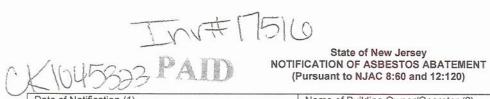
NOCK			ı				ESTOS AB 8:60 and 12				T. T. S. S. M. S. S. S.		2017			
Date of Notification (1	1)	Job	#: 9771.	01	Name	of Build	ling Owner	Operator (	2)		JAN	22	2020	)		
January 10, 2020					Delawa	are Riv	er Port Au	thority								7
Agencies Notified	Notification	Туре			Street	Addres	s								4	
⊠ EPA	☐ Initial N	otificatio	on		One P	ort Cen	nter, 2 Rive	erside Driv	re	1						ŧ
□ DEP	⊠ Amende		OII		City, S	tate, Zip	p Code				1. 1.1 10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				9	
⊠ DOL		ndment			Camde	en, NJ	18101									
□ DOH     □ DCA	☐ Emerge justifica		ciuding		Name	of Cont	act				Te	lephon	e Nur	nber		
	☐ Cancel				Stover	n Hulme	00				85	6-968-	3328			
							FORMATIC	IN	1112		1 00	0 000 0	3020			
Name of Facility Whe	re Abatemer	nt is Tal	king Plac	ce (3)	PAGIL	LI I IINI	ONWATIC		Туре	of Facil	ity (4)					
Ben Franklin Bridge									☐ Sc	chool (K	(-12)					
Street Address									□ St	ubchapt	er 8 (Othe	than K	(-12)	املندها	inan	
420 North 6th Street										tner (i.e omes, et	private &	(comm	erciai	Dulla	ings,	
City (5)									Squa	re Feet	# of F	loors		Bldg.	Age	
Camden		9)							8,000	7.9	2+			30+		
County (6)					County USE C		(7) (STAT	TE			(prior if be					
Camden						_				mercial/	EZ Pass S	Service	Cente	er		
Name of Monitoring F	Firm Hired by	Buildin	ng Owne	r (8)	ASCM N	No.	Name of	Contractor	(9)							
Criterion Laboratori	es				178			roup Reme	diatio	on, Inc.						
Street Address							Street Ad	000 8								
400 Street Road City, State, Zip Code								ams Road, e, Zip Code		I, P.O.	Box 6					
1							200	n, PA 190								
Bensalem, PA 19020 Project Manager for N		rm T	Telenh	one Nu	mher		1000000 (100000 10000 10000 10000 10000 10000 10000 10000 10000 10000 10000 10000 10000 10000 10000 10000 10000	e Number	20	- 1	License Nu	ımber		-		_
The second second	vioriitoring i i			4-1300	ilibei		215-533-					1111001				
Melissa Billingsley Scheduled Start Date	(10)	School	uled Cor		(11)			OSHA Mor	nitor		00858					
	in the result		ry 31, 2	200	1(11)		50000000000000000000000000000000000000	Laborato	330							
January 27, 2020 Occupancy Status Do							Street Ad	Marine Co.	1163							=
☐ Facility Closed/Va					mont		400 Stree	et Road								
Abatement Perfor							City, Stat	e, Zip Cod	e							
Other - Describe:	Work area w	vill be v	acated/is	solated.	0		2500	m, PA 190								
Source of Work (Che	ck all that an	oply)														
		1.77		⊠ Re	novation		Ī	☐ Full Cor	ntainme	ent with	Negative	Pressur	e			
☐ >160 sf or >260 lf				-	molition		Ī	Mini-En	closure	е						
								☐ Gloveba			Non-Frial	hle Pro	cedur	6		
								NOII-LX	Inple	u ( ) and	I NOTI-I TIA	DIC 1 10	T			
			s Location												ement ype	1
Location of Asb	estos-		rmally L Solely b			D	escription of	of			Amount				ype	_
Containing Materia	al (ACM)	M	aintenar	ice/			ntaining Ma				(Specify				m	_
TO BE ABAT			Custodia Staff?	al	(i.e.		al systems acing, VAT				SF or LF)		Rer	20	Encapsulate	Enclosure
(13)			(12)				miscellane						Remova	Repair	psu	losu
		-	1	I	1								<u>a</u>	-	late	ē
		Yes	No	N/A	<u> </u>					2015			V			-
Basement Stairwell to Baseme	nt	X			Pipe In					36 LF 5 LF			X		-	-
Stan Well to DaseMe	2111	^			i ipe iii	Julatio				U L1						
		ID==		0	. ·	LN		1								
Name of Reg. Waste	JDEP V auler ID		Cubic of Wa	Yards	Name of	r Reg.	Landfill									
David Geppert Recy	9272	e etc	1			000 00-000-00-0	s Com	nunity La	ndfill							
City, State			Dispo	sal Date	City, Sta	ate										
Hatfield, PA			01/31	-	Birdsbo	oro, PA	4		D-4	_						
Completed by	Title						Signature	9				Date				
Vincent Primavera	Pro	ject Ma	anager	<u> </u>								01/1	7/202	20		

ASB-41

TON# 17499
STATE OF NEW JERSEY
NOTIFICATION OF ASBESTOS ABATEMENT 0/2 b 1/2 0/98

UNUMO	-1163	The second second	(PURSUA	NT TO NJ	AC 8:60-7 A	ND 12:120	7 Cle	cl ±	=-	214	18
Date of Notification	(1)			Name of	Building O	wner / Ope	rator (2)	2.0	- J		WE
$\frac{-01}{2} / \frac{-21}{2}$	/			Street Ac		LIC SCHOOL	OL DISTRICT		h		11 mm
Agencies Notified	Type of N	otification			428 SCHOO	DL STREET		321 - 1			
☐ EPA		Initial			e, Zip Code	9			JA	N 2 2	2020
DEP		Amended		OR OTHER DESIGNATION OF THE PERSON NAMED IN	RIDGE, NJ						
☑ DOH ☑ DOL		Amendment #		Name of					ne Numb		
		Cancellation	/ justification	BRIAN W	OLFERMA	N		732-602-		ia, Tella Pilosé a P	i i projetara. Projet
				FACILITY I	NFORMATI	ON					
Name of Facility Wh FORMER ROSS STR			Place (3)		Type of Fa	acility (4)					
FORWER ROSS STR	EET SONC	JOL			V	School (K	(-12)				
Street Address					1 🗇		er 8 (Other t	han K-12)			
110 ROSS STREET						Other (I.e.	., private & c				
City (F)	10 / 10		10 . 0 .	<del></del>			omes, etc.)		-		
City (5) WOODBRIDGE	County (6 MIDDLES	50 NOVE	County Code	(7)	Square Fe		# Of Floors		Buildin	g Age	
WOODBINDOL	IVIIDDELO	LX				,000 se (Prior if	being demo	lished)	ł	50 -	+
					SCHOOL	-50.50 • 00.000				10.500	
Name of Monitoring	Firm Hired	by Bldg. Own	er (8)	ASCM NO	9						
AHERA					NORTHST	TAR CONTR	RACTING GR	OUR INC			
Street Address					Street Ad		CAOTING ON	001 , 1140			
PO BOX 385					1						
City, State, Zip Code					_	s Parkway					
OCEANVILLE, NJ 08: Project Mngr. For Mo		Iran	ITalanhana Nu		City, State	e, Zip Code					
JOHN SMOYER	onitoring F	irm	Telephone Nu 609-652-1833	mber	Fast Hano	ver, NJ 079	36				
Sheduled Start Date	(10)	Sched. Comp	letetion Date (1	1)	Telephone		,00	License	Number		
01 / 23	/20	_03/	30/	20_							
Occupancy Status D	· · · · · · · · · · · · · · · · · · ·	/ / Charle	/			34-8682			0	00860	
Facility Cl	osed/Vaca	ted During Ent	ire Period of			OSHA Moni	i <b>tor</b> RACTING GR	OUP INC			
Abatemen		tou During Line			Street Add		VACTING ON	.001 , 1140			
		d Outside of N	lormal Facility					797			
Hours - Do						s Parkway					
Other - De	scribe:	6:30 AM-3:00 I	PM			e, Zip Code ver, NJ 079					
Scope of Work (Che	ck All That	Apply)		11. 20 H-25.	4	,					
☐ Demolitio	n	7	Renovation		Full Conta	inmont wit	th Negative F	Proceuro			
☐ ≥3sf or ≥3			removation	H	Mini - Enc		iii ivegalive i	ressure			
	≥260 If					Procedure					
122				V	Non-Exem	npted (*) an	d Non-Friab	le Proced	ure		
Location of	f	Is	<u> </u>	Descript	ion of			Abateme	nt Type		
Asbestos Conta	ining	Location	As	bestos - C				R		E	E
TO DE ADAT		Normally		Material			Amount	E	R	N	N
TO BE ABAT in Facility		Used Solely		e., therma	l systems facing, VAI		(Specify SF or LF)	M	E P	C	C
(13)		by Main-			ellaneous)		SF OF LF)	v	A	P	0
		tenance/						A	i i	s	S
		Custodial						L	R	U	U
		Staff (12)								L	R
DEMOLITION DEBRIS	3	YES NO N/A	DEMOLITION I	DEBRIS			30,000 SF	7			
DEMOCRATION DEDICA			DEMICETION	DEDITIO			50,000 01		┟╌┼	+ +	<del>                                     </del>
2		1 1 1 1 1 1							<u> </u>	1 5	15
W 7012											
Name of Registered			NJDEP Waste			Registered		20.1111.1	ANIDE		
NORTHSTAR CONTR HORWITH	ACTING G	ROUP INC	Hauler ID No. 30534	Yards of Waste	WASIEM	ANAGEME	NT - FAIRLE	SS HILL L	ANDFILL	•	
City, State			30001	Disposal	City. State						
EAST HANOVER, NJ				Date	MORRISV		/	7			
Completed by (Print	or Type)		Title			Signáture		/		Date	
Stove Stiles	262)					XI	on X	9	}	-	- Comment
STOUG STILOG			Illrainat Marass			e in in	V/0-111	C A			4 (04 (00

