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	EPA Initial Amended Amendment #	1		City, Stat	te, Zip Code	е	 357				AS	BES	TO	S C ENS	ONT	ROL
7	DOH justification)  DCA Cancellation	cluding	1	Name of						Tele	phone N	lumbe	r			
Š				FACIL	ITY INFO	RMATIC	N	-	CE 22 (4)							
してしてい	Name of Facility Where shatement is Taking I SINGLE FAMILY DWELLING ( Street Address 213 DAVIS STATION ROAD			SET F	OR DEN	ИО)		SSS	chool (K-12 ubchapter 8 other (i.e. pri	)	er than K	-12) rcial b	uild	ings,	home	es,
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9	County (6) MONMOUTH			County C	Code (7) ISE ONLY)				t Use (Prior				)			
Col	Name of Monitoring Firm Hired by Building Ov			ASCM				of Abate	ement Conti	ractor	(9)				-	
3	MONMOUTH COUNTY PARK WIL Street Address	L SUF	PLY	FIRM	1		Street	Address		E5, I	NC.			-		
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7	Project Manager for Monitoring Firm			Telephor	ne No.			none No -758-33			License 00394				**************************************	
って	Start Date (10) S JAN 13, 2017	Schedule	ed Con	mpletion [	Date (11)	2017			A Monitor INOLOGI	ES, I	NC					
4				100			10	Address				-2				
0	Other – Describe:	riod of A I Facility	Abaten Hours	nent s			City, S	State, Zip		8533						
200	Scope of Work (Check All That Apply)	-					INLV	V LOT	1 1,140 00							
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<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

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Date of Notification (1) JANUARY 3, 2017				Building C				RS			IAN	1 8	3 20	17	1
Agencies Notified  Type Notification  EPA DEP DOL  Initial Amended Amendment #_		(	City, Sta	ddress PLE ST te, Zip Coo RIDGE,	de	8857				ASBE			ONI		8
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MONMOUTH  Name of Monitoring Firm Hired by Building Ov	vner (8)		ASCN			Name		ement Cont			-1110				
MONMOUTH COUNTY PARK WIL Street Address	L SUF	PPLY	FIRM	1		1571. 1655	TECH	HNOLOG	IES, I	NC.					
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Project Manager for Monitoring Firm			Telepho	ne No.		100000000000000000000000000000000000000	758-3			Licens 0039		-			
	Schedule			Date (11)				A Monitor	ES, I	NC					
Occupancy Status During Abatement (Check	Only On	ie)				NEWSON SHOW	Address								
Facility Closed/Vi.cated During Entire Pe Abatement Performed Outside of Normal Other – Describe.	riod of A I Facility	Abatem Hours	ent			City, S	BOX state, Zip	o Code	2500						
Scope of Work (Check All That Apply)						NEV	V EGY	PT, NJ 0	3533						
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Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normali d Solel intenan odial S (12)	y by ice/		os Cont thermal surfa	scription taining M systems cing, VA niscellar	Material s insulat T, or		(S	mount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
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3RD FLOOR BACK ROOM		X		12	XIZ	FLOO	KIILE	=5	10	0 SF		Δ			
							-				_				
Name of Registered Waste Hauler		I N.	JDEP W	aste	Cubic	Yards	1	Name of R	egiste	red Lan	dfill			-	-
EPC TECHNOLOGIES, INC.	EPC TECHNOLOGIES, INC.							WASTE				IT O	F PA	١	
City, State NEW EGYPT, NJ		- secoldina ( )				sal Date 1/31/1	200	City, State MORRIS	SVILL	E, PA					
Completed by STEVE SCHENKER	Title PRE	SIDE	NT		S	Signature	15	de	س(		Dat 1/3	e 8/17			

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Date of Notification	1-13-	17		BREN	mental agents			(2) ACTORS	A contract of the contract of		JAN	18	2017	7
Agencies Notified	Type Notification			Street A	ddress	DEET								where the same
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DEP X DOL	Amended Amendment Emergency			OLD E	BRIDGE,		8857					19011	y <u>u</u>	
DOH DCA	justification)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			f Contact	۱۸ ۸			l ele	ephone Nu	ımber			
DCA	Cancellation				BRENNA LITY INFO		· ION							
	hr re Abatement is Takin	g Place (3	3)	FAC	LITTINFO	NWAT	ION	Type of Facility	(4)					
NURSERY FA				SET FO	R DEMC	))		School (K-	12)					
Street Address 4 POLHEMUS	TCWN ROAD							Subchapte Other (i.e.	er 8 (Othe			dings,	home	es,
5 City (5)				San Carlo				etc.) Square Feet	# of	Floors	TE	Bldg. A	\ge	
ALLENTOWN,	NJ 08501			+		-			2		7	70 +/	-	
7				County	Code (7)			Current Use (Pr						
MONMOUTH	,			(STATE	USE ONLY)			SINGLE FA			NG			
	Firm Hired by Building ( COUNTY PARK W			ASC!				of Abatement Co TECHNOLO						
Street Address								Address BOX 337					S111V/255	
City, State, Zip Coo	de	7					City, S	tate, Zip Code						
	Que Contraction of the Contracti						NEW	EGYPT, NJ	08533	III TO THE STANCE OF THE STANC				
Project Manager fo	r Monitoring Firm			Telepho	ne No.		1	one No. 758-3365		License 00394	No.			
Start Date (10)		Schedul	ed Co	mpletion	Date (11)			of OSHA Monito		20000				
JAN 16, 2017				Ju	ly 31, 2	410		TECHNOLO	GIES, I	NC				
Occupancy Status	During Abatement (Chec	k Only O	ne)				-	Address						
Facility Closed Abatement Pe	d/Vacated During Entire F	Period of	Abater	ment				BOX 337						
Occupancy Status  Facility Closed Abatement Pe Other – Descr	med Outside of Normite:	nal Facility	y Hour	S		_		tate, Zip Code / EGYPT, NJ	08533					
Scope of Work (Ch	eck All That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥26	0 If	-	Renova Demoli		¥		×××	Full Containn Mini-Enclosu Glovebag Pro Non-Exempte	re ocedure				e	
		T to	Locat	ion						IT		0.98	emen	t
l o	cation of	1	Vorma	lly		De	scription	of			-	Ту	rpe .	_
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1		Yes	No	N/A				3					Ф	
1ST FLOOR	1ST FLOOR UTILITY ROOM X							NT BOARD		SF	X			
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EXTERIOR	SMALL ROOF				F	ROOF	FLASI	HING	20	SF	Z			
N 15 11	178/			LIDED IA	lasts	Cubic	Yards	Name of	Registe	red Landfi	11			
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City, State NEW EGYPT, N	(1)						sal Date 1/31/17	City, Sta	ite RISVILL	E, PA				-
Completed by STEVE SCHEN	<del></del>	Title PRE	SIDE	NT		S	Signatura	05che		D	ate	1-	13-	17

Date of Notification (1) JANUARY 4, 2017				Building C				ORS		A STATE OF THE STA	JAI	estan.	8 8	2017.	To be the second of the second
Agencies Notified Type Notification  EPA Initial Amended				ddress PLE STI te, Zip Cod						ASE		TOS ICEI		VTRO	)L &
DOL Amendment # Emergency (ii  DOH justification)  DCA Cancellation			Name of	RIDGE, Contact BRENNA		357			Tele	phone	Num	ber			
Name of Facility Where Abatement is Taking NURSERY FARM OFFICE (V. Street Address 4 POLHEMUSTOWN ROAD		г, S		R DEMO				of Facility (4 School (K-12 Subchapter ( Other (i.e. pretc.)	2) 8 (Othe			l build			es,
City (5) ALLENTOWN, NJ 08501								e Feet	2	Floors		7	ldg. A 0 +/-		
County (6) MONMOUTH				JSE ONLY)		_	SIN	nt Use (Prio GLE FAM	ILY D	WEL					
Name of Monitoring Firm Hired by Building C MONMOUTH COUNTY PARK WI		PLY	ASCM			EPC	TEC	HNOLOG							
Street Address	T. C.					0.0000000000000000000000000000000000000	вох	337			1997				
City, State, Zip Code						NEW	/ EGY	p Code 'PT, NJ 0	8533	11	NI-				
Project Manager for 'amitoring Firm			Telephor				758-3	365		Licen: 0039					
JAN 16, 2017	Scheduled JAN 31,	201		Date (11)		EPC	TECI	IA Monitor HNOLOG	IES, I	NC					
Occupancy Status Durig Abatement (Check Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe:	eriod of Al	atem				City, St	BOX tate, Zi		8533				data mana		
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	nova moliti				×	Full Min Glo	Containme i-Enclosure vebag Proce	nt with					e	
	1 12 74 75	ocati	2000			Comment			()				Abate	ement pe	
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	rmall Solel tenar dial S (12)	ly by		Desc os Contai hermal sy surfacir other mis	ystems ng, VAT	laterial insula T, or		(S	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure	
1ST FLOOR UTILITY ROOM	Yes	140	107	TRAN	SITE CI	EMEN	NT BO	DARD	4	SF		X			
BASFMENT			HE	AT SH	IELD	PAPE	ER	2	SF		Х				
EXTERIOR SMALL ROOF				F	ROOF F	FLASI	HING		20	SF		Z			
Name of Registered Waste Hauler EPC TECHNOLOGIES, INC.		Н	JDEP W auler ID 7000	A. 1995, Street 1.	Cubic Ya of Waste	e 2		Name of R WASTE	MAN			IT O	F PA	4	
City, State NEW EGYPT, NJ Completed by STEVE SCHENKER	IDEI	NT		BY 01/		) )	MORRIS		E, PA	Date	e 8/17				

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

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3		conference	70	$\infty$
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Date of Notification (1)	1-13-1	7		Name o	f Building Owner South f		Builde	es LL	C	٠		
Agencies Notified	Type Notification	7		Street A	ddress 92	9 R	Soute	BESTOS CON	ITROL	. &		0.00
□ EPA . □ DEP  DOL	Initial Amended Amendment #	1.42		City, Sta	ate, Zip Code	arita	1. Exp. 2. Ever		880		44.9	
	☐ Emergency (in	cluding	-	Name o	f Contact	NN IN	1 1	Telephone No	-			
DOH DCA	justification)  □ Cancellation			Ta	son Ven	bal		, ciopitotio itt				
D DOA	B Caricelladon				LITY INFORMA							
Name of Facility Where	Abatement is Taking	Place (3	3)				pe of Facility	(4)				
Single Fa	mily D	well	ins		Vacant)			8 (Other than K-				
157	Merrine		Soa	d			etc.)	# of Floors				es, 
City (5) South	Brunswic	Ł,	Λ	15	880	52	quare reet	j # Of Pidots		ildg. A	ige	
County (6) Middl	esep				Code (7) USE ONLY)		rent Use (Pri	or if being demoli	shed)	Vis	5	
Name of Monitoring Firm	Hired by Building O	wner (8)	<u> </u>	ASCN	No.	Name of A	Abatement Con	htractor (9)	aio.	<u> </u>	In	. 8
Street Address	204 25	73	-			Street Add	dress	333	3.0		मुक्ति थ ।	8 600
City, State, Zip Code	JUX JE	117		10	<b>E33</b>	City State	e, Zip Code	117	- ^	06		2
Project Manager for Mov	it ri g Firm	NO	) !	Telepho	ne No.	Telephone	S E SY	License	No.	0	10	
Steve S	chen Ken	m			758-3365		SHA Monitor	5 0	0	1	4	
Start Date (10) 1-23-17		-		- 1	Date (11)			hnologies	s I	nc		
Occupancy Status During					18	Street Add	tress Box	337				
Facility Closed/Vaca						City, State	, Zip Code	<u> </u>				
☐ Other – Describe: _						New	Egypt	LU	083	53	3	
Scope of Work (Check A	II That Apply)						ζ.					
☐ ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		A	lenovat emoliti				Mini-Enclosure Glovebag Pro	cedure				
		-					Non-Exempte	d (*) and Non-Fria	lole Pro	Sales of	ement	
		1	Location							-	ире Ире	
Location Asbestos-Containing TO BE ABA In Facil (13)	Material (ACM) ATED ity	Use Mai	Normali d Solel intenar todial S (12)	y by nce/ staff?	Asbestos Co (i.e. therma surf	escription of ntaining Mate al systems ins acing, VAT, o miscellaneou	sulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
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Dining Roc	)m		X		Floore.			100 SF		-		-
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	hnologies			170	00	1	City, Sta	te Manage	men	f o	e t	14
City, State New E	tavs	UJ			by	0sal Date 1-27-1		usuille_	PA			
Steve Sche	nKee	Title Page	sid	ent		Signature	DSch.	h	J-	13.	-17	2

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	no ch	J	(Pu	CATIO	tate of New Jerse N OF ASBESTOS t to NJAC 8:60 an	ABATE d 12:12	0)	# N:18 2017	Q	36	8	
	Date of Notification (1)	3-17	Z 1 N	01	of Building Owner		1.1	ion + Yare	10	206	Vice	06
afe	Agencies Notified Type Notification	on .	S		Address K	o A	No. of Concession, Name of Street, or other Designation, or other	OS CONTROL	oa.	A	100	
2	DEP Initial Amended Amendment	** ******* <b>**</b>	_	City, St	ate, Zip Code	247	ell 1	IT 119	2	W)		
ompletion	DOH Emergence justification	cy (including n)	N	Name o	of Contact	. 1	En 1	Tel~phone Niu	mhr			
y du				FAC	ILK FRAV		<u> </u>		_	-	Ħ	_
$\bigcirc$	Name of Facility Where Abatement is Ta	y D	uel	ling	(Vacar	(4)	Type of Facility  School (K  Subchapte  Other (i.e.		2)	ldinos	, horr	nec
nged	City (5) M 1:	land	AUZ —	2/2	alla		etc.) Square Feet	# of Floors		Bldg.		103,
2	//agno/la	N	) (		049 Code (7)		Current Use (P	rior if being demolisi		6	5+	<del>}</del> —
	Cand	20	(5	STATE	USE ONLY)		Single	family Di	200	llin	5	
7	Name of Monitoring Firm Hired by Buildin	g Owner (8	5	ASCI	N No.	Name	of Abatement Co	choolee	ie	S	I	
700	Ro. Box 3	37				Street	Address 0. Box	337	3	_	Aller A	2 1/2
2	City, State, Zip Code	·N	50	80	533	City, S	tate, Zip Code	TIA ta	0	2	5.3	13
OR	Project Manager for Monit ril g Firm	A			ne No.		none No.	License N	0.	20	U	, AS
と下	Start Date (10) Jan 17, 2017	100000000000000000000000000000000000000	ed Comp	oletion	758-3365 Date (11)	Name	of OSHA Monitor	-		71	1	
3	Occupancy Status During Abatement (Ch	eck Only O	ly 3	$5l_i$	2017	Street	EPC lec Address	hnologies	I	nc		
0	Facility Cosed/Vacated During Entire  Abatemer's Performed Outside of No	Period of	Abatemer	nt	-		tate, Zip Code	337				
7	☐ Other - Describe:						w Egypt	NJCH	28	53	3	
	Scope of Work (Check All That Apply) ≥3 sf or ≥3 \;	о. F	Renovatio	on			Full Containm	ent with Negative P	ressu	re		
Ŏ	≥160 sf or ≥260 lf	72	Demolition	n			Mini-Enclosur Glovebag Pro	e			e	
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	Exterior Walls			X	Siding S	phin	gles "	2000 SIF	X			
f												
	Name of Registered Waste Hauler		LAUD	EP W	aste Cubic Y	/ords	Nome of	Registered Landfill				
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5	Steve Schenker	HRE	siden	1 [		Des	e Dicke	oh Jo	218	12 d	201	17

