City, NJ 07	304						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 If	П	Renova	tion			×								
≥160 sf or ≥260 lf		Demolit				×	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure					9	
Location of		Locati								I		Abate	ment	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Sole intenar todial S (12)	ly by nce/	Asbes (i.e.	tos Cont thermal surfac	scription aining Masystems sing, VAT niscelland	aterial (ACM) insulation, r, or	(5	mount Specify or LF)		Remova	Repair	Encapsulate	Enclosure
Mens- Womens Bathroom 3rd Floor	Yes	No	N/A		Cl	us Date		4.6	22.05				ate	ro'
mene Premene Bathloom Sta Floor		Х			GII	ue Dots	5	4(00 SF		x			
Name of Registered Waste Hauler		N.	JDEP W	/aste	Cubic `	Yards	Name of	Registe	red Lan	dfill				
Green Environmental Services, LLC		4 CHR 955	auler ID 34889		of Was 5		Fairles	1,120		uiii				
City, State Jersey City, NJ					Dispos 2-10-2		City, Stat Morrisv		Ą					
Completed by Liliana Serrano	Title Office	Man	ager			gnature	4 Jenace	5		Date 1-9-		9		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1 Name of Building Owner/Operator (2) 1-17-2019 Mondelez International Inc. 2019 Agencies Notified Type Notification Street Address 100 Deaforest Avenue EPA Initial DEP × Amended City, State, Zip Code × DOL Amendment #_1 East Hanover, NJ 07936 × Emergency (including DOH Name of Contact justification) DCA Telephone Number Cancellation Glenn Stock 732-331-5405 Name of Facility Where Abatement is Taking Place (3) **FACILITY INFORMATION** Commercial Type of Facility (4) Street Address School (K-12) 100 Deaforest Avenue Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, City (5) etc.) East Hanover, NJ 07936 Square Feet # of Floors Bldg. Age 100000 County (6) 3 44+ County Code (7) Morris Current Use (Prior if being demolished) (STATE USE ONLY) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Green Environmental Services, LLC Street Address Street Address 235 Virginia Avenue City, State, Zip Code City, State, Zip Code Jersey City, NJ 07304 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 201-333-8855 Start Date (10) 01174 Scheduled Completion Date (11) 1-17-2019 Name of OSHA Monitor 2-30-2019 Green Environmental Services, LLC Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement 235 Virginia Avenue Abatement Performed Outside of Normal Facility Hours Other - Describe: City, State, Zip Code Jersey City, NJ 07304 Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Renovation × ≥160 sf or ≥260 lf Full Containment with Negative Pressure Demolition Mini-Enclosure × Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Location of Normally Asbestos-Containing Material (ACM) Used Solely by Description of Type Asbestos Containing Material (ACM) TO BE ABATED Maintenance/ Amount (i.e. thermal systems insulation, In Facility Custodial Staff? Encapsulate (Specify Enclosure Removal surfacing, VAT, or Repair (13)(12)SF or LF) other miscellaneous) Yes No N/A Mens- Womens Bathroom 1st Floor Glue Dots 400 SF Name of Registered Waste Hauler NJDEP Waste Cubic Yards Green Environmental Services, LLC Name of Registered Landfill Hauler ID No. of Waste 0034889 Fairless Landfill 5 City, State Jersey City, NJ Disposal Date City, State 2-30-2019 Morrisville, PA Completed by Liliana Serrano Signature Office Manager Date

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1-17-2019

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Date of Notification (1) 1-15-2019 Agencies Notified Type Notification			Nar	ne of Bu	ilding Owner Internat	er/Operato	or (2)				7		
EPA Initial			100		orest Ave	nue			JAN		/ 20)19	
X DOL Amended Amendme X Emergence	ent # 1	ding	Eas	st Hand	ip Code over, NJ	07936		7		US D	1447 1447		- o
DCA Justificatio	n) on		Gle	nn Sto				T 7	elephone 32-331-	Numb -5405	er		E 58
Name of Facility Where Abatement is Tak Commercial Street Address	ing Plac	e (3)		HOILITT	INFORMA	IION	Type of Facili	G 20000					
100 Deaforest Avenue							X Other (1.6	ter 8 (Ot	her than h	K-12) ercial b	ouildin	gs, ho	mes.
East Hanover, NJ 07936 County (6)							Square Feet 100000		of Floors			. Age	
Morris Name of Monitoring Firm Hired by Building	Oumar	(0)	(STAT	ty Code E USE O	(7) NLY)		Current Use (F			lished			
Street Address	Owner	(0)	AS	CM No.		Gree	of Abatement C n Environme	ontracto ental Se	r (9) ervices,	LLC			
City, State, Zip Code						235 V	Address /irginia Aven	ue					
Project Manager for Monitoring Firm			Teleph	none No.		Jerse Telepho	ate, Zip Code y City, NJ 07	7304					
Start Date (10) 1-15-2019	Sched	uled Co	mpletion	n Date (1	1)	201-3	33-8855 f OSHA Monito	r	License 01174	No.			455
Occupancy Status During Abatement (Chec	2-15- k Only (One)				Green Street A	Environme	ntal Se	rvices, L	LC			
Facility Closed/Vacated During Entire R Abatement Performed Outside of Norm Other – Describe:	Period of nal Facili	f Abate ty Hou	ment rs				rginia Avenu te, Zip Code	ne e					
Scope of Work (Check All That Apply)						Jersey	City, NJ 07	304					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renovi Demoli				×××	Full Containm Mini-Enclosur Glovebag Pro	e cedure					
Location of Asbestos-Containing Material (ACM)		s Locat Normal ed Sole	llv		Des	cription of	Non-Exempte	d (*) and	Non-Fria	ble Pro	Abate	emeni pe	t
TO BE ABATED In Facility (13)	Ma	intena todial 8 (12)	nce/	Asbe (i.e	estos Conta e. thermal s surfaci	ining Mat	erial (ACM) sulation, or	(Sp	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
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					Old	e Dois		400) SF	x			
Name of Registered Waste Hauler		l N	IDED W										
reen Environmental Services, LLC		Ha	IDEP Wauler ID I 34889		of Waste 5		Name of F						
ersey City, NJ					Disposal 2-15-20		City, State Morrisvil						-
iliana Serrano	Title Office	Mana	ager			nature	ug Cero	2105	_ Dat	e 5201	a		

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Date of Notification (1) 1-12-2019)				of Building Ov		or (2	2)		JAN	1 7	2019		
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× DOL	Amendment				Providence		4	14	10 (4) (4)	Light	Non		50000	
⊠ DOH	Emergency justification)	(includin	ng		of Contact	1110 0101			7.1.					
DCA	Cancellation				a Durando				l leiep	hone N	umber			
				FAC	ILITY INFOR	MATION								
Name of Facility When	e Abatement is Takin	g Place	(3)	.,,,	ALL THE OIL	HOITAIN	Т	ype of Facility (4)					
Residential														
Street Address							┧╞	School (K-1 Subchapter	8 (Other	than K-	12)			
							×	Other (i.e. p	rivate & d	commerc	cial bu	ildings	, hom	ies,
City (5)							S	etc.) guare Feet	# of F	loore	-	Bldg. /	^~~	
New Providence,	NJ 07974							857	2	10015		ыад. <i>1</i> 83+	-ge	
County (6)				County	Code (7)		C	urrent Use (Prid	1000	domolic				
Union					USE ONLY)		"	aren ose (i in	i i being	demons	rieu)			
Name of Monitoring Fir	m Hired by Building (Owner (8	3)	ASC	M No.	Name	e of	Abatement Con	tractor (0	Λ	J. 100 Comp.			
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Street Address						Street			u. 001 v	1000, L				
								ginia Avenue	<u>.</u>					
City, State, Zip Code								e, Zip Code						
								City, NJ 073	04					
Project Manager for Mo	nitoring Firm			Telepho	ne No	Telepi		The second second second second						
	10			· Gropine				3-8855		icense N 1174	۷0.			
Start Date (10)		Schedu	led Co	mpletion	Date (11)			OSHA Monitor		1174				
1-22-2019		1-22-2			00.0 (11)	22		Environment	al Sonvi	cae II	C			
Occupancy Status Duri	ng Abatement (Check	Only O	ne)			Street			ai oci vi	CC3, LI				
-	cated During Entire P		833	nont		100000000000000000000000000000000000000		ginia Avenue	i.					
Abatement Perform	med Outside of Norm	al Facilit	y Hour	nent s				e, Zip Code	-					
Other – Describe:		-						City, NJ 073	nα					
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≥3 sf or ≥3 If		×	Renova	tion		Г	7							
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TO BE AB	BATED	Ma	aintena	nce/	Asbestos	Containing M rmal systems	Mate	erial (ACM)	Amo				ш	m
In Faci	ility	Cus	todial ((12)	Staff?	(i.c. trie	surfacing, VA	T, 0	or	(Spe SF or		Remova	Re	Encapsulate	Enclosure
(13)			(12)		oti	her miscellar	neou	us)			NOV	Repair	lusc	uso
		Yes	No	N/A				1			1 =		ate	Гe
Laundry / to	ols room		×		P	ipe Insula	tion		40.1	_	-		_	
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Name of Registered Wa	ste Hauler		N	JDEP W	aste Ci	ubic Yards		Name of R	enistered	andfill				
Green Environmenta	al Services. LLC		Н	auler ID	No. of	Waste		merceser or		-candill				
City, State			00	34889				Fairless	Lanoniii					
Jersey City, NJ					5 10 20 20 20	sposal Date		City, State						
Completed by					1-	22-2019		Morrisvill	e, PA					
Liliana Serrano		Title	- N/I			Signature				Da				
- Contailo		OITICE	e Man	ager		1.1.10	2	WIDEL	1200	1-	12-20	018		

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Date of Notification (1) 1-14-2019				f Building Owner/ouret Cestaro	Operator	(2)			JAN		/ 20)19	
Agencies Notified Type Notific	ation			ddress						OST	JON1		- -
DEP Amend X DOL Amend	ment #			ate, Zip Code ne, NJ 07002					[ui	<u> </u>	Gride:		-
DOH justifica		35955		f Contact ret Cestaro				Tel	ephone Nu	mber			
Name of Facility Where Abatement is	Taking Place (3)		FACI	LITY INFORMAT	ION	Tur	o of Equility	(4)					
Residential	raining riade (o)					i At	oe of Facility						
Street Address						×	Other (i.e.	r 8 (Oth	er than K-1: & commerci	2) al bui	ldings,	, home	es,
City (5) Bayonne, NJ 07002				20/1202			etc.) uare Feet 000	# o	f Floors		Bldg. <i>A</i> 75+	Age	
County (6) Hudson				Code (7) USE ONLY)		Cur	rent Use (Pr	ior if bei	ng demolish	ned)			
Name of Monitoring Firm Hired by Build	ding Owner (8)		ASCN	1 No.	Name Gree	of Al	batement Co nvironmer	ntractor	(9) rvices. LL				
Street Address					Street	Addı							
City, State, Zip Code							Zip Code city, NJ 07	304					
Project Manager for Monitoring Firm			lephor		Teleph 201-3		No. -8855		License N 01174	0.			
Start Date (10) 1-26-2019	Scheduled 1-26-201	19	etion [Date (11)			SHA Monitor nvironmer		rvices, LL	.C			
Occupancy Status During Abatement (Facility Closed/Vacated During Er	ntire Period of Ab	atemen	nt		Street 235 \		ess inia Avenu	е					
Abatement Performed Outside of Other – Describe:	Normal Facility F	Hours			1,12,335		Zip Code City, NJ 07	304					
Scope of Work (Check All That Apply) ≥3 sf or ≥3 if ≥160 sf or ≥260 if		novatio molition			×××	N G	ull Containm lini-Enclosur Blovebag Pro Ion-Exempte	e cedure				e	
Location of	No	ocation rmally	.	De:	scription		3				Abate	ement pe	
Asbestos-Containing Material (ACN TO BE ABATED In Facility (13)	Solely tenance dial Stat (12)	e/	Asbestos Cont (i.e. thermal surface	taining M	lateri insu T, or	ulation,	(8	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure	
Basement		X	IVA	Pine	Insula	tion		15	20 LF	X	-	10	
				, ipc	ouid			12	LU LI	Δ.	-		
Iamo of Dogistavad Wests Hall													

Name of Registered Waste Hauler NJDEP Waste Hauler ID No. Cubic Yards of Waste Name of Registered Landfill Green Environmental Services, LLC Fairless Landfill 0034889 City, State Disposal Date City, State Jersey City, NJ 1-26-2019 Morrisville, PA Completed by Signature Date Liliana Serrano Office Manager 1-14-2019

State of New Jersey

e of Notification (1)		Nam	ne of Buil	ding Owner w Parish	/Operator ((2)	School	JAN	1 7	20)19		Section 1
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encies Notified Type Notification				ect Ave			1	Language and the same	era, ara sar	WITT			4
EPA Initial Amended Amendment #		City	, State, Z dgefield	ip Code , NJ, 076	557		4		Secretary 1	11.11		tek	
Emergency (incl	uding	Nar	me of Cor	ntact				Telephone Nu	mber				
DOH Justilication) Cancellation		Jo	-		- TION	1000							
At the section Toking Di	200 (3)		FACILITY	/ INFORMA	ATION	Туре	of Facility (4)						
me of Facility Where Abatement is Taking Pl ne Rainbow School	ace (5)					×	School (K-12)	(a)) - () 1/ 1	2)				
reet Address							Subchapter 8 Other (i.e. priv	(Other than K-1 rate & commerc	ial bui	lding	s, hor	nes,	
55 Prospect Ave							etc.) are Feet	# of Floors			Age		
ty (5)							000+	2		50+	Service Control		
idgefield		Co	ounty Cod	ie (7)				if being demolis	shed)				
ounty (6) ergen		(S:	TATÉ USE	ONLY) _		Sch		(0)					_
ame of Monitoring Firm Hired by Building Ow	mer (8)		ASCM N	0.		of Abo	atement Contr	actor (9)					
I/A			N/A			t Addre							
treet Address						69th							_
I/A ity, State, Zip Code					City,	State,	Zip Code	103					
I/A					1		erg, NJ, 070	License	No.				
roject Manager for Monitoring Firm			elephone I/A	No.	201	hone -295-	-1700	01074					
N/A	Scheduled	1 20	7.5	ate (11)	Nam	e of O	SHA Monitor						
	01/24/19		3,00.0		N/A								
Occupancy Status During Abatement (Check	Only One)			Stree N/A	et Addı	ress						
To selling Classed Macated During Entire Pe	eriod of Al	ateme	ent		1.0000		, Zip Code						
Abatement Performed Outside of Norma Other – Describe: 11am	al Facility I	Hours			- N//								_
Scope of Work (Check All That Apply)							0	ent with Negativ	e Pres	ssure	4		
x ≥3 sf or ≥3 lf		enovat emoliti					Mini-Enclosure	е	20 1 10				
≥160 sf or ≥260 lf		SITIONA	011			×	Glovebag Pro Non-Exempte	cedure d (*) and Non-F	riable	Proc	edure	9	_
										F	Abate Ty	ment	
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Location of Asbestos-Containing Material (ACM)	Mai	d Sole intenai	nce/	Asbesto (i.e. th	nermal syst	ems in	erial (ACM) sulation,	(Specify		Rer	Re	Encapsulate	Lingonia
TO BE ABATED In Facility	Cust	odial 5 (12)	Staff?		surfacing, other misce	VAT,	or	SF or LF)		Remova	Repair	Sula	000
(13)		28/20/20/20			Office Hillood	Jilgi				_		te	,
	Yes	No	N/A	9	x9 ACM	Floor	Tile	20 SF			Χ		
Basement Cafeteria		X		3	X3 HOW	100.							
			-										
			-										
			NJDEP V	Vaste	Cubic Yar	ds	Name o	of Registered La	andfill		-		
- Litterte Heuler			Hauler ID		of Waste TBD		Miner	va Entrepris	е				
Name of Registered Waste Hauler		1.	19551				City, St	tote					
Tri-State Transfer Associates				5-	Disposal	Date	City, St	alc					
					Disposal TBD	Date	Wayn	esburg, OH	Da	to		- V-	_