Date of Notification (1)	4 4 8 8				Nomo	of Duilding	- 0	nor(Onorotor /	2)	JAN	22	2021	}	11.
01 /	16 /	20			27.000			ner/Operator (2 ties, LLC	2)	7	~ :	I	1	1
Agencies Notified							Pon				5F	5 4	1	1.
⊠ EPA	Type Notifica	HION				Address 9 East 9 <sup>t</sup>	h e4	oot.		10.00		L.	3119	
☑ DOLWD		E				State, Zip C		eet		and the second s				249
☑ DOH	Amendme				1.5	klyn, NY		20						
DCA	Emergend		cluding	3		of Contac	2000	3U		T-1-1-N				
(NJAC 5:23-8)	justification   Cancellat				Avi		ı			Telephone Num				
	L Caricellat	1011								646-946-274	0			
Name of Facility Where	Abatanantia T	-1-1	Disease	(2)	FA	CILITY IN	FOR	RMATION	T	7.13				
Name of Facility Where A	Abatement is 1	aking	Place	(3)					Type of Facility					
Street Address									☐ School (K-12	:) 3 (Other than K-12	2)			
Street Address									Other (i.e., p	rivate and comme	rcial bu	ilding	s,	
City (5)			-						homes, etc.) Square Feet	# of Floors	DI	da ^	~~	-
Bradley Beach									4000	2	- 4 -	dg. A 70	ge	
County (6)					Cour	ty Code (7	VSTA	TE USE ONLY)		ior if being demolis		10		
Monmouth					Cour	ity Code (/	NOTA	TE USE CIVET)	Residence	ioi ii beilig demois	sileu)			
Name of Monitoring Firm	Hired by Build	lina O	wner	(8)	ASCM	No	Nar	me of Abateme	ent Contractor (9)					
N/A	rinea by bane	mig O	WIIOI	(0)	/ 100IVI	140.			ntracting, Inc.					
Street Address							_	eet Address	itacting, mo.					-12
						889 Route 9	Unit 61							
City, State, Zip Code							100	, State, Zip Co						
The state of the s							1		New Jersey 08	755				
Project Manager for Mon	itoring Firm			Tele	phone	No.		ephone No.		License No.				
					•			32-349-9932		00624				
Start Date (10)	S	ched	uled C	omple	tion Da	te (11)	Nar	me of OSHA M	lonitor				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
01/17/	_20_	0	1_ /	_ 22	2_ /	20_	E	.M.S.L. Anal	lytical					
Occupancy Status During	Abatement (0	Check	only	one)			Stre	eet Address						
☐ Facility Closed/Vacate					ment		1	056 Stelton						
☐ Abatement Performed							City	, State, Zip Co	ode					
Time of Abatement: _	AM	PN	Λ/	PM		AM		Managari en	New Jersey 08	854				
Scope of Work (Check al	I that apply)						1							-
☐ ≥3 sf or ≥3 lf			☐ Re	novat	ion			☐ Full Cont ☐ Mini-Enc	ainment with Neg	gative Pressure				
≥3 si oi ≥3 ii     ≥160 sf or ≥260 lf			☑ De	****				☐ Glovebag						
								Non-Exe	mpted (*) and No	n-Friable Procedu	re			
				Loca Norma				22 TO TO THE OWNER OF THE ACT OF			Ab	atem	ent T	уре
Location Asbestos-Containing		,	2000		ely by	Ashe	etne i	Description o Containing Ma		Amount	Re	Re	E	m
TO BE ABA	ATED	'	0.558	intena	nce/ Staff?		., the	rmal systems i	insulation,	(Specify	Removal	Repair	cap	Enclosure
IN Facili	ty		Cus	(12)	Olan :			urfacing, VAT, ner miscellane		SF or LF)	<u>a</u>		Encapsulate	ure
(10)		8	Yes	No	N/A		Oti	ici illisocilario	ousy				e	
exterior						asbesto	os ro	ofina		4150 sf			П	
exterior						asbesto		CONTRACTOR OF THE CONTRACTOR O		3500 sf		П		
					H	00000				0000 31				H
											-			H
Name of Registered Was	te Hauler				JDEP V	Maste	Cub	oic Yards of	Name of Regis	etered Landfill				
Guardian Contracti				110	lauler II	O No.	Was	ste	T.R.R.F.	stered Landilli				
City, State					20223	5	Dist	5 posal Date	City, State					
Toms River, New J	ersey						110.000	1/22/20		Pennsylvania				
Completed By (Print or Type) Title Signature Date										/				
Nicholas Fernicola		Pi	roject	t Man	ager				1/1	way to the state of the state o	1/	K.	1)	0



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3	110	173	1 197	13	1 5 4
73	(0)	tha named and	1 13	11.7	1.34

Date of Notification (1) 01/17/2020					Building (		perator	(2)			JAN	2 2	202	0	111	
Agencies Notified	Type Notification  Initial			Street A	ddress								7 :3:			
× EPA × DEP × DOL	Amended Amendment Emergency (		- L	Ridgev	te, Zip Co vood, N		60		(iii)	20000 20		- 1			W. 5	
DOH DCA	justification) Cancellation			John F	Contact Pensec					Tele	ephone	Num	ber			
Name of Facility Where A	Abatement is Taking	g Place (3)		FACI	LITY INFO	RMATI	ON	Туре	f Facility (4	1)						
House Street Address								S	chool (K-12 ubchapter of ther (i.e. pr	8 (Othe				ings,	home	es,
City (5) Ridgewood		Health and Health and						Square N/A	tc.) e Feet	# of N/A	Floors	3	1000	dg. A	ge	
County (6) Bergen			(	County C	Code (7) JSE ONLY)			Currer	t Use (Prio e	r if bei	ng den	nolish	ed)			
Name of Monitoring Firm N/A	Hired by Building (	Owner (8)		ASCN	No.				ement Cont ment, Inc		(9)					
Street Address								Address	ren Aven	ue						
City, State, Zip Code				77			City, St	tate, Zip	Laborator II and the second							
Project Manager for Mon		T	Telephor	ne No.		Teleph	one No 45868			Licen 0131	ise No	<b>.</b>		./		
Start Date (10) 01/27/2020		Scheduled 01/28/20		pletion (	Date (11)	+			A Monitor ment, Inc	D.						
Occupancy Status During	g Abatement (Chec	k Only One	:)				Contract of the second	Address		772						
Facility Closed/Vaca Abatement Perform Other – Describe: C	ed Outside of Norm					_	City, St	tate, Zip	ren Aven Code J 07512	ue		-21161	1100			
Scope of Work (Check A	Il That Apply)						10101				-					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enovat emoliti				×	Mini Glov	Containme -Enclosure rebag Proc -Exempted	edure					9	
		ls I	ocati	on				11011	Exempted	( ) ( ) ( )	4 11011	· mabi		Abate	ment	
Location			ormall Solel				scription		/A CAA					Ту		
Asbestos-Containing TO BE ABA In Facili (13)	ATED	Mair Custo	ntenar odial S (12)	ice/ staff?		thermal surfa	taining M systems cing, VA niscellan	s insulat T, or		(5	mount Specify For LF		Removal	Repair	Encapsulate	Enclosure
Deserve		Yes	No	N/A		Din -	Jasula	4:			0.1.5				(D	
Baseme	ent	-	X			Pipe	Insula	tion			0 LF		X			
N(D	1	IDED			V					160						
Name of Registered Was Atlantic Carting	Н	JDEP W auler ID 3085		of Wa	Yards ste		Name of F	2		inatili						
City, State Wayne, NJ				Dispo	sal Date	4	City, State Pen Arg		Ą							
Completed by Oliver Hegedis		Title Projec	ct Ma	nager		15	Signature					Dat 01	e /17/2	2020		



CK23	DOPA			CATION	OF ASBI	ESTOS	ABATE				: U	It II	\\/	ii.	
Date of Notification (1) 01/17/2020					Building on Tvers		Operator	(2)		- 1	JAN	2 2	2020	)	
Agencies Notified	Type Notification			Street A	ddress					Ť					
X EPA	× Initial									-					
× DEP	Amended				ite, Zip Co				V.		[41]	ed.d	. ~h		
× DOL	Amendment :		_ [		ius, NJ (	)/652								t on the st	
DOH	justification)	3			Contact Tvers	lav				Tole	enhane Nii	mher			
DCA DCA	Cancellation				LITY INFO		ON			,00	•	-		-	
Name of Facility Where	Abatement is Taking	Place (3	3)	FACI	LITTINE	JRIVIATI	UN	Туре	of Facility (	4)					
House								П	School (K-1	2)					
Street Address		vs.11 <u>——</u> —————————————————————————————————							Subchapter Other (i.e. p	8 (Othe			dings,	home	es,
City (5)									etc.) re Feet	# 01	Floors	T D	ldg. A	00	
Paramus								N/A	re reet	N/A			Idg. A	ge	
County (6) Bergen					Code (7) USE ONLY			Curre	ent Use (Pri	or if bei	ng demolis	hed)			
Name of Monitoring Firm	n Hired by Building C	Owner (8)		ASCN			Name		tement Cor	ntractor	(9)				
N/A	15 458	9/6/9							ement, In	C.	100-100				
Street Address								Addre	ss gren Avei	nue					
City, State, Zip Code									ip Code IJ 07512						
Project Manager for Mor	pitorina Firm			Telepho	ne No			hone N			License N	do.			
Project Manager for Mor	moning Firm			releprior	ne no.			34586			01311	VU.			
Start Date (10) 01/29/2020		Schedul 01/30/2		npletion l	Date (11)				HA Monitor ement, In	C.					
Occupancy Status Durin	g Abatement (Check	k Only Or	ne)				Street	Addre	SS			4			
	ated During Entire F								gren Ave	nue					
Other – Describe:	ned Outside of Norm	ai Facility	/ Hours	i 		_			ip Code IJ 07512						
Scope of Work (Check A	All That Apply)														
× ≥3 sf or ≥3 lf		-	Renova					4	II Containm		Negative	Pressu	re		
≥160 sf or ≥260 lf		X [	Demolit	ion				Glo	ni-Enclosure ovebag Pro						
							>		n-Exempte		d Non-Fria	ble Pro			
		1 (2)	Locati										Abate	ement pe	
Location			Normal ed Sole		Aabaa		scriptior taining N		1 (4 0 8 4)	۸		-	1		
Asbestos-Containing TO BE AB		138 3377	intena todial S			thermal	system	s insula			mount Specify	R	ת	Enc	En
In Faci (13)		Cus	(12)	olaiir			cing, VA			SF	or LF)	Remova	Repair	apsı	Enclosure
(13)		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		T N//A		Ou let 1	HISCEHAI	neous)				Val.	=	Encapsulate	ure
Kitche		Yes	No X	N/A			inoleur	m		14	10 SF	x			
, ,,,,,,,,	X											-			
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												+			
Name of Registered Wa	ste Hauler		I	JDEP W	/aste	Cubic	Yards		Name of	Registe	ered Landfi				
Atlantic Carting			33	lauler ID 6085	No.	of Wa	ste		Grand						
City, State Wayne, NJ						Dispo	sal Date	9	City, Stat		Α				
Completed by		Title	Value 200				Signatur	e	J. 317 AU	יינפ		ate			
Ned Joksimovic		200,000	ect Ma	anager			- 13. Tatal	-	书		10.000	1/17/	2020		