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Agencies Notified	Type Notification		Street A	Address 200	H.,	AG:1	KSE	ESTOSICO	DO.	OL.	1	-	
□ EPA . □ DEP	Initial  Amended		City, St	ate, Zip Coo	le C	11011	COR	17 /2	20	0	- 3	-	
DOL DOL	Amendment #			A DO	Dei	well	/\	10 0	00	a	ノ		-
★ DOH	☐ Emergency (in justification)	cluaing	Name	of Contact	<u> </u>	j ,		Talephone	Numb	er'			
□ DCA	☐ Cancellation		1/19	iek t	-Ranc	hi							
		n: (0)	FAC	ILITY INFO	RMATION		of Facility	(4)					
Name of Facility V /here	Abatement is Taking	Place (3)	elling	$\cdot (v$	accat	)   Iype	of Facility School (K-		**				
Street Address	- 0:1	1 1	., -			一家		r 8 (Other than I private & comm		build	ings,	home	ès,
426	E Ashlan	nd Al	18			Squi	etc.) are Feet	# of Floors		BI	dg. A	ae .	
City (5) Mag Di	olia 1	VJ	08	049		Joqui	u. 0 1 00t	2			6:	5+	-
County (6)	7			Code (7) USE ONLY)		Curr	ent Use (Pr	ior if being dem	olishe	d)	1:	-274	
Name of Monitoring Firm	Hired by Building Ov	vner (8)	ASC	M No. a	1	Name of Ab	ingle atèment Co	ntractor (9)	VII	C/1	IJA C		
EPC TE	chnole	sies		NA		EP	ST J	chnol	99	es	} ,		1
Street Address	30x 33	57		•	8	Street Addre	Rox	337	U				
City, State, Zip Code	Bay a	NT	00	53	2 (	City, State,	Zip Code	IA LA	7	1	06	2	2
Project Manager for Mo	off ri o Firm	NO	Teleph	one No.		Telephone N	No.	Licens	e No.		OL,	A a	
Steve S	chenken	a		758-3			8-33		0(	6	1		
Start Date (10)	17 2017	Scheduled	Completion	7/17	1		SHA Monitor	hnologi	05	$\mathcal{T}_{i}$	20		
Occupancy Status Durin	ng Abatement (Check		40,0	nUIT_	8	Street Addre	ess	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			-		
Facility Closed/Vac	ated During Entire Pe	riod of Aba	atement				Box	337					
	ned Outside of Norma	I Facility Ho	ours			City, State, 2			- Caro	-1 -		_	
Other - Des ribe:						lvew	Egypt	N	0	8-	53	3	
Scope of Work (Check A	All That Apply)						C						
≥3 sf or ≥3 lf			ovation					ent with Negati	ve Pre	essur	е		
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Asbestos-Containing	Material (ACM)		Solely by enance/			ning Materia		Amount	1	71		g	m
TO BE AB		( E23702300000	ial Staff?	(i.e.		stems insu	lation,	(Specify SF or LF)		Rem	Re	cap	nck
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exterior 1	Walls		X	Sidi	19 D	hingle	5	2000 8	20-	X		-	
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			4.										
Name of Registered Wa	ste Hauler		NJDEP I		Cubic Ya of Waste			Registered Lar					
EPC Tec	hnologies			00	or vidote	12	Was	teManag	jen	ent	0	Et	外
City, State	3	VJ			Disposal	1 Date 20 - 1 7	City, Sta	te uisuille	P	A			
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			(Pt	CATION	ate of New Jerse OF ASBESTOS to NJAC 8:60 and	ABATE d 12:12	0)	JAN 18 201	7	18	8 3	2_
Date of Notification (1)	1-13-1	7		Name of	Building Owner/C	•	Struct	ion Ser	.U ľ	ce?	5	
Agencies Notified	Type Notification			Street A	ddress 936	2	10th ASE	ESTOS CONTI DE ESTAG	ROL	&		7
DEP DOL	Amended Amendment #			City, Sta	te, Zip Code Glou	u Ce	ster (	ity, NJ	08	303	30	
DOH CO	justification)  Cancellation	icidanig		Jo	Mie M		e	Telephone Nun	ber	_		
				FAC	LITY INFORMATI	ON						_ 1
Name of Facility Where	Abatement is Taking			(	Vacant)	)	Type of Facility   School (K-					
Street Address	11.19		)	_	V		☐ Subchapte	r 8 (Other than K-12				
74 Cleme	nton Road	W	25+,			÷a	etc.)	private & commercia				es,
City (5) Gibb:	sboro	1	15		9508		Square Feet	# of Floors		60	-	
County (6)	den				Code (7) JSE ONLY)		Single	family	ed) Dic	ell	ing	3
Name of Monitoring Firm	Hired by Building O	wner (8)	\$	ASCM	No.	Name	of Abatement Co	ntractor (9)	ies		In	16
Street Address	30x 33	37				Street	O. Box	337	-			
City, State, Zip Code	tave	NI	5	80	533	City	State, Zip Code	TU to	0	85	13	3
Project Manager for Mo	ithri gr irm		100	elephor	ne No. <b>758-</b> 3365		none No. <b>3</b> 758-334	License No	33	59	4	
Start Date (10)	5	Schedul			Date (11)		of OSHA Menitor	1		W	-	
1-25-1	7	2	- )	0-	17	3	EPC Tec	hnologies	I	nc		
Occupancy Status During		Only O	ne)			Street	Address					
	ated During Entire Pe			ent		1 · 6	O. Box	337				
Abatement Perform	ed Outside of Norma	I Facilit	y Hours	CITE .			State, Zip Code					
☐ Other - Describe:						N	ew Egypt	NJC	185	53	3	
Scope of Work (Check A	II That Apply)						0 (8					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renovat Demoliti					ent with Negative P	ressu	e		
						~	Glovebag Pro	cedure d (*) and Non-Friabl	o Pro	-odur	2	
							Non-Exemple	Jana North Habi		Abate		
23			Location							Ty		
Location			Normalled Solel	1000		scription						П
Asbestos-Containing			aintenan		Asbestos Cont		Material (ACM) s insulation,	Amount (Specify	Z		Enc	m
TO BE AB		Cus	todial S	taff?		cing, VA		SF or LF)	em	Repair	de	clo
(13)	,		(12)		other n	niscella	neous)		Remova	air	Encapsulate	Enclosure
, ,		Yes	No	Ŋ/A					_		te	(t)

Exterior Walls		X	210	ling Oningles	>	9000	76 1	4-4-4-
				J 0			_	
Name of Registered Waste Hauler  EPC Technologies		IDEP Water ID I	No.	Cubic Yards of Waste 12	A2000 000	Registered La		ot of PA
City, State  No Fayot  NJ	- x			147	Morn	isville	PA	t
Completed by Title	واء: ا	+		Signature	SAL.	1	Date /	-13-17

no ch	N		CATION	of New OF ASBE to NJAC 8	STOS	BATE			70 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -	DE	i C	[		$\mathbb{V}$	
Date of Notification (1)  Jan 13	2017			Building (				RS	1	The second second	JAt	(	18	201	7
Agencies Notified Type Notification  EPA   Minitial Amended	7		and the same	ddress .PLE ST te, Zip Co						ASI	BEST LI		SOC		ROL
X DOL Amendment :		ノ	OLD E	RIDGE, Contact		857			Tele	ephone N	· La retter mind i juneoù			v maj njart niges	
DOH justification)  Cancellation				BRENN.		·			<u></u>						
Name of Facility Where Abatement is Taking						ON	Туре о	f Facility (4	1)						
SINGLE FAMILY DWELLING  Street Address  207 MILLSTONE ROAD	VANCA	ANT,	SET F	OR DE	мО)		S O	chool (K-12 ubchapter ther (i.e. poc.)	8 (Othe			uildi	ngs,	home	es,
City (5) MILLSTONE, NJ 08535			£.				Square	Feet	# of 2	Floors			dg. A ) +/-	700	
County (6) MONMOUTH				Code (7) USE ONLY)				t Use (Prio		-					
Name of Monitoring Frm Hired by Building C		PLY	ASCN					ment Con		7 70 70					
Street Address	1					100,000,000,000	Address BOX 3								
City, State, Zip Code							State, Zip V EGYI	Code PT, NJ 0	8533						
Project Manager for Monitoring Firm		-	Telepho	ne No.			none No. 758-33			License					
Start Date (10) JAN 16, 2017				Date (11) .ly 31,	2017	1001-0010		A Monitor NOLOG	IES, I	NC					
Occupancy Status During Abatement (Check  Facility Closed/Vacated During Entire P			ent			4.	Address BOX 3								
Abatement Performed Outside of Norm Other – Describe:	al Facility	Hours			_ [		state, Zip V EGYI	Code PT, NJ 0	8533						
Scope of Work (Check All That Apply)			7)	- History Consultan		Per	77								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	TARREST AND TO SERVICE AND THE	enovat emoliti				×	Mini- Glov	Containme Enclosure ebag Proc Exempted	edure					9	
	1000000	Locatio										A	Abate Ty <sub>i</sub>	ment se	
Location of Asbestos-Conta-ang Material (ACM)  TO BE ABATED In Facility  (13)	d Solel ntenan odial S (12)	y by nce/ taff?		os Conta thermal	systems ing, VA	/laterial ( s insulati .T, or		(S	mount pecify or LF)	Nellioval		Repair	Encapsulate	Enclosure	
*	Yes	No	N/A	TDAN	OUTE		NT DO	ADD		SF	X	+	-		
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	X			BOILE						) SF	X	1			
BASEMENT BASEMENT STAIRWELL	X						TILES	-		20 SF	X	+			
Name of Registered Waste Hauler EPC TECHNOLOGIES, INC.	_ ^ _	H	JDEP W auler ID 7000	aste	Cubic of Was	Yards ste 4		Name of F	Registe	red Land		OF	PA		
City, State NEW EGYPT, NJ						al Date 1/31/17	3 F	City, State MORRI							
Completed by STEVE SCHENKER	Title PRES	SIDEN	NT		S	Ste	)50	her	1		Date	7	1-	13-	17

Date of Notification (1)					of Building C			4			H	11	13	10	201	7		
JANUARY 4, 2017				BREI	NNAN BR	OS. C	CONTR	ACT	ORS	L	4	0.34	21	4 9	CUR	a		
Agencies Notified	Type Notification				Address						i							
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DEP X DOL	Amended	ū			ate, Zip Coo		0057			E Angelo			LIGE	NS	NG			
	Amendment Emergency				BRIDGE,	NJ 08	385/											
DOH DCA	justification)		, I		of Contact BRENNA	۱۸۸				Tel	ephone	e Num	ber					
☐ DCA	Cancellation			2000	ILITY INFO		ON											
Name of Facility Where	Abatement is Takin	g Place	(3)	FAU	ILIT INFO	KIVIATI	ON	Туре	of Facility (	4)	-							
SINGLE FAMILY D	WELLING	(VANC	ANT,	SET	FOR DEM	1O)		process	School (K-1									
Street Address									Subchapter	8 (Oth								
207 MILLSTONE R	OAD								Other (i.e. p etc.)	rivate 8	& comr	nercia	l buil	dings	, hom	es,		
City (5)	NATURE OF THE PROPERTY OF THE								re Feet	# 01	Floors	5	E	Bldg. /	Age			
MILLSTONE, NJ 08	3535									2			7	70 +/	_			
County (6)					Code (7) USE ONLY)				ent Use (Prid									
MONMOUTH									GLE FAN			LING	9					
Name of Monitoring Firm MONMOUTH CO!	27 27 27 27 27 27 27 27 27 27 27 27 27 2	0.00			M No.				tement Con		17 20 20							
Street Address	JIVI I AIXIX VV	ILL 30	FFLI	FIR	IVI		Street		HNOLOG	iles,	INC.							
ou cot / tudioss							P.O.											
City, State, Zip Code	141								ip Code	#7000 A00								
		NEW EGYPT, NJ									08533							
Project Manager for Moni	itoring Firm			Telepho	one No.		Teleph	one N	0.		Licen	se No						
							609-7	758-3	3365		0039	94						
Start Date (10)					Date (11)				HA Monitor									
JAN 16, 2017	Ab =4= === 1 (Cb ==	JAN 3	100	1/					HNOLOG	iles, i	NC							
Occupancy Status During		- 8					Street A P.O.											
Facility Closed/Vaca Abatement Performe	ited During Entire F ed Outside of Norm	Period of al Facilit	Abater v Hour	nent s		-			ip Code			-						
Other - Describe: _			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-		_			/PT, NJ 0	8533								
Scope of Work (Check All	That Apply)																	
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>			Renova	ition				Ful	I Containme	nt with	Negat	ive Pr	essui	re				
× ≥160 sf or ≥260 lf		X	Demoli	tion			×	Min	i-Enclosure									
							×		vebag Proc n-Exempted		Non-F	riable	Pro	cedur	е			
		Is	Locat	ion						2224 III-19			8		ement			
Location			Normal			Des	cription o	of				-		Ту	ре			
Asbestos-Containing I TO BE ABA			ed Sole aintena				aining Ma systems				nount	- 1	-		m	m		
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(13)			(12)	,		other m	iscellane	eous)					oval	air	Encapsulate	Enclosure		
		Yes	No	N/A			10.5-10.007.55								le			
BASEME	NT	X			TRANS	SITE C	EMEN	IT BO	DARD	8	SF		X	-				
BASEME	NT	X			PAPER	RWRA	AP ON	AIR	DUCT	20	) LF		X					
BASEME	NT	X			BOILER	INSU	LATIO	N & I	BRICK	40	SF		X					
BASEMENT ST	AIRWELL	X			9">	X9" FL	.00R	TILES	S	122	20 SF		Χ					
Name of Registered Wast	e Hauler	100-10-10-10-10-10-10-10-10-10-10-10-10-	0.00	JDEP W		Cubic Y			Name of R	legister	ed Lar	dfill						
EPC TECHNOLOGIE	ES, INC.		7 (0.3)	auler ID 7000	No.	of Wast	te 4		WASTE	MAN	AGE	MEN.	ТОІ	FPA				
City, State					1	Disposa			City, State									
NEW EGYPT, NJ							/31/17		MORRIS	SVILL	E, PA	\						
Completed by		Title	CIDE	UT.		Sig	gnetaje	)5	-0	1		Date						
STEVE SCHENKER		PKE	SIDE	V 1		(	De		ner	1		1/4/	1/					

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	Date of Notification (1)  Jan 13, 6	2017			Building C			2) ACTORS	ALL COMMITTEE OF THE PERSON OF	(D)	E	G		J	4
	Agencies Notified Type Notification		S	treet Ac					1		J	AN	18	50,	17
	EPA X Initial Amended		C	City, Stat	te, Zip Coo RIDGE,	de	957					V.			
	➤ DOL Amendment # Emergency (i justification)		N	lame of	Contact BRENNA				Tel	ephone	SBE Numb	STO ar IC	S C ENS	ONT	ROL
	DCA Cancellation				LITY INFO		ON				800				
	Name of Facility Where Abatement is Taking SINGLE FAMILY DWELLING (Street Address	Place (3 VANCA	NT,		OR DEN			Type of Facility (4 School (K-1) Subchapter Other (i.e. p	2) - 8 (Othe	er than	K-12)	build	inas	nome	
	45 PINEHILL ROAD						1	etc.)							
	City (5) MILLSTONE, NJ 08535			**		÷		Square Feet	2	Floors		70	dg. A		
	County (6) MONMOUTH		(	County (	Code (7) JSE ONLY)			Current Use (Pric SINGLE FAM							
	Name of Monitoring Firm Hired by Building O MONMOUTH COUNTY PARK W		PPLY	ASCM				of Abatement Cor TECHNOLOG							
3	Street Address							Address BOX 337							
Nou	City, State, Zip Code							ate, Zip Code EGYPT, NJ (	)8533						
N	Project Manager for Monitoring Firm			Telepho	ne No.		Teleph	one No. 758-3365			ise No.	9			
13	Start Date (10)	Schedule	ed Com	pletion	Date (11)	2017	Name	of OSHA Monitor	SIES,	INC					
	JAN 16, 2017 Occupancy Status During Abatement (Chec	k Only Or	ie)	70	19 017			Address							
	Facility Closed/Vacated During Entire F	Period of A	Abatem	ent				BOX 337							
ded	Abatement Performed Outside of Norm Other – Describe:	al Facility	Hours			_	0.000	ate, Zip Code / EGYPT, NJ (	08533	1					
Holded	Scope of Work (Che All That Apply)   ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	CARROLL ST.	Renovat Demoliti				×	Full Containme Mini-Enclosure Glovebag Pro Non-Exempte	e cedure					2	
5		Is	Location	าก										ment	
	Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Use Ma	Normall of Solel intenar todial S (12)	y y by nce/	Asbes (i.e.	tos Cont thermal surfa	scription taining M systems cing, VA niscellan	aterial (ACM) insulation, T, or	(5	mount Specify F or LF		Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A				,	4.0	200 01	_	57		te .	
	BASEMENT	X			12"X12	" FLO	OR TIL	ES/MASTIC	12	220 SI		X			
	8														
	Name of Registered Vaste Hauler EPC TECHNOLOGIES, INC.		Н	JDEP V auler ID 7000		Cubic of Wa	Yards ste 4	Name of WAST				IT O	FPA	4	
	City, State NEW EGYPT, NJ					Partition States	sal Date 1/31/1			LE, P	Α				
	Completed by	Title	SIDE	NT			Signature	5. Sche			Dat	e T	1-	13-	17