State of New Jersey

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Date of Notification (1) 01/10/19 Ch	eck #3307		Nar Ho	me of Bu	uilding Owne ity/Berger	r/Operator n Arts & S	(2) Science	Charter	Schoo	ol		+		
Agencies Notified Ty	pe Notification		1100000	eet Addr Maple					<i>‡.</i> ,	SEESTOS : LIGEN	DAMI DAMI		.sh 	
EPA DEP	Initial Amended Amendment #				Zip Code sack, NJ, 0	7601								
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DOH DCA	justification) Cancellation		The House	atrick					201	-968-5039				_
				FACILI	TY INFORM	ATION	Type of	Facility (4)						\dashv
Name of Facility Where Aba Bergen Arts & Science	etement is Taking Pl e Charter Schoo	ace (3)					× Sc	chool (K-12)) (Other	r than K-12)				
Street Address							IF O	ther (i.e. pri	vate &	commercial	buildin	gs, ho	mes,	
43 Maple Ave City (5)							Square 20,00		# of	Floors	Bldg 50+	g. Age F		
Hackensack			Co	ounty Co	ode (7)		Curren	t Use (Prior	if bein	ng demolishe	d)			
County (6) Bergen			(S	TATÉ US	SE ONLY)		Scho	ol ement Cont	ractor	(9)				-
Name of Monitoring Firm H N/A	ired by Building Ow	ner (8)		ASCM I	No.	EA	Service	s	racio	(0)				
Street Address N/A							t Addres 69th st							
City, State, Zip Code						City, Gut	State, Zi tenberg	p Code g, NJ, 070)93					
N/A Project Manager for Monito	oring Firm			elephon	e No.	0.0000000000000000000000000000000000000	ohone No -295-1			License No				
N/A		cheduled		I/A oletion D	ate (11)			A Monitor		0.00.				
Start Date (10) 01/21/19	C	1/23/19	9			N/A Stree	et Addres	SS						
Occupancy Status During						N/A								
Facility Closed/Vacat Abatement Performe Other – Describe: 88	d Outside of Norma	riod of Al I Facility	Hours	ent		City,	State, Z	ip Code						
Scope of Work (Check All										NAMES NOT SEE				
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			enovati emoliti				Min	ni-Enclosure	e cedure	h Negative P				
							× No	n-Exempte	d (*) ar	nd Non-Friab	le Prod	Abate	ment	
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Location Asbestos-Containing TO BE ABA In Facili (13)	Material (ACM) ATED	Use Mai	lormallid Solel intenar odial S (12)	y by nce/	(i.e. th	Descript Containing ermal system surfacing, other misce	g Materia ems insul VAT, or	lation,		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A		ACM E	lhows			3 LF		X		
Basement R	oom 117		X			ACIVI E	IDOW5							
							To the	Norse	f Pegis	stered Landfi	1			
Name of Registered Wa Tri-State Transfer A			1	NJDEP V Hauler II 9551		Cubic Yard of Waste TBD	us	Miner	va En	treprise				
City, State Bronx, NY						Disposal D	Date	City, St. Wayn	ate esbur	rg, OH				
Completed by Michael Fajardo		Title	ce Cle	erk		Signa	ature // //	W.			ate)1/10/	/19		

3308 PA	NOT	(Purs	ATION OF suant to N	of New Je ASBEST NJAC 8:60 illding Own	os ABA and 12:	:120)							10		Parine Service
tte of Notification (1) 1/10/19 Check #330	8	S	t. Anast	asia/Cor	nmunit	y Hig	h scho	ol	, .	JAN	i	7 20	19		=1
pencies Notified Type Notifica	tion	1		aneck Ro	ad			*	Lawrence		<u>, , , , , , , , , , , , , , , , , , , </u>	r.c.ati			
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DOH justificat		100	ame of Co Cenny C							phone 1 -862-					
	DI (2)		FACILIT	Y INFORM	MATION	Тт	vne of F	acility (4)							_
ame of Facility Where Abatement is T Community High School treet Address	aking Place (3)					100	Sch	ool (K-12 chapter 8 er (i.e. pri) L (Othe	r than k	(-12) ercia	l buildir	ngs, h	omes	,
095 Teaneck Road						_ L	etc.)		Floors			g. Age		
ity (5) 「eaneck						2	20,000	+	3			50	+		
County (6) Bergen			County Co			- :	School				olish	ea)			_
lame of Monitoring Firm Hired by Buil N/A	ding Owner (8)		ASCM N	No.			f Abaten rvices	nent Cont	ractor	(9)					
Street Address N/A					0.77	Street A 426 69									
City, State, Zip Code	-				0	City, Sta Gutte	ate, Zip (nberg,	Code NJ, 070	093				29		
Project Manager for Monitoring Firm			Telephone	e No.			ne No. 95-170	00		Licen 0107		0.			
N/A Start Date (10)	Scheduled 01/27/19		pletion D	ate (11)	111	Name o	of OSHA	Monitor							
01/25/19 Occupancy Status During Abatement	The second secon						Address								
Facility Closed/Vacated During B Abatement Performed Outside of Other – Describe: 1:00pm	ntire Period of A	batem	nent		(N/A City, St N/A	ate, Zip	Code							
Scope of Work (Check All That Apply ≥3 sf or ≥3 If ≥160 sf or ≥260 If	₹ R	enova emolit				×	Mini-	Containm Enclosur ebag Pro Exempte	e cedure	4				e	
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Location of Asbestos-Containing Material (A <u>TO BE ABATED</u> In Facility (13)	CM) Use	lorma d Sole intena todial (12)	ally ely by ance/ Staff?	Asbesto (i.e. t	os Conta	system: ing, VA	Material (s insulat T, or	(ACM) ion,		Amoun (Specif SF or LI	y	Removal	Repair	Encapsulate	Lindodic
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NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 01 07 19 Morsemere Community Church 2019 Agencies Notified Type Notification Street Address **⊠** EPA ☐ Initial 930 Linden Ave **⊠** DOLWD ☐ Amended City, State, Zip Code **⊠** DOH Amendment #_ Ridgefield NJ 07657 □ DCA (NJAC 5:23-8) Name of Contact justification) Telephone Number ☐ Cancellation Tom Dietrich 1-201-245-0960 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Morsemere Community Church ☐ School (K-12) Street Address ☐ Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, 930 Linden Ave homes, etc.) City (5) Square Feet # of Floors Bldg. Age Ridgefield 2400 2 89 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Bergen Church Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) A.E.S.L 0021 **CPR Environmental Service** Street Address Street Address 2200 Patterson Plank Rd. Unit 7 8421 Hegerman St City, State, Zip Code City, State, Zip Code North Bergen NJ 07047 Philadelphia PA 19136 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Carmelo Altamonte 2018646583 215 333-5117 01328 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 01 / 08 / 19 01 / 09 / 19 A.E.S.L Occupancy Status During Abatement (Check only one) Street Address □ Facility Closed/Vacated During Entire Period of Abatement 2200 Patterson Plank Rd. Unit 7 Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-___PM/___PM-__ North Bergen NJ 07047 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ☐ >3 sf or >3 If ☐ Mini-Enclosure ≥160 sf or ≥260 If ☐ Demolition ☐ Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Repair Remova Encapsulate Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A BASEMENT \boxtimes VAT 900SF \boxtimes П \Box П П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Century waste Services Hauler ID No. Waste Waste Management 32797 City, State Disposal Date City, State Elizabeth NJ Bristol PA Completed By (Print or Type) An thony Jones Anthony Jones Project Manager 1.7.19

State of New Jersey

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Ĭ DOH □ DCA	Emergency (justification) Cancellation	includin	g	Name	of Contact					Te	elephon	e Nu	mber			
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Name of Facility Where A	Abatement is Taking	Place	(3)	.,,,		Orthizer	ION	T	ype of Facility	(4)						
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City, State, Zip Code South Orange, NJ 0	7079				8				e, Zip Code , NJ 07205							
Project Manager for Mon Sarah Calandra	itoring Firm			Telepho 201-3	one No. 49-2666		Teleph 844-4		e No. 2-7465		Licer 0131		lo.			
Start Date (10) 1/14/19		Schedu 1/31/1		npletion	Date (11)				OSHA Monitor e Lighthous		utions					
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Abatement Performe Other – Describe:	ed Outside of Norma	al Facilit	y Hours	ient		_	City, S	tate	e, Zip Code Drange, NJ	0707	9					
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Agencies Notified	Type Notification			Street A	Address				•	j	O/III	7 61	/13	-	
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DOH DCA	Emergency (i justification) Cancellation	nciuumg			f Contact Konefa					Tel	lenhone N	umber			AVCIIA SAL
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Project Manager for Moni	itoring Firm			Telepho	ne No.		Teleph 201	none N	lo.	,,	License 01206	No.			
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City, State, Zp Code Oceanville, New Jen	sey 05231						City, State, Zig Woodland P	c Code ark, New Jerse	À				
Project Manager for Mi John Smoyer	onkoring Firm	TT LOCAL CONTRACTOR		Telepho 609-65	na No 52-1833		Telaphone No 973-225-840		License No. D1104	ii			
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Project Manager for Monitoring Firm		Tole	phone i	40.	Telephone No. 973-832-42	244		01379			
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Academy Construction Inc.	-		NOEP Hower I	D.No.	Woste 3	Fair Clty, U	955	Landfill le, Pà	Date		

Name of Registered Waste Hauler **NEWARK CARTING**

NJDEP Waste Hauler ID No. 04509

Cubic Yards of Waste

Name of Registered Landfill

150SF

IESI 12 Disposal Date

12/22/18

City, State BETHLEHEM PA

Completed by JOSEPH PERLSTEIN

Title OWNER Signature

Date 11/15/18

NEWARK, NJ

City, State

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page 1

State of New Jersey JAN. 1 7 2019 NOTIFICATION OF ASSESTOS AMATEMENT (Pursuant to NJAC 8:86 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 01/08/2019 Plainfield 22 Developers LLC Check # 1387 Agencies Notified Type Notification Street Address 1195 Route 70, Suite 2000 EPA initial E DEP D Amended City, State, Zip Code X DOL Amendment #_ Lakewood, New Jersey 08701 Emergency (including X DOH Name of Contact Justification Talephone Number DCA Maurice Zakarla Cancellation 732-961-8112 FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Fabric Store Type of Facility (4) ☐ School (K-12) Street Address ☐ Subchapter 8 (Other than K-12) 855 Route 22 in Other (i.e. private & commercial bidgs, homes, etc.) City (5) North Plainfield, New Jersey 07080 Squara Feet Bldg. Age 55+ # of Floors 30,000 County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished) Somerset Retail Bldg Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Lis Consulting Services LLC Lilich Corporation Street Address Street Address 134 Bennington Parkway 606 McBride Ave City, State, Zip Code City, State, Zip Code Woodland Park, New Jersey Franklin Park, New Jersey 08823 Project Manager for Monitoring Firm Telephone No Telephone No. License No. Krzyaztof Lis 201-652-1119 973-225-8400 01104 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 01/10/2019 iris Environmental Laboratories, LLC 01/17/19 Occupancy Status During Absternant (Check Only One) Street Address 2333 Route 22 West Feelility Closed/Vecated During Entire Period of Abstament Abstement Performed Outside of Normal Facility Hours City, State, Zip Code Union, NJ 07063 Other - Describe: Scope of Work (Check All That Apply) □23 sf or 23 # Renovation ☐ Full Containment with Negative Pressure 2180 af or >260 H Demolition Mini-Enclosure Tent/Glove Bag Procedure
Non-Exempted (*) and Non-Friable Procedure le Location Abatement Nomally Location of Type Description of Asbestos Containing Material (ACM) Used Salely by Asbestos-Containing Material (ACM) Maintenance Amount TO BE ABAYED (i.e. thermal systems insulation, Custodial Staff? (Specify Enclosure Выпома In Facility SF or LF) Repair surfacing, VAT, or (12)(13) other miscellaneous) No NA Exterior X Foundation Walls/Tar 800 SF X Name of Registered Waste Hauler NJOEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Weste Atlantic Carting 26085 80 Yds Fairless Landfill City, State Wayne, New Jersey Disposal Date City, State

01/17/19

Title

President

ASB-41 (R-06-08)

Adriana Olejarove

Completed by

use this form for asbestoe itcensure exempted activities.

01/09/2019

Morrisylle, PA

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Norification (1) Name of Building Owner/Operator (2) Agencies Notified Type Notification Street Address Ø EPA 乊 Initial Ø DEP Amended Ø DOL City, State, Zip Code Amendment# Emergency (including DOH justification) Name of Contact DCA Cancellation To Name of Facility Where Abatement is Taking Place (3) FACILITY INFORMATION Ke Sident Type of Facility (4) Street Address School (K-12) Subchapter 8 (Other than K-12) City (5) Other (i.e. private & commercial buildings, homes, etc.) ca 194 Square Feet # of Floors County (6) Bldg Age County Code (7) Current Use (Prior if being demolished) (STATE USE ONLI) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Street Address ANI Street Address City, State, Zip Code 1212 Bully City, State, Zip Code Project Manager for Monitoring Firm Telephone No. Telephone No. Start Date (10) License No. 657-346 Scheduled Completion Date (11) 0/070 Name of OSHA Monitor Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Street Address 000 Abatement Performed Outside of Normal Facility Hours Other - Describe: City, State, Zip Code Scope of Work (Check All That Apply) ≥3 sfor≥3 lf .⊡ ≥160 sf or ≥260 if ☐ _ Renovation Full Containment with Negative Pressure Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure II' Lecation of Asbestos-Containing Material (ACM)
TO BE ABATED Is Location Normally Used Solely by Maintenance/ Description of Asbestos Containing Material (ACM) Abatement Type (i.e. thermal systems insulation, surfacing In Facility Custodial Staff? Атоилг (13)(12)(Specify Removal Encapsulate VAT. or Enclosure other miscellaneous) SF or LF) Yes No N/A MGL Site Siding 3000 ame of Registered Waste Hauler NJDEP Waste Cubic Yards Hauler ID No. Name of Registered Landfill of Waste 20547 iv. State Disposal Date City, State mpleted by 1.50 K Resident. Signature

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Street Address								Addres	s 33, 4 E Ga	ite D	rive				
City, State, Zip Code		::					City, S	State, Zi	p Code , NJ 0741				1		
Project Manager for Mon	itoring Firm		П	Telephon	ne No.		Teleph	none No).		License N	0.	-	-	
	200						0.000.000000	764-2			703				
Start Date (10) 1/21/19		2/21/19		npletion D	Date (11)		Name	of OSF	IA Monitor						
Occupancy Status Durin	g Abatement (Che	ck Only On	e)				Street	Addres	S						e de la constante de la consta
Facility Closed/Vac Abatement Perform Other – Describe:							City, S	State, Zi	p Code						
Scope of Work (Check A	II That Apply)		-			-		70							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	****	-	tenova emolit				×	Min Glo	Containment i-Enclosure vebag Proce n-Exempted	edure	Š.)	
	,	F1	Locat	10000000		-		,					Abate Ty		
Location Asbestos-Containing TO BE AB In Facil (13)	Material (ACM) ATED ity	Use Mai Cust	d Sole intena todial ((12)	ely by nce/ Staff?		tos Conta thermal s	system ing, VA	Material s insula AT, or		(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A	(W	
basem	ent			Х		floor til				0	200 SF	х			
				X		ceilin	g mat	erial		8,	200 SF	Х			
								10 Hz 12-200							
Name of Registered Wa	ste Hauler			NJDEP W Hauler ID		Cubic \ of Was			Name of F	Regist	ered Landfil				