CK 12110 PATT	Se la companya de la companya dela companya dela companya dela companya de la com		CATION	N OF ASBE to NJAC 8	STOS	ABATE		2 m² m² 1 m²	+ ='d' = + 'sa				- 46 ° FA	
Date of Notification (1) 01/17/2020	R.			of Building (		Operator	(2)	111 111		= 6	15 1	\ <i>\\\\</i>	12.2	
Agencies Notified Type Notification		-	Street A					117		8851	0.0			
X EPA X Initial								7		JAN	2.2	2020	1	5:
X DEP Amended	4			ate, Zip Co		40			i		Care No.		1	
DOL Amendment Emergency (		-	3.50	wood, N	J 0702	40			1.			113.7		
DOH justification)  DCA Cancellation	100			f Contact Sullivava	n				l el	ephone N	lumber	2. ************************************	Ani	2090
Cancellation				ILITY INFO		ION			1					-
Name of Facility Where Abatement is Taking	g Place (	3)	,,,,		71 (1017 (11		Type of	Facility (	4)	-833			7 (27)	
House								thool (K-1						
Street Address								ibchapter her (i.e. p c.)				ldings	, home	es,
City (5) Maplewood							Square N/A	Feet	# o N//	f Floors A	111	Bldg. /	Age	
County (6) Essex				Code (7) USE ONLY)			Current House	Use (Prid	or if bei	ng demol	lished)			
Name of Monitoring Firm Hired by Building (N/A	Owner (8)	)	ASCN	M No.				ment Cor ment, In		(9)				
Street Address							Address	en Aver	nue					
City, State, Zip Code							State, Zip wa, NJ							
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph	hone No. 345868			License				
Start Date (10) 01/28/2020	Schedul 01/29/		npletion	Date (11)			of OSHA	Monitor ment, In	C.					
Occupancy Status During Abatement (Chec	k Only O	ne)				Street	Address							
Facility Closed/Vacated During Entire F								en Aver	nue					
Abatement Performed Outside of Norm  Other – Describe: Occupied	al Facility	y Hours	3			0.722	State, Zip wa, NJ							
Scope of Work (Check All That Apply)	22.55						_							COOKING CO
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolii				×	Mini-	Containme Enclosure ebag Prod Exempted	e cedure				re	
	Is	Locat	ion									Abat	emen	t
Location of		Normal ed Sole		0	De	scription	n of				_	T	уре	Т
Asbestos-Containing Material (ACM)  TO BE ABATED	Ma	aintena	nce/				Material (A s insulation			mount Specify	, z		En	m
In Facility	Cus	todial ( (12)	Staff?	(,,,,	surfa	cing, VA	AT, or	,		or LF)	Removal	Repair	Encapsulate	Enclosure
(13)		Ι	Τ		other	miscellar	neous)				va	=	ulate	ure
Basement	Yes	No	N/A		Pipe	Insula	ation		6	0 LF	X		-	
			1								+	+	-	
	-		+								+	+-	+-	-
	+		-								+	+	+	-
Name of Registered Waste Hauler		N	JUEP V	Vaste	Cubic	Yards	To the second	Name of	Registe	ered Land	ifill		_	
Atlantic Carting		53.550	fauler ID 6085	No.	of Wa TBD	ste		Grand (	Centra					
City, State Wayne, NJ					Dispo TBD	sal Date		City, State Pen Arç		Д				
Completed by Ned Joksimovic	Title Proje	ect Ma	anager		5	Signature	e 🧹	FU			Date 01/17	/2020	)	

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N. T			<u>~</u>   \\	1 12	
1 .	JAN	2 2	20	20	
	and the second s			.,	,,,
	Telephone Nui	mber		en Luis	
ty (4	1)				
	8 (Other than K-1: rivate & commerci	ial build			es,
	# of Floors 2	100	ldg. A 50	ige	
Pric	or if being demolish	hed)			
	tractor (9) vices LLC				
07	'047				
	License N 01384	lo.			\\\.
	aboratories				
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al L			3		
al L					
Ves	ent with Negative F			e	
nme sure	ent with Negative F		cedur Abate	e ement	l .
Ves	ent with Negative F		cedur Abate	ement	Enclosure
Ves	ent with Negative F edure (*) and Non-Friab  Amount (Specify	ole Pro	cedur Abate Ty	ement	
ves	ent with Negative F edure (*) and Non-Friab Amount (Specify SF or LF)	ole Pro Removal	cedur Abate Ty	ement	

Date of Notification (1)					f Building (		Operator	(2)		11 21,	- C	77	m 1	1.7	170	-21
1/2/2020				Private	e proper	ty										
Agencies Notified	Type Notification			Street A	ddress				1	şi i	.1/	M.	2 2	202	'n	
☐ EPA	Initial								(7)		UF	414	Ann San	200	.0	ř
DEP	Amended Amendment	#			ate, Zip Co	de										
X DOL	Emergency		- 1	Whart											. 2	
DOH	justification)				f Contact / Matare:	00				Te	lephone	Nun	ber	-	v	
☐ DCA	Cancellation			-			1011			1800			-			
Name of Facility Where	Abatement is Takin	g Place (3)		FACI	LITY INFO	RIVIAI	ION	Tv	pe of Facility	(4)				-		
Private Property		. ,							School (K-	Market Tarabasa						
Street Address								H	Subchapte		er than	K-12	)			
								×	Other (i.e. etc.)	private	& comm	ercia	al build	lings,	home	es,
City (5)								Sq	uare Feet	# 0	f Floors		В	ldg. A	ge	
Wharton NJ								20	000	2			+	50		
County (6)					Code (7)			Cu	irrent Use (Pri	ior if be	ing dem	olish	ed)			
Morris County			'	STATE	USE ONLY)											
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	No.		17.00		Abatement Co							
N/A				N/A			ACM	1 Sc	olutions Sei	rvices	LLC					
Street Address							Street									
N/A									st Street							
City, State, Zip Code N/A							The state of the s		e, Zip Code ergen NJ 0	7047						
Project Manager for Mon	nitorina Firm		-	Telepho	ne No		Teleph			7 0 1 7	Licens	e No	)		0000000	
N/A							100000000000000000000000000000000000000		2-9685		0138					
Start Date (10) 1/11/2020		Scheduled		pletion	Date (11)				SHA Monitor		-4					
10 0 0 0 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0	a Abstament (Cha	1/15/202							ironmental	Labor	atories	5				
Occupancy Status During					¥2		Street 2333		iress oute 22 We	st				3		
Facility Closed/Vac									, Zip Code							
Other – Describe:		idi i dollity i	- Curo			_	The state of the s		J 07803							
Scope of Work (Check A	II That Apply)															-
≥3 sf or ≥3 lf	Control of the Contro	TI Re	novat	ion			Г		Full Containm	ont wit	. Nogoti	10 D	roccui			
≥160 sf or ≥260 lf		- CONTROL	noliti	0.000			×		Mini-Enclosur	е		ver	essui	е		
							×		Glovebag Pro Non-Exempte			riahl	o Dro	odur		
		T	,,,		I				NOII-Exemple	u ( ) ai	u Non-r	Habi		Abate		$\neg$
1 4		100000000000000000000000000000000000000	ocation rmall			-		,						Ту		
Location Asbestos-Containing	A STATE OF THE PARTY OF THE PAR	Used	Solel	y by	Asbest		scription taining N		rial (ACM)	A	mount				ш	
TO BE AB	ATED	Maint Custoo	95 V500			thermal	systems	s ins	sulation,	(	Specify		Re	<sub>D</sub>	inca	Enc
In Facil (13)	ity		12)				cing, VA niscellar			S	F or LF)		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A		0.700.770.0			/				a	7	late	лге
2nd Floor bedroo	m and closet			×	Floor	tile 9x	9 unde	er 13	2x12 tile	3	92 SF		X			
Basem				×			r tile 12				00SF	-	X			
Exteri	or			x			ow Cau	_			vindow	10	X			
LXCII		-	^		vviiiu	JW Cat	JINII	19	13 (	VIIIGOV	/5	^	-			
Name of Registered Was		N.	JDEP W	/aste	Cubic	Yards	-	Name of	Regist	ered Lar	ndfill					
Newark Carting Inc		H	auler ID	2000	of Wa			ISES B				ndfil	E			
		04	509								9	iiiiiii				
City, State Po Box 5670						Dispo	sal Date	-	Gity, State		utter	d R	ethle	hem	РΔ	
Completed by	Title				Jan 20	ignatura	oft	2335 A	E008	נטיב	Dat		LICITI	1 /		
Galo Zumba		Princip	al				Signature	_	20				e 2/202	0		
245		ч										1/2	-1202			

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1 1 1 1			(	· · · · · · · · · · · · · · · · · · ·		- une name	-,			E	1	W	132	į.,
Date of Notification (1) 12/20/2019					177	ner/Operator Associates		<b>)</b>		1 11_	. !!	1	1,20	
	Notification nitial		185	Street Ad 320 Mc	dress orris Turn	oike			JA	N 2	2	202	0	
DEP DEP DOL	Amended Amendment #				e, Zip Code Hills NJ			6	) 		- 19	-X 16.3		
	Emergency (inclustification)	luding	N	lame of	Contact				Telephone	Numb	er	Tu.		
	Cancellation		1	Danny	Matarese	1		, i	732-591	626	1			
Name of Familia 18 Reason A between	ant in Taking D	laca (2)		FACIL	ITY INFOR	MATION	Type	e of Facility (4)				-		
Name of Facility Where Abatem Former A&P Supermarks		iace (3)					П	School (K-12) Subchapter 8		V 12\				
Street Address 52 Westfield Ave							×	Other (i.e. privetc.)	vate & comm					S,
City (5) Clark NJ		-0.00					Squa 135	are Feet 500	# of Floors		+5	dg. Ag 50	ge	
County (6) Union County				County C STATE U	ode (7) SE ONLY)		Curr	ent Use (Prior	if being dem	olishe	d)		711 102	
Name of Monitoring Firm Hired N/A	by Building Ow	ner (8)		ASCM N/A	No.			atement Contr utions Servi						
Street Address N/A						2,000,000	t Addre	ess t Street						
City, State, Zip Code N/A								Zip Code rgen NJ 070	)47					
Project Manager for Monitoring N/A	Firm			elephon	ne No.	7.525.71	hone N -552-		Licens 0138		93			
Start Date (10) 1/3/2020	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	chedule		pletion D	Date (11)			SHA Monitor onmental La	aboratories	3				
Occupancy Status During Abate	ement (Check C	Only On	e)	-		Stree	t Addre	ess .						
Facility Closed/Vacated Do Abatement Performed Out	side of Normal			ent				ute 22 West Zip Code	<u> </u>		V-1110			
X Other – Describe: 7:00 AN	6 to 4:00 PM					- Unio	on N	J 07803		5255				
Scope of Work (Check Ali That	Apply)	TANKS OF THE PARTY												
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			enovat emoliti				M G	ull Containmer lini-Enclosure llovebag Proce on-Exempted	edure				9	
		Is	Locatio	on				On Examples	( ) = 110 110			Abate	ment	
Location of			lormall d Solel			Descriptio					_	Ту	pe	
Asbestos-Containing Materi <u>TO BE ABATED</u> In Facility (13)	al (ACM)	Mai	ntenar odial S (12)	ice/	(i.e. th	s Containing ermal systen surfacing, V. ther miscella	ns insu AT, or	ılation,	Amount (Specify SF or LF)	)	Removal	Repair	Encapsulate	Enclosure
Main floor			1000	x		floor tile/m	nastic		13500 S	F	X			
Exterior Masonr	v			x	ex	pansion joi			96 LF		X			
roof	,			X		roof flash	150		1250 LF	:				
1001				-			3							
Name of Registered Waste Hau	ıler		l N	JDEP W	/aste	Cubic Yards		Name of R	Registered La	ndfill				
Newark Carting Inc			Н	auler ID 1509	10000	of Waste			thlehem R		ndfil	I	77-16	25-27 (3-27
City, State Po Box 5670						Disposal Dat	te	Gity State	plebutter I		ethle	hem	PA	
Completed by Galo Zumba		Title Princ	ipal			Signatu		03		Dat		2019		

