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

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CHUCK #	1220

			-		(PURSUA	MI IO NO	AC 8:60-7 F	AND 12:12	0-7				~~~			
Date of Notification (1)						Name of	f Building ( AN LAROCE	Owner / O <sub>l</sub>	perator (2)	Pron	Charles and	4				
	/ —	/—				Street A	ddress				- / <del>  / /</del> /	7)				
Agencies	s Notified EPA	Type of N				0101111	COLINDA	VEITOL	2012	AN 23		Gay?				
	DEP		Initia Ame	nded			ate, Zip Coo /, NJ 07110		.0	<sup>14N</sup> 23	PM 2	. ~ -				
	DOH				nt #1		f Contact		3 300		one Num	ber				
Image: section of the content of the	DOL				w/ justification	BEHRAI	M IRANI		&							
			Cano	ellatio		ACILITY	INFORMAT	ION	oc ,	4167	offer.	<del></del>				
						AGILITY	INFORMATI	ION								
				Takir	g Place (3)	-	Type of I	Facility (4)	)							
HOFFMAI	N LAROCHI	E - BLDG 8	5					School	(K 12)		20					
Street Ad	Idress						<b>-</b>		pter 8 (Other	than K-	12)					
340 KING	SLAND AVE	ENUE					- 🗸	Other (I	.e., private &	cmmerc						
City (5)		County (6	()		County Code	(7)	Square F		# Of Floor		În	- 4				
NUTLEY		ESSEX	,		County code	(1)		5,000		8	Buildin	ng Age 40+	•			
							Current l	Jse (Prior	if being den	nolished)	7					
Name of I	Manitarina	Circo Uiro d	l hu Di	d= 0:	(0)	Laconan		RESEARC	900							
Name of I	Monitoring	Firm Hired	i by Bi	ag. Ov	vner (8)	ASCINI N	O Name of	Abatemer	nt Contractor	(9)	35 35					
TRC						100	LVI Envir	onmental S	Services Inc.							
Street Ad							Street Ac	dress								
	30 BROADWAY ty, State, Zip Code						462 Getty	Getty Avenue								
NEW YOR	ty, State, Zip Code EW YORK, NY 10018							e, Zip Cod	de							
Project M	Ingr. For Mo	onitoring F	irm		Telephone Nu	mber	1									
EDWARD	GERDTS		Cobo	d Can	212-221-8014 pletetion Date (1	4)	Clifton, NJ 07011 Telephone Number License Number									
02	/	/13	Scrie	06	30	13	relephon	ie Numbei		License	Number					
/	/				//		973-7	72-3660				00117				
Occupano	cy Status D	uring Abat	ement	(Chec	k Only 1) ntire Period of	100 - 170		OSHA Mo								
	Abatemen		tea Di	iring E	ntire Period of		Street Ad		Services Inc.		- 10					
			d Out	side o	Normal Facility		Street Address									
	Hours - De		MON	501	y = 11 - 112 - 112 - 112 - 112		462 Getty									
	Other - De	scribe:		FKI M-3:00	PM		Clifton, N.	e, Zip Coo	ie							
Scope of	Work (Chec	k All That	Apply	)			Jointon, No 07071									
0	Damalisia	_			<b>.</b>					<u> </u>						
	Demolition >3sf or >3			Ш	Renovation		Full Conta Mini - End		vith Negative	Pressur	е					
V	≥160 sf or						Glovebag		re							
						V	Non-Exen	npted (*) a	and Non-Fria	ble Proce	edure					
	Location of			İs	<del></del>	Descrip	tion of		1	Abateme	ent Type					
	estos Conta		· 2000	ation	As	bestos - 0	Containing			R	1	E	[E			
	laterial (ACI	038 <b>5</b> 0 20	0.000	mally		Material			Amount	E	R	N	N			
15	D BE ABATI in Facility	ED	2007	sed olely			I systems facing, VA	т	(Specify SF or LF)	M	E P	C A	C			
	(13)		N	Main-			cellaneous)		01 01 21 /	V	A	P	6			
				ance/						Α	1	s	s			
				todial ff (12)						L	R	U	U R			
				NO N/	A				1		+	-	<u> </u>			
BUILDING						ING TAR			45.66 CF	V						
				10												
			-	귀뉴	+				-	井	1-1	-				
	Registered V		er	<u></u>	NJDEP Waste	Cubic	Name of R	Registered	Landfill							
12 13						Yards	ds LONE MOUNTAIN									
						of Waste Disposal										
319 AVE P NEWARK, NJ 07105-4800 Date																
								- 5			-					
Completed STEVE ST		or Type)			Title PROJECT MAN	AGER		Signature	(		)	Date				
- 1 L V L O I		3			I ROJECT WAN	AGER		St	10 J.	u)	$\forall$	2	01/21/13			

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

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01 / 10 / 13		1	OFFMAN L	THOOTIE		4 3 34, 1, 4		3.4		
gencies Notified Type of Noti	fication	3	40 KINGSL	AND AVEN	UE 🥠	17-181-2	7 1354	0. 50		
☐ EPA ☑ Ir	itial	l.	City, State, 2 NUTLEY, NJ	Zip Code	20	IJ JAN 2	J PM	2:58	- 25 - 25 - 25 - 25 - 25	
	mended mendment #		Name of Co			)	alanhon	e Number		
DOH A	mergency w/ ju		BEHRAM A			& LIG	W no.			
	ancellation	EA	CILITY INFO	ORMATION		OF LIGH	- 11-, it			
ame of Facility Where Abateme	nt is Taking Pla	ace (3)	T	ype of Faci	lity (4)					
OFFMAN LAROCHE - BLDG 85		li x		□ s	chool (K-	12)	1/ 40	۸		
reet Address				☐ S	ubchapte	r 8 (Other the private & c	nan K-12 mmercia	il		
10 KINGSLAND AVENUE				b	ldgs., hor	nes, etc.)			A = 0	
ity (5) County (6)	C	County Code (7	7) S	Square Feet 155,0		# Of Floors 8	1	Building	40+	
UTLEY ESSEX			7	Current Use	(Prior if	being demo	lished)	= =		
- HOLE OF THE 177				OFFICE/RES	SEARCH					
ame of Monitoring Firm Hired b	y Bldg. Owner	(8)	ASCM NO	Name of Ab	atement (	Contractor (	9)			
				_VI Environr		vices Inc.				
RC treet Address				Street Addr	ess					
430 BROADWAY				462 Getty A	venue					
ity, State, Zip Code EW YORK, NY 10018				City, State,						
roject Mngr. For Monitoring Fir		Telephone Nur	mber	Clifton, NJ	07011					
DWARD GERDTS	Sched. Comple	212-221-8014		Telephone			License	Number		
01 / 28 / 13	05 /	30/	13					00	0117	
—/—/	/ / Charle C	) mlu 4)		973-772 Name of OS		tor				
Occupancy Status During Abate Facility Closed/Vacat	ment (Check C	re Period of		LVI Environ	mental Se	rvices Inc.				
A hatement				Street Add	ress					
Abatement Performed	d Outside of No	ormal Facility		462 Getty A	venue					
Other - Describe:	MON-FRI			City, State, Clifton, NJ						
	7:00AM-3:00PN	Λ		Clitton, NJ	07011					
Scope of Work (Check All That						th Negativo	Droceur	ο.		
☐ Demolition	<b></b>	Renovation		Mini - Encl	nment wi osure	th Negative	riessui	•		
≥3sf or≥3lf ≥160 sf or≥260 lf				Glovebag I	Procedure	) 	hia Droc	odure		
E 5100 01 01 2-11			V	Non-Exem	pted (*) ar	nd Non-Fria	pie Pioc	edule		
Location of	ls		Descripti	on of		1		ent Type	In (	ΙE
Asbestos Containing	Location	A	sbestos - C	ontaining		Amount	R	R	E N	N
Material (ACM)	Normally Used	ď	Material ( .e., thermal			(Specify	M	E	C	C
TO BE ABATED in Facility	Solely	insu	lation, surf	facing, VAT	,	SF or LF)		P	A P	O
(13)	by Main-	or	other misc	ellaneous)			V A	A	s	s
100.00	tenance/						Ιĉ	R	Ū	U
	Custodial	8 8 6 10 A							L	R
	Staff (12) YES NO N/A							0.0	-	-
BUILDING 85		WATERPROC	FING TAR			45.66 CF	V		+ +	++
JOILE III TO STATE OF THE STATE				*   1		-				1
Name of Registered Waste Hau	ler	NJDEP Waste		Name of F		Landfill		. 70		
EPIC TRANSPORTATION		Hauler ID No.						11 11 1		
City, State	10000 114 O		Disposal	City. State	9 A- OK 739	60		8.5		
319 AVE P NEWARK, NJ 07105	-4800	.7	Date	VVATNOK	-;_UK 130		Te			
Completed by (Print or Type)		Title			Signatur	е (	-	)	Date	
STEVE STILES		PROJECT MA	ANAGER		1 2	en.		×		01/1
							The same of the sa			

4232

Date of Notification			T	Name o	of Buildin	g Owner/Operator	(2) 20/	3 100		je.		-
1-17-20		<u> </u>				DELOPMEN	T	3 JAN 23 PM 2: 5				
Agency Notified	Type Notification		1	100000000000000000000000000000000000000	Address	, , `	4 7 6	77 2: 1	no.			
□ EPA	<b>E</b> Initial		1	ONE	MA	PINE VIEW	<u>)                                    </u>	7.68 m	0:			_
E DEP	☐ Amended Amendment #		1		tate, Zip		25	LICEN MATTER				
	Emergency (includi	ng	ŀ	Name /	of Conta	N2 0	7030	Telephone Number			-	
E DOH ·	justification)  Di Cancellation				ENGE	Sec. 2.		(Copitalio Maiori				
			1			ORMATION			-			-
Name of Facility	Where Abatement is Taking Pla	ce (3)	-	171011	ma 1 1 1000	OTTEN	Type of Facility	(4)				
The state of the same of the s		(U)										
Street Address	ELOPINEUT.						☐ School (K-1 ☐ Subchapter	8 (Other than K-12)				
	ROEN STREET				•	99 78		rivate & commercial build	ings,			
City (5)	INDER STREET						homes, etc		ı. Age	-		_
HOBOKE	-M)						2000		5 1/		<	
County (6)	<u> </u>		-	County	Code (7	) (STATE USE	A CONTRACTOR OF THE PARTY OF TH	Prior if being demolished)	-11	11.	_	-
1400501	)		İ	ONLY)		,,,,,,,,	RESIDEN	그리아 아름다면 보다 이 이번 이번 나를 하는 것 같아 보다 하는데 하는데 하는데 되었다.				
11-	ng Firm Hired by Building Own	ar I	ASCM	l No.		Name of Abaten	nent Contractor				_	-
(8)						Bost R	emoval 1	Γnc				
Street Address						Street Address	· · ·					-
						450 S.	River St					
City, State, Zip C	ode		-			City, State, Zip C	Code					
			ani.			Hacken	sack, N.	J. 07601				
Project Manager	for Monitoring Firm	Te	elepho	ne No.		Telephone No.		License No.				
						201-329-		00388				
Start Date (10)				te (11)		Name of OSHA		. 1. T. a	100000000		1.35	- 100
1-28-7						Omega En	vironme	ital inc				
Occupancy Statu	s During Abatement (Check on	y one)				Street Address 280 Huy	ler St					
Q Facility Closed	Vacated During Entire Period of formed Outside of Normal Faci	of Abat	ement	t		City, State, Zip C						_
Abatement Per	normed Outside of Normal Factors: $8AM - 5PM$	ity Ho	us	1				ck, N.J. 0760	16			
Scope of Work (C	theck all that apply)	-				South h	ackensa	K, N.O. 070			_	
				III Pon	ovation		Containment will Enclosure	Negative Pressure				
<b>□</b> ≥3sfor≥3ff <b>□</b> ≥160sfor≥26	60 IF			Den Den		B-Giov	ebag Procedure					
						· 🛮 Non-	-Exempted (") an	d Non-Friable Procedure	ТА	bate	-	_
			Local			* v					pe	7654
	Location of		Vorma d Sole			Description						Γ
Asbestos-Co	ontaining Material (ACM) D BE ABATED	Mai	intena	nce/		stos Containing M: ., thermal systems		Amount (Specify	R	20	Encapsulate	637
· · · · · · · · · · · · · · · · · · ·	IN Facility		Staff		· · · · ·	surfacing, VAT	r, or	SF or LF)	Removal	Repair	age	100
	(13)		(12)			other miscelland	eous)		3	7	inte	A PER
		Yes	No	N/A								
BASENER	IT			X	THE	2mAl INSU	LATION	80 LF	X			Γ
ATTIC					-	DING IWSUL		660 SF	X			T
7,11,10			-	X	DUIL	IN SUC	-1110/0	1000	Ť			T
			-	1					1	П		T
Name of Register	red Waste Hauler	I NJ	DEP	Waste H	lauler	Cubic Yards of	Name of Reg	istered Landfill		ш	_	1
7.11	noval Inc	ID	No.			Waste			_			
best ker	HOVAT THE	1	710	)9		17 YOS		a Enterprise	5			
City, State		076	01			Disposal Date	City, State	burg , Oh				
	ckensack, N.J.	0/6	UI			2-9-2013	Maynes			_		
Completed by	Table Estim	2+0	~			Signature P Veldru		Date I - I	7-	7	21	2
R. Veldra	1 DSLI	aLU	_			1 K Vielani	Din.		1 -	21	-1.	~

05/60/1722

Date of Notification (1) January 10, 2012		Name of Building Owner/Operator (2) Diane Byard  Street Address 92 Kern Place  City State Zin Code										
Agencies Notified Type Notification		2 1 2	Street Ad 92 Ker	ddress n Place	=			JAH 23 PM	2: :	20		
DEP Amended Amendment				te, Żip Co Brook,	de NJ 07663		<del>- 1000</del>	37.85 1 16.85 - 4.85	70 3	,		
Emergency (i justification)  DCA  Emergency (i justification)  Cancellation	ncluding	4.3	Name of Diane I	Contact Byard				Talaahana Niir	nber	-	<b>E</b>	
			FACIL	LITY INFO	RMATION		3			-	3	
Name of Facility Where Abatement is Taking House	Place (3)						of Facility (4) School (K-12		N. II.			
Street Address 92 Kern Place				1 12	7		Subchapter 8	(Other than K-12 vate & commerci		dings	, home	es,
City (5) Saddle Brook						Squa N/A	re Feet	# of Floors N/A		Bldg. /	\ge	
County (6) Bergen			County C	Code (7) ISE ONLY)		Curre	127	if being demolish	ned)			
Name of Monitoring Firm Hired by Building C N/A	Owner (8)		ASCM	No.	10000000		atement Conti				4	l.
Street Address	1 5					et Addre	ss gren Aveni	ue	(2 (2 (1)))			
City, State, Zip Code					City,	State, Z	Zip Code NJ 07512					
Project Manager for Monitoring Firm		T	Telephor	ne No.	Tele	phone N 3-345-8	lo.	License N #00675	0.			
Start Date (10) 1/24/13	Schedule 1/25/13		npletion [	Date (11)			HA Monitor tement, Inc					
Occupancy Status During Abatement (Checl	Only On	e)				et Addre		<del></del>				_
Facility Closed/Vacated During Entire F			11 Rosengren Avenue									
Abatement Performed Outside of Norm Other - Describe: Occupied												
Scope of Work (Check All That Apply)												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	enova emolit				Mi GI	ni-Enclosure ovebag Proce	nt with Negative F edure (*) and Non-Friab			r <b>e</b>	
	T .						JII Exempted	( ) and North Haz	T	1102 0	emen	t
Location of		Locati ormal			Description	on of			L		/pe	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Mai	d Sole ntenar odial S (12)	nce/		os Containing thermal system surfacing, \ other miscell	Materia ms insul /AT, or	ation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A	h,							<b>6</b>	
first floor		X		THE THE SE	pipe insu			29 LF	X			
second floor closet	X			pipe insu	lation		3 LF	Х				
Name of Registered Waste Hauler	1		JDEP W		Cubic Yards		Name of R	egistered Landfill				
D&S Abatement, Inc.		auler ID 20996	No.	of Waste TBD			lanagement o	f PA	9			
City, State Totowa, NJ			Har		Disposal Da TBD	te \	City, State Tullytow			d l		
Completed by Deanna Brkusanin	ct Ma	nager		Signatu	Elleu	a Rille		ite 10/1	3			

# OS3001836

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ate of Notification (1) anuary 10, 2012		N J	lame of Bu laverbau	ilding Owne m Wurga	r/Operator of Hicks K	(2) Cahn Wik	angm, 8	Sinni	s, P.C.	$D^{\perp}$			
gencies Notified Type Notification	ı	S	treet Addre	ess hington S	treet	d.		# 23	PM 2:	58		17	
EPA Initial Amended Amendment #_		0	City, State, Newark,	Zip Code NJ 07102	2		& LI	CAN	$\langle i / i \rangle_{R}$	* <sub>1</sub>	000		
DOH justification)	uding		lame of Co					Telen	one Num	bér			
DCA Cancellation	<u> </u>	T,		Y INFORM	ATION								
ame of Facility Where Abatement is Taking Pl House treet Address	ace (3)		TAGIET		- 9	Sch Sub	er (i.e. pri	) S (Other	than K-12) commercia	I buildin	ıgs, h	omes	
201 Washington Street		T.				Square F N/A		# of F N/A	loors	Bldg N/A	g. Ag	9	
Newark County (6)			County Co					r if being	demolishe	ed)			
ESSEX	ner (8)		ASCM N	lo.	Name	of Abaten		tractor (9	9)				
lame of Monitoring Firm Hired by Building Ow N/A	1101 (0)		7.00			Abatent Address	nent, Ind	C.					
Street Address				1	11 F	Rosengre		nue					
City, State, Zip Code					Toto	State, Zip owa, NJ			100 T.A				
Project Manager for Monitoring Firm		T	Telephone	No.		hone No. -345-868	35		License N #00675	0.			
Stall Date (10)	cheduled /28/13	l Cor	mpletion Da	ate (11)		e of OSHA S Abater		c.	-0.21				
Occupancy Status During Abatement (Check		:)				et Address Rosengr		nue					
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe: Occupied	riod of Al I Facility I	bater Hour	ment s		City,	State, Zip owa, NJ	Code		0				
Scope of Work (Check All That Apply)													
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>		enov emol	ation lition			Mini-	Enclosur	e cedure	Negative I			a	
						□ Non-	-Exemple	d ( ) and	1 NOIP Ha		Abate		t
19	1000000	Loca	5-374000000 a			Part (1990)					Ту	ре	_
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility  (13)	Used Mai Cust	inten odial (12	lely by ance/ I Staff?	(i.e. th	Descripti s Containing nermal syste surfacing, v other miscel	g Material ( ems insulat VAT, or	(ACM) ion,	(5	mount Specify or LF)	Removal	Repair	Encapsulate	
	Yes	No			pipe insu	ulation		3	0 LF	x	-		T
basement boiler room		X	4 15		pipe insu			10 3 3	0 LF	Х			1
first floor gas meter room	2.0	X			pipe insu			-	30 LF	X			+
2nd Floor Fan Room	1.31	X			hihe ilist	alauon	Tage	100					+
	1	L ,	NJDEP W	Jaste	Cubic Yard	ls	Name o	of Regist	ered Landi	Fill			1
Name of Registered Waste Hauler D&S Abatement, Inc.			Hauler ID #20996	No.	of Waste TBD		Wsate	Mana	gement		7-		
City, State Totowa, NJ					Disposal D TBD	_	City, Sta	ate own, P		21			
Completed by Deanna Brkusanin	Title	ect l	Manager	7	Signa	Meller	e h	llere		Date 1/10/1	3		