Date of Notification (1)					wner/Operato		rors		JAN	1	Ω	2017	7
JANUARY 4, 2017  Agencies Notified Type Notification		5	Street Ad	ldress		NAC	1010	las bal	UMIT		Ći	LUIT	
☐ EPA ☑ Initial				PLE STR e, Zip Code				- As	BEST				OL B
DEP Amended Amendment #					NJ 08857			1	LIC	<u> </u>	<u>NSIN</u>	<u> </u>	
Emergency (ir justification)  DCA  Emergency (ir justification)  Cancellation	cluding	1 8		Contact BRENNA	N			Telephone	Number				
-			FACIL	ITY INFOR	RMATION	Tur	e of Facility (4						
	VANCA	NT,	SET F	OR DEM	O)		School (K-12		K-12)				
Street Address 45 PINEHILL ROAD		<u> </u>				×	Other (i.e. pretc.)	ivate & comm	ercial bu		ngs, h		s,
City (5) MILLSTONE, NJ 08535							uare Feet	2			ig. Aş 1 +/-	,,,	
County (6) MONMOUTH			County C	Code (7) ISE ONLY)			rent Use (Prio NGLE FAM						
Name of Monitoring Firm Hired by Building O MONMOUTH COUNTY PARK WI	wner (8) LL SUP	PLY	ASCM				batement Cont CHNOLOG						
Street Address						et Add	ress X 337						
City, State, Zip Code					City,	State	Zip Code	0.500					
Daily Manager for Manifesting Firm			Telepho	ne No		W E	GYPT, NJ 0: No.	8533 Licens	se No.				-
Project Manager for Monitoring Firm			releption	10 110.	609	9-758	-3365	0039	14				
Start Date (10) JAN 16, 2017	Schedule JAN 31			Date (11)			SHA Monitor CHNOLOG	IES, INC					
Occupancy Status Duang Abatement (Check	Only One	e)				et Add							
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe:	eriod of A al Facility	batem Hours	ent		City,	State	X 337 , Zip Code GYPT, NJ 0	8533					
Scope of Work (Check All That Apply)					INL	_ v v ட_	011 1,110 0						
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>		enova emolit					Full Containme Mini-Enclosure Glovebag Proc Non-Exempted	edure				3	
	Τ						von-Exempled	( ) and Non-i	Tiable I		Abate	ment	
Location of	N	Locati lormal	ly		Description	on of			-	T	Ту		_
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Mai Cust	d Sole ntenar odial S (12) No	nce/	Asbesto (i.e. t	os Containing hermal syste surfacing, \ other miscell	ms ins	sulation, r	Amount (Specify SF or LF)	Noncord	Removal	Repair	Encapsulate	Enclosure
DACEMENT	Yes	NO	IN/A	12"X12	' FLOOR T	ΓILES	S/MASTIC	1220 SF	X				
BASEMENT				12 //12	12001(1								
Name of Registered Waste Hauler		1000	JDEP V		Cubic Yards	\$		Registered La					
EPC TECHNOLOGIES, INC.			lauler ID 7000	No.	of Waste			MANAGE	MENT	0	F PA	١	
City, State NEW EGYPT, NJ				=	Disposal Da BY 01/31		City, State	e ISVILLE, P	A				
Completed by STEVE SCHENKER	Title PRE	SIDE	NT		Signat	ure Co.	Sche		Date 1/4/	17			

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

CK5233

7)-	C	E		$\mathbb{W}_{\perp}$	Print Form
	JAN	1	8	2017	

OF JUST		(Pursuant	to NJAC 8	8:60 and 12:1	20)	de service de la constante de		JAN	18	2017		1
Date of Notification (1) 1/12/17			of Building ( ette Step	Owner/Operate ohenson	or (2)	Total						22.00
Agencies Notified Type Notifi	cation	Street A	Address				AS	BESTO	<del>S CO</del> ENSII	NTR	OL 8	£ .
X DOH Emer	ded dment # gency (including cation)	Linde	of Contact	de			Tel	ephone Nu		10		
	Silation			RMATION				_				
Name of Facility Where Abatement is Linden  Street Address	s Taking Place (3)					of Facility (4 School (K-1; Subchapter Other (i.e. p etc.)	2) 8 (Oth rivate	& commerc	cial build	vicocomices vi		ıs,
City (5) Linden					Squa	re Feet	# 0	f Floors	В	ldg. A	.ge	
County (6) Union			Code (7) USE ONLY)		hom	ent Use (Pric 1e	or if bei	ng demolis	shed)			
Name of Monitoring Firm Hired by Bu	uilding Owner (8)	ASC	M No.	27.12/20/20/20/20		atement Con D PROFE						
Street Address		· same difference		6 V		DOVE CO	DURT					
City, State, Zip Code						ip Code OD, NJ 08	8701					
Project Manager for Monitoring Firm		Telepho	one No.	1000000	phone N 2-668-9			License 1200	No.			
Start Date (10) 1/22/17	Scheduled 0 1/24/17	Completion	Date (11)	10.50.000		HA Monitor D PROFE	SSIO	NALS				
Occupancy Status During Abatemen  Facility Closed/Vacated During Abatement Performed Outside of	Entire Period of Aba	tement ours		6 V City,	State, Z	DOVE CO						
X Other – Describe:				— LA	KEWO	OD, NJ 0	8701					
Scope of Work (Check All That Apply  ≥3 sf or ≥3 If  ≥160 sf or ≥260 If	× Ren	ovation olition			× Mi × Gi	III Containme ni-Enclosure ovebag Prod n-Exempted	e cedure				e	
		cation mally		5							ement rpe	
Location of Asbestos-Containing Material (Adams	CM) Used S Mainte Custodi (1	colely by enance/ al Staff? 2)		Descripti tos Containing thermal syste surfacing, \ other miscell	Materia ms insul /AT, or	ation,	(5	Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
INTERIOR				Pipe Insu	lation		(	65LF	x			
Name of Registered Waste Hauler NEWARK CARTING		NJDEP I		Cubic Yards of Waste	3	Name of IESI	Regist	ered Landi	fill			
City, State		04509		Disposal Da	ite	City, Stat		4 DA				
NEWARK, NJ  Completed by JOSEPH PERLSTEIN	Title OWNER	?		1/24/17 Signate	ure	DEINL	EHE		Date			71
JOOLI III LILOTLIN	OVVIVE											

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Date of Notification (1) 1/12/17			f Building O edge Man	wner/Operato agement	r (2)		L						
Agencies Notified Type Notified    EPA    Initial	cation	Street A 65 Kir	ddress ngsland A	ve			AS	BESTO LIC	S CC ENSI	NG	HUI	_ &	
DEP Amend	dment #		ate, Zip Cod n, NJ 070			011 85A							
□ Emerg     □ justific     □ DCA    □ Cance		Name o Sarah	f Contact	-0.		*	Te	lenhone N	Numbe	r			
		FAC	ILITY INFO	RMATION					-				
Name of Facility Where Abatement is	Taking Place (3)				Туре с	of Facility	(4)						
Union City Street Address					S X	ther (i.e.	er 8 (Oth	ner than K & comme		uildi	ngs, l	nome	s,
City (5)					Square	tc.) e Feet	# (	of Floors		Blo	lg. Ag	je	
Union City					80								
County (6) Hudson			Code (7) USE ONLY)		Curren		rior if be	eing demo	lished)			N	
Name of Monitoring Firm Hired by Bu	ilding Owner (8)	ASC	M No.		e of Abate A LEAD								
Street Address					t Address HITE D		COUR	Γ					
City, State, Zip Code				1000000	State, Zip		08701						
Project Manager for Monitoring Firm		Telepho	one No.	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ohone No -668-90			License 1200	e No.	CHEC:			
Start Date (10) 1/22/17	Scheduled C	Completion	Date (11)	5 P. S.	e of OSH. A LEAD			ONALS					
Occupancy Status During Abatement	(Check Only One)			Stree	et Addres:	S					Neriovic		
Facility Closed/Vacated During B Abatement Performed Outside o	Entire Period of Abat f Normal Facility Ho	tement urs			/HITE D		COUR	Γ	-				
Other – Describe:				− LAŁ	KEWOO	DD, NJ	08701						
Scope of Work (Check All That Apply	)												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		ovation olition			X Mini	i-Enclosu vebag Pr	ire ocedure						
		V.	1		Non	i-Exempt	eu () a	nd Non-F	nable i			ment	
Location of	Norr	cation nally		Description	n of				_		Тур	Эе	
Asbestos-Containing Material (AC <u>TO BE ABATED</u> In Facility (13)	Mainte Custodi (1	olely by nance/ al Staff? 2)		os Containing thermal syster surfacing, V other miscell	Material ns insula AT. or			Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure
INTERIOR				Pipe Insu	oe Insulation			65LF	х				
Name of Registered Waste Hauler		NJDEP V		Cubic Yards		Name o	of Regis	tered Lan	dfill				
NEWARK CARTING		Hauler ID 04509	) No.	of Waste 5		IESI							
City, State NEWARK, NJ				Disposal Da 1/24/17		City, St BETH	ate ILEHE	M PA		- Illinois			
Completed by JOSEPH PERLSTEIN	Title OWNER	3		Signatu	ire	Date							

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Date of Notification (1) JAN. 13, 2017					f Building ( EN SCH			(2)		ASBEST	08.0	ON 17	DOL	
Agencies Notified	Type Notification			Street A	ddress						CENS			- OL
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	Amended				ate, Zip Co									
DEP DOL	Amendment		_	SUM	MIT, NJ (	7901								
DOH DCA	Emergency   justification)   Cancellation	A. M. C.			f Contact ABRAHA	MSO	N		Te	lenhone Ni	imhar			
				FACI	LITY INFO	RMAT	ION							
Name of Facility Where STEVEN SCHNOL	Abatement is Takin L PROPERTY	g Place (3)			***************************************			Type of Facility School (K						
Street Address								Subchapt	er 8 (Oth	ner than K-		dings	home	es,
City (5) SUMMIT								Square Feet 2879 SF	# 0	of Floors		3ldg. <i>A</i> 1938		
County (6) UNION					Code (7) USE ONLY)			Current Use (F		ing demolis	shed)			
Name of Monitoring Firm AIR CONSULTING	Hired by Building SERVICES, L	Owner (8) LC		ASCN	/ No.		Name Finis	of Abatement C shing Touch A	ontracto	r (9) os Abater	nent (	Corp.	, Inc.	
Street Address 301 East Ward Stre				1			Street	Address hompson Str					***************************************	
City, State, Zip Code								state, Zip Code					-	
Hightstown, NJ 085							Wes	t Long Branc	h, NJ (					
Project Manager for Mor David Kichula	itoring Firm			Telepho 609.3	ne No. 71.2489			none No. 222.8372		License I 00040	No.			
Start Date (10) JAN. 27, 2017		Scheduled JAN. 28			Date (11)		Name N/A	of OSHA Monito	or					
Occupancy Status Durin	g Abatement (Chec	k Only One	9)				Street	Address		- X-1				
Facility Closed/Vaca Abatement Perform Other – Describe:							City, S	tate, Zip Code			-			_
Scope of Work (Check A	II That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	л тнас Арріу)	The same of the sa	enova emoliti				> >	Glovebag Pr	ure ocedure					
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			ocatio										ement pe	
Location Asbestos-Containing			ormall Solel		A al-		scription	of faterial (ACM)	.	Amount				
TO BE ABJ	ATED	Custo	ntenar odial S (12)			thermal surfa		s insulation, T, or	(	Specify F or LF)	Remova	Repair	Encapsulate	Enclosure
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LIVING R	OOM			X			TSI		-	12 LF	Х			
Name of Registered Was Finishing Touch Asb		nt Corp.,	I H	JDEP Wauler ID 2058		Cubic of Was .5 C	ste			ered Landfi ANDFIL				
City, State WEST LONG BRAN	ICH, NJ 07764					Dispos 1/20/	sal Date		ate RISVIL	LE, PA				
Completed by		Title				S	ignature	1.1/11			ate			-
JOSEPH P. MILLER		PRES	SIDE	NT			Me	WIM	1		/13/1	7		