TON # MAID

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

CK# 1228

100/		行队队员是	(1-6	ar Suarre	D NUMO 0.00	una	12.120)	100			60 12	an area and		1	
Date of Notification (1)				Name of	Building Owr	ner/Op	perator (	(2)		1	lln lit	il V			
12/270/2019				Private	property						4501000				1
Agencies Notified	Type Notific	cation		Street Ad	dress						JAN 2	2 20	20		
EPA BER	Initial Amon	dod	F	City, Stat	e, Zip Code										
DEP X DOL	Amen Amen	ded dment #	_		n Park NJ	l								16	
		gency (including	-	Name of	Contact	SF 15/50	-	- 1/2		Telep	hone Nun	ber .	-	7	
☐ DOH ☐ DCA	justific Cance	ellation		Danny	Matarese					M	454	scen			350
				FACIL	ITY INFORM	MATIC	NC						MANAGE AND A		
Name of Facility Where	Abatement is	Taking Place (3	3)					Type	of Facility (4)	)					
Private Property									School (K-12		70 000000				
Street Address								X	Subchapter 8 Other (i.e. pri etc.)	Other wate & c	than K-12 commercia	!) al buildi	ings, l	nome	s,
City (5)									e Feet	# of F	loors	1000	dg. Ag	e	
Florham Park NJ								2500	00	1		+5	50		
County (6)				County C				Curre	nt Use (Prior	if being	demolish	ied)			
Union County				(STATE U	ISE ONLY) _	MAL COST	-								
Name of Monitoring Firm	n Hired by Bu	ilding Owner (8)	)	ASCM	No.				tement Cont						
N/A				N/A			282-1500		tions Serv	ices L	LC				
Street Address							Street								
N/A									Street					- 2002	
City, State, Zip Code									ip Code	047					1
N/A									gen NJ 07				-		
Project Manager for Mo N/A	nitoring Firm			Telephor	ne No.		Teleph 201-	one N 552-9		100	License N 01384	0.			
SAMPLE CO.		Schedu	led Cor	mpletion I	Date (11)		Name	of OSI	HA Monitor						
Start Date (10) 12/28/2019		12/29					Iris E	nviro	nmental L	aborat	tories				
Occupancy Status Durir	ng Abatemen	t (Check Only C	ne)				Street		ss te 22 Wes	t					
➤ Facility Closed/Vac	cated During	Entire Period of	Abater	ment										-010-0-2	-
Abatement Perform  Other – Describe:	ned Outside 7:00 AM to 4	of Normal Facilities	y Hour	'S		-			ip Code 07803						
Scope of Work (Check	All That Appl	y)													
≥3 sf or ≥3 lf		П	Renov	ation				Fu	II Containme	nt with	Negative I	ressui	e		
× ≥160 sf or ≥260 lf		×	Demol				>		ni-Enclosure ovebag Proc						
							3		n-Exempted		Non-Frial	ole Pro	cedur	е	
			s Loca	tion			1004-00-1-1-1						Abate		
	,		Norma			De	scription	n of					13	ре	
Location Asbestos-Containin			ed Sol		Asbestos	s Con	taining N	Materia			nount	_		四	m
TO BE A	BATED	10	laintena stodial	Staff?	(i.e. th		system		ation,		pecify or LF)	Rem	Repair	сар	nclo
In Fac			(12)	)			miscella				,	Remova	pair	Encapsulate	Enclosure
		Yes	No	N/A								-		te	to
Main	floor		1	X	elbe	ows	(wrap	and c	ut)	20 €	elbows	X			
Wan	11001		-	+								x			
			+			00-20									
				-								+			
Name of Registered W	acta Hauler			NJDEP V	Vaste	Cubic	Yards		Name of	Registe	red Landf	II			
Name of Registered W				Hauler ID 04509		of Wa			ISES B	ethleh	em Rd I	andfi	II		
City, State Po Box 5670						Dispo	sal Date	9	City, State	e pplebu	tter Rd	Bethl	eher	n PA	·
Completed by		Title					Signatur	e Ø	A	· on	20-11	ate			
Galo Zumba			ncipal				(	1	03			2/27/	2019	9	

JOV# 1451

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

CK 35064

Date of Notification (1)		Name of Building MERCK SHARP &		(2)	C			W II
1 / 17 /2020		Street Address		1111		20.04	CC sales	
Agencies Notified Type Notificati	on	126 E. LINCOLN A	/ENUE, P.O. BOX	C 2000, RY28-41	4			
EPA Initial No DEP X Amended X DOL Cancella	Notification #2	City, State, Zip Cod RAHWAY, NEW JE	e		JA	N 2	2 2	920
X DOH On Hold		Name of Contact		Telephone Nün	ber	10.	4 . 44	11.6
DCA EMERGE	ENCY NOTIFICA			732-594-6352		(i.J.	1.40	.ú
		FACILITY INFORMATION						
Name of Facility Where Abatement is Ta MERCK SHARP & DOHME CORPORATION			Type of Facilit	-12)	( 10)			
METOR SHARF & DONNE CORPORATION	JIN		X Other (ie.	er 8 (Other than I private & commo	N-12)	is ho	mes i	etc.)
Street Address			Square Feet	# of Floors	Ji. Diag		g. Age	
126 EAST LINCOLN AVENUE - BUILDIN	G 60		89,717	5			82	
City (5) County (	6)	County Code (7)	Current Use (P	rior if being demo	olished	)		
RAHWAY UNION		(STATE USE ONLY)		ABORATORY AN		FICE	FACIL	(
Name of Monitoring Firm Hired by Build ENVIRONMETAL HEALTH INVESTIGATI		ASCM No. 104	PAR ENVIRON	ment Contracto		ION		
Street Address 655 WEST SHORE TRAIL			Street Address	DOK DOAD				
City, State, Zip Code	V JERSEY 0787	1	313 SPOOK RO					
Project Manager for Monitoring Firm		e Number	Telephone Nun		ense N	lumbe	ar .	
WILLIAM S. KERBEL, CIH	973-729-		845-369-7500	110		*uiiib	**	
Expected State Date (10)		letion Date (11)	Name of OSHA	12 SAY	71		-	-
1 / 20 /2020	BORATORIES IN	C	#	11480				
Month Day Year	Month	Day Year						
Occupancy Status During Abatement (Che X Facility Closed/Vacated During Abatement Performed Outside X Other - Describe: MONDAY	Entire Period of	y Hours - Describe:	Street Address 117 EAST 30TI City, State, Zip	Code	(OD)(	10010		
Scope of Work (Check all that apply)	_ ~~		ainment with Neg	W YORK, NEW Y ative Pressure	OHK	10016	ì	
Demolition X	Renovation	Mini Enc						- 1
>3SF OR LF X >160 SF OR 260 LF			g Procedure ble Procedure					
Location of	Is Location	Description of A		T	Τ	boton	ant T	
Asbestos-containing	normally used			Amount		Daten	ent T	
Material (ACM)	solely by	(ie. Thermal s		(Specify	REMOVAL	REPAIR	ENCAPSUL	ENCLOSUR
TO BE ABATED	Maint/Custodia		7. T.	SF or LF)	Ø	₽ F	P	5
in Facility (13)	Staff (12)	or other miscell	aneous)		Æ	120	SC S	SU
	Yes No N/A						_	D
2ND FLOOR	X	PIPE INSULATION		1,900 SF	Х			
3RD FLOOR	X	PIPE INSULATION		1,900 SF	Х			
					_	1	1	$\vdash$
					+	+-	+-	$\vdash$
	$\bot$				_	_	_	$\square$
Name of Registered Waste Hauler	NJDEP Waste		Name of Regist					
FREEHOLD CARTAGE, INC.	Hauler ID No.	120		UNTY RESOUR		ANAG	EMEN	IT SE
825 HIGHWAY 33 City, State	15939	Dienosal Data		ER DRIVE/ROUT	£ 15			
FREEHOLD, NEW JERSEY		Disposal Date 01/06/20-05/30/20	City State  MONTGOMER	Y PA 17752		1		
Completed by (Print or Type) Title	9	Signature	// X	Dat	e /	1.	11	7-5
	ECTOR OF OPE		1/XX	)   '	/	11	//	101

Date of Notification (1)				Nan	ne of Buildin	g Owne	r/Operator	(2)		- H	1	2153
				MER	RCK SHARP	& DOHN	ME CORP.					
Agencies Notified Type Not				700000	et Address			J.	AN.	2.2	2020	
				126	E. LINCOLN	AVENU	E, P.O. BO	X 2000, RY28-41	4			
	al Notifica ended No				State, Zip C			- Parket Co. V		49 404		20 I
	cellation	uncauc	011	IHAH	IWAY, NEW	JERSEY	7 07065					100
X DOH On	Hold			Nam	e of Contact			Telephone Nur		N.	Sales	
DCA EMI	ERGENC	Y NOT	IFICA	TION KINI	NARI PATEL			732-594-6352				
News of F. W. Mil.				FACILITY II	VFORMATIO							
Name of Facility Where Abatement	is Taking	g Place	e <b>(</b> 3)			Тур	e of Facilit	ty (4)				
MERCK SHARP & DOHME CORPOR	MOITAS					-	School (K					
	UTTION					x	Other (ie	ter 8 (Other than private & commo	K-12)	ac h	mac	oto \
Street Address							quare Feet	# of Floors	Ji. Did		g. Age	
126 EAST LINCOLN AVENUE - BUIL		Y					89,717	5			82	
City (5) Cou RAHWAY UNI	inty (6)				ty Code (7)	Cur	rent Use (P	rior if being demo	olishe	d)		G.
Name of Monitoring Firm Hired by		Owner	(8)	(STATE	ASCM No		DEARCH LA	ABORATORY AN	ID OF	FICE	FACIL	_1
ENVIRONMETAL HEALTH INVESTIG	GATIONS	, INC.	(0)		104	1000	RENVIRON	IMENTAL CORP	ORAT	ION		
Street Address						Stre	et Address		0.0.0	1011		_
655 WEST SHORE TRAIL City, State, Zip Code								OCK ROAD				
SPARTA,	NEW JE	RSFY	07871			City	, State, Zip	Code W YORK 10901				
Project Manager for Monitoring Firm				e Number			ephone Nun		ense	Numb	er	
WILLIAM S. KERBEL, CIH		973	729-5	649			-369-7500	110		varrib	0.	
Expected State Date (10)				etion Date (	(11)	Nan	ne of OSHA	Monitor		-		
1 / 13 /202 Month Day Year	200	5 Month	5 /	30		AME	ERISCI LAE	ORATORIES IN	С	#	11480	)
Occupancy Status During Abatement	(Check o	nly one	1)	Day	Yea		et Address					
X Facility Closed/Vacated Du	urina Entir	re Perio	d of A	Abatement		1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	EAST 30TH	H STREET				
Abatement Performed Out  X Other - Describe: MON	side of No	ormal F	acility	Hours - De	scribe:							
Other - Describe. MOI	NDAY -FF	IIDAY ,	AM-3	:30 PM		City	, State, Zip	Code V YORK, NEW Y	ODIA	1001		
Scope of Work (Check all that apply)					X Full Co	l ntainme	nt with Nea	ative Pressure	UHK	10016	0	
Demolition	X Re	novatio	n		Mini Er	nclo,						
>3SF OR LF X >160 SF OR 260 LF					Gloveb	ag Proce	edure	8				
Location of		ls Loca	tion		escription of				1 4	la a d a a		
Asbestos-containing		ormally			ntaining Mat			Amount		baten		4
Material (ACM)		solely			(ie. Thermal	systems		(Specify	REMOVAL	REPAIR	N C	S S
TO BE ABATED in Facility (13)		int/Cus			sulation, surfa			SF or LF)	9	AR R	AP.	5
iii Facility (13)		Staff (		٥	r other misce	ellaneous	s)		₽		ENCAPSUL	ENCLOSUR
2ND FLOOR	1.0	110	X	PIPE INSU	LATION			4 000 05	1.	+	<u> </u>	1
3RD FLOOR		1	X				-	1,900 SF	X	+	-	$\vdash$
0110 1 20011	_	+	<u> </u>	PIPE INSU	LATION			1,900 SF	X	+	-	$\vdash$
3	_	+-	-						+-	-	_	
	-	+	-						-	-		Ш
		-										
		_										
Name of Registered Waste Hauler FREEHOLD CARTAGE, INC.		DEP W		Cubic Yard		Nam	e of Registe	ered Landfill			-	
825 HIGHWAY 33	Hai	uler ID 15939	250 m. au		120	LYC	OMING CO	UNTY RESOUR	CE MA	ANAG	EMEN	IT SE
City, State		10000		Disposal Da	ate	City.	State	R DRIVE/ROUTI	= 15	_		
FREEHOLD, NEW JERSEY Completed by (Print or Type)	T:41 a			01/06/20-05	5/30/20	MON	IJGØMERY	, PA 17752				
BENJAMIN SANCHEZ	Title DIRECTO	OR OF	OPER	RATIONS	Signature		5	) Date	12.	20	19	

