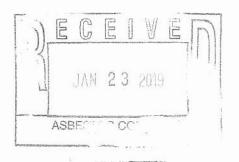
NOTIFICATION OF ASBESTOS ABATEMENT PURSUANT TO NJAC 8:60-7 AND 12:120-7 Date of Notification Name of Building Owner / Operator (2) 01 BRISTOL MYERS SQUIBB, INC Street Address Agencies Notified Type of Notification ONE SQUIBB DRIVE **EPA** Initial City, State, Zip Code DEP Amended NEW BRUNSWICK, NJ 08903 1 DOH Amendment # Name of Contact Telephone Number 1 DOL Emergency w/ justification 732-227-5000 PHIL DESPIRITO Cancellation **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) BRISTOL MYERS SQUIBB School (K-12) Street Address Subchapter 8 (Other than K-12) ONE SQUIBB DRIVE Other (I.e., private & cmmercial bldgs., homes, etc.) City (5) County (6) County Code (7) Square Feet # Of Floors **Building Age** NEW BRUNSWICK MIDDLESEX 20,000 Current Use (Prior if being demolished) 40+ OFFICE Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM NO ENVIRONMENTAL HEALTH INVESTIGATIONS, INC. 0104 NORTHSTAR CONTRACTING GROUP, INC. Street Address Street Address 655 WEST SHORE TRAIL City, State, Zip Code 32 Williams Parkway SPARTA, NJ 07871 City, State, Zip Code Project Mngr. For Monitoring Firm Telephone Number WILLIAM KERBEL 973-729-5649 East Hanover, NJ 07936 Sheduled Start Date (10) Sched. Completetion Date (11) Telephone Number License Number ____07 05 19 973-884-8682 00860 Occupancy Status During Abatement (Check Only 1) Name of OSHA Monitor Facility Closed/Vacated During Entire Period of NORTHSTAR CONTRACTING GROUP, INC. Abatement Street Address Abatement Performed Outside of Normal Facility Hours - Describe: _ 32 Williams Parkway 1 Other - Describe: 7:00 AM-3:30 PM City, State, Zip Code East Hanover, NJ 07936 Scope of Work (Check All That Apply) Demolition 1 Renovation 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 Is Description of Abatement Type Asbestos Containing Location Asbestos - Containing Normally Material (ACM) Amount E R N TO BE ABATED Used (I.e., thermal systems (Specify M E C C in Facility Solely insulation, surfacing, VAT, SF or LF) 0 P (13)by Mainor other miscellaneous) 0 tenance/ A S S Custodial 1 R U Staff (12) YES NO N/A **B 65, ROOF** ☐ ☐ ROOFING 16,875 SF 1 B 65, ROOF _ _ _ _ _ _ FLASHING 6,500 SF 1 B 65 FIRE DOORS 3 EA B 65, ROOF PITCH POCKETS 15 SF Name of Registered Waste Hauler NJDEP Waste Cubic Name of Registered Landfill NORTHSTAR CONTRACTING GROUP INC Hauler ID No. Yards WASTE MANAGEMENT - FAIRLESS HILL LANDFILL 30534 of Waste City, State Disposal City. State EAST HANOVER, NJ MORRISVILLE, PA Date Completed by (Print or Type) Title Signature Date Steve