# NO 319022912

Date of Notification (1) January 10, 2013			Name of Building Owner/Operator (2) Aldo & Sylvia Quispe  Street Address 253 Madison Avenue  City, State, Zip Code											
Agencies Notified	Type Notification		1 1	Street Ad 253 Ma	ddress adison A	venue	)		J JAN	23 PM	2:5	`^		
EPA DEP DOL	Initial Amended Amendment		_	Clifton,	te, Zip Co , NJ 070				& Li		i ri fa	1		
⊠ DOH □ DCA	justification) Cancellation				Contact Sylvia (	Quispe	•		Te	ephone Nui	mber '	•		
	L			FACIL	LITY INFO	RMATI	ON .							
Name of Facility Where A House	Abatement is Taking	Place (3)	)					Type of Facility  School (K	-12)	V				
Street Address 253 Madison Avenu	ue	Ti Ti								er than K-1: & commerci		dings,	home	es,
City (5) Clifton						10		Square Feet N/A	# c	f Floors A	1100000	ldg. A	ge	
County (6) Passaic	3	7.0		County C	Code (7) USE ONLY)		_	Current Use (P House	rior if be	ing demolisi	ned)			
Name of Monitoring Firm	n Hired by Building (	Owner (8)	31	ASCM	No.			of Abatement C Abatement,		(9)	- 11			
Street Address	1.70							Address osengren Av	enue			t		
City, State, Zip Code								tate, Zip Code va, NJ 07512	2			1105		
Project Manager for Mor		Telephor	ne No.		Teleph	one No. 845-8685		License N	lo.					
Start Date (10) 1/24/13								of OSHA Monito						
Occupancy Status Durin	a Abatement (Chec	k Only On	e)				Street	Address	7	-1			-	2016
Facility Closed/Vac	ated During Entire F	Period of A	batem	oatement 11 Rosengren Avenue										
Abatement Perform  Other – Describe:	ned Outside of Norm Occupied	al Facility	Hours	city, State, Zip Code Totowa, NJ 07512										
Scope of Work (Check A	All That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emolit				×	Glovebag Pr	ire ocedure					
		T .	-					Non-Exemp	ed (*) ar	nd Non-Friat	ole Pro			
			Locati Iormal			82							emen vpe	1 1
Location Asbestos-Containing TO BE AB In Faci (13)	y Material (ACM) NATED lity	Use Ma Cust	d Sole intenar todial S (12)	ly by nce/ Staff?	Asbes (i.e.	tos Con thermal surfa	scription taining M I systems cing, VA miscellan	laterial (ACM) insulation, T, or	1	Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
basement incl	uding soffit	Yes	No X	N/A		nine	insula	tion	1	24 LF	х			
basement inci	uding some					pipe	ilisula			24 61				
19 1										E a	-			
Name of Registered Wa	ste Hauler	لــــــــــــــــــــــــــــــــــــــ	IN	JDEP W	l /aste	Cubic	Yards	Name o	of Regist	ered Landfil				
D&S Abatement, Inc	H	lauler ID 20996		of Wa TBD	ste			gement o						
City, State Totowa, NJ				Dispo TBD	sal Date	City, St	ate wn, P	Α <sub>\</sub>	2	ės	H E .			
Completed by Deanna Brkusanin	ct ma	anager		\$	Signature	leung K	Mu	ell 1	ate '09/1	3				

Date of Notification (1)	Job #	#: 9393. <sup>*</sup>	1	Name of Bu	ilding Owner	/Operator	(2) 201	PECE:	- b. 1	Ù		3 %
January 18, 2013				Delaware F	Rover Port A	uthority	~07,	JAN 23 P				
Agencies Notified Notification	n Type			Street Addr	ess		Alexander	3 JAN 23 PA	2:	58		
□ EPA □ Initial N	lotificatio	n		2 Riverside	Drive		9.07	the second of th		- 0	6.5	í
☐ DEP ☐ Amend	ed			City, State,	Zip Code		C.	LICENSIN	The	1		
☑ DOL Ame ☑ DOH ☐ Emerge	ndment#			Camden, N	J 08101	8.		-1201/4	3	4.		
☑ DCA justific		Juding		Name of Co	ontact	14		Telephoi	ne Nu	mber		
☐ Cance	llation			Mark Gree	n							
					NFORMATION	ON		-	-			
Name of Facility Where Abateme	nt is Tak	ing Plac	e (3)				Type of Faci	lity (4)	77-273			
Administrative Bldg., Commod	ore Barr	y Bridg	е				School (k					
Street Address							☐ Subchap	ter 8 (Other than b. private & (comn	K-12) nercial	build	inas.	
Route 322			7.				homes, e	tc.)			1	
City (5)							Square Feet 10,000	# of Floors		Bldg.		
Bridgeport				County Cor	de (7) (STA	TE	The state of the state of	(prior if being de	molish			
County (6)				USE ONLY		_	Commercial	2000	.ionor	54)		
Camden County  Name of Monitoring Firm Hired by	v Buildin	a Owner	(8)	ASCM No.		Contractor						-
Pennoni	y Danairi	g Owner	(0)	00102	W 1000		ediation, Inc.					
Street Address				00102	Street Ac		culation, inc.					
515 Grove Street					4343 'G'	Street						
City, State, Zip Code	8:87				City, Stat	e, Zip Cod	е	8				
Hadden Heights					Philadel	phia, PA 1	19124					
Project Manager for Monitoring F	irm	Telepho	ne Nur	mber	Telephor	e Number		License Number				
Alan Lloyd		856-54	7-0505		215-533-	3503		00858				
Scheduled Start Date (10)	Schedu	uled Con	npletion	(11)	Name of	OSHA Mo	nitor					
January 31, 2013		ry 20, 2		1	Pennoni		3 1 1 1		r),		38	
Occupancy Status During Abaten	nent (Ch	eck only	one)		Street Ac	ldress						
☐ Facility Closed/Vacated Durin						ve Street	4					
<ul> <li>☐ Abatement Performed Outside</li> <li>☑ Other – Describe: Work area</li> </ul>			ity Hou	rs -		e, Zip Cod						
		0360			Hadden	Heights, N	IJ 08035		1114			-512
Source of Work (Check all that ap	oply)					_						
<ul><li>□ &gt;3 sf or &gt;3 lf</li><li>☑ &gt;160 sf or &gt;260 lf</li></ul>	8			novation molition		☐ Full Cor ☐ Mini-En		Negative Pressu	ire			
△ > 160 St of > 260 II			□ ре	monaon			ag Procedure					
						☐ Non-Ex	empted (*) an	d Non-Friable Pro	cedur	e	8	
	Is	Location	n							Abate	ement	t
		mally U					100	L. Ilon. II		Ту	ре	
	No			Achaetae (	Description Containing Ma		M	Amount (Specify	-	П		Т
Location of Asbestos-		Solely by	00/		Julian mig ivi			SF or LF)	71	_	Ē	Щ
Containing Material (ACM)	Ma	Solely by sintenan Custodia	3.70		mal systems	insulation,	6	SF ULLE)		8	Encapsulate	Enclosure
Containing Material (ACM)  TO BE ABATED  IN Facility	Ma	intenan Custodia Staff?	3.70	(i.e., the	mal systems urfacing, VAT	, or		SF OF LF)	em	170 1	Ĕ.	Ins
Containing Material (ACM) TO BE ABATED	Ma	intenan Custodia	3.70	(i.e., the	mal systems	, or		SF OF LF)	Removal	Repair	<u>a</u>	1 (1)
Containing Material (ACM)  TO BE ABATED  IN Facility	Ma	nintenan Custodia Staff? (12)	i	(i.e., the	mal systems urfacing, VAT	, or		SF OI LF)	emoval	pair	ate	(a)
Containing Material (ACM)  TO BE ABATED  IN Facility	Ma	intenan Custodia Staff?	3.70	(i.e., then so oth	mal systems urfacing, VAT er miscelland	, or	100 Si		X		late	6
Containing Material (ACM)  TO BE ABATED  IN Facility  (13)  Emergency Generator Room	Ma ()	nintenan Custodia Staff? (12)	i	(i.e., the s oth	mal systems urfacing, VAT er miscelland	, or					late	6
Containing Material (ACM)  TO BE ABATED  IN Facility  (13)	Yes	nintenan Custodia Staff? (12)	i	(i.e., then so oth	mal systems urfacing, VAT er miscelland	, or	100 Si		X		late	0
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Containing Material (ACM)  TO BE ABATED IN Facility (13)  Emergency Generator Room Emergency Generator Room Name of Reg. Waste Hauler	Yes	nintenan Custodia Staff? (12)	N/A	Generator E Pipe Insulat  //aste Cut # of V	mal systems urfacing, VAT er miscelland exhaust ion	, or eous)	100 Si 40 LF		X		ate	
Containing Material (ACM)  TO BE ABATED IN Facility (13)  Emergency Generator Room Emergency Generator Room	Yes	nintenan Custodia Staff? (12)	N/A	Generator E Pipe Insulat  /aste Cut # 0f V 3	mal systems urfacing, VAT er miscellane exhaust tion	, or eous)	100 Si 40 LF f Reg. Landfill a (DEP #15-1		X		ate	
Containing Material (ACM)  TO BE ABATED IN Facility (13)  Emergency Generator Room Emergency Generator Room Name of Reg. Waste Hauler The Prime Group Remediation	Yes	nintenan Custodia Staff? (12)	N/A	Generator E Pipe Insulat  /aste Cut # of V 3 Dis	mal systems urfacing, VAT er miscelland Exhaust tion  pic Yards Vaste	Name o Minerva	100 Si 40 LF f Reg. Landfill a (DEP #15-1		X		ate	

CK 6417

Date of Notification (1)			Name of Building Owner/Operator (2)  Levin Management											
01 / 18 /	13		Street Address PO Box 326 City State Zin Code											
Agencies Notified Type Notif	ication		Str	eet Address	Track Control	-	1013 JAN 22			- 1				
				O Box 32	6		, <3	PM	2: 5	0				
☑ DOLWD ☐ Amend				y, State, Zip			- 5 g/km (1 pr y		· . '	Ò'_				
I to the second	ment #			Salar Carrier State Comment	NJ 07061-0326		27/270	114 50						
DCA Emerge (NJAC 5:23-8) ustifica	ency (includation)	ding	_	me of Conta			& Licas.	100263	ABI					
(NJAC 5.23-8)							Telephone Nur	upet)						
L Gancer	lation			Gerald O B			1							
Name of Facility Where Abatement is	Taking Pl	ace (3		-ACILITY I	NFORMATION	Type of Facility	(4)		_		10			
Space 7 Twin City Shopping		(O	,			School (K-12	37. 59							
Street Address	Meta-con trailer					Subchapter	8 (Other than K-1							
36 Garfield Avenue						Other (i.e., p     homes, etc.)	rivate and comme	ercial b	uildir	ıgs,				
City (5)						Square Feet	# of Floors	16	Bldg. /	۸۵۵				
Jersey City, NJ						25000	1	'	60	nge				
County (6)		-	Ic	ounty Code	7)(STATE USE ONLY)									
Hudson			10	builty Code	(1)(STATE USE UNLT)	Current Use (Pr	ior if being demol	snea)						
Name of Monitoring Firm Hired by Bu	ilding Own	or (8)	IASC	M No.	Nome of Abeter	ant Contractor (0)								
AET	manig Own	CI (U)	100000000000000000000000000000000000000	ASCM No. Name of Abatement Contractor (9)  O0021 Alliance Environmental Systems										
Street Address				1021		ironmental Sys	stems	×			_			
28 N. Pennell Road					Street Address	044								
City, State, Zip Code					550 East Uni		45 5 6	- 11						
Media, PA 19063					City, State, Zip C									
Project Manager for Monitoring Firm		TT	elepho	no No	Telephone No.	r, PA 129382	Tri or							
Eric Housekenecht				969-6238	610-701-9000		License No.							
Start Date (10)	Scheduled	1 Com			Name of OSHA N		00508		-					
02/04/13		END CONDING		/13	AET	ionitor	4							
Occupancy Status During Abatement	(Check on	y one)			Street Address	1 1 1								
□ Facility Closed/Vacated During En					28 N. Pennel	Road		.8						
Abatement Performed Outside of N				escribe	City, State, Zip C	ode			-					
Time of Abatement: 7AMP	W/ <u>3:30</u> PW	-	_AM		Media, PA 19	063								
Scope of Work (Check all that apply)				4.5					1.000		]=1  =\4.0;			
≥3 sf or ≥3 lf		Renov	ation		⊠ Full Con	tainment with Neg losure	ative Pressure				5. 5.			
≥160 sf or ≥260 lf		Demol	ition			g Procedure	14							
					∐ Non-Exe	mpted (*) and No	n-Friable Procedu							
Location of			cation nally		<b>.</b>			Al	atem	ent T	уре			
Location of Asbestos-Containing Material (ACI	w) u		olely by	Ashe	Description of estos Containing Ma		Amount	Re	Re	g	m			
TO BE ABATED	- 1		nance/	(i.e	e., thermal systems		(Specify	Remova	Repair	cap	Cic			
IN Facility	0	ustoaia (1.	al Staff 2)	′	surfacing, VAT	or	SF or LF)	Va	,	Encapsulate	Enclosure			
(13)	Ye			A	other miscellane	ous)				ite				
Main Area			-	VAT			25000 SF			П	П			
Main Area		15		mastic			25000 SF				1			
		10	_	1		7-1	20000 0.							
		+=						$\perp$		П	Ш			
				- W										
Name of Registered Waste Hauler				Waste	Cubic Yards of	Name of Regist			10					
N.E.T.S.			189	ID No. 47	Waste 60	BFI Imperia	d .							
City, State					Disposal Date	City, State								
Hazelton, PA				Sex Marin	TBD	Imperial, PA	4		1	,				
Completed By (Print or Type)	Title				Signature	1//	l Da	te /	,	+	-			
John Heemer	Estim	ator			LA	2/	.	1/	16	11	7			
					1	44	+	//	7	/	2			
SB-41					/ /	7		/	/					

#### State of New Jersey

#### NOTIFICATION OF ASBESTOS ABATEMENT

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

						2						
Date of Notification (1) 1/18/2013			Name of	f Building	Owner/Ope Gary I	rator (2) Muschla	12 Ch 21	144	D	.5%		
	al Notific	cation (	Street A			tham Way	JAN 23 P	M 2:	58	5	14	
[ X ] DOL Ame	endment			ate, Zip Co		n, NJ 08527	ELICENE,		ΰĮ,			
	cellation		Name of	f Contact Gary 1	Muschla		Telephone Number	r				
		FA	CILITY I	NFORM	ATION		The same of the sa					
Name of Facility Where Abatement is Takin Residence	ng Place	(3)				Type of Facility (4)	School (k-12)		1.10	6	1)	
Street Address 212 Eisenhower A	Avenue					[x]	Subchapter 8 (o Other (i.e., priva homes, etc.)				ildings,	
City	Coun		County C (STATE)	ode (7) USE ONL	Y)	Square feet 1200 sf	# of Floors		g. Age	60		
Ortley Beach	Ocea	ın			***	Current Use (Prior i		l)				
Name of Monitoring Firm Hired by Building	g Owner	(8)	ASCM N	0.	Name of	Reside Abatement Contracto Guardi		Inc				
Street Address				100	Street Ad	dress	oute 9, Unit 61					
City, State, Zip Code			1	-	City, Stat	e, Zip Code	iver, New Jersey 08755-1271					
Project Manager for Monitoring Firm		Telephone Number	er		Telephon 732-349	e Number	License 1 00624					
Scheduled Start Date (10) 1/21/13		Scheduled Comple 1/23/13	etion Date (1	1)	Name of	OSHA Monitor E.M.S.	L. Analytical					
Occupancy Status During Abatement (Check  [ X ] Facility Closed/Vacate  [ ] Abatement Performed  [ ] Other – Describe	ed During	g Entire Period of A			Street Ad	dress 1056 S e, Zip Code	telton Road					
Scope of Work (Check all that apply)					F 1		way, New Jerse		554			
[ ] >3 sf or ≥3 lf [ X ] ≥160 sf or ≥260 lf		[ ] Renov	vation lition	5	[ ] [ x ]	Mini-Enclosure Glovebag Proced			ure			
		Is Location		-1 44.	1 4)			Abat	ement	Туре		
Location of Asbestos-Containing Material (ACM)  TO BE ABATED in facility (13)	I	Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Amount (Specify SF or LF) O V A						E N C A P S U L E	E N C L O S U R E			
Exterior	Asbest	tos siding	g	44 (40)	1100 sf	X						
	377		Y Washington									
							-		S			
Name of Registered Waste Hauler Guardian Contracting, Inc.	N	IJDEP Waste Haule 20223	Print 1	Cubic Yar	ds of Waste	T.R.R.F.	red Landfill					
City, State Toms River, New Jersey	Title	Dispo 1/24			City, Stat Tullyto	e wn, Pennsylvania				H.		
Completed by (Print or Type) Nicholas Fernicola	Signatur	licha	14	ul		Date 1/18	3/2013	3				
					- 1	TA 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						

#### State of New Jersey

#### NOTIFICATION OF ASBESTOS ABATEMENT

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

Name of Building Owner/Operator (2) Date of Notification (1) Garden State Modulan Homes 1/18/2013 Type of Notification Street Address Agencies Notified PO Box 96 [x] EPA Initial Notification Amended Notification ] DEP City, State, Zip Code Amendment # [x] DOL Lavallette, NJ 08735 [x]Emergency (including justification) Name of Contact [x] DOH Cancellation Mark Fertakos ] DCA **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (k-12) Residence Subchapter 8 (other than k12) Street Address Other (i.e., private & commercial buildings, [x]104 New Jersey Avenue homes, etc.) County (6) # of Floors Bldg. Age City County Code (7) Square feet (STATE USE ONLY) 2500 sf 60 Current Use (Prior if being demolshed) Lavallette Ocean Residence Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Guardian Contracting, Inc. N/A Street Address Street Address 1889 Route 9, Unit 61 City, State, Zip Code City, State, Zip Code Toms River, New Jersey 08755-1271 License Number Telephone Number Project Manager for Monitoring Firm Telephone Number 00624 732-349-9932 Name of OSHA Monitor Scheduled Start Date (10) Scheduled Completion Date (11) E.M.S.L. Analytical 1/21/13 1/18/13 Street Address Occupancy Status During Abatement (Check only one) 1056 Stelton Road Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe Piscataway, New Jersey 08854 Full Containment with Negative Pressure Scope of Work (Check all that apply) Mini-Enclosure Renovation Glovebag Procedure >3 sf or ≥3 lf Non-Exempted (\*) and Non-Friable Procedure Demolition [x] [ x ] ≥160 sf or ≥260 lf Abatement Type Description of Is Location R R E E Asbestos-Containing Amount Normally used Location of E E N N Material (ACM) (Specify SF Solely by C Asbestos-Containing Material (ACM) P C M Maintenance/Custodial (i.e., thermal systems or LF) A L TO BE ABATED A 0 P 0 insulation, surfacing, Staff in facility V S S VAT, or (12)(13)U U other miscellaneous) A L R L YES NO N/A E E 2150 sf X Asbestos siding X Exterior Name of Registered Landfill Cubic Yards of Waste Name of Registered Waste Hauler NJDEP Waste Hauler ID No. 20223 T.R.R.F. Guardian Contracting, Inc. Disposal Date City, State City, State 1/22/13 Tullytown, Pennsylvania Toms River, New Jersey Date Signature Completed by (Print or Type) Title 1/18/2013 Nicholas Fernicola Project Manager \*Do not use this form for asbestos licensure exempted activities.