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

			NOT	IFICA	State o	ASBE	STOS ABA	TEMENT	(	ide statement 1773 1781	C	E	\W
Date of Notification (1)			(	Pursu	Na	me of		120-7)  Owner/Operator  DOHME CORP.	(2)	172	(0)	Iva i	1 1 1
1 / 2 /20	20				-			DONIVIE CORP.			IAAI	2 2	202
Agencies Notified Type No.		n					ldress NCOLN AV	/ENUE, P.O. BOX	2000 PV20 44	4	UMI	£.	LUL
	ial Noti		nn		-		e, Zip Code		1 2000, N126-4 I	4			-
	ended			n #1				RSEY 07065	9	, ii ,	1 1 1 1	13. 67	115 117
	ncellati	on									11	arktir	il Ka
	Hold	NOV	NOT	IEIO 4			Contact		Telephone Nun	nber			501100
	ERGE	NCY	NOI				PATEL		732-594-6352				
Name of Facility Where Abatemen	t ic Tal	kina I	Dlace	(2)	FACILITY	INFO	RMATION	T	(4)				
The state of the s	l IS Tai	Killig i	lace	(3)				Type of Facilit School (K					
MERCK SHARP & DOHME CORPO	RATIO	N						Subchapt	er 8 (Other than	K-12)			
Street Address								Square Feet	private & commo	ol. bld		g. Age	
126 EAST LINCOLN AVENUE - BUI	LDING	60						89,717	5	1	DIC	82 82	,
	unty (6	)			Cou	nty C	ode (7)	Current Use (Pr	rior if being demo	olishe	d)		
	ION				(STAT		E ONLY)	RESEARCH LA	BORATORY AN	D OF	FICE	FACIL	_1
Name of Monitoring Firm Hired by ENVIRONMETAL HEALTH INVESTI	Buildi	ng O	wner	(8)		A	SCM No.	Name of Abate	ment Contracto	r (9)			
Street Address	GATIC	)NS, I	NC.				104		MENTAL CORP	ORAT	ION		
655 WEST SHORE TRAIL								Street Address 313 SPOOK RO	OCK BOAD				
City, State, Zip Code	/ 24							City, State, Zip					
SPARTA	, NEW	JERS						SUFFERN, NE	W YORK 10901				
Project Manager for Monitoring Firm			1		e Number			Telephone Num	ber Lic	ense	Numb	er	
WILLIAM S. KERBEL, CIH Expected State Date (10)		10-1		729-5				845-369-7500	110	)1			
1 / 13 /202	20	Sche		ompl	etion Date		/2020	Name of OSHA		_	62		
Month Day Year	12346	Мо	nth	SSEE	Day	J	Year	AMERISCI LAB	ORATORIES IN	C	#	11480	ķ.
Occupancy Status During Abatement	(Chec	k only	one	)				Street Address			ini o il		
X Facility Closed/Vacated D	uring E	ntire	Perio	d of A	batement	w.		117 EAST 30TH	STREET				
Abatement Performed Out  X Other - Describe: MOI	ISIDE O	FRIC	nal F	acility	Hours - De	escrib	e:	City Otals 7					
The state of the s	NUAT	-11111	/A I /	Alvi-0	.30 F W			City, State, Zip	Jode V YORK, NEW Y	ODK	1001	2	
Scope of Work (Check all that apply)		•				X	Full Conta	ainment with Nega	ative Pressure	Orlic	10010	,	
Demolition	X	Reno	vatio	n			Mini Enclo	),					
>3SF OR LF X >160 SF OR 260 LF	1,52					-		Procedure					
Location of		lo	Loca	tion		D		le Procedure		_			
Asbestos-containing				used		Contair	iption of As ning Materia	Destos- al (ACM)	Amount		baten	nent T	
Material (ACM)			olely				Thermal sys		(Specify	REMO'	REPAIR	N N	ENCLO
TO BE ABATED		Main	t/Cus	todial	ir		on, surfacir		SF or LF)	Ò	ıĕ	¥	15 1
in Facility (13)			aff (				er miscella			VAL	1	ENCAPSUL	SUR
	_	Yes	No	N/A						1	_		D
2ND FLOOR				Χ	PIPE INS	ULATI	ION		1,900 SF	X			
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Name of Registered Waste Hauler		NJDE	PW	aste	Cubic Yar	ds of \	Waste	Name of Registe	ered Landfill	1	_		$\vdash$
FREEHOLD CARTAGE, INC.		Haule		Samme 1		120		LYCOMING CO	JNTY RESOURCE	CE MA	ANAG	EMEN	IT SE
825 HIGHWAY 33 City, State		1	5939	9	Di / 6			447 ALEXANDE	R DRIVE/ROUTE	E 15			AND COME
FREEHOLD, NEW JERSEY					Disposal E 01/06/20-0		20	City, State	DA 17750				
Completed by (Print or Type)	Title					Signa		MONTGOMERY	Date				
BENJAMIN SANCHEZ	DIRE	CTOF	OF	OPER	RATIONS		K	$\forall X \supset$	Jak	1 -	2	2020	)

256 Underhill Road

Inv#17423

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Date of Notification (1) 01/16/2020					of Building Ow vella Demo		Control of the second	2)	JAN 2	0 000			1	
Agencies Notified	Type Notification	<u> </u>			Address				JAN Z	<del>&lt; 202</del>	0	11.		
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DEP				1	tate, Zip Code			1.4		·				
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DOH	justification)	3 13	,	The State of the S	of Contact				1	one Numl		100000000000000000000000000000000000000		
☐ DCA	Cancellation				Caravella				(973)	884-490	00			
Name of Facility Where	Abatement is Takin	g Place (	(3)	FAC	ILITY INFOR	MATIC		Type of Facility (	4)					
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Street Address					Allene Control			School (K-1 Subchapter		an K-12)				
1 Lincoln Park							ad Tuessad	Other (i.e. p				dings	, hom	es,
City (5)								etc.) Square Feet	# of Flo	ors	TE	Bldg. /	Age	
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County (6)					Code (7)			Current Use (Pric	or if being d	lemolishe	d)			
Hudson				(STATE	USE ONLY) _		-	Demolition						
Name of Monitoring Firm			,	ASCI	M No.		Name o	Abatement Con	tractor (9)					
IRIS ENVIRONMEI	NTAL LABORA	TORIE	S				Rizov	LLC						
Street Address							Street A							
2333 Route 22 Wes								aston Ave.						
City, State, Zip Code Union NJ 07083								ite, Zip Code						
Project Manager for Mon	itasina Eirm	In Committee Committee		Telepho	N-		7.6.1.6.04.16.16.16.16	ld NJ 07026						
Rick Eustaquio					206-0073		Telepho	ne No. 262-8006	9 (2)	ense No. 369				
Start Date (10)		Schedul	ed Co	7.00 mm	Date (11)			OSHA Monitor	01	309				
01/06/2020		01/31/			Date (17)		Rizov							
Occupancy Status During	g Abatement (Chec	k Only O	ne)			-	Street A	ddress	-2-2-2-2-110-101-					
Facility Closed/Vaca	ated During Entire F	Period of	Abate	ment			246 G	aston Ave.		2				
Abatement Perform	ed Outside of Norm	al Facility	y Hou	rs		1	City, Sta	te, Zip Code						
Other – Describe: _							Garfie	ld NJ 07026						
Scope of Work (Check Al	I That Apply)													
23 sf or ≥3 lf		processor.	Renov				H	Full Containme		gative Pre	ssui	re		
≥160 sf or ≥260 lf		×	Demol	ition				Mini-Enclosure Glovebag Proce						
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		ls	Loca	tion						1			ement	
Location			Norma	ally ely by			ription o			-		13	ре	
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(13)			( - /		ot	her mis	scellane	ous)			oval	air	Encapsulate	sure
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Roof			Х		Bla	ck Ro	of Mat	erial	600 S	F  2	۲.			
Roof under Stor	age Room		х		Bla	ck Ro	of Mat	erial	300 S	F 2	ζ.			
Roof under Shi	ngle Roof		х		Bla	ck Ro	of Mat	erial	400 S	Sf 2	ζ.			
Name of Registered Wast	te Hauler		31.5	NJDEP W		ubic Ya	330730700	Name of R	egistered L	andfill				
Atlantic Carting LLC			116.2	Hauler ID 26085	200	f Waste s Nee	100	Grand C	entral Sa	anitary l	Lan	dfill		
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Wayne NJ						BD		Pen Arg						
Completed by		Title				Sign	nature	4 /		Date				
Aleksandra Rizova		Own	er			,		1110		01/1	6/2	020		

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Date of Modification (1)	PNOHIDIDHERA	- 14	ame of Au	ilsing Owner/Operator (2)	*COOPHING PROCESSOR		<del>!                                    </del>	-			7
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art Date (10)		School	ulled com	pleton Date (11)	Name of DSNA Most	itor	152502	-			
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Facility Closed/Vacated During Entire Park	od of Al	eteme	n)		20-21 Wagaray	Ad., Bldg. 35-	E .				
Abatement Performed Outside of Normal	Facility	Hours			City, State, Kip Code					~	
Dither - Describe:					Fair Lawn, NJ C	7410					
ps of Work (Check An That Apply)			A CONTRACTOR OF THE PARTY OF TH			7.720		-	-		
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	Yes	No	N/A					1	Page.	No.	
Basement		X		Asbestos co	ontaining Pipe in	sulation	POLF	X	_		
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of Registered Waste Hauler	- 1		anta Haule		ubic Yards of Wasts		Name of Regustered		1		
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dland Park, New Jersey	-			T	BD (Charal)		Morrisville, PA				
1	ldə				Slynatura	1	/	Data	17/20		
ko Nikolov P	residen					and the same					

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 1/17/20 Aimee Barret Agencies Notified Type Notification Street Address **EPA** Initial DEP Amended × DOL Amendment #\_ Chatham NJ 07928 Emergency (including Name of Contact DOH Telephone Number justification) DCA Cancellation Aimee **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) home School (K-12) Street Address Subchapter 8 (Other than K-12) × Other (i.e. private & commercial buildings, homes, City (5) Square Feet # of Floors Bldg. Age Chatham 2100 83 County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) Morris home Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) ABS Environmental Services, LLC Street Address Street Address 4 E Gate Drive, PO Box 483 City, State, Zip Code City, State, Zip Code Glenwood, NJ 07418 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973-764-2276 703 Start Date (10) Name of OSHA Monitor Scheduled Completion Date (11) 1/29/20 Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: crawl space Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 lf Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Abatement Is Location Туре Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ Encapsulate TO BE ABATED (i.e. thermal systems insulation. Enclosure (Specify Remova Custodial Staff? Repair In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A crawl space X exterior duct insulation 50 SF x Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Newark Carting Grand Central Sanitary Landfill 04509 TBD City, State Disposal Date City, State Newark, NJ TBD Pen Argyl, PA

