# CK 9994

### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60-7 and 12:-120-7) -Date of Notification (1) Name of Building Owner/Operator (2) 11/19/12 Princeton University Month/Dav/Year Agency Notified Type Notification Street Address **EPA** Initial P.O. box 2158 DEP Notification City, State, Zip Code DCA Amended Princeton NJ 08543 DOH Notification Name of Contact Telephone Number Cancellation Robert Otego FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Princeton University -- 138-140 Alexander Street School (K12) Subchapter 8 (Other than K12) Street Address Other (i. e. Private & commercial 138-140 Alexander Street buildings, homes, etc.) Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 5000 50+ Princeton Current Use (Prior if being demolished) (STATE USE ONLY) University Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Pennoni Associates Inc Associated Specialty Contracting Street Address Street Address 515 Grove Street Suite 1B 98 LaCrue Avenue City, State, Zip Code City, State, Zip Code Haddon Heights NJ Glen Mills, PA 19342 Project Manager of Monitoring Firm Telephone Number Telephone Number Licence Number Alan Lloyd 856-547-0505 610-364-9622 1103 Scheduled Start Date (10) Sched. Completion Date (11) Name of OSHA Monitor 12/04/12 02/28/13 Criterion Labs Month/Day/Year Month/Day/Year Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 3370 Progresive Drive Abatement Performed Outside of Normal Facility City, State, Zip Code Hours - Describe: 7:00 AM - 3:30 PM Bensalem PA 19020 Other - Describe: Scope of work (Check all that apply) Full Containment with Negative Pressure Demolition Renovation Mini - Enclosure >3 sf or >3 if X Glovebag Procedure >160 sf or >260 lf x Non-Friable Procedure Is Abatement Type Location of Location Description of E E Asbestos - Containing Normally Asbestos-Containing Amount R N Material (ACM) Used Material (ACM) C (Specify E R C TO BE ABATED Solely (ie. Thermal systems SF or M E A L In Facility by Maininsulation, surfacing, VAT, 0 P P LF) 0 (13)tenance/ or other miscellaneous) S A S Custodial A I U U Staff (12) R R N/A Yes No E. Bldg 140 exterior cement board exterior 2025 SF Bldg 140 exterior window caulk 165 LF x Bldg 140 2nd fl bathroom x joint compound 249 SF Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Horizon Disposal 20 GROWS City, State Disposal Date City, State Trenton NJ As needed Morrisville PA Completed By (Print or Type) Title Mark Goshow Project Manager anto

ABS-41

**JUN 95** 

### State of New Jersey

### NOTIFICATION OF ASBESTOS ABATEMENT

		(F		JAC 8:60-7 and		1	c 2	7	3	
Date of Notification (1) 11/19/12				Building Owner/ University	Operato	r (2)	3 - 1 - 1			101
Month/Day/Year		1.0				2013 JAN 22 PM	0.0	1		
Agency Notified	Type Notification		Street Ad			TOTO ONLY ZZ PM	2: 58			
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DOH	Notific Cancell		Name of O			Tele	phone Nu	ımber		
A CONTRACTOR OF THE PROPERTY O				ITY INFORMAT	TION	<del></del>		_		
Name of Facility Where Abate Princeton University 138-1		+1000				Type of Facility (4) School (K1 Subchapter 8		than k	(12)	9.
Street Address				10 19		x Other (i. e.			ercial	
138-140 Alexander Street						buildings, l				-
							Floors	Bldg.	Age	
City (5)	County	(6)		County Code		5000	2	50+		
Princeton				(STATE USE ONL	Y)	Current Use (Prior if University	being der	nolishe	d)	
Name of Monitoring Firm Hir Pennoni Associates Inc	ed by Building Own	ner (8)		ASCM No.		of Abatement Contractoriated Specialty Contract				Ti i
Street Address			***************************************			t Address		- 2		
515 Grove Street Suite 1B					98 La	Crue Avenue	, T			
City, State, Zip Code Haddon Heights NJ					7700	State, Zip Code Mills, PA 19342				
Project Manager of Monitorin Alan Lloyd	ng Firm		Telephone 856-547-0			hone Number 64-9622		Licen 110	ce Numl 3	ber
Scheduled Start Date (10) 12/04/12 Month/Day/Year Occupancy Status During Aba		N	mpletion Date 02/28/31 Ionth/Day/Ye	i	Crite	of OSHA Monitor rion Labs t Address				
Facility Closed/Vacate			batement			Progresive Drive				
x Abatement Performed Hours - Describe: Other - Describe:	Outside of Normal	Facility	3	<u></u>	City,	State, Zip Code dem PA 19020	***	et Ei		
Scope of work (Check all that:	apply)				-	Full Containment with	Negative	e Pressu	re	
x Demolition			Renovatio	on	x	Mini - Enclosure				
>3 sf or >3 if					x	Glovebag Procedure				
x >160 sf or >260 lf					x	Non-Friable Procedur	e			
	Is		T			1.00.11.00.11.00.00.00		atemen	t Type	
Location of	Local		Des	cription of			73.0	I	E	E
Asbestos - Containing	Norm			tos-Containing		Amount	R		N	N
Material (ACM)	Used			erial (ACM)		(Specify	E	R	C	C
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(13)	tenan			r miscellaneous)		- 5- 13-14 I-3,	v	A	S	S
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	_	-11-000-00-00-00-00-00-00-00-00-00-00-00	- Control				-	-		
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W 68 1. 10. 10.		2170	EDW	low v		la co	16			
Name of Registered Waste Har Horizon Disposal		EP Waste ler ID No.	Cubic Yards of Waste		Name of Registered La	indiili				
City, State Trenton NJ	1000 200			Disposal Date As needed		City, State Morrisville PA	de la constitución de la constit			j Ĝ
Completed By (Print or Type)		Title			Signat	<del></del>	11 1	Q.,	Date	
Mark Goshow		Proj	ect Manager		1	Jar Sohn		1.	1-1	F-13

ABS-41

**JUN 95** 

### State of New Jersey

### NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:-120-7)

Date of Notification (1) 11/19/12			Name of I	Building Owner/C	Operato	72/2 PM 2:58				Handala a socia	
Month/Day/Year		8			20		1671				
Agency Notified 1	ype Notificat	ion	333IIII(C)	Street Ad	dress	James 1					
EPA t	Init	ial		P.O. box	2158	) 61 ·	KENSING.		į.		
DEP	No	tifica	tion	City, Stat	te, Zip Code	Ü-	Et J. S.				
DCA	x Am	ended			NJ 08543						
DOH		tifica		Name of C			To	lephone N	umban		
	A100000000	cellat		Robert O			110	rephone N	umber		
					TY INFORMAT	ION					
Name of Facility Where Abatem	ent is Taking	Place	(3)			10.1	Type of Facility (4)				
Princeton University 138-140			(5)				School (K	(12)			
							Subchapter		than K	12)	
Street Address			7/10/2			4	x Other (i. e				
138-140 Alexander Street								homes, et			
								f Floors	Bldg.	Age	
City (5)	Cou	nty (	5)		County Code (	(7)	5000	2	50+		
Princeton	0.0				(STATE USE ONLY	)	Current Use (Prior	f being de	molished	1)	
			11.	-	less services and the services		University				
Name of Monitoring Firm Hired	by Building	Owner	(8)		ASCM No.	Name	of Abatement Contrac	tor (9)		17.	
Pennoni Associates Inc						Assoc	iated Specialty Contra	eting			
Street Address						Street	Address				
515 Grove Street Suite 1B					7 3		Crue Avenue				
City State Tie Code			_			- CT: -	V . W. C .				
City, State, Zip Code Haddon Heights NJ				1,300	State, Zip Code						
3						-	Mills, PA 19342		_		
Project Manager of Monitoring	Firm			Telephone	Name of the Control o		hone Number		Licen	ce Numl	per
Alan Lloyd				856-547-0	505	610-36	64-9622		1103	3	
Scheduled Start Date (10)						Name	of OSHA Monitor		EXCELLERATE STATE		-
12/04/12				02/28/13	3.0000	Criter	ion Labs				
Month/Day/Year			М	Ionth/Day/Ye	ar						
Occupancy Status During Abater	nent (Check o	only o				Street	Address				
Facility Closed/Vacated I	uring Entire	Perio	d of Al	batement		3370 I	Progresive Drive				
x Abatement Performed O	utside of Nori	nal Fa	cility			City, S	State, Zip Code				
Hours - Describe: 7:	00 AM - 3:30	PM					lem PA 19020				
Other - Describe:											
Scope of work (Check all that app	du)						F-II C t-1 t - 1	a Ni a			
Demolition	лу,		- 2	D			Full Containment wi	in Negative	e Pressu	re	
			x	Renovatio	D	x	Mini - Enclosure				
>3 sf or >3 if							Glovebag Procedure				
x >160 sf or >260 lf		2000				x	Non-Friable Procedu	re			
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Location of	100	ocatio			cription of			- 5 -	10.1	E	E
Asbestos - Containing	100	rmall	y		os-Containing		Amount	R		N	N
Material (ACM)	100	Jsed		0.0000000000000000000000000000000000000	rial (ACM)		(Specify	E	R	C	C
TO BE ABATED	130	olely			ermal systems		SF or	M	E	A	L
In Facility		Main			, surfacing, VAT,	6	LF)	0	P	P	0
(13)	1 5000	nance		or other	miscellaneous)		90	v	A	S	S
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	-	ff (12					150	L	R	L	R
Bldg 138-140 exterior garages	Yes	No x	N/A	cement hos	ard exterior	All Income	640 SF	x	-	$\vdash$	E
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Diug 136-140 exterior rear porch		X	_	roof mater	181		200 SF	x			
		_						х .			
207				5	CHOLOROGO	6					
				EP Waste	Cubic Yards	1	Name of Registered I	andfill		14	
Horizon Disposal				er ID No.	of Waste		GROWS				
City, State					Disposal Date	**************************************	City, State				- FE 1/2
City, State Trenton NJ					As needed		Morrisville PA				
					1	Signati	17/	-		Date	
Completed By (Print or Type)  Mark Goshow  Title Proj				ct Manager	1		Julius		×	1-18	-, 5
Mark Goshow Pro					Ł	1110	ou Junu			10	12

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

Initial Emergency Notification Check #: 5224

Date of Notification	n (1)		Nam	e of	Buil	ding	Owner	Operato	r==(2)					
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Agencies Notified					Addre			3 IAM 2	2 04 5 -					_
· [ ]EPA	*		1120	Ceda	ar Stre	et			2 PM 2:58			•		
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(X) DOL	( )Amended		Ne	war	k, NJ	0710	02	& LIC	CHSING NOI.					
(X) DOH	Notific	ation	2 1		E Con				Tele	phone Number				
[ ]DCA	[ ]Cancell	ation	II Do	nuala	s Bla	nd . I	Bus. Ad	lmin.						
			11-				NFORMAT			-			10	
Name of Facility W	here Abatemer	nt is Ta	king						Type of Facili	Ey (4)	- T			
									[X]School	nter 8 (Oth	er th	an F	-12)	
Newark Vocational F	ligh School				n				[ ]Öther	(i.e., privouildings, h	ate &	COR	mer-	
and Mart Kinney Ch									Square Feet	# of Floors	Bro	ig. I	ge	
301 West Kinney Str	reet	County	(6)				inty Cod		35000 Current Use ()	3	50	ema l	sher	1
3.00		_				(ST	ATE USE	ONLY)		ettor ir ber	ng u	,	٠.	-,
Newark, NJ 07103	Firm Hired	Essex by Build	ling	ASC	M No.	1-1	Name o	of Abate	School ment Contractor	<del>(9)</del>				
Owner (8)		•					Faur 6	Strong D	ildore Inc					
TTI Environmental,	lnc.			000	003			Addres	uilders, Inc.				-	
						1	190 9	argeant.	Avenue					
	253 North Church Street						City.	State,	Zip Code					
						Cliftor	n. NJ 070	)13-1935						
Moorestown, NJ 080	or Monitoring	Firm !	Telep	hone	Numi	er	Telep	none Num	ber	Licer	ise N	umbe	_	
Jim Guillardi			856-8			15	10.00	14-0377		0080	7			
Scheduled Start Da		hed.Com					Name	of OSHA	Monitor	1				
0 1 1 1 1 6 1 1	1 3 1	0 1 1 / 1.	1   8	1/1	1   3 Year	1			uilders, Inc.					
Month / Day /	uring Abatem	ent (Ch	eck c	nly	one)		Stree	t Addres						
[ ]Facility Clos							180 S	argeant	Avenue					
(X) Abatement Fer Hours - Descr	formed Outsi	de of N	ormal	L Fa	51112	Y	City.	State.	Zip Code					
[ ]Other - Desci	ribe:				•		Clifto	n, NJ 070	013					
Scope of Work (Che	eck all that	apply)				23		[ ]Full	. Containment w	ith Negativ	e Pre	ssui	e	
[ ]Demolit [X]>3 sf (			(X	Ren	ovati	on		[X]GLov	L-Enclosure vebag Procedure					
[ ] <u>&gt;</u> 160 s	r or ≥260 lf							[ ]Non-	-Friable Proces	lure				
			Tro	Is cati	on T	er +						eme	E	E
	tion of		No	rmal Used	ly		De	scription tos-Con	on of taining	Amount	RE	R	NC	C
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TO BE	ABATED		te	Mai nanc	e/	i	nsulati	on. sur	facing, VAT, cellaneous)	LF)	VA	A	S	5 5 8
. (	13)		St	stod aff(	12)		or ot	ner mis	cellaneods)		L	R	L	R
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Basement Hallway	- 3 Locations		+		+	1 ipc	Tiodiac		10 0	+	-			
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wame of vedizees	w meate nadi		Н	aule	r ID	No.	of Wa							
Four Strong Builde	ers, Inc.		1	260	9		Dispo	sal Date	G.R.O.W.S.,	IIIC.		. 7		
City. State	*						-1300							
Clifton, NJ		, , , , , , , , , , , , , , , , , , ,		1115	an Su	in the same		Signatur	Tullytown, PA	<u> </u>	وا 🚅	ate		_
Completed By (Pri	nt or Type)	Title						J. J.	M					
Bilyana Kulakovsk	a ,	Office /	Admi	nistr	ator	N		0	Out		11	/15/	13	