### State of New Jersey

#### NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1)  January 18, 201	3	Name of Building Owner/Operator (2)  Fred Radloff  Co 2 116 4								
[ ] DEP [ ] Ame	l Notification nded Notification	Street Address  City, State, Zip C	Pode.	E SECTION AS	3 PM 2:58	188			a	
[11]	ndment # gency (including	City, State, Zip C	Brick,	, NJ 08724. LICE	e Gold Rail Ruar					
[ ] DCA justif	ication) ellation	Name of Contact Fred			Telephone Number					
	F	ACILITY INFOR	MATION			- 11	_			
Name of Facility Where Abatement is Takin Residence	g Place (3)			Type of Facility (4)	School (k-12) Subchapter 8 (o	ther tha	n k12)			
Street Address 118 Mathis Drive		*		[x]	Other (i.e., priva			cial bui	ldings,	
City	County (6)	County Code (7) (STATE USE ON	LY)	Square feet 1000 sf	# of Floors	Bldg	g. Age	50		
Brick	Ocean			Current Use (Prior i Resider		)		8		
Name of Monitoring Firm Hired by Building N/A	Owner (8)	ASCM No.	Name of	Abatement Contractor		, Inc.	a par			
Street Address		Plant Co	Street A		oute 9, Unit 61	8.6				
City, State, Zip Code			City, Sta	ate, Zip Code Toms River, New Jersey 08755-1271						
Project Manager for Monitoring Firm	Telephone Num	iber .		ne Number	License 1 00624					
Scheduled Start Date (10) 1/18/13	Scheduled Com 1/18/13	pletion Date (11)		OSHA Monitor	L. Analytical				-	
	only one) od During Entire Period o Outside of Normal Facili		Street A	1056 State, Zip Code	telton Road way, New Jerse	ev 088	54			
Scope of Work (Check all that apply) $ \begin{bmatrix}       ] >3 \text{ sf or } \ge 3 \text{ lf} \\       [x] \ge 160 \text{ sf or } \ge 260 \text{ lf} $	L 3	novation molition	[ ] [ ] [ x ]	Full Containment Mini-Enclosure Glovebag Proced	t with Negative Pro	essure			=	
and an area						Abat	ement	Туре		
Location of Asbestos-Containing Material (ACM)  TO BE ABATED in facility (13)	lial (i.	Description Shestos-Con Material (A e., thermal sulation, su VAT, of ther miscell	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 sid	ing		800 sf	X				
						-				
					-		-		-	
Name of Registered Waste Hauler Guardian Contracting, Inc.	NJDEP Waste Ha		ards of Was	te Name of Registe T.R.R.F.	red Landfill					
City, State Toms River, New Jersey		sposal Date 21/13	City, St Tullyt	ate own/Pennsylvania			į.			
Completed by (Print or Type) Nicholas Fernicola	Title Project Manager	Signature	chol	ters		Date 1/18	3/2013	3		

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

# CF 2

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

RECEIVED

Date of Notification (1) 1-19-2013	Name of Building Owner/Operator (2) Silvia Chan  Street Address  2013 JAN 23 PM 2: 58															
Agencies Notified	Type Notification		- 1	Street A	ddress sedale A	WA.		.A		<del>)                                    </del>	<del>'11 2:</del>	58				
EPA DEP DOL	Initial Amended Amendment		_	City, Sta Millbur	te, Zip Co n NJ.	2000		43	& LIGE	No i	HG	ØŁ.				
DOH DCA	Emergency ( justification) Cancellation	including		Name of Silvia (	Contact Chan.				- 1	Tel	ephone	Num	ber	1		
Name of Facility Where	Abatement is Taking	Place (3)		FACI	LITY INFO	ORMA'	TION	Type	of Facility (4	1					4 2	
Residential.	Abatement is Taking	y riace (3)							School (K-12		4:					
Street Address 33 Rosedale Ave.				€ N				×	Subchapter ( Other (i.e. pretc.)	8 (Oth				lings,	home	es,
City (5) Millburn NJ. 07041		77		·		152			re Feet	# o 2	f Floors			ldg. A 0+	ge	ŧ
County (6) Essex.				County (	Code (7) USE ONLY)			Curre	nt Use (Prio	r if bei	ng dem	olish	ed)			
Name of Monitoring Firm	n Hired by Building (	Owner (8)		ASCM	1 No.				tement Cont							
Street Address	10 10 10 10 10 10 10 10 10 10 10 10 10 1		1				Street	Addres	SS	ui 00	1 11003					
City, State, Zip Code						x -	A		ia Ave.							
Oity, State, Zip Gode	Project Manager for Monitoring Firm						0.5500	ey Cit	· Control of the control							
Project Manager for Mo			Telepho	ne No.			one N 333-8			Licens 0117		).	VA.			
Start Date (10) 1-30-2013		Schedule 1-30-20		npletion I	Date (11)	6 2 6			HA Monitor vironmenta	al Se	rvices	•				
Occupancy Status Durin	ng Abatement (Chec	k Only One	;)					Addres								
Abatement Perform	cated During Entire F ned Outside of Norm			City, State, Zip Code												
Other – Describe:				Jersey City NJ. 07304												
Scope of Work (Check / ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	All That Apply)			Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedu							9					
			_ocati	60000						( /				Abate	ment	
Locatio Asbestos-Containing	The state of the s		ormal Sole		Ashasi		escription		(ACM)		mount		-	ı y	ре	
TO BE AE In Fact (13)	BATED lity		ntena	nce!		therm: surf	al systems acing, VA miscellar	s insula T, or		(\$	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
Basen	nent		x	1,00		Pip	e Insula	ition		1	20LF	-	x			
											4 3 4 3					
Name of Registered Wa	eta Uaulor		LN	JDEP W					Name of F	) a minte	rad I au	- 46II	21			
Tri-State Transfer A	Н	auler ID A-456		of W	c Yards aste		Name of R Minerva									
City, State Bronx NY						Disp	osal Date 0-2013		City, State Wynesb		Ohio	9				ją.
Completed by Tiffany Nunez	Mar	nager			Signature	) (				Dat 1-1	e 9-20	13				

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Date of Notification (1)	Nam			PM 2:58				7
Agency Notified Type Notification		et Address	et in	A to A to		1		1
			51" (M	THE TOUR				4
DEP GAmended	City,		110 6	1 202				
	ding E	-10/1/61	1010.0	Tale				$\dashv$
DOH justification)	Nam		A				37	Ľ.
DCA Cancellation		OHOI						1
ALL TABLE D		CILITY INFORMATION	Type of Facility	(4)				$\dashv$
Name of Facility Where Abatement is Taking P	lace (3)			K.				
151 MYRTE SI			☐ Subchapter	8 (Other than K-12)	35			
	NO.	*	Other (i.e. pr homes, etc.)	ivate & commercial b				
City (5)	•		10 100	# of Floors	Bldg. Age			-
				1 0 1	<u>TD</u>			_
County (6)			Current Use (P		21			
		2.00			<i>J</i> 1			$\dashv$
	ner ASCM No.		- 1-	1				
(8)				NC		-		-
Street Address :	4	P.O. 6	30x 814	·				
City, State, Zip Code		City, State, Zip		N.D. C	885	6	÷	
- Waltadan Sim	Telephone No	Telephone No.	J.C C.	License No.				
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Agency Notified    Type Molification   Type Mo		7						
Agency Notified DEP AGOL DEP AGOL DEP AGOL DEMONSTRATION Reme of Facility Where Abatement is Taking Place (3) TST HYRITE DESTREAMMENT FACILITY INFORMATION Reme of Facility Where Abatement is Taking Place (3) TST HYRITE DESTREAMMENT FACILITY INFORMATION Reme of Facility Where Abatement is Taking Place (3) TST HYRITE DESTREAMMENT FACILITY INFORMATION Reme of Facility Where Abatement is Taking Place (3) TST HYRITE DESTREAMMENT FACILITY INFORMATION Reme of Facility Where Abatement is Taking Place (3) TST HYRITE DESTREAMMENT FACILITY INFORMATION Type of Facility (4) Schedul K-12) Schedul K-12) Schedul K-12) Schedul K-12) Schedul K-12 Sched								
Occupancy Status During Abatement (Check o	nily one)	Street Address	AL RIV	<i>L</i> .				
S Equilibro Closed A/acated During Entire Period	of Abatement .	P.U. C	NX VIII					
Agency Notified DEP AGOU DEP AGOU DEMONSTRATES C36 HYRTE C37 HYRTE DEMONSTRATES C37 HYRTE DEMONSTRATES C37 HYRTE DEMONSTRATES C37 HYRTE DEMONSTRATES C37 HYRTE DEMONSTRATES C37 HYRTE DEMONSTRATES C37 HYRTE DEMONSTRATES C37 HYRTE DEMONSTRATES C37 HYRTE DEMONSTRATES C37 HYRTE C37 HYRTE C37 HYRTE DEMONSTRATES C37 HYRTE C47 HYRTE								
Scope of Work (Check all that apply)		ЖFu	Il Containment with	Negative Pressure			٠	
n≥3 sf or ≥3 lf	Re	enovation DiMi						
160 sf or ≥ 260 lf	Live	amolilion O No	n-Exempted (*) an	d Non-Friable Proced	dure.	25		
	Is Location				A	77.5	1000000	UI
		Descriptio	n of	•				
Ashestos-Containing Material (ACM)		Asbestos Containing	Material (ACM)	Amount	20	-	Enc	5
TO BE ABATED		(i.e., thermal system surfacing, V.	AT, or	SF or LF)	ome	epe	apsı	clos
		other miscella	ineous)		Val	=	Tele	E E
	Yes No NA					-		
. 0		1 VVC IN	STATED	1501	TCX			1
Agency Notified  Agency Actives  Agency Active								
		176	DNI		711			
	N IDED Weete	Hauler Cubic Yards o	f Name of Regi	istered Landfill			-	_
Name of Registered Waste Hauler		Waste	100	10115	_		*	
NOUALECT INC	1850		1 (S)	4,6,000	()	A		
Agency Notified    Street Address   Cay   Chycling   Carnotation   Carnotation   Cay   Chycling   Carnotation   Ca		735						
	1 088	DT 221	DILLIANS	POME	Date ( c	4		-
Agent   Agen		i						
IVANIUC LIMEIDAN IVI	MAIN	1 1 40	1V-1	~1	-1-1-1	4	-	



Date of Notification (1) 1-17-2013				Name o	of Buildin	ng Owner/0 lealty Ma	Operato	r (2)///	7_12-1	-50)		sa. us <sup>d</sup>	-			
Agencies Notified	Type Notification	1	-	Street /	Address	eally ivia	mager	nent.	(bade 7	912)						25.00
□ EPA					and A			137	Tige .	, 1 1	1 2: 5	38				
DEP DOL	Amended Amendmer				ate, Zip wood I			ď.	LICEN	(		1		- 1		
⊠ DOH	Emergency justification		J	Name o	of Contac	ct				Te	lephone	e Nur	nber			
DCA	Cancellatio			Erika	B.Thrif	ft.										
Name of Facility Where	Abatement is Taki	ng Place (	3)	FAC	ILITY IN	IFORMATI	ON	LTime	-6 F104 ·	(0)						`
Residential.	Take Take	ing i lace (	3)					green,	of Facility	1000						
Street Address			1122-20	-					School (K- Subchapte		ner than	K-12	2)			
81 Grand Ave.								X	Other (i.e. etc.)	private	& comr	nerci	al bui	ldings	, hon	nes,
City (5) Englewood NJ. 07	631								e Feet	# 0	f Floors	3		Bldg.	Age	
County (6) Essex.	g = 1			County (STATE				Curre	nt Use (Pri	or if be	ing den	nolish	ed)			
Name of Monitoring Firr	n Hired by Building	Owner (8	)	ASCA	ΛNo.		Name	of Abat	ement Cor	ntractor	(9)		-			-
0							Gree	en Env	ironmen	tal Se	rvices	S.				
Street Address					77			Addres Virgini	s a Ave.							
City, State, Zip Code	114						State, Zi ey City									
Project Manager for Mon	nitoring Firm		Telepho	ne No.	- 4 - 6		none No 333-88			Licen 0117		ο.				
Start Date (10) 1-28-2013		Schedul 2-8-20		mpletion I	Date (11	1)			A Monitor	tal Se	rvices					
Occupancy Status Durin	g Abatement (Che	k Only Or	ne)					Addres				•			_	
➤ Facility Closed/Vac	ated During Entire	Period of	Abater	ment			235 \	Virgini	a Ave.							
Facility Closed/Vac Abatement Perform Other – Describe:	4pm to 12am.	nal Facility	/ Hour	s		[		tate, Zip ey City	Code NJ. 073	304						
Scope of Work (Check A	II That Apply)	23117-0-0-1-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-		-					A 43			- 195715			-	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	Renova Demoli				×	Mini Glov	Containme -Enclosure rebag Prod	edure						
		I lo	Locat	ian	de la la la la la la la la la la la la la			ј иоп	-Exempted	1 (*) an	a Non-F	-riabl	e Pro	7512 3	emen	•
Location	n of	1	Vorma	lly		Des	cription	of							ре	,
Asbestos-Containing TO BE AB	ATED	Ma	d Sole intena	nce/	Asbe (i.e	estos Conta	aining M	laterial (	ACM)		mount		Z)	_	Enc	Щ
in Facil		Cus	(12)	Staff		surfac other m	ing, VA				or LF)		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A			ioooiiari	codo,					Val.	=	ulate	ure
Basement Stora	ge Room # 2		X	1 51		Pipe	Insula	tion		28	B5LF	= 1/4	x			
Basement Storag	X			Pipe	Insulat	tion	200	30	OOLF	100	x					
Basement Laur	Basement Laundry Room					Pipe	Insulat	tion	7	12	20LF		x			
Boiler Ro	oom		х			Pipe	Insulat	tion			50LF		x			
Name of Registered Was	te Hauler		333	JDEP W		Cubic Y	'ards		Name of F			100	-	. 4.6		-
Tri-State Transfer As	ssociated		1000	lauler ID I A-456	No.	of Wast	1.4		Minerva	Ente						
City, State Bronx NY	er partie					2-8-20			City, State Wynesb		hio					
Completed by Tiffany Nunez	m,	Title Office	Mar	nager		Sig	gnature	-				Date 1-1	7-20	13	-	

Date of Notification (1) 1-17-2013		7 H		Name of E Continu	Building Co led She	owner/0 et - Pa	perator ( ige 2 o	2013	MAM 23	. P		-77				
Agencies Notified	Type Notification			Street Add 81 Gran	dress nd Ave.		4	3 pr	2.7	PA 2	2:58					
DEP  DOL	Amended Amendment			City, State Englew				€ [	ICEMS	The I	701					
DOH DCA	Emergency ( justification) Cancellation	including		Name of 0 Erika B				W0		Tele	ohone N	lumber				
	L			FACIL	ITY INFO	RMATIC	ON									
Name of Facility Where Residential.	Abatement is Takin	g Place (3)						☐ Se	f Facility (4 chool (K-12	2)	- 4h K	10)				
Street Address 81 Grand Ave.								⊠ or et	ubchapter i ther (i.e. pr c.)	rivate &	comme	rcial bu				s,
City (5) Englewood NJ, 076	631	. =						Square 5000	Feet	# of 3	Floors	5.7	Bld 60	g. Ag +	je .	
County (6) Bergen	L D CE			County C (STATE U			_	Curren	t Use (Prio	r if bein	g demol	lished)		ione de		
Name of Monitoring Firm Sky Environmental		Owner (8)	- 1	ASCM	No.				ment Con ronment				Via Stop			12.
Street Address 140 Boulevard.			4	107				Address /irginia	a Ave.	1					2	80
City, State, Zip Code Mt Lakes NJ. 0704	16							tate, Zip								
Project Manager for Mo				Telephon	e No.			one No.			License 01174			7.5°		
Start Date (10) 1-28-2013		Schedule 2-8-201		mpletion D	Date (11)				A Monitor ironment	al Ser	vices.					
Occupancy Status Duris	ng Abatement (Che		- 4				1	Address		11 11		1	15			
	cated During Entire			ment			235 \	/irginia	a Ave.							
Abatement Perform	med Outside of Norr	nal Facility	Hour	S		_		tate, Zip	Code NJ. 073	304		3				
Scope of Work (Check	All That Apply)														-	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	enova emoli				××××	Mini	Containme i-Enclosure vebag Prod i-Exempted	edure						
		Т.						2 14011	-Lxciiiptet	2 ( ) une	1101111	Tubic I			ment	
Location			Locat			De	scription	of					. [	Ту	pe	
Asbestos-Containin TO BE Al In Fac (13	ig Material (ACM) BATED cility	Mai	ntena odial (12)	-	Asbes (i.e.	tos Con thermal surfa	taining M I systems icing, VA miscellar	Material s insula T, or	(ACM) tion,	(S	mount pecify or LF)	Kemoval	)	Repair	Encapsulate	Enclosure
Boiler F	Room	Yes	No X	N/A	N	liscella	neous	Debri	s.	1	0SF	x	+			
Boiler I			X	77	0, 204		n Firep		1	70	00SF	×	7			
General Base			x				Insula			2	6LF	x	7			
General base	ment Alcas.	-				p.c	7 7	1.2.			1		+			
Name of Registered W	aste Hauler		T	NJDEP W	/aste	100000000000000000000000000000000000000	Yards		Name of	Registe	red Lan	dfill	-			W.H
Tri-State Transfer			5.57	Hauler ID 2A-456	No.	of Wa			Minerva	THE STATE OF	rprises	3				
City, State Bronx NY			122	2-8-2	sal Date 201 <b>3</b>		City, Stat Wynes		Ohio							
Completed by Tiffany Nunez	1	Title Office	е Ма	nager			Signature	9			CORE A CORE	Date 1-17-	20	13	17/5	



110		(1	Pursuant	t to NJAC	8:60 and 12:1	20)	D. P.	Mym.					
Date of Notification (1) 1-16-2013			Name of Tried	of Building & True	Owner/Operat Carpentry.		2012 121	A Company	4-4				
Agencies Notified Type Notification	n			Address onial Te	rrace.		2013 JAN	23 PM	2:5	ક			
DEP Amended Amendme				ate, Zip C	ode NJ. 07040		H-10-17 - AL		-	<u>_</u>			
□ DOH	1)	g		of Contact ny Pores	3			Telepho	one Nu	mber			
N			FAC	ILITY INF	ORMATION	36.71		-	-	-			
Name of Facility Where Abatement is Tak Residential.	ing Place	(3)				Тур	e of Facility ( School (K-1						
Street Address 3 Colonial Terrace.						×	Subchapter Other (i.e. p etc.)	8 (Other th			dings	, hom	ies,
City (5) Maplewood NJ. 07040						Squ 181	are Feet	# of Flo	ors		3ldg. /	Age	
County (6) Essex.				Code (7) USE ONL	n	Curr	rent Use (Prid	or if being d	demolis	hed)			
Name of Monitoring Firm Hired by Building	Owner (8	3)	ASC	M No.			atement Con		es.				
Street Address						et Addre	ess nia Ave.						
City, State, Zip Code	11-C 11 (0)		· · ·		City,	10.00	Zip Code						
Project Manager for Monitoring Firm	-		Telepho	ne No.	Tele	phone N	No.	110000	ense N	0.			
Start Date (10) 1-26-2013	Schedu 1-26-2		mpletion	Date (11)	Nam	e of OS	SHA Monitor Ivironment						
Occupancy Status During Abatement (Che	ck Only O	ne)				et Addre			00.		-	-	
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:	Period of mal Facilit	Abater y Hour	nent s				nia Ave. Zip Code				-		_
					— Jer	sey Ci	ty NJ. 073	04					
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 if ≥160 sf or ≥260 if	parameter 1	Renova Demoli				A Mi	ull Containme ini-Enclosure ovebag Proc on-Exempted	edure				e	
		s Locat					I	(*)			A 1100 TO	emen vpe	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use	Norma ed Sole aintena stodial (12)	ely by nce/	Asbes (i.e.	Description stos Containing thermal system surfacing, V other miscella	Materians insul AT, or	ation,	Amou (Speci SF or L	ify	Removal	Repair	Encapsulate	Enclosure
Basement	163	X	INA		Pipe Insul	ation		120L	_	-			-
Basement	X	-		VAT	auon		140S	10 10 1	x			_	
						<u> </u>		1403		X			
N									No. 10				
Name of Registered Waste Hauler Tri-State Transfer Associated		Н	JDEP W lauler ID A-456		Cubic Yards of Waste 5			legistered L Enterpris					
City, State Bronx NY					Disposal Date 1-28-2012	9	City, State Wynesb	urg-Ohio	- 1				
Completed by Tiffany Nunez	Title Office	e Mar	nager	<del></del>	Signatur	e			Dat	te 16-20	13	-	-