Date of Notification (1)  1-13-17  Name of Building Owner Operator (2)  RJM Construction Services  Agencies Notified Type Notification Street Address 936 (ASBEST 49 CONTROL &	-1-1-1	
Agencies Notified Type Notification Street Address 9.36 ASBESTOS CONTROL &	2	
		-
□ EPA Initial □ City, State, Zip Code □ Amended □ City, State, Zip Code	<del></del>	
Amendment # Gloucestee City NJ ( Emergency (including   Name of Control	1803	Ox
DOH justification)  Cancellation  Name of Contact  Janie Megee  Telephone Number		
Name of Facility Where Abatement is Taking Place (3)  Type of Facility (4)		
Single family Dwelling (Vacant)   school (K-12)		
Street Address 140 Edison Road Cher (i.e. private & commercial building etc.)	gs, home	es,
/	g. Age	
County (6)  County Code (7)  Current Use (Prior if being demolished)	((.	
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9)	ling	
EPC Technologies N/A EPC Technologies	In	16
Street Address R.O. Box 337 Street Address R.O. Box 337		
New Equat NJ 08533 City State, Zip Code New Equat NJ 08	53:	3
Project Manager for Monit ril g Firm  Telephone No.	QH	
Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor	-	
1-24-17 1-27-17 EPC Technologies Inconcupancy Status During Abatement (Check Only One) Street Address		
Facility Closed/Vacated During Entire Period of Abatement		
Abatement Performed Outside of Normal Facility Hours City, State, Zip Code	33	
Abatement Performed Outside of Normal Facility Hours City, State, Zip Code	33	
Abatement Performed Outside of Normal Facility Hours  Other – Describe:  City, State, Zip Code  New Egypt NJ 085	33	
Abatement Performed Outside of Normal Facility Hours  Other – Describe:  Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Renovation Demolition  □ Renovation Demolition □ Mini-Enclosure □ Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure		
Abatement Performed Outside of Normal Facility Hours  Other - Describe:  Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Renovation Demolition  Renovation Demolition  □ Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Normally	dure	
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Abatement Performed Outside of Normal Facility Hours  Other – Describe:  Scope of Work (Check All That Apply)  ≥ 3 sf or ≥3 lf ≥ 160 sf or ≥260 lf  Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)  Performed Outside of Normal Facility Hours  City, State, Zip Code  New Egypt NJ OBS  Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Proced Abatement Performed Outside of Normal Facility Hours  City, State, Zip Code  New Egypt NJ OBS  Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Proced Abatement Performed Outside of Normal Facility Hours  I Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Proced Abatement Performed Outside of Normal Facility Hours  I Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Proced Abatement Performed Outside Facility Hours  I Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Proced Abatement Performed Outside Facility Hours  Abatement Performed Outside Facility Full Containment with Negative Pressure Mini-Enclosure Full	Type	
Abatement Performed Outside of Normal Facility Hours  Other – Describe:  Scope of Work (Check All That Apply)  ≥ 3 sf or ≥3 lf ≥ 160 sf or ≥260 lf  Location of Asbestos-Containing Material (ACM)  TO BE ABATED  In Facility (13)  Performed Outside of Normal Facility Hours  City, State, Zip Code  New Egypt NJ O85  Full Containment with Negative Pressure  Mini-Enclosure  Glovebag Procedure  Non-Exempted (*) and Non-Friable Proced  About Asbestos Containing Material (ACM)  Maintenance/ Custodial Staff? (12)  Yes No N/A  City, State, Zip Code  New Egypt NJ O85  Full Containment with Negative Pressure  Mini-Enclosure  Glovebag Procedure  Non-Exempted (*) and Non-Friable Proced  About City State, Zip Code  New Egypt NJ O85  Full Containment with Negative Pressure  Mini-Enclosure  Glovebag Procedure  Non-Exempted (*) and Non-Friable Proced  About City State, Zip Code  New Egypt NJ O85  Full Containment with Negative Pressure  Mini-Enclosure  Glovebag Procedure  Non-Exempted (*) and Non-Friable Proced  About City State, Zip Code  Mini-Enclosure  Glovebag Procedure  Non-Exempted (*) and Non-Friable Proced  About City State, Zip Code  Mini-Enclosure  Glovebag Procedure  Non-Exempted (*) and Non-Friable Proced  About City State, Zip Code  Mini-Enclosure  Glovebag Procedure  Non-Exempted (*) and Non-Friable Proced  About City State, Zip Code  Mini-Enclosure  Glovebag Procedure  Non-Exempted (*) and Non-Friable Proced  About City State, Zip Code  Non-Exempted (*) and Non-Friable Proced  About City State, Zip Code  Non-Exempted (*) and Non-Friable Proced  About City State, Zip Code  Non-Exempted (*) and Non-Friable Proced  About City State, Zip Code  Non-Exempted (*) and Non-Friable Proced  About City State, Zip Code  Non-Exempted (*) and Non-Friable Proced  About City State, Zip Code  Non-Exempted (*) and Non-Friable Proced  About City State, Zip Code  Non-Exempted (*) and Non-Friable Proced  About City State, Zip Code  Non-Exempted (*) and Non-Friable Proced  About City State, Zip Code  Non-Exempted (*) and Non-Friable Proc	Type	
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Abatement Performed Outside of Normal Facility Hours  Other - Describe:  Scope of Work (Check All That Apply)  23 sf or 23 lf 2160 sf or 2260 lf  Demolition  Renovation Demolition  Renovation Demolition  Renovation Demolition  Performed Outside of Normal Facility Hours  City, State, Zip Code New Egypt NJ 085  Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Proced Non-Exempted (*) and Non-Friable Proced Ababestos-Containing Material (ACM) Normally Used Solely by Maintenance/ Custodial Staff? (12)  Yes No N/A  Paper Tape on Seans ID LF X  Of Air Duct  Product Tobe Africance Tobe Africanc	Type	
Abatement Performed Outside of Normal Facility Hours  Other - Describe:  Scope of Work (Check All That Apply)  23 sf or 23 lf 2160 sf or 2260 lf  Renovation Demolition  Renovation Demolition  Renovation Demolition  Renovation Demolition  Renovation Demolition  Bull Containment with Negative Pressure Mini-Enclosure Renovation Mini-Enclosure Relovatore Relovatore Relovatore Relovation of Aboestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Normally Used Solely by Maintenance/ Custodial Staff? (12)  Yes No N/A  Paper Tape on Seams ID LF X  Paper Tape on Seams ID LF X  Reference  Name of Registered Waste Hauler  Name of Registered Landfill	Type  Encapsulate	Enclosure
City, State, Zip Code   New Egypt NJ 085	Type  Encapsulate	Enclosure

Ch 2105	1		FICATIO	N OF ASE	ew Jersey BESTOS AE 8:60 and 1			т			G			√Pr 017	nt Fo
Date of Notification (1) 1-10-2017					Owner/Openswick, Ll		(2)				IAN	1	8 6	UI1	i b
Agencies Notified Type Notification			Street A	Address ersey S	treet				The state of the s	ASBE			CON		L&
EPA X Initial DEP Amended			00-1005	ate, Zip C					In the same		110		<u> </u>		
X DOL Amendment X Emergency					NJ 07302										
DOH justification)  Cancellation				of Contact d Eglen					Tele	ephone	Numb				
Name of Facility Where Abatement is Takin	a Place /3	1)	FAC	ILITY INF	ORMATION	N	T	5 = - 374 /	4)						
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City (5)							×	etc.)			erciai				es,
Jersey City, NJ 07302								are Feet 000	4	Floors		1000	ldg. A	ige	
County (6) Hudson				Code (7) USE ONL	n	_	Cur	rent Use (Prid	or if bei	ng dem	olishe	d)			
Name of Monitoring Firm Hired by Building (	Owner (8)		ASC	M No.				nvironment			LLC	;			
Street Address					1 8	Street		ess nia Avenue	2						
City, State, Zip Code								Zip Code							
Desired Manager ( ) William ( )							200	ity, NJ 073	04						
Project Manager for Monitoring Firm			Telepho	ne No.	11 23	elept		No. 8855		Licens 01174					
Start Date (10) 1-11-2017	Schedule		mpletion	Date (11)				SHA Monitor above					-		$\neg$
Occupancy Status During Abatement (Chec						Street									
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	Period of A nal Facility	bate Hou	ment rs		C	City, S	tate,	Zip Code							
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		enov emol				×	M G	ull Containme lini-Enclosure lovebag Proc on-Exempted	edure						
	11000	Loca					,	J. L. KOLLIPKOG	( ) uno	11011-1	Table		Abate	ment	
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Used Mai	ntena	ely by ance/ Staff?	Asbes (i.e	Descr stos Contain thermal sy surfacing other miss	ning M stems g, VA	lateria s insu T, or	lation,	(S	nount pecify or LF)		Remova	Ty Repair	e Encapsulate	Enclosure
	Yes	No	N/A									<u>a</u>	-	late	Iге
Basement		X			Pipe in	sula	tion		22	0 LF	X	2			
Basement		X			V	AT			90	0 SF	Х				
1st floor		X			V	АТ			24	4 SF	Х				
2nd floor kitchen		Χ			Lino	leun	า		22	5 SF	X				
Name of Registered Waste Hauler Breen Environmental Services, LLC		1	NJDEP W Hauler ID 1034889	No.	Cubic Ya of Waste 30	rds		Name of F							
City, State ersey City, NJ					Disposal 1-20-20			City, State		Α					
Completed by	Title				Sign	ature		1			Date	-			
iliana Serrano	Office	Ма	nager		Hi	11(	M	Wern	de	U	1-10	-20	17		

160-162 Brunswick Street Jersey City NJ 07302

ASBESTOS CONTROL & LICENSÍNG...

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Lepation of Asterios-Contaming Material AC N TO BE ABA 1EC IN Facility

Exterior Window

Roof

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X

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As extra victorialy Material Activity
or thermal systems insulation
sufficiency victorials ment sur energies.

> Window Coulk X 20 Units Roof Material 5795 SF Χ...

Ch 2100  Date of Notification (1)	P		NO	(Pursua	ON OF A	New Jerse ASBESTOS AC 8:60 ar	ABATE 1d 12:12	20)				G E			Print F
1-10-2017				Name	of Build	ing Owner/	Operato	r (2)		1 64 6					i in a
Agencies Notified Typ	e Notification				t Address	runswick,	LLC				LASDE	STAC	001	UTR	21 &
☐ EPA 🗵	Initial					Street					MODE	LICE			<del>)          </del>
DEP	Amended			City,	State, Zip	Code									
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DOH DCA	justification) Cancellation		rig		of Conta	ect entowicz				Te	lephone	Numbe	r		-
Name of Facility Where Abate	ment is Takin	a Diago	(2)	FA	CILITY	NFORMAT	ION								
Residential	mentis rakin	g Place	(3)					Ту	pe of Facility	(4)					
Street Address									School (K	-12)					
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City (5)			3 2 22 2 2 2 2						etc.) uare Feet						1165,
Jersey City, NJ 07302									000	4+	f Floors		Bldg.		
County (6) Hudson				Count	Code (	7)		Cui	rrent Use (Pr	10000	na demo	alished)	7.0+		
Name of Monitoring Firm Hired	by Building	D	0)			ĹY)									
Street Address	by Building C	)wner (	8)	ASC	M No.		Name Gree	of Al	batement Co nvironmer	ontractor	(9) vices.	LLC			
Street Address							Street	Addı	ress				-		
City, State, Zip Code									inia Avenu	ıe					
2									Zip Code	004					
Project Manager for Monitoring	Firm			Teleph	one No.		Teleph		ity, NJ 07	304					
							201-3	one 333-	No. ∙8855		License				
Start Date (10) 1-11-2017		Schedu	uled C	pmpletion	Date (1	1)			SHA Monitor						
Occupancy Status During Abate		1-20-2							above						
							Street	Addr	ess						
Facility Closed/Vacated Du     Abatement Performed Outs     Other – Describe:	side of Norma	eriod of al Facili	Abate ty Hou	ment rs			City, St	ate,	Zip Code			-			
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Asbestos-Containing Materia <u>TO BE ABATED</u>	I (ACM)	Ma	ed Sol aintena	ance/	Asbe	stos Conta	ning Ma	teria	I (ACM)	Ап	ount				
In Facility		Cus	todial (12)	Staff?	(1.6	e. thermal s surfaci	ystems ng, VAT	insul . or	ation,		ecify or LF)	Rer	Re	Encapsulate	Enc
(13)			(12)			other mi	scellane	ous)		01 (	ו נר)	Remova	Repair	psu	Enclosure
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ame of Registered Waste Haule			100	JDEP W		Cubic Ya	-		Name of F		nits	X			
reen Environmental Servi	ces, LLC		1	lauler ID 034889	100000000000000000000000000000000000000	of Waste	000-0000		G.r.o.w.						
ersey City, NJ 07304						Disposal			City, State Morrisvil						
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ASBESTOS CONTROL & Persey CityL NEは230分

Roof

Exterior

Roof Material Transite

820 SF

1600 SF :

#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT Check#2691 (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 01 / \_ 12 / 17 Kathy Hubley Type Notification Agencies Notified Street Address **ASBESTOS CONTROL &** □ EPA M Initial LICENSING ☑ DOLWD Amended City, State, Zip Code Amendment # X DHSS Boonton, NJ 07005 □ DCA Emergency (including) (NJAC 5:23-8) justification) Name of Contact Telephone Number Cancellation Kathy Hubley **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Private house Subchapter 8 (Other than K-1 2) Street Address Other (i.e., private and commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Boonton, NJ 07005 County (6) County Code (7) (STATE USE ONLY) | Current Use (Prior if being demolished) Morris Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973-638-1777 01127 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 01 / 21 / 17 01 / 22 / 17 Envirovision Consultants,Inc Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Road, Bldg .# 35E Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: \_\_\_\_\_AM-\_\_\_PM/ Fair Lawn, NJ 07410 Scope of Work (Check all that apply) Clean up and decontamination with negative pressure Full Containment with Negative Pressure >3 sf or >3 lf 5 160 sf or 5260 lf ■ Renovation Mini-Enclosure Demolition Glovebag Procedure Tent with Negative Pressure Non-Exempted (\*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Asbestos-Containing Material (ACM) Used Solely by Removal Encapsulate Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify IN Facility Custodial Staff? surfacing, VAT, or SIF or LF) (12)(13)other miscellaneous) Yes N/A No X Basement Pipe insulation 40 LF П Name of Registered Waste Hauler NJDEP Waste Hauler ID No. | Cubic Yards of Waste | Name of Registered Landfill Gr Tech LLC 0033785 TRD T.R.R.F. Inc City, State Disposal Date City, State Wayne, NJ 07470 TBD Tullytown, PA Completed By (Print or Type) Title Signature Date N.Jevtic Sic Owner 01/12/17 ASB-41

RECEIVE	D 01	/10/:	2017	05:15	PM 201	32974	40		Lancas	BEST-	REMO	VAL	INC	-
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HR R DETI	Paccial Paca	_					Typ	pe of Facilit	y (4)	-	1			
Street Address	21.1	<u> </u>		_			H	School (I	C-12)	or their K-1				
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	encies Notified	Type Notification	1		Street A	ddress				ASBESTO			OL 8	2
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	me of Facility Where A	Abatement is Taki	ng Place (	3)				Тур	e of Facility (4	.)				
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	me of Monitoring Firm oterra Slution	Hired by Building	Owner (8)	10.	ASCN	1 No.			eatement Cont ontracting L	7.00.0 To 200 Fe 1 MANO				
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2521400	ject Manager for Mon ck Eustaquio	itoring Firm			Telepho 973-49	ne No. 94-3762	Teleph 973-		No. -6298	License 1 01266	No.			
	rt Date (10)					Date (11)			SHA Monitor					
	-21-2017		01-29-				-		ntracting L	LC				
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P	Abatement Performe Other – Describe:	ed Outside of Non	mal Facility	/ Hours	\$		City, S	tate,	Zip Code					
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	Location Asbestos-Containing <u>TO BE</u> ABA In Facili (13)	Material (ACM)	Use Ma	ed Sole intenar todial S (12)	ly by nce/	Asbestos Cont (i.e. thermal surface		fateria s insu T, or	lation,	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
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	Baseme	ent				PIPE IN	NSULA	TIO	N	100 LF	Х			
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Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Amax Contracting LLC Grows 0036184 3 су City, State Disposal Date City, State Woodland Park NJ 07424 02-05-2017 Morrisville PA Completed by Title Signature Date Tome Maslarkov Project Manager 01-11-2017