### State of New Jersey

### NOTIFICATION OF ASBESTOS ABATEMENT

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

4		Name - CD - '1.1'	Outros/Ora	rator (2)	50 11		-		
Date of Notification (1)  January 17, 2013		Name of Building		nt Ronner		ال د	61		
	Notification	Street Address		let Lane	?2 PM 2:5	8			
[X] DOL Amend	ed Notification ment # ency (including	City, State, Zip C	ode Howe	II, NJ 0773 & LIGI	N. Japane	!			
[ x ] DOH	ation)	Name of Contact Huey		Tel	ephone Number		420		
	FAC	CILITY INFORM	MATION						-
Name of Facility Where Abatement is Taking Residence				Ĺi	School (k-12) Subchapter 8 (oth				
Street Address 75 Marcellus Aven	ue				Other (i.e., privat homes, etc.)	e & con	nmerci	al build	ings,
City	County (6)	County Code (7) (STATE USE ON	LY)	Square feet 2500 sf	# of Floors 2	Bldg.	Age 60	)	
Manasquan	Monmouth			Current Use (Prior if I Residence	ce			004	11
Name of Monitoring Firm Hired by Building N/A	Owner (8)	ASCM No.			9) n Contracting,	Inc.	V.		1
Street Address			Street A		ute 9, Unit 61				
City, State, Zip Code					iver, New Jerse		55-12	71	
Project Manager for Monitoring Firm	Telephone Number		732-34	ne Number 49-9932	License N 00624	umber			
Scheduled Start Date (10) 1/17/13	Scheduled Comple 1/18/13		Name o		. Analytical				
	d During Entire Period of A	Abatement		1056 Ste	elton Road				
	Outside of Normal Facility		City, St	ate, Zip Code Piscatav	vay, New Jerse	y 088	54		ii.
Scope of Work (Check all that apply)		11	[	Full Containment Mini-Enclosure	with Negative Pre	essure			
[ ] >3 sf or ≥3 lf	[ ] Reno	ovation	j	Glovebag Procedu					
$\begin{bmatrix} x \end{bmatrix}$ $\geq 160 \text{ sf or } \geq 260 \text{ lf}$	[x] Demo	olition	[ x	] Non-Exempted (*)	and Non-Friable	Procedu	ire		
		T				Abat	ement '	Гуре	2 -
Location of Asbestos-Containing Material (ACM)  TO BE ABATED in facility (13)	Is Location Normally used Solely by Maintenance/Custodia Staff (12) YES NO N/A	al (	Descripti Asbestos-Co Material ( i.e., therma assulation, s VAT, other miscel	ontaining ACM) I systems urfacing, or	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E
Exterior	X	Asbestos sie	ling		2200 sf	X	-		
		1.0				-			-
					V				
Name of Registered Waste Hauler	NJDEP Waste Hau		Yards of Wa		red Landfill		-		
Guardian Contracting, Inc.		posal Date	City,	T.R.R.F.					
Toms River, New Jersey Completed by (Print or Type)	Title	21/13 Signature	Tully	town, Pennsylvania	1 =	Date 1/1	7/201	3	
Nicholas Fernicola	*Do not use this fo	orm for asbestos li	censure exe	empted activities.			1		

\* Emergency \*

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

REK 2958

Date of Notification (1)		,	Bo	ne of Buil yed Scl	aing Own hool	er/Operator	2013	144-	* 5	ED				
Agencies Notified Ty	pe Notification		Stre 12	et Addre 00 bay	ss Bouleva	er/Operator	6335	<5	PA	2:50				_
EPA DEP DOL	Initial Amended Amendment #_	ii	1 City	, State, 2	Tib Cone	NJ 08752	6-1	ICE S	377	. 30 .				
DOH DCA	Emergency (inc justification) Cancellation	luding	Na	me of Co om	ntact				Teler	phone Numbe	er ———			
			7	FACILIT	Y INFORM	ATION	1 =6	Facility (4)						$\dashv$
Name of Facility Where Abo Boyed School Street Address	atement is Taking F	Place (3)*					Sc Su Oti	her (i.e. pri	) (Othe	r than K-12) commercial t	ouildin	gs, ho	mes,	
1200 bay Boulevard City (5)			-		4		Square 1000+	Feet	# of	Floors	Bldg 354	j. Age		
Seaside Heights NJ ( County (6)	)8752		Co	ounty Cod	de (7)	<del></del>	,			ng demolished	i)			
Ocean	<u> </u>			TATE USE			a of Aboto	ment Cont	ractor	(9)				
Name of Monitoring Firm F	lired by Building Ov	wner (8)		ASCM N	0.		naco Inc		lactor					
Street Address							et Address Box 329			-92				
City, State, Zip Code						City, We	State, Zip	Code NJ 080	91					
Project Manager for Monit	oring Firm	W-	T	elephone	No.		phone No 3-753-98			License No.				
Start Date (10)		Scheduled	Comp	oletion Da	ate (11)	Nan	ne of OSH							
1/21/13		1/22/13					me et Addres	s		i i				
Occupancy Status During  Facility Closed/Vaca Abatement Performe Other – Describe:  Scope of Work (Check Al	ited During Entire P ed Outside of Norm	eriod of Ab	ateme	ent		City	, State, Zi	1		= 4				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	1100, 45-77		novat moliti				Mir	ni-Enclosur	e cedure	h Negative Po e nd Non-Friabl	e Prod	cedure		
		ls I	ocati	on:			=				1	Abate Ty		i
Location Asbestos-Containing TO BE AB In Faci (13)	Material (ACM) ATED lity	Used Mair	ormall Sole ntenar odial S (12)	ly by nce/ Staff?	Asbest (i.e.	Descrip os Containir thermal syst surfacing other misco	ng Materia tems insula VAT, or	ation,		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Elicioanic
		Yes	No	N/A		Flor	u tilo		+	10 Sf	x			T
office a	area			X		Floo	rtile			10 01	-	-		1
		-	_	-										I
(1) + 1 <sub>1</sub> 1							1	- 1	-	energy (A				L
Name of Registered Wa	aste Hauler		l i	NJDEP V Hauler ID		Cubic Yar of Waste	rds	G.R.C		stered Landfil				
United Containers  City, State				2459		Disposal		City, St						
Elm NJ Completed by		Title	<u>.</u>	Esta S		1/22/13 Sign	nature	74	7		ate /1 0 /1	3		
Completed by			ident			1	11/	1/~	-	1	/18/1	3		

CRH

1737

### State of New Jersey NOTIFICATION OF ASPESTOS AUATEMENT

2013 JAN 22 PH 2:58 (Pursuant to NJAC 8:60 and 12:120) Name of Bullding Owner/Operator (2) Date of Motification (1) Street Address Type Motification Agencles Notified 10 Initial City, State, Zip Code ) Amended Telephone Number Amondment # DOD. | Emergency (including justification) NOOH Cancellation Lam DCA EVEITIA INEOSSIVATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) ☐ School (K-12) Subchapter 8 (Other than K-12) Other (i.e., private & commercial buildings, BullDans homes, etc.) Bldg. Age Street Address 表 of Floors Square Feet 1500 Current Lise (Prior if being demolished) County Code (7) (STATE USE ONLY) County (6) Name of Abatement Contractor (9) MONMOUTL Name of Monitoring Firm Hired by Building Owner ASCM No. TUSULATION ACE Street Address 95 MENIBUS Street Address City, State, Zip Code Noch COLTS City, State, Zip Code License No. Telephone No. 0002 732 2°14 7.75 Name of OSHA Monitor Telephone No. Project Manager for Monitoring Pirm Scheduled Completion Date (11) ALC INSULATION Start Date (10) Street Address Occupancy Status During Abatement (Check only one) 95 MONTRONE Security Closed/Vacated During Entire Period of Abatement City, State, Zip Code [] Abatement Performed Outside of Normal Facility Hours
[] Other - Describe: 7 Am 7 AM COLTI JAm-[ ] Other - Describe: ] Full Containment with Negative Pressure Scope of Work (Check all that apply) Mini-Enclosure Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Conovation 1/3 st or ≥3 li Demolition Abatement ≥160 st or ≥260 H Type ts Location Mornally Description of Amount Used Solely by Asbestos Containing Material (ACM) (Specify Remove Location of (i.e., thermal systems insulation, Maintenance/ Asbestos-Containing Material (ACM) SF or LF) surfacing, VAT, or other miscellaneous) Custodial TO BE ABATED Staff? IN Facility (12)10011 No Yes Name of Registered Landfill Cubic Yards NJDEP Waste GROWS Name of Registered Waste Hauler of Waste Hauter ID, No. INSULATION a Disposal Date City, State Signature Colis Completed By ASD-41

State of New Jersey

CK 1737013 JAN 22 0 50 NOTIFICATION OF ASDESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) Street Address Agencies Notified DOL Initial Amended CLARIE Amendment# Emergency (including Name of Contact justification) NOOH DON Cancellation DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3 School (K-12) Subchapter 8 (Other than K-12) Other (i.e., private & commercial buildings, homes, etc.) Bldg. Age # of Floors Square Feet 5000 Current Use (Prior if being demolished) County Code (7) (STATE USE ONLY) WARE HOUS County (6) Name of Abatement Contractor (9) MION ASCM No. Name of Monitoring Firm Hired by Building Owner INSULATI Street Address 95 MONIROLE Street Address City, State, Zip Code City, State, Zip Code License No. Telephone No. Telephone No. Project Manager for Monitoring Pirm Scheduled Completion Date (11) ALE INSVIATION Start Date (10) Street Address Occupancy Status During Abatement (Check only one) 45 MONTROIT Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours Other - Describe: 7Am 7PM ] Full Containment with Negative Pressure Scope of Work (Check all that apply) Mini-Enclosure Renovation Movebag Procedure Non-Exempted (\*) and Non-Friable Procedure ≥3 st or ≥3 If Demolition Abatement ≥160 sf or ≥260 lf Type ls Location Nonnally Description of Used Solely by Asbestos Containing Material (ACM) Amount Location of Maintenance/ (Specify Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, SF or LF) Custodial surfacing, VAT, or other miscellaneous) TO BE ABATED Staff? IN Facility (12)(13)NIA No Name of Registered Landfill Cubic Yards NJDEP Waste Name of Registered Waste Hauler of Waste ACE THISULATION COTHE City, State COLTS Signature Completed By ASD-41

# State of New Jersey NOTIFICATION OF ASSESTOS ABATEMENT

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ate of Notification (1) / -/8-13				Owner/Operator	1218	and the second second second		)` ج	20	ا.
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DCA Cancellation		EACIL	JOUL INF	ORMATION	And the second s	graph to the country of the country				-
ame of Facility Where Abatement is Taking Place	e sensos politicados de punta sensos politicados de Sil		ementer gergenamen maken av d s.A. d Zener gerender berenning of		Type of Facility School (K-12) Subchapter Other (i.e., p homes, etc.)	) 3 (Other than K-12) rivate & commercial	buildir	igs,	15 44 40 40	
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County (6)	3 213	County USE O		I) (STATE	Current Use (P	ior if being demolish	ned)		man et man	
Name of Monitoring Firm Fired by Building Owner  8)	<u>1</u>	SCM No		ACK	and Contractor (	TON CO	$\mathcal{I}_{L}$	VL		_
Street Address	remend.			Street Address	NIROSE	RU	ger and allow your district	energe on the second	and made to the con-	=-
city, State, Zip Code				The street of the state of the	Neck N	C 07722	and a september to day		in and inter-	
Project Menager for Monitoring Pirm	Telep	phone N	0.	Telephone No.	11757	License No.	<u></u>	entering district		
Start Date (10) Scheduled	1=	ion Date	(11)	Name of OSHA  ACC J Street Address	WSULATIO	de to	L	edjament je til de Levig grap dje sered		
Occupancy Status During Abatement (Check on Facility Closed/Vacated During Entire Period of Abatement Performed Outside of Normal Facility Other - Describe:	of Abaten	nent		Gity, State, Zip	Code		72		engya disense	Acceptant
Scope of Work (Check all that apply)  3 st or ≥3 lt  7 > 160 st or ≥260 lt	3enovalio		ger vergende vert en en en	Minist	ontainment with N nclosure bag Procedure Exempted (*) and N	egative Pressure Ion-Friable Procedu	ire	and the state of t	case see	*****
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Yes	s No	MW	ing warner ways problem	SININE		2000	/		r_r	
	open of tellmanter of		A STATE OF THE STA		The control of the co	And the control of the production of the control of				1844-181
				The state of the s	I Name of Re	gistered Landfill	1	J	<u></u>	
Name of Registered Waste Hauler  ALE INSULATION CO	1	UDEP V tauler ID 1208	Vaste No.	Cubic Yards of Waste	GR	ows	Taken and the second		Company of the	
City, State Colis Ned N.J		)2		Disposal Date	2 1 41	LYTOWN		0/	1	77
Completed By	0)	mo	R	Signaturo	1 1	1/-	18	L	ረ ረ	

130 March Control of the Control of Name of Building Owner/Operator (2) Date of Notification (1) 18-13 Type Notification Agancies Notified L Initial Amended City, State, Zip Code Amendment # Toms Emergency (including DOH justification) BIARS DCA Cancellation FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) VULKS WARREN ] School (K-12) Subchapter 8 (Other than K-12) Other (i.e., private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age 2600 Current Use (Prigr if being demolished County Code (7) (STATE USE ÓNLY) Name of Abatement Contractor (9 Name of Monitoring Firm Hired by Building Owner ASCM No. ACE INSU Street Address Street Address 95 MONTROSE City, State, Zip Code City, State, Zip Code COLTS Noels Telephone No. License No. Project Manager for Monitoring Pirm Telephone No. 731 294 Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) ALE INSULATION Occupancy Status During Abatement (Check only one) Street Address 45 MONTROIT Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code [ ] Other - Describe: 11Am COLTI NEUL Scope of Work (Check all that apply) Full Containment with Negative Pressure 3 st or ≥3 lf 160 st or ≥260 lf enovation Mini-Enclosure Glevebag Procedure Demolition Non-Exempted (\*) and Non-Friable Procedure Abatement ls Location Type Nonnally Used Solely by Description of Location of Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Maintenance/ (Specify (i.e., thermal systems insulation, TO BE ABATED Custodial surfacing, VAT, or other miscellaneous) Staff? SF or LF) IN Facility (12)(13)N/A Yes No BURNED Cubic Yards Name of Registered Landfill Name of Registered Waste Hauler NJDEP Waste Hauler ID, No. INSULATION a Disposal Date City, State Signature Completed By JARK ASB-II

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Date of Notification (1)	2	Name of Build	ing Owner/Operato		20.		1
, , , , , , , , , , , , , , , , , , ,	)		Joe R	obertso	2013	JAN	
□ EPA D≪nitial		Street Address	45 C	Range	AUE	JAN 22 PA	4 2
DEP Amended  Amendment #		City, State, Zip	And the second second second	, J	4	743215	44
☐ Emergency (inclu	iding	Name of Conta		Haven	NJ	10770	1
DOH justification) □ DCA □ Cancellation					Telephone Num	ber 'W/W/	5
	· · · · · · · · · · · · · · · · · · ·		Kobects	67	16		
Name of Facility Where Abatement is Taking P	Place (3)	FACILITY IN	FORMATION	T Fire 14 En line			
_ ^		11.		Type of Facility	(4)		
Street Address 92 Grange	121	<u>uelling</u> !		Other (i.e. pr	8 (Other than K-12 ivate & commercia	) al buildings,	
City (5)	1406			homes, etc.)		150	
Fair Haven	NJ	- A7	704	Square Feet	# of Floors	Bldg. Age	
County (6)	100	County Code (	0 - /	Current Hea (D	rior if being demoli	75t-	•: 
Monmouth  Name of Monitoring Firm Hired by Building Own	1 400	ONLY)				shed)	
	ner ASCN	No.		ment Contractor (9			
(8) EPC Technologies		MA	EP	C lechi	nologies	Inc	
Po, Box 337			Street Address	P.O. Box	_		
City State 7in Code			City, State, Zip	Code	007		
New Egypt NJ (	18233		Neu	Egypt	NJ O	8233	
Project Manager for Monitoring Firm	Telepho		Telephone No.	377	License No.		
Steve Schenker	609 7	58-3365	609-758	-3365	00	394	
	age 13	te (11)	Name of OSHA				
Occupancy Status During Abatement (Check on			Street Address	- recin	ologies.	TVC	
Facility Closed/Vacated During Entire Period	of Abatement			Bex ?			
<ul> <li>Abatement Performed Outside of Normal Fac</li> <li>Other – Describe:</li> </ul>	ility Hours				NJ C	8533	
Scope of Work (Check all that apply)			/vew	Egypt	143 0	70000	
		☐ Renovation			Negative Pressure	,	
≥ 3 sf or ≥ 3 lf □ ≥ 160 sf or ≥ 260 lf		☐ Demoliţion	Glove	Enclosure ebag Procedure Exempted (*) and	Non-Friable Proce	edure	
	Is Location	on				Abatem	
Lastin of	Normali	у			200	Туре	=
Location of Asbestos-Containing Material (ACM)	Used Solel Maintenan		Description of stos Containing Ma	Company was a second	Amount		n
TO BE ABATED	Custodia		, thermal systems	insulation,	(Specify	Repair	Enclosure
IN Facility (13)	Staff? (12)		surfacing, VAT other miscellane		SF or LF)	Repair	losu
	(12)					a   7   a	Te la
	Yes No	N/A .					$\perp$
Basement Boiler Room	*	Pipe	Insula	tien	40 LF	×	+
Name of Registered Waste Hauler	ID No.	aste Hauler	Cubic Yards of Waste	Name of Regist			
EPC Technologies		7000			Monager	nent	
NE NJ			Disposal Date	City, State  Monnis	ville	PA	
Completed by Schenker Title Pres	sident		Signature Ste	ve Schen		1-18-13	3