#### 1301-4596 Check #4824

Date of Notification (						_	Owner / Operato	or (2)	to the second second	33				
	1/16/13			-			ınications	2012 141	100 011 0 50					
Agencies Notified  EPA	Type Notifica	ation		Stree		ress nwood	Avo	ZUIJ JAI	N 23 PH 2:58					
□ DEP			-	-		& Zip C	ada		(	-		- i		
□ DOL	and the same of th	nded #					19046	を影響し	i de Casalidi. Holifolid <mark>o</mark>			1.75		
☑ DOH	( Table )	gency	_			ontact	15040	Öt L	HOLHSING -	Tel	epho	ne N	umb	er
DCA DCA		ellation		Alex							рио			
•		7		FΔ	CILI	TY INF	ORMATION				_			-
Name of Facility Wh	ere Abateme	ent is Taking P	ace (3		OILI	I I IIVI	Type of Facil	lity (4)					110	
Verizon	ioro / todiorri	one to running r	, oou	,			School (							
Street Address				-			Subchap	oter 8 (Ot	her than K-12)					
218-220 Amber S	treet						Other (i.e	e. private	& commercial build	ings,	hom	es, e	tc.)	
						- 101	Square Feet	#	of Floors	Bldg	J. Age	9		
City (5)		County (6)	Co	unty	Code	(7)				-				29
Beach Haven		Ocean					Current Use	(Prior if b	eing demolished)			-7/		
			7				Offices							
Name of Monitoring	Firm Hired b	y Building Owr	ner (8)		AS	CM No	Name of Aba	tement C	Contractor (9)	82 T				s 11
<b>USA Environmen</b>	tal						AbateTech,	, Inc.						
Street Address							Street Addres	ss						
8436 Enterprise A							PO Box 25							
City, State & Zip Co				- 10 %		- 10.4.2	City, State &	•						
Philadelphia, PA			Talas	bono	Nim	hor	Lumberton Telephone N		License	Nlum	hor			_
Project Manager for Mark Jenkins	Monitoring F	·irm	Telep 215-3			iber	609-265-21		License		0052	q	12	
Scheduled Start Dat	e (10)	Scheduled Cor				1)	Name of OSH		nr .	//	0002			
1/29/13	(10)	concadica coi	2/12			.,	EMSL Anal		Y	12				
Occupancy Status D	During Abate	ment (Check or	nly one	9)	4		Street Addres	*			7.85		189	
		During Entire P			atem	ent	108 Haddoi		-1115-		35			
Abatement F	Performed O	utside of Norm	al Ho	urs			City, State &	경기선으로 내려왔다며 살았다.			140			
Describe:							Westmont,	NJ 0810	08					
Facility Occu									27					
Scope of Work (Che	ck all that ap	oply)						ΓZ Γ.	ull Containment with	Noa	otivo	Dros	aura	
≥3 sf or ≥3 lf				Por	novat	ion			ull Containment with ini-Enclosure	ivey	alive	ries	Suie	
≥160 sf ≥260			A		noliti				love Bag Procedure	c				
2100 51 2200	J 11		Ш	Del	HOHLI	OH			on-Exempted and N		riable	Pro	redu	re
10	cation of		İs	Locat	ion	_	Description		Amount		Aba			
10 10 10 10 10 10 10 10 10 10 10 10 10 1	os-Containin	q		nally			Asbestos-Conf		(Specify		(8) 			7,50
	erial (ACM)			olely			Material (A		SF or LF		Remova		ᄪ	т
	BE ABATED		Main				(i.e., thermal sy insulation, surface				nov	Re	cap	nclo
ir	r Facility		Custo		Staff	'	or other miscell				<u>a</u>	Repair	Encapsula	Enclosure
	(13)		Yes	(12) No	N/A	1				.58		1. 1	ate	G,
First Floor			.55				Floor tile & I	Maetic	2,700 SF	-		П	П	П
First Floor Engin	e Room		X	H	Ħ		Floor tile &N		450 SF			Ħ	Ħ	H
First Floor Engin				H	ΗH	1	ibration Damp				X	Ħ	Ħ	Ħ
First Floor Foyer			H	X	tΗ	1	Floor tile & I		150 SF			Ħ	Ħ	Ħ
First Floor Rear F				X	H		Floor tile & I		150 SF		X	Ħ	Ħ	Ħ
· moti noor recur i	noting part	San Inglie	Ħ	n	İΠ		Salar et en et pa	A A	1 3 4 4 4 4 4 4 4 4			Ī	Ī	П
Name of Registered	Waste Haul	er		N.	DEP	Waste	Cubic Yards	Name o	of Registered Landfi	II		-	-	
				Ha		ID No.	of Waste							
AbateTech, Inc			200		187	750	TBD		Landfill					
City, State Lumberton, NJ	The state of						Disposal Date 2/12/13	City, Sta	ate own, PA					,
Completed By (Print	or Type)			Tit	le -		Signature			I	ate			
Gwen Trumbetti	75-7					Coord.	(M	w	,, 36 = 4 1 4 10		/16/	13		(IE)

# State of New Jersey 1212-4581 NOTIFICATION OF ASBESTOS ABATEMENT Check #4825 (Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification	(1)			Nam	e 0	f Rui	Idina C	Owner / Operati	tor	(2) 20	17 100	1 1	7	-0	
Bate of Notification	1/16/13							Administra		n	13 JAN 23 F		i.	2	
Agencies Notified	Type Notific	ation		Stree	et A	ddre	ess			# 3/g		7 2:5	o.		
⊠ EPA	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ı						enter						- 4	
DEP	Initia			100 (100 P)			Zip Co		2		LICENOIN	19 1180			
□ DOL		ended #	1.5					ernational Ai	irp	ort, NJ 0840	15 -190/A	B THE		Щ.	
□ DOH		ergency		0.00			ntact					Telepho	one N	lumb	er
☐ DCA	Can	cellation		Don	ald	Bre	own							_	
				F/	\CI	LIT	Y INFO	DRMATION		1 1 2 2					
Name of Facility WI			lace (	(3)				Type of Fac							
William J. Hughe	s Tech Ce	nter						School		10.0					
Street Address			. 19							er 8 (Other tha		Name and the			
Building 306 TSF	Annex							- American III	· Armen		nmercial buildi			etc.)	
		1-						Square Fee	et	# of Flo	ors	Bldg. Ag	je		
City (5)		County (6)	. C	ounty	Co	de (	7)							7	-23-22-
Atlantic City		Atlantic							e (F	Prior if being d	emolished)				
								Exterior							
Name of Monitoring		by Building Ow	ner (8	)	1	ASC	M No.	E000000 (0) 50000		ement Contrac	ctor (9)				
TTI Environment	al				_1	_	-	AbateTecl Street Addr				- 1		-	
1253 North Chur	ch Stroot		0.5					PO Box 2		•					
City, State & Zip Co					-	_		City, State 8		in Code			Le Arter	227 553	
Moorestown, NJ								Lumberto							
Project Manager for		Firm	Tele	phon	e N	umb	er	Telephone			License	Number		#//07/CO	7
Jim Guilardi			856	-840	-88	00	181	609-265-3	207	7		0052	29		
Scheduled Start Da		Scheduled Co	mpleti	on D	ate	(11)		Name of OS	SHA	A Monitor		-			
12/17/1:				7/12				EMSL Ana	_						
Occupancy Status I								Street Addr		The state of the s			7		
		During Entire F			bate	emer	I	108 Hadde	_						_
	Performed C	outside of Norm	iai Ho	ours				City, State 8		5)					
Describe:	unical Durina	Abatamant.						Westmont	τ, Γ	IJ 18108					
Scope of Work (Che		Abatement :		-	12				-				-	-	
Scope of Work (Cite	cok all tilat a	ppiy)							Г	☐ Full Cor	ntainment with	Negative	Pre	ssure	9
≥3 sf or ≥3 l	f		M	Re	enov	vatio	n		Ī	Mini-En		J			
☐ ≥160 sf ≥26	0 If		Ħ	De	emo	litior	1		Ī	Glove B	ag Procedures				
-									Ī		empted and No		e Pro	cedu	ıre
Lo	ocation of			Loca				Descripti			Amount	Ab	atem	ent T	ype
	tos-Containii	ng		mally				Asbestos-Co			(Specify	-			1
	erial (ACM)			Solely ntena				Material (			SF or LF)	Z.	-	E E	g
	BE ABATED  n Facility			todial			ir	(i.e., thermal nsulation, surfa				Removal	Repair	aps	당
	(13)		000	(12				or other misce				oval	<u>a</u> .	Encapsulate	Enclosure
			Yes			N/A				4 4 4				e	
Exterior Pole	E Asia in a	- 12 - 12	П				7-17	Trans	ite		30 LF			П	
		**************************************	П	П			71-7							П	П
			ITT	TF	H		-	2.5	1.52	V PE LE			Ī	П	
							-)					- 1	П	П	而
			I	Ī			95			- 100 N N N N N N N N N N N N N N N N N N	men vergener z				
		107 27 32 07 12								THE PARTY					
Name of Registered	Waste Hau	ler		N	JDE	EP V	Vaste	Cubic Yards		Name of Regi	stered Landfill				
				1939			No.	of Waste							
AbateTech, Inc.			2	1	875	50		TBD	- 1	TRRF Land	fill				
City, State								Disposal Date		City, State					
Lumberton, NJ				1-				1/8/13		Tullytown, I	-A	In (	-		
Completed By (Pring Gwen Trumbetti		# S			itle <b>)ffi</b> c			Signature	1	n		Date 1/16/			
Gweii Trumbetti					00			OSTA	Ţ.			1/10/	13		
				10	-00	· u ·		1100		·				- 1	

# CK,103

F		(F		national contracts	8:60 and			MFI	Property	F 04.			
Date of Notification (1) 1-22-2013				of Building	Owner/Op .C.	perator (2)	2011		len j	T. L	41477		
Agencies Notified Type Notification  EPA Initial			Street A 526 P	ddress ark Ave	).		2013	JAN	23 PM	2:	58	- 17	
DEP Amended Amendment Emergency		_		ate, Zip C Orange			e e	LIG	î ( Kana	1/4	71.		ř:
DOH justification)  DCA Cancellation	_		Donal	f Contact d Hart			=	Tele	phone N	mber			
Name of Facility Where Abatement is Takin	a Diaco (	3)	FACI	LITY INF	ORMATIO			(1)				5 - 54	
Residential Street Address	g riace (					Iy	pe of Facility School (K-	12)					
526 Park Ave.						×	Subchapter Other (i.e. petc.)	8 (Othe private 8	er than K- commer	12) cial bui	ldings	, hom	ies,
City (5) East Orange NJ.							uare Feet .200	# of	Floors		Bldg. 30+	Age	
County (6) Essex			County (STATE	Code (7) USE ONLY	n	— Cu	rrent Use (Pri	or if beir	ng demolis	shed)			
Name of Monitoring Firm Hired by Building (	Owner (8)		ASCN	/ No.			batement Co nvironmen			LC			
Street Address						Street Add 235 Virg	ress inia Ave.						
City, State, Zip Code						City, State, Jersey C	Zip Code City NJ 073	04					
Project Manager for Monitoring Firm			Telepho	ne No.		Telephone 201-333			License   01174	No.			
Start Date (10) 2-2-2013	Schedul 2-2-20		mpletion	Date (11)			SHA Monitor nvironmen	tal Ser	vices, L	LC			
Occupancy Status During Abatement (Chec Facility Closed/Vacated During Entire F						Street Add							
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	al Facility	/ Hours	S		-	City, State,		04					
Scope of Work (Check All That Apply)									- 11				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				×	full Containme fini-Enclosure Blovebag Prod fon-Exempted	e cedure				re.	
Location of		Locati		1111	D		.or. Example	( ) und	110111110		Abat	emen ype	t :
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Ma	d Sole intena todial S (12)	nce/		stos Contai thermal sy surfacir		ulation,	(Sp	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
December	Yes	No	N/A				-			-		6	
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Dasement	Basement x					nsulation		60	)SF	x	-		
		); D)							# 1				
Name of Registered Waste Hauler			JDEP W		Cubic Ya		Name of	Register	ed Landfil	1 - 1 - 1			
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Completed by Tiffany Nunez	Title Office	e Mar	nager	1	Sign	nature				ate -22-2	013		

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4004		City,	State, Zip	Code		4921	12.46			
-	20	Ma	ys Landi	ing, NJ 08330		21100		13		
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n		Mr	. Harry C	arlson						
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					Square Feet	# of Floors	Blo	g. Ag	e	
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	7	Cou	inty Code (	(7)(STATE USE ONLY)	Current Use (Pri	or if being demolis	hed)		9.77	- 1
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na Owne	r (8)	ASCN	1 No.	Name of Abateme	ent Contractor (9)	STORY OF	- 1			
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			Waste	Cubic Yards of	Name of Regis	stered Landfill				1
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		1894	47	Disposal Date		•	, silved	* 7	-	- 1
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Title		1- 1/2		Signature//	)///	D	ate /	- II		Charles .
	king Placof facili addres cheduled 03 heck only Period of mal Faci 3:30 PM	it #001 / (including in) / (including in	Telephone 908-29 cheduled Completion D 03 / 01 / heck only one) Period of Abatement mal Facility Hours - De 3:30 PMAM  Renovation Demolition  Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A st	Telephone No.  908-296-1132  Cheduled Completion Date (11)  03 / 01 / 13  heck only one)  Period of Abatement mal Facility Hours - Describe 3:30PMAM  Renovation Demolition  Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A  St □ □ ⊠ Please    City, State, Zip Mays Land   Name of Contata   Name of Co	7201 Black Horse Pike City, State, Zip Code Mays Landing, NJ 08330 Name of Contact Mr. Harry Carlson FACILITY INFORMATION king Place (3) of facilities to be demolished by others addresses of the facilities  County Code (7)(STATE USE ONLY)  Ing Owner (8)  ASCM No.  Name of Abatemant Alliance Env Street Address 550 East Uni City, State, Zip C West Cheste Telephone No. 908-296-1132 Cheduled Completion Date (11) 03 / 01 / 13 AET  Theck only one) Period of Abatement mal Facility Hours - Describe 3:30PM—_AM  AM  Street Address 28 N. Pennel City, State, Zip C Media, PA 19  Gloveba Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A  Street Address 28 N. Pennel City, State, Zip C Media, PA 19  Full Con Mormally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A  Street Address 28 N. Pennel City, State, Zip C Media, PA 19  Full Con Asbestos Containing Ma (i.e., thermal systems surfacing, VAT other miscellane Norn-Exe  Norn-Exe  NJDEP Waste Haller ID No. 18947  Disposal Date	City, State, Zip Code Mays Landing, NJ 08330 Name of Contact Mr. Harry Carlson  FACILITY INFORMATION  king Place (3) of facilities to be demolished by others  addresses of the facilities    County Code (7)(STATE USE ONLY)   Current Use (Pri Vacant	City, State, Zip Code Mays Landing, NJ 08330  Name of Contact Mr. Harry Carlson  FACILITY INFORMATION  king Place (3)  of facilities to be demolished by others  addresses of the facilities  County Code (7)(STATE USE ONLY)  Courrent Use (Prior if being demolis Vacant  Ng Owner (8)  ASCM No.  Name of Abatement Contractor (9)  Alliance Environmental Systems  Street Address 550 East Union Street  City, State, Zip Code West Chester, PA 19382  Telephone No. 908-296-1132  Telephone No. 908-296-1132  AET Out (1)  AET Out (1)  Name of Obatement Contractor (9)  Alliance Environmental Systems  Street Address 550 East Union Street  City, State, Zip Code West Chester, PA 19382  License No. 00508  Telephone No. 908-296-1132  AET Out (1)  ABOUT (1)  ABOUT (1)  ASDESVAS Containing Material (ACM)  (I.e., thermal systems insulation, Surfacing, VAT, or other miscellaneous)  ASDESVAS Containing Material (ACM)  (I.e., thermal systems insulation, Sepacity  ABOUT (1)  ABOUT (1	City, State, Zip Code Mays Landing, NJ 08330 Name of Contact Mr. Harry Carlson  FACILITY INFORMATION King Place (3) of facilities to be demolished by others  addresses of the facilities  County Code (7)(STATE USE ONL Y)  County Code (7)(STATE USE ONL Y)  County Code (7)(STATE USE ONL Y)  Alliance Environmental Systems  Street Address  Stoet Address  Stoet Address  Stoet Address  Stoet Address  Stoet Address  Stoet Address  Stoet Address  Stoet Address  Stoet Address  Stoet Address  Street	City, State, Zip Code Mays Landing, NJ 08330 Name of Contact Mr. Harry Carlson  FACILITY INFORMATION king Place (3) of facilities to be demolished by others  addresses of the facilities  County Code (7)(STATE USE ONL Y)  County Code (7)(STATE USE ONL Y)  County Code (7)(STATE USE ONL Y)  Alliance Environmental Systems  Street Address  Stoet Address  Stoet Address  Stoet Address  Stoet Address  Stoet Address  Stoet Address  Stoet Address  Stoet Address  Stoet Address  Stoet Address  Stoet Address  Stoet Address  Street Address  Stoet Address  Stoet Address  Stoet Address  Stoet Chester, PA 19382  Telephone No. 908-296-1132 610-701-9000 00508  AET  AET  AET  AET  AET  AET  Benovation  City, State, Zip Code  Media, PA 19063  Full Containment with Negative Pressure  Mini-Enclosure  Mini-Encl	Table   Tabl

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility.	YES	E (	N/A	Decription of Asbestos-Containing Material (ACM) PH 2: 58	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
Vitamin Store and Garage - 380 Route 18	T		X	Parameter State Company of the Compa	454 SF	×			
1 story, 1200 SF Approx. bldg age - 50			X	Sheet Flooring - 1st Floor	754 SF	X			
		Ď	X	Exterior Transite	292 SF	X			
Transmission Shop - 378 Route 18			X	12" Floor Tile and Mastic - 2 layers	336 SF	X			
1 story, 2000 SF Approx bldg age - 40			X	12" Floor Tile and Mastic - 1 layer	72 SF	X			
			X	Joint Compound - Walls and Ceilings	2,180 SF	X			
			X	Asphalt Roof Shingles	1,600 SF	X			
			X	Asphalt Roofing Sheet	2,415 SF	X			
A			X	Roof Flashing	747 SF	X			
Igal Photography - 382 Route 18			X	Residual Mastic on Concrete Floor	952 SF	X			
1 story, 4500 SF approx. bldg age - 50			X	Mastic Associated with 12" Tile	737 SF	X			
			X	9" Floor Tile	983 SF	X			
			X	9" Floor Tile, Felt Paper and Mastic	351 SF	X			
			X	Pipe Insulation	150 LF	X			
			X	Exterior Duct Coating	1,000 SF	X			
			X	Asphalt Roof Field and Flashing	3,105 SF	X			
22 West Ferris Street (Route 18 and Ferris St)			X	Floor Tile and Mastic	58 SF	X			
2 stories, 1200 SF Approx. bldg age - 50			X	Exterior Transite	496 SF	X			
			X	Chimney Flashing	38 SF	X			
24 West Ferris Street (Route 18 and Ferris St) 2 stories, 1200 SF Approx. age - 50			X	Exterior Transite	500 SF	X			
55 West Ferris Street (Route 18 and Ferris St)			X	Floor Tile and Mastic	1,495 SF	X			
1 story, 10,200 SF Approx. bldg age - 50			X	Pipe Insulation	720 LF	X			
			X	Exterior Transite	12 SF	X			
			X	Roof Flashing and Parapet Coping	792 SF	X			
			X	Joint Compaund - Walls and Ceilings	5,050 SF	X			
			X	Pipe Fittings	51 LF	X			

Date of Notification (1) Name of Building Owner/Operator (2) 01 04 H. Carlson & Sons, Inc. 1 13 2013 JAN 23 PM 2:58 Agencies Notified Type Notification Street Address **⊠** EPA 7201 Black Horse Pike □ DOLWD ☐ Amended City, State, Zip Code **⊠** DHSS Amendment # Mays Landing, NJ 08330 ☐ Emergency (including DCA . Name of Contact justification) Telephone Number (NJAC 5:23-8) ☐ Cancellation Mr. Harry Carlson **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Please see Page 2 attached list of facilities to be demolished by others School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, Please see Page 2 for the street addresses of the facilities homes, etc.) City (5) Square Feet # of Floors Bldg. Age East Brunswick Page 2 Page 2 Page 2 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Middlesex County Vacant Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Alliance Environmental Systems Street Address Street Address 28 N. Pennel Road 550 East Union Street City, State, Zip Code City, State, Zip Code Media, PA 19063 West Chester, PA 19382 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 610-701-9000 Eric Houseknecht 908-296-1132 00508 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 01 / 21 / 13 02 / 22 / 13 AET Occupancy Status During Abatement (Check only one) Street Address □ Facility Closed/Vacated During Entire Period of Abatement 28 N. Pennel Road Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: 7AM-PM/3:30PM-Media, PA 19063 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ≥3 sf or ≥3 If ☐ Renovation Mini-Enclosure ☐ Glovebag Procedure ≥160 sf or ≥260 lf Demolition Non-Exempted (\*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Enclosure Removal Encapsulate Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify **Custodial Staff?** IN Facility surfacing, VAT, or SF or LF) (12)other miscellaneous) (13)Yes N/A No Please see Page 2 for a detailed list  $\boxtimes$ Please see Page 2 for a detailed list  $\boxtimes$ M  $\boxtimes$  $\boxtimes$ X П X П X Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste N.E.T.S. Allied BFI Imperial 18947 25 Disposal Date City, State City, State Hazelton, PA TBD Imperial, PA Completed By (Print or Type) Title Signature Date Estimator John Heemer

ASB-41 MAY 11

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

Location of Asbestos-Containing Material (ACM) TO BE ABATED				Decription of Asbestos-Containing Material (ACM)	Amount (Specify SF or LF)	Removal	Rej	Encapsulate	Enclosure
. IN Facility	YES	NO	N/A	2013 JAN 23 PH 2-58		oval	Repair	late	ure
Vitamin Store and Garage - 380 Route 18			X	Sheet Flooring - 2nd Floor	454 SF	X			
1 story, 1200 SF Approx. bldg age - 50			X	Sheet Flooring -1st Floor	754 SF	X			
			X	Exterior Transite	292 SF	X			
Transmission Shop - 378 Route 18			X	12" Floor Tile and Mastic - 2 layers	336 SF	X			
1 story, 2000 SF Approx bldg age - 40			X	12" Floor Tile and Mastic - 1 layer	72 SF	X			
			X	Joint Compound - Walls and Ceilings	2,180 SF	X			
			X	Asphalt Roof Shingles	1,600 SF	X			
power lates and a supplied to			X	Asphalt Roofing Sheet	2,415 SF	X			
			X	Roof Flashing	747 SF	X			
Igal Photography - 382 Route 18			X	Residual Mastic on Concrete Floor	952 SF	X			
1 story, 4500 SF approx. bldg age - 50			X	Mastic Associated with 12" Tile	737 SF	X			
			X	9" Floor Tile	983 SF	X			
			X	9" Floor Tile, Felt Paper and Mastic	351 SF	X		34	¥ 100
			X	Pipe Insulation	150 LF	X			
			X	Exterior Duct Coating	1,000 SF	X			
			X	Asphalt Roof Field and Flashing	3,105 SF	X			
22 West Ferris Street (Route 18 and Ferris St)			X	Floor Tile and Mastic	58 SF	X			
2 stories, 1200 SF Approx. bldg age - 50			X	Exterior Transite	496 SF	X			
			X	Chimney Flashing	38 SF	X			
24 West Ferris Street (Route 18 and Ferris St) 2 stories, 1200 SF Approx. age - 50			×	Exterior Transite	500 SF	×			
55 West Ferris Street (Route 18 and Ferris St)			X	Floor Tile and Mastic	1,495 SF	X			
1 story, 10,200 SF Approx. bldg age - 50			X	Pipe Insulation	720 LF	X			
			X	Exterior Transite	12 SF	X			
			X	Roof Flashing and Parapet Coping	792 SF	X			
			X	Joint Compaund - Walls and Ceilings	5,050 SF	X			
at the second			X	Pipe Fittings	51 LF	X			