Asheatus-Containing Majerial (ACM)  TO BE ABATED In Facility (13)  Yes No N/A  Stairway (steam leak)  Name of Registered Weste Hauler  NUDEP Waste Hauler ID No  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)  SP pr LF)  The property of the pr	003/p		8	1	E G JAN			Company of the second of the s		ge 1					509,63	Control		FAX	09:11	/2033	
Clifton Board of Education   Amended Notification   Street Address   Initial   Amended City, State, Zip Codes   Clifton, NJ 07013   Clifton Amended City, State, Zip Codes   Clifton Amended City, State, Zip Codes   Clifton Amended City, NJ 07013   Clifton Amended City, State, Zip Codes   Clifton Amended City, State, Zip Code Cit	70L 8	NTI	00	08 0	4.4		of the second second			MENT	BATE	ESTOS	OF ASB	ATION	OTIFII (Pu	i	03	0	740	Ü	
Space   Initial   Amandment   City, State, Zip Code	SO	4 <del>0</del>	1		LIC	$\dagger$				(2)	perstor ation	Owner/C	Board	Name of							
Amandade   City, State, Zip Code   City, State, Zip Co	.—.Ұ	1	-	T		$\Box$			•			<del></del>						Typ	tified		Age
DOH   Cancellation   Name of Contact   All Marchigane   Telephone Number   All Marchigane   School (X-12)   Subchapter 5 (Citier than X-12)	7, 15			-	÷ (* ; ;	11-		1									Amanded Amandmen			CHEC	XXX
Name of Facility Where Abatement is Taking Place (3)   Type of Facility (4)   School (K-12)   Subchapter 6 (other than K-12)   Other (i.e., private & commercial buildings, School (K-12)   Subchapter 6 (other than K-12)   Other (i.e., private & commercial buildings, School (K-12)   Subchapter 6 (other than K-12)   Other (i.e., private & commercial buildings, School (K-12)   Supera Peac   School (K-12)   Subchapter 6 (other than K-12)   Other (i.e., private & commercial buildings, School (K-12)   Subchapter 6 (other than K-12)   Other (i.e., private & commercial buildings, School (K-12)   Subchapter 6 (other than K-12)   Other (i.e., private & commercial buildings, School (K-12)   Subchapter 6 (other than K-12)   Other (i.e., private & commercial buildings, School (K-12)   Subchapter 6 (other than K-12)   Other (i.e., private & commercial buildings, School (K-12)   Subchapter 6 (other than K-12)   Other (i.e., private & commercial buildings, School (K-12)   Subchapter 6 (other than K-12)   Other (i.e., private & commercial buildings, School (K-12)   School (K-12)   School (K-12)   School (K-12)   State (K-12)   Other (i.e., private & commercial buildings, School (K-12)   State (K-12)   Other (i.e., private & commercial buildings, School (K-12)   State (K-12)   Other (i.e., private & commercial buildings, School (K-12)   State (K-12)   Other (i.e., private & commercial buildings, School (K-12)   State (K-12)   Other (i.e., private & commercial buildings, School (K-12)   State (K-12)   Other (i.e., private & commercial buildings, School (K-12)   State (K-12)   Other (i.e., private & commercial buildings, School (K-12)   Other (	i voja di		t	прег	nhone Nu	Tolor	1	<u> </u>					Contact	lame c	F	(	uslification	X			×
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Country (5) Passaic  Name of Montioring Firm Hired by Building Owner (8) Abover Consultants, Inc  Name of Montioring Firm Hired by Building Owner (8) Abover Consultants, Inc  Name of Montioring Firm Hired by Building Owner (8) Abover Consultants, Inc  Name of Abatement Contractor (9) Lillich Corporation  Streat Address  OB McBride Avenue  City, State, Zip Code  Occeanville, NJ 08325  Foliation Manager for Montioring Firm  Coceanville, NJ 08325  Foliation Manager for Montioring Firm  Coceanville, NJ 08325  Foliation Manager for Montioring Firm  Coceanville, NJ 08325  City, State, Zip Code  Woodland Park, NJ 07424  Telephone No.  603-652-1833  973-225-8400  D1104  Name of OSHA Montior  Inf Environmental Laboratories, LLiD  Street Address  Cottage Ostar Address  Cottage Ost	hemoa.	mgs.	ujild.	12) dal bu	qommer	(Other	er 5 priv	(i.a. p	Other I	1 -4								Ave .		70 Var	12
Starts use out.y    School	10	5. A	Ble	T	Floors	# 0		et		Squa						V					
Name of Montloring Firm Hired by Building Owner (8)  ASCM No.  Lilich Corporation  Street Address  COS McBride Avenue  City, State, Zip Code  Woodland Park, NJ 07424  Project Manager for Mentloring Firm  John Smoyer  Stan Date (10)  Scheduled Completion Date (11)  Parageone of Woodland Park, NJ 07424  Project Manager for Mentloring Firm  John Smoyer  Stan Date (10)  Scheduled Completion Date (11)  Parageone of Woodland Park, NJ 07424  Project Manager for Mentloring Firm  John Smoyer  Ashesters Containing Material (Check All That Apply)  Ashesters Containing Material (ACM)  (Is)  Yes No N/A  Stainway (steam loak)  Nome of Registered Landfill			-	shad)	g:damolis	If being	nor	e (Pri					Code (7) ISE ONLY	County I							
Street Address 608 McBridde Avenue  Oceanville, NJ 08325  Pole 385  City, State, Zip Code Oceanville, NJ 08325  Pole 385  City, State, Zip Code Vivociland Park, NJ 07424  Pole 383  Project Manager for Mentioring Firm  County State State National Park, NJ 07424  Pole 383  Project Manager for Mentioring Firm  County Schadulad Completion Date (11)  12-28-2016  Schadulad Completion Date (11)  12-29-2016  Project Manager for Mentioring Firm  County Schadulad Completion Date (11)  Project Address  2333 Route 22 West  City, State, Zip Code  County Containing Abatement (Check Only One)  Sireet Address  2333 Route 22 West  City, State, Zip Code  Union, NJ 07083  Stepet Address  2333 Route 22 West  City, State, Zip Code  Union, NJ 07083  Full Containment with Negetive Praesure  Non-Exempted (1) and Non-Frizable Procedure  Non-Exe			~-		9)	ector (	ontre	nl Cor	tamen	of Abi	Name	~	Na,	ASCN		Owner (8)	d by Bullding				
City, State, Zip Code Oceanville, NJ 08325  City, State, Zip Code Woodland Park, NJ 07424  Project Manager for Monitoring Firm John Smoyer  Scheduled Completion Date (11) 12-29-2016  Scheduled Completion Date (11) Name of OSHA Monitor Irls Environmental Labora (gries, LLC)  Decupancy Status During Abatement (Check Only One)  Facility Closed/Vacated During Entire Period of Abatement Abatemant Performed Outsize of Normal Facility Hours  Other - Dascribe: Other			-			-	110		85	Addre	Street		-						15		120000000000000000000000000000000000000
Telephone No. 609-652-1833 973-225-8400 D1104  Stain Date (10) Scheduled Completion Date (11) Name of QSHA Monitor (12-28-2016 D2-28-2016 Sirest Address (11) Name of QSHA Monitor (12-28-2016 Sirest Address (11) Name of QSHA Monitor (12-28-2016 Sirest Address (11) Name of QSHA Monitor (12-28-2016 Sirest Address (12-28-28-28-28-28-28-28-28-28-28-28-28-28			_			$\rightarrow$		de	Ip God	tate, 2	City, S							25			
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Facility Closed/Vacated During Entire Period of Abstement Abstemant Performed Outside of Normal Facility Hours Other - Dascribe:    Cliy, State, Zip Code Union, NJ 07083			_	Li2	taries,L	borat	La	ntel	1724		_						atement (Che	ig Aba	(2		- 5
Other - Describe:    Continue   Describe:   Union, NJ 07083					-		<b>est</b>	- 1	te 22	Rou	2333			int	batem	Period of	During Entire	ated [	ClosedNac	Facility	
Renovation Demolition    State   Containing Material (ACM)   Containing Material (ACM)								100000000							110072				Dascribe;	Other .	
Is Location   Action   Action   Normally   Description of   Action   Type   Action   Normally   Used Solely by   Maintenance   Custodial Staff?   Custodial Staff?   (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)   Yes   No   N/A      Stairway (steam leak)   X   pipe insulation (O&M)   9   F	1					dure	ire oceo	laauri	ni-Encl	F Mi							et VbbiA)	\$/( T.D#	≥3.15	≥3 s1 o	
Asheatus-Containing Majerial (ACM)  TO BE ARATED In Facility (13)  Yes No N/A  Stairway (steam leak)  Very Solely by Maintenance/ Custodial Staff? (12)  Yes No N/A  Stairway (steam leak)  NUMBER Solely by Maintenance/ Custodial Staff? (1.6. Items a systems insulation, surfacing, VAT, or other miscellaneous)  Yes No N/A  Stairway (steam leak)  X pipe Insulation (O&M)  Public Yards Name of Registered Landfills  Hauter ID No of Wester	mont		-				T														
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Hauler ID No. Of Wasin							T														
Illich Corporation 18724 GROWS, Landfill				733	1 .									uler ID	H		suler	ate Ha			
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Completed by Title Stoneture Dale 12/22/2016		016	2/2		1	20	1)	1.15	1	0)	gneture	S			dent-				у	npleted	:on

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Date of Notification (1)				Building Owne		(2)				п	7.7	E
01/11/17			A STATE OF THE STATE OF	nstruction	LID		1	) E C	-15		W	5
Agencies Notified Type Notific	ation		Street Ad									
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	led lment #			e, Zip Code				JA	N 1	8	2017	
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X DOH justifica	ation)	1	Name of Dan Co				11 616	ASBES		001	UTD	71 /
DCA Cancel	lation			ITY INFORM	ATION		4	ASBES	ICF	NSIN	JG	J = (
Name of Facility Where Abatement is	Taking Place (3)		FACIL	III INFORM	ATION	Type of Facility (4	4)	L.	July loss	10011		
Residential House						School (K-1	2)					
Street Address						Subchapter	8 (Othe	r than K-12)				
on out it day out						Other (i.e. p	rivate 8	commercia	build	lings,	home	s,
Cit. (5)						etc.) Square Feet	# of	Floors	В	ldg. A	ge	
City (5) Madison						3000	3			0+		
		Τ,	County C	ode (7)		Current Use (Price	or if bein	na demolishe	ed)			
County (6) Morris				SE ONLY)		Residential H		3				
Name of Monitoring Firm Hired by Bui	Iding Owner (8)		ASCM	No	Name	of Abatement Con		(9)				
n/a	iding Owner (6)		n/a	. 10.		mony Contracti						
			11/4			Address	3	-0				
Street Address n/a						Palisade Ave						
10) 570						State, Zip Code				-		
City, State, Zip Code						field, NJ 07026						
Project Manager for Monitoring Firm		Τ.	Telephon	e No.		none No.		License No				
n/a			n/a			460.6026		01255				
Start Date (10)	Scheduled	d Com		Date (11)	Name	of OSHA Monitor						
01/20/17	01/31/1		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(,	Hari	mony Contracti	ng Inc	1				
Occupancy Status During Abatement						Address						
			ont		360	Palisade Ave						
Facility Closed/Vacated During E Abatement Performed Outside of	f Normal Facility	Hours	ient		City, S	State, Zip Code		1				
Other – Describe:					Gar	field, NJ 07026	;					
Scope of Work (Check All That Apply)		V-V										
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× ≥160 sf or ≥260 lf		emolit			-	Mini-Enclosure						
					Ė	Glovebag Prod Non-Exempted		d Non-Friabl	e Pro	cedur	е	
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	10 010000	Locati ormal	000000		Description	n of				Ту	ре	
Location of Asbestos-Containing Material (AC	M) Used	Sole	ly by		Containing I	Material (ACM)	37.00	mount	_		ш	m
TO BE ABATED	Ividii	ntenai	ACC 1855			is insulation,		Specify or LF)	Remova	Re	Encapsulate	Enclosure
In Facility (13)		(12)			urfacing, V/ er miscella		01	OI LI )	SVOL	Repair	lusc	uso
(10)	V	NI-	NIZA						=		ate	9
	Yes	No	N/A	1000000				00.05		-		
VARIOUS ROOMS			X	WOC	DLET/PI	LASTER	15	00 SF	X	-		
ON 1ST FL, 2ND FL, & ATT	TIC				REMNAN	ITS						
								11				
Name of Registered Waste Hauler		100	JDEP W		ubic Yards	Name of	Registe	ered Landfill				
Harmony Contracting Inc		1 3	lauler ID	A45-7-7	Waste BD	GROW	VS Lai	ndfill				
		0	3313/		sposal Date	e City, Stat	te	4,				
City, State				1 1000	sposar bati BD	Morris		A				
Garfield, NJ	Title				Signatur	е "		Da	te			
Completed by Kristina Caporino	Secre	etan/			Dais	itin Coper	in		1/11	/17		
Mistina Gaponno	00010	J.u.y			14 100	July College		AND THE RESERVE THE PARTY OF TH	STATE VICTOR	251150		

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

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Date of Notification (1) 1/11/2017			N	ame of B	Building Ov N PUBL	wner/Ope _IC SCI	erator ( HOOL	2) _S		sed baris					
Agencies Notified	Type Notification			treet Add	ress FTON A	AVENU	E			<i>F</i>	ASBESTO LIC	S CC ENSI		ROL	&
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X DOH	Emergency (i justification) Cancellation	including	1000	lame of C	Contact RCHION	IE				Tele	phone Num	oer			
□ DCA	Caricellation			FACILI	TY INFO	RMATIO	N								
Name of Facility Where A SCHOOL #14	batement is Taking	g Place (3)						× s	of Facility (4) chool (K-12	)	er than K-12)				
Street Address 99 ST. ANDREWS	BLVD.								ther (i.e. pri	vate 8	commercia	buildi			5,
City (5) CLIFTON								Square			Floors		lg. Ag	е	
County (6) PASSAIC				County Co STATE US	ode (7) SE ONLY)		_		nt Use (Prior MENTAR)		ng demolishe HOOL	ed)			
Name of Monitoring Firm AHERA CONSULTA	Hired by Building (	Owner (8)		ASCM	No.		Name	of Abat BRO	ement Cont THERS C	ractor ONT	(9) RACTING	S, INC	<b>C</b> .		
Street Address PO BOX 385								Addres	s AND AVE	NUE					
City, State, Zip Code OCEANVILLE, NJ 0	18231								p Code NJ 07512	2					
Project Manager for Mon	itoring Firm		1 5	Telephon				one No 956-8			License No 00494	).			
Start Date (10)	<u>'</u>	Scheduled	l Com				Name	of OSH	A Monitor (9) ABO	/F					
1/23/2017	11 1 1/01							Addres							
Occupancy Status During	ated During Entire	Period of Ab	atem	ent											
Abatement Perform  Other – Describe:	ed Outside of Norr	nal Facility h	Hours			_	City, S	state, Zi	p Code						
Scope of Work (Check A	II That Apply)						_	7		DOM: 202			200		
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf			enova emoliti					Mir	ni-Enclosure ovebag Proc	edure	n Negative P			2	
								i No	n-Exempled	( ) ai	IQ INOII-FIIAD			ment	
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Location Asbestos-Containing TO BE AB In Faci (13)	g Material (ACM) ATED lity	Used Mair Custo	Sole ntenar odial S (12)	ly by nce/ Staff?	Asbes (i.e.	tos Conta thermal	system cing, VA	Materia is insula AT, or	ation,	(	Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A					10	- 1	20015	V			
EXTER	NOR		X		W	VINDOV	N CAI	ULKIN	NG	1,	200 LF	X			
						1011	Varia		Nama of	Dogic	tered Landfil				
Name of Registered Wa		G	H	NJDEP W Hauler ID I 8743		of Was			1		NAGEME		G.R.C	).W.	S.
City, State TOTOWA, NJ							sal Date	е	City, Stat		LLE, PA				
Completed by		Title					Signatur	re				ate	247		
VIVECA RAMOS		PRO	JECT	COO	RDINAT	OR	14	re Vel	1h/	en	n-1	/11/20	J1/		_

								pane.		0 5			-Prir	t-Fo
Ch 2089	N		CATION		Jersey TOS ABATE 30 and 12:12		IT			G E	10	200	y [	4
Date of Notification (1)			Name of Craig h	25.78	vner/Operator	(2)		TU L	J	AN	1 0	Zi	111	
Agencies Notified Type Notification	n		Street Ac					1	ACDE	OTOO	- 0/	3 8 17	-001	1
								The state of the s	ASBE	LICE	NS	I VIC	HUI	_ č.
EPA X Initial DEP Amended		. (	City, Stat	te, Zip Code	9			-				1		
DOL Amendmer			Maple	wood, NJ	07040									
DOH Emergency		1	Name of	Contact				Tele	enhone N	Number				
DCA Cancellation			Edwar	d Oliveira										
			FACIL	ITY INFOR	RMATION									
ame of Facility Where Abatement is Tak Private House	ing Place (3	)				Ту	pe of Facility (4 School (K-1)							
treet Address							Subchapter	8 (Othe			100000000000000000000000000000000000000	W-000 - 4		
						×	Other (i.e. p etc.)	rivate 8	comme	ercial bu	uildir	ngs, l	nome	S,
City (5)						Sc	uare Feet	# of	Floors		Bld	g. Ag	je	
Maplewood														
ounty (6)			County C	Code (7)		Cu	rrent Use (Pric	or if bei	ng demo	lished)	-7.11	711		
Essex				ISE ONLY)										
ame of Monitoring Firm Hired by Building	g Owner (8)		ASCM	l No.	Name	of A	Abatement Con	tractor	(9)					
Competent Supervisor							ny Construc							
reet Address					Stree	t Add	dress							
					205	Rt.	46 West Su	iite 14						
ty, State, Zip Code							e, Zip Code , NJ 07512							
roject Manager for Monitoring Firm			Telephor	ne No	Telep				Licens	e No.				
oject Manager for Memoring 1 in			Оюрто	10 110.			2-4244		0115	5				
tart Date (10)	Schedule	ed Con	pletion [	Date (11)	Name	of (	OSHA Monitor							
01/23/17	01/30/		**		San	ne a	as above							
ccupancy Status During Abatement (Ch	eck Only Or	ne)			Stree	t Ad	dress							178-15
Facility Closed/Vacated During Entire Abatement Performed Outside of Noted Other – Describe:					City,	State	e, Zip Code							
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				×	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	e cedure					9	
	le	Loopt					•	and the second			-	bate	ment	20
Location of	1	Locati Vormal	ly		Description	n of						Ту	ре	
Asbestos-Containing Material (ACM)		ed Sole			s Containing	Mate	erial (ACM)		mount		_		Ē	ш
TO BE ABATED In Facility	1,000,00	todial S		(i.e. ti	hermal syster surfacing, V				Specify or LF)	1	Remova	Repair	Encapsulate	Enclosure
(13)		(12)			other miscella				J,	3	SVO	oair	sula	Sur
97 ~0.55	Yes	No	N/A							1			te	e
2nd Floor Bathroom	100	,,,,	X	Take	off cloth o	f Du	ıctwork	4	0 SF	X	1		Χ	
2nd Floor Bedroom			X	Take	off cloth o	f Di	ıctwork		0 SF	X			Χ	
Zha i looi Beardoni				Tako	. 011 010111 0		Journa							
					01111					arin .				
ame of Registered Waste Hauler		1 22	IJDEP W lauler ID	4732-574 (474)	Cubic Yards of Waste		Name of			IdTIII				
cademy Construction Inc.		10.33	34422	. 191	3		GROW	/S Lai	ndfill					
City, State					Disposal Dat	е	City, Stat	te						
otowa, NJ					TBD		Tullyto	wn, P	A					
Completed by	Title				Signatu	re c	T . ,	2 1	1	Date				
Filio Geleski	Sun	ervisc	or				tilen)	1.00	12	01/1	1/1	7		