Date of Notification (1)		1	Name of	Building Owner/Operator	(2)	2012 12	- 1			
Date of Notification (1) 1-18-13				David	Zack	2013 JAN 22 DW	- C-194	300 Miles	1732	1
Agency Notified Type Notification	7.111		Street A	ddress			: 5	0		
		13. 11			Jaklana	Steel "	- 0	3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 -	-	1
□ DEP □ Amended		int (	City, Sta	ite, Zip Code	L V A	VJ-1010770	bu			1
DOL Amendment #	ina			Kea I	Bank, 1	Telephone Number U	AL.			1
MI DOH justification)	9			Contact wid Zac	r	Telephone Hamber				
□ DCA □ Cancellation					<u> </u>		-	-	-	1
• • • •			FACIL	ITY INFORMATION		745			_	4
Name of Facility Where Abatement is Taking Pla	ace (3)				Type of Facility	(4)				
Multi-Aparti	nent	5			☐ School (K-12	) (Other than K 12)		00		
O. Address					Subchapter 8	(Other than K-12) vate & commercial buildings	s,			
31 Oakland	Sta	ce	4		homes, etc.)					4
City (5)					Square Feet	# of Floors Bldg. A	_			
Red Bank	102	-		1701	10		5 t			-
County (6)	0 - 0			Code (7) (STATE USE	Current Use (Pr	rior if being demolished)				
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Name of Monitoring Firm Hired by Building Own	er /	ASCM	No. /		ment Contractor (					
(8) EPC Technologies			N/A	EP	c lechi	nologies. In	C			4
Street Address				Street Address	n -	77~				
P.O. Box 337					P.O. Bo	x 33 f	-			4
City, State, Zip Code				City, State, Zip	Code		2.5			
News Egypt NJ	182	33		Neu	Egypt	License No	))	_		$\dashv$
Drainet Manager for Monitoring Firm	10	ichiloi		Telephone No.	776~	0039	j			1
Ctorp Schenker	160	975	78-3	365 609-758 Name of OSHA	-3365	0001	_			$\dashv$
Start Date (10)			te (11)			alogies To				
1-28-13 2-	5-	12		Street Address	- Tearr	alogies, Inc				7
Occupancy Status During Abatement (Check or	nly one)			D,	J. BCX	227				
Facility Closed/Vacated During Entire Period	of Abat	ement	8	City Ctato Zin	Code				7	
Abatement Performed Outside of Normal Par	cility Hou	urs .		Nec	Egypt	NJ 085	33			
Other – Describe:		-			100 TO 10					
Scope of Work (Check all that apply)			- n		Containment with i-Enclosure	n Negative Pressure				
≥≥ 3 sf or ≥ 3 lf		22	☐ Rend ☐ Dem	olition ~PGIo	vehan Procedure	•				
☐ ≥ 160 sf or ≥ 260 lf		22		O Nor	n-Exempted (*) ar	d Non-Friable Procedure	Δ	oater	mer	21
	Is	Locati	ion				-	Typ		
	1	Vormal	ly	Description	of	8				
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Asbestos-Containing Material (ACM) TO BE ABATED	100000000000000000000000000000000000000	custod		(i.e., thermal system	ns insulation,	(Specify SF or LF)	Remova	Repair	aps	Enclosure
IN Facility		Staff?	,	surfacing, VA other miscella	neous)	0. 0,	oval	ar.	ncapsulate	sure
(13)	*	(12)	,					-	0	
	Yes	No	N/A			1/2015	100	$\vdash$	-	
Boss and County Spice	X			Pipe Insul	ation	180 LF	x	-	-	
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	1				ante-Santa		1		_	1_
Name of Registered Waste Hauler	NJ	DEP	Naste H			istered Landfill	i			
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EPC Technologies		/	101							
				Disposal Date		is solly PA				
City, State NJ					3 Morr	Date			_	_
Completed by Title Day	esid	01	4	Signature	Terro Sch	when 1-	1	8-	1	3
Stone Schenker IK				<u> </u>	ed activities		-	_	-	
• Do no	ot use th	is forr	n for as	bestos licensure exempte	ed activities.	~				-

ASB-41

### NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-

				(			Filher to	WED-		Che	CK #	702	9
Date of Notification (1)	1/15/13	Nan	ne of	Building (	Owner/O	Operator (2) Hopmental Ce	ADER IAM	to the Land					
		140	1.0.1	discip		no princincal a se	-013 JAN 22	PM 2. C.					
Agencies Notified	Type of Notifica	tion Stre	O MA	aress nnisink	Pos	d		111 5.38			£ .		
[] EPA	[] Initial	16	9 IVII	HHSHIR	Rua	iu <sub>Ž</sub>	SUFFITE	YEING TOL					
[] DEP	Notification	1 -0"	01-1	- 7:- 0-	do		& 1 10 F	Y -11111-111					
	[x] Emergency	City		e, Zip Co			~ LIUE	YSING					
[X] DOL	[] Amended	10	towa	a, NJ 0	7511								_
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[] DCA	11 Consollation	100000			htor			1					
	[] Cancellatio	"   516	even	Slaug				L					
				F	ACILIT	Y INFORMATION	- A		-			1000	
Name of Facility Whe	re Abatement is Ta	aking Place	(3)				Type of Faci	aal (V 12)					
Administration C							Sub	chapter 8 (Other er (i.e. private and	than K-12)	المائيينا			
Street Address							[] Oth	er (i.e. private and nes, etc.)	a commercia	Dulla	ngs,		
	) and						1101	1103, 010.)					
169 Minnisink R	luau						Square Feet	# of Floor		ldg. Ag	ge		
O:L : /E\		County (6	()		Cou	unty Code (7)	6000	1	Committee of the Commit	70			
City (5)		Passai				ATE USE ONLY)		(Prior if being der	molished)				
Totowa					,		office	(0)			-		-
Name of Monitoring F	irm Hired by Build	ing Owner	A	SCM No.		Name of Abatem	nent Contractor	(9)	anii aa 1	20			
Whitman Comp							Jupiter Env	ironmental S	ervices, i	NG.		_	_
Street Address	-					Street Address							
7 Pleasant Hill I	Road					3	3 Lynn Cou	rt					
	TOBU					City, State, Zip C	Code	to the same and the same and					
City, State, Zip Code	2512						Lincoln Pa	rk, NJ 07035					
Cranford, NJ 08		Toloni	2000	Number		Telephone Num			License				
Project Manager for N	Monitoring Firm	722	200	-5858		Telephone Ham	973-709-0	200		(	800	52	
Kevin Lovely						Name of OSHA							
Scheduled Start Date		ed. Comple		Date (11)		Name of Oor IX	I&S Envi	ronmental La	boratorie	s, LL	C		
1/16/1	C2555	1/21			1.0		J Q O LITT	TOTAL TOTAL				-	
Occupancy Status Du	uring Abatement (0	Check only	one)			Street Address	2222	22 14/					
[] Facility Clos	ed/Vacated During	Entire Per	riod o	Abatem	ent	Francisco Control Cont	2333 Route	2 Z V V					
	erformed Outside	of Normai	raciiii	y nours -	-	City, State, Zip (	Code				50		
	cribe: scribe: <u>partially va</u>	cated					Union, NJ	07083					
***** ********************************		<u>outou</u>									-		-
Scope of Work (Chec	ck all that apply)						[]	Full Containmen	t with Negati	ve Pre	ssur	е	
53 D				[]	Renova	ation	įχj	Mini - Enclosure	•				
<ul><li>[] Demolition</li><li>[x] ≥3 sf or ≥3</li></ul>	ıf						[x]	Glovebag Proces	dure				
							[]	Non - Friable Pr	ocedure				
[] ≥160 sf or ≥	200 11	I le	ocat	ion T			-			- 1, 1, 2, 3	Abate	emei	nt
			Locat nally l			Desc	cription of				ype	1 =	
Locati	on of		olely I				- Containing		Amount		R		
Asbestos -				ce/Cus			rial (ACM)		(Specify SF or LF		E E		N
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TO BE A						insulation,	surfacing, VAT niscellaneous)				/ i	P	1 0
In Fa				1		or other n	niscellarieous)		*		A F	1	
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				-			1 11	Registered Landfil				_	-
Name of Registered	Waste Hauler		TOWNS TO COME	<b>Naste</b>	1 2	Cubic Yards							
Jupiter Environ	mental Servi	LES I		D No.	10	of Waste 2	Minerva	a Landfill					
			)4782				City, State	<u> </u>			125		
City, State						Disposal Date		sburg, OH					
Lincoln Park, N		4.	1000		1	1/25/13	vvayile	obuig, Oil	Date				-
Completed By (Print		Title	10			Signature	1	7		5/13			
Pane Repic	C-9000/ 20	Gen	eral	Manag	ger	1	( )	~	17 13	110			
2	74.		ET		3	1/2				-		-	
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					State	of New Jersey	E <sub>2</sub>	u lad					
			NOT	IFICATION	ON OF	ASBESTOS AB	ATEMENT	nni	-101	A	f		
r e			1000000			AC 8:60-7 and 12:	120-17- 119	38		Che	CK#	7029	<b>-</b> ,
Date of Notification (1)	1/15/13	Na: No	ne of I	Building Clersey	owner/O Devel	opmental Cer	nter (	Col.	115 2	di3	1		_
Agencies Notified	Type of Notificat	ion Str	eet Ad	dress	Door		THEM		- 1/p/	-			į.
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[X] DOF	[] Amended	1	towa	a, NJ 0	7511			124					
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[] DCA	[] Cancellation	St	even	Slaug	hter					-			
	<u> </u>			F/	ACILITY	INFORMATION	ires						
Name of Facility Where	Abatement is Ta	king Plac	e (3)	- Challendar			Type of Facility	(4) (K-12)					
Administration C	enter, NJDC						Subch	(K-12) apter 8 (Other t i.e. private and	than K-12) I commercia	l buildi	ngs,		
Street Address	2.0.4						homes	s, etc.)					
169 Minnisink Ro	oad					J. Sanda	Square Feet	# of Floor		idg. Ag 70	ge		
City (5)	Cantilla III	County (	1000	1000	Cour	nty Code (7) ATE USE ONLY)	Gurrent Use (P	1 1 for if being den		10			
Totowa		Passa	ic		(SIA		office		<u> </u>				_
Name of Monitoring Fit	rm Hired by Buildi	ng Owner	A	SCM No.		Name of Abaten	nent Contractor (9) Jupiter Enviro	nmontal Si	ervices I	nc.			
Whitman Compa				-	_	Street Address	Jubilei Eliviro	Innerital C	01 110001 1				-
Street Address	)aad					alleet Address	3 Lynn Court	de la companya de la La companya de la co			dedysk transition		
7 Pleasant Hill R City, State, Zip Code	wau .					City State, 7ip (	Code	*** 07005		350			
Cranford, NJ 08	512				2		Lincoln Park,	NJ U/U35	License	Numb	er		
Project Manager for M	onitoring Firm			Number		Telephone Num	973-709-020	0	2.0000		300	52	
Kevin Lovely	(do) Look	d. Compl		-5858 Date (11)	-	Mana of OCUA	Monitor				_		
Scheduled Start Date 1/16/13			1/13	, , , , , , , , , , , , , , , , , , ,	-		J & S Enviro	nmental La	boratorie	s, Li	·C	, il	
Occupancy Status Du	ring Abatement (C	heck only	one)			Street Address	2333 Route 2	2 141					
<ol> <li>Facility Close</li> </ol>	d/Vacated During	Entire Pe	eriod o	v Hours -	ent	City, State, Zip	THE RESERVE AND ADDRESS OF MEDICAL PROPERTY.	.2 44					
Desc	ribe:					Gity, State, Zip	Union, NJ 07	083					
Accordance	cribe: partially vac	cated									-		
Scope of Work (Check	k all that apply)						THE PARTY OF THE P	ıll Containment ini – Enclosure	t with Negati	ve Pre	ssur	Э	
[] Demolition				[]	Renova	tion	fyl G	ovebag Proced	dure				
[x] ≥3 sf or ≥3 lf [] ≥160 sf or ≥2			粉				( ) N	on – Friable Pri	ocedure		* L - S		
The section of the se			Locat			Don	cription of			1.0	Abat Type		16
Locatio	- of		mally bolely				s - Containing		Amount		RIF		
Asbestos – C		Main	tenand	e/Cus		Mate	rial (ACM) rmal systems		(Specify SF or LF		MI	C	C
Material ( TO BE A		todi	al Staf	1 (12)		insulation.	surfacing, VAT,				O A		L
In Fac			1			or other	miscellaneous)			1	7.1	S	S
(13	)	Yes	No	N/A				1	215	-	L	U	U
Basement - two loc	cations	×			TSI-	pipe/elbows	- Al		6 LF	-+	X	+	+
												T	T
		-	-	-		-3/4/2/15/2/15/						I	
Name of Registered \	Maste Hauler	I N	JDEP	Waste 1	C	ubic Yards	Name of Reg	istered Landfil	L.	162			18)
Jupiter Environ	mental Service		auler I	D No.	0	f Waste 2	Minerva I	andfill			47. J 50.5	14	
			04782	4	- In	isposal Date	City, State						
City, State Lincoln Park, N	J					1/25/13	Waynest	urg, OH	Date				
Completed By (Print		Title			i de la composición della comp	Signature	1 10			5/13			
Pane Repic		Ger	neral	Manag	ger	1/2		<u></u>		m.Wars.			