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		(1	ursuant	to NJAC	8:60 and 12:1	20)	<b>F</b>	property on an	pt.			
Date of Notification (1) 1/16/2013			Name o	-	Owner/Operat	or (2)		ECEIV				Ī
Agencies Notified Type Notification  X EPA X Initial		-	Street A		Y ROAD		2013	IAN 23 PM	2:	58		
DEP Amended Amendment Emergency		_		ate, Zip C H PLAI	<sup>ode</sup> NFIELD, NJ	0708	60 £	Bridge Cal	(ii)	JL	, -	
DOH justification)  Cancellation				f Contact EN THO		32.2		Telephone N	umber			
Name of Facility Where Abatement is Taking	g Place (	(3)	FACI	LITY INF	ORMATION	Typ	e of Facility (4	)				
P.S.E. & G							School (K-12	)				
Street Address CORNER OF TRENTON & CLIFTO	NC				a v	×	Subchapter 8 Other (i.e. pr etc.)	(Other than K- ivate & commerc	12) cial bu	ldings	, hom	ies,
City (5) ELIZABETH						1 0.000	are Feet ox 8000	# of Floors	1	Bldg. appx	Age 65 y	rs
County (6) UNION			County (	Code (7) USE ONLY	)	Cur SV	rent Use (Prior VITCH STA	if being demolis	shed)	*		
Name of Monitoring Firm Hired by Building ( ENVIRONMENTAL TACTICS	Owner (8	)	ASCN 0045	Control and the Control	Nam UN	e of Ab	systems	ractor (9) OF AMERIC	Α.			
Street Address 64 BROAD ST	TAIL TO					et Addr WHI	ess TEHEAD A'	VE				
City, State, Zip Code MATAWAN, NJ 07747				- 70			Zip Code RIVER, NJ	08882		76.50		
Project Manager for Monitoring Firm TOM GEIGER			Telephor 732-29	ne No. 90-2217		phone ! -432-		License I	No.			-
Start Date (10) 1/31/13	Schedul 2/4/13		mpletion [	Date (11)			SHA Monitor SYSTEMS	OF AMERIC	A			28
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire F		2000 T	nent		263303000	et Addre	ess TEHEAD A	/E.				
Abatement Performed Outside of Norm  Other – Describe: vacated except for re	al Facilit	v Hours	S				Zip Code RIVER, NJ	08882				
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf		Renova Demolit				× Fi	ull Containmer lini-Enclosure lovebag Proce	t with Negative			re .	
Location of		Locati Normal			Description	n of					emen /pe	t
Ashestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole aintena stodial ( (12)	nce/		thermal system surfacing, V other miscella	Materi ns insu AT, or	ılation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
ANTID CONTROL DOOM	Yes	No	N/A							_	6	
TST FLK. CONTROL ROOM	1st FLR. CONTROL ROOM					NELS		36 SF	X	_		
		ļ		-	ACM WIRE	SOC	K	40 LF	X			
										-		-
Name of Registered Waste Hauler WASTE MANAGEMENT		10.00	JDEP Waller ID I		Cubic Yards of Waste	41	Name of Ro	egistered Landfil	1	<u> </u>	<u> </u>	1
City, State ELIZABETH, NJ				,	Disposal Dat 2/4/13	e	City, State MORRIS	VILLE, PA			-	9
Completed by CAROL RAIMO	Title OFF	ICE N	1GR		Signatu	re Pha C		Da	ate /16/2	013		

CK 22612

Date of Notification (1)  01 / 17 /	13		Name c/o	of Buildin	g Owner/Operator (2 Atlantic City	2)	VED		×				
Agencies Notified				Address Baccara	21 at Blvd	013 JAN 23	PM 2: 58						
DOLWD	ent # by (including on)	<b>)</b>	Atla Name	of Contac	7, 140 00-40 1	ا الله الله الله الله الله الله الله ال	IHΩ Telephone Nur	mber					
			1		IFORMATION	•	1. 7 7	15. 12. T		_			
Name of Facility Where Abatement is T 119 North Congress Avenue Street Address 119 North Congress Avenue	aking Place	(3)			II OKWATION		) 3 (Other than K-1 rivate and comm		ilding	ıs,			
City (5) Atlantic City						Square Feet 1,200	# of Floors	1	dg. A	ge			
County (6) Atlantic			Cour	nty Code (7	7)(STATE USE ONLY)	Current Use (Pri		lished)					
Name of Monitoring Firm Hired by Build Health & Safety Services	ling Owner	(8)	ASCM 0011		Name of Abateme								
Street Address 318 12th Street					Street Address 2 Henderson Drive								
City, State, Zip Code Hammonton, NJ 08037					City, State, Zip Code West Caldwell, NJ 07006								
Project Manager for Monitoring Firm  Jim Proctor		(6		4-8850									
Start Date (10) S	cheduled C	7.1			Name of OSHA N Superior Aba					- 47			
Occupancy Status During Abatement (C     Facility Closed/Vacated During Entir     Abatement Performed Outside of No     Time of Abatement:AM	e Period of ormal Facility	Abate y Hou	rs - Des		Street Address 2 Henderson City, State, Zip Co	ode		w 100 g					
Scope of Work (Check all that apply)					West Caldwe	II, NJ 07006				,=	1 4.		
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf	□ Re				☐ Mini-End ☐ Gloveba	tainment with Neg dosure g Procedure empted (*) and No		lure					
		Loca						Ab	atem	ent T	уре		
Location of Asbestos-Containing Material (ACM TO BE ABATED IN Facility (13)	) Use Ma Cus	intenatodial (12	ely by ance/ Staff?		Description of estos Containing Ma e., thermal systems surfacing, VAT other miscellane	iterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure		
Upper Level	Yes	No	N/A	VAT			570 SF			П			
Roof				Flashir			420 SF		=	=	1		
Exterior					e Siding		1,900SF			П	6		
Name of Registered Waste Hauler			NJDEP '	Waste	Cubic Yards of	Name of Regis	stered Landfill				1-		
Service Transport Group, Inc		1	Hauler II		Waste 30	Minerva La		?					
City, State New Castle, DE					Disposal Date 2/01/2013	City, State Waynesbu	rgh, OH				7.		
Completed By (Print or Type) Nick Petrovski	ent			Signature	1 las	eun'	Date /-	18	-/	3			

В	&	G	Pro	#	201	3-1	16
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Check # 5728

Date of Notification (1) 01/17/2013	- R		Name of Building Owner/Operator (2) Harry Weiner										
Agencies Notified Type Notificat	ion		Stree	t Address		23 PM 2	: 58						
EPA Initial Amender			City	3 Plymouth I State, Zip Code	-	10 40 50 50	P\$1	<del>}</del>					
DOH Emergen	cy (includ on)	ing	Name	Lawn, NJ 07	410 CE L	IOERA INC		ne Numbe	er				
DCA Cancellat	ion		1 2 2 2 2	y Weiner									
Name of Facility Where Abatement is Ta Harry Weiner	king Place	e (3)	FA	CILITY INFORM		Type of Facility			V.				
Street Address 11-03 Plymouth Drive						School (K Subchapte Other (i.e. etc.)	-12) er 8 (Other tha private & com	ın K-12) nmercial b	uilding	js, ho	mes,		
City (5) Fair Lawn, NJ 07410						Square Feet	# of Floo	rs	Bldg	. Age			
County (6) Bergen	11376		Count (STATE	y Code (7) E USE ONLY)	(	Current Use (Prior if being demolished) residential							
Name of Monitoring Firm Hired by Buildin n/a	g Owner (	(8)	ASC	CM No.	Name of B & G	ame of Abatement Contractor (9)  3 & G Restoration, Inc.							
Street Address	Y .				Street Ad					7			
City, State, Zip Code	7.21-				City, Stat	y, State, Zip Code ncoln Park, NJ 07035							
Project Manager for Monitoring Firm		Teleph	one No.	Telephon	ephone No. License No. 00378								
Start Date (10) 01/31/2013	Schedu 02/1/2	uled Co	mpletion	Date (11)	Name of	OSHA Monitor		/8	_				
Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire	eck Only C	One)	ment		Street Ad	Restoration, dress erson Road	inc.						
Other – Describe:	mal Facili	ty Hou	rs		City, State	e, Zip Code Park, NJ 07	7035						
Scope of Work (Check All That Apply)	75-55												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renov Demoli	20000000000			Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	edure						
	l:	s Locat	tion		181		( / dild 14011-1	Hable FI		emen	nt		
Location of Asbestos-Containing Material (ACM)		Norma ed Sole			escription of			_	T	/pe			
TO BE ABATED In Facility (13)		intena stodial (12)	Staff?	(i.e. therm	ntaining Mate al systems ins facing, VAT, o miscellaneou	sulation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure		
bedroom							005 6		_	0			
laundry room		X		T & Mastic		225 sf	X			_			
behind bar area	-	X		T & Mastic		212 sf	X			L			
bottom of the stairs			X		T & Mastic		32 sf	X					
ame of Registered Waste Hauler		N	JDEP W		Yards	I Name of 5	12 sf	X					
B & G Restoration, Inc.  Dity, State				No. of Wa	aste 6	The second second second	Resource &		ery (	Cent	er		
incoln Park, NJ					sal Date 2013	City, State Tullytown	n PA						
Completed by Title Sordana Luna Secretary/Tre				1/0	signature	10.1 A		Date 01/17/2	012				

B & G Proj # 2013-12

Date of Notification (1) 01/16/2013		Name of Building Owner/Operator (2) JAN 23 PM 2: 58 Howard Conklin													
Agencies Notified Type Notifica	tion		eet Addr 8 RIng		Avenue	200	TOG-01	ARSI.				9 8			
EPA Initial Amende	nent #			Zip Code e, NJ 0			rocitoi:	• •							
Emerge justificat Cancelli			me of Co	ontact Conklin	AN CASE STA			Telephone Num	ber _						
			FACILIT	Y INFO	RMATION		CE 39 (4)								
Name of Facility Where Abatement is T Howard Conklin Street Address 458 RIngwood Avenue	aking Place (3)			3			of Facility (4) School (K-12) Subchapter 8 Other (i.e. privetc.)	(Other than K-12 rate & commercia	) Il buildir	ngs, h	omes	3,			
City (5) Wanaque, NJ 07465						Squar	e Feet	# of Floors		lg. Ag	е				
County (6) Passaic			ounty Co	de (7) E ONLY)		Current Use (Prior if being demolished) residential									
Name of Monitoring Firm Hired by Buil	ding Owner (8)	1	ASCM N	No.			tement Contra storation, Ir								
Street Address						eet Addre	ss on Road		15						
City, State, Zip Code						City, State, Zip Code Lincoln Park, NJ 07035									
Project Manager for Monitoring Firm		Te	elephone	No.		Telephone No. License No. 973-696-6869 00378									
Start Date (10) 01/28/2013	Scheduled 01/28/20		oletion Da	ate (11)		Name of OSHA Monitor B & G Restoration, Inc.									
Occupancy Status During Abatement  Facility Closed/Vacated During E Abatement Performed Outside of Other – Describe:	ntire Period of Ab	ateme	Street Address 105 Ryerson Road  City, State, Zip Code Lincoln Park, NJ 07035												
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	☐ Re	novati molitic				► M G	ini-Enclosure	nt with Negative ledure (*) and Non-Frial			e				
	T									Abate	emen	t			
Location of Asbestos-Containing Material (AC TO BE ABATED In Facility (13)	M) No Used Main Custo	ocation ormally Solely itenan idial St (12)	y y by ce/	Asbes (i.e.	tos Containi thermal sys	tems insu , VAT, or	lation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure			
	Yes	No	N/A						12.6	-		+			
boiler room			Х			sulation		18 lf	X			+			
laundry room			Х			sulation		15 lf	X		-	1			
main room area			X		pipe in	sulation	3 a 3	18 lf	X		1	+			
main room area			X			ре		5 If			X	L			
Name of Registered Waste Hauler B & G Restoration, Inc.			JDEP W auler ID 9563		Cubic Ya of Waste			Registered Landf v Resource &		very	Cen	ter			
City, State Lincoln Park, NJ			14		Disposal 01/29/2		City, State Tullytov			×					
Completed by Gordana Luna		Treasu		Sigr	nature	W .C		Date 01/16/	2013	3					

R &	G	Proi	#	20	13-1	1

Date of Notification (1) 01/18/2013			Na S	ame of B tasia D	uilding Ow Judra	ner/Operator	(2) 3 JAN 23 P	<del>V 3. =</del>					
Agencies Notified	Type Notification		St 1	reet Add 20 Mer	ress selis Ave	anile *				100			
EPA DEP DOL	Initial Amended Amendment #				, Zip Code NJ 0701	1	& LICENCH	I KEL			+ -		
<b>□</b> DOH	Emergency (in justification) Cancellation	cluding	1000	ame of C		-V		Telephone Nu	mber				
DCA	Carrochaton		-	FACILI	TY INFOR	MATION						1	
Name of Facility Where A Stasia Dudra Street Address		Place (3)					Other (i.e.		2) ial build	ings,	nome	s,	
120 Merselis AVeni City (5) Clifton, NJ 07011	ue						etc.) Square Feet	# of Floors	BI	dg. A	ge		
County (6) Passaic			C	ounty Co	ode (7) SE ONLY)		Current Use (Pr residential	ior if being demolis	hed)				
Name of Monitoring Firm	n Hired by Building O	wner (8)		ASCM	No.		of Abatement Co G Restoration			A.			
Street Address				1 14			Street Address 105 Ryerson Road						
City, State, Zip Code							City, State, Zip Code Lincoln Park, NJ 07035						
Project Manager for Mo		T	elephon	e No.	Telep	ohone No. -696-6869	License 00378	No.			Ī		
Start Date (10) 01/29/2013	1 0 4 10 0 11						e of OSHA Monito G Restoration					l.	
Occupancy Status Durin	ng Abatement (Check	Only One)	)	. ,			t Address Ryerson Roa	d					
Facility Closed/Vac Abatement Perform Other – Describe:	cated During Entire P ned Outside of Norm	eriod of Ab al Facility F	atem lours	ent		City,	State, Zip Code coln Park, NJ (	11 11 7 7					
Scope of Work (Check			-				•				We-90V8=		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	All Hattypy)	Section 1	novat moliti				Mini-Enclosu	ocedure					
		1			SHALLO MAIN		Non-Exempl	ted (*) and Non-Fri	able i ic		emen	t	
	Talling at the	1 200	ocati							T	уре	_	
Location Asbestos-Containin TO BE Al In Fac (13	g Material (ACM) BATED cility	Used Main Custo	tenar	ly by nce/	Asbesto (i.e. t	Descriptions Containing thermal syste surfacing, \ other miscell	Material (ACM) ms insulation, /AT, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate		
baser	Yes					pipe insu	lation	192 lf	X			İ	
		+										I	
	- to Harden		LN	JDEP W	/aste	Cubic Yards	Name	of Registered Land	Ifill	L		_	
Name of Registered W B & G Restoration,				lauler ID 9563		of Waste	Tullyt	ow Resource 8		very	Cer	ite	
City, State Lincoln Park, NJ						Disposal Da 01/30/201	ate City, S Tullyt	town, PA					
Completed by Title				Treasi	urer	Signat	Dlus		Date 01/18	201	3		

D	0	0	Droi	#	201	3-17
B	à	G	PIO	#	201	2-11

Check # 5729	- 4	63
6 W mg b		-

Date of Notification (1) 01/17/2013			Name of Building Owner/Operator (2) James Kovacs 2013 JAN 23 PM 2: 58									1 1		
	lotification			treet Add	lress st End F	Road								
DEP A	nitial mended mendment #		C	ity, State South O	, Zip Code range, I	e NJ 07079	હેંદ	LIČEN	BIN	G				
DOH JU	mergency (inclu- stification) ancellation	ding	1000	lame of C					Tele	ephone Numb	er			
DCA LL C	ancellation			FACILI	TY INFOR	RMATION	1 100							
Name of Facility Where Abatema James Kovacs Street Address 310 West End Road	ent is Taking Pla	ice (3)					SSS	f Facility (4 chool (K-12 ubchapter l other (i.e. pr tc.)	2) 8 (Othe	er than K-12) & commercial	buildi	ngs, l	nome	s,
City (5) South Orange, NJ 07079							Square		# 01	Floors	Blo	ig. A	ge	
County (6)	<u> </u>			County Co	ode (7) SE ONLY)		Current Use (Prior if being demolished) residential							
Name of Monitoring Firm Hired In/a	by Building Own	er (8)	-	ASCM	No.			ement Contoration,		(9)	S 10			
Street Address						100000	Street Address 105 Ryerson Road							
City, State, Zip Code							City, State, Zip Code Lincoln Park, NJ 07035							
Project Manager for Monitoring		T	Telephon	e No.	Tele	elephone No. License No. 073-696-6869 00378								
Start Date (10) 01/30/2013	heduled		pletion D	ate (11)			A Monitor	Inc.						
Occupancy Status During Abate					7		et Addres	ss on Road						12.1
Facility Closed/Vacated Du Abatement Performed Out Other – Describe:	uring Entire Perio side of Normal F	od of Ab acility h	oatem Hours	ent		City	, State, Zi		7035					
Scope of Work (Check All That	Apply)			·										
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emolit				" Mir	ni-Enclosure	e cedure	h Negative Pr e nd Non-Friabl			e	
		le 1	ocati	on	***		Non-Exempled ( ) and it					Abat	emen	t
Location of Asbestos-Containing Mater TO BE ABATED In Facility (13)	ial (ACM)	Used Mair Custo	ormal I Sole ntenai	ly ly by nce/	Asbest (i.e.	Descript tos Containin thermal syste surfacing, other misce	g Material ems insula VAT, or	ation,	W. 1	Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
main room area	-	103	-110	X		pipe inst	ulation			24 If	Х			
behind the water he	_		X		pipe insi				1/2 If	Х				
												-	$\vdash$	-
Name of Registered Waste Har B & G Restoration, Inc.	H	JDEP W lauler ID 9563		Cubic Yard of Waste		Ţullyto	w Re	tered Landfill source & F		very	Cen	iter		
City, State Lincoln Park, NJ						Disposal D 02/1/201		City, Sta Tullyto						
Completed by Title				Fitle Secretary/Treasurer Signature 01/17/20					fe		2013	3		