### 14 FR45

## State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Ch 5845	NOT	(Purs	uant to	F ASBESTOS NJAC 8:60 ar	nd 12:120)				JAN	18	2017	7	
Date of Notification (1) 1/9/2017		Na Do	me of Bu	uilding Owner/ E LLC c/o l	Operator ( Jrban Ed	dge Prop		405	FOTO		NY D	01 9	
Agencies Notified Type Notification			reet Addi 10 Rou	ress te 4 East				ASB	ESTOS LICE	NSI	VG	UL 0	-
EPA Initial Amended Amendment :	ŧ	Cit	ty, State, aramus	, Zip Code s, NJ 07652	2								
		Na	ame of C					Telephon	e Numbe	er			
DOH justification)  DCA  Cancellation		1		TY INFORMA	TION								$\Box$
Name of Facility Where Abatement is Taking	Place (3)		PACILI	TT IIII GTUIN		Sch	Facility (4) nool (K-12) ochapter 8		n K-12)	wilding	as ho	mes.	
Street Address 437 US Highway 46 East						X Oth etc	.)	# of Floo		Bldg	. Age		-
City (5) Rockaway				1. (7)		144,44		1 r if being de	emolished	196	54		-
County (6) Morris County		(5		SE ONLY)		Comm	nercial R	etail Spa	ice				
Name of Monitoring Firm Hired by Building Absolutely Clean Environment, Inc.	Owner (8)		ASCM	No.	Incir	nia Cont	racting,	Inc					
Street Address 777 Westchester Avenue, Suite 10	0.00				136		Avenue	e, Unit 36	55				
City, State, Zip Code White Plains, NY 10604					City, Clift	State, Zip on, NJ (	Code 07012						
Project Manager for Monitoring Firm Jeff Sheridan													
Start Date (10)	Scheduled		pletion D	Date (11)	Nam- Inci	e of OSHA	A Monitor tracting,	Inc					
1/23/2017 Occupancy Status During Abatement (Che	ck Only One	e)			Stree	et Address 0 Cliftor	n Avenue	e, Unit 36	35				
Facility Closed/Vacated During Entire Abatement Performed Outside of Not Other – Describe: Monday to Saturda	mai racility	HUUIS	ent	-		State, Zip ton, NJ							
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf		enova				Min	i-Enclosure	ent with Ne e cedure d (*) and N				4	
		72 2				Nor	n-Exemple	u ( ) anu iv	OH-I Habi		Abate Ty	ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Locat Normal ed Sole iintena todial (12)	lly ely by ince/ Staff?		Descripti Containing ermal syste surfacing, ther misce	g Material ems insula VAT, or	(ACM)	Amo (Spe SF o	ecify	Removal	Repair	Encapsulate	Enclosure
0 151	Yes	No X	N/A	Vinvl	Floor Til	es & Ma	astic	2,30	0 SF	Х			
Ground Floor				vy.									
Name of Registered Waste Hauler Atlantic Carting			NJDEP \ Hauler II NJ691	D No.	Cubic Yard of Waste 10		Grand	f Registered Central			ndfill		
City, State Wayne, New Jersey			)4		Disposal D	Λ . A	City, Sta	ate krgyl, Per		nia <sub>ate</sub>			
Completed by Milena Zoric	Title VP				Signa	ature /	KN			/9/20	17		

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.



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M	JAN	A. many	8	2017	S	

					1	(D. Ildian (	Dumar/Operator /2	)		H- IAK	18	201	7	1111/
Date of Notification (1)		47		1		d States	Owner/Operator (2	-/	Ш	U OAII	1 0	LUI	1	-
	/						Aility							1
Agencies Notified  ⊠ EPA	Type Notification	on		5		ddress Dix Armv	Support Activ	ity		ASBEST	OS CC		ROL	&
☑ DOLWD	☐ Amended					ate, Zip Co					1/2-11/11	1 4 6		
☑ DOH	Amendmen	t #	_	1	2020 <del>-</del> 11111-0000		NJ 08641							
☐ DCA	☐ Emergency		g	-	_	of Contact			Tele	ephone Num	ber	7.5		
(NJAC 5:23-8)	justification			-   '			- Sequoia Cons	struction		- <b>I</b>				
	☐ Cancellation	n						7.1.404.01.						
					FAC	ILITY INF	ORMATION	Type of Facility	(4:					-
Name of Facility Where		king Plac	e (3	)				School (K-12						
Fort Dix - Building	5410		-					☐ Subchapter 8	3 (Oth	ner than K-1	2)			
Street Address								Other (i.e., pr	rivate	and comme	ercial bu	ldings	5,	
Fort Dix								homes, etc.)		of Floors	RI	lg. Ag	10	-
City (5)								Square Feet	1	of Floors	0.000	19. Ay 35		
Wrightstown								10,000				,,,		_
County (6)					Count	y Code (7)(	STATE USE ONLY)	Current Use (Pr	ior if	being demoi	isnea)			
Burlington								Courtroom						
Name of Monitoring Firm	n Hired by Buildir	ng Owne	(8)	A	SCM N	10.	Name of Abateme							
Mgmt. & Environm	ental Consult	ing Ser	/ice	s			Shade Enviro	onmental, LLC						
Street Address							Street Address							
PO Box 341							623 Cutler Av	venue						
City, State, Zip Code							City, State, Zip C	ode						
Chesterfield, NJ 0	8515						Maple Shade	, NJ 08052						
Project Manager for Mo			7	Telep	ohone N	No.	Telephone No.		L	icense No.				
Bill Weisgarber				60	9-298-	4070	856-755-0099	9		00842				
Start Date (10)	Sc	cheduled	Con	nplet	ion Dat	e (11)	Name of OSHA N	Nonitor						
01 / 24	5000	01				20,000,000	EMSL Analys	tical, Inc.						
Occupancy Status Durin							Street Address							
☐ Status Duffi					nent		200 Route 13	30 North						
☐ Abatement Performe	ed Outside of No	mal Faci	lity h	Hours	s - Des	cribe	City, State, Zip C					- 187		
Time of Abatement:	AM	_PM/	,	PM-		AM	Cinnaminso							
							Ommaninio	.,,						
Scope of Work (Check	all that apply)							tainment with Ne	gativ	re Pressure				
≥3 sf or ≥3 lf		-		ovatio			☐ Mini-En	closure ag Procedure						
≥160 sf or ≥260 lf			Jem	olitio	n		⊠ Non-Exe	empted (*) and N	on-Fr	riable Proced	dure			
			Is I	ocat	ion						Al	atem	ent T	уре
Location	n of		No	rma	lly		Description				R	R	Щ	四
Asbestos-Containin					ely by nce/	Asbes	stos Containing M	aterial (ACM)		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
TO BE A		3.5			Staff?	(i.e.	, thermal systems surfacing, VA			SF or LF)	val	7	lusc	sure
IN Fac				(12)			other miscellan	eous)					ate	(D
(10	/	Ye	s	No	N/A							1		
Throughout				$\boxtimes$		Floor Ti	ile and Mastic			334 SF		-		
Courtroom						Pipe Ins	sulation			20 LF				
													Ш	Ш
Name of Registered W	aste Hauler			N	JDEP	Waste	Cubic Yards of	Name of Reg						
Freehold Cartage				H	lauler I		Waste 5	Cumberla	and	County La	ndfill			
City, State					1050		Disposal Date	City, State			3.29(3.2)			
Freehold, NJ							01/31/2017	Newburg	, PA					
Completed By (Print or	Tunal	Title		-			Signature				Date			
Christina Lynch	· ype/	- I A A A A A A A A A A A A A A A A A A	Pre	side	ent of	Operatio		va)	_	>	11	11-	7	

CK 1179	NC	TIFI (Pu	CATION	e of New of ASBES NJAC 8:0	STOS AB	ATEM! 2:120)	ENT			EG	E	] [	1179	
Date of Notification (1)			Name of E	Building Ov	wner/Ope	rator (2	2)			I JAN	18	20	17	
January 12, 2017		E	thicon,	nc.					IU L	.00000				-
Agencies Notified Type Notification		CHA	Street Add	dress						1				
		P	о вох	151	v Br					ASBEST	OS C	TNC	ROL	. &
EPA Initial Amended		100		e, Zip Code						LIC	CENS	ING		
DOL Amendmen	t #1	- 1		le, NJ 08										
Emergency	(including	7	Name of (						Tele	phoneNum	ber			
DOH justification														
DCA Cancellatio	11	F		lanager		J			1		-			
Name of Facility Where Abatement is Taki	ng Place (3)		FACIL	III INFO	RIVIATION		Тур	e of Facility (4	)					
	119 1 1000 (0)					1		School (K-12	2)					
Ethicon							Н	Subchapter	8 (Othe	r than K-12)				
Street Address							X	Other (i.e. pr	ivate 8	commercia	l buildi	ngs,	nomes	s,
737 US Route 22								etc.)	# of	Floors	Ble	dg. A	16	-
City (5)							Squ	are Feet	# 01		5,	ag. A	,,,	
Bridgewater, NJ									161	3	- 4/			
County (6)			County C				Cur	rent Use (Prio			ea)			
Somerset			(STATE U	SE ONLY)	\$1000 mm	_				Facility				
Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	No.		Name o	of Al	patement Con	tractor	(9)				
AET, Inc.					T	he M	ACI	K Group, Ll	_C.					
Street Address		-				Street /	Addı	ress						
220 Church Street					1	500 K	(ina	s HWY N,	STE 2	209				
City, State, Zip Code								Zip Code						
The state of the s					C	herry	Hi	II, NJ 08034	1					
Bridgewater, NJ 08807 Project Manager for Monitoring Firm			Telephon	e No.		Teleph	_			License No	).			
			908) 29					- 5000		00781				
Eric Houseknecht	Schedule		npletion D					SHA Monitor						
Start Date (10)	Ochedule	u 001	9/13/17		_	ho M	ΔC	K Group, L	C					
9/13/16	ook Oply Op	0)	9/13/1/			Street								
Occupancy Status During Abatement (Ch								gs HWY N,	STE	209				
Facility Closed/Vacated During Entire	e Period of A	bater	ment					, Zip Code	012					
Abatement Performed Outside of No Other - Describe:	rmai Facility	Houi	5		100				4					
						nerry	/	II, NJ 0803	+					
Scope of Work (Check All That Apply)						Г	$\nabla$		193	- 220 EV 1 <u>-</u>				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		lenov emol					X	Full Containmon Mini-Enclosure Glovebag Pro	9		ressur	е		
						Š	$\overrightarrow{A}$	Non-Exempted	(*) and	Non-Friable	Proce	dure		
			Maria and a										emen	t
95 80 10	[4] ASSO	Loca Norma										- 13	/pe	_
Location of Asbestos-Containing Material (ACM)	100000000000000000000000000000000000000		ely by	Ashest		cription inina M		rial (ACM)		Amount			т	_
TO BE ABATED			ance/		thermal s	systems	s ins	sulation,		Specify	Re	Z	nca	nc
In Facility	Cust	todial (12)	Staff?		surfac				S	F or LF)	Remova	Repair	Encapsulate	Enclosure
(13)		(/	-		other m	iscenar	neot	15)			Val	¥:	late	Гe
	Yes	No	N/A										(D	
Bldg G Bas. Bathrooms	103	X	′		VAT	& ma	astic		2,	000 s/f	X			
Bidg & Bac. Bathleonie		X	>			pipe				500 l/f	X			
_"_		$\langle \rangle$	-			insula	atio	n		100 s/f	X			
F Service Control of the Control of	eri sar a proceso				a proposition of	insula				12 l/f	X	13		
Bldg O MR ALU8	and the same of	1	NJ DEP V	Vaste	Cubic '		2110	Name of	Regist	ered Landfil				-
Name of Registered Waste Hauler			Hauler ID		of Was									
Newark Carting			222	253		29.1		BFI Imp	erial	Landfill				
City, State		1			Dispos	al Date	9	City, Sta						
Newark, NJ					9	/13/17	7	Imperia	I, PA	15126				
Completed by	Title	37.53.7				ignatur		1/7/	0		ate			
Michael Cooper	Presid	dent				1/10				1/	12/17	8		
Ivilatiaci ocopci								200		3000				