04509

Title

President

TBD

TBD

Disposal Date

Signature

City, State

Pen Argyl, PA

Grand Central Sanitary Landfill

Date

1/09/19

Newark Carting

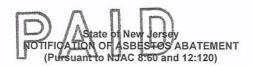
City, State

Newark NJ

Completed by

A. Scott Higgins

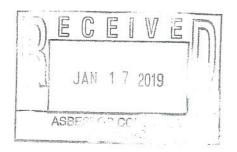
		NO	711	Sta	te of New Je	OS ABATEN	TENT		0.00	53			
hIAL	[/:	MC	(P	rsuant	NJAC8:6	and 12:120)	, , , , , , , , , , , , , , , , , , ,	CK	19	27			
Date of Notification (1)			N	ame of E	Building Own	er/Operator (2		7 6	G		W	E	
1/14/1	9			E	yzw.	ラレッテ	HOUSE						2
Agencies Notified	Type Notification		S	treet Add	**	0	, ~ .	and and an arrange of the state	JAN '	7	2019)	
□ EPA	Initial :		-	ity State	Zip Code	BEECH	4 31	_ 4	UMII		LUI		i
DEP DOL	☐ Amended Amendment #		_	Ly, State	A CV = N	SACI	. NJ. Q	7661		musicanum G &		NTSO proper	-
	☐ Emergency (incl	uding	N	iame of C	Contact	- DACIC			ne Number	CC	ō.	0	
DOH DCA	justification) Cancellation		1	YR,	الدحى او	Jecc	L	845	59	7 -	826	28	9
				FACIL	ITY INFOR	MATION	Type of Facility (4	3					-
Name of Facility Where Ab													
	TIVE HON	26					☐ School (K-12 ☐ Subchapter 8	(Other than	K-12)				`
Street Address	BEECH S	, +,					Other (i.e. pr	ivate & com	mercial bu				
City (5)	OCCUR S				7. · ·		Square Feet	# of Flo		Blo	g Age	47	
HA	CKENSACK	_		7.2			204750	5, 13			1 /	02	
County (6)				County C	ode (7). SE ONLY)		Current Use (Prior	if being der	molished)				
Be	ERGEN		- 6				SUD (s (-)	115				
Name of Monitoring Firm	Hired by Building Own	er (8)		ASCM	No.	500000							
						Bes	<u>t Removal</u> Address	Inc					
Street Address		*		8.			South Ri	ver S	treet				
City, State, Zip Code							State, Zip Code			-4			
Sity, State, Sip code	~	47				Hac	kensack,	NJ 07	601				
Project Manager for Monit	toring Firm		1	Telephon	e No.		none No.	Li	icense No.				
· ·						201	-329-7444 of OSHA Monitor		00388	3			
Start Date (10)		cheduled											
1/28/		(000)	12	9/1	7	Ome	ga Enviro Address	nment	al			30.5	
Occupancy Status During							Huyler S						
 ☐ Facility Closed/Vaca ☐ Abatement Performe 	ated During Entire Period ALOutside of Normal Fa	cility Ho	IISO				State, Zip Code		~				
Other - Describe: _	d Outside of Normal Fa	2:20	, () (Sou	th Hacken	sack,	NJ (76	06		_
Scope of Work (Check All	l That Apply)			(16									
≥3 sf or ≥3 lf			enovati				Full Containme Mini-Enclosure	ent with Neg e	gative Press	ure			
□ ≥160 sf or ≥260 lf		Ц Б	emoliti	on			Glovehag Proc	edure	Prinkle D	d	100		
							□ Non-Exempted	(*) and No	n-Friable r	Toccui	Abate	ment	
		100	Locati								Ту	ре	
Locatio			ionnall d Solel		Achesto	Descriptions Containing I	n of Material (ACM)	Amo	ount			H	
Asbestos-Containing TO BE AF		10 2000	intena todial S		(i.e. therm	al systems ins	ulation, surfacing,		cify LF)	Ren	Re	Encapsulate	Enclosure
In Faci		Cus	(12)	nerr:		VAT, o other miscella		31 0	ш	Remova	Repair	sula	osure
(15)	,	Yes	No	N/A								6	
		100	110	-	14-1	0 500	16114-1-1-1	4	SLF	X			
011 1 1-		1		V	THEILMAL	242(8H 11	JSJUATION_	 '	<u> </u>	-			Г
BASEMENT		-		1								4 !	_
BASEMENT													
BASEMENT													
									I 1011				
	te Hauler			UDEP W	12. Carlos	Cubic Yards	Name of	Registered	Landfill				
Name of Registered Wast				Hauler ID	No.	of Waste				pri	ses	,	
					No.	of Waste 2 Disposal Date	eys Mine	erva E		pri	ses	,	LI
Name of Registered Wast Best Remova City, State	l Inc			Hauler ID	No.	of Waste 2 Disposal Date	eys Mine City, Sta	erva E	enter	H 4	ses		LI
Name of Registered Wast	1 Inc NJ 07601	Title	I	Hauler ID	No.	of Waste 2 Disposal Date	eys Mine City, Sta	erva E	nter	H 4			



CL2993

Date of Notification (1) 1/7/2019		N	ame of JS Arn	Building O	wner/o	Operator	(2) rs / N	Y District	/ NJ	Civilly	Eks (offil	5.8		7 E
Agencies Notified Type Notification Initial	7 - 10 1 1	S	treet Ac							省			, -		
X DEP Amended Amendment		200		te, Zip Cod sex, NJ (6				4	J/	N	1-/	-20	19
□ DOH				Contact ul Kara, <i>i</i>	Admi	n Contr	actin	g Officer	(7	ephone 32) 667	-727		^ C		
Name of Facility Where Abatement is Takin	a Place (2)		FACIL	LITY INFO	RMAT	ION	Tuno	of Facility (4	\					- Historia	
Residentail Property	y Flace (3)								53						
Street Address			-				×	School (K-12 Subchapter (Other (i.e. pr	(Oth			uildir	ngs, l	nome	s,
City (5) Middlesex								etc.) re Feet)	# of	Floors		Bld 60	lg. Ag	je	
County (6) Middlesex				Code (7) ISE ONLY)				ent Use (Prioridential	r if bei	ng demo	olished)			
Name of Monitoring Firm Hired by Building TBD	Owner (8)		ASCM	No.				tement Cont acting, LL		(9)					
Street Address						Street 1385		ss ey Road, S	Suite	K					
City, State, Zip Code								ip Code ew Jersey	074	70					
Project Manager for Monitoring Firm		Te	elephor	ne No.		Teleph (973)		o. -5040		License 00874					
Start Date (10) 1/21/2019	Scheduled 3/21/2019		letion [Date (11)				HA Monitor acting, LL0	С						
Occupancy Status During Abatement (Chec	k Only One)					Street				12					
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other – Describe:			nt			City, S	tate, Z	ey Road, S				1000			\dashv
Scope of Work (Check All That Apply)						vvayı	ne, iv	ew Jersey	074	70					
≥3 sf or ≥3 if ≥160 sf or ≥260 if		ovatio				×	Mir	Il Containmeni-Enclosure ovebag Procen-Exempted	edure						
	Is Lo	cation	n T				1 140	TI Exempted	() un	4 110111	TIGDIC I		bate	ment	
Location of	Nor	mally			De	escription	of				-	_	Тур	oe T	_
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used S Mainte Custod	enanc	e/	(i.e. t	herma surfa	taining M I systems acing, VA miscellar	s insula T, or		(5	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
See Attached	Yes 1	No	N/A									-		te	
0007/11/00/100								1				+			
Name of Registered Waste Hauler		NII	DEP W	acto	Cubic	Yards		Name of F	Panieta	ared I an	dfill				_
Service Transport Group, Inc.		Hai	uler ID 990	No.	of Wa			Minerva)			
City, State New Castle, Delaware					Dispo	sal Date	>	City, State Waynes		, Ohio					
Completed by Predrag Sarcev	Title Vice Pr	eside	ent	,	-	Signature					Date 1/7/2	2019	9		

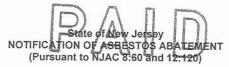
Location of		Locati Normal	ly	Description of			Abate	emen /pe	it
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole intenar todial S (12)	ice/	Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A			<u>n</u>		ate	Ге
Basement		×		Pipe Insulation	175 LF	Х			
Basement		X		Elbow Insulation	33 Each	Х			
2 nd Floor Bathroom		×		Floor Tile/Mastic	458 SF	X			
1st Floor Kitchen		X		Plaster	918 SF	X			
Exterior		X		Transite	4300 SF	X			
Boiler Room		Х		Boiler Insulation	128 SF	X			



NOT FIGATION OF ASBESTOS ABATEMENT Bursuant to NJAC 8 60 and 12:120)

Ch	1 Orca i	
	41114	

Date of Notification (1) 1/7/2019				Name o	of Building	Owner	/Operato	r (2)	NV Dietrie	t / NJ Civi	VE-	C	-	/ 	
Agencies Notified EPA DEP DOL	Type Notification Initial Amended Amendmen Emergency	t #	•	Street / 225 S City, St	Address S Lincolr late, Zip C esex, N	Aven	iue	21071	TI DISTIL			IAN	1-7	20	19
DOH DCA	justification Cancellation)		Mr. Pa		a, Adm		ractir	ng Officer	(732) 6	he Num 67-72	nber 274		C	- COMPANIE
Name of Facility Where A Residentail Propert Street Address		ng Place (3	3)	FAC	ILITY INF	ORMA	TION	×		12) 8 (Other that private & con	nmercia	al buil	- 3		es,
Middlesex County (6)			T	County	Code (7)			384 Curr	0 ent Use (Pri	# of Floo 2 or if being de		6	3ldg. A	Age	
Middlesex Name of Monitoring Firm TBD	Hired by Building	Owner (8)		ASCI	USE ONLY M No.			of Aba	sidential atement Cor racting, LL						
Street Address							Street	Addre	CONTRACTOR SEAT CONTRACTOR						
City, State, Zip Code			Telepho					Zip Code lew Jersey	y 07470			a;			
1 5505 1	oject Manager for Monitoring Firm							928	-5040	Lice 008	nse No 74).			
Start Date (10) 1/21/2019	Ab-1	2/21/20	19	mpletion	Date (11)		Sky (Contr	HA Monitor acting, LL	.C					
Facility Closed/Vaca Abatement Performe Other – Describe:	ated During Entire ed Outside of Norn	Period of A	baten	nent s			City, S	Valle tate, Z	ss ey Road, S lip Code lew Jersey						
Scope of Work (Check Al ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Г Гпат Арріу)		enova emolii				×	Min	ni-Enclosure ovebag Proc					е	
Location	of	N	Locat	lly		De	escription			() 4.14 11011	THOOK	,,,,	Abate	ement	
TO BE ABA	Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility No Used Maint Custoo						ntaining M Il systems acing, VA miscellan	laterial insula T, or	I (ACM) ation,	Amoun (Specify SF or LF	,	Removal	Repair	Encapsulate	Enclosure
Roofto	X			Roo	of Flash	ing		68 LF		х					
Name of Registered Wast	e Hauler			JDEP W		100000000000000000000000000000000000000	Yards		Name of F	Registered La	andfill				
Service Transport Gr	oup, Inc.			auler ID 0990	No.	of Wa			Minerva	Enterprise		.C			
City, State New Castle, Delawar	е					Dispo TBD	sal Date		City, State Waynes	burg, Ohio)				
Completed by Predrag Sarcev		Title Vice F	Presid	dent		1	Signature	7			1/7	201	9		



CL 2995

Date of Notification (1)			Name o	of Building (Owner/O	perator	(2)				67	
1/7/2019			US A	my Corp	s of En	ginee	ers / NY Distric	t / NJ Civi	₩Ēks(Setting.	I	\mathbb{V}
Agencies Notified Type Notification	ation			Address Lincoln	Avenue)		13				
X DEP Amend	ment #			ate, Zip Co esex, NJ					JA	N 1	7 2	019
□ DCA □ Emerge justifica □ Cancell		1		of Contact aul Kara,	Admin	Cont	racting Officer	Telephone (732) 66	Numbe 67-7274			
Name of Facility Where Abatement is	Table - Di - /	- 1	FAC	ILITY INFO	RMATIC	N			-		Section 1	2
Residentail Property	aking Place (3)					Type of Facility	3.0				
Street Address							School (K-	12) er 8 (Other than	K-12)			
							Other (i.e. etc.)	private & comr	mercial b	uilding	s, hom	ies,
City (5) Middlesex							Square Feet 1543	# of Floors	S	Bldg.	Age	
County (6) Middlesex				Code (7) USE ONLY)		_	Current Use (Pr Residential	ior if being den	nolished)			
Name of Monitoring Firm Hired by Build TBD	ding Owner (8)	ASC	ЛNo.			of Abatement Co Contracting, L					
Street Address							Address Valley Road,	Suite K	***************************************			
City, State, Zip Code				-		City, S	tate, Zip Code ne, New Jerse				/	
Project Manager for Monitoring Firm		Telepho	ne No.		Teleph	one No. 928-5040	-	se No.	-2.000			
Start Date (10) 1/21/2019	Schedul 2/21/2		npletion	Date (11)		Name	of OSHA Monitor Contracting, L		<u> </u>			
Occupancy Status During Abatement (0	Check Only O	ne)					Address			71		
Facility Closed/Vacated During En Abatement Performed Outside of	tire Period of A	Abaten y Hours	nent				Valley Road, tate, Zip Code	Suite K				
Other – Describe:					-	Wayı	ne, New Jerse	ey 07470				
Scope of Work (Check All That Apply)						100	1					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	generally .	Renova Demolit				×	Mini-Enclosur Glovebag Pro	cedure			12000	
	Is	Locati	ion				1 Non-Exemple	d (*) and Non-l	-nable P		re temen	t
Location of	1	Normal ed Sole	ly		Desc	ription	of			T	уре	_
Asbestos-Containing Material (ACM TO BE ABATED In Facility (13)) Ma Cus	intenar todial S (12)	nce/ Staff?	(i.e. t		ystems		Amount (Specify SF or LF)	Kemoval	Repair	Encapsulate	Enclosure
Basement Boiler Room	Yes	No X	N/A		Red F	los- "	Tile .	0.05			(0)	
1st Floor Living Room							ompound	9 SF	X			
TOUT LIVING TOUR	X		Oli V	ville 30	JIII C	ompound	480SF	x	-			
Name of Registered Waste Hauler		N	JDEP W	aste	Cubic Y	ards	Name of	Registered Lar	ndfill			
Service Transport Group, Inc.			auler ID 0990	5000000	of Waste 30	9	Minerva	a Enterprise				
City, State New Castle, Delaware		W TEST			Disposa TBD	l Date	City, Stat Wayne	e sburg, Ohio				
Completed by Predrag Sarcev	Title Vice	Presid	dent		Sig	nature			Date 1/7/20)19		

State of New Jersey NOTH CATON OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:50 and 12:120)