-		-	**	004	000
<b>D</b>	0 1	Urai	**	7117	3-05

Date of Notification (1) 01/17/2013		Name of Building Owner/Operator (2), Barry Karger 23 PM 2: 58												
Agencies Notified Type Notification			Street Ad				4 (35), 1			19				
EPA Initial Amended Amendment #				e, Zip Cod ock, NJ	ie '	& Liu	ENGING	1,390		-,				
Emergency (ii justification)  DCA  Emergency (ii justification)  Cancellation	ncluding	1 2	Name of Barry K					Tel	ephone Nun	nber				
			FACIL	ITY INFO	RMATION			1-						
Name of Facility Where Abatement is Taking Barry Karger Street Address	Place (3	)					of Facility (4 School (K-12 Subchapter of Other (i.e. pr	2) 8 (Oth	• er than K-12 & commerci	2) al buile	dinas.	home	es.	
12 Forest Road  City (5) Glen Rock, NJ 07452							etc.) re Feet		f Floors		ldg. A			
County (6) Bergen			County C	ode (7) ISE ONLY)			ent Use (Prio dential	or if be	ing demolish	ned)				
Name of Monitoring Firm Hired by Building Con/a	wner (8)		ASCM	No.		Name of Abatement Contractor (9)  B & G Restoration, Inc.								
Street Address	-		-		0.0000000000000000000000000000000000000	Street Address 105 Ryerson Road								
City, State, Zip Code						City, State, Zip Code Lincoln Park, NJ 07035								
Project Manager for Monitoring Firm	Telephone No.					Telephone No. License No. 973-696-6869 00378								
	Schedule 01/31/2		pletion [	Date (11)	100000000000000000000000000000000000000		HA Monitor storation,	Inc.				,		
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire P Abatement Performed Outside of Normal	eriod of A	Abatem	ent		10 City	, State, Z	on Road							
Other – Describe:					- Lir	ncoln Pa	ark, NJ 07	035						
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf		Renova Demolit				Mi Gl	III Containme ni-Enclosure ovebag Proc on-Exempted	e ædure				e		
	le le	Locati	on								Abat	emen	t .	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normal d Sole intenai todial S (12)	ly ly by nce/		Descript os Containin thermal syste surfacing, other misce	g Materia ems insul VAT, or	ation,	(	Amount Specify F or LF)	Removal	Repair	e Encapsulate	Enclosure	
boiler rm			X		pipe inst	ulation			8 If	Х	1			
storage rm			X	14	pipe insu				6 If	X	T			
electric panel rm			Х		pipe insu			-	1 If	Х		$\vdash$		
boiler rm (above sheetrock ceiling)			X		pipe insu	ulation			6 If	Х	<u> </u>			
Name of Registered Waste Hauler	IN	JDEP W	aste	Cubic Yard		Name of I	Regist	ered Landfil						
B & G Restoration, Inc.			Hauler ID No. of Waste 19563 Tullytow				ullytow Resource & Recovery Center							
City, State Lincoln Park, NJ					Disposal D 01/31/20	13	City, State Tullytov						::	
Completed by Gordana Luna	Title Secre	itle Signature Date 01/17/2013							8					

D&S Proj. #: MS 13-25

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

Name and the second second								74.	No.					
Date of Notification			Name of E	Building Own	er/Operator (	2)								
10 11 1/117			RICHA	RD SHAR	FMAN		2013 JAN 23	PM 2:	50					
Agencies Notified EPA	Type Notifica Initial	ition 3	Street Add	ress								-	_	-
	Amended		44 GRC	OSVENOR	ROAD		A SHE STREET	1000	#14					
☐ DEP	Amendment #			, Zip Code	· Rons		LICEN.	1815	er_		_		_	
☑ DOL	Emergency	- 11		T HILLS, I	NIT 07079									
☑ DOH	(including	l h	lame of C		NJ .01016	_		*	Telephon	o Numbo	_			
☐ DCA	justification	)							relephon	e Numbe	1			
	Cancellatio	n	RICHA	ARD SHA	RFMAN			desco				1		
				FAC	ILITY INFOR	MATION	I				-			
Name of facility wh	ere abatement	is taking pla	ace (3)	Treat of a			The Total	Туре	of Facility (		_	1,000	1	
RICHARD SHA	ARFMAN								=	I (K - 12)				
Street Address								-,		apter 8 (0 Private/0			-12)	
44 GROSVENO	OD DOAD							1000	Bldgs./	Homes, e				
	JK KUAD	I Com	nt. (6)	No. 100 C. 11			<u> </u>	Squa	are Feet	# of Floo	rs	В	dg. A	ge
City (5)		Cou	nty (6)			A STATE OF THE STA	County Code (7) (State use only)  Current Use (Prior if being demolish							
SHORT HILLS	3	FS	SEX			(Sid	te use only)	Curr	ent Use (P	rior if beir	ig den	olish	ed)	
Name of Monitoring		100000			ASCM No.		Name of Abatemen	t Contrac	tor (9)					
Street Address			D & S RESTORATION, INC. Street Address											
0.1.0017.1001000			20 California Ave.											
City, State, Zip Code						_	Zu Cantornia Ave.  City, State, Zip Code							
ony, onato, Esp cour														
Project Manager for	Monitoring Firm	0	I	Phone Numb		_	Paterson, NJ 0	- C. C. C. C. C. C. C. C. C. C. C. C. C.		License	Missel			
r roject manager for	Worldoning I iiii			TIONE NUME	ei		973-345-8020				1169			
Village Server		5.0					Name of OSHA Mo			1 <u>`</u>	110)			_
Start Date (10)		Sched	I. Complet	tion Date (1	1)		D & S Restora							
02/06/13		02/22	2/13			- 1	Street Address	11011, 1110					_	
Occupancy Status D	uring Abateme	nt (Check o	nly one)				20 California A	venue						
	/vacated during						City, State, Zip Code				-		-	
Docoribo	rformed outside		facility hor	urs-										
Other-Describ	e: NORMAL F	HOURS				-1	Paterson, NJ 0	7503						
Scope of Work (che								Full Con	tainment w	/negative	nress	ure		
$\square > 3 \text{ sf or } > 3 \text{ If}$	$\boxtimes$	Renovation	าก					Mini-end		mogativo	proce	uio		
≥160 sf or ≥26		Demolition					$\boxtimes$	Gloveba	g procedur	e				
<u>⊠</u> ≥100 si 0i ≥20	5011							Non-Ex	empted (*)	and Non-	friable I R	_		_
Location of	halmin a		n normaliy enance/cu	/ used solely stodial					Amount		e	R	E n	E
asbestos-cont material (acm)		staff(12)	a Avenue		Descrip		sbestos-containing		(Specify S	For	m	р	С	n
abated in facil		Yes	No	N/A	material	· (AOM)			ĹF)		o v	i	a	Ľ
											е	r	-	-
Basement			LX.				ON & FITTINGS		01ft		M	빌	Ц	븯
Basement					PIPE INS	ULATI	ON & FITTINGS	282	21ft		M	Ц	닏	빝
											Ш	Ш	Ш	Ш
														Ш
9000 V 1000														
Registered Waste Ha D & S RESTORA		NJDE 135	EP Hauler		ubic Yards of yds	Waste	Name of Registered TULLYTOWN		IBCEDE	COVED	v	30 M		7 =
City, State	111011, 1110.			Disposal D			City, State	, 14.500	INOL KE	COTEN				
PATERSON, NJ 07503 02/06/13							TULLYTOWN	I, PA						
Completed by (Print or Type) Title Signature									Date					
BOGDAN JOLDZIC PRESIDENT										01/17/	13			
ASB-41			for asbesto	s licensure e	xempted	activities.		-	1.				-	

### State of NJ

D&S Proj. #: MS 13-21

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

PROSIVED

Date of Notification	6 / 1 3			Building Own	ner/Operator (2)		20	113 JAN 23 1	滑 2: 5	8				
Agencies Notified EPA DEP	Type Notifica Initial Amended Amendment #		Street Address  194 BROWNING AVENUE  City, State, Zip Code											
☑ DOL	Emergency		ELIZA	BETH, N	J 07205									
<b>⊠</b> DOH	DOH (including justification) Name of Contact								ne Numbe	r				
DCA			9											
				FAC	ILITY INFORMA	ATION								
Name of facility v	where abatement	is taking pla	ace (3)			-	Т Т	Type of Facility	(4)	:- 1			-7,0	
MARIA JABI	LONSKI			. 2 5				Scho	ol (K - 12)		han k	(-12)		
Street Address	ING AVENUE			Subchapter 8 (Other than K-12)  Other (Private/Commercial Bldgs./Homes, etc.										
City (5)	ING AVEIVED		nty (6)			Cour	nty Code (7)	Square Feet	eet # of Floors Bldg. A					
ELIZABETH			IION				e use only)	Current Use (Prior if being demolished)						
Name of Monitor	ing Firm Hired by				ASCM No.	П	Name of Abatement	-0.00 No. 0.00 -						
Street Address						_	D & S RESTOR Street Address	ATION, INC.						
Olicet Address							20 California A							
City, State, Zip Co	de					-	City, State, Zip Code	ve.				3		
Project Manager for	or Monitoring Fire		Tr	Phone Numb			Paterson, NJ 07	503						
r roject manager n	or wormoning r im			none Numi	per		Telephone Number 973-345-8020		License	Numl 1169			2022	
Start Date (10)		ISched	Comple	tion Date (1	1)	_	Name of OSHA Monitor							
01/23/13			20	ion bate (1	.,		D & S Restorati	on, Inc.						
Occupancy Status	During Abateme	01/30				_	Street Address							
Facility close Abatement	ed/vacated during performed outside ribe: <u>NORMAL</u> F	entire perion	od of abat	ement. urs-		_	20 California Av City, State, Zip Code Paterson, NJ 07							
Scope of Work (c								Full Containment	w/negativo	proce	uro	_	_	
≥3 sf or >3       ≥160 sf or ≥		Renovation Demolition	1					Mini-enclosure Glovebag procedu Non-Exempted (*)	ıre	-3		edure	1	
Location of asbestos-containing material (acm) to be abated in facility (13)  Is location normal by maintenance/ci staff(12)  Yes No			n normally enance/cu No	ustodial			bestos-containing	Amount (Specify SF or LF)		R e m o v	Repai	E n c a	E n c L	
Basement					DIDE INSHI	ATIO	ON & FITTINGS	108 L FT		е	r	p	<del> </del>	
				#==	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	DA 110	on a minimus	100 L F I				님	냼	
14				1						#	1	片	ዙ	
)		J			1 2					H	H	H	卅	
									1	Ħ			뒴	
Registered Waste D & S RESTOR		NJDE 135	P Hauler 06	(A. (는 A.) ( )	ubic Yards of W 2 YDS	/aste	Name of Registered TULLYTOWN,		ECOVER	Y				
City, State	JI 07503			Disposal D			City, State	5.		77				
PATERSON, NJ 07503 01/24  Completed by (Print or Type) Title BOGDAN JOLDZIC PRESIDENT					Signature		TULLYTOWN,	Date						
ASB-41 * Do not use this form for asbestor					s licensure exer	mpted	activities.		01/16/	13				

4º most

### NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 7:26-2.12)

Date of Notification (1)					Name of Building Owner/Operator (2)									
January 15, 2013					ICL Performance Products EP3 JAN 23									
Agencies Notified		Notification	Туре		Street Address									
(X) EPA	Second   Contract   County (A)   County (B)   County (Code (T) (State Use Only)   County (B)							0						
() DEP							P. 1.	12 12 to	200		100	100		
(X) DOL				ation	City, State, 2	ip Code	We LIC	TAVOLE	1110	1				
(X) DOH		( ) 6466			Carteret N.I	07008		-114	6					
()DCA							Tol No	ımbar						
								· rei. N	uniber	-				
None of Facility Miles - At at				FACILITY II			and the state of	1000						
Name of Facility Where Abat	ement is	Taking Place	3)			and the same of th	A							
ICL Performance Products L														
Street Address								dgs., hom	es, etc.					
500 Bassayali Avanus								•						
	ounty (C)		Lowet	0-1-(7)	Sq. Feet5	3,136 # 0	of Floors	3			- t			
	ounty (6)						130		18					
Carteret	iddlesex		(State t	use Only)		67 years	Sales and							
		0 (0)			Current Use	(prior if beir					1 10			
Name of Monitoring Firm Hire	a by Blac	1. Owner (8)	ASCM	No.		1 1	Name of C	ontractor	(9)					
None							Brandenhu	ra Industr	ial Sen	ice Con	nany			
Street Address				- 1 to 10	Street Addres	ss	Diandenbu	ig illuusti	iai Seiv	ice Con	iparry			
0.4 0.4 7. 0 1														
City, State, Zip Code					City State, Zi	p Code						111111111111111111111111111111111111111		
					Bothlohom D	)onnovilvoni	a 1901E							
Project Manager for Monitorin	na Firm	Telephone	Number			a 10015	License Number							
					Telephone 14			LICETISE	E NUTTO	<u> </u>				
							00721							
Scheduled Start Date (10)				n Date (11)	Name of OSHA Monitor									
November 26, 2012		December 2	20, 2012											
Occupancy Status During Ab	atement /	Check only on	0)				service Compa	ny						
(X) Facility Closed/Vacated D	urina Enti	ire Period of A	batement		Street Addres	<u> </u>								
( ) Abatement Performed Out	side of N	ormal Facility	Hours -		2217 Spillman Drive									
	H (94) (1)		100000000000000000000000000000000000000											
Describe					0.00									
Other - Demo will be perform	ed from 1	2/03/12 thoug	h 03/29/1	4	Pothlohom D		- 10015							
Source of Work (Check all that		2700712 tiloug	11 00/20/10		Bethlehem, P	ennsylvania	18015			-74-				
	Сарріу							1 12		-				
(X) Demolition ( ) Renovati														
(X) Large Proj. (>160 SF or >	260 LF AC	CM) ( ) SM Pr	oj. (>25<1	60 SF or >10 <2	60 LF ACM)	() Minor P	roj. (<25 SF o	<10 LF A	ACM)	7.5		2 .		
( ) Full Containment with Net Location of Asbestos-					ovebag Procedu									
Containing Material (ACM) in		ation Normally by Maint./Cus		Description of thermal system		Amount	(Specify SF or	LF)	Abaten	nent Ty	<u> </u>			
Facility (13)	Staff?		louiai	surfacing, VAT								2 2 2		
, , ,	YES	NO	NA	miscell.)	, or other				Rem.	Rep.	Encap	Enclose		
Bldg. 1,4 & 7			X	Floor Tile (no	n-friable)	715	SF		Х			T		
Bldg. 1 & 4 Roof	in E		X	Roof Mastic (	non-friable)	13,880			Х					
Bldg 1 & 4			Х	Transite Pane	(non-friable)	46 9		177	X					
Bldg 1			X	Brake Shoes			SF		Х					
Name of Reg. Waste Hauler NJDEP Waste H				ID#	Cubic Yards of		Name o	f Reg. I	andfill					
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				(A)			p. Date		٦	., otal	<u> </u>			
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Completed by (Print or Type)		<u>Title</u>		6	Signature	1		<u>Date</u>						
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CO.AMICI CHODGI	-	Contract Adi	mmstrator		701	N		01/15/1:	3		9			
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Mail to: NJDEP-DSHW-BRRTP 401 E. State St., PO 414 Trenton, NJ 08625-0414

Telephone 609-984-6620

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Date of Notification (1)				Name of			Operator	(2) JAN	20/1	1			T	
1/17/13		JOE TASKO MIZISHINE												
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Street Address						-	Street Address 105 Lowell Road							
City, State, Zip Code							City, S	itate, Zip Code I Rock, N.J.						
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Fax:

\* Do rot use this form for asbestos Econsure exempted activities.

Check# 8069 State of New Jersey
NOTIFICATION OF ASSESTOS ABATEMAN, (Pursuant to NJAC 8:50 and 12:120) APPROVED Al Dept/of Beauty & Senior Name of Building Owner/Operator (2) Date of Notification (1) 1/17/13 JOE TASKO Type Nothication Agendes Notified Street Address 2:3 151 Date: Inhal EPA City. State, Zip Code Amended DEP DOL Amendment # Ho Ho Kus-Emergency (including Name of Contact Telephone Number justification) DOH JOE TASKO DGA Cancellation FACILITY INFORMATION Type of Facility (4) Name of Facility Where Absternant is Taking Place (3) TASKO School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, 151 etc.) Square Feet Etdg. Aga # of Floors City (5) 507 County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished RESIDENCE Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) A Mac Contracting Inc. Street Address Street Address 105 Lowell Road City, State, Zip Code City, State, Zip Corie Glen Rock, N.J. 07452 Telephone No. License No. Project Manager for Monitoring Firm Telephone No. 00156 201-262-5841 Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) Omega Environmental Services Inc. 2/17/13 1/17/13 Street Address Occupancy Status During Abatement (Check Only One) 280 Huyler Street Facility Closed/Vacated During Entire Period of Absternent Abalement Performed Cutside of Normal Facility Hours Cliv. State, Zip Code Hackensack, NJ 07606 Other - Describe: Scape of Work (Check All That Apply) Full Containment with Negative Pressure Renovation अई ज से ff Mini-Endosure 2150 sf or 2260 ff Demotition Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure is Location Type Могтайу Description of Location of Used Solely by Amount Asbestos Containing Material (ACM) Asbestos-Containing Material (ACM) Entaperiale (Specify SF or LF) Maintenance! (i.e. thennal systems insulation, Removal Repair TO BE ABATED Custodial Staff? SURFACING, VAT, OF In Facility (12) (12) Yes No NIA 115. LF PIPE INSULATION BUSCHOOT Cubic Yards Name of Registered Landill Name of Registered Waste Haufer M IDCD Whate of Waste Hauter ID No. IESI PA Bethlehem Landfill Corp. Ravic Transport 20785 City, State Disposal Date City, State Bethlehem, PA 18015 1/17/13 Riverdale, New Jersey 07457 Completed by Menuga OPELLEBONS

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Date of Notification (1)		Name of Building Owner/Operator (2)  JEFFERY HOCH BELLS											
1/17/13 Agencies Notified Type Notification	<u> </u>	-	Street Ad		ery Ho	CH REAL	<del>5</del>	-			H. 40	<u> </u>	
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Emergency	including	h	Name of		2,1,1,1,1,1	10 0	0.0	Telep	hone Nu	mber			
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County (6) Brillian		18	County C	ode (7) SE ONLY)			nt Use (Prio	r if being		hed)			-
Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	No.			lement Contracting	tractor (9	3)				
Street Address			L			et Addres 5 Lowel							
City, State, Zip Code						State, Zi	p Code c, N.J. 074	452	The second second second				
Project Manager for Monitoring Firm	T	Telephon	e No.	Tele	phone No 1-262-5	0.		License N	VO.				
Start Date (10)		Completion Date (11) Name				IA Monitor	ntal Se	nvices I	nc.			;	
1/30/13 Occupancy Status During Abatement (Chec			18/13		Stre	et Addres	S						
Facility Closed/Vacated During Entire   Abatement Performed Outside of Norm Other - Describe:	Period of Atmail Facility I	atem fours	ent		City	State, Zi	r Street p Code ck, NJ 07	······································					
Score of Work (Check All That Apply)													
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Completed by	000	- k 11	anachor.	Signat		lon it	^		ate	7/13	2		
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Date of Notification (1)				Name of	Building C		1	2) ENEPET	<del></del>	2013 JAN 2			D.	
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Project Manager for Mo	nitoring Firm		7	Telephon	e No.			one No.		License	No.			
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Start Date (10)		Schedule	d Com	pletion D	ate (11)	1	Name o	of OSHA N	Monitor .					1
1/28/13		9	128	/13					ronment	al Services	inc.			
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Abatement Perform	ned Outside of Non	mal Facility	Hours					ate, Zip C						
Other - Describe:							Hack	ensack,	NJ 0/6	006				
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City, State		-					al Date	100	ity, State	- DA 4004	5			
Riverdale, New Jei	rsey 07457					1/	28/13		seiniene	m, PA 1801				
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Date of Notification (1)  January 18, 2	013			Name of Buildi	-	erator (2) Mander 2013	IAN GAU	-3	116	1	
	itial Noti	fication		Street Address		ath Avenue	MIN ZJ PH	2: 58	}		
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1 DCA	stificatior incellatio			Name of Contac Pau	t l Mander	. %	Telephone Number			}	
			FAC	CILITY INFOR	RMATION						
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Street Address 217 Bath Avenu	ie					[x]	Other (i.e., priva				ilding
City	Cou	nty (6)		County Code (7) (STATE USE O		Square feet 2000 sf	# of Floors		g. Age	50	
Long Branch		nmouth				Current Use (Prior Reside	ence	d)			
Name of Monitoring Firm Hired by Build Guardian Contra				ASCM No.	Name of	Abatement Contracto	r (9) ian Contracting	Inc			
Street Address	icenis, i	ne.			Street A		ian Contracting.	, IIIC.	4	-	-
1889 Rte. 9, Un	it 61						Route 9, Unit 61				
City, State, Zip Code Toms River, NJ	08755				City, Sta	ite, Zip Code Toms	River, New Jers	sey 08	755-1	271	
Project Manager for Monitoring Firm	4	Telephone					License Number				
Nicholas Fernicola Scheduled Start Date (10)			Comple	pletion Date (11) Name of OSHA Monitor			00624				
1/31/13 Occupancy Status During Abatement (Che	ck only r	: 2/4/1	3		Street A		.L. Analytical		-		1
[X] Facility Closed/Vac		70	iod of Al	batement	Buccerr		Stelton Road				
[ ] Abatement Perform	ed Outsid	e of Normal I	Facility F	Hours	City, Sta	te, Zip Code					-
Other – Describe	1			- 10			iway, New Jerse	ey 088	354		
Scope of Work (Check all that apply)					[ ]		t with Negative Pre	essure			
[x] >3 sf or ≥3 lf		[x]	Renova	ation	[ x ]	Mini-Enclosure Glovebag Proces	lura				
[ ] ≥160 sf or ≥260 lf		[ ]	Demol		[ ]		*) and Non-Friable	Proced	ure		
				T				Aba	tement	Туре	
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Basement X				Asbestos pij	e insulatio	n · · · ·	210 lf	X			
		-									
	-										+
Name of Registered Waste Hauler Guardian Contracting, Inc	,	NJDEP Wast			Yards of Was	-	ered Landfill	1		<u> </u>	
City, State			0223 Dispos	sal Date	City, St	T.R.R.F.					
Toms River, New Jersey			2/5/1	3		owń, Pennsylvani	a				
Completed by (Print or Type) Nicholas Fernicola	Title Proj	ect Manage	er	Signature	hol'	le1		Date 1/18	3/2013	3	