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

			N: 53					117	1				+
Date of Notification (1)			N	Name of B	uilding Ov	wner/Operato	or (2)		JAN	18 20	17	1111	11
Augu	ıst 26, 2016			thicon, I				tent lass	1			4.345#3755	
Agencies Notified	Type Notification			Street Add					10000000				
⊠ EPA	Initial		P	O BOX	151				ASBESTOS	S CONT NSING		. &	-
DEP	Amended		(	City, State	, Zip Code	е		1	LICE	DVIICVI			_1
DOL	Amendment #		- S	omerville	e, NJ 08	3876							
DOH	Emergency (in justification)	rciuaing	1	Name of C	Contact				TelephoneN	lumber			
DCA	Cancellation		Р	roject M	lanager					_			
				The second secon	THE RESERVE OF THE PERSON NAMED IN COLUMN 1	RMATION		(5 ))) (4)					
Name of Facility Where	Abatement is Taking	Place (3)					Тур	e of Facility (4)					
Ethicon Bldg G								School (K-12)	(Other than 1	12)			
Street Address								Subchapter 8	(Other than K vate & comme	(-12) ercial buil	dings.	homes	3,
737 US Route 22							$\boxtimes$	etc.)	vato a comme				
City (5)							Squ	rare Feet	# of Floors	E	lldg. A	\ge	
Bridgewater, NJ									3				
County (6)				County Co	ode (7)		Cur	rent Use (Prior	if being demo	lished)			
				(STATE US	E ONLY)				Facility	/			
Somerset Name of Monitoring Fire	m Hired by Building (	Owner (8)		ASCM	No.	Nan	ne of Al	batement Contr	actor (9)				
		) (U)				The	MAC	K Group, LL	C.				
PARS Environment	ai, IIIC.						et Add						
Street Address	0 11 540							s HWY N, S	STF 209				
500 Horizon Drive,	Suite 540							, Zip Code					
City, State, Zip Code						1		II, NJ 08034					
Robbinsville, NJ 08				Telephon	o No		ephone		Licens	e No.			
Project Manager for Mo	onitoring Firm		0.					- 5000	00781				
Project Manager			100	300.959.				SHA Monitor	00701				
Start Date (10)		Schedule							C				
9/13/				9/13/17			eet Add	K Group, LL					
Occupancy Status Dur	ing Abatement (Chec	k Only One	e)						CTE 200				
X Facility Closed/Va	acated During Entire I	Period of A	bater	nent				gs HWY N,	31E 209				
	med Outside of Norm	nal Facility	Hours	S				, Zip Code					
Other - Describe:						— Che	erry Hi	ill, NJ 08034			- 24112		
Scope of Work (Check	All That Apply)						<b>N</b>						
≥3 sf or ≥3 lf		X R	enova	ation			$\otimes$	Full Containme	ent with Negati	ive Press	ure		
≥160 sf or ≥260 lf			emoli	tion				Mini-Enclosure Glovebag Prod Non-Exempted	edure				
							X	Non-Exempted	(*) and Non-Fr	iable Proc	edure		
		T										temen	t
		2,523	Locat Norma			Descrip	tion of			-	-	Туре	_
Locat Asbestos-Containi	ion of ng Material (ACM)	Use	d Sole	ely by	Asbes	tos Containir	ng Mate	erial (ACM)	Amount			ш	ш
TO BE A		103000	intena	ance/ Staff?	(i.e.	thermal syst	tems in	sulation,	(Specify SF or LF)		R	Encapsulate	Enclosure
33000000	cility	Cusi	(12)	State of the state		surfacing, other misce			SF OI LF,	nov	Repair	lusc	Inso
(1	3)		0,000,00			other imees	# M   M   M   M   M   M   M   M   M   M	,		a	=	ate	O.
		Yes	No	N/A							/	-	-
Recement	Bathrooms		X			VAT &	masti	С	2,000 s	/f >			
				>		pip	ne .		500 l/f	>			
	"_			>					400 s/f		1		
2	"_		X			duct ins	sulatio	in	400 5/1	/	\		
Name of Registered V	Vaste Hauler		1.5	NJ DEP W		Cubic Yar	ds	Name of	Registered La	ndfill			
				Hauler ID		of Waste	0	PELIMA	orial Landfil	11			
Freehold / Newark	Carting			222	2.53	2 Diamage L		City, Sta	erial Landfi				
City, State						Disposal [			<sub>е</sub> , РА 15126				
						9/13	3/7/	imperial	. PA 10120				
Freehold / Newark	, NJ							Importa	,				
Freehold / Newark Completed by	, NJ	Title Presid					ature	19/-		Date 8/26/1	6		

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

### Ch 4499

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	JAN	sample	8	2017	7	

Date of Notification (1)								222 2		U () 100 mil	1
1/1/2/17			Na	me of Building Owner	/Operator	(2)					+
Agencies Notified   Type Notifica	tion		- C+	Bowan L	MIN	er Sita	ASBES	TOS	CON	VTRO	5L&
	COII		Stre	eet Address	1,	, )		ICEN			
☐ EPA ☐ Initial ☐ Amende			-	Lel Mul	176	RD					W
DEP Amende			100000	, State, Zip Code	2400	2	-				
/ Emergen	cy (includin	σ	6	21255 600	,	NT /	28278				
DOH justificat	on)	5	Nan	ne of Contact		-	Telephone	Numba	-		
□ DCA □ Cancellat	ion			Jack al	066		***	Aittitie			
Name of Facility Where Abatement is Takin	60 m 11 m		F	ACILITY INFORMA	TION						
	ng Place (3)					Type of Facilit	ty (4)	-			
1000 Hall						☐ School (F	2 12)				
Street Address							cr 8 (Other than K-)	12)			
LO Mullia -1:11	Kil					Other (i.e	private & commer	cial bui	ildings	home	es etc
City (5)						Square Feet					
L2 (655 10010						Square reet	# of Floors		Bld	g. Age	
County (6)			i Coun	ty Code (7)						24	
6/04/CESLI			(STAT	TE USE ONLY)		Current Use (Pr	ior if being demolis	hed)			
Name of Monitoring Firm Hired by Building	Owner (8)		IAC	CM No.	Lv						
TTT	(0)		AS	CIVI INU.		of Abatement Cor	ntractor (9)	)	11		,
Street Address					HW	Joe A	hitement i	Dill	7.1 it	175	100
1753 1/ 0/20	5.2				Street A	Address	( )	· · · ·	4511	-/1	
City, State, Zip Code	_/:					2 BURLIN	ration F	The	4		
		,			City, St	atę, Zip Code	J	12			
Project Manager for Monitoring Firm	1 0	105	7/			o leuro	MITE	10	)(		
				one No.	Telepho	ne No.	License	No.	7.3		
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Facility Closed/Vacated During Entire Pe	riod of Aba	tement									
☐ Abatement Performed Outside of Normal ☐ Other – Describe:	Facility Ho	urs			City, Sta	te, Zip Code					
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Scope of Work (Check All That Apply)											
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.□ ≥160 sf or ≥260 if		emoliti	(1125-50)	525		Full Containme Mini-Enclosure	nt with Negative Pr	essure			
						Glovebag Proce	edure				
	T			1		Non-Exempted	(*) and Non-Friable	Proced	dure		
		Locatio								ement	
Lecation of Asbestos-Containing Material (ACM)		ormally Solely		Desc	ription of				T	ype	
TO BE ABATED	Mai	ntenan	ce/	Asbestos Contai	ning Mate	rial (ACM)	Amount				
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						1		1	11/		

01/26/2017

Signature

Waynesburg, Ohio 44688

Date 1/10/2017

City, State

Montclair, NJ 07042

Completed By (Print or Type)

Constantine Vivian

Title

President

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Date of Notification (1) Name of Building Owner/Operator (2) Shawkia Mohsen 1/10/2017 Agencies Notified Type Notification Street Address 1 8 2017 [ ]EPA [X] Initial Notification [ ]DEP City, State, Zip Code [ ]Amended Kearny, NJ, 07032 [X] DOL ASBESTOS CONTROL & Notification Telephone Number LICENSING [X]DOH Name of Contact [ ]EMERGENCY Shawkia Mohsen [ ]DCA [ ]Cancellation FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Shawkia Mohsen [ ]School (K-12) [ ]Subchapter 8 (Other than K-12) Street Address [X]Other (i.e., private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 4600 3 98 (STATE USE ONLY) Kearny Essex Current Use (Prior if being demolished) Name of Monitoring Firm hired by Building ASCM No. Name of Abatement Contractor (9) Owner (8) AZTECH MANAGEMENT, Inc. N/A Street Address Street Address 86 Christopher St. City, State, Zip Code City, State, Zip Code Montclair, NJ 07042 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number N/A (973)744-880000371 Scheduled Start Date (10) Name of OSHA Monitor Sched. Completion Date (11) 19 2017 23 01 01 N/A Day Year Month Day Year Occupancy Status During Abatement (Check only one) Street Address [X] Facility Closed/Vacated During Entire Period of Abatement [ ]Abatement Performed Outside of Normal Facility City, State, Zip Code Hours - Describe: «OffHours Descript» [ ]other - Describe: «Other Occupancy Descript» Scope of Work (Check all that apply) [ ]Full Containment with Negative Pressure [X]>3 sf or >3 lf [X] Renovation [ ]Mini-Enclosure [ ]>160 sf or >260 lf [ ]Demolition [X] Glove-bag Procedure [ ]Non-Friable Procedure Is Abatement Type Location Normally Location of Description of Asbestos-Containing NCAPSU NCHOSD Asbestos-Containing Used Amount E Material (ACM) Solely Material (ACM) (Specify E M O V By Maintenance/ TO BE ABATED (i.e., thermal systems SF or AIR Custodial In Facility insulation, surfacing, VAT, LF) Staff (12) (13)or other miscellaneous) Yes No N/A R E Basement X Pipe Insulation 100 LF Name of Registered Waste Hauler NJDEP Waste Name of Registered Landfill Cubic Yards Hauler ID No. of Waste 1.0 AZTECH MANAGEMENT, INC. Minerva Enterprise INC 17040 City, State Disposal Date City, State Montclair, NJ 07042 01/26/2017 Waynesburg, Ohio 44688 Completed By (Print or Type) Signature Constantine Vivian President 1/10/2017

	198		State of N	ew Jersey		1	Check #	15794	
			경기를 하게 통하면 가게서, 없다면상 점계된	SBESTOS ABATEMENT:		MEG		$\mathbb{V}$ [	EIN
Date of Notification	(1)			ding Owner/Operat		1153			711
1/9/2017	0.7 F0.7F		Rita Sal		annesses annesses	III )	V 18	2017	
Agencies Notified	Type Notifica	ation S	treet Addres	SS					
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[ ]DEP	Notific	ation	ity, State,	Zip Code		ASBEST	<del>OS CO</del> CENSII		_&
[X]DOL	[ ]Amended		South On	range, NJ, 07	079	Lei	OLIVOII	N/A	
[X]DOH	Notific		ame of Conta	act	Tel	ephone Number			-
[ ]DCA	[ ]EMERGENC	1.48	Rita Sal		101				
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				ITY INFORMATION					
Name of Facility Whe Rita Sallis	re Abatement	is Taking	g Place (3)		[ ]Sch	Facility (4)		w 10)	
Street Address	- Antiquesta II				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	bchapter 8 (Othe her (i.e., priva			al
						ings, homes, etc			
					Square Fe		ors Bl	dg. Ag	е
City (5) South Orange		County (6	5)	County Code (7) (STATE USE ONLY	2400			95	
Journal Commission		LSSEX		,52222	Current T	Use (Prior if be	ing der	nolishe	ed)
Name of Monitoring F Owner (8) N/A	irm hired by	Building	ASCM No.		tement Contr MANAGEM	ENT, Inc.			
Street Address				Street Addr					
				86 Chri	istopher	St.			
City, State, Zip Cod	e			Montcla	, Zip Code	07042			
Project Manager for	Monitoring Fi	rm Tele	phone Number	Telephone N	umber	T I	icense	Number	:
		N/Z	A	(973) 74	14-8800		0037	1	
Scheduled Start Date 01 18 20	(10) Sche		tion Date (1	Name of OSHA	A Monitor				
Month Day Ye Occupancy Status Dur. [X] Facility Clos	ing Abatement		nly one)	Street Addre	ess				
of Abatement [ ]Abatement Per Hours - Descr	formed Outsic	Bescrip	t»	City, State	, Zip Code				
[ ]other - Descr			Descript»						
Scope of Work (Check  [X]≥3 sf or  [ ]≥160 sf o	<u>≥</u> 3 lf	[x]	Renovation Demolition	[ ]Min [X]Glo	l Containmer i-Enclosure ve-bag Proce -Friable Pro		Pressu	ire	
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Location Asbestos-Con		No	cation cmally	Descript		_	R	E	E
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TO BE ABA	TED	By Mai	ntenance/ todial	(i.e., therm	2 1	SF or	0	E A A	0
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(15)		Yes	No N/A	or other mist	cerraneous)		L	A I	RE
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Name of Registered War AZTECH MANAGE		C. Hau	EP Waste ler ID No. 040	Cubic Yards of Waste 1.5		Registered Land		INC	
City, State		1		Disposal Date	City, St	ate			
Montclair, NJ	07042			01/23/201	7 Wayne	esburg, Oh:	io 44	688	
Completed By (Print o	or Type) Tit	le		Signatu	rel /	<del></del>	Dat-		
Constantine Vi		esiden	t	J. Granaca.	entil.	Nha	Date 1/9/2	2017	
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			71412			10				#		
Date of Notification (1) 1-17-17		100	lame IJ D0		ilding C	wner / Operator						
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□ DEP □ Init	ial				Zip Co	ode	and the second					
	nended	Т	rent	on, N	J 086	25	Ä	SBESTOS CON	TROL	&		
	nergency			of Co			d.	LICENS	Jepho	ne No	nmpe	er
	ncellation	S	teve	Rug	ge							
			FAC	ILIT	Y INFO	ORMATION						
Name of Facility Where Abate	ment is Taking Pla	ce (3)	)			Type of Facilit						
S.J. Regional Airport Prop	erty					School (k		17.10				
Street Address							ter 8 (Other tha		hone		to 1	
Fostertown Road						Carried Control		nmercial buildings			10.)	
		At Land				Square Feet	# of Flo	ors .  Bid	lg. Age	2		
City (5)	County (6)	Cou	inty C	code (	7)							
Lumberton	Burlington						Prior if being d	lemolished)				
						Old farm -						
Name of Monitoring Firm Hired	by Building Owne	er (8)		ASC	M No.		ement Contrac		- 41		0	
								olutions Contra	acting	), LL	·C	
Street Address						Street Addres		DO Poy 70				
						City, State & 2	ollow Road,	FO BOX 70				-
City, State & Zip Code							ew Jersey 08	3095				
Project Manager for Monitoring	Firm	Tolon	hono	Numb	ner .	Telephone Nu		License Nu	mber			
Project Manager for Monitoring	j Fii iii	relep	none	INUITIL		609-567-060	00		0126	3		
Scheduled Start Date (10)	Scheduled Com	A	or described on	e (11)		Name of OSH						
1-27-17		3-31-				EMSL Analy			-			-
Occupancy Status During Aba	tement (Check on	ly one	)			Street Addres						
Facility Closed/Vacate						200 Route 1						_
Abatement Performed	Outside of Norma	I Hou	ırs –	am to	зрт	City, State & Z						
Describe:	a Abetement					Cinnamins	on, NJ 08077					
Facility Occupied Durin				-			☐ Full Cor	ntainment with Ne	gative	Pres	sure	
Scope of Work (Check all that ≥3 sf or ≥3 If	арріу)		Pan	ovatio	n		Mini-En					
≥160 sf ≥260 lf		$\bowtie$	0.000.000	nolitio				Bag Procedures				
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TO BE ABATE	₽		odial S			i.e., thermal sy nsulation, surfac			Removal	Repair	Sde	dso
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(13)		Yes	No	N/A		or ourse image					Ф	
Loose Pieces on Ground		П		$\boxtimes$	Tran	site Shingles		10 Sq. Ft.				Ш
Loose Pieces on Ground		Ħ	Ħ	П	Tran	site Panels		10 Sq. Ft.	X			
Loose Pieces on Ground		Ħ	П	Ī	Pipe	Insulation		5 Sq. Ft.	X			
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Name of Registered Waste Ha	auler					Cubic Yards	Name of Reg	istered Landfill				
				uler II	O No.	of Waste	0.10					
Bull Waste & Recycling, L	.LC		21	435		5	The state of the s	nty Landfill				
City, State						Disposal Date	City, State					
Berlin, NJ						4/28/17	Alloway To	wnship, NJ	L			
Completed By (Print or Type)			Tit			Signature	//		Date	4 ==		
Theodore S. Budzynski			Vi	ce Pr	es.	//			1-17	-1/		
9000						(//						