ASB-41

\* Emergency \*

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

RECK - 2956

Date of Notification (1) 1/16/13	No.		1	Name of Robert	Building C	Owner/0	Operator Reside	(2)			of our pro-		•		J. 100 1990.	
Agencies Notified Ty	pe Notification			Street Ad	Idress arine Ro	ad		_ZU,	13 JAN 22	PA	1 0					
DEP DOL	justification)		-   '	Wareto	own NJ (				21182		ephone/Nu					-
DCA L	Cancellation					DHAT	1011			1						
Name of Facility Where Aba Robert Bloodgood / Re		Place (3)		FACIL	ITY INFO	OKMAI	ION		of Facility (4) School (K-12)							
Street Address 121 Marine Road	=19							×	Subchapter 8 Other (i.e. pri etc.)	vate 8	& commerc	cial bui		285		s,
City (5) Waretown NJ 08758					-			1000	5050	1	Floors	3	31dg. 35+	Ag	e	
County (6) Ocean				County C STATE U	code (7) ISE ONLY)				nt Use (Prior dence	if bei	ng demolis	shed)				
Name of Monitoring Firm Hir N/A	red by Building (	Owner (8)		ASCM	No.		11 20 20 20 20 20 20 20 20 20 20 20 20 20	of Aba aco Ir	tement Contr	actor	(9)					
Street Address			-					Addres			*					
City, State, Zip Code									ip Code n NJ 0809	1						
Project Manager for Monitor	oject Manager for Monitoring Firm							none N 753-9			License 00727	No.				T
-Start Date (10) 1/17/13							Name Sam		HA Monitor		*					
Occupancy Status During A	batement (Chec	k Only One	e)				Street	Addre	ss					20		
Facility Closed/Vacated Abatement Performed Other – Describe:							City, S	State, Z	ip Code							
Scope of Work (Check All T ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	hat Apply)	-	enova	7.7		25	· •	Min	Il Containmer ni-Enclosure ovebag Proce n-Exempted	edure	174			ure		
		ls I	ocati	on.											nent	
Asbestos-Containing Ma	Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)					tos Cor therma surfa	escription ntaining N al system acing, VA miscella	Materia s insula T, or		(5	mount Specify F or LF)	Removal	T	Тур	e Encapsulate	Enclosure
Exterior Sid	Yes Exterior Siding					Ext	erior Si	ding		10	300 Sf	×	+	+		
									1				I			
Name of Registered Waste	Hauler		IN	JDEP W	laste	Cubi	c Yards		Name of R	eniete	ered Land	FIII				
United Containers	, lauroi		H	lauler ID 2459		of W			G.R.O.V		Land					
City, State Elm NJ						Dispo	osal Date	•	City, State Morrisvil		A 19067		-			T.
Completed by Anthony T Perna	pleted by Title						Signatur	e				Date 1/16/1	3		14	



Date of Notification (1)	1 1/1	17	Name	of Build	ing Owner/Operal	lor (2)				j.,		
Agency Notified	Type Notification	13		201.	3.1AM 22 -	To	m P	RR	0			
D EPA	Monitial	\$	Street	Address	50	17/58.	1	Λ				
D DEP	Amended	ί	City, S	tate, Zip	Code	van	Liew	AU				
f .	Amendment #	luding	<u> </u>		& LIVINI	town	NJ	08	185	SC	)	
D DCA	justification)  □ Cancellation		Name	of Conta	PiRR	_	. Tolonhone	ki				
*		· ; ·	FACII	C) V P	FORMATION	.0						
Name of Facility Where	Abatement is Taking	Place (3)			- Citimation	Type of Faci	lity (4)		-			
Singl	e tam	ily J	DEVE	elliv	15	☐ School (K						
Street Address	1/00 1		Aire	,	J	☐ Subchapte	er 8 (Other than I	K-12)				
City (5) 00	van (	-6m	MUE			homes, el	(c.)		- 1			
Mill	town	N.T	- 0	38(	56	Square Feet	# of Floors		g. Ag			
County (6)			County		) (STATE USE	Current Use	(Prior if being de		60	7		
Midde	chesex		ONLY)	dr.				nomonou,				
Name of Monitoring Firm (8) F PC Terr	Anclogies		CM No.			ment Contractor						
Street Address	ringingles	,	MA		Street Address	c lect	mologie	SI	20			
P.O. Box	337				Oli cot Address	POR	x 337					
City, State, Zip Code New Equi	TN +0	08533	2		City, State, Zip	Code	100-100 Properties			-		
Project Manager for Monit			one No.		Telephone No.	Egypt		083	:3	3_		
Steve Sche		609	758 -3	365	609-758	-3365	License No.	2039	181			
Start Date (10.)	Scheduled	Completion D	)ate (11)	245	Name of OSHA	Monitor		S-1-2-			-	-
Occupancy Status During	Abatement (Check of	inly one)	2		EPC Street Address	- Techi	rologies	, In	C		33	
■Facility Closed/Vacated	¥200					Bex	227					
☐ Abatement Performed C☐ Other – Describe:	Outside of Normal Fa	cility Hours		Ì	City, State, Zip C	Code	JJ 1.		- 7			
Scope of Work (Check all t	that apply)				New	Egypt	NJ	085	33	3		
See ≥ 3 sf or ≥ 3 lf			□ Renov		□ Full 0	Containment wit	h Negative Press	sure			(4)	
□ ≥ 160 sf or ≥ 260 lf			□ Demol		☐ Glove	Enclosure ebag Procedure Exempted (*) ar	nd Non-Friable P	rocedure				
		Is Loca	200						A	bate		nt
Location	[6] [1] (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	Norma Used Sole			Description of					Ту		
Asbestos-Containing I TO BE ABA	TED	Maintena	Maria Company	Asbest (i.e.,	tos Containing Ma thermal systems	iterial (ACM) insulation,	Amour (Specif		R	20	Encapsulat	E
IN Facilit (13)	У	Staff* (12)			surfacing, VAT, other miscellane		SF or L		Removal	Repair	nsde	Enclosure
		Yes No	N/A						<u>a</u>		ate	6
Basement Fu	ancie am	×		Cacl	board T	CT.	2 CE . 1	1200	-	$\vdash$	-	
easement tu	mac ran.		1	Cara	Dearet 1	3-L	35F +0		X	H	-	_
									H	$\forall$	+	
	+								$\Box$			
lame of Registered Waste		ID No.	Vaste Haul	1 188	Cubic Yards of Waste	Name of Regi			,			- 4
EPC Techno	alogies	1	1000	0	2	Waste	Manag	emen	+			
ity, State	11		10 2	1	Disposal Date	City, State		PA				
ompleted by	.Title		1	5	1-16-13 Signature - 5	Monni	sville	Date		- 1		
iteve Schenk		sident	- 1		Sle	ve) Sch	he	l-	14	- [	3	
SB-41	* Do not	use this form	for asbest	os licen	sure exempted a	ctivities.			-		_	

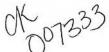
RECEIVED IN TEN 13 TAN 22 TRM 23 3800 - MAIL IN HARD COPY Dan's Austral & LICENS JEPA ATS UTER manue: · MACCO s seephors and # у Б÷. У ; и 1.15 .4 1.41 .4 water: Bisit & Sept. Sept. 1. li1 (4) dan e it 💒 ... get that it provide & commercial leftings Site is Add to 1 toret. Filly 5; 1 27 600 -1. 6 5 ere a soul foor que : m Hi i dre it es sett sitti Consider Sweet Till to vo are ent lectimologies .... h E fit PC in New . 08533 Temp and the of 15.8 1 Caller of the 43 5(≠.... m.at 7.2-13 . It. Fact to yo DANSEMENT FOR FAMILY AND THE TOP AND PRODUCT OF ACTION O A Francis Other - > Scope of the control of the control 11 - 12 of trans 1 Haugative Pressure Region Fig. Willes the case of Balto of 10. P. AG 10. Triad Trick float Francis Francis JON TH U41-5-1 Ai Lant Stones : Pa, Herby sto Enclosure Encapsulate 10 4 1 . 34 411:14 3 1 to 32 . 14 . F. 1 . de . te . AT 1 10 6 1 1 11 14 · Miles The Control of the Co Wilson Per \$ | 311 Sief : 3 45 67 . 64 150 I'm with me had THE PROPERTY What restants ଧାର ପ୍ରାୟକ ଅଳ grante Monage most Chy State | State
| Compend b Hesiden. \$57€CE\* 1 - pi apa - a T 18 A. S. C. 433-4

CHECK # 19678/(1)5746

Date of Notification (1 01-16-13	)		1	lame of Jornad	Building ( o Realt	Owner/Op y Trust	perator (2) / North Pl	ainfjeld.	<del> \</del>	W.TVE	(1)			
Agencies Notified	Type Notification	-	5	Street Ad 210 Ro	dress ute 4 E	ast	11		11/22	? PM 2	:50			
EPA DEP DOL	Initial  Amended  Amendment  Emergency		_   1	ity, State	e, zip Co us, NJ 0	ae ·		å L	idg Ioh	enboro Nu	(8)	-		
DOH DCA	justification) Cancellation			John B						annona NIII	mper	•		
		DI (0)		FACIL	ITY INFO	RMATIC		, (F - 11) /	4)					
Name of Facility When		g Place (3)						School (K-1 Subchapter Other (i.e. p	2) 8 (Oth			dinas.	home	es.
1280 Route 22 W City (5) North Plainfield	/est	11						etc.) are Feet		f Floors		ldg. A		
County (6) Bergen	to all size full reconstruction			County C	ode (7) SE ONLY)	n L		ent Use (Pric	or if bei	ng demolis	hed)			
Name of Monitoring F				ASCM	No.		Name of Ab	atement Con					- Vision	
Absolutely Clean Street Address	Environmental (A	ACE)					Street Addr	Environme ess	entar	Gorp.				
53 Orleans Green	n						200 Broa		11 7					
City, State, Zip Code Coram, NY 1172	7							, NJ 07072	2					
Project Manager for M Jeff Sheridan	Monitoring Firm		1		44-325	3	Telephone   201-939-			License N 00756	No.			
Start Date (10) 12-03-12		Scheduled 02-28-1		pletion D	ate (11)		Name of OS Even-Air	SHA Monitor Inc.			200			
Occupancy Status Du	iring Abatement (Che	k Only One	)	a di constant			Street Addr							
Abatement Perfo	acated During Entire ormed Outside of Norres: Floor will be vacate	nal Facility I	Hours		atement	_	City, State,	ckson Ave Zip Code and City, N		101				
Scope of Work (Chec ≥3 sf or ≥3 lf ≥160 sf or ≥260		Company of the Compan	enovat				× M	ull Containme lini-Enclosure lovebag Prod on-Exempted	e cedure	7			'e	
		Τ				-		OII-Exciliptor	3 ( ) an	d Holl I Ha		2 . Ones a	emen	t
Asbestos-Contain TO BE In F	tion of ing Material (ACM) ABATED acility 13)	Used Mair	ocation of the control of the contro	y y by ice/		tos Cont thermal surfac	scription of aining Materi systems insu cing, VAT, or niscellaneous	ılation,	(	Amount Specify F or LF)	Removal	Repair	e Encapsulate	Enclosure
		Yes	No	N/A									e e	
Ground Flo	oor: Unit # 1			X			T/Mastic			,300SF	х			
	oor: Unit # 1			X			ransite			600SF	x			
Ground Flo	oor: Unit # 2		ente:	х			Mastic		100.0	580SF	x			
	oor: Unit # 5			х		1000	Mastic			,000SF	×			
Name of Registered Name of Regis		1)	Н	JDEP W auler ID 1310		of Was		The Committee of the Co		ered Landfi erprises	11			
City, State Shirley, NY / Bror	nx. NY						sal Date	City, Stat		, OH 446	88			
Completed by Tom Garcia	\(\frac{1}{2}\)	Title Projec	ct Ma	nager		KSNT J	ignature		-	D	ate 1-16-	13		
		,					1	720	<u></u>		-			

### 1280 Route 22 West, North Plainfield, NJ Additional Materials / Floors 20/3

		2,7,	lan a	8
Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)	Is Location Normally Used Solely by Maintenance or Custodial Staff? (12)	Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)	Amount (Specify 2: Square Feet or (Linear Feet)	Abatement Type Apecify: Removal, Repair, Encapsulation or Enclosure)
Ground Floor: Roof	N/A	Transite	1,650SF	Removal
Roof	N/A	ACRM Flashing	9,200SF	Removal
(1) Ground Floor: Retail Unit # 3	N/A	ACM Floor Mastic	8,000SF	Removal
		Tree to the contract of the co		
		8-		



RECEIVED

Date of Notification (1) 1/15/13					Owner/Operat Irnpike Aut		2013 (ity	JAN ,	22 PM	2:5	S	4	
Agencies Notified Type Notification			Street Ad	dress ox 5042	¢		6.530	17 1 2	C. r. a. c.		•		
□		C	City, Stat	te, Zip Co		042	£.	LIC	EKSING	HO	i.		
DOH justification)  DCA Cancellation	cluding	1 22		Contact d J. Krad	czynski			Tele	ephone Nun	her		20	2
Name of Facility Where Abatement is Taking	Place (2)		FACIL	ITY INFO	RMATION	1-	Type of Facility (4	1			-1-21101		
Newark Bay Bridge (Vincent R. Caso Street Address Connection spanning Newark & Bay	ciano M	emoi	rial Bri	dge)		- [	School (K-12 Subchapter 8 Other (i.e. pr	2) B (Oth			dings,	home	es,
City (5)  Jersey City				nee of the	4	1.79	etc.) Square Feet N/A	# of	Floors		ldg. A	ge	
County (6) Hudson				Code (7) ISE ONLY)			Current Use (Prio Public Bridge	r if bei	ng demolish	ed)			
Name of Monitoring Firm Hired by Building Ov	vner (8)		ASCM	No.			f Abatement Cont la Services, L		(9)		,		
Street Address							ddress 3 Lucon Road		7				
City, State, Zip Code							ite, Zip Code ack, PA 19474	1					
Project Manager for Monitoring Firm		٦	Γelephor	ne No.	277.555		ne No. 39.5634		License N 01077	0.			
	Scheduled		pletion [	Date (11)	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		f OSHA Monitor la Services, L	LC					
Occupancy Status During Abatement (Check	Only One	:)			100,000		ddress 3 Lucon Road						
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma X Other – Describe: Not occupied: Outside	I Facility	Hours		d shoulder	City	, Sta	ite, Zip Code ack, PA 19474						
Scope of Work (Check All That Apply)				VESTILEN STATE	] 0,,				-				
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		enovat emoliti				×	Full Containme Mini-Enclosure Glovebag Proc	edure					
							Non-Exempted	(*) an	d Non-Friab	le Pro	Shell III	e emen	t
Location of	N.	ormall	y		Descript					-		ре	_
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Mair	Solel ntenan odial S (12)	ice/		tos Containin thermal syste surfacing, other misce	ems VAT	insulation, , or	(5	mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
Beneath/within sidewalk and road			Х	Concr	ete encase	ed tr	ansite pipe	33	800 LF	х			
								1					
Name of Registered Waste Hauler		N	JDEP W	/aste	Cubic Yard	ls	Name of F	Registe	ered Landfill				
Waste Management, Inc.		Н	auler ID		of Waste				gement, I				
City, State Keyport, NJ					Disposal D	ate	City, State Tullytow		4				
Completed by Caroline M. Harper	Title Projec	ct Ma	nager		Signal	Ture	Mar	DU.	Da 1/	te 15/1:	3		V

CIC4231

Date of Notification (1)	-	1	200	f Building Owner/Operator	PALMER	2013 JAN 22	A.	÷ /	7	
Agency Notified Type Notification	•	-	Street A	UDRHAND	HEIGH	2013 JAN 22	PM 2	: 5,	S	
□ EPA □ Initial □ Amended Amendment # □ Emergency (included	ina			MYLIE  Address  NORMAND  The Code  MISTOWN, NO	<del> </del>	4 LIPENS	Nr. K.	91		
DOH justification DCA Cancellation				of Contact 2. PACHER	,	Telephone Num			-	12
			FACIL	ITY INFORMATION						
Name of Facility Where Abatement is Taking Pl FUR PACIMENT Street Address 26 NORMANDY HEIGHTS	<del>.</del>		•	•	Type of Facility  U School (K-12 U Subchapter & Other (i.e. pr homes, etc.)	i) 3 (Other than K-12) ivate & commercia	) I building	gs,		
City (5)				Ang and	Square Feet 2200	# of Floors	Bidg.	Age O		na
TORNISTOWN						rior if being demoli				
County (6)  Morres			County ONLY)	Code (7) (STATE USE		SIDEN CE				
Name of Monitoring Firm Hired by Building Own	ner	ASCM	No.	1	ment Contractor (S					
(8)			50 11		Removal I	nc				
Street Address	J. 100 200 200 200 200 200 200 200 200 200	7.020	T	Street Address						
* 1.3					River St	·				_
City, State, Zip Code				City. State, Zip Hacker	rsack, N.	J. 07601			15	
Project Manager for Monitoring Firm	Te	lephor	e No.	Telephone No.	-7444 -	License No. 00388				
Start Date (10) Scheduled (	Complet	ion Dat	te (11)	Name of OSHA	Monitor					
0 Occupancy Status During Abatement (Check o				Omega EI	nvironmen	ltal inc		_	_	
1	350			280 Huy					2006	
☐ Facility Closed/Vacated During Entire Period ☐ Abatement Performed Outside of Normal Fa ☐ Other - Describe: ? AM TO SPM	cility Ho	ement urs		City, State, Zip South I	Code Hackensac	k, N.J.	0760	6		
Scope of Work (Check all that apply)  □ ≥ 3 sf or ≥ 3 if □ ≤ 160 sf or ≥ 260 if				ovation D Glo	Containment with i-Enclosure websig Procedure	Negative Pressur	•			
	ls	Locati	ion	.7				A	Ty	
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Use Ma	Normal ed Sole interior Custodi Stati? (12)	ly by nce/ ial	Description Asbestos Containing li (i.e., thermal system surfacing, VA other miscellar	faterial (ACM) s insulation, T, or	Amount (Specify SF or LF)		Removal	Repair	Encapsulate
BASELLENT	Yes	No	N/A	VAT		680	SF	7		
BASEMENT	+		7	THERMAL IN ENV	ALON	140	UF			Χ
								Н	-	$\dashv$
Name of Registered Waste Hauler	N.	JDEP V	Naste I		Name of Regi	stered Landfill				لـــا
Best Removal Inc		710		Waste	Minerv	a Enterpr	ises			
City. State Hackensack, N.J.	076	01		Disposal Date	City. State Waynes	burg , Oh				
Completed by Title				Signature /	المسعود		Date /	16	/,.	3
J. Maiorano Esti	marc			1 6	0	<b>&gt;</b>				