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

Dewoh

Date of Notification (1)					Owner / Operator	(2)		3			100		
1/10/2013	Name of Building Owner / Operator (2)  Hess Corporation  Street Address One Hess Plaza  City State & Zin Code												
Agencies Notified Type Notification EPA			: Addre H <b>ess</b> I				" 23 PM 2:	50					
☐ DEP ☐ Initial	1.0	10000011110011110010	State &					7.0	0.00	-			
☑ DOL ☑ Amended R#2-1/18					07095	& j	Les Colon Car	c.,					
☑ DOH ☑ Emergency			of Cor				Telleringtel	epho	ne N	umb	er		
☐ DCA ☐ Cancellation		John	Philb	in									
		FAG	CILITY	Y INF	ORMATION	12.12	200				-		
Name of Facility Where Abatement is Taking Pl	ace (3				Type of Facilit				9 5				
Hess Corporation					School (K								
Street Address	2.7					er 8 (Other tha				١. ١			
615 River Road					Square Feet	# of Floo	mercial buildings,	g. Age		ic.)			
City (5) County (6)	Co	unty (	Code (	7)	- Square reet	# 011100	is Diu	y. Ay	•				
Edgewater Bergen	001	urity (	Joue (	''	Current Use (	Prior if being de	emolished)						
Lugewater					Offices	Thor in Doing do	o.io.io.ay						
Name of Monitoring Firm Hired by Building Own	er (8)		ASC	M No.		ement Contract	tor (9)		*****				
AET Inc.		N 19			Bristol Environmental, Inc.								
Street Address					Street Address								
28 N. Pennell Road			-	-	1123 Beaver	CONTROL DE CONTROL DE CONTROL DE CONTROL DE CONTROL DE CONTROL DE CONTROL DE CONTROL DE CONTROL DE CONTROL DE							
City, State & Zip Code Media, PA 19063					City, State & Z Bristol, PA 1								
Project Manager for Monitoring Firm	Telen	hone	Numb	er	Telephone Nu		License Nur	nber		100-10			
Dave Turotsy	800-				(215)788-604		00509	1		1			
Scheduled Start Date (10) Scheduled Cor			te (11)		Name of OSH								
1/11/2013 Occupancy Status During Abatement (Check or	1/25/2	The state of the s			Street Address	ronmental In	C. :						
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Describe: Facility Occupied During Abatement 7	al Hou	urs –		nt	City, State & Z Bristol, PA 1	Zip Code							
Scope of Work (Check all that apply)						□ Full Cont	tainment with Neg	rotivo	Droc	our.			
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf ≥260 lf		Der	novatio	50	5- E	Mini-End Glove Ba Non-Exe	English and the second second second second second second	riable	Pro	cedu	ıre		
Location of Asbestos-Containing		Locat			Description Asbestos-Cont		Amount (Specify	Aba	tem	ent T	ype		
Material (ACM) TO BE ABATED in Facility (13)	S Main	olely l tenan			Material (AC (i.e., thermal sy insulation, surfact or other miscella	SF or LF)	Removal	Repair	Encapsulate	Enclosure			
Offices	П		X		Floor tile	e	500 SF	M	П	П	$\Box$		
Offices multiple areas			X	Join	t compound asso		800 SF	Ø					
Offices					Mastic		250 SF						
	Ш				12 22 22 2								
Name of Registered Waste Hauler	3	100000	IDEP V auler ID	No.	of Waste	Name of Regis							
Bristol Environmental, Inc. City, State	1:	1870	סנ	20 Disposal Date	City, State	IUIIII			-12				
Bristol, PA				1/16/2013	Morrisville,	PA							
Completed By (Print or Type) Gino Pizzigoni		Title Project Manager			Signature  Line Y								

Date of Notification				Nar	ne of	Buildi	ng Owner / Oper	otor (2)	Of Charles	93	11		
	1/10/2013			He	ss C	orpor	ation	ator (2)	113 JAN 23 /	Da.			
Agencies Notified EPA	Type Notific	cation		Stre	et A	ddress		- // 1	11/12	17 2:	SR		
☐ DEP						ss Pla			2 1 20 00.		- 6		
■ DOL	⊠ Initia			City	, Sta	te & Zi	p Code		& LICCH3II	1:178	1	-	
Ø DOH		ended R#1-1/14/	13	Wo	odb	ridge,	NJ 07095	2.5	703//	1G	1.		
DCA		ergency		100000000000000000000000000000000000000		Conta	ct			Teleph	one	Num	nber
		Cellation		Jor	in P	hilbin			( )		-9		_
A1			4	F	ACIL	ITY II	NFORMATION				- 10		
Name of Facility White Hess Corporation	nere Abatem	ent is Taking Pla	ce	(3)			Type of Fa			-		-	
Street Address	n		2				School	l (K-12)					
615 River Road							Subch	apter 8 (Other th	nan K-12)				
O 13 KIVEL KOAU								(i.e. private & co	mmercial buildin	gs, hor	nes,	etc.	)
City (5)		County (C)	T =				Square Fe	et # of Flo		3ldg. Ag			
Edgewater		County (6)	C	ounty	/ Cod	le (7)							
Lugewater		Bergen						e (Prior if being	demolished)				
Name of Monitoring	Eirm Hirad b	Dulleline O	1				Offices						
AET Inc.	riiiii niied L	by Building Owne	r (8	)	A	SCM N		batement Contra	ctor (9)				
Street Address							Bristol Er	nvironmental,	Inc.	£ .			
28 N. Pennell Roa	ıd						Street Addr			5 50			
City, State & Zip Coo				-			1123 Bear						X 20
Media, PA 19063							City, State of Bristol, Pa						
Project Manager for	Monitoring F	irm T	ele	phon	e Nu	mber	Telephone		License N	la comp la para			
Dave Turotsy		8	00-	969	6AE	Γ	(215)788-6		00509	umber			
Scheduled Start Date		Scheduled Comp	leti	on Da	ate (1	11)		SHA Monitor	100000		-		
1/11/2013	The state of the s	1/	16/	2013	3			vironmental l	nc.				
Occupancy Status D	uring Abater	nent (Check only	on	e)			Street Addr	ess			-		
	orformed O	Ouring Entire Per	lod	of At	oaten	nent	1123 Beav	er Street					
Describe:	enormed Ot	itside of Normal	Ho	urs –			City, State 8	Zip Code			1	_	
	nied During	Abatement 7 Al		- 2.2			Bristol, PA	19007					
Scope of Work (Chec	k all that an	plv)	A1 F	0 3.3	O PI	VI							
								□ Full Cor	doinmantith ti		_		
≥3 sf or ≥3 lf			X	Re	nova	tion		Mini-En	ntainment with No	egative	Pre	ssure	е
≥160 sf ≥260	lf			De	moliti	on .			ag Procedures				
	2								empted and Non-	-Friable	Pro	المما	ure
	ation of s-Containing			Local			Description	on of	Amount				Гуре
	ial (ACM)	N		nally		100	Asbestos-Co	ntaining	(Specify	-		-	T
TO BE	ABATED	M	aini	olely tenar	Dy Dy		Material (A	ACM)	SF or LF)	7,		Ē	П
in f	acility	Ci	usto	dial	Staff"	2	(i.e., thermal sinsulation, surfa			en	Repair	cap	Enclosure
	(13)			(12)			or other miscel			Remova	air	Encapsulate	Sur
		Ye	es	No	N/A					-		ite	0
Offices							Floor ti	le	500 SF		П	П	1
offices multiple ar	eas	·				Joi	nt compound ass	oc. with sheet	800 SF	X	H	片	片
ffices		——————————————————————————————————————	7	П	Ø	+	rock						L
			╡┼	+	H	+	Mastic	;	250 SF				
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ame of Registered V	Vaste Haule		1	NI	DED	Wasta	Cubic Yards	Nome -(D					
3				Ha	uler I	D No.	of Waste	Name of Regis	stered Landfill				
ristol Environmer	ntal, Inc.				187		20	GROWS Lan	dfill				
ty, State							Disposal Date	City, State	willi				
ristol, PA							1/16/2013	Morrisville, I	PA				
Completed By (Print or Type)								Cionatura					
Gino Pizzigoni					Project //					Date 1/11/	12		
				Ma	nag	er	Jeno Teg	zegone		1/1/1/	13		

State of New Jersey APPROVED: TOM VOORHEES, NOTIFICATION OF ASBESTOS ABATEMENT + NJ DOH NJ (Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification (	1/10/2013		N	lame o	of Building	Owner / Op	erator (2)	23 PM 2:58	20	<u> </u>		
	Type Notification			1622 (	-orporat	ion	A. James	PM 2. ~				
I EPA	, , , , , , , , , , , , , , , , , , , ,				ddress	10 12	9.474	0.08	}	-		
DEP			C	ity St	ess Plaza ate & Zip (	<u>a</u>	& L/C	1. Sarry				
Ø DOL	☐ Amended		M	loodi	oridge, N	-00e		"HOLAIN HOL				
Ø DOH			N	ame o	f Contact	J 07095						
☐ DCA	Cancellation				hilbin				Tele	phon	e Nu	mbe
Name of Facility Whe	ro Abeter 1: 5			FACI	LITY INF	ORMATIO	N					
Name of Facility Whe Hess Corporation	re Abatement is Tak	ing Pla	ce (3)			Type of I	acility (4)			_		
Street Address		1-1				Sch	ool (K-12)					
615 River Road						☐ Sub	chapter 8 (Other	than K-12)				
						Othe	er (i.e. private &	commercial build	ings. h	ome	s. etc	:)
City (5)	County (	8)	ICaura	4.0	. (=)	Square F	eet # of	Floors	Bldg.	Age	-,	/
Edgewater		٥,	Cour	ity Co	de (7)					.5-		
	Bergen					Current L	Ise (Prior if being	g demolished)				
Name of Monitoring Fi	rm Hired by Building	0	(0)			Offices						
AET Inc.	rimed by building	Owner	(8)	A	SCM No.	Name of	Abatement Cont	ractor (9)				
Street Address						BLISTOLE	nvironmental	l, Inc.				
28 N. Pennell Road						Street Ad	dress					_
City, State & Zip Code						1123 Be	aver Street					
Media, PA 19063	At 100 C					City, State	& Zip Code					
Project Manager for Mo	onitoring Firm	ĪΤε	elepho	ne Nu	mher	Tolonham	PA 19007					
Dave Turotsy		80	0-969	96AE	r	Telephone (215)788	Number	License	Numbe	er		
Scheduled Start Date (	10) Scheduled	Compl	etion [	Date (1	11)	Name of C	SHA Monitor	00509				3
1/11/2013		1/1	6/201	3	.,	Bristol E	nvironmental	•				
ccupancy Status Duri	ng Abatement (Chec	k only	one)			Street Add	rece	inc.				
Facility Closed/	Vacated During Enti	re Perio	od of A	baten	nent		ver Street					
Describe:	formed Outside of N	ormal I	Hours	_		City, State	& Zip Code					
CONTRACTOR CONTRACTOR	JD					Bristol, P	A 19007					
cope of Work (Check	d During Abatement	7 AM	to 3:	30 PM	A							
cope of vacin (offect)	ан инастарруу)				The second							
≥3 sf or ≥3 lf			i D.				☐ Full Co	ontainment with N	legativ	e Pre	essur	•
≥160 sf ≥260 If			122	enovat			Mini-E	nclosure			,55ui	-
		_	1 06	emoliti	on		☐ Glove	Bag Procedures				
Location	on of	1 1	s Loca	dia n		<u> </u>	Non-Ex     No	cempted and Nor	ı-Friabl	e Pro	ocedi	ure
Asbestos-C	ontaining			Used		Descripti	on or	Amount				Гуре
Material			Solely		1	Asbestos-Co Material (	ontaining	(Specify		T	T	T
TO BE A		Ma	intena	nce or	1 (	i.e., thermal	ACIVI) sveteme	SF or LF)	20		m	m
in Fac (13		Cus		Staff?	ins	ulation, surf	acing, VAT		lem	Repair	3	nc
(13	,	V	(12)		or	other misce	ellaneous)		Removal	Pair	Encapsulate	Enclosure
fices		Yes	No						-		ate	9
		14				Floort	ile	500 SF				-
fices multiple areas	5				Joint co	ompound as	soc. with sheet	800 SF		1	H	H
		10	1	1		rock		000 SF		П	ш	
		+ $+$ $+$	+#	+#-						П		
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ne of Registered Was	te Hauler	111	INI	DED	M4 15				市	H	H	H
			Ha	DEP V		bic Yards	Name of Regi	stered Landfill			<u> </u>	<u> </u>
vice Transport Inc.			110	2099		Waste						
, State				2000		20	GROWS Lai	ndfill				
w Castle, Delaware						posal Date	City, State					$\neg$
npleted By (Print or Ty	pe)		Titl	0		/16/2013	Morrisville,	PA				
no Pizzigoni				e oject		nature		1	Date			-
				nage	, X	kno /4	Brown	1-1	1/11/	13		

### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

01 / 13				Nam	e of Buildir	g Owner/Operator (	2)	Prom.	17 11			
01 / 13	8 , 1	3		1	ph Buda							
Agencies Notified Ty	pe Notification	1	- 1- 1		et Address			JAN 23 PM	2.5	^		
	Initial			396	Walnut St	reet		-0 111	2.0	8		
	] Amended				State, Zip		<u>A 470.</u>		144 TA 25	1		-
☑ DHSS	Amendment [ ] Emergency (		_		ewood, N			& LICENSIN	方式を	L		
(NJAC 5:23-8)	justification)	nciuun	g		e of Contac			Telephone Nur	mber	-		
	] Cancellation			Josei	oh Buda							
		-				NFORMATION						
Name of Facility Where Abat	tement is Takir	ng Plac	e (3)		70.00	TO THE PERSON NAMED IN COLUMN	Type of Facilit	v (4)		-		
Private house		, and	production of the contract of				School (K-	*				
Street Address							Subchapter	8 (Other than K-1	2)			
396 Walnut Street							Nomes, etc	private and comme	ercial b	uildin	gs,	
City (5)		7 - 1		-			Square Feet	# of Floors	TE	Bldg. A	ne	
Englewood, NJ 07631									"	nag. /	·gc	
County (6)				Cou	inty Code (7)	(STATE USE ONLY)	Current Use (F	Prior if being demoi	lishedì		-	
Bergen												
Name of Monitoring Firm Hire	ed by Building	Owner	(8)	ASCN	I No.	Name of Abateme	L ent Contractor (	9)		-	-	
						Gr Tech LLC		,				
Street Address						Street Address				-		
1						576 Valley Rd #	283					
City, State, Zip Code			-			City, State, Zip Co						
						Wayne, NJ 0747						
Project Manager for Monitoring	ng Firm		Tel	ephone	No.	Telephone No.		License No.				
			1.			973-638-1777		01127				
Start Date (10)					ate (11)	Name of OSHA M	lonitor	101127	-			
01 / 27 / 1	3			_	1000000							
- Here		01	2	8 /	13	Envirovision Co	ncultante Ino					
Occupancy Status During Abo	atement (Chec	k only	one)			Envirovision Co Street Address	nsultants,Inc					
Occupancy Status During About Facility Closed/Vacated D	atement (Checuring Entire Po	k only	one) Abate	ement		Street Address		244				
Occupancy Status During About Market During About Market During Abatement Performed Out	atement (Checuring Entire Potside of Norma	k only eriod of	one) Abate	ement	scribe		Road, Bldg .#	34A		9.		
Occupancy Status During Aba  Facility Closed/Vacated D  Abatement Performed Out  Time of Abatement:	atement (Checuring Entire Potside of Norma	k only eriod of	one) Abate	ement		Street Address 20-21 Wagaraw City, State, Zip Co	Road, Bldg .#	34A		2.		
Occupancy Status During About Management Performed Out	atement (Checuring Entire Potside of Norma	k only eriod of	one) Abate	ement	scribe	20-21 Wagaraw City, State, Zip Co Fair Lawn, NJ 0	Road, Bldg .# ode 7410					
Occupancy Status During About Facility Closed/Vacated D Abatement Performed Out Time of Abatement:	atement (Checuring Entire Potside of Norma	k only eriod of l Facilit	one) Abate y Hou PM	ement rs - De	scribe	20-21 Wagaraw City, State, Zip Co Fair Lawn, NJ 07 Clean up Full Cont	Road, Bldg .# ode 7410 and decontami					
Occupancy Status During About Facility Closed/Vacated D Abatement Performed Out Time of Abatement:  Scope of Work (Check all that States are said to be sa	atement (Checuring Entire Potside of Norma	k only eriod of I Facilit M/	one) Abate	ement rs - De	scribe	20-21 Wagaraw City, State, Zip Co Fair Lawn, NJ 07 Clean up Full Cont Mini-Encl	Road, Bldg .# ode 7410 and decontami ainment with Ne	ination				
Occupancy Status During About Facility Closed/Vacated D Abatement Performed Out Time of Abatement:  Scope of Work (Check all that States are said to be sa	atement (Checuring Entire Potside of Norma	k only eriod of I Facilit M/	one) Abate ty Hou PM	ement rs - De	scribe	Street Address  20-21 Wagaraw City, State, Zip Co Fair Lawn, NJ 07  Clean up Full Cont Mini-Encl Glovebac	Road, Bldg .# ode 7410 and decontami ainment with Ne osure	ination egative Pressure	ure			
Occupancy Status During About Facility Closed/Vacated D  Abatement Performed Out Time of Abatement:  Scope of Work (Check all that ≥ 3 sf or >3 lf  ≥ 160 sf or ≥260 lf	atement (Checuring Entire Potside of Norma	ck only eriod of If Facilit IM/	Abate y Hou PM enovate s Loca	ement rs - De ion on	scribe	Street Address  20-21 Wagaraw City, State, Zip Co Fair Lawn, NJ 07  Clean up Full Cont Mini-Encl Glovebac	Road, Bldg .# ode 7410 and decontami ainment with Ne osure	ination		patem	ent T	VDE
Occupancy Status During About Facility Closed/Vacated D Abatement Performed Out Time of Abatement:  Scope of Work (Check all that > 3 sf or > 3 if	atement (Chec uring Entire Po tside of Norma AMF t apply)	k only eriod of Il Facilit IM/ Re	Abate y Hou PM enovate emolities Local	ement rs - De ion on	scribe _AM	Street Address  20-21 Wagaraw City, State, Zip Co Fair Lawn, NJ 07  Clean up Full Cont Mini-Encl Glovebag Non-Exer	Road, Bldg .# ode 7410 o and decontami ainment with Ne osure p Procedure mpted (*) and N	ination egative Pressure on-Friable Procedu	At	patem	1	T
Occupancy Status During About Facility Closed/Vacated D Abatement Performed Out Time of Abatement:  Scope of Work (Check all that >3 sf or >3 if	atement (Checuring Entire Potside of Norma AM- Formation of AM-Formation of Americal (ACM)	Re Use	Abate y Hou PM enovat emolities Local Normal	ement rs - De ion on tion illy ely by	scribe _AM	Street Address  20-21 Wagaraw City, State, Zip Co Fair Lawn, NJ 07  Clean up Full Cont Mini-Encl Glovebag Non-Exer  Description of stos Containing Mat	Road, Bldg .# ode 7410 o and decontami ainment with Ne osure g Procedure mpted (*) and N	ination egative Pressure on-Friable Procedu Amount	At	1	1	Ť
Occupancy Status During About Facility Closed/Vacated D Abatement Performed Out Time of Abatement:  Scope of Work (Check all that >3 sf or >3 if	atement (Checuring Entire Potside of Norma AM- Formation of AM-Formation of Americal (ACM)	Re Use	Abate y Hou PM enovat emolities Local Norma ed Sole intenat todial	ement rs - De ion on tion illy ely by	scribe _AM	Street Address  20-21 Wagaraw City, State, Zip Co Fair Lawn, NJ 07  Clean up Full Cont Mini-Encl Glovebag Non-Exer  Description of stos Containing Mat L, thermal systems in surfacing, VAT,	Road, Bldg .# ode 7410 o and decontami ainment with Ne osure g Procedure mpted (*) and N  f erial (ACM) nsulation, or	ination egative Pressure on-Friable Procedu	At	patem	1	Ť
Occupancy Status During About Facility Closed/Vacated D Abatement Performed Out Time of Abatement:  Scope of Work (Check all that >3 sf or >3 if	atement (Checuring Entire Potside of Norma AM- Formation of AM-Formation of Americal (ACM)	Re Use Ma	Abate y Hou PM enovat emolities S Loca Norma ed Sole intena todial (12)	ement rs - De ion on tion illy ely by ince/ Staff?	scribe _AM	Street Address  20-21 Wagaraw City, State, Zip Co Fair Lawn, NJ 07  Clean up Full Cont Mini-Encl Glovebag Non-Exer  Description of stos Containing Mat	Road, Bldg .# ode 7410 o and decontami ainment with Ne osure g Procedure mpted (*) and N  f erial (ACM) nsulation, or	ination egative Pressure on-Friable Procedu  Amount (Specify		1	en Encapsulate	уре
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Occupancy Status During Above Facility Closed/Vacated D Abatement Performed Out Time of Abatement:  Scope of Work (Check all that > 3 sf or >3 if > 160 sf or >260 if  Location of Asbestos-Containing Mate TO BE ABATED IN Facility (13)	atement (Checuring Entire Potside of Norma AM- Formation of AM-Formation of Americal (ACM)	Re Cus	Abate y Hou PM enovat emolities S Loca Norma ed Sole intena todial (12)	ion on tion on Staff?	Asbe (i.e	Street Address  20-21 Wagaraw City, State, Zip Co Fair Lawn, NJ 07  Clean up Full Cont Mini-Encl Glovebag Non-Exer  Description of stos Containing Mat L, thermal systems in surfacing, VAT, other miscellaneo	Road, Bldg .# ode 7410 o and decontami ainment with Ne osure g Procedure mpted (*) and N  f erial (ACM) nsulation, or	on-Friable Procedu Amount (Specify SIF or LF)	Removal	1	1	Ť
Occupancy Status During About Time of Abatement Performed Out Time of Abatement:  Scope of Work (Check all that >3 sf or >3 if	atement (Checuring Entire Potside of Norma AM- Formation of AM-Formation of Americal (ACM)	Re Use Ma Cus	Abate y Hou PM enovat emolities S Loca Norma ed Sole intena todial (12)	ement rs - De  ion on tion nilly ely by ance/ Staff?	Asbe (i.e	Street Address  20-21 Wagaraw City, State, Zip Co Fair Lawn, NJ 07 Clean up Full Cont Mini-Encl Glovebag Non-Exer  Description of stos Containing Mat thermal systems in surfacing, VAT, other miscellaned	Road, Bldg .# ode 7410 o and decontami ainment with Ne osure g Procedure mpted (*) and N  f erial (ACM) nsulation, or	egative Pressure on-Friable Procedu  Amount (Specify SIF or LF)	Removal	1	1	Ť
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### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