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

DECELVEDI	100				 	Pri	int Fo	m
	m	E	C	E	W	E	In	

								10						-	
Date of Notification (1)					of Building Corporat			(2)			JAN	18	201	7	٢
Agencies Notified  EPA	Type Notification		- 1	Street A	ddress Enterpris	se Parl	way		in acts of property or	AS	BEST	OS CO		ROL	<u>.</u> &
DEP X DOL	Amended Amendmen				ate, Zip Co wood, C		122					<del>JEIN 3</del>	11112		
DOH DCA	Emergency justification) Cancellation				f Contact Mikovsk	ку				Tel	ephone N	lumber			
				FAC	ILITY INFO	ORMATI	ON								
Name of Facility Where Former Sports Auti		ng Place (3)						Type of F	acility (	507					
Street Address 142 State Route 10	)							Sub	chapter er (i.e. p	8 (Oth	er than K- k comme		ldings	, hom	es,
City (5) East Hanover								Square F 40,000		# of	Floors		Bldg. 35	Age	
County (6) Morris					Code (7) USE ONLY			Current U			ng demol	ished)			
Name of Monitoring Firm ATC	n Hired by Building	Owner (8)		ASC	M No.			of Abatem ervices,		ntractor	(9)				
Street Address 3 Terri Lane								Address West Lin	coln H	lighwa	ny, Suite	e 500			
City, State, Zip Code Burlington, NJ 080	116							tate, Zip C							
Project Manager for Mor John Lutz	nitoring Firm	10000		Telepho 609-38	ne No. 36-8800			one No. 372-8884	1		License 01161	No.		34	
Start Date (10) 1/30/17		Scheduled 2/1/17	Com	pletion	Date (11)		Name EMS	of OSHA N L	lonitor				-		
Occupancy Status Durin	g Abatement (Chec	k Only One	)					Address		9387					
Facility Closed/Vac Abatement Perform	ated During Entire ned Outside of Norr	Period of Ab nal Facility I	atem lours	ent				Route 13 tate, Zip C		th					
Other - Describe:						_	Cinn	aminson	, NJ						
Scope of Work (Check A	All That Apply)	- I					г	1							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		CONTRACTOR OF THE PARTY OF THE	novat moliti				×	Mini-Er Gloveb	closure ag Proc	e cedure	Negative				
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Asbestos-Containing	Material (ACM)	Used Main	Solel			os Cont	aining M	laterial (AC			mount			m	_
TO BE AB		Custo	dial S	10000	(i.e.		systems cing, VA	insulation T. or	,		pecify or LF)	Remova	Repair	псар	Enclo
(13)			(12)				niscellar				. Harris	oval	pair	Encapsulate	Enclosure
		Yes	No	N/A										0	
Main Showro	om Floor	1		X		Mirr	or Mas	stic		8	) SF	X	_		
		+-+			~ 805i	on.	each	of 4	colu	MMS	)	-			
		+ +							$\dashv$		-	+			
Name of Registered Was	ste Hauler		N.	JDEP W	/aste	Cubic	Yards	Na	me of F	Registe	red Land	fill			Щ
Waste Management			Ha	auler ID	No.	of Was	ste		ROW						
City, State						Dispos	al Date		ty, State						
Trenton, NJ		T = 1.0				TBD	1	1	orrisvi	lle, PA					
Completed by Jack Bally		Sr. Pro	ject	Mana	ger	s	ignature 1	al C	ali	/_		Date (∫)-	111-	,	

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

# CV102758

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Daniel Comment						11 1
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K103758		(Pursua	ent to N	UAC 8:60 and 12:120	l land			- 111	- 111	=
Date of Notification (1)		Nam	e of Bu	ilding Owner/Operator	co LAte	Woutet	017/	Me	MI	gr.
Agencies Notified Type Notification		Stre	et Addr	2010	5/-	SBESTOS CON	TRO	1 &		
□ EPA □ Initial □ Amended		City	State,	Zip Code	DWN.	NICENSIN	3-1	8	4	Φ
Amendment #_	uding	Nan	7AL he of G	ontact Augus	-	Talerhone 11 h	F:			٦
DOH JUSTINGATION Cancellation		1	ACILIT	Y INFORMATION	SCN					4
Name of Facility Where Abatement is Taking P	ace (3)				Type of Facility (4)  School (K-12)	1				
Street Address	_				Other (i.e. pri	(Other than K-12) vate & commercial b			-	
City (5) / 1/2 / 5/4 0 1	wn	J			Square Feet	# of Floors		Age		
County (6)		Co	unty Co	ode (7) SE ONLY)		if being demolished	i) Ul 4	i		
Name of Monitoring Firm Hired by Balleting Que	nes-(8)		ASCM N		e of Abatement Cont	ractor;(9)	1	us	t.	
Street Address 1/2 - L C/	/	1		Stree	et Address	SAJ		- 5		
City, State, Zip Code	vae	1	na	City,	State, Zip Code	45 tow.	W		1	1
VARTH, NO	W\	V	lephon	e No. Iele	phone No.	License No.	//	10	/ (	5
Project Manager for Monitoring Firm	- 91	) j -	-7	27 - 564996	e of OSHA Monitor		00	) - )	62	)
1/17/19	2/	7/	17	7	et Address					-
Occupancy Status During Abatement (Check  Facility Closed/Vacated During Entire Pe	riod of A	bateme	nt	City	, State, Zip Code					$\dashv$
Other - Describe:	radilly	Life.	nuk	<u>}</u>	, 0.0.0,					$\dashv$
Scope of Work (Check All That Apply)		enovati			Mini-Enclosur	ent with Negative Pr	ressure	Э		
□ ≥160 sf or ≥260 lf		emolitio	on .		- Olassa Dro	cedure d (*) and Non-Friabl	e Proc	edure Ahata	ment	_
		Locatio		Descript	ion of		-	Ту	oe T	$\dashv$
Location of Asbestos-Containing Material (ACM) TO BE ABATED	Ma	d Solely intenant odial S	ce/	Asbestos Containin (i.e. thermal syst surfacing,	g Material (ACM) ems insulation,	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
In Facility (13)	000	(12)		other misce	ellaneous)		oval	air	sulate	sure
7/5	Yes	No	N/A	159		16 Apple	V			
(0,)				0.1			-		-	
Name of Registered Waste Hauler		/ 111	JDEP V		ds Name o	f Registered Landfil				
WASTE MANASCI	nen	UV	10)	Disposal E	, 10	ate Angul	<i></i>	1	A	
Completed by	Title,	100	110	L Sign	ature / / / / / / /	ax ) D	ate /	1/	18	)
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048 Proj. #: 17-20

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

JAN 18 2017	m,	C	E		$\mathbb{V}$	E	
La La Santa		JAN	4	8	2017		

										14 U.	E-TATACHUM VIII			15	LABORATO .
Date of Notification				uilding Ow	ner/Oper	rator (2)					TECTO!	2.001	TOO		
Agencies Notified		ion	marta de							ASt	BESTO	NIGNE		La	_
EPA	☑ Initial		Street Addr	ress								1 2 0 11 4		-	-d
☐ DEP	Amended														
☑ DOL	Amendment #:	'	City, State,	Zip Code											
₩ DOL	Emergency		GLEN	ROCK, N	IJ 0745	52				-					
□ DOH	(including justification)	T N	lame of Co	ontact						Telepho	ne Numb	er			
☐ DCA	Cancellation	- 11	marta d	levrup						_					
27					CILITY IN	NFORMA	TION								
Name of facility wi	here abatement i	s taking pl	ace (3)						П	Type of Facility		247			
marta deyrup											ol (K - 1; hapter 8	enteres de la company	nan K	12)	
Street Address									1	STATE STATES	(Private			1.54	
											./Homes				
									. 1	Square Feet	# of Flo	ors	Bio	lg. A	ge
City (5)		Cou	nty (6)					nty Code (7)	П					15	
GLEN ROCK		BE	RGEN				(Sta	te use only)	Н	Current Use (	Prior if be	ing dem	iolisne	a)	
Name of Monitorin					ASCN	VI No	_	Name of Abateme	nt C	Contractor (9)					
7.56.7.5	.9 = = ,		. (-)		,,,,,,,,,,	., ,,,,		D & S RESTO							
Street Address							=	Street Address	INA	TION, INC.				_	
Street Address								20 California	Δν	p.					
City, State, Zip Cod	le .						-	City, State, Zip Coo	_						
Oity, Otate, Zip ood	.0							Paterson, NJ		503					
Project Manager for	r Monitorina Firm	1	IP	hone Num	her		-	Telephone Numbe		703	Licens	se Numb	er		
1 Toject Manager To	r wormoring r int		1.	none ream	bCi			973-345-802				01169			
		10.1			141		_	Name of OSHA M	_	or					
Start Date (10)		Sched	Complet	ion Date (1	11)			D & S Restor	atio	on, Inc.					
02/02/17		02/2	5/17					Street Address							
Occupancy Status	During Abatemer	nt (Check o	only one)					20 California	Ave	enue					
	d/vacated during							City, State, Zip Co	de						
Describe:	erformed outside	of normal	facility hou	urs-											
Other-Descri	be: NORMAL H	IOURS					-	Paterson, NJ	075	503					
Scope of Work (ch	neck all that apply	y)							F	ull Containment	w/negati	ve press	ure		
$\boxtimes$ >3 sf or >3 lf	$\boxtimes$	Renovation	on							/lini-enclosure					
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A-0.50		Is location	n normally	used sole	Iv					ton-Exemples (	) and 140	R	R	E	
Location of asbestos-cor	ntaining	by maint	enance/cu	stodial		escrintin	n of a	sbestos-containing		Amount		e m	e	n	E n
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Registered Waste F	lauler	INID	EP Hauler	ID# I	Cubic Ya	ards of W	/aste	Name of Register	red I	Landfill		_			1-
D & S RESTOR			506		2 yds.			TULLYTOW			RECOVI	ERY			
City, State				Disposal	Date			City, State	19865						
PATERSON, N	IJ 07503			02/03/	17			TULLYTOW	N,	PA					
Completed by (Prin		Title			Signa	ature					Date				
BOGDAN JOL		PRESID			_						01/1	1/17			
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D&S Proj. #: 17-19

VCD 44

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

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	Jan	\$ and	8	2017		

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Date of Notification (1)	Building Owr	ner/Operator (2)	)			AS	BESTO	S CC	NTF	IOL	&						
Agencies Notified Type Notifica	ation	Street Add	ress														
DEP Amended																	
Amendment #	: [	City, State, Zip Code															
DOL Emergency	'	hackensack, nj 07601															
DOH (including justification	,	lame of C	Telepho	ne Numb	er		PH										
DCA Cancellatio	- 11	jorge a	breu														
•			FAC	ILITY INFORM	ATIO	N											
Name of facility where abatement	is taking pl	ace (3)						Type of Facility									
jorge abreu							П		ol (K - 12		h = = 10	(40)					
Street Address									napter 8 ( (Private/			-12)					
C									/Homes,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
City (5) County (6) Cou							В	dg. A	.ge								
City (5)	Cou	nty (6)				unty Code (7)	_										
hackensack	BE	RGEN			(51	State use only)  Current Use (Prior if being demolished)											
Name of Monitoring Firm Hired by				ASCM No.	_	Name of Abatemen	nt Co	ntractor (9)									
			- 1			D & S RESTORATION, INC.											
Street Address					-	Street Address	10/11	1011, 1110.									
						20 California	Ave.										
City, State, Zip Code					-	City, State, Zip Cod	-	A COLUMN TO THE			-						
	Paterson, NJ 07503																
Project Manager for Monitoring Firm Phone Number					Telephone Number					License Number							
						973-345-802	01169										
Start Date (10)   Sched. Completion Date (11)						Name of OSHA Monitor											
01-13-17 01-30-17						D & S Restoration, Inc. Street Address											
Occupancy Status During Abateme			ATTACABLE AND ADDRESS OF THE PARTY.	water to the restriction	-												
Facility closed/vacated during			ement.			20 California A		ue			_						
Abatement performed outside	of normal				ı	Oity, State, Zip Cou											
Describe: NORMAL F	IOURS				-	Paterson, NJ 0	750	3									
Scope of Work (check all that appl							_	I Containment v	v/negativ	nress	ure		_				
	Renovation	n					-	ni-enclosure	mogativ	prooc	uio						
≥160 sf or ≥260 lf	Demolition					፟		vebag procedu									
			used solely	,			No	n-Exempted (*)	and Non	-friable	proc	edure E	_				
Location of asbestos-containing	enance/cu			n of	asbestos-containing	Amount		е	е	n	E						
material (acm) to be staff(12)				material (A				(Specify S	SF or	m o	p	c a	n c				
abated in facility (13)	Yes	No	N/A					LF)		V	i	p	L				
BASEMENT		X		PIPE INSUI	LAT	ION		25 L FT		e	T	П	$\vdash$				
BASEMENT		X		chimney thin				4 sq ft			Ħ	Ħ	計				
attic		X		vent pipe ins				81ft			Ħ	Ħ	〒				
attic		X		attic insulati			c	150 sq ft			ī	一	<del></del>				
BASEMENT		X		BARE HEA	TIN	G PIPES	120 l ft		TIT								
Registered Waste Hauler		P Hauler		ubic Yards of W		Name of Registere		ndfill			_	_					
D & S RESTORATION, INC.	135	06		yds		TULLYTOWN	, RE	ESOURCE RE	ECOVE	RY							
City, State PATERSON, NJ 07503			Disposal D 01-16-1			City, State TULLYTOWN	I D	Α.									
			01-10-1	Signature	A	Dete											
Completed by (Print or Type) Title Signatur BOGDAN JOLDZIC PRESIDENT				Olginature					Date 01/11	/2017							
			for ashesto	e licaneura ava	mnte	nd activities			1.01/11	-2017		_					

Jan 11 2017 04:54PM NJ	Asbestos	Control	609,633	.0664		page 1			T men	100		C	E	П	חת					
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08.5 Proj. #: <u>17-19</u>			State of NJ Notification of Asbestos Abstement (Pursuant to NJAC 8:60 and 12:120)					JAN 18-2								J.				
Date of Notification (1)	П	Name of	Building Ov	/ner/Operator (2	8			-	, L	/4	AOD	Ft,	出	NSI	VIG.	OL &				
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Amendment		City, State, Zip Code									1	-	_		-	•00				
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DCA Cancellate	on	Jorge abreu																		
			FAC	LITY INFORM	ATIC	ON		=	_	Т		-				Ċ				
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jorge abrau							11"		School	od K - 12)										
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City (9)	Can	nty (8)	2			unty Cade (7)		300												
hackensack BERGEN (State use only) Current Use									Jan (P	Tio	f bain	g den	ollahe	ld)						
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Street Address						D& S RESTOR	RATI	ON. IN	iC.											
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Project Manager for Monitoring Fin	161		Paterson, NJ 0	in the East		L Canso Number														
		5			973-345-8020			0												
Start Date (10)	ton Date (1	)	nitor			Т														
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Occupency Status During Absternent (Check only one)								B		1										
Facility closed/vacated during Abatement performed outside	onlire perio	d of abati	ement.		1	City, State, Zip Code			VII DESMAN	t	-			) (350) <u> </u>	- grije					
Describe: NORMAL P					_					1										
Scope of Work (check all that appl						Paterson, NJ 0	-			4										
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2160 mf or ≥260 ff	Demoition					Z	Giove	bag pro	cedur	e										
Location of			used solely				Non-	Exempt	ed (°) i	II CK	Non-fr	R	Proce	E						
asbestos-containing material (acm) to be	nance/cus	Description o			esbestos-containing		Атто		_		e m	В	n	E						
abalad in facility (13)			naterial (AC)			•	(Specify SF o				0	8	C	C						
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BASEMENT		-×		PIPE INSUL		THE RESERVE AND PERSONS NAMED IN	25 L FT 4 sq ft			The second second	×		口							
attic		X		chimney thimble packing vent pipe insulation				Ift.		-	dimension.	N N	4	4	H					
Attic		X		attic insulation				50 sq 1	R	4	A CONTRACTOR OF THE PERSON NAMED IN		-	#	#					
BASEMENT		BARE HEATING PIPES 120 I ft					State of the last	1				H								
Pagistared Waste Hauter  D & S RESTORATION, INC.	NJDE 1350	P Hayler I	25000	ipio Yarda of W Vds	asta	Name of Registered	fill		j											
City, State			Disposel D			City. State	OWN, RESOURCE REC					-			-					
PATERSON, NJ 07503		-	01-16-1			TULLYTOWN,	, PA			-										
Completed by (Print or Type) Title Signature BOGDAN JOLDZIC PRESIDENT								P				C HELL								
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