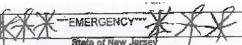
Date of Notification (1)	k/		1	Name of	Building O	wner/Op	perator (2)	013 JAN 22		ű.				-
1–15–13	74 parates where			Macy	's, Ir	nc.		-10 OHU 55	PM	2:58				
Agencies Notified	Type Notification		5	J., 001 , 14	dress :			∍t	i D. Kanan	- 00				(
☑ EPA □ DEP ☑ DOL	Initial ☐ Amended Amendment #				e, Zip Cod		4520	à LICEN	SIN	े तिथा. व				
DOH □ DCA	☐ Emergency (i justification) ☐ Cancellation	ncluding	1	Name of	Contact li Carl	ter	-		Tele	phone Numb	ber			
U DCA .	- Cariconation				ITY INFO		N							
Name of Facility Where	Abatement is Taking	Place (3)					T	ype of Facility (4	1)					
Macy's Preakn	ess						-	School (K-1: Subchapter	2) 8 (∩the	er than K-12\				
Street Address Hamburg Turnp	ike						2	Other (i.e. p	rivate 8	commercial	build	lings,	home	s,
							S	Square Feet	# of	Floors	- 1	ldg. A	-	
City (5) Wayne					5			50,000	a if hair	2		50yı	s.	
County (6) Passaic				County C STATE U	ode (7) SE ONLY)		5	Current Use (Priceshopping of	cente	ng demolishe E <b>r</b>	eu)			
Name of Monitoring Firm	n Hired by Building C	Wner (8)		ASCM	No.			Abatement Con						
Pennoni Assoc		83030		, <u> </u>	N E			outh Envi	ronm	ental Co	0.,	Inc	•	
Street Address							Street Ac	<sup>idress</sup> Haws Aven	110					
515 Grove Str	eet							te, Zip Code	<u></u>					-
City, State, Zip Code Haddon Height	s, NJ 0803	5					Norr	istown, P.	A 19					
Project Manager for Mon Alan Lloyd				Telephor 356–54	ne No. 17–050!	5		239-9920		License No 00398				
Start Date (10) 2–4–13		Scheduled 2-15-		pletion [	Date (11)		Name of Plymo	OSHA Monitor outh Envi	conme	ental Co	o.,	Inc	•	
Occupancy Status Durin	ng Abatement (Chec	k Only One)			-		Street Ac							
□ Facility Closed/Vac	cated During Entire F	eriod of Ab	atem	ent				Haws Aven	ie					
Abatement Perform Other – Describe:	ned Outside of Norm	al Facility H	lours			_		te, Zip Code istown, PA	194	01				
Scope of Work (Check A	All That Apply)													
□ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf			nova molit					Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	e cedure				e	
							UR.	. tott Exempto				Abat	ement	
			ocati rmal			Des	scription o	f				Ty	/pe	
Locatio Asbestos-Containin TO BE AB In Fac (13)	g Material (ACM) BATED illity	Used Main Custo	Sole tenai dial S (12)	ly by nce/ Staff?	Asbest (i.e.	tos Cont thermal surfac	aining Ma	terial (ACM) nsulation, , or	(5	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A	63				52	5 SF	x	-	+	
Break room			х		floor	tile	e & ma	stic				-	-	-
				-				Tan are				-		
					*		-		4					
Name of Registered Wa	aste Hauler		1000	JDEP W		100000000000000000000000000000000000000	Yards	Name of	Registe	ered Landfill	-			
Newark Cartin			1 100	lauler ID 4509	No.	of Was		IESI				1.0		
City, State Newark, NJ						7	sal Date 5–13	City, Stat Beth		em, PA				
Completed by	~	Title				B 1879	Signature			Da			×	
James M. Kell	У	Pro	oje	ct Ma	nager		11/1				-15	-13		

### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

10	ferra						
11	100	1	100	1	e.	grave.	
- 10		20	La d	1		in a	1

,54		Mama	of Build	ing Owner/O	perator (	2)		a la la fra l	1.2			1
e of Notification (1) n 16/2013		St L	awrenc	e Church		Zl	113 JAN	22 PM 2:	58	_		+
encies Notified Type Notification		Stree 1 Sa	t Addres aint Lav	s vrence Pla	ce		, es	anex f	1 12			-
EPA Initial Amended		City,	State, Zi	p Code en, NJ 070	86			EKSING				
DOL Amendment # Emergency (incluing justification)	uding	Nam	e of Con	tact			Te	ephone Numbe	r			
DOH Cancellation				Whelan INFORMAT	ON		- 1					
nme of Facility Where Abatement is Taking Pla t Lawrence Church - Rectory Buildin	ace (3) g						I (K-12)	ther than K-12)				
reet Address Saint Lawrence Place	4 5					Other etc.)	(i.e. private	e & commercial L		. Age	nes,	_
ity (5)						Square Fee	1		30+			_
Veehawken, NJ 07086		Cou	unty Code	e (7) ONLY)		Current Us Office -F	e (Prior if b Rectory	peing demolished	l) 			
Hudson lame of Monitoring Firm Hired by Building Ow	ner (8)		ASCM No		Name EA S	of Abateme Services C	nt Contrac Corporation	tor (9) on				
street Address					Stree	t Address 69th Stre						
City, State, Zip Code					City.	State, Zip Cottenberg, N	ode					
Project Manager for Monitoring Firm		Te	lephone	No.	Tele	phone No. 1-295-1700		License No 01074	1			
D-1- (10)	Scheduled		letion Da	te (11)	Nam	ne of OSHA M	Monitor			10		-
1/28/13	1/31/201				1000000	et Address		· ·				
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe: Starting @ 4:00 PM	eriod of Ab	ateme	nt		City	, State, Zip C	Code			_		
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novati molitic				× Mini-E	nclosure	t with Negative P dure *) and Non-Friab	le Prod	cedure	)	
L 2100 01 01 2227										Abate		
	Isl	ocatio	on				1			Ту	-	1
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility	Used Mair	ocation or mall solel solel solel solel solel (12)	y y by nce/	(i.e. the	rmal syst	etion of ng Material (A tems insulation , VAT, or ellaneous)	ACM) on,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	
Location of Asbestos-Containing Material (ACM) TO BE ABATED	Used Mair	ormall Solel ntenar odial S	y y by nce/	(i.e. the	Containir rmal syst surfacing her misco	ng Material (A tems insulation , VAT, or ellaneous)	ACM) on,	(Specify SF or LF)				
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility	Used Mair Custo	ormall Solel ntenar odial S (12)	y y by nce/ staff?	(i.e. the	Containir rmal syst surfacing her misco	ng Material (A tems insulation , VAT, or	ACM) on,	(Specify	Removal			
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Used Mair Custo	ormall Solel ntenar odial S (12)	y y by nce/ staff?	(i.e. the	Containir rmal syst surfacing her misco	ng Material (A tems insulation , VAT, or ellaneous)	ACM) on,	(Specify SF or LF)	Removal			
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Used Mair Custo	ormall Solel ntenar odial S (12)	y y by nce/ staff?	(i.e. the	Containir rmal syst surfacing her misco	ng Material (A tems insulation , VAT, or ellaneous)	on,	(Specify SF or LF)	Removal			
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Used Mair Custo	No X	y y by loce/ Staff?	(i.e. the	Containir rmal syst urfacing her misco Pipe Ins Cubic Yal of Waste	ng Material (/ tems insulation, VAT, or ellaneous) sulation	Name of I	(Specify SF or LF)	Removal			
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Basement	Used Mair Custo	No X	y y by loce/ Staff?	(i.e. the soft	Containir rmal syst surfacing her misco	ng Material (/ tems insulation, VAT, or ellaneous) sulation	Name of I Waste I	(Specify SF or LF)  120 LF  Registered Landf Management	Removal			
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Basement  Name of Registered Waste Hauler	Used Mair Custo	No X	y y by loce/ Staff?	(i.e. the soft	Containir rmal syst urfacing, her misor  Pipe Ins  Cubic Yal of Waste bd  Disposal bd	ng Material (/ tems insulation, VAT, or ellaneous) sulation	Name of I Waste I	(Specify SF or LF)  120 LF  Registered Landt Management e vn Landfill	Removal	Repair	Encapsulate	

B & G Proj # 2013-14



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

Check # 5725

Date of Notification (1) 01/16/2013		T	Name o	Allen 201			T A	PPROVE	0		$\Box$
Agencies Notified Type Notification			Street A	ddress 201 exington Ave	J JAN 2	22 PM 2	HTDeN OIH		nior	Servic	es
DEP . Amended Amended		_		nte, Zip Code wood, NJ 0	7040	A CALL	Date: 1/10	(Signature)	ne:_	* J	<b>b</b>
Emergency [ustification]			Name o	f Contact Allen		=ार्जा । यह	Talanho	a Mimha			
			FAC	LITY INFORM	ATION		- F3		-		
Name of Facility Where Abatement is Takin Jacob Allen Street Address 185 Lexington Avenue	ng Place (3)				_	Type of Facil School ( Subcha) Other (),	Alf	n K-12) mencial bu			nes,
City (5) Maplewood, NJ 07040	71 - 20, 72 1					Square Feet	# of Floo		Bidg.	Age	
County (6) Essex				Code (7) USE OHLY)		current Use ( residential	Prior if being de	molished)			
Name of Monitoring Firm Hired by Building n/a	Owner (8)		ASC	4 No.		of Abetement	25.1		l I		
Street Address	+:	110				Address Ryerson Ro	ad				
City, State, Zip Code		2.		1 2004-5-1		itate, 20 Code oln Park, NJ	And the second s	101	=		1
Project Manager for Monitoring Firm			Telepho	ne No.		none No. 696-6869	Lice 003	nse No. 78			
Start Date (10) 01/22/2013	Schedule 01/22/2		npletion	Date (11)		of OSHA Moni G Restoratio					
Occupancy Status During Abatement (Che	ik Only One	<b>2)</b>	-		Street	Address				-	75
Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other – Describe:	Period of A nel Factlity	baten Hours	nent i		City, S	Ryerson Ro Nate, Zip Code oln Park, NJ			-		
Scope of Work (Check Ali That Apply)					12	ON ( 147) C ( 40	-				
23 sf or 23 lf 2160 sf or 2260 lf		enova emolif				Mini-Endos				1/0	
	Т.					- (APRLEVENI	Add ( ) and redi	T TIME TO		komer	nt
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Melli Custo	Locationnal Sole ntensional Sole (12)	lly ly by nce/ Staff?	Asbestos C (i.e. then st		Asterial (ACM) s insulation, T, or	Amaun (Specifi SF or LF	/ 4	Τ	Encapsulate	ENGOSHIB
	Yes	No	N/A	1.56	1 4 1 50			·	_	1	1
basement	1		X	pip	e (wrap &	cut)	72 lf	×	-	$\vdash$	-
	++		- 14				1		+	+	+
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Name of Registered Waste Hauter B & G Restoration, Inc.		H	JDEP W auler ID 3563		vic Yerds Viste		of Registered Li ow Resource		very	Cen	ter
City, State Lincoln Park, NJ		,	en M		posal Date 23/2013		own, PA				
Completed by Gordana Luna	Title Secret	ary/	Treasu	rer	Stanedure	Moin	VOII	Date 01/16/	201	3	

B & G Proj # 2013-14

Date of Notification (1) 01/16/2013			Name of	f Building Allen	g Owner/Op	erator 2	893 JAN 22	PM 2. 5.	^		25		
Agencies Notified Type Notification			Street A	aaress	n Avenue								Ī
EPA Initial Amended Amendment	#	ŀ	City, Sta	ate, Zip C			& LICEN	ISING					
Emergency justification) DCA Cancellation	(including			f Contact	12			Telephone	Numbe	r			111
	-		FACI	LITY IN	FORMATIO	N		<u> </u>				1	
Name of Facility Where Abatement is Takin Jacob Allen	g Place (3	)					Type of Facility ( School (K-1		K-12\				
Street Address 185 Lexington Avenue							Other (i.e. p	orivate & comn	nercial b	_			es,
City (5) Maplewood, NJ 07040	*						Square Feet	# of Floors			ldg. A	ige	
County (6) Essex				Code (7) USE ONL		_	Current Use (Pri residential	or if being den	nolished	)	14		
Name of Monitoring Firm Hired by Building n/a	Owner (8)		ASCN	/ No.	1.5		of Abatement Cor Restoration,	A CONTRACTOR OF THE PARTY OF TH					
Street Address							Address Lyerson Road						
City, State, Zip Code	7		-				ate, Zip Code In Park, NJ 07	7035			1752		
Project Manager for Monitoring Firm		T	Telepho	ne No.			one No. 96-6869	Licen 0037	se No.				
Start Date (10) 01/22/2013	Schedule 01/22/2		npletion	Date (11			of OSHA Monitor Restoration,						
Occupancy Status During Abatement (Chec				i i i		Street A	Address Lyerson Road				75	-	195
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other – Describe:					1 2	City, St	ate, Zip Code In Park, NJ 07	7035			_		1-
Scope of Work (Check All That Apply)												1	
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Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility  (13)	Use Mai	lormal d Sole ntena	lly ely by nce/ Staff?			ystems ng, VAT	aterial (ACM) insulation, , or	Amount (Specify SF or LF)		Removal	Ty Repair	e Encapsulate	Enclosure
(10)	Yes	No	N/A					7.0		20	•	late	Ire
basement			Χ.		pipe (w	rap &	cut)	72 lf	>	<			
					North and				- 1				
The second of the second				, 24,		-					-0.885		
Name of Registered Waste Hauler B & G Restoration, Inc.		H	IJDEP W lauler ID 9563		Cubic Yaste 1			Registered Lar v Resource		ov	ery (	Cent	ter
City, State Lincoln Park, NJ					Disposa 01/23/2		City, State Tullytov						
Completed by Gordana Luna	Title	tary/	Treasu	ırer	Sig	nature	May 1	10	Date 01/16	- 10	012		