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Date of Notification (1) 1/7/2019			الما	N årn e o US Ar	i-Building my Corp	O wner/ os of E	Öperator nginee	r (2) ers / N\	/ District /	/ NJ	Civil V	Vp <u>r</u> ks	Off	ice-	п ,	
Agencies Notified T	ype Notification			Street A	ddress)),		5	5		Ψi
X EPA X DEP			-		Lincoln ate, Zip Co		ie				-3					All Section
X DOL	Amended Amendment				ex, NJ, C							J	ΔN	1	7 20)19
ĭ DOH	Emergency (justification)		Ī		f Contact		_				lephone					
DCA L	Cancellation				LITY INFO			stractin	g Officer	(7	32) 66	7-727 ASBE	4	~ C	Ć:	THESE
Name of Facility Where Aba	tement is Takin	g Place (3)	FACI	LITTINE	JRIVIATI	ION	Туре с	of Facility (4))	Printer and the last of the la		ya			#/in/in
Residentail Property									chool (K-12			120022				
Street Address								N C	Subchapter 8 Other (i.e. pri tc.)				bliuc	lings,	home	es,
City (5) Middlesex								Square 2730					Bldg. Age 60			
County (6) Middlesex					Code (7) USE ONLY,)		Current Use (Prior if being demolished) - Residential								
Name of Monitoring Firm Hill TBD	red by Building (Owner (8)		ASCM No. Name of Abatement Sky Contracting							(9)					
Street Address								Address Valley	s y Road, S	, Suite K						
City, State, Zip Code				, State, Zip Code ayne, New Jersey 07470												
Project Manager for Monitor		Telepho	ne No.		U 7000000000000000000000000000000000000	hone No) 928-5			Licens 0087							
Start Date (10) 1/21/2019		Schedul 2/21/2		npletion	Date (11)				A Monitor cting, LLC							
Occupancy Status During Al	batement (Chec	k Only O	ne)					Address								
Facility Closed/Vacated Abatement Performed Other – Describe:	d During Entire F Outside of Norm	Period of a	Abaten / Hours	rs City, State												
Scope of Work (Check All Ti	nat Apply)						Way	ne, Ne	w Jersey	074	70					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ат Арріу)		Renova Demolit				>	Mini Glov	Containmer -Enclosure rebag Proce -Exempted	edure	0/937.000.0		re Pressure			
Location of			Locati Normal			Do				() 4.14 1.16 1.16			Abatement Type			
Asbestos-Containing Ma TO BE ABATE In Facility (13)		Use Ma	ed Sole intenar todial S (12)	ly by nce/		tos Cont thermal surfa	Description of s Containing Material (ACM) sermal systems insulation, surfacing, VAT, or other miscellaneous)			Amount (Specify SF or LF)			Removal	Repair	Encapsulate	Enclosure
Front Entran	ce	103	X	14073	(Off Whi	ite Skir	m Coat		2	94 SF		x			
						Z					0101					
Name of Registered Waste I	Hauler		l A	LIDED VA	lasto	Cubic	Vorda		Nome of D	o al at	rod!	de"				
Service Transport Grou			Н	NJDEP Waste Hauler ID No. 20990 Cubic Yards of Waste 10												
City, State New Castle, Delaware						Dispos TBD	sal Date		City, State Waynesh	ourg	, Ohio					
Completed by Title Predrag Sarcev Vice President						S	ignature		Date 1/7/2019							

n. 16		NOTIF	S	tate of Ne	ew Jersey			r)_E	C		Pr	int I
					BESTOS A 8:60 and			•	CHE	() () () ()	010			
Date of Notification (1) 01-02-19					Owner/Op		(2)				JAN	1	7 21)19
Agencies Notified Type Notification EPA Initial	1			Address Route 2	02 South	า				ASBECTION COT				
EPA Initial DEP Amended Amendmer	nt #			ate, Zip C					- Lance			-		
□ Emergency justification	(including	g	Name o	of Contact		-			Telepho	one Nu	mber			
DCA Cancellatio	n		Carlos Gonzalez						(908)	872-3	365			
Name of Facility Where Abatement is Taki	ng Place ((3)	FAC	ILITY INF	ORMATIO	N	Type	of Facility (4)					
							П	School (K-1	9557) Cristi					
Street Address 1000 Route 202							×	Subchapter Other (i.e. p etc.)	8 (Other th			dings	, hom	es,
City (5) Raritan								re Feet	# of Flo	ors	100	Bldg. A		
County (6) Somerset	33	County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished) Commercial												
Name of Monitoring Firm Hired by Building Owner (8) Environmental Health Investigators, Inc. ASCM No. Name of Abatement Contractor (9) Pinnacle Environmental Corp.														
Street Address 655 West Shore Trail Street Address 200 Broad Street														
0 / 1110-0-1								ip Code NJ 07072	2					
Project Manager for Monitoring Firm Bill Kerbel	Telepho (973)	ne No. 651-104		Teleph 201-9			1000	ense N 756	0.					
Start Date (10) 01-07-19	Schedu 08-31-	uled Completion Date (11) Name of OSHA Monitor Even-Air Inc.												
Occupancy Status During Abatement (Che	ck Only O	ne)				Street								
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe: Section of bldg. will	mal Facilit	v Hours	S	abatemer	at	City, S	tate, Z	kson Aver ip Code nd City, N'						
Scope of Work (Check All That Apply)						Long	ISIAI	id City, N	1 11101					_
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		Renova Demolit				×	Ful Mir Glo	II Containme ni-Enclosure ovebag Proc n-Exempted	edure				e	
1		s Locati Normal					34					Abate	ement	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Sole aintena stodial \$ (12)	ly by nce/		Desc tos Contai thermal sy surfacir other mis	ystems	laterial insula T, or		Amou (Speci SF or L	fy	Removal	Repair	Encapsulate	Enclosure
Bldg. B: 1st Floor East Wing	Yes	No	N/A		т	noi+-			0.500	<u> </u>			te	(D
Bldg. B: 1st Floor East Wing	-		X	-		nsite			3,5308		х			
Bldg. B: 1st Floor East Wing			X		Transite	W. 17.1.		р	1958		х			
Bldg. B: 2nd Floor East Wing	-		X						12,820		х			
lame of Registered Waste Hauler		l N	JDEP W		ACM pa		SINK		10SF Registered L		х			
ewark Carting, Inc.		Н	lauler ID 4509		of Waste			100000000000000000000000000000000000000	V.S. Nort		dfill			
City, State lewark, NJ 07105					Disposal TBD	Date.	7	City, State Morrisvi	le, PA 19	9067				
Completed by Richard Doran	Title Proie	ect Ma	nager		Sig	náture		112	4)	Dat 01	te _02_	19		



Title Of Project: 1000 Route 202, Raritan, NJ 08869
Additional Materials / Floors
Pg. 2

Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)	Is Location Normally Used Solely by Maintenance or Custodial Staff? (12)	Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)	Amount (Specify Square Feet or Linear Feet)	Abatement Type (Specify: Removal, Repair, Encapsulation or Enclosure)
Bldg. B: 2nd Floor East Wing	N/A	Transite	3,075SF	Removal
Bldg. B: 2nd Floor East Wing	N/A	Transite Countertop	85SF	Removal
Bldg. B: 2nd Floor East Wing	N/A	VAT/Mastic	18,440SF	Removal
Bldg. B: 3rd Floor East Wing	N/A	Transite	1,075SF	Removal
Bldg. B: 3rd Floor East Wing	N/A	Transite Countertop	25SF	Removal
Bldg. B: 3rd Floor East Wing	N/A	VAT/Mastic	7,800SF	Removal



					SBESTOS ABATEMI	DITE.	(2)				
Date of Notification (1)			(Pursu		8: 60-7 and 12: 120-7)		_ CL +	F 0	2	78	6
0 1 / 1 0	/ 1 9	ol le			uilding Owner/Operate R SCHUSTER, L	F-1 -	<u> </u>			-	
Agencies Notified Type of N	otification		\dashv	Street Add		LC	1)[(G)	5		//
[X] EPA			- 11	D-22 HU	INTS POINT CO-	-OP MARKET	11:31				
[X] Initia	al Notification			City, State,	Zip Code		1 1 1	FAAI	4 7	0.0	140
	nded Notification	n	- 11	BRONX	, NY 10474			JAN	1 /	20	19
[X] DOH [] Cano			- 11	Name of Co	ontact		Tabashan A				
[] DCA [] Eme	rgency		- 11	MR. ZAG	СК НІТСНСОСІ	ĸ l	917-531-	0040	° C		
			F		FORMATION		717-331-	0940	15.52	.40	_
ame of Facility Where Abatement is Taking Pl	ace (3)			0.5.35.5358.6.35.4 5. 2	- OKMATION	Type of Facility	(4)				
VAREHOUSE						11	School (K-12)				
treet Address						l ii	Subchapter 8 (Other	than K-	12)		
0 INDUSTRIAL ROAD						[X]	Other (i.e., private &	commerc			
ity (5) Coun	ty (6)		T	County Code	2 (7)	Square Feet	buildings, homes, etc. # of Floors		Bldg.	Am	
				(STATE USE	E ONLY)	30,000 +	1	50		Age	
ODI BER	RGEN				1	WAREHOUS	or if being demolished)			
ame of Monitoring Firm Hired by Building Ow	mer (8)		ASCM		Name of Abatemen	t Contractor (9)					
HITMAN			0	0110	LR CONTRA	CTING & ENVI	RONMENTAL (CONOR	TF 00V		
reet Address					Street Address	CTING & ENVI	RONVIENTAL	LUNSU	LII	NG I	NO
PLEASANT HILL ROAD					1141 ROUTE 2	23					
RANBURY, NJ 08512					City, State, Zip						
oject Manager for Monitoring Firm		Telen	hone Nu	mbar	WAYNE, NJ 0	7470					
R. KEVIN LOVELY		110,000,000	390-58		Presentation of Presentation o		License Numi	per			
	Scheduled Comp	oletion D)ate (11)	.50	Name of OSHA Mor	nitor	00408				_
0 1 2 1 / 1 9 Month / Day / Year	0 2	2 Da	8	1 9 Year			RONMENTAL (ONSU	LTI	NG II	NO
cupancy Status During Abatement (Check only	(one)		,	Tear	Street Address						_
of Abatement					1141 ROUTE 2.	3					
Abatement Performed Outside Hours - Describe:	e of Normal Faci	lity			City, State, Zip Code						
[] Other - Describe:		-	1		WAYNE, NJ 07	470					
pe of Work (Check all that apply)		150100000		×	П ,						_
			Demolit Renovat		[X]	Full Containment	With Negative Pressur	re			
$\begin{bmatrix} 1 \\ \ge 3 \text{ sf or } \ge 3 \text{ if} \\ \begin{bmatrix} X \end{bmatrix} \ge 160 \text{ sf or } \ge 260 \text{ if} \end{bmatrix}$		• •			[]	Mini-Enclosure Glovebag Procedur	re				
[A] 2 100 St or 2 200 ft					[X]		and Non-Friable Proc	edure			
		Is						A	baten	nent T	_
Location of		Loca			Description of			R		E	1
Asbestos - Containing	1	Norn Us	10 mg		Asbestos-Containing		Amount	E	R	C	
			ea	- 1	Material (ACM)			4.00	E	A P	
Material (ACM)		Solel	y by		Material (ACM) (i.e., thermal systems		(Specify SF or LF)	M O	P		
			y by enance/		(i.e., thermal systems insulation, surfacing, \			M O V	A	S	
Material (ACM) TO BE ABATED		Mainte Custe Staff	y by enance / odial (12)		(i.e., thermal systems			M O V A	A I	U	
Material (ACM) TO BE ABATED in Facility (13)		Mainte Custe Staff	y by enance / odial (12)	/A	(i.e., thermal systems insulation, surfacing, v or other miscellaneo	us)	SF or LF)	M O V	A		1
Material (ACM) TO BE ABATED in Facility (13) rehouse - Interior		Mainte Custe Staff	y by enance / odial (12)	A Floor T	(i.e., thermal systems insulation, surfacing, v or other miscellaneo	us)	SF or LF)	M O V A L	A I	U L	1
Material (ACM) TO BE ABATED in Facility (13) rehouse - Interior rehouse - Interior rehouse - Interior		Mainte Custe Staff	by by enance / odial (12) No N	A Floor T	(i.e., thermal systems insulation, surfacing, or other miscellaneo	us) 6	5,350 SF ,600 SF	M O V A L	A I	U L	1
Material (ACM) TO BE ABATED in Facility (13) rehouse - Interior rehouse - Interior rehouse - Interior rehouse - Interior		Mainte Custe Staff	y by enance / odial (12)	A Floor T Wall M Joint C	(i.e., thermal systems insulation, surfacing, or other miscellaneo Tile & Mastic Iastic Compound	(c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	5,350 SF ,600 SF 6,000 SF	M O V A L	A I	U L	1
Material (ACM) TO BE ABATED in Facility (13) rehouse - Interior rehouse - Exterior		Mainte Custe Staff	y by enance / odial (12) No N	A Floor T Wall M Joint C Pipe & Window	(i.e., thermal systems insulation, surfacing, or other miscellaneo File & Mastic Compound Fitting Insulation W Glazing/Caulki	(c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	5,350 SF ,600 SF	M O V A L X X	A I	U L	1
Material (ACM) TO BE ABATED in Facility (13) rehouse - Interior rehouse - Interior rehouse - Interior rehouse - Interior rehouse - Exterior rehouse - Exterior		Mainte Custe Staff	y by enance / odial (12) No N	A Floor T Wall M Joint C Pipe & Window Transit	(i.e., thermal systems insulation, surfacing, or other miscellaneo File & Mastic Compound Fitting Insulation W Glazing/Caulki	1 1 1 n 3 ng 5	5,350 SF ,600 SF 6,000 SF 8 LF	M O V A L	A I	U L	1
Material (ACM) TO BE ABATED in Facility (13) rehouse - Interior rehouse - Exterior rehouse - Exterior rehouse - Roof		Mainto Custo Staff Yes	y by enance / odial (12) No N	A Floor T Wall M Joint C Pipe & Window Transit Roofing	(i.e., thermal systems insulation, surfacing, or other miscellaneo File & Mastic Compound Fitting Insulation of Glazing/Caulking Fig / Flashing	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5,350 SF ,600 SF 6,000 SF 8 LF 55 LF 0 SF 9,440 SF	M O V A L X X X X X X	A I	U L	
Material (ACM) TO BE ABATED in Facility (13) rehouse - Interior rehouse - Interior rehouse - Interior rehouse - Interior rehouse - Exterior rehouse - Exterior rehouse - Roof e of Registered Waste Hauler		Mainte Custe Staff Yes	y by enance / odial (12) No N	A Floor T Wall M Joint C Pipe & Window Transit Roofing	(i.e., thermal systems insulation, surfacing, or other miscellaneo File & Mastic Iastic Compound Fitting Insulation W Glazing/Caulki te g / Flashing urds of Waste	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5,350 SF ,600 SF 6,000 SF 8 LF 55 LF 0 SF 9,440 SF gistered Landfill	M O V A L X X X X X X X X	A I	U L	1
Material (ACM) TO BE ABATED in Facility (13) rehouse - Interior rehouse - Interior rehouse - Interior rehouse - Interior rehouse - Exterior rehouse - Exterior rehouse - Roof of Registered Waste Hauler Contracting & Environmental Con	sulting, Inc.	Mainte Custe Staff Yes	y by enance / odial (12) No N	A Floor T Wall M Joint C Pipe & Window Transit Roofing Cubic Ya	(i.e., thermal systems insulation, surfacing, or other miscellaneo File & Mastic Iastic Compound Fitting Insulation W Glazing/Caulki te g / Flashing urds of Waste 100	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5,350 SF ,600 SF 6,000 SF 8 LF 55 LF 0 SF 9,440 SF	M O V A L X X X X X X X X	A I	U L	1
Material (ACM) TO BE ABATED in Facility (13) rehouse - Interior rehouse - Interior rehouse - Interior rehouse - Interior rehouse - Exterior rehouse - Exterior rehouse - Roof e of Registered Waste Hauler . Contracting & Environmental Con State yne, NJ	sulting, Inc.	Mainte Custe Staff Yes	y by enance / odial (12) No N	A Floor T Wall M Joint C Pipe & Window Transit Roofing	(i.e., thermal systems insulation, surfacing, or other miscellaneo File & Mastic Iastic Compound Fitting Insulation W Glazing/Caulki te g / Flashing urds of Waste 100	n 3 ng 5 Name of Re Grand Co	5,350 SF ,600 SF 6,000 SF 8 LF 55 LF 0 SF 9,440 SF gistered Landfill	M O V A L X X X X X X X X	A I	U L	1
Material (ACM) TO BE ABATED in Facility (13) rehouse - Interior rehouse - Interior rehouse - Interior rehouse - Interior rehouse - Exterior rehouse - Exterior rehouse - Exterior rehouse - Roof e of Registered Waste Hauler Contracting & Environmental Con State yne, NJ	sulting, Inc.	Mainte Custe Staff Yes	y by enance / odial (12) No N	A Floor 7 Wall M Joint C Pipe & Window Transit Roofing Cubic Ya	(i.e., thermal systems insulation, surfacing, or other miscellaneo File & Mastic Iastic Compound Fitting Insulation W Glazing/Caulki te g / Flashing urds of Waste 100 Date	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5,350 SF ,600 SF 6,000 SF 8 LF 55 LF 0 SF 9,440 SF gistered Landfill	M O V A L X X X X X X X X	A I	U L	1
Material (ACM) TO BE ABATED in Facility (13) rehouse - Interior rehouse - Interior rehouse - Interior rehouse - Interior rehouse - Exterior rehouse - Exterior rehouse - Roof e of Registered Waste Hauler Contracting & Environmental Con State yne, NJ pleted by (Print or Type)		Mainte Custe Staff Yes NJDEF Hauler	y by enance / odial (12) No N	A Floor 7 Wall M Joint C Pipe & Window Transit Roofing Cubic Ya	(i.e., thermal systems insulation, surfacing, or other miscellaneo File & Mastic Iastic Compound Fitting Insulation W Glazing/Caulki te g / Flashing urds of Waste 100	n 3 ng 5 Name of Re Grand Co	5,350 SF ,600 SF 6,000 SF 8 LF 55 LF 0 SF 9,440 SF gistered Landfill	M O V A L X X X X X X X X	A I	U L	1