MO# 20613906641		(	Purs	suant 1	to NJAC	8:60 and 5:16)		to good green				
Date of Notification (1)			- 1	lame of	Building C	wner/Operator (2)		123 PM 2:	7			1
01 /	18 / 13				e Dresch		2017 100		f).			- !
Agencies Notified	Type Notification				ddress		JAP	123 PM 2.		-		
EPA	☑ Initial		3	04 Lin	coln Ave	nue	A THE O	٠, ٤٠,	9			
<b>⊠</b> DOLWD	Amended				te, Zip Co		211	CENSING				
□ DHSS     □	Amendment #_		1		d Park, N		GE LI	CENSTAR	L			1
☐ DCA	Emergency (inclination)	luding			f Contact	3 00704		Telephone Numb	er			
(NJAC 5:23-8)	Cancellation		. 1	eannin	e Dresch							
			]3			ORMATION						
Name of Facility Where	Abetement is Taking	Place /	31	- FAU		OKINATION	Type of Facility (	4)				-
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Private house							Subchapter 8	(Other than K-1 2) ivate and commer	cial buil	dinas		
Street Address							homes, etc.)	ivate and commer	ciai buii	umga		
304 Lincoln Avenue					·		Square Feet	# of Floors	Bld	g. Ag	e	
City (5)	2001											
Highland Park, NJ 08	3904			County	Code (7) (5	STATE USE ONLY)	Current Use (Pri	or if being demolis	shed)			-
County (6)				County	0000 (1) (1			273				
Middlesex Name of Monitoring Fir	m Hired by Building C	Wner (8	3 17	ASCM N	lo T	Name of Abateme	ent Contractor (9)			-	-	
Name of Workoming in	mirmed by banding c	Attion to	'	100111	10000	Gr Tech LLC						
Otto Address						Street Address					<del></del>	
Street Address						576 Valley Rd #	£283				-	
0: 0: - 7: 0 - 4						City, State, Zip C						
City, State, Zip Code						Wayne, NJ 074'	1002					
Project Manager for M	onitoring Eirm		Tolo	phone h	vio.	Telephone No.	70	License No.				
Project Manager for Mi	ornioning rain		1616	priorie		973-638-1777		01127				
Start Date (10)	Scheo	luled Co	i .	tion Dat	e (11)	Name of OSHA	Monitor	101.121				
		)1 /			200	r iisiaa Ca	and Itanta Inc					
Occupancy Status Dur						Envirovision Co Street Address	onsultains, inc					_
☐ Status Dur				ment		20-21 Wagaraw	Pood Bldg #	31Δ				
☐ Abatement Perform					cribe	City, State, Zip C		34N				100
Time of Abatement	:P	M/	PM_		AM	Fair Lawn, NJ (						
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>3 sf or >3 if > 160 sf or >260 if		Ren	novati molitic	on ·			closure ag Procedure					
≥ 160 st or ≥260 it		☐ Del	MOHER	)n		Non-Ex	empted (*) and N	on-Friable Proced	ure	<u>.</u>		
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Name of Registered V	Vaste Hauler		N	DEP Wast	e Hauler ID No	Cubic Yards of Wa	ste Name of Reg	istered Landfill				
Gr Tech LLC		2		00337	85	TBD	T.R.R.F. Inc	1				
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Wayne, NJ 07470 Completed By (Print of	or Type) Tit	le .			-	Signature	7		Date	- 0.00		
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ASB-41				1 6	, ,	1/	and a dimition					

Ocean USE ONLY					m	Check #733	7			,			
DDEP			H. Martin Grasmeder										
Name of Contact   Martin Grasmeder   Telephone Number   Scheduled Start Date (10)   Scheduled Start Date (10)   Scheduled Start Date (10)   Scheduled Start Date (10)   Scheduled Start Date (10)   Scheduled Start Date (10)   Scheduled Start Date (10)   Scheduled Start Date (10)   Scheduled Start Date (10)   Scheduled Start Date (10)   Scheduled Start Date (10)   Scheduled Start Date (10)   Scheduled Start Date (10)   Scheduled Concepting Status During Abatement (Check only one)   Street Address   Street Address   Street Address   Street Address   Scheduled Start Date (10)   Scheduled Completion Date (11)   Spatial Start S	EPA EMERGENCY DEP	5115 S	ugar Hill Co	<b>ourt</b>	2013 JAN 23	PM 2:58							
Martin Grasmeder   FACILITY INFORMATION	DOH Amended Amendment #			18902	1021		ephone	e Nu	nbei	r			
Name of Facility Where Abatement is Taking Place (3)  Residence  Street Address  1072 Jennifer Lane  Other (i.e., private & commercial buildings, home, etc.)  Square Feet # of Floors   Bldg. Age   1,438   2   58 years    Current Use (Prior if being demolished)   Residence  County (6)   County Code (7)   USE ONLY    Name of Monitoring Firm Hired by Building Owner (8)   ASCM No.   Name of Abatement Contractor (9)   Synatech, Inc.  Street Address   Street Address									1				
Residence  Street Address  1072 Jennifer Lane  City (5)  Manahawkin  County (6)  Ocean  County (7)  INSE ONLY  ASCM No.  Street Address  City, State & Zip Code  City, State &		FAC	CILITY IN	FORMATION									
Other (i.e., private & commercial buildings, home, etc.)  Square Feet # of Floors   Bidg. Age   1,438 2 58 years  Manahawkin   Current Use (Prior if being demolished)   Residence   County (6)   County Code (7)   USE ONLY   Name of Monitoring Firm Hired by Building Owner (8)   ASCM No.   N/A   Street Address   Street Address   City, State & Zip Code   City, State & Zip Code   City, State & Zip Code   City, State & Zip Code   Little Egg Harbor, NJ 08087   Project Manager for Monitoring Firm   Telephone Number   Scheduled Start Date (10)   Scheduled Completion Date (11)   January 22, 2013   February 1, 2013   February 1, 2013   Street Address   St	sidence	(3)		School	(K-12)	K 12)							
Manahawkin  Current Use (Prior if being demolished) Residence  County (6) Ocean  County Code (7) USE ONLY  Name of Monitoring Firm Hired by Building Owner (8) N/A  Street Address				Other	(i.e., private & co	ommercial buildings		e, e	c.)				
Ocean     USE ONLY       Name of Monitoring Firm Hired by Building Owner (8)     ASCM No.     Name of Abatement Contractor (9)       N/A     Synatech, Inc.       Street Address     Street Address       829 Radio Road       City, State & Zip Code     City, State & Zip Code       Little Egg Harbor, NJ 08087       Project Manager for Monitoring Firm     Telephone Number     License Number       609-296-6916     00817       Scheduled Start Date (10)     Scheduled Completion Date (11)     Name of OSHA Monitor       January 22, 2013     February 1, 2013     Synatech, Inc.       Occupancy Status During Abatement (Check only one)     Street Address       Facility Closed/Vacated During Entire Period of Abatement     829 Radio Road	nahawkin		and i	Current Use	(Prior if being den	_	58	yea	rs				
N/A Street Address Street Address Street Address Street Address 829 Radio Road City, State & Zip Code City, State & Zip Code Little Egg Harbor, NJ 08087  Project Manager for Monitoring Firm Telephone Number Foog-296-6916 City, State & Zip Code Little Egg Harbor, NJ 08087  Telephone Number Foog-296-6916 City, State & Zip Code Little Egg Harbor, NJ 08087  Telephone Number Foog-296-6916 Congress Street Address Synatech, Inc.  Street Address Synatech, Inc. Street Address													
Scheduled Start Date (10) January 22, 2013  Scheduled Completion Date (11) January Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement  Scheduled Start Date (20) Scheduled Start Date (10) Scheduled Completion Date (11) Scheduled Completion Date (11) Scheduled Completion Date (11) Scheduled Completion Date (11) Scheduled Completion Date (11) Scheduled Completion Date (11) Scheduled Completion Date (11) Scheduled Completion Date (11) Scheduled Completion Date (11) Scheduled Completion Date (11) Scheduled Completion Date (11) Scheduled Completion Date (11) Scheduled Completion Date (11) Scheduled Completion Date (11) Scheduled Start Date (10) Scheduled Start Date (10) Scheduled Start Date (10) Scheduled Start Date (10) Scheduled Start Date (10) Scheduled Start Date (10) Scheduled Start Date (10) Scheduled Completion Date (11) Scheduled Start Date (10) Scheduled Start Date (10) Scheduled Start Date (10) Scheduled Start Date (10) Scheduled Start Date (10) Scheduled Completion Date (11) Scheduled Start Date (10) Scheduled Star		3)	ASCM No	Synatech, I	nc.	or (9)		19		1			
Scheduled Start Date (10)  January 22, 2013  Occupancy Status During Abatement (Check only one)  Facility Closed/Vacated During Entire Period of Abatement  Scheduled Completion Date (11) Synate of OSHA Monitor Synatech, Inc.  Street Address 829 Radio Road	, State & Zip Code			829 Radio Road City, State & Zip Code									
January 22, 2013 February 1, 2013 Synatech, Inc.  Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 829 Radio Road	ject Manager for Monitoring Firm	Telephone N	lumber			License Numl		,					
Facility Closed/Vacated During Entire Period of Abatement  829 Radio Road	January 22, 2013 F	ebruary 1, 201		Synatech, I	nc.			-63					
Other – Describe: Little Egg Harbor, NJ 08087 Facility Occupied During Abatement	Facility Closed/Vacated During Entire Perio Abatement Performed Outside of Normal I Other – Describe:	d of Abatemen	nt	829 Radio F City, State 8	Road Zip Code								
Scope of Work (Check all that apply)  ☐ Full Containment with Negative Pressure ☐ ≥3 sf or ≥ 50 lf ☐ Renovation ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted(*) and Non-Friable Procedure ☐ Location of	≥3 sf or ≥ 50 lf ☑ ≥160 sf or ≥260 lf	Demolitio	n	Descrip	Mini-Enclosure Glovebag Proce Non-Exempted	edure	ocedur	-	ent 1	Гуре			
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility  Solely by Maintenance or Custodial Staff? (12)  Custodial Staff? (12)  (i.e., thermal systems	Asbestos-Containing Material (ACM) Sol	ely by Mainten	ance or	Asbestos-0 Material	Containing (ACM)								
(13)  insulation, surfacing, VAT or other miscellaneous)  Yes No N/A	(13)	es No	N/A	insulation, su	rfacing, VAT		Removal	Repair	Encapsulate	Enclosure			
Exterior X Asbestos-containing siding 950 SF X	erior	х		Asbestos-con	taining siding	950 SF	X			T			
Name of Registered Waste Hauler NJDEP Waste Hauler ID No. Sakoutis Brothers Disposal City, State  Name of Registered Landfill Cubic Yards of Waste Hauler ID No. 21243  Disposal Date  Cubic Yards of Waste Cubic Yards of Waste Name of Registered Landfill City, State	koutis Brothers Disposal	iler ID No.	2	Grows Landfill									
Colts Neck, NJ  Completed By  Diane Aloia  February 15, 2013  Morrisville, PA  Signature  Lace Universal Signature  January 18, 2013	mpleted By Title	cictant		1		Date		100					

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) 13 Motiva Enterprises LLC 01/ 21 Street Address Agencies Notified Type of Notification 111 State Street City, State, Zip CodeZUIJ JAN 23 **EPA** Initial DEP Amended Sewaren, NJ 07077 П 7 DOH Amendment # Name of Contact Telephone Number 7 Emergency w/ justification DOL Dina Breeden Cancellation **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Motiva Enterprises School (K-12) Street Address Subchapter 8 (Other than K-12) Other (I.e., private & cmmercial 111 State Street 1 bldgs., homes, etc.) City (5) County (6) County Code (7) Square Feet # Of Floors **Building Age** Sewaren Middlesex 155,000 40+ Current Use (Prior if being demolished) OFFICE/RESEARCH Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM NO Name of Abatement Contractor (9) Sabre Health and Safey LVI Environmental Services Inc. Street Address Street Address 1430 BROADWAY City, State, Zip Code 462 Getty Avenue NEW YORK, NY 10018 City, State, Zip Code Project Mngr. For Monitoring Firm Telephone Number Bert Altemose 908-320-7998 Clifton, NJ 07011 Sched. Completetion Date (11) Telephone Number License Number 02 13 973-772-3660 00117 Occupancy Status During Abatement (Check Only 1) Name of OSHA Monitor Facility Closed/Vacated During Entire Period of LVI Environmental Services Inc. **A** hatement Street Address Abatement Performed Outside of Normal Facility Hours - Describe: 462 Getty Avenue Other - Describe: MON-FRI City, State, Zip Code 7:00AM-3:00PM Clifton, NJ 07011 Scope of Work (Check All That Apply) Demolition Renovation 1 1 Full Containment with Negative Pressure >3sf or >3lf Mini - Enclosure 7 ≥160 sf or ≥260 lf Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Location of Description of Abatement Type Asbestos Containing Location Asbestos - Containing R Material (ACM) Normally Material (ACM) Amount E R N N TO BE ABATED Used (i.e., thermal systems E C C (Specify M in Facility Solely insulation, surfacing, VAT, SF or LF) 0 P by Mainor other miscellaneous) V 0 (13)Α s s tenance/ A 1 Custodial U R Staff (12) YES NO N/A Main office Floor tiles and Mastic 1,500 V NJDEP Waste Cubic Name of Registered Waste Hauler Name of Registered Landfill EQ Northeast Hauler ID No. Yards Grows, Inc. of Waste City, State Disposal City. State 185 Industrial Road, Wrentham, MA Date Morrisville, PA 19067 Completed by (Print or Type) Date Ralph Barnhardt Operation Manager 01/21/13

ASB-41

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

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Date of Notification (1	1) / 13	3			Building Own		rator (2)				
$\frac{-01/}{21}$	/			Street Ac			Con Ch. Amb				
		otification		111 State			$f_{-}^{*}(\bigvee f_{-}^{*})$	17			
☐ EPA DEP	<b>7</b>	Initial Amended		City, Stat	te, Zip Code						
☑ , DOH		Amendment #	#	Name of	NJ 0707 <b>7</b> 013 Contact	JAN 2	3 PM 2	Telepho	one Numi	ber	
DOL DOL		Emergency w Cancellation		Dina Bre	eden <sup>°</sup>		_				- "
			F	ACILITY IN	NFORMATION	& Lici	MEING	No.			
Name of Facility Whe	re Abatem	ent is Taking			Type of Faci			- ,		5.7	
Motiva Enterprises						chool (K	-12)				
Street Address					-	100	er 8 (Other	than K-1	(2)		
909 Delaney Street							, private &	cmmerc	ial		
City (5)	County (6		County Code	(7)	Square Feet		mes, etc.) # Of Floor	s	Buildir	ng Age	
	Exssex				155,00	00	8	3		40	+
					Current Use	•	being dem	olished)			
Name of Monitoring F	irm Hired	by Bldg Own	er (8)	IASCM NO	OFFICE/RES		Contractor	(9)			
Traine or mornioning r	mm mod	a, blug. own	o. (o)	, com tro	Trumo or Albe	atomont	Contidotor	(0)			
Sabre Health and Safe	У				LVI Environm		rvices Inc.				
Street Address 1430 BROADWAY					Street Addre	ess					
City, State, Zip Code		60			462 Getty Av	enue					
NEW YORK, NY 10018			y and the same		City, State, Z	Zip Code					
Project Mngr. For Mo Bert Altemose	nitoring Fi	irm	Telephone Nu 908-320-7998	mber	Clifton, NJ 0	7011					
Delt Alternose		Sched. Comp	letetion Date (1	11)	Telephone N			License	Number	-	
_02 / _04 /	/13	_02/		13						0.0000	
Occupancy Status Du		omant (Chack	Only 1)		973-772-		tor			00117	
		ted During Ent			LVI Environm						
Abatement	:				Street Addre	ess					
Abatement		d Outside of N	lormal Facility		462 Cotty Av	ODUO					
Other - Des		MON-FRI			462 Getty Ave City, State, Z						
		7:00AM-3:00P	M		Clifton, NJ 0						
Scope of Work (Chec	k All That	Apply)									
☐ Demolition			Renovation	v v	Full Contains	ment wit	h Negative	Pressur	е		× 8
<ul><li>≥3sf or ≥3lf</li><li>≥160 sf or ≥</li></ul>		1.0000			Mini - Enclos		~				
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Location of		ls		Descript				CANADA INCOME TO SERVICE AND ADDRESS.	ent Type		1-
Asbestos Contai Material (ACM		Location Normally	As	bestos - C Material			Amount	R	R	E N	E
TO BE ABATE		Used	(1.	e., therma	PACK (12 P. 15 P.	7.0	(Specify	M	E	c	c
in Facility	- a v - 0	Solely	insu	lation, sur	facing, VAT,	-	SF or LF)	0	Р	Α	L
(13)	4.5	by Main-	or	other misc	ellaneous)			V	A	P S	o s
		tenance/ Custodial	7.0					A L	R	Ü	U
		Staff (12)	- 1 m					-		L	R
NA-1- #		YES NO N/A	Flooritie	Mastis			4.476			1 -	
Main office Main Office	1 1 1		Floor tiles and Wall Glue	iviastic			1,170		+ -	+-	
WIGHT OTHER			- van Olde		4		1,000			$+\Box$	
Name of Registered V	Vaste Haul	er	NJDEP Waste		Name of Reg	istered L	andfill	, it			
EQ Northeast			Hauler ID No.	Yards of Waste	Grows, Inc						
City, State				Disposal	City. State		T				
185 Industrial Road, Wi	rentham, N	IA		Date	Morrisville, PA	4 19067		, ,	7		- 1
Completed by (Print o	r Type\	- 3	Title		le:	anatimo	//	1//		Date	X
Ralph Barnhardt	i (ype)		Operation Man	ager	31	gnature	1. 1.	//	$\mathcal{O}$	Date	
					3	11/1	V pm		_		01/21/13