No great

Date of Notification													
	SNotified   Type Notification   Check   Che												
Agencies Notified	Notified   Type Notification   One Hess Plaza   City, State & Zip Code   Woodbridge, NJ 07095   Name of Contact   John Philibin   Telephone Number   Cancellation   Type of Facility (A)   County (B)   County (B)   County (Code (7)   Current Use (Prior if being demolished)   Boiler Room   Monitoring Firm Hired by Building Owner (B)   ASCM No.   Street Address   Street Address   City, State & Zip Code   Monitoring Firm Hired by Building Owner (B)   ASCM No.   Street Address   St												
	Street Address												
	Notified   Type Notification   One Hess Plaza   One Hes												
	Street Address   One Hess Plaza   City, State & Zip Code   Very Moodbridge, NJ 07095   Name of Contact   Telephone Number   John Philibin   Telephone Number   John Philibin   School (K-12)   Subchapter 8 (Other than K-12)   Subchapter 8 (Other (iber than K-12)   Subchapter 8 (Other (iber than K-12)   Subchapter 8 (Other (iber than K-12)   Subchapter 9 (Other (iber than K-12)   Subchapter 8 (Other (iber than K-12)   Subchapter												
E	Type Notification												
☐ DCA	Cano	Street Address One Hess Plaza    Initial											
	Street Address   One Hess Plaza   City, State & Zip Code   Woodbridge, NJ 07095   Name of Contact   One Hess Plaza   One He												
Name of Facility W	SNOtified   Type Notification   Street Address   One Hess Plaza   City, State & Zip Code   Cancellation   Cancellation   Cancellation   Code (7)   Cancellation   Cancell												
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	Type   Notification   Street Address   Department   De												
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Name of Monitoring	SNotified Type Notification One Hoss Plaza DEP Initial												
AET, Inc.	DOAD												
Street Address	DOH												
28 N. Pennell Ro	ad												
									*				
Media, PA 1906	3			•	N.1				License	Number			-
	Boiler Room  Monitoring Firm Hired by Building Owner (8)  ASCM No.  Name of Abatement Contractor (9)  Bristol Environmental, Inc.  Street Address  1123 Beaver Street  City, State & Zip Code  PA 19063  Manager for Monitoring Firm  Telephone Number  Nurotsy  Telephone Number  10016/2012  Telephone Number  1016/2012  Telephone Number  1015/788-6040  Street Address  1123 Beaver Street  Telephone Number  1015/788-6040  Te												
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Facility Clo	sed/Vacated	During Entire P	eriod o	of Aba	aten	nent							
							City, State & Z	Zip Code					
							Bristol, PA 1	19007					
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<b>Dispatch Office</b>	, Bathroom	, Hallway						stic			H	ዙ	╫
Main Building										-	ዙ	ዙ	ዙ
Main Building				-									بال
Name of Registere	ed Waste Hau	uler	1 5.01	25.59307				Name of Reg	stered Landfi	11			
	ty Where Abatement is Taking Place (3) ration   Type of Facility (4)   School (K-12)   Subchapter 8 (Other than K-12)   Subchapter 9												
	Gancellation												
City, State	DOH												
Bristol, PA		- 15 - 15		1	0.			MOLUMBAIL		Date	1		1.7
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Boiler F Boi	Location of Asbestos-Conta Material (AC TO BE ABAT in Facility (13)  Room Room Ch Office, Bathro uilding f Registered Waste    Environmental, ate	faining M) ED  oom, Hallway Hauler Inc.	Is L Norm So Maint	Reno Demonation Demonation Deley between Demonation Street Demonat	ovation olition on Jsed by ce or	(i. insured of the control of the co	Description of sbestos-Conta Material (ACI.e., thermal sysulation, surfacile other miscella  Pipe insular  Elbows  Transite ce  VAT & Mas  Pipe  Transite Wall  Cubic Yards  of Waste  8  Disposal Date  11/16/12  Signature	Mini-Encl Glove Ba Non-Exe of aining M) stems ng, VAT neous) tion	g Procedures mpted and Non-F Amount (Specify SF or LF)  341 LF 2 EA 2,245 SF 625 SF 10 LF 350 SF gistered Landfill  ANDFILL		Proceeme Repair	cec ent
Boiler F Boiler F Boiler F Boiler F Main B Name o	Location of Asbestos-Conta Material (AC TO BE ABAT in Facility (13)  Room Room Ch Office, Bathro uilding f Registered Waste	f aining M) ED  oom, Hallway	Is L Norm So Maint Custo Yes	Reno Demo	ovation olition  on Used by ce or Staff?  N/A  DDEP Valuer ID	(i. insured or	Description of asbestos-Conta Material (ACI.e., thermal systematic other miscellar Pipe insular Elbows Transite ce VAT & Mar Pipe Transite Wall Cubic Yards of Waste 8	Mini-Encl Glove Ba Non-Exe of Anining M) sterms ng, VAT neous)  tion  iling stic  Panel Name of Rec GROWS L	osure g Procedures mpted and Non-F Amount (Specify SF or LF)  341 LF 2 EA 2,245 SF 625 SF 10 LF 350 SF gistered Landfill  ANDFILL	Abat Removal	Proc	ent
Scope of V  □ ≥3  ⊠ ≥1  Boiler F  Boiler F  Boiler F  Boiler F  Main B	Location of Asbestos-Conta Material (AC TO BE ABAT in Facility (13)  Room Room Ch Office, Bathro uilding	f aining M) ED	Is L Norm So Maint Custo Yes	Reno Demo	ovation olition  on Used by ce or Staff?	(i. insured or	Description of asbestos-Conta Material (ACI.e., thermal sysulation, surfacile other miscella  Pipe insular  Elbows  Transite ce  VAT & Mas  Pipe  Transite Wall  Cubic Yards	Mini-Encl Glove Ba Non-Exe of aining M) stems ng, VAT neous) tion tiling stic Panel Name of Rec	osure g Procedures mpted and Non-F Amount (Specify SF or LF)  341 LF 2 EA 2,245 SF 625 SF 10 LF 350 SF gistered Landfill	Abat Removal	Proc	ent
Scope of V  □ ≥3  ▷ ≥1  Boiler F  Boiler F  Boiler F  Dispato	Location of Asbestos-Conta Material (AC TO BE ABAT in Facility (13)  Room Room Ch Office, Bathro uilding	f aining M)	Is L Norm So Maint Custo Yes	Reno Demo	ovation olition  on Used by ce or Staff?	(i. insu	Description of sbestos-Conta Material (ACI.e., thermal sysulation, surfacil other miscella  Pipe insular  Elbows  Transite ce  VAT & Mas  Pipe  Transite Wall	Mini-Encl Glove Ba Non-Exe of aining M) stems ng, VAT neous) tion	osure g Procedures mpted and Non-F Amount (Specify SF or LF)  341 LF 2 EA 2,245 SF 625 SF 10 LF 350 SF	Abat Removal	Proc	ent
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Scope of V  □ ≥3  ≥1  Boiler F  Boiler F	Location of Asbestos-Conta Material (AC TO BE ABAT in Facility (13)  Room Room	f aining M)	Is L Norm So Maint Custo Yes	Reno Demo	ovation olition on Jsed by ce or Staff?	(i.	Description of asbestos-Conta Material (ACI.e., thermal sysulation, surfacil other miscella  Pipe insular  Elbows  Transite ce	Mini-Encl Glove Ba Non-Exe of inining M) stems ng, VAT neous)	osure g Procedures mpted and Non-F Amount (Specify SF or LF)  341 LF 2 EA 2,245 SF 625 SF	Abat Removal	Proc	en
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Scope of V	Section of Section of Asbestos-Conta Material (AC TO BE ABAT in Facility	f apply)  f aining M) ED	Is L Norm So Maint Custo	Demo	ovation olition on Jsed by ce or Staff?	(i.	Description of asbestos-Conta Material (ACI.e., thermal sysulation, surfacile other miscella	Mini-Encl Glove Ba Glove Ba Non-Exe of sining M) stems ng, VAT neous)	osure g Procedures mpted and Non-F Amount (Specify SF or LF)	Abat Removal	Proc	ce
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Scope of V	sf or ≥3 If	t apply)		Reno	vation			Mini-Encl	osure g Procedures mpted and Non-F	riable l	Proc	26
Scope of V	MOLK (OLIGON -	t apply)							osure	ative P	ress	sı
	Nork (Check all tha	t apply)		-	PIVI			7 Full Conta	ainment with Neg	ative P	ress	SL
F7 F-	Counied Duri	ing Abatement: 7	:00 AM -	- 3.30		1						
│ □ Aba	atement Performed	Outside of Norr				В	ristol, PA 19	007				_
Occupancy	Status During Aba cility Closed/Vacate	d During Entire F	Period of	Abate	ement	Ci	ity. State & Zip	Code				
10	Status During Aba	-	11			144	123 Beaver S	treet				_
Scheduled 5	Start Date (10)	VEGULTOON SIT	TE 1/16	- 1/1	8/13	Br	reet Address					
Dave Turo	tsv	To-badulad Cor	noletion	Date	(11)	Na	ame of OSHA N	nmental Inc.				_
Project Man	ager for Monitoring	Firm	800-96	9-6AI	ET	(21	15)788-6040	Agnitor	10000			
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City State &	Zip Code	me ak				Bri	istol, PA 190	07	License Numb	er		Ī
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AET, Inc. Street Addre	98	50.00 P				1442	23 Beaver St	reet				-
Name of Mor	nitoring i intrinica					Stre	eet Address					
	nitoring Firm Hired	by Building Owne	er (8)	AS	SCM No	Nan	stol Environ	mental, Inc.				_
Perth Ambo						11	iler Room me of Abateme	nt Contractor	(9)			
City (5)		County (6) Middlesex			5000	Curr	rent Use (Prior	II being demo				_
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mith Stree	t & Convery Box	ulevard				Squa	are Feet	# of Floors	Diag. /	3-		
less Corpo Street Address	C					岗	Other (i.e. priv	ate & commer	cial buildings, ho	ge.		
lame of Facili	ity Where Abateme	sile to Taking						Other than K-	12)	mas et	c)	
	ity Where Abateme	ent is Taking Plac	e (3)			Type	School (K-12)					
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ate of Notificat	tion (1) 10/1/2012		Hess	Corp	oration			• 14-41-14-14-14-1				

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Date of Notification	(1)	ť					ner / Operator (	(2)	2013 JAN 2	- (1)	۷:	28,	1	
Agencies Notified	10/1/2012 Type Notifical	tion		_	Corpor Address			3.	23,010	ししが	317	31		1
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Name of Facility WI	nere Abateme	nt is Taking Place	e (3)				Type of Facility							
Hess Corporatio	n						School (K-		than K-12)					
Street Address							Other (i.e.	nrivate & C	ommercial bui	ldings, t	nome	, etc	:.)	
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		D 11 11 0	(0)	-	ASCM	Mo	Name of Abate		ractor (9)					
Name of Monitoring	Firm Hired b	y Building Owner	(0)		ASCIV	1110.	Bristol Envir	onmental	l, Inc.					
AET, Inc.				<del></del>		-	Street Address					30,00		5-14-2
Street Address	ad						1123 Beaver	Street						_
28 N. Pennell Ro City, State & Zip Co	ode						City, State & Z	ip Code						•
Media, PA 1906	3						Bristol, PA 1		11.7	se Num	hor			
Project Manager fo	r Monitoring F				Numbe	r	Telephone Nu		0050		Dei			
Dave Turotsy		100			AET		(215)788-604 Name of OSH		0030	3				-
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10/16/20	12	the court of the Contract of t	N HC	The second second			Street Address		1110.					
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Scope of Work (Or	COR an area								Containment v Enclosure	vitti iveg	alive	rics	Suic	Ē.
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Bristol Environ	mental, inc.				.010		Disposal Date	City, Stat	е				3	
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Bristol, PA				T	itle		Signature		1.0		Date			
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have seen		-				oiler Ro	e (Prior if being	demolished)				
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AET, Inc.	, Inc. t Address					istol E	nvironmental,	Inc				
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28 N. Pennell Road	. Pennell Road State & Zip Code						ver Street					
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Project Manager for Monitor	ring Firm	Tolonh	0.00	Number			A 19007					
Dave Turotsy		800-9	1011K 69-	RAFT		iepnone 15)788-	Number	License	Number			
Scheduled Start Date (10)	Scheduled Com						SHA Monitor	00509				
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Project Manager for Dave Turotsy			80	0-8	969	-6/	Num NET			Telephone I (215)788-6			License 00509	Number			A Country of
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Occupancy Status During	Abatement (			IR	ristol Enviro	onmental Inc.	76.0			-
10/16/2012	1	uled Completi	on Date (1: /2012	I)  N	ame of OSHA	Monitor	00509		-	
Scheduled Start Date (10	) School	1250 101			elephone Nur 215)788-604	nber .	License	Numh	er	_
Dave Turotsy	ittoring Firm	Tele	phone Nun		Bristol, PA 1	9007				
Media, PA 19063 Project Manager for Mon	Horizo F				iny, State & Z	ip Code				
City, State & Zip Code					1123 Beaver	Street				
28 N. Pennell Road					Dugge Moders					
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Lage 1 1 11100		wher (	(8) A	SCM No.	Name of Ahat	Amont Carter				
Name of Monitoring Fire	m Hired by Ri	ilding O	(0)		Boiler Room	Prior if being demo	lished)			_
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Name of Facility When	re Abatement	is Taking Place	FAC	ILITY INFO	RMATION					
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□ DCA	☐ Cancel	lation		of Contact Philbin						
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N DO:			One F	iess Plaza						
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Agencies Notified  EPA  DEP	10/1/2012 Type Notificat		100	- · wallullug (	LIMMOR / Amaria	d 12:120)				

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State of New Jersey 2013 JAN 22 PM 2: 58

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

10/1/2	2012		Name	e of Building	Owner / Operato	- 401	a LICE	Tt. a.	35	/	
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Name of Facility Where Abs	tement is Taking	Die	FAC	CILITY INF	ORMATION					_	_
Hess Corporation	- I WIND	I LINCS	(3)		Type of Facili	ly (4)					
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Smith Street & Convery	Roulever				Subchant	ar A /Other	than K-12)				
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ve Turotsy		1800-	969-6AI	ET	Telephone Num	ber	License	Mismah	^-		_
neduled Start Date (10)	Scheduled Co	mpletic	In Date of	(4.4)	(215)788-6040		00509	· rumb(	cı		
10/16/2012	00	11/16/	DO45	(11)	Name of OSHA	Monitor					
cupancy Status During Abat	ement (Charles	11/10/	2012		Bristol Enviro	nmental I	Be.		- EXC		
whalled cares count wat	oment (CIJECK O	nry one	9)		Street Address	The state of the s	116.				
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2013 JAN 22 PM 2:58