CK#4725

Date of Notification (1)

State of New NOTHICATION OF ASSESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

Name of Building Owner/Operator (2)



GRADING ASEXCADATING -19 3000 Type Notification Street Address Agencies Notified | Initial DEPA Amended City, State. Zip Code DOL. Amendment # 08521 Name of Contact Emergency (including DOH DCA justification) elephone Number Cancellation FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) RESIDENCE School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private & commercial buildings. homes, etc.) Square Feet # of Floors Bldg. Age City (5) County Code (7) (STATE Current Use (Prior if being demolished) County (6) USE ONLY) IACANI Name of Abatement Contractor (9) ASOM No. Name of Monitoring Firm Hired by Building Owner FMC Street Address Street Address City, State, Zip Code City, State, Zip Code License No Telephone No Telephone No. Project Manager for Monitoring Firm Name of OSHA Monito Scheduled Completion Date (11) Start Date (10) Street Address Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours Other - Describe: Scope of Work (Check all that apply) Full Containment with Negative Pressure Mini-Endosure Renovation __≥3 sf or ≥3 H Glovebag Procedure Demotition Non-Exempted (*) and Non-Friable Procedure 2160 sf or ≥260 H Abatement is Location Type Normally Description of Used Solely by Amount Asbestos Containing Material (ACM) Location of Maintenance/ Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, (Specify Custodial SF or LF) TO BE ABATED surfacing, VAT, or Staff? other miscellaneous) IN Facility (12)(13) N/A No Yes 000 50 RAN SIDING Name of Registered Landfill Cubic Yards NUDEP Waste Name of Registered Waste Hauter Hauter DNO KLEMCO Disposal Date City, State Signature Completed By

CK 4725

PAID

IAN 1 7 2040

JAN 17 2019

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

Date of Notification (1)			Na	me of Build	ling Owner/Operat	or (2)	ASBESTOR COLL					
Agencies Notified Type Notificati	ion		Str	eet Addres							-	
☐ \$PA ☐ Initial ☐ Amended			City	, State, Zip	Code					=	=	
		Eng	_	Sti		CITY						
DOH justification			Nar	ne of Conta	0.5		Telephone Num	ber				
			J		FORMATION			_	_	_		
Name of Facility Where Abatement is Tal	king Pta	ce (3)				Type of Facilit	y (4)					
RESIDENC	E					School (K-	12) r 8 (Other than K-1)	21				
Street Address				Other (i.e., private & commercial but homes, etc.)								
City (5)						# of Floors	Bldg. Age					
SEA ISL	E 1	(1)		. 0.1	707475	Prior if being demost		50	1			
County (6) CAPE MAY			US	E ONLY)	7) (STATE	CANT	shea)					
Name of Monitoring Firm Hired by Building			ASCA	d No.	Name of Abater	ment Contractor (9)	0.21150				
(8) N/A					Street Address	LEMCO	TMC	_	_	_	-	
Street Address					360	9 S. SPV	RUCE HIE	1				
City, State, Zip Code					City, State, Zip (ADE N.J	15	05	7		
		TTO	ephone	Nh.	Telephone No.	APCE SA	License No.	<u> </u>	0)		=	
Project Manager for Monitoring Firm				856-779-0472 4 01371								
	eduled	Compt 3 ~	etion D	ate (11)	Name of OSHA	Monitor NJA					_	
0ccupancy Status During Abatement (Ch	C -	-			Street Address			76				
Facility ClosedVacated During Entire P	eriod o	f Abate	ement						_	_	=	
Abatement Performed Outside of Norm.	al Facili	ty Hou	#S		City, State, Zip C	20de	31					
Other - Describe:												
Scope of Work (Check all that apply)					☐ Full Cor	ntainment with Ne closure	gative Pressure					
>3 sf or ≥3 ff >160 sf or ≥260 ff		enovat emotik			Gloveba	ag Procedure	on-Friable Procedur	p				
[XZ 2 100 21 01 2200 11	1 15	Location	20		XINGFEA	empled Jana N	X1-112010 1 100000		bater			
	N	ormal	y		Description of			_	Typ	e	\dashv	
Location of Asbestos-Containing Material (ACM)	Mai	Solel ntenan	ice/	Asbest	os Containing Mat thermal systems i	(erial (ACM)	Amount (Specify	R	_	Enc	En	
TO BE ABATED		ustodia Staff?	¥	(I.e	surfacing, VAT,	or	SF or LF)	Remova	Repair	Encapsulate	Enclosure	
IN Facility (13)		(12)	,		other miscellaneo	ous)		val	5	late	н	
	Yes	No	N/A				77.00	V	-	-	\dashv	
SIDING			X		e AN SITE		2250 SF	X		-	\dashv	
								Н	-	-	\dashv	
									\neg	-		
		TN	JDEP Y	Vaste T	Cubic Yards	Name of Regis	stered Landfill					
Name of Registered Waste Hauler			auter 10	No.	of Waste	C.1	MCMU	1				
KLEMCO INC		-14	176	4	Disposal Date	City, State :		i	T			
City. State MADE SHADE W. I						1000	BINE 1	4.	1	_	=	
Completed By Title					Signature 01/	M	Date	-1	3	10	2	
MICHAEL YVINIM	2RES	2			- March							

. V---- avampted activities

Ch2996

[AIIE
IL)	State of New Jersey
Funne	ANOTIFICATION OF ASBESTOS ABATEMENT
U	Pursuant to NJAC 8:60 and 12:120)

11011		FA.	Pursuar	ALIO NUA	C 8:60 a	nd 12:12	20)					9	991	÷.
Date of Notification (1) 1/7/2019			Name US A	of Buildin	g Owner rps of E	Operato Engine	r (2) ers /	/ NY Distri	ct / NJ (Cillry	Forks	Offic	e	W
Agencies Notified Type Notificate EPA Initial	on		Street	Address S Lincoli					1		.ΙΑ	October 2010	77	040
X DEP Amended X DOL Amendm		_		tate, Zip (lesex, N		6				hal	JA_	ų l	1 (019_
DCA justification Cancellat	n)		Mr. P		a, Adm		rac	ting Office	Tele r (73	ephoné 32) 66			001	
Name of Facility Where Abatement is Ta	king Place (3)	\	FAC	CILITY IN	FORMAT	ION	I =							
Residentail Property	g . 1466 (6)						П	pe of Facility						
Street Address							×	School (K- Subchapte Other (i.e.	er 8 (Othe	er than comm	K-12) ercial b	uildin	gs, hor	nes,
City (5) Middlesex								etc.) uare Feet 34	Floors		Bldg 60	. Age		
County (6) Middlesex			County (STATE	Code (7) USE ONL	y)			rrent Use (Pr esidential	ior if beir	ng demo	olished)		
Name of Monitoring Firm Hired by Buildir TBD		ASC	M No.		Name Sky	of A Con	batement Co tracting, L	ntractor ((9)					
Street Address					Street 1385		ress Iley Road,	Suite l	<					
City, State, Zip Code							y, State, Zip Code ayne, New Jersey 07470							
Project Manager for Monitoring Firm		Telepho	one No.		Teleph (973)		No. 8-5040		License 00874					
Start Date (10) 1/21/2019	2/21/201	19	Completion Date (11) Name of OSHA Monitor Sky Contracting, LLC											
Occupancy Status During Abatement (Ch Facility Closed/Vacated During Entire Abatement Performed Outside of No	e Period of Ah	atem	Street Address 1385 Valley Road, Suite & City, State, Zip Code					Suite K	(
Other - Describe:	That i dolling i	10010	Wayne, New Jersey 0747						v 0747	0				
Scope of Work (Check All That Apply)									,					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	processes.	nova moliti				×	M G	ull Containm lini-Enclosure lovebag Pro- lon-Exempte	e cedure		ive Pressure			
Location of	No	ocatio	У	Des	escription of						Aba	itemer Type	it	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	-	tenan dial S (12)	rice/ staff?		tos Cont thermal surfac	aining M	Material (ACM) Ar s insulation, (S AT, or SF			nount secify or LF)	Kemoval	Repair	Encapsulate	Enclosure
1st Floor Living Room		No X	N/A	Off	White J	Joint Co	omp	ound	512	2 SF	x	-	e	
Name of Registered Waste Hauler	T N.	JDEP W	aste	Cubic `	Yards		Name of I	Pogistore	d Lond	IEII				
Service Transport Group, Inc.		Ha	NJDEP Waste Hauler ID No. 20990 Cubic Yards of Waste 10 Name of Registered Minerva Enterp											
City, State New Castle, Delaware			Dispos TBD	al Date		City, State		Ohio						
Completed by Predrag Sarcev	President Signature Date 1/7/2019													

Jh 200	1	NO	(Pu	rsuant to	of New J F ASBES NJAG-8:6	TOS AE 0 and 1	12:120)				2	99	2	W//	en en		
Date of Notification (1) 1/7/2019			1	Name of B US Arm	Building Ow y Corps	ner/Ope of Eng	erator (gineer	(2) 's / NY I	District /	NJ C	Mil Works		e_	\mathbb{V}			
Agencies Notified	Type Notification		- 5	Street Add							1			019	400		
× EPA × DEP × DOL	Initial Amended Amendment #		(City, State	e, Zip Code ex, NJ 0		- 14.25-07			1	bod JA	IV I		.013			
ĭ DOH	Emergency (in justification)		1	Name of C			Contr	acting (Officer		phon e3\ Emil 2) 667-727		CC:	d .			
DCA	Cancellation				TY INFOR					•							
Name of Facility Where A Residentail Propert		Place (3)						Scl.	Facility (4) nool (K-12 bchapter 8) B (Othe	r than K-12)						
Street Address								Oth etc	ner (i.e. pr .)	ivate &	commercial		ngs, h		6		
City (5) Middlesex								1497		1 60 (Prior if being demolished)							
County (6) Middlesex				County Co	ode (7) SE ONLY)		_	Reside	ential								
Name of Monitoring Firm TBD	n Hired by Building O	wner (8)		ASCM	No.				ment Cont cting, LL		(9)						
Street Address								Address Valley	Road, S	Suite	K						
City, State, Zip Code	.:						City, S Way	State, Zip ne, Nev	Code v Jersey	07ba	asment470)					
Project Manager for Mo	Project Manager for Monitoring Firm							hone No.) 928-5	040		License No 00874						
Start Date (10) 1/21/2019		Scheduled		npletion D	ate (11)			of OSHA	Monitor								
Occupancy Status Durin	ng Abatement (Check		10000					Address	Road,	Suite	K						
Facility Closed/Vac Abatement Perforr Other – Describe:	cated During Entire F ned Outside of Norm	Period of Al nal Facility I	baten Hours	nent s		_	City, S	State, Zip									
Scope of Work (Check of ≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf	All That Apply)		enova				D	Mini- Glov	Enclosure	e cedure	n Negative P			e			
			Loca	200										ement pe	9		
Location Asbestos-Containin TO BE A In Fac (13	ng Material (ACM) BATED cility	Used Mai	ntena	ely by ance/ Staff?	Asbeste (i.e.	os Cont thermal surfa	systen cing, V	Material (ns insulat	(ACM) ion,	(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure		
		Yes	No	N/A	P	lack M	lotor	Droofin	g .	11	040 SF	x			-		
Basement Close	t Side of Home		X		В	iack V	valer	Proofing	Э	- 13	J-10 OI						
							V		Nome of	Degis	tered Landfil						
Name of Registered W Service Transport				NJDEP V Hauler ID 20990		of Wa	: Yards iste			0.50	erprises, l						
City, State New Castle, Delay	vare					Dispo	sal Da	te	City, Sta Wayne		g, Ohio						
Completed by		Title				1	Signatu	ire	_		D	ate	318231				

1/7/2019

Predrag Sarcev

Completed by

Title

Vice President

216,230-	S	tate of Ne		cation of Asbestos A	batemen) <u>[</u>	CEI	VEIT	
moon			(Pursuant	to N.J.A.C	28:60 7 and 12:120-7)	-		JAN 17 2	2019
Date of Notification (1)					Name of Building Owner/0		4	JAN 1 , L	.013
January 9, 2018					The Valley Hospita	1			
Agencies Notified		Notification			Street Address 223 North Van Dien	Avenue	ASE	BESTOR COT	
⊠ EPA			otification	4/0/40	City, State, Zip Code	Avenue		11.110.200	-
DCA			ment # 2-			7450 2724		AND THE PROPERTY OF THE PARTY O	
x DOL X DEP			cy (includi	ng	Ridgewood, NJ 0	7450-2750		Non-bas	
x DOH		justifica	ation)		Name of Contact William Stasiak		201-44	e Number	
New Address Studies (Visit				EACH ITY IN	IFORMATION		201-7-1	77-0141	
Name of Facility Where Abate	mont is Tal	ring Place (3)		PACILITY III	Type of Facility (4)				
The Valley Hospital V					School (K-12)				1
The valley Hospital v	· · · · · · · · · · · · · · · · · · ·	-			Subchapter 8 (other than	K-12)			
Street Address				~	Other (i.e. private &		uildings, hor	mes, etc.)	
599 Valley Health Pla	ıza				Sq. Feet: Unknown				years
City (5)	County (6)	County Cod		Current Use (prior if being	demolished)	: Hospita	al	
Paramus	Bergen		(State Use 0	Only)		,			
Name of Monitoring Firm Hire	d by Bldg. (Owner (8)	ASCM No.		Name of Contractor (9)				
Colden Corporatio					GREENWOOD ABAT	TEMENT CO	ONSULT	ANTS, INC.	
Street Address					Street Address 511 MAIN STREET				
28 Washington Street	et				City State, ZipCode				
Ballston Spa, NY 12				Butler, NJ 07405					
Project Manager for Monitorin Jim Miades	ng Firm	Telephone N 347.435.	A Committee of the Comm		Telephone Number 973-492-0477		License N 00840	lumber	
Scheduled Start Date (10)		Scheduled C	ompletion Da	ite (11)	Name of OSHA Monitor EMSL inc.				
December 5, 2018 Occupancy Status During A	hatamant /	March 31			Street Address				
Facility Closed/Vacat					<u>Otrect / touress</u>				
Abatement Performe					1056 Stelton Road				
Describe					City, State, Zip Code				
Other - Describe:					Piscataway, NJ 088	54			
Source of Work (Check all the	at apply)					v Eull Contain	mont with	Negative Press	euro.
				⊠ Renov			i-Enclosure	-	Jule
≥ 3 sf or ≥ 3 □≥ 160 sf or ≥				Demolition		Glovebag P		-	
□≥ 160 St 01 ≥	200			Demonition				d Non-Friable F	Procedure
Location of Asbestos-Contain	ning	Is Location I	Normally Use	d Solely	Description of Asbestos	Amoun	S	batement Type	
Material (ACM) in Facility (13	5)	70.000.000	ustodial Staff?	(12)	Containing Material (ACM) (i.e.	e. (Specif or LF)	y SF Re	emove Repair En	icap Enclose
		YES	NO NA		thermal systems insulation, surfacing, VAT, or other misce				
Warehouse		X	T		TSI	400	LF 🗵		
Watchouse					VAT & Mastic	2,990	Section 1997		
		1			Concrete Expansion Joint	450 130			
					Glue Daubs Mechanical Duct Tar	6 5	J		1 1
Exterior Canopy					VAT	77950	sf 🗵		
					Roofing	200	sf 🗵	11	
									1511
Name of Reg. Waste Hauler See Hauler Below # 1 &	2	te Hauler ID a	<u>#</u>	Cubic Yards of Waste:	180		Registered Land wfill Landfill/G		
Hauler #1) Greenwood		Butler N I		Disposal Da	ite	City, State			
NJ DEP # 12	Datio1, 140	100	March 31	, 2019	Route 2, B	ARCHIONNIN -			
Hauler #2) Newark Car	Bridgeport, WVA 304-842-2784								
Completed by (Print or Type)		Title	01207,110	221 // 1/50	Signature		Date	10010122	-
Marin Graure		SENIOR P	ROJECT		Marin Graune	,		ry 9, 2018	
		MANAGE			erecurer yoursers			- Company of the Comp	