Completed by

A. Scott Higgins

Title

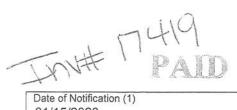
President

Date

1/17/20

Signature

Date of Notification (1)	PAIR		I N	ame of Build	ding Owner/Operato	× (7)	1111 0	0.000			4
	17/20			Me.	CHILLS	501	JAN 2	2 2020			Ü
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D DOH	justification)	wary		ame of Com	tact		Telephone Nu	mber	-	_	-
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			5	FACILITY II	FORMATION						_
Name of Facility Where						Type of Facilit	v (4)				
1RC	LHRIS DO	) [									
Street Address						School (K-1	2) 8 (Other than K-1;	2)			
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County (6)			To	ounty Code	(7) (STATE USE	Commentation (	rior if being demo		2	_	
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City, State, Zip Code					City. State, Zip	th River	St		_		
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Project Manager for Mor	nitoring Firm	Tek	phone	No.	Telephone No.	ack, N.J	License No.				
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Start Date (10)	Scheduled (	Completio	n Date (	(11)	Name of OSHA		00300				_
1/31/2		1/31	120	$\supset$	Omega 1	Environm	ental				
Occupancy Status Durin	g Abatement (Check o	nly one)			Street Address					-	
☐ Facility Closed/Vacate	ed During Entire Period	of Abates	ment		280 H	uyler St					
C Abatement Performed	Outside of Normal Fa	citily Hour	2		City, State, Zip C	Code	74				-
D-Other - Describe: §		2 5:	30P	M	S. Had	ckensack	,N.J. 07	606			
Scope of Work (Check a	Il that apply)			,							_
2253 af or ≥ 3 lf				Renovation	. I Miri	Enclosure	Negative Pressur	е			
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Date of Notification (1) 01/15/2020						Name of Building Owner/Operator (2) Conrrado Herrera					E	D [E	7 []	\\fl	(1 <u>.</u>	e de la companya de l
Agencies Notified	Type Notification			Street A					- 5 j			9 10	- 1	\4/		
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Name of Facility Where Residential Propert		g Place (3	5)						of Facility (4							
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City (5)									are Feet	1233112	Floors	8		dg. A	ge	
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Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	No.				atement Con		(9)					
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Street Address							Street 240		ess n 5th St.							
City, State, Zip Code							City, S	State, 2	Zip Code				_			
								Elizabeth, NJ 07206								
Project Manager for Mor					ne No.		Teleph 908-	none N 906-4			Licens 0135		ŧ			
Start Date (10)									HA Monitor	-1		1.2.2				
01/30/2020 Occupancy Status Durin	a Abstamant (Chan	01/31/2							onmental L	abora	atories	, Inc	). 			
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Facility Closed/Vac Abatement Perform	ed Outside of Norm						City, S	State, Z	Zip Code					115		
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Danvic Contracting I			Н	auler ID 7574		of Was			Fairless							
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Date of Notification (1)				Name of NJIT	Building O	wner/Op	perator (	2)			JAN 2	2 2	020	9.5	
January 17, 2020 Agencies Notified	Type Notification			Street Ad	Idress					-				÷	
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DOH DOA	justification) Cancellation	3	- 4	Name of Chervl	Contact	)					phone Nu -249-18				
DCA	Cancellation	-7-04-5			ITY INFO		ON			1					
Name of Facility Where	Abatement is Taking	Place (3	)					Туре	of Facility (4	)					
NJIT Weston Hall									School (K-12 Subchapter 8		r than K-1	2)			
Street Address 346-366 Martin Lut	her King Jr Blvd							X	Other (i.e. pr etc.)	ivate &	commerc	ial build			s,
City (5) Newark									are Feet		Floors		dg. A	ge	
County (6) Essex	0.0			County C (STATE U	ode (7) ISE ONLY)	-		Curr	ent Use (Prio	r if bein	ig demolis	hed)			
Name of Monitoring Firm OMEGA Environme				ASCM	l No.		Name o		atement Cont	ractor (	(9)				
Street Address 280 Huyler Street							Street A		ess Street, #2	61					
City, State, Zip Code South Hackensack	, NJ 07606								Zip Code Ile, PA 194	38	00				
Project Manager for Mo	nitoring Firm		T	Telephor			Teleph				License I	Vo.			
Gary Mellor				201 100 0100				3.5	8711		01373				
Start Date (10) 01/13/2020		01/29/2	2020	20 Schr					SHA Monitor er Laborato	ries G	lobal In	С			
Occupancy Status Durin	ng Abatement (Check	Only On	e)			-	Street 2512		<sub>ess</sub> st Cary Str	eet					
Abatement Perform	cated During Entire Pened Outside of Norma	eriod of A I Facility	Abaten Hours	nent s			City, St	tate,	Zip Code	000				2.5.192	
Other – Describe:							Richr	Richmond, VA 23220							
Scope of Work (Check / ≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf	All That Apply)		Renova Demoli				×	M	ull Containme lini-Enclosure lovebag Proc on-Exempted	edure				е	
		Is	Locat	tion									Abate	ement	
Locatio	on of	1	Norma	illy			scription		2000	970			I y	pe	
Asbestos-Containin TO BE AB In Fac (13	BATED	Ma	ed Sole iintena todial (12)	ance/ Staff?	Asbest (i.e.	thermal surfac	aining M systems cing, VA niscellan	insu T, or		(S	mount specify or LF)	Removal	Repair	Encapsulate	Enclosure
First Floor L	ecture # 1	100	X	1	Carp	et Glue	e and	Tile	Mastic	2.7	750SF	X			
First Floor Lectu	CONTRACTOR		X	+	CONTRACTOR.	inyl Til		XX-10 G-3			OSF	X			
First Floor Lectu			X	+		inyl Til					OSF	X			
			X	+		inyl Til					OOSF	X			
First Floor Lecture : Name of Registered Wa		1		NJDEP W		Cubic		TVICA	Name of I		Samuel of the same				
Century Waste Ser			1	Hauler ID	No.	of Was	ste		Fairless	Lanc	lfill				
City, State Elizabeth, NJ 0720						Dispos	sal Date		City, State		Α				
Completed by Title						Is	Signature	9 .		1		Date			
Carol Bradford President						1	au	rel	Foral	fore		01/17/	2020	6	



### OSIYO INC.

292 Main Street, Box 261 Harleysville, PA 19438-2416

JAN 2 2 2020

NJIT Weston Hall

Amended #2 Page 2

First Floor Lecture Hall #1 remove 9LF of asbestos pipe insulation (wrap and cut procedure).

First Floor Lecture Hall #1 remove 2" asbestos pipe elbows 10ea (wrap and cut procedure).

First Floor Lecture Hall #1 remove 30SF of asbestos transite panel.

First Floor Lecture Hall #1 remove asbestos mastic on two columns approximately 250SF.

First Floor Lecture Hall #1 remove 4" pipe elbows and fittings 5ea (wrap and cut procedure).

INTRADO

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Agencies Notified  EPA  DOLWD  DOH  DCA  (NJAC 5:23-8)  Type Notification  Initial  2083 Lawrenceville Road  City, State, Zip Code  Lawrenceville, NJ 08648  Name of Contact  Walter Eddy  FACILITY INFORMATION	E Comment							
Agencies Notified  EPA Initial DOLWD Amended Amendment # DCA (NJAC 5:23-8)  Emergency (including justification) Cancellation  Street Address 2083 Lawrenceville Road  City, State, Zip Code Lawrenceville, NJ 08648  Name of Contact Walter Eddy  FACILITY INFORMATION	To Take the same of the same o							
Agencies Notified    Type Notification	Reference of the second							
DOLWD Amended Amendment # City, State, Zip Code Lawrenceville, NJ 08648  DCA Emergency (including justification)	71							
□ DOH	*1.	-						
□ DCA (NJAC 5:23-8) □ Emergency (including justification) □ Cancellation □ Cance		entention and ex-						
(NJAC 5:23-8) justification) Name of Contact Telephone Number  □ Cancellation Walter Eddy 609-896-5080  FACILITY INFORMATION	-							
FACILITY INFORMATION	Telephone Number							
	40.5							
Name of Facility Where Abatement is Taking Place (3) Type of Facility (4)	4)							
Rider University - Omega House								
Street Address  Subchapter 8 (Other than K-12)								
2083 Lawrenceville Road Other (i.e., private and commercial building homes, etc.)	gs,							
City (5) Square Feet # of Floors Bldg. /	lge.							
Lawrenceville 4,000 2 50+								
County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished)								
Mercer school								
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9)								
Pennoni 102 Plymouth Environmental Company, Inc								
Street Address Street Address								
515 Grove Street, Suite 1B 923 Haws Avenue								
City, State, Zip Code City, State, Zip Code								
Haddon Heights, NJ 08035 Norristown, PA 19401								
Project Manager for Monitoring Firm Telephone No. Telephone No. License No.								
Brian Clark 856-656-2944 610-239-9920 0398								
Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor								
1 /20 /201 /31 /20 EMSL Laboratory								
Occupancy Status During Abatement (Check only one)  Street Address		-						
☐ Facility Closed/Vacated During Entire Period of Abatement 200 ROute 130 N								
Abatement Performed Outside of Normal Facility Hours - Describe								
Time of Abatement: 7:00AM-3:30PM/ PM- AM Cinnaminson, NJ 08077								
Scope of Work (Check all that apply)								
☐ Full Containment with Negative Pressure		1						
□ Non-Exempted (*) and Non-Friable Procedure								
Is Location Abaten	ent T	Гуре						
Location of Normally Description of Used Solely by Ashestos Containing Material (ACM)	Ш	ш						
Asbestos-Containing Material (ACM)  TO BE ABATED IN Facility  Used Solely by Maintenance/ Custodial Staff?  Used Solely by Maintenance/ Custodial Staff?  Used Solely by Maintenance/ (i.e., thermal systems insulation, surfacing, VAT, or SF or LF)	nca	nclo						
IN Facility Surfacing, VAT, or SF or LF)	Encapsulate	Enclosure						
(13) (12) other miscellaneous)	ate	(D						
Yes No N/A								
Basement								
	믐	-						
Nome of Registered Wests Hautes   NISSEN Wests   October 1997								
Name of Registered Waste Hauler  NJDEP Waste  Cubic Yards of  Name of Registered Landfill  Hauler ID No.  Waste  CROWS Landfill								
NODINGOLI MASIE DISDOSAL								
1/304 10								
City, State Disposal Date City, State								
City, State  Voorhees, NJ 08043  Disposal Date 1/31/20  Moorisville, PA								
City, State Disposal Date City, State	7							