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Agencies Notified Type Notificat	ion	Hess Con	uilding Owner / Oper	ator (2)	25,
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DOH 2321 Emerge	incy		20 Code 70, NJ 07095		
		John Philip	in		-
Name of Facility Where Abatement Hess Corporation					Telephone Nu
Hess Corporation	is Taking Place	e (3)	INFORMATION		
Street Address			Type of Fac	lity (4)	
Smith Street & Convery Boulev	/and		School	(K-12)	
	LIG		Di Oubona	pter 8 (Other than	K-12)
City (5)	unty (6)		100	e. humans & court	happing butter
Perth Amboy Mic	ddlesex	ounty Code (7)	-4-219 LOG[	# of Floor	Bldg. Age
			Current Use	Polos M.	
ame of Monitoring Firm Hired by Bu	ilding Owner	1		Prior if being dem	
ET, Inc.	(0	ASCM!	No. Name of Abot	Amaria	
N. Pennell Road				CONTRIPORTATION OF THE PARTY OF	(8)
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ject Manager for Monitoring Firm	16:-	-12	I UKY, STATE & 7	a And	
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EPA DEP	Initial		1	PO Box					g .		117	¿:	58	
	Amended	2		City, Stat	te, Zip Co	odé			,	3165			•	ξ.
DOL L	Amendment : Emergency (i		[	Wayne,			al de		45	LICE	197	N.	1	
DOH L	justification)			Name of	Contact				Tele	phoneN	ımber,		۴.	
DCA L	Cancellation		I	Manage	r							_		
		Di (0		FACIL	ITY INF	ORMATION	Tun	of Facility (	4)					2
Name of Facility Where Ab	atement is Taking	g Place (3	()				Туре	of Facility (4	4)					
Building							$ \square$	School (K-1		- 16 IZ	40)			
Street Address								Subchapter Other (i.e. p				dinas	hom	es.
Water street								etc.)	illuito o		olal ball	90	,	00,
City (5)							Squa	are Feet	# of	Floors	E	Bldg.	Age	
Gloucester City, NJ														
County (6)	W-1-W-1-120			County C			Curr	ent Use (Prid	or if bein	ng demoli	shed)			
Gloucester				(STATE U	SE ONLY,				E	Building				
Name of Monitoring Firm H	lired by Building (	Owner (8)		ASCM	No.	Nan	ne of Ab	atement Con	tractor	(9)				
AET, Inc.				0021		The	MACK	Group, L	LC					
Street Address							et Addre						5500	-
907 Doolittle Drive						1500	) Kinas	s HWY N,	STE 2	209				
City, State, Zip Code						The state of the s		Zip Code						
Bridgewater, NJ 08807	7							, NJ 08034	4					
Project Manager for Monito		-		Telephor	ne No.		phone I	The second second second		License	No.			
Eric Houseknecht				(908) 21		0.00000	3) 759			00781				
Start Date (10)		Schedul		mpletion [				SHA Monitor		00701				
1-16-13		Conoda		2/28/12		1000000		Group, L	ıc					
Occupancy Status During	Abatement (Chec	k Only Or	ne)	2/20/12			et Addre		LO		-			
				W/W 24/14/1-		1 150000		s HWY N,	STE 2	na				
Facility Closed/Vacate Abatement Performed	ed During Entire F I Outside of Norm	Period of a	Abatei / Hour	ment 's		A. A		Zip Code	OILZ	.03				
Other - Describe:	- Cutolae of North	ar r donnt	, 11001						4					
Scope of Work (Check All	That Apply)					Cite	пу гин	, NJ 08034	1	16		-		-
	That Apply)		- 1 							103	-			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demoli					ull Containme ini-Enclosure		Negative	Pressu	re		
Z 2100 31 01 2200 11		ы,	Jenion	idon				lovebag Prod						
								on-Exempted		Non-Friab	le Proce	dure		
		Is	Loca	tion									emen	it
Location	of		Norma			Descript	ion of					1	уре	1
Asbestos-Containing N	faterial (ACM)	7.755500	ed Sole intena	ely by		tos Containing				mount	11.5		ш	m
TO BE ABA				Staff?	(i.e	<ul> <li>thermal systematics surfacing,</li> </ul>		lation,		pecify or LF)	Remova	Z.	Encapsulate	Enclosure
In Facility (13)	,		(12)			other miscel		)	OI.	OI LI )	Nou	Repair	usc	uso
				1	1						<u>a</u>	=	ate	6
		Yes	No	N/A	1000						-	-	-	-
inside		$\times$				pipe insu	ulation		1	36 I/f	$\bot X$			
tank		X	72.			tank insu	ulation		5	10 s/f	X			
througho	ut	X				asbestos	debris		40	00 s/f	X			
_n_		X				transite o	anopy		96	65 s/f	X			
Name of Registered Wast	e Hauler			NJ DEP W		Cubic Yard		Name of	Registe	red Landf	ill			
				Hauler ID		of Waste								
Newark Carting / Rovi	С			450	)9	20.		Cumberl		ounty L	andfill			
City, State						Disposal Da		City, Stat			vaneau tre-			
Newark / Riverdale, N	J _			9		2/28/		Newburg	, PA					7. 1
Completed by		Title			•	Signat	wre//	10:			Date		. 1	
Mike Cooper		Presid	dent	15.0	171	17/2	11/	7_/		1/	/16/13			

Date of Notification (1)				Name o	of Buildin	g Owner/	Operator	(2)	FF 1.	CAL	1100		**		-
	ary 11, 2013			Parker	Landso	caping 8	& Cons	etruction 201	12	CET	Lan	0			
Agencies Notified	Type Notification			Street A	Address			- 401	JAN	22 0		-	+		
EPA	Initial			PO Bo	x 4126			200		-c Pf	1 2:	58	i		
DEP (	Amended Amendment	<b>"</b> ⁄i				Code			4 6	9		.0			ξ
	Emergency (			Wayne	and the same of th				& Lic		TR	BH 1			370
DOH DCA	justification) Cancellation				of Contac	t				Telephon	éNur	nber			
<u> </u>	Cancellation			Manage		FORMAT	1011						_		
Name of Facility Where	Abatement is Takin	g Place (	3)	PAC	ILIT IN	FORMAT	ION	Type of Facil	ity (4)		-				12
Building								School							
Street Address								Subchar	oter 8 (C	ther than					
700 Charles Street									e. privat	te & comn	nercia	al bui	lding	s, hon	nes,
City (5)				-				etc.) Square Feet	#	of Floors	3		Bldg.	Age	-
Gloucester City, NJ															
County (6)					Code (7)			Current Use (	Prior if	being dem	nolish	ed)			-
Gloucester	The state of			(STATE	USE ONL	r)				Buildir	ng				
Name of Monitoring Firm	n Hired by Building (	Owner (8	)	ASC	Λ No.	Part Control	Name	of Abatement	Contract	or (9)					
AET, Inc.				0021			The M	IACK Group	, LLC						
Street Address							250000000000000000000000000000000000000	Address							- 1
907 Doolittle Drive						100		Kings HWY	N, STE	209					
City, State, Zip Code	07						1,000,000,000,000	tate, Zip Code				7			
Bridgewater, NJ 088 Project Manager for Mon		-		Telepho	no No			/ Hill, NJ 08	034	1	-		1 11		
Eric Houseknecht	incoming 1 mm		,					one No.		Licen		).			
Start Date (10)		Schedul			18-1108 Date (11)		, ,	759 - 5000 of OSHA Monit	tor	0078	1	-	-		
1-16-1	3			2/28/1:			7.0000000000000000000000000000000000000	ACK Group							
Occupancy Status Durin		Only O		2/20/1/				Address	, LLO.		-				
Facility Closed/Vac	ated During Entire P	eriod of	Abaten	nent			1500 k	Kings HWY I	N. STE	209					
Abatement Perform Other - Describe:	ed Outside of Norma	al Facility	/ Hours	3		-12		tate, Zip Code							
						-	Cherry	Hill, NJ 080	034						
Scope of Work (Check A	II That Apply)				TEA .		_	. 513	100	2017					7/
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		- Contracting	Renova				2	Full Contain	nment w	ith Negati	ve Pr	essu	re		
≥100 St 01 ≥200 II		П	Demolit	ion	*		K	Mini-Enclos Glovebag P		•					
			-1				Ĺ	Non-Exempt			able F	roce	dure		
		Is	Locati	on										emen	t
Location			Normal d Sole				scription				7 3		_ T	уре	
Asbestos-Containing TO BE ABA			intena					aterial (ACM) insulation,		Amount	1	_		m	m
In Facil		Cus	todial S (12)	Staff?	(1.6	surfac	cing, VA	T, or		(Specify SF or LF)		Remova	Re	Encapsulate	Enclosure
(13)			(12)		4	other m	niscellan	eous)				SVOI	Repair	sula	Sur
N. C.		Yes	No	N/A							- 1	=		ē	O
inside	e	X			1 FI	pipe	insulat	tion		136 l/f		V			1
tank		X		100			insulat			510 s/f	7	$\Diamond$	Same of		
through		$\langle \rangle$					stos de		-			$\Leftrightarrow$	-		
	out						1			400 s/f		$\ominus$	-		
Name of Registered Was	te Hauler		l N	J DEP W			ite can			965 s/f		X	-	- 1	1.0
			1000	auler ID		Cubic of Was		Name o	of Regist	tered Land	dfill				
Newark Carting / Rov	ric			450	9		20.1	Cumbe	erland	County	Lan	dfill			
City, State	Appliyana 1997 -				47.12	Dispos	al Date	City, St							
Newark / Riverdale, N	11	1000		1902 to		· ·	/28/12	Newbu	rg, PA						9.9
Completed by	3	Title				Şi	gnature	11/2		24	Date				-
Mike Cooper		Presid	ent	78-5	2		1000//	1			1/11	/13			1.52

Date of Notification (1)			Nam	e of Buildin	g Owner/Operate	or (2)		PEO.	ithm .			
December 20, 201 Agencies Notified Type Notifica		1	Park	er Landso	caping & Con	struction				1/2	Fa.	
Agencies Notified Type Notifica	tion	19	Stree	et Address		- addon	- 2017	1811			<u></u>	
EPA Initial			PO E	Box 4126				IAN 22	D			
DEP Amende				State, Zip (	Code (		A4 66.5		re	12:	50	
DOL Amenda	nent #			ne, NJ	. 1181						0.0	
DOH Emerge	ncy (includ	ing		of Contac			_ G/	100,0	12	3.	· · ·	
DCA Cancella	8.00.0		90000				Tele	ephoneN	umbe	5¢ 115	UL -	
			Mana		-05144							
Name of Facility Where Abatement is T	aking Place	e (3)		CILITY IN	ORMATION	T- (F W					+ 0 1	
Building		11.5				Type of Facilit	y (4)					
Street Address					1.0: -9	School (F	(-12)					
700 Charles Street						Subchap	ter 8 (Othe	r than K-	12)			
City (5)						Other (i.e etc.)	e. private &	commerc	cial b	uildin	gs, ho	mc
			(			Square Feet	# of	Floors		Did	. ^	
Sloucester City, NJ								10013		ыад	g. Age	E
County (6)		1	Count	y Code (7)		Current Use /F	Prior if hoir	- 41	- 1			
Bloucester			(STATI	E USE ONLY	)	Current Use (F			ned)			ĺ
Name of Monitoring Firm Hired by Buildi	ng Owner	(8)	ASC	CM No.	Nome	of Abota	В	uilding				
ET, Inc.	F 0	1000	002			of Abatement C		9)	- fr			-
Street Address		-	002			ACK Group,	LLC	Pr				
07 Doolittle Drive					The second second	Address	Fa San					
City, State, Zip Code					1500	Kings HWY N	, STE 20	)9				
ridgewater, NJ 08807					City, S	tate, Zip Code						-
Project Manager for Manager	5 m				Cherry	Hill, NJ 080	34					
Project Manager for Monitoring Firm			Teleph	one No.	Teleph	one No.		License N	10			_
ric Houseknecht			(908) 2	218-1108		759 - 5000	12 (14)		U.			
Start Date (10)	Schedi	uled Co	mpletion	Date (11)		of OSHA Monito		0781	-			
1/14/12			2/28/1	12								î
Occupancy Status During Abatement (Ch	eck Only (	One)	2,20,		Street	ACK Group, I	_LC					
Facility Closed/Vacated During Entir					The same of the sa							
- Abatement Performed Unitside of No	rmal Facili	tv Hour	ment		1500 K	lings HWY N,	STE 20	9				
Other - Describe:		ty mour	3		City, St	ate, Zip Code	7.1					
cope of Work (Check All That Apply)		10.11			Cherry	Hill, NJ 0803	4					
] ≥3 sf or ≥3 lf	5-7					1		-	_			_
≥160 sf or ≥260 if	X	Renova		1.5	>	Full Containm	ent with N	ogotive D				
3		Demoli	tion		≥	Wini-Enclosure	9.	syative Pr	essu	re		
					×		cedure					
			61 17			Non-Exempted	(*) and No	n-Friable F	roce	dure	2108	
Location of		s Locati Normal				100			1		temen	t
Asbestos-Containing Material (ACM)		ed Sole	ly by	Ashaata	Description of	of			-	- 1	уре	_
TO BE ABATED		aintena		(i.e. t	os Containing Ma hermal systems	iterial (ACM)	Amo	0000HC3		-	m	1
In Facility (13)	Cus	todial S (12)	taff?		surfacing, VAT	or I	(Spec		Re	Z	nca	1
(10)		()			other miscellane	ous)	31 01	LF)	m <sub>o</sub>	Repair	psu	
	Yes	No	N/A		al as he as				Removal	Ť	Encapsulate	
inside	V	140	IN/A		100000000000000000000000000000000000000		Take the c	**		7.00	Ф	
	$+ \Diamond$			on the second	pipe insulation	on	136	I/f	X	E.S.		
tank	-X	1-1		Les contra	tank insulation	on	510	s/f	X			
throughout		- 1 - E	Section 19	asbestos deb	ris	400 s	s/f	X		'.t.c.'	- 1	
me of Pagistored Wests III		14.		transite cano	py	965 s		$\langle \rangle$			- 10	
me of Registered Waste Hauler	A ST	N.	DEP W	aste	Cubic Yards		egistered l				1	_
	*	Ha	auler ID N	No.	of Waste		- giotoreu i	Landill				
vark Carting / Rovic		1.00	450	9	20.1	Cumberla	nd Cour	ity Lanc	lfill			
				THE RESERVE TO SECURE ASSESSMENT OF THE PERSON NAMED IN COLUMN TO SECURE ASSESSMENT OF THE PERSON NAMED IN C				-,	eent.	1		
/, State					Disposal Date	City, State						
y, State vark / Riverdale, NJ			2329		Disposal Date 2/28/12	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				15 00 100		
wark Carting / Rovic y, State wark / Riverdale, NJ mpleted by e Cooper	Title Presid		244			City, State Newburg,		Date	-			

ASB-41 (R-06-08)

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



ate of Notification (1) 6/29/12	11				wner/Operator nent, LLC	(2)	2	2013	AN 20	4			
gencies Notified Type Notification	ε		Street Add	dress			ß.		VAN 22	H	2:5	2	T
EPA Initial Amended Amendment #				worth R				<u>€</u> /	100,60	1.5 1	1		
DOL Amendment #_ Emergency (in		100		NJ 0701	12			Tale	phone Num	V/ /	·UL		
DOH justification)  DCA Cancellation	oluding	100	Name of O	Contact hael Del	Blasio			I Tele	ednone Mun	oei	1		
The second secon			FACIL	ITY INFO	RMATION		6 E - 1976 - 74						
ame of Facility Where Abatement is Taking Felician College - Milton Court Resid	Place (3) dence H	lall		-			f Facility (4 chool (K-12						
treet Address						IXI S	ubchapter 8	(Othe	er than K-12) commercia	l Lbuild	lings	home	20
1 Milton Court						□ e	tc.)		14 (32				
ity (5) Rutherford	24					Square 80,00		4	Floors		ldg. A	ge	
ounty (6) Bergen			County C	ode (7) SE ONLY)		Currer		r if bei	ng demolish	ed)	9.75	1	Ī
ame of Monitoring Firm Hired by Building On Accredited Environmental Technology	wner (8)	L c.	ASCM 00021	Manuacutt C			ement Cont						
treet Address	<b>3</b> ,	47.0			1	t Addres	s ant Aveni	IIA.				1	
907 Doolittle Drive						State, Zi						-	_
ity, State, Zip Code Bridgewater, NJ 08807					Clift	on, NJ	07013	3.00	Hiller				
roject Manager for Monitoring Firm Mr. Eric Houseknecht			Telephon 908-21		973	hone No -689-62	281		License No 01099	). 			
	Schedule 03/29/1		npletion D	oate (11)			A Monitor onmental	Labo	ratories L	LC			
Occupancy Status During Abatement (Check			ш.			t Addres 3 Rout	s e 22 Wes	st					
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal Other – Describe: Occupied Building	eriod of A al Facility	Hours	nent 3			State, Zi on, NJ							
Scope of Work (Check All That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		lenova emoli				Min Glo	i-Enclosure	e cedure	n Negative P				
		59 95 N				∐ Nor	n-Exempted	d (*) an	d Non-Friab	le Pro	Cedur		nt
		Locat Vorma			Description	n of				_		ре	_
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Ma	d Sole intena todial (12)	ince/ Staff?	Asbest (i.e.	tos Containing thermal syste surfacing, \ other miscell	Material ns insula AT, or	(ACM)	(	Amount Specify F or LF)	Removal	Repair	Encapsulate	Literation
	Yes	No	N/A	-	nentitious F	ironros	fina	25	700 SF	X			+
Bathrooms-ThroughOut Building		X		Cer	nentitious F	rreproc	ning	33,	,700 31	^	1,17	-	+
Floors and In Pipe Chases		1 4 7		19 1 7					22 1			2.73	+
	1 1 1					-	- COL 1	F.,	e Tarage To				1
Name of Registered Waste Hauler			NJDEP W		Cubic Yards		The second second	11.15.11.12.11.11	ered Landfill		190	moles e-e	
Pyramid Contracting Corp.			Hauler ID 32613	No.	of Waste		G.R.O.	W.S.,	Inc.	10	- 4		
City, State Clifton, New Jersey					Disposal Da	te	City, Stat Morrisy	ie vitt <b>e</b> , F	enngylva	nia			
Completed by	Title		Vanger	= 11 <sup>2</sup> 110050	Signat	hd/	1/	D	1/1	ate 1/15/	13	- 4	- 19