Date of Notification (369	ı	NOTIFIC (Pu	ATIO rsuan Nar	tate of Ne N OF ASB t to NUAC	ESTOS 8:60 an	ABATEI d12:120	0)			EG	E			
01/11/2019					na Rosen				Che	ck#	1369 _{JAN}	1 7	20	19	
Agencies Notified	Type Notification			Stre	eet Addres	S	Ī								İ
□ EPA ☑ DEP ☑ DOL ☑ DOH □ DCA	☐ Initial ☐ Amended ☐ Amendment #_☐ Emergency (incl ☐ Cancellation	_ uding just	ification)	Eng	y, State, Zip glewood, me of Cont na Rosenl	New Je	ersey 0	7631		Tele	ASBECT C				A
L DCA					ILITY INFO		ON			1					
Name of Facility Who	ere Abatement is Takin	g Place (3)	1 70	ILIT IN	JIMIATI	ON	Туре	of Facility (4	.)					
Street Address								□ Su	hool (K-12) bchapter 8 (her (i.e. priv		than K-12) commercial t	oldgs	, hom	es, et	tc.)
City (5) Englewood, New J	Jersey 07631								e Feet 100	# of	Floors 2	В	ldg. A 55		
County (6) Bergen					inty Code (Curre		r if beir	ng demolishe	ed)			
	Firm Hired by Building vices LLC	Owner (8)		ASCI	A STATE OF THE STA	/		of Abat Corpo	ement Cont						
Street Address 134 Bennington Pa	arkway							Addres IcBride							
City, State, Zip Code Franklin Park, Nev									p Code ark, New J	lersey					h in the
Project Manager for Krzysztof Lis	Monitoring Firm			phone No -652-1119			one No 25-840			License No 01104					
Start Date (10) 01/21/2019		Schedule	ed Comp 01/23/		Date (11)				A Monitor nental Lab	orator	ies, LLC				
Occupancy Status D	uring Abatement (Chec	k Only On	e)					Addres	s 22 West						
☐ Facility Closed/☐ Abatement Perf☐ Other – Describe	Vacated During Entire formed Outside of Norm e:	Period of Anal Facility	Abateme Hours	nt			City, S	tate, Zi	o Code						
Scope of Work (Chec							Official	, 110 01				_			
⊠≥3 sf or ≥3 lf □≥160 sf or ≥260 lf			novation emolition					Mini- Tent	Enclosure /Glove Bag	Proced	Negative Predure Non-Friable				
		Is	Location	1						200			Abate		t
Asbestos-Contain TO BE In F	ation of ning Material (ACM) <u>ABATED</u> acility 13)	Use Mai	lormally d Solely intenance odial Sta (12)	by e/		tos Cont thermal surfa	scription aining M systems cing, VA niscellan	laterial s insula T, or		(Sp	mount pecify or LF)	Remova	Ty Repair	Encapsulate	Enclosure
		Yes	No	N/A										ate	Ге
Basement				Х	Pipe Ins	ulation	1				180 LF	Χ			
					3										
		1													
Name of Registered	Waste Hauler			DEP W		Cubic of Was			Name of R	egiste	red Landfill				
Lilich Corporation City, State				724		4 Y			Fairless La	ındfill					
Woodland Park, Ne	ew Jersey	- marie s				01/23	8/19		Morrisville	e, PA					
Completed by Adriana Oleiarova		Title Presid	lent			S	ignature	A.	1 (1)	1	Date		019		

Ch1913	M. mary services		CATION	ate of Nev OF ASBI to NJAC	STO	ABATE				E (2 [\mathbb{V}	E	M
Date of Notification (1) 01-10-19	S.			Building (Nunez	Owner	/Operator	(2)			JA	N 1	7	2019		
Agencies Notified Type Notification EPA Initial			Street A							ASBE	2700		_		
DEP Amended Amendment #				ite, Zip Co Caldwell		07006			AND CHICAGO	and statement of the	Part Laboration	1001	in a		
Emergency (ii justification) DCA Emergency (ii justification) Cancellation	ncluding		Name of	Contact Nunez	74				Te	ephone	Num	ber			
Name of Facility Where Abatement is Taking	Place (3)	FACI	LITY INFO	ORMA	TION	Type	of Facility	(4)		W -				
Private Home	,	Í.						School (K-	071 - 146 						
Street Address							नि	Subchapte Other (i.e. tc.)					lings,	home	es,
City (5) West Caldwell							Square	e Feet	# 0	f Floors	5	В	ldg. A	ge	
County (6) Essex			County (Code (7) USE ONLY)	-		Currer	nt Use (Pr	ior if be	ing den	nolish	ed)			
Name of Monitoring Firm Hired by Building O N/A	wner (8)		ASCN	1 No.	(-8), (18) c			ement Co racting l		(9)					
Street Address							Addres 7th St.								
City, State, Zip Code		-					tate, Zip n City	D Code NJ 070	87					77	
Project Manager for Monitoring Firm			Telephor	ne No.		1. 100000000000000000000000000000000000	none No 216-96		-110000	Licen 0120	ise No 06).			
	Schedule 01-25-		npletion (Date (11)				A Monitor racting l							
Occupancy Status During Abatement (Check			20.1107.0 x 04				Addres								
Facility Closed/Vacated During Entire Poly Abatement Performed Outside of Norma Other – Describe: 7:00 am - 5:00 pm	eriod of A	Abatem Hours	nent			City, S	tate, Zi		87						
Scope of Work (Check All That Apply)							,								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Annual Contract of the Contrac	Renova Demolit					Min	Containm i-Enclosur vebag Pro i-Exempte	re ocedure					e	
	10000	Locati	(1980 E.S.)					•					Abate	9	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normall d Sole intenar todial S (12)	ly by nce/		tos Co therm sur	escription ntaining N al systems facing, VA miscellar	Material s insula T, or		(:	mount Specify or LF		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A											te	(D
Basement		Х			Pip	e Insula	tion			'0 LF		X			
Basement	Х				VAT			6	50 SF		x				
Name of Registered Waste Hauler	I NI	JDEP W	lasta	Cub	ic Yards		Name of	f Pogist	arod I a	ndfill					
Delfa Contracting LLC	1000	auler ID 35240	No.	of W	/aste 10		Tullyto	wn Re			cove	ery F	acilit	ty	
City, State Union City, NJ				osal Date 1-25-19		City, Sta Tullyto		4							
Completed by												_			

	and the same of th	L	т <u>о</u> й-	FICATION Pursuar	NOF AS	BESTOS C 8:60 ai	ABATE	EMENT (0)	\cap	400	1/-	11		YE
Date of Notification (1) 01/09/2019					of Buildin	g Owner/	/Operato	r (2)		// CC	X-			
Agencies Notified	Type Notification	1			Address					NE	6			\mathbb{V}
□ 50.		•		Olicet	Address								OVA NOT SELECT	
EPA DEP	X Initial Amended			City S	tate, Zip	Codo				15.4				
× DOL	Amendmer	nt#				NJ 087	55				JAN	1	/ 20	019
× DOH	Emergency	(includin	g	11	of Contac		00							
DOH DCA	justification Cancellatio				Cate	A			Te	elephone Nu	10.0	000	01	-
	Garicellatio			5000000		FORMAT	1011				Ι,	99.0		
Name of Facility Where	Abatement is Taki	ng Place	(3)	FAC	JILITY IN	FORMAT	ION	Type of Facil	ity (4)			varmentos es l	an Door Street	4-2-1
Residential Propert	у	•	• •											
Street Address								School	K-12)	her than K-1	2)			
								X Other (i.	e. private	& commerc	ial bui	ildings	, hon	nes.
City (5)								etc.)				=:		
Cliffwood								Square Feet	10000	of Floors		Bldg.	-	
County (6)				0	0 - 1 - (7)			1,234	2			1948		
Monmouth				(STATE	Code (7) USE ONL	Y		Current Use	Prior if be	ing demolis	hed)			
TO THE REAL PROPERTY OF THE PR	Himd by D. Hair	0 "				.,								
Name of Monitoring Firm	Hirea by Building	Owner (8	3)	ASC	M No.			of Abatement						
Street Address							Dan	vic Contracti	ng LLC.					
Street Address								Address						
011 01 1 71 0							240	South 5th St	•0					
City, State, Zip Code								State, Zip Code						
							Eliza	beth, NJ, 07	206					
Project Manager for Mon	itoring Firm			Telepho	ne No.			none No.		License N	lo.			
							908-	906-4123		01355				
Start Date (10)					Date (11)	Name	of OSHA Monit	or					
01/25/2019		01/31/					Iris E	nvironmenta	al Labor	atories, Ir	ic.			
Occupancy Status During	Abatement (Chec	ck Only O	ne)					Address						
X Facility Closed/Vaca	ted During Entire	Period of	Abater	ment			2333	Route 22 V	/est					
Abatement Performe Other – Describe:	ed Outside of Norr	nal Facilit	y Hour	S			City, S	tate, Zip Code		Ser 125 12	-100-		1771	
						-	Unio	n, NJ, 07083	3					
Scope of Work (Check Al	That Apply)					31								
× ≥3 sf or ≥3 lf		×	Renova	ation				Full Contain	ment with	Nogativo F)room	uro.		
2160 sf or ≥260 lf			Demoli				×	Mini-Enclos	ure	i ivegalive i	16990	ii e		
							×	Glovebag P	rocedure					
		1		******				Non-Exemp	ted (*) an	d Non-Friab	le Pro			
Y	- T-		s Locat Norma										emen pe	Į.
Location Asbestos-Containing I		Use	ed Sole	ely by	Asha		scription			10		Τ',		
TO BE ABA	TED	2000	aintena					aterial (ACM) insulation,	100	mount Specify	70		Ē	Ш
In Facilit	у	Cus	todial ((12)			surfac	cing, VA	T, or	SF	or LF)	Remova	Repair	Encapsulate	Enclosure
(13)			(/			other m	niscellan	eous)			ova	air	sule	Sur
		Yes	No	N/A									te	Ф
Baseme	ent			X		Pipe	Insulat	tion	10	20 LF	X			
						1,00			12	-7 -1	-			-
		+												
									1					
Name of Registered Wast	e Hauler		N	JDEP W	aste	Cubic `	Yards	Name	of Registe	red Landfill	1			
Danvic Contracting LI				lauler ID	No.	of Was	337	1.55-1.55-1.5-1	ss Land					
			37	7574		2	- Maria de la companio della companio della companio de la companio de la companio della compani	1 allie	oo Land	11/111				
City, State Elizabeth, New Jerse							al Date	City, St		44				
	у					TBD		Morris	ville, PA	4				
Completed by		Title				Si	gnature	11		Dat	e			

Jeymy Donneys

Owner

Date

01/09/2019

no ch			FICATIO	State of New Je DN OF ASBEST at to NJAC 8:60	OS ABATE		т	CHECK	E C		Ü	rint
Date of Notification (1) 01-10-19			Name Jans:	of Building Owr sen Pharma	ner/Operato Ceuticals	r (2)		1:4	JAI	V 1	1 2	019
Agencies Notified Type Notificatio EPA Initial	n		1000	Address Route 202 S	South			F	SBES	700	CC:	
DEP X Amended Amendmer				tate, Zip Code an, NJ 08869	9			September Value and Service		· · · · · · · · · · · · · · · · · · ·	Proceedings of the	
□ DOH)	g		of Contact s Gonzalez				Telephone (908) 87				
Name of Facility Where Abatement is Taki	na Dlace	(2)	FAC	CILITY INFORM	IATION							
Street Address 1000 Route 202 City (5)	ng riace	(5)				×	School (K-1 Subchapter Other (i.e. p etc.) are Feet	- 50	K-12) ercial bu			ies,
Raritan						Oqu	are reet	# 01 F1001S		Bldg. 44 yı		
County (6) Somerset				Code (7) USE ONLY)		Curr	ent Use (Prid mmercial	or if being demo	olished)			
Name of Monitoring Firm Hired by Building Environmental Health Investigator Street Address	Owner (8 s, Inc.	3)	ASC	M No.			atement Con Environme	tractor (9) ental Corp.				
655 West Shore Trail					Street 200		ess d Street					
City, State, Zip Code Sparta, NJ 07871							Zip Code NJ 07072)				
Project Manager for Monitoring Firm Bill Kerbel			Telepho (973)	one No. 651-1040	Teleph 201-			License 00756				
Start Date (10) 01-07-19(2)Project Postponed	08-31-	-19	npletion	Date (11)	Name Even		HA Monitor Inc.					
Cocupancy Status During Abatement (Cher Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe: Section of bldg. will	Period of	Abaten	3	abatement_	City, S	9 Jac tate, 2	ss kson Aver ip Code nd City, N			-		
Scope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If		Renova Demolit			×	Fu Mi Gle	Il Containme ni-Enclosure ovebag Proc	nt with Negativ			re	
Location of		Locati Normal	ly		Description	of					emen /pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole aintenar todial S (12)	nce/	Asbestos C (i.e. thern su		ateria insula T, or		Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
Bldg. B: 1st Floor East Wing	Yes	No	N/A x		Transite			2 50005			ate	6
Bldg. B: 1st Floor East Wing			X	Trans	site Coun		_	3,530SF	х	-		
Bldg. B: 1st Floor East Wing			X		/AT/Mast	Constant	P	195SF	х			
Bldg. B: 2nd Floor East Wing			×		1 paint or			12,820SF 10SF	X			
ame of Registered Waste Hauler ewark Carting, Inc.		H	JDEP W auler ID 1509	aste Cub	oic Yards Vaste	SIIIK	Name of R	egistered Land /.S. North La				
ity, State ewark, NJ 07105	11 W			Disp TBI	oosal Date		City, State Morrisvill	e, PA 19067	7			
ompleted by ichard Doran	Title Proje	ct Ma	nager		Signature		1615	The second secon	Date 01-10-	19		



Title Of Project: 1000 Route 202, Raritan, NJ 08869
Additional Materials / Floors
Pg. 2

Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)	Is Location Normally Used Solely by Maintenance or Custodial Staff? (12)	Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)	Amount (Specify Square Feet or Linear Feet)	Abatement Type (Specify: Removal, Repair, Encapsulation or Enclosure)
Bldg. B: 2nd Floor East Wing	N/A	Transite	3,075SF	Removal
Bldg. B: 2nd Floor East Wing	N/A	Transite Countertop	85SF	Removal
Bldg. B: 2nd Floor East Wing	N/A	VAT/Mastic	18,440SF	Removal
Bldg. B: 3rd Floor East Wing	N/A	Transite	1,075SF	Removal
Bldg. B: 3rd Floor East Wing	N/A	Transite Countertop	25SF	Removal
Bldg. B: 3rd Floor East Wing	N/A	VAT/Mastic	7,800SF	Removal

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

Date of Notification (1)	又是五国		9		None	of Duildia	- 0		-	- 07	111	1 1	.013	
	14 / -	19	_				-	vner/Operator (nvironmenta		1.	503	13	G	
Agencies Notified	Type Notifica	ation			Stree	t Address				1	Lat	tage 1	-0-	1000
⊠ EPA					136	Edison	Roa	ıd						
⊠ DOLWD	Amended	30 access			City,	State, Zip (Code						_	
☑ DOH □ DCA	Amendm		ماييطنمه	88	Lal	ke Hopat	con	g, NJ 07849						
(NJAC 5:23-8)	☐ Emergen justification	cy (ind	ciuaing	3		of Contac		5,		Telephone Nun	her	-		
(10 10 0 10 0)	☐ Cancellat				An	drew Sm	ith			973-663-16				
								DRATION		373-003-10	,,,			
Name of Facility Where A	hatement is T	Taking	Dlace	(2)	гА	CILITY	NFO!	RMATION	T (F :::: /		- 24279			
Residence	waternerit is i	aking	riace	: (3)					Type of Facility (11.				
Street Address									School (K-12) Subchapter 8		2)			
									Other (i.e., pr homes, etc.)			uilding	s,	
City (5)									Square Feet	# of Floors	В	ldg. A	ge	
Tranquility									2400 sf	2		90		
County (6)					Cour	nty Code (7)(STA	ATE USE ONLY)	Current Use (Prid	or if being demoli	shed)			
Sussex									Residence					
Name of Monitoring Firm	Hired by Build	ding O	wner	(8)	ASCM	No.	Na	me of Abateme	ent Contractor (9)					
Guardian Contracti	ng, Inc.						(Guardian Co	ntracting, Inc.					
Street Address							-	eet Address	<u> </u>					-
1889 Rte. 9, Unit 61							1	1889 Route 9	. Unit 61					
City, State, Zip Code							-	y, State, Zip Co						
Toms River, New Je	ersey 08755						100	정보	New Jersey 087	755				
Project Manager for Moni				Tel	ephone	No.		lephone No.		License No.				
Nicholas Fernicola	v-1000. - 000.000				32-349		1	32-349-9932	i	00624				
Start Date (10)	5	Schedi	uled C		etion Da		-	me of OSHA M		00024				
01 / 24 /		0			5 /		0.000000	E.M.S.L. Ana						
Occupancy Status During	Abatement (Check						eet Address	.,					
□ Facility Closed/Vacate					ement			056 Stelton						
☐ Abatement Performed	Outside of No	ormal	Facility	v Hou	ırs - Des	cribe		y, State, Zip Co						
Time of Abatement: _	AM	PN	1/	_PN	l	AM		• • • • • • • • • • • • • • • • • • • •						
Scope of Work (Check all	that apply)							MARKET TO SERVICE THE SERVICE	New Jersey 088					
≥3 sf or ≥3 lf			⊠ Re	nova	tion			☐ Mini-Enc	ainment with Nega	ative Pressure				
≥160 sf or ≥260 lf			☐ De	molit	ion				Procedure					
						1		☐ Non-Exe	mpted (*) and Non	-Friable Procedu	ire			
Location	o f			Loca							Al	oatem	ent T	уре
Location Asbestos-Containing I)			lely by	Ashe	stns	Description o Containing Ma		Amount	Re	Re	En	E
TO BE ABA	TED	<i>'</i>			ance/			ermal systems i		(Specify	Removal	Repair	cap	clos
IN Facilit (13)	:y		Cusi	(12	Staff?	100		surfacing, VAT,		SF or LF)	val	-	Encapsulate	Enclosure
(13)			Yes	No	1		Ot	her miscellane	ous)				ate	
basement						asbesto	os p	ipe insulatio	n	70 If				
							9				1	П	П	
			П	П	П						+=	+=		
Name of Registered Wast	e Hauler				NJDEP '	Maeta	Cul	bic Yards of	Name of Design					Ш
Guardian Contractin				100	Hauler II	D No.	Wa 3	ste	Name of Regist T.R.R.F.	ered Landfill				
City, State			3111		2022	-		posal Date	City, State	1				
Toms River, New Je	ersey							1/23/18		Pennsylvania				
Completed By (Print or Ty	rpe)	Title						Signature	$\perp A$	•	ate	1		
Nicholas Fernicola	en de		oject	Mar	nager			Signature	1.11		0 1	14	19	

ASB-41 JAN 13

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

Data of Matification (4)	of the service in a get decidant	*				-			1,1	MAU	1 /	2019	1
Date of Notification (1)	19	9		10	ne of Buildi ohn Gusz		wner/Operator	(2)			78-20-27	>	7
Agencies Notified Type Not	ification			Stre	et Address				-		4	41	1 100
⊠ EPA ⊠ Initial								(*)		· · · · · · · · ·			
☑ DOLWD ☐ Amend	Marie Document			City	State, Zip	Cod	9						
	dment #		_	11 1120 2500			NJ 08060						
DCA Emerg	ency (ir	ncludin	g		e of Conta		143 00000						
☐ Cance					hn Gusz				Telephone	Number	É		
Name of Facility Where Abatement i	o Tokin	- Di	- (0)	FA	CILITY	NFC	RMATION						
Residence	s raking	g Place	e (3)					Type of Facility (
Street Address								School (K-12)				
Street Address								Subchapter 8 Other (i.e., pr homes, etc.)	Other than ivate and co	K-12) mmercia	l build	lings,	
City (5)								Square Feet	# of Floors		Dista	A	
Seaside Park								1850	2	S	65 65	. Age	
County (6)				Cou	ntv Code (7)/ST	ATE USE ONLY)	(2) 2: 2: 2: 2: 2: 2: 2: 2: 2: 2: 2: 2: 2:	J. Committee	C-1			
Ocean					,,	. // 0 /	Z 00Z 0MZ1)	Current Ose (File	or it being de	molisne	3)		
Name of Monitoring Firm Hired by Bu	uilding C	Owner	(8)	ASCN	l No	Ns	ame of Abatam	ent Contractor (9)					
N/A			\- /	1.00.									
Street Address						_	reet Address	ntracting, Inc.					
								11-11-04					
City, State, Zip Code			-			-	1889 Route 9	Section and Control of the Control o					
1 - 20 - 20 m m m m m m m m m m m m m m m m m m							ty, State, Zip Co						
Project Manager for Monitoring Firm			Te	lephone	No			New Jersey 087					
J J J J J J J J J J J J J J J J J J J			10	iepriorie	INO.		lephone No.		License N	0.			
Start Date (10)	School	ulad C	omn	letion Da	t= (4.4)	-	732-349-9932		00624				
01 /25 /19				28 /			me of OSHA M	\$3.44.55 5 .6	ef				
					19	l t	E.M.S.L. Anal	lytical					
Occupancy Status During Abatement Facility Closed/Vacated During En	(Check	only c	one)	200		Str	eet Address			72			
Abatement Performed Outside of	Normal	Facility	Abat	ement	a sila a	1	1056 Stelton						
Time of Abatement:AM	PN	1 aciiity 1/	PΝ	иго - Des Л-	AM	153	y, State, Zip Co						
Scope of Work (Check all that apply)						F	Piscataway, N	New Jersey 088	54				
≥3 sf or ≥3 if		☐ Rei	nova	tion			☐ Full Cont	ainment with Nega	ative Pressur	e			
≥160 sf or ≥260 lf		□ Der □ Der					☐ Mini-Encl						
							Non-Exer ■ Non-	npted (*) and Non-	-Friable Proc	cedure			
			100	ation							Abate	ment 7	Tyne
Location of Asbestos-Containing Material (AC	M)		lorm d So	ally lely by			Description of	f		0	7 T S		T
TO BE ABATED		Mai	nten	ance/	(i.e.	Stos the	Containing Matermal systems in	terial (ACM)	Amount		Removal	nce	Enclosure
IN Facility		Cust	odial (12	Staff?		S	surfacing, VAT,	or	(Specify SF or LF)) ;	3 =	ıpsu	usc
(13)	Yes	No			oti	her miscellaned	ous)	,			Encapsulate	e	
exterior			\boxtimes		asbesto	s si	ding		1850	D	1 1		
							N 30 € 2						
									id.	-	1 6	1 0	
		П	П	П							1 -	11	닏
Name of Registered Waste Hauler				NJDEP V	Vaete T	Cul	oic Yards of	Name (5					
Guardian Contracting, Inc.				Hauler ID		Was		Name of Registe	red Landfill				
City, State				20223		3		T.R.R.F.					
Toms River, New Jersey							oosal Date	City, State					
	1_					0.	1/28/19	Tullytown, P	ennsylvan	ia			
Completed By (Print or Type)	Title	4					Signature	7	1	Date	1	7	
Nicholas Fernicola	Pro	oject l	Man	ager					1	d	114	1,0	
SB-41							- 1	1 4	1	611	6 1	11.	

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

* Do not use this form for asbestos licensure exempted activities.

CUGALO PAI	D: N			N OF ASB			ENT	CK 4	JAN 29	27	201	9	
Date of Notification (1)		1		Building O				1		e no Salaman			
1/14/19					N SH	w	OF N	ORTH	850	.6	3	N)	v)
Agencies Notified Type Notification	n n	5	Street Ac		1/1	100	N. 721.1	1	· · · · · · · ·				200
EPA Initial			Titu Sta	te, Zip Cod	REN	NEL	DY BLI	177					
DEP DEP Amended Amendmen	nt #	_ `				ier?	. DJ.	0704	7				
DOH Emergency justification	(including	1	Name of	Contact	30.0			Telephone	Number				
□ DCA □ Cancellatio		1	R PE	TER H	AMME	EVZ		201-	392.	- 2	05	21	
	DI (A)		FACI	LITY INFO	ORMATI	ON	Type of Facility (4)					
Name of Facility Where Abatement is Taking		1 2	-0	7=1									
TOWNSHIP OF Street Address			0014	3010			 □ School (K-1 □ Subchapter 	8 (Other than K	(-12)				
City(5) NORTH BEK				55 ¢			Other (i.e. p	rivate & comm	ercial buil	dings	, hon	nes, et	tc.)
City (5)				(S)	·		Square Feet	# of Floors	5	Bld	g. Ag	ge	
NORTH BER	CEN	3	7	1			3000	. 2		2	30	YR'	5
County (6)		1		Code (7).			Current Use (Prio						
HUDSON			100	USE ONLY)				SIDEN	6				
Name of Monitoring Firm Hired by Building	Owner (8)		ASCN	A No.		Name of	f Abatement Conti	actor (9)					
Street Address						Best Street A	Removal	Inc.			-		
Suest Address	9						South Ri	war St	reet				
City, State, Zip Code					-		ite, Zip Code	VET DE	1666				·
	-					Hack	ensack,	NJ 076	01				
Project Manager for Monitoring Firm		1	Telephor	ne No.		Telephor			nse No.				
						201-	329-7444	. 0	0388				
Start Date (10)	Schedule	1 -	1			Name of	OSHA Monitor						
0ccupancy Status During Abatement (Check	<u> </u>	1/3	31/1	9		Omeg:	a Enviro	nmenta	1		-	-	-
							Huyler S	troot					
☐ Facility Closed/Vacated During Entire I ☐ Abatement Performed Outside of Norm	al Facility Ho	urs					ite, Zip Code	rreer				-	
Other - Describe: 8:30 LH TC	5:00	М				200	h Hacken	sack l	N.I 07	60	16		
Scope of Work (Check All That Apply)	T-1		6										
□ ≥3 sf or ≥3 lf		enovati					Full Containme		ve Pressur	е			
≥160 sf or ≥260 lf		Demolitic	on				Glovebag Proc	edure					
						Ø	Non-Exempted	(*) and Non-F	riable Pro				
	1277	Locatio			60			150		F	Abate Ty	ment pe	
Location of		Normally ad Solely		l		cription o		A	.	T	Ť		
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	aintenan	ce/				terial (ACM) tion, surfacing,	Amount (Specify		2	R	Enc	En
In Facility (13)	Cus	todial St (12)	an?	1		AT, or	one)	SF or LF)	Pamoual	Repair	Encapsulate	Enclosure
(15)	77	N-	27/4	1	ouice in	nisconano	ous)		1	-	7	ate	re
	Yes P	No	N/A	-		0		01-	- 001	+	-		-
OUTSIDE SIDING MATERIA	in		×	TRANS	CLE E	PATE	Rise	245	02/	-		_	
Name of Registered Waste Hauler		100	DEP W		Cubic Y		Name of	Registered Land	dfill		-71-272		
Best Removal Inc			auler ID 171(and the second second	e OCY	S Mina	rva Ent	ernr	io	00	т	.L.C
City, State			1/11	19	Disposa		City, Stat	e e	CT IV	13	C.3	,	111/1
Hackensack, NJ 07601						3.)19	Wayn	esburg.	OH	44	68	88	
Completed by	Title				Si	gnature	\wedge	0,	Date	/	11	.0	
J. Maiorano	Est	ima	tor		L	X	Conora		1	/ /	4/	19	

2000 11:52PM NJ Asbestos Control .09.2019 09:04 AM A. Ma.	609.633.0664 Contracting	page 1	E CPAGE!
CKICIS PAI	NOTIFICATION OF ASSISTED AN (Pursuint to MJAQ \$150 and :	1	DOL JALO DAY
Date of Notherland (1) 1 /9/19 Agentoise Notherland Type Notherland	Name of Building Owner/Op		コイン
GPA DEP DOL Amended Amendment 6			AIVER APPROVE
DOM Sample of Control (not be provided to control of the control o	Name of Contact JOE ALEXAM	Tel Tel	Spring Number
Number of Facility Where Abstracted in Taking Maca Corn M-EVBC (M C Buildy Bireat Address 575 N. MINICHAN	26	Type of Facility (4)	or Stem K-73) Experimental buildings, herces,
SAPOLE BROOK			7 80
COUNTY (B) (C) (C) (C) (C) (C) (C) (C)	County Code (7) (STATE (AS CALLY) (6) (ASCM No.	Current Use (Prior Was	Z JOHA CE
Grade Address		A. Mad Contracting Inc.	1
City, Mate, 2p Code		185 Vreeland Ave. City, Shife, Zip Code Midland Park, N.J.	
Project Manager for Maratering Para	Telephone No.	Telephone Ho. 201-262-5841	Ucares No. 00158
1 9/19 Cooupendy Status During Abstantiant (Chaot City)	7/14/19 ·	Name of OSHA Mental Omega Environmentel S Sveet Address	ervices inc.
Facility Greed/Vacated During Entire Period Absternett Performed Outside of Normel Feo Other - Describe:	fity Hours	280 Huyler Street City, Bisis, Ep Code Hackensack, N.J. 07608	
boops of Week (Check All That Apply) to of or the if at 80 of ar 1800 if	Ranoveton Denoveton	Euil Containment with	
Asbessos-Contiling Meterial (ACM)	la Location Normally lead Bole by Maintenance Abbeston Contai	riplien of	Absternant Type
In Facility (18)	(12) Surface	ig, VAT, or discharge (in the control of the contro	with
BOILEM ROOM	1 1 1		OUF X
			747 8
Name of Registred Waris Hauter Newerk Gerting, Inc.	Hauter to No. 67 Waste		Sanitary Landill