# State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT BY ASCM FIRM (Pursuant to N.J.A.C. 5:23-8.11(c)3.viii)

Date of Notification (1) Name of Building Owner / Operator (2) 2020 Rider University January 14 2020 Type Notification Street Address 2083 Lawrenceville Road Initial Notification City, State & Zip Code Amended Notification Lawrenceville, NJ 08648 Cancellation Name of Contact Telephone Number Walter Eddy 609-896-5000 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Rider University - Omega House School (K-12) Street Address Subchapter 8 (Other than K-12) 2083 Lawrenceville Road Other Square Feet # of Floors Blda. Age City (5) County (6) County Code (7) 4.000 +50 years Lawrenceville Current Use (Prior if being demolished) Mercer Campus Building Name of Monitoring Firm Hired by Building Owner (8) Name of Abatement Contractor (9) ASCM No. Pennoni Associates Inc. 00102 Plymouth Environmental Street Address 515 Grove Street, Suite 1 B 923 Haws Avenue City. State & Zip Code City, State & Zip Code Haddon Heights, NJ 08035 Norristown, PA 19428 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Brian Clark (856) 547-0505 (610) 239-9920 0938 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor January 20, 2020 January 31, 2020 **EMSL Laboratory** Occupancy Status During Abatement (Check all that apply) Street Address Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North Abatement Performed Outside of Normal Hours City, State & Zip Code Describe: 7am - 5pm Cinnaminson, NJ 08077 Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment Glove Bag Location of Is Location Description of Enter only Enter only Asbestos-Containing Normally Used Asbestos-Containing Square Footage Lineal Footage Material (ACM) Solely by Material (ACM) TO BE ABATED Maintenance or (i.e., thermal systems in Facility Custodial Staff? insulation, surfacing, VAT (13)(12)or other miscellaneous) Basement level community room No Floor tile and mastic 1000 sf No lf sf No sf No sf No sf No sf No sf **TOTALS** LF 1000 SF Completed By (Print or Type) Signature Buin Clah Brian Clark Project Manager 1/14/20

IN# 17507-0K28074 PAID NOT

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

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Date of Notification (1)			th well a		Nam	e of Buildin	g Ov	vner/Operator	(2)	7.1						
1 /	17 /	20			Pri	inceton U	niv	ersity		ΑΔΙ,	1 2 2	2020				
Agencies Notified	Type Notific	ation			Stree	t Address				O/A		4040	- 1	1 care		
⊠ EPA I	☐ Initial				E./	A MacMill	ian	Buildina		- CARROLL			!			
The state of the s						State, Zip (				1	7 - 1 C - 1 1 1 - 1 1 1 1 1 1 1 1 1 1 1 1		100			
☑ DHSS	Amendm					nceton N				e e e e e e e e e e e e e e e e e e e	Danstysk)					
☑ DCA (NJAC 5:23-8)	☐ Emerger justificati	ncy (in ion)	cludin	g		e of Contac	-300			Telephone Number						
1 7 37 11 12			bert Orte			Telephone Number										
	☐ Cancella		17				ega 609-258-1841 NFORMATION									
Name of Facility Where Ab	atement is	Taking	Place	(3)	FA	CILITY	aru.	RIVIATION	Tung of Facility	. //)						
Princeton University				5 (3)					Type of Facility	33 A						
Street Address	001					School (K-1	8 (Other than K	-12)								
Washington Road									Other (i.e., )	private and com	mercial b	uilding	js,			
									homes, etc.							
City (5)				25					Square Feet # of Floors Bldg.							
Princeton									70,000	4		+/- 7	0			
							')(ST/	ATE USE ONLY)	1 CHISTO	rior if being dem	olished)					
Mercer									Classroom							
Name of Monitoring Firm H	Owner	(8)	ASCM	110000000			ent Contractor (9	•								
Pennoni Associates	Inc.				001	02	-		mental Manag	gement, Inc.						
Street Address								eet Address								
515 Grove Street Sui					8436 Enterprise Avenue											
City, State, Zip Code							Cit	y, State, Zip C	ode							
Haddon Heights NJ.							F	Philadelphia	, PA 19153							
Project Manager for Monito	ring Firm			Tel	ephone	No.	Те	lephone No.		License No						
R Alan Lloyd 856-547-050								215-365-5810	)	1156						
Start Date (10) Scheduled Completion Date (1)							Na	me of OSHA N	/lonitor							
12 /16 /	19	2	2_ /	6	/ .	20	USA Environmental Management, Inc									
Occupancy Status During A	Abatement (	Check	only	one)			Street Address									
☐ Facility Closed/Vacated	During Enti	re Per	iod of	Abate	ement		8436 Enterprise Avenue									
Abatement Performed C						scribe	City, State, Zip Code									
Time of Abatement: 7:0	0 AM- <u>11:0</u>	<b>0</b> PM/	11:00	PM- <u>7</u>	:00AM	M Philadelphia, PA 19153										
Scope of Work (Check all th	nat apply)								,							
1000 (1000)	0.0000000000000000000000000000000000000		<b>-</b>						tainment with Ne	gative Pressure						
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>			⊠ Re	novat moliti				☐ Mini-End	closure g Procedure							
				oa	011			☐ Non-Exe	empted (*) and No	on-Friable Proce	edure					
<u> </u>				Loca								atem	ent T	ype		
Location of				Norma	ally ely by			Description of				_				
Asbestos-Containing Ma TO BE ABATE		1)		inten				Containing Ma ermal systems		Amount	Removal	Repair	nca	Enclosure		
IN Facility			Cus		Staff?	(1.0		surfacing, VAT		(Specify SF or LF)	oval	=	psu	Jusc		
(13)		-		(12)	1 2222	4	ot	her miscellane	ous)		-		Encapsulate	e,		
74			Yes	No	N/A											
Hallway throughout						Floor T	ile			11,000 SF						
Near Room 428 12x12 I	Beige		Ц			Mastic				20 SF						
Mastic Throughout w/ 1	12x12BLU	E				Mastic				3000 SF						
Page 1 of 2 Continue A					$\boxtimes$											
Name of Registered Waste	Hauler			1000	NJDEP '		588.7	oic Yards of	Name of Regi	stered Landfill						
Service Transport				H	lauler II 2099(		100	ste 20CY	Waste Ma	nagement Tu	llytown					
City, State					2000	,		posal Date	City, State							
New Castle De.							3735	-6-20	Tullytown	Pa.						
Completed By (Print or Type	e)	Title	8	71.55				Signature/			Date					
Kevin Meldrum	-,		oject	Man	ager			olgilature/	Meks	n		1.0				
			المارد	mail	agei		5	1	-) 11-00	-	1-1	1.	2	2		

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					JA	IN 222	020	141		
Location of Asbestos- Containing Material (ACM) in Facility (13)	Is Location Normally Used Solely by Maint./Custodial Staff? (12) YES NO NA			Description of ACM (i.e. thermal systems insulation, surfacing, VAT, or other miscell.)	Amount (Specify SF or LF)	Abatement Type				
Leveler Throughout			X	Floor Leveler	15,000 SF	-x				
Near Foyer			X	12x12 Blue Tile & Mastic	200SF	X				
Foyer/Room 422 Area			X	12x12 Off White Tile- Mastic	9000 SF	X				
Foyer/Room 422 Area			X	Leveler /Mesh Fabric	200SF	X		1		
Throughout Floor			X	Mastic on Fiberglass	2000LF	- 22		_		
Lab Hoods throughout			X	Transite Hoods	12 Each	X		+		
Chiller,422,429A, 429B			X	White Speck Sheet Flooring	300 SF	X				
Throughout			X	Transite Drying Racks	800 SF	X				
Mastic w/12x12 Blue throughout			X	Mastic	1000SF	Χ.				
Old Freezer Area			X	Cork & Mastic	250 SF	X				
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Date of Notification (1)	25 A M. B	L.E.			1			ner/Operator (	(2)	1 90 z							
	16 /	20	_		Ed	ward Dur	nn		Į.	\$ E E	JAN	2 2	20	20	11		
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⊠ EPA											Annual or the second	Curt. Vi			İ		
⊠ DOLWD	Amended Amendme				City,	State, Zip C	Code		The Alberta								
☑ DOH □ DCA	☐ Emergen		40 0097	1	Fa	ir Lawn, N	1J 07	7410			The profile Headers				44	****	
(NJAC 5:23-8)	justification		oraaning	1	Name	e of Contac	t			Telephone Number							
Mentioned southern self-	☐ Cancellat	ion			Ed	ward Dur	n										
					FA	CILITY IN	IFOF	RMATION									
Name of Facility Where	Abatement is T	aking	Place	(3)					Type of Facil	lity (4	4)						
Dunn Residence							School (K			40\							
Street Address				., pri	(Other than K vate and com		l bu	ilding	s,								
City (5)									Square Feet		# of Floors		Blo	lg. Ag	ge .	_	
Fair Lawn									1.806		2			55			
County (6)					Cou	nty Code (7	')(STA	TE USE ONLY)	Current Use	(Pric	or if being dem	nolishe	d)				
Bergen							<b>21</b> To (1/1)	**************************************	Residence	2000	•		=%				
Name of Monitoring Firm	Hired by Build	ding C	wner	(8)	ASCN	l No.	Nar	me of Abatem	ent Contractor	(9)							
Management & Env				1000			1000		onmental, Li	47 3							
Street Address							-	eet Address									
PO Box 341							623 Cutler Avenue										
City, State, Zip Code							City	, State, Zip C	ode								
Chesterfield, NJ 08	515						1	laple Shade									
Project Manager for Mon	itoring Firm			Tel	ephone	No.	Tel	ephone No.			License No.						
Bill Weisgarber				6	09-29	8-4070	8	56-755-0099	9		00842						
Start Date (10)	S	Sched	uled C	omple	etion D	ate (11)	Nar	me of OSHA N	/lonitor								
02 /03 /	_20_	0	2 /	_0	5_/	_20_	EMSL Analytical, Inc.										
Occupancy Status During	g Abatement (0	Check	only	one)			Stre	eet Address									
☐ Facility Closed/Vacate							200 Route 130 North										
Abatement Performed							City	, State, Zip C	ode								
Time of Abatement: _	AM	PIV	///	_PIVI		_AIVI	C	innaminsor	n, NJ 08077								
Scope of Work (Check al	I that apply)																
			⊠ Re	novat	ion			☐ Full Con	tainment with I	Nega	ative Pressure	1					
≥160 sf or ≥260 lf				moliti				☐ Gloveba	g Procedure			21					
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Location	of		1000	Loca				Description of	of			-		ateme		T	
Asbestos-Containing		1)			ely by	Asbe	stos	Containing Ma		1	Amount		Removal	Repair	Enc	Enclosure	
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IN Facili (13)	ity			(12)				urfacing, VAT ner miscellane			SF or LF)		<u>a</u>		Encapsulate	re	
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Basement						Floor T	ile a	nd Mastic			760 SF						
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Name of Registered Was	te Hauler			1 125		Waste	100000000000000000000000000000000000000	oic Yards of			ered Landfill						
Freehold Cartage				1	1593		Was		Fairless	La	ndfill						
City, State					-		-	oosal Date	City, State								
Freehold, NJ							0	2/05/2020	Morrisv	ille,	PA						
Completed By (Print or T	ype)	Title					-	Signature				Date					
Christina Fay Vice President of O						Operation	ns	Ometa	Han			1/	10	12	32	0	