nece	NO	TIFIC/ (Pur	ATION O	of New Jerse F ASBESTOS NJAC 8:60 ar	ABATER	AENT		REC	Elv	Cr	ą.		
Date of Notification (1)		N		uilding Owner/		(2)	2013	JAN 2		in la	d		
1/5/13				- CARL	2000			CHILD S	2 py	7			$\dashv$
Agencies Notified Type Notification	=	S	treet Add	ress STEV	IENS	AU	e. A is			<: ₹	8		
EPA 🗵 Initial		-		Zip Code			Ĉ.	1100	U.35.	100			
EPA Initial Amended Amendment#			RIPG	Ewool	NT	07	450	LICE	43/NG	HU,	4		
DOH justification)	cluding	N	ame of C	ontact		,		Telenho	no Number			_	
DCA Cancellation				TY INFORMA	TION				f.		- 1		
Name of Facility Where Abatement is Taking	Place (3)					Туре	of Facility (4)		٠.				
CARLSON			51				School (K-12)	(Oth 4h-	1/ 401				
Street Address	390003 24902	t.					Subchapter 8 Other (i.e. priv	(Other in: vate & cor	an K-12) nmercial l	buildir	ngs, h	omes	5,
309 STEUENS AUE						- 6	etc.)				g. Ag		_
City (5)						0.0000000000000000000000000000000000000	re Feet	# of Floo	ors		o. Ay	e	
RIDERWOOD							\$ 00 ent Use (Prior	1	emolisher		_	_	
County (6) BENGEN			County Co STATE US			Cuite	R!	ES.	omono.	.,			
Name of Monitoring Firm Hired by Building O	wner (8)		ASCM	Vo.	Name	of Aba	tement Contr						
Name of Monitoring Fifth Fifted by Building C	witer (o)		71.00				ontracting						
Street Address						t Addre	ss ell Road		8 -8 B				
City, State, Zip Code		74			City, Gle	State, Z n Roc	ip Code k, N.J. 074	152	Ü.,		**		
Project Manager for Monitoring Firm		T	Telephone	e No.	520,500,000	hone N			ense No. 0156				
Start Date (10)	Schedule	d Gom	pletion D	ate (11)	Name	e of OS nega E	HA Monitor nvironmen	ntal Serv	rices Inc	).			
Occupancy Status During Abatement (Check	k Only One	e)				t Addre							
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm	eriod of A	batem	ent		City,	State, 2	er Street Zip Code						
Other - Describe:					Ha	ckens	ack, NJ 07	000	100				
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 if ≥160 sf or ≥260 if	R	enova emoliti	tion ion			N C	ull Containme ini-Enclosure lovebag Proc on-Exempted	edure				e	
	l le	Locati	ion		*			4-11				emeni pe	t
Location of	1	Iormal d Sole	ly	Asbestos (	Description		al (ACM)	Amo	unt				T_
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	intena todial ( (12)	nce/ Staff?	(i.e. ther	mal syste urfacing, \ er miscell	ms insu /AT, or	lation,	(Spe SF or	cify ·LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A							-		"	-
GASEMENT			X		PIPE			6	OLF	X		-	+
			-						4 (	-	-	-	+
										+		-	+
At		1	NJDEP W	laste C	ubic Yard	ŝ,	Name of	Registere	d Landfill	1	1		
Name of Registered Waste Hauler Rovic Transport		1	Hauler ID 20785	No. of	Waste	/	IESI P	A Bethle	hem La	andfil	I Co	rp.	
City, State Riverdale, New Jersey 07457				D	isposal/Da	302	City, Stat Bethle	hem, PA	18015		1		
Completed by R. McDonald	Title Pres	siden	t		Signa	LIM!	Sell		1	1/2	11	3	



Checi		197.30	,			60 and 12:1			P. C	22 PM 2					
Date of Notification (1)						wner/Operate			-	///	1				
Januar	y 17, 2013		_			ing & Cor	struc	tion 2013	JAN.	10	***			-	
Agencies Notified	Type Notification			Street Add					11/4 <	2 PM 2					
⊠ EPA [	Initial			O Box						., <	. 08				
T DEP	Amended	2		City, State	¿ Zip Cod	е		1		16		£			
DOL L	Amendment # Emergency (ii			Vayne, N			31		LIGH	Nothing 1	ØL.		1168		
☑ DOH	justification)	nordaning	20	Name of (	Contact				Tele	phoneNum	per				
DCA [	Cancellation		· N	/lanager		16 150						14.7			
d to				FACILI	ITY INFO	RMATION	Tur	e of Facility (4	Y		_	-			
Name of Facility Where Al	batement is Taking	Place (3)	= 0			Maria areas to a	l i yi						٠. °		
Building			1 11.5				$\dashv$ H	School (K-12 Subchapter		r than K-12)	39				
Street Address								Other (i.e. pr	rivate 8	commercial	build	ings,	home	s,	
700 Water street		12 0	4 0		V3.6, 5			etc.)					-	_	
City (5)							Sq	uare Feet	# of	Floors	BI	dg. A	ge		
Gloucester City, NJ											9 65			11	
County (6)			77-27	County Co			Cu	rrent Use (Prio	r if beir	ng demolishe	ed)	*			
Gloucester				(STATE US	SE ONLY)	***				Building					
Name of Monitoring Firm	Hired by Building (	Owner (8)		ASCM	No.	Nar	ne of A	batement Con	tractor	(9)					
AET, Inc.				0021		The	MAC	K Group, LI	C .		-			1	
Street Address	Tab. 49 No. (1-)2	7.14				Stre	et Add	ress							
907 Doolittle Drive					7 7 . 3	150	0 King	gs HWY N,	STE 2	209				- 9	
City, State, Zip Code						City	, State	, Zip Code							
Bridgewater, NJ 0880	17					Che	rry H	ill, NJ 08034	1						
Project Manager for Monit				Telephon	e No.		ephone			License No	١.			- 1	
Eric Houseknecht			1	908) 21	8-1108	(973	3) 759	- 5000		00781					
Start Date (10)		Schedule		npletion D		1	,	SHA Monitor		- 1			1		
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Newark Carting / Roy	VIC	A CANAL PROPERTY.		430		Disposal D		City, Sta			HE DER	- //			
City, State	N. P.					2/28		Newbur			1			200	
Newark / Riverdale,	NJ	Title	•			Signa		1100000	3, , , (	Da	te -		71:		
Completed by					o Tig	Sign	19		/						
Mike Cooper		Presi	dent	10.50				1/17/13							

		-T	Name of Building Owner/Operator (2)											
ate of Notification (1)	16 2013	F	Name of Building Owner/Operator (2)  Parker Landscaping & Construction  Street Address  2013 JAN 22 PM 2: 58											
	ary 16, 2013 Type Notification		Street Address											
gencies Notified			PO B	ox 412	6			9850 ·	fi				1	
EPA	Initial Amended		City, State, Zip Code											
DEP	Amendment #2		Wayn	e, NJ		TelephoneNumber								
DOL	Emergency (including	ng	Name	of Con	tact	Telephonor								
DOH	justification) Cancellation		Manager  FACILITY INFORMATION  Type of Facility (4)											
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uilding Street Address							Other	(i.e. private	e & commercial	buildings	5, 1101	nes,		
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loucester City, N.		County Code (7)				Current of	se (1 1101 11 2	Building	1 1.2+		79			
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Name of Monitoring F	er (8)	ASCM No.												
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ET, Inc.		7 1/2 1/1	-				Address	MAL CTI	= 200	1,-1,4				
Street Address					1500 Kings HWY N, STE 209									
907 Doolittle Drive						City, State, Zip Code								
City, State, Zip Code						Cherry Hill, NJ 08034 License No.								
Bridgewater, NJ 0	Manitoring Firm		l elephone ivo:				Telephone No.							
Project Manager for			(908) 218-1108				(973) 759 - 5000 00781  Name of OSHA Monitor							
Eric Houseknecht	i Sc	heduled	Comple	etion Da	te (11)									
Start Date (10)				28/12		The	MACK Gr	oup, LLC	•			-		
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			10	nn.			Full (	Containment Enclosure	with Negative	Pressure				
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<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

Date of Notification (1)			Name of Building Owner/Operator (2)												
Janu	ary 11, 2013			Parker L	andsca	ping & Co	onstruc								
Agencies Notified	Type Notification			Street Ad	Idress			2013 JAN 22 PM 2: 58							
EPA	Initial (			PO Box	4126			20.0 OUL 55 111 5.59							
□ DEP	Amended		City, State, Zip Code Wayne, NJ					* 3000 Tes can liket							
DOL	Amendment #														
DOH DOH	Emergency (in justification)	ncluding		Name of	Contact			EE	Telephonel	Number					
DCA .	Cancellation			Manage	r		1 30			9.		54	1		
		12 1				ORMATION							, v		
Name of Facility Where	e Abatement is Taking	Place (3	()				Тур	e of Facility (	4)						
Building	1000			All San				School (K-1							
Street Address					A . 184				8 (Other than I private & comme		dinas	home	25		
700 Charles Street								etc.)	- Commit	oroidi bali	J90		,,,		
City (5)			- 4	1 1 1 1		1 N 52 52 54	Squ	uare Feet	# of Floors	В	ldg. A	ge			
Gloucester City, NJ															
County (6)			- 17	County C			Cu	rrent Use (Pri	or if being demo	olished)					
Gloucester				(STATE U	SE ONLY)		-		Buildin	g					
Name of Monitoring Fir	rm Hired by Building C	wner (8)	-	ASCM	No.	N	ame of A	batement Cor	tractor (9)				j. 16.		
AET, Inc.		0021	kari ke	Th	e MAC	K Group, L	LC								
Street Address	- 107				reet Add				+0		7				
907 Doolittle Drive				15	00 Kind	s HWY N,	STE 209								
City, State, Zip Code								Zip Code			1				
Bridgewater, NJ 08		4 11 12		Ch	erry Hi	rry Hill, NJ 08034									
Project Manager for Mo		Telephor	ne No.		Telephone No. License No.										
	-	(908) 21		(97	(973) 759 - 5000 00781										
Eric Houseknecht Start Date (10) Scheduled				The same of the sa			Name of OSHA Monitor								
1-16-	12	o o o a a		2/28/12				MACK Group, LLC.							
Occupancy Status Dur		CONIV Or	ne)	2/20/12				t Address							
						21 = 2		gs HWY N,	STF 209						
Facility Closed/Va	acated During Entire F med Outside of Norm	eriod of a	Abate v Hou	ment				, Zip Code	012 200						
Other - Describe:		ur r uo	, , , , , ,			100		II, NJ 0803	1						
Scope of Work (Check	All That Apply)		-		*	Oi	letry i ii	11, 143 0003			-				
l <b></b>	All That Apply)	፟ .				- Republican	X	5. II Oantainm	ant with Nagati	us Drossu					
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									Amount	-	1.	E	m		
	ntaining Material (ACM)  Ma			Staff?	(i.e	. thermal sys			(Specify SF or LF)	Remova	Re	Encapsulate	Enclosure		
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Newark / Riverdale	N.I					100000000000000000000000000000000000000	8/12	Newbur			~				
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Mike Cooper		Presid	dent		11-1	1/2	1/	/	/	1/11/13					
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 $<sup>\</sup>ensuremath{^{\star}}$  Do not use this form for asbestos licensure exempted activities.

Date of Notification (1)	SANSH SICH		Ville.	Nam	e of Buildi	ing Owne	r/Operator	(2)		_ / 1/	A PARTY IN		107		
Decem	nber 20, 2012	2		Name of Building Owner/Operator (2)  Parker Landscaping & Construction  Street Address PO Box 4126 City, State, Zip Code  Wayne, NJ											
Agencies Notified	Type Notificati			Street Address											
EPA .	Initial			PO Box 4126											
DEP	Amended				State, Zip				1 70.4			17 2	-		
DOL	Amendme	ent#			ne, NJ				€.	1125	(		1.5		
DOH	Emergence justification	n)	ling	Name of Contact											
DCA	Cancellati	ion		Manager TelephoneNumber C											
Name of Facility Whore	16-4-				CILITY IN	NFORMA	TION		·		_				
Name of Facility Where A	toatement is Tal	king Plac	e (3)	P.	- 1	7.		Type of Facil	ity (4)						
Building Street Address				217				School	(K 12)						
		1990	14	1 7 1	7.	40 1 4		Subcha	pter 8 (Other tha	in K-12)					
700 Charles Street		12501 127	1			- 24		Other (i. etc.)	e. private & con	nmercial	buildir	igs, ho	ome		
The second secon		10 m = 1	14					Square Feet	# of Floo						
County (6)						12 12			# 011100		Bid	g. Age	•		
	Count	y Code (7)			Current Use (	Prior if being de	moliched								
Bloucester	(STATI	E USE ONL	Y)	****				,	2 50						
Name of Monitoring Firm I	ASC	M No.	5 - 1	Name o	f Abatement (	Build Contractor (9)	iiig		_==						
ET, Inc. Street Address	002	1			CK Group			V 1950							
	· Tolono		-	Street A	ddress	,									
07 Doolittle Drive	Artend.	· · · · · · · · · · · · · · · · · · ·	4.25	Add and second soul		N, STE 209									
City, State, Zip Code	- <del>(</del> 42)	1000	1	te, Zip Code	14, 315 209										
ridgewater, NJ 08807	7	-51.	6.				- I	/ Hill, NJ 08034							
Project Manager for Monito	ring Firm			Teleph	one No.		Telephor	phone No. License No.							
ic Houseknecht tart Date (10)		100		(908) 2	218-1108	3		) 759 - 5000 00781							
		Schedi	uled Co	ompletion	Date (11)			e of OSHA Monitor							
1/14/12				2/28/1	2		1		oup, LLC.						
occupancy Status During A					10	3.0	Street Ad	dress	LLO.						
Facility Closed/Vacate	d During Entire	Period of	f Abate	ement			1500 Kir	as HWY N	I, STE 209						
Abatement Performed Other - Describe:	Outside of Norn	nal Facili	ty Hou	rs	1	THE A.	City, Stat	e, Zip Code	1, 012 209						
cope of Work (Check All T					4 3 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			lill, NJ 080	34						
7	nat Apply)				7 77	N TO L		1.000		-					
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		- 1	s Locat	tion		17		14011-Exemple	d (*) and Non-Fri	able Proc					
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ark / Riverdale, NJ				ter.			28/12	City, State				-			
npleted by		Title			175 Tet G			Newburg	, PA			14			
e Cooper						Sier	nature	-		Date			-		

\* Do not use this form for ashestos licensure exampled anti-de-