R. McDonald

Newark Certing, Inc. City, 866 Newsrk, N.J. 07105

President

1/7/19 en Pen Argyl, PA 08072

page 1

8 & G proj. #:	2019-1	5]2						estos :80-7	Abatement	,		E.C.				
Date of Notification	1 (1)		[] Na	ne of	Buildi	na Owne	riOperator (2)									
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Agencies Natified	Type Notif	Reation			dress			and Market and A			1	111	-24		-	-
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M DOH	☐ Cen	cellation	1.1	ne of	Conta	લ					Telepho	ne Number				
☐ DCA	1 22 01.		Ш.	Don	na G	allaghe	r				,	_4				-
						FACI	LITY INFORM	ATION								
Name of facility w	melede ered	ent is te	Ling plac	e (3)				A			Pacificy	(4)				
Donna Gallag	aher										_	iol (K - 12)	nouv.meso	,		
Street Address		Market Street	مستا لرسنيها								1	hapter 8 (Ot			2)	
										_ "		./Homes, et).			
City (5)	-		Count	y (81				Cour	ty Coda (7)	Squa	e Feet	# of Floors		Bide	ı. Age	
Sparta			Sus	3 3050	2.0			70700	S nes bush)			Prior if being	demo	lished	()	
Name of Monitori	- Clara Ciras	d by Hirt			- Hillstorius	-	ASCM No.		Name of Abatamen		ential	-	T Change			-
Light of Mostons	Ma Littis Umar	a th the	g. Gwnei	(0)			ASCIM NO.		B & G Restors		1					
Street Address		photographic and the second		-		احسا			Street Address	atton, inc	ē,			and the same of		-
WH 221710919									105 Ryerson	Road			100			
Cay, State, Zip Co	da								City, State, Zip Cod							MINCORY
									Lincoln Park		135			_	FEMALE	
Project Manager h	DL WOURDHUS	i ir irma			Pho	ne Numb	ig r		Telephons Number (973)696-68			Licensa	aumo 378	91		
Scheduled Start D	Cate /10\	-	ISchad	Com	oletica	Date (1	<u> </u>	Administra	Name of OSHA Mo	305000000000000000000000000000000000000	-					
01/15/2019			01/1	HARRING			5#		B & G Restor	etion, In	č. ,	No.	Constant	HARRIST STR	gonatika	
Occupancy Status		tement (105 Ryerson	Road						
Facility clos	ed/vacated d	luting or	itira pario	d of	neted	nant.			City, State, Zip Cod		Armster	si e desirate de la companya de la c			- 10	-
Absternent Descrips:	ල ර්මාන්ත්වර්ම ල	utside of	normal f	acility	hours	-										
Other-Desc	urbe:								Lincoln Park,	MJ 0703	55				- 4	
Scope of Work (Taxas and the same of the same										_				
Demoition			enovetio						uil Contsinment w/r	regative p	restrict	Glovat				
[] >3 at or >3		-	60 sf of s location	-	373	cad cale	nel .	<u>""</u>	Ain I-anglosura			☐ Non-	I BIGE	LD DBC	E	
Location of asbestos-c		l b	y mainte					ition of s	sbeatos-containing		Amoun	,	e m	Ð	n	E
material to abated in fi	pe	1:	rteff(12)					(ACM)			(Specif	y SF or	0	p a	0	6
anacot il il			Yes		ło	N/A					. ,		8	1	P .	
Basement						×	VATAN	lestic		THE SALE	520.80	ń.	K			
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Registered 9Vásta	s Hawer		פנאן	EPH 1055	aular I	D#		of a a municipal	Name of Register	Cantral	SOUGH					
B& G Restor	ration, Inc.		OUN)	EP H 1956	3	Disposal	Date 4	ol agrante	Grand (Central I	andfill					melodolita
B& G Restor	ration, Inc.		Title	EP H 1956	3	Disposal	4	ol Asiana	Grand (Central I yl, PA	andfill	[Date				

State of NJ Notification of Asbestos Abatement

B & G proj. #: 2019-15

(Pursuant to NJAC 8:60-7 and 12:120-7)

2 a 0 proj. #.				(, aroda	***Eme		y***		Check	# 9108		17 17	rimen anno Fi	
Date of Notification (1)	11	Name of	Building Own	ner/Operator (2	-			· Flagre		2 2		1	
$ \frac{0}{1} / \frac{1}{14} $	/119			Gallaghe		/								
Agencies Notified EPA	Type Notificat	ion	Street Ad							JAN	17	-20	19-	- 1
☐ EPA	X Initial								1					1.00
X DOL	Amenda	ment		e, Zip Code a,NJ 0787	1				r.	in and its	5 :	MT.	,	
⋉ DOH		1	Name of C			-			Telephon	a Numba				
☐ DCA	Cancell	ation	Donn	a Gallagh	er				relephon	e Mullibe				
					ILITY INFORM	IATIO	N					=	_	_
Name of facility whe	re abatement i	s taking p	lace (3)					Tyr	pe of Facility (4)				
Donna Gallagh	er								Schoo	l (K - 12)				
Street Address										apter 8 (C Private/C			-12)	
									Bldgs./	Homes, e	tc.			
City (5)		Co	unty (6)			Co	unty Code (7)	50	quare Feet	# of Floor	rs	BI	dg. A	ge
Sparta		S	ussex			(St	ate use only)		urrent Use (Pr	rior if bein	g den	olish	ed)	
Name of Monitoring	Firm Hired by	Bldg. Ow	ner (8)		ASCM No.	<u></u>	Name of Abatemen		esidential					
			-5- WASTA		n/a		B & G Restora							
Street Address						=	Street Address							
City, State, Zip Code							105 Ryerson							
City, State, Zip Code							City, State, Zip Code Lincoln Park		7035					
Project Manager for N	Monitoring Firm	1	T	Phone Numb	per	_	Telephone Number			License	Numb	er		
							(973)696-68			00	378			
Scheduled Start Date	(10)			etion Date (1	1)		Name of OSHA Mo B & G Restora		Inc.					
01/15/2019		_	/17/2019	9			Street Address							
Occupancy Status Du K Facility closed/v				stement			105 Ryerson I							
Abatement perf							City, State, Zip Code	9						
Describe: Other-Describe	:						LincolnPark, N	IJ 07	035					
Scope of Work (chec	ck all that apply	/)											-	
☐ Demolition	X	Renovat	ion			X	Full Containment w/ne	egative	pressure [Glove	oag pr	ocedu	ire	
<u> </u>	K	≥160 sf o					Mini-enclosure			Non-fr	iable	огосе	dure	
Location of asbestos-conta	ining	by main	tenance/c	ly used solel ustodial		of -	asbestos-containing		Amount		R	R	E n	E
material to be abated in facility		staff(12)	1	1	material				(Specify S LF)	F or	m o	p a	c	n C
		Yes	No	N/A					Li)		v e	i	р	L.
Basement				X	VAT & Ma	stic		_	520 sqft		X			
					1						H	H	<u> </u>	#
				1 -				-			H	\vdash	片	H
														1
Registered Waste Hau B & G Restoratio		NJE	EP Haule 19563	r ID# C	ubic Yards of \ 4	Vaste	Name of Registered Grand Ce	d Land entral	fill Landfill					
City, State Lincoln Park, NJ				Disposal D	Date 17/2019		City, State Pen Argyl				-			
Completed by (Print o Gordana Luna	r Type)	Title Secreta	ary/Trea	surer	Signature		Gordana Luna			Date	1/00 4	^		
		2301010	,a				0			01/14	+/201	9		

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

CK7000 PAID		NOTIF (P	ICATIOI ursuant	N OF ASE to NJAC	8:60	OS ABATE and 12:12	MENT 0)			1.1 1.8 - 1.16		2 1		fer,	
Date of Notification (1) 01/14/19						er/Operator ntial Sen		1		JAI	VI I	7	2019		1 4 4
Agencies Notified Type Notification EPA Initial			Street A		nt Ro	I NE Buil	ding	7 Suite 70	بد ا د د	in Esp					•
DEP Amended Amendment #_ Emergency (init	oludina			ate, Zip Co a, GA, 3		5		441	-				1011 =	•	
DOH justification) Cancellation	cidaling			of Contact trust Re	sider	ntial Serv	/ices		0.000	ephone 4-554-					
			FAC	ILITY INF	ORMA	ATION									
Name of Facility Where Abatement is Taking F 311 Ellery Avenue Street Address	Place (3	3)						of Facility (4	2)						
311 Ellery Avenue								Subchapter Other (i.e. poetc.)					dings,	home	es,
City (5) Newark							Squa	re Feet	# 01	f Floors		В	ldg. A	ge	
County (6) Essex				Code (7) USE ONLY)		Curre	ent Use (Prio	r if bei	ng dem	olish	ed)			
Name of Monitoring Firm Hired by Building Ow	mer (8)		ASCN	I No.		0.0000000000000000000000000000000000000		ntement Cont D PROFE							
Street Address						Street 6 Wh		ss DOVE CC	URT	8					
City, State, Zip Code								ip Code OD, NJ 08	701						
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 732-				Licens 1200	e No	i.			
	chedule 1/29/		npletion	Date (11)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		HA Monitor D PROFES	SSIO	NALS					
Occupancy Status During Abatement (Check C	Only Or	ne)				Street				1000				ys year	
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal	iod of A	Abatem Hours	nent					DOVE CO	URT						
Other – Describe:					_	LAKI	EWO	OD, NJ 08	701						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demoliti				×	Mir Glo	II Containme ni-Enclosure ovebag Proce n-Exempted	edure						
Location of		Locati	C 10 10 10 10 10 10 10 10 10 10 10 10 10			Congription	of						Abate Typ		
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	d Solei intenar todial S (12)	nce/ Staff?		tos Co therm sur	Description ontaining M nal systems facing, VA r miscellan	laterial s insula T, or		(S	mount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
INTERIOR	No	N/A			PIPNG			1.5	50LF		x		Ф		
						111110			- 1	JULI		Χ			
Name of Registered Waste Hauler		1 61	IDEE	lants		:- V :									
NEWARK CARTING		H	JDEP W auler ID 1509		100000000000000000000000000000000000000	ic Yards /aste		Name of R	egiste	red Lan	dfill				
City, State NEWARK, NJ						osal Date 29/19		City, State BETHLE		PA					
	Title OWN	IER				Signature	90 10 10 10 10 10				Date 01/	14/1	9		

PAID

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

CK# 1275

Date of Notification (1) 01/14/19			Name of Building Owner/Operator (2) Bergen County Department of Bublic Wed										
			Bergen County Department of Public Works						1	1 1	- / I		
	Type Notification Street Ad				eet Address						3	-	
☐ DEP ☐ Initial ☐ Amended				County Plaza			1177				1	1	
		100000000000000000000000000000000000000	State, Zip (113	JAN 17	2019)	1	-11	
□ Amendment □ Emergency (i	#3			k, NJ, 07601			- i		-016		1	1	
☑ DOH justification)	ricidaling		of Contac	t			Telephone Numi	The second second second	A		1		
☑ DCA ☐ Cancelation		Scott Luna				201-336-6804							
N		Scales -	FA	CILITY INFORMA	TION								
Name of Facility Where Abatement is Taking Pla					Тур	e of Facility (4)						_	
Bergen County Justice Center Co	urtnouse					School (K-1	2)						
10 Main St.						Subchapter 8 (Other than K-12)							
								nercial buildings	, hom	ies. e	etc.)		
City (5)					Saus								
Hackensack						Square Feet # of Floors Bldg. Age 342,797 5 1957							
County (6) County Code (7)					342,797 5 1957 Current Use (Prior if being demolished)								
Bergen (STATE USE ONLY)						urthouse	enetra samantilitica fixi.						
Name of Monitoring Firm Hired by Building Owner (8) ASCM No.					Nam	se of Abatement Co	ontractor (9)					_	
Omega Environmental Services, Inc 00120					Unicorn Contracting Corp.								
Street Address						Street Address							
280 Huyler Street					32 \	32 Willow Way							
City, State, Zip Code	City, State, Zip Code												
	South Hackensack, NJ, 07606						Woodland Park, NJ 07424						
Project Manager for Monitoring Firm Telephone No.					Telephone No. License No.								
Alex Palets	_	201-481-6209			973-333-9176 01331								
Start Date (10)		Schedu	led Compl	etion Date (111	Name	e of OSHA Monitor							
5/7/18	periodical completion date (11)						Envirovision Consultants, Inc.						
Occupancy Status During Abatement (Check Only	One)					t Address	ditaits, iiic.				-		
☐ Facility Closed/Vacated During Er			nt			20-21 Wagaraw Rd., Bldg. 35-E							
	Absternant Performed Outside of Name 15 - 11:						City, State, Zip Code						
	m - 04:30am				Fair	Lawn, NJ 074	10						
Scope of Work (Check All That Apply)									Ault Reserve			_	
≥3 sf or ≥3 lf		⊠ Renovation			X	Full Containn	nent with Nega	tive Pressure					
≥160 If or ≥260 If			☐ Demolition			Mini-Enclosure							
					X								
		la la carrie			X	Non-Exempte	ed (*) and Non-	-Friable Procedu	ire				
Location of		Is Location Normally						Abatement					
Asbestos-Containing Material (ACM)	ised Solely by Asbesto				cription of sining Material (AC	Amount	-	Туре					
TO BE ABATED In Facility				thermal:	systems insulation,	(Specity			_				
(13)		(12)				ing, VAT, or iscellaneous)		SF or LF)	R		Enclosure Encapsulate Repair		
500-0 A	Yes	No	N/A		outer m	iiscelialieous)			Removal	Repair	sula	Enclosure	
Please See Attached									<u>a</u>	air	te	re	
					35377815-5-5			-	-				
										\vdash			
									+				
me of Registered Waste Hauler NJDEP Waste Hau				er ID No.	Cubic Yards of Waste			Name of Regustered Landfill					
nicorn Contracting Corp. 0035844					Fig. 2			Fairless Hills Landfill					
ty, State					Disposa	al Date	10	City, State				To the	
loodland Park, New Jersey					TBD	/		Morrisville, P	Α				
								Date					
ompleted by imo Golcev	Title	al Mana				Signature /	// //	/	Date				

Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)		Is Location Normally Used Solely by Maintenance/ Custodial Staff: (12)			Amount (Specify SF or LF)	Abatement Type			
				Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A						
Ground Floor Boiler Room				Interior Transite Windows	220 SF	x			
1st Floor Admin Bldg Main Lobby		х		TSl/Fittings	50 LF	x			
2nd Floor Admin Bldg Office Space		x		TSI/Fittings	525 LF	x			
2nd Floor Admin Men's & Women's Restrooms		x		TSI/Fittings & Debris	50 LF	х			
2nd Floor Admin Men's & Women's Restrooms		x		Wire Insulation	10 LF	x			
2nd Floor S. Annex Office Space		×		TSI/Fittings	270 LF	х		1	
2nd Floor S.Annex Men's & Women's Restrooms		x		TSI/Fittings & Debris	120 LF	x			
2nd Floor Room 213 Offices & Corridor		x		TSI/Fittings & Debris	2,500 SF	х			٦
3rd Floor N. Annex Men's & Women's Restrooms		х		TSI/Fittings	50 LF	x			
3rd Floor Admin Bldg Corridor		х		TSI/Fittings	15 LF	х	1	1	-
3rd Floor Admin Bldg Elevator Lobby		х		TSI/Fittings	15 LF	х	1	1	_
4th Floor Admin Bldg Elevator Lobby		х		TSI/Fittings	15 LF	x		1	CONTRACTOR CONTRACTOR
outh Annex - Mezzanine Floor		x		TSI/Fittings	270 LF	x	1	1	1

JAN 17 2019