(103100)	ATD	NOT	IFIC, (P	ATION	QF ASI	sw Jersey BESTOS ABAT IC 8:60 and 6:10	EMENT	DOL -	10 I		2]	20				
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	Type Notification  Initial					Crossing Road	MANIEDIA	1	Ų.		16.					
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DCA (NJAC 5:23-8)	☑ Emergency (in justification)	noudin	5	Linea	of Contac			Telephone Nu	nber							
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iame of Facility Where Al				- Abrahaman			Type of Facility					-				
Sea Girt National GL	lard Training C	enter					School (K-1	2) 8 (Other than K-1	e)							
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lty (5)						No. of Contract of	homes, etc.		La	6		_				
Sea Girt							SO.OÓÓ	# of Floors	- 1	ag. A 80	ge					
ounty (5)	-		-	Cour	ity Code (7	(STATE USE ONLY)		rior if being damo	- 1	W W						
Monmouth					_		Governmer	nt Building	,							
Eme of Monitoring Firm	250	Owner	(8)	ASCM	CM No. Name of Absternent Contractor (9)						Attendary ,					
TTI Environmental, I	nç,				Shade Environmental, LLC											
1253 North Church S				Street Address 623 Cuttor Av	AM 100 10 10											
ity, State, Zip Code	201405	-				City, State, Zip Co			_			_				
Moorestown, NJ 080	57					Maple Shede	7,0,70									
reject Manager for Monte	Tel	phone	No.	Telephone No.	1111 00000	License No.										
Mike Stocku	8	56-840	-8800	858-755-0088	l	00842										
ten Date (10)		tion Da		Name of OSHA IV	tonkor					-						
01 / 20 /				4 / .	20	EMSL Analyt	ical, inc.									
Ecupancy Status During  Facility Closed/Vacated  Abatement Performed  Time of Abatement:	During Entire Pe Outside of Norma	riod of I Facill	Abate y Hou	rs - Des	cribe AM	Street Address 250 Route 13 City, State, Zip Co Cinnaminson	ode				****					
cope of Work (Check all)	that apply)						tainment with Ne	mashin Ph		-		_				
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Location of Asbestos-Containing M TO SE ABAT IN Facility (13)	laterial (ACM) IED	Me	inten	oly by Incol Statt?	Asbe (i.e	Description of stee Containing Ma ., thermal systems surfacing, VAT. other miscaliene	terisi (ACM) Insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsublk	-				
	Annual Control of the	Yes	No	N/A		No. of the last of				L	th.					
firmary (Room 127)	Sullding 8		×		Floor T	ile and Mastic		300 SF	×			I				
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ame of Registered Waste Freehold Cartage	Hauler			JDEP V	No.	Gubic Yards of Waste	Name of Regi			ب	1=	1-				
lty, State				15935		Disposal Date	City, State									
Freehold, NJ						01/24/2020	Morrisville	, PA								
ompleted By (Print or Ty) Christina Fay	200 E	704	ادا بيور	ant of	Öperation	Signature	- I		ato		***************************************	-				
T LEY	,	IFE P	4910	DIEC OF	-baratio	ns Wilst	Harry _		1/16	12	020	2				

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

* K103101	L'A		(P	ursuai	nt to NJA	C 8:60 and 5:1	6)	E G E	II W	10	- 1					
Date of Notification (1)				Name	e of Buildin	g Owner/Operator	(2)									
01 /		20		Pri	nceton U	niversity		JAN 2 2	202	0		1 1				
Agencies Notified	Type Notific	ation		Stree	t Address		30) -1.									
⊠ EPA				Ma	cMillan E	Building				4						
⊠ DOLWD	Amended			City,	State, Zip (	Code	2 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1									
☑ DOH   ☐ DCA	Amendm  Emergen		-	Pri	nceton, N	J 08543	1 AVAL A SHI Ka									
(NJAC 5:23-8)	justificati		ig	Name	of Contac	t	Telephone Number									
(**************************************	☐ Cancella			Ry	an Dicke	erson 609-258-6911										
	3			FA	CILITY IN	IFORMATION		<del>' </del>								
Name of Facility Where A	Abatement is	Taking Plac	e (3)				Type of Facility (	(4)								
Geophysical Fluid	Dynamics L	aborator	/				School (K-12									
Street Address								(Other than K-1) rivate and comme		ilding	10					
201 Forrestal Road							homes, etc.)	ivate and comme	sicial bu	manng	js,					
City (5)							Square Feet	# of Floors	Bl	dg. A	ge					
Princeton						50,000										
County (6)				Cour	)(STATE USE ONLY)	Current Use (Pri	or if being demol	ished)								
Mercer							Laboratory									
Name of Monitoring Firm	Hired by Build	ding Owner	(8)	ASCM	No.	Name of Abatem	ent Contractor (9)									
TTI Environmental,	Inc.			000	03	Shade Enviro	onmental, LLC									
Street Address						Street Address										
1253 N. Church Stre	eet					623 Cutler Avenue										
City, State, Zip Code						City, State, Zip Code										
Moorestown, NJ 08	057					Maple Shade	, NJ 08052									
Project Manager for Moni	toring Firm		Tel	ephone	No.	Telephone No.		License No.								
Michael Keehn			8	56-840	-8800	856-755-0099	9	00842								
Start Date (10)	100,000	Scheduled				Name of OSHA N	/lonitor			A						
02/03/	_20_	02	/ _2	1_/	20	EMSL Analyt	tical, Inc.									
Occupancy Status During	Abatement (	Check only	one)			Street Address										
☐ Facility Closed/Vacate	-					200 Route 130 North										
Abatement Performed																
Time of Abatement: _	AM	PM/	PIV		_AM	Cinnaminson, NJ 08077										
Scope of Work (Check all	that apply)					⊠ Eull Con	tainmant with Non	etive Draesure								
≥3 sf or ≥3 lf		⊠R	enova	tion	⊠ Full Containment with Negative Pressure             □ Mini-Enclosure											
≥160 sf or ≥260 lf			emolit		n Glovebag Procedure											
					_	∐ Non-Exe	empted (*) and Nor	n-Friable Procedu	1							
	•	'	s Loca Norma			6			Ab	atem	ent T	уре				
Location Asbestos-Containing I		) Us		ely by	Ashe	Description o stos Containing Ma		Amount	Re	Re	E	En				
TO BE ABA	TED	M	ainten			., thermal systems	insulation,	(Specify	Removal	Repair	Encapsulate	Enclosure				
IN Facilit	у	Cu	310diai (12	Staff?		surfacing, VAT		SF or LF)	/a		sule	ure				
(13)		Yes	1			other miscellane	ous)				ate					
1st Floor Main Buildin	ng				Drywall	Walls and Fran	ning	5,700 SF								
1st Floor Main Buildin	าต				Spray-c	n Fireproofing		100 SF			П					
	-5									П						
						=	H	-								
											Ш					
Name of Registered Wast	e Hauler		11.5	NJDEP \ Hauler II		Cubic Yards of Waste	Name of Regist									
Freehold Cartage				15939		120	Fairless La	ndfill								
City, State						Disposal Date	City, State									
Freehold, NJ						02/21/2020	Morrisville,	PA								
Completed By (Print or Ty	rpe)	Title				Signature	ZANC A	D	ate							
Christina Fay	1/\/								/12	10	12/	Δ.				

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

UN	について できる			(Pursu	iant to NJAC 8.60 an	u 12.	.120)	172 6	D P. I. Colo	-	ナル	Jon.	1		
Date of Notification	(1)	200000000000000000000000000000000000000		ng Owner/Operator (2)											
01/17/2020				of Clift	on		INC. The HOLD								
Agencies Notified	Type Notification			Address											
□ EPA				Clifton					N 2 2 2021	0	101.				
□ DEP	☐ Amended	2.40		ate, Zip (			:				11.				
⊠ DOL	Amendment #		Clifto	n, NJ C	07013										
	☐ Emergency (including	5 F		of Contac		Telephone Number									
⊠ DOH	justification)		Char	les Lon	go c/o West End KB	Build	ders &	732-389-3355	A ACADIN SANCES		45	10.00	i e vir.		
□ DCA	☐ Cancelation :	1.1.1	Deve	lopers								****			
100000		1.00		F	ACILITY INFORMATI						1 .		100		
	ere Abatement is Taking Place (3)			4.	1.	Туре	of Facility (4)		w to	7	1 11	4. 1.4			
Clifton Station	No 5		5			School (K-12	2)			2.					
Street Address							Subchapter	8 (Other than K-	-12)		***				
51 Brighton Ro	ad			Other (i.e. p	rivate & Comme	ercial buildings, he	omes	, etc.	)						
en (e)		-						I	T		:	-			
City (5) Clifton						1	re Feet	# of Floors	Bldg. Age	127			i e		
Cirton					6,00	222	1	55+							
County (6)			172 U.S. N. N. 15	Code (7)	Curre	ent Use (Prior if be	ing demolished)								
Passaic				(SIAIE	OSE ONLT/										
Mercal construction of the second	Firm Hired by Building Owner (8)				ASCM No.	Name	e of Abatement Co	entractor (9)							
Environmental	Health Investigations, Inc.				00104	Unio	corn Contract	ing Corp.				1 22			
Street Address						Stree	t Address								
655 West Shore	Trail					32 Willow Way									
City, State, Zip Code						City, State, Zip Code									
	71					1850	odland Park, I	VI 07424							
Sparta, NJ 0787				Traine	N-			15 07 12 1	License No.						
Project Manager fo N	Aonitoring Firm				one No.	Constant of	hone No.		01331						
Bill Kerbel	**************************************		_		729-5649	-	-333-9176		101331				_		
Start Date (10)					letion Date (11)		e of OSHA Monitor								
01/28/2020			01/31	./2020		-	irovision Cons	sultants, Inc.							
	ring Abatement (Check Only One)				F.	Street Address 20-21 Wagaraw Rd., Bldg. 35-E									
☐ Facility Clo	osed/Vacated During Entire Peri	od of Al	oatemer	nt		20-2	21 Wagaraw F	ld., Bldg. 35-E							
☐ Abatemen	nt Performed Outside of Normal	Facility	Hours			City, S	State, Zip Code								
☑ Other - De	escribe: <u>Un-Occupied</u>			Yes a second		Fair Lawn, NJ 07410									
Scope of Work (Check															
≥3 sf or ≥3	i If		X	Renov	ation	☐ Full Containment with Negative Pressure									
≥160 sf or				Demo	lition	☐ Mini-Enclosure									
2100 31 01	2200 11		_			☐ Glovebag Procedure									
						Non-Exempted (*) and Non-Friable Procedure									
			Is Locatio	n			Non-Exempt	cu ( ) una mon i	Tidble i roccaure	$\top$	Aba	temer	nt		
4.2	Location of		Normally			Desc	cription of		1		Т	уре			
Asbestos	-Containing Material (ACM)	U	sed Solely		Asbestos		aining Material (AC	M)	Amount						
	TO BE ABATED	A 200	laintenan		(i.e. th	ermal s	systems insulation	,	(Specity			m			
	In Facility	Cu	stodial St (12)	aff?	1		ing, VAT, or		SF or LF)	Re	_	cap	Encl		
	(13)				°	ther m	niscellaneous)			Removal	Repair	Encapsulate	Enclosure		
		Yes	No	N/A					250.55	_	_	io	e e		
Roof - Base of Roof P	X	ļ			Root	Flashing		250 SF	X	+	-	-			
										+	-	-	-		
										_	_		_		
Name of Registered W	/aste Hauler		NJDEP W	aste Hau	ler ID No.	Cubic Y	Yards of Waste		Name of Regustered	Land	fill				
Jnicorn Contrac			00358		1	1+			Fairless Hills Landfill						
	9 co. p.								City, State						
City, State	Now Jorsey					TBD	2	/	Morrisville, PA						
Noodland Park,	INEW Jersey	Tall					Signature			Date					
Completed by		Title Presid					1/2	A	01/17/2020						
hivko Nikolov					1	- Innoverse		IOT	111	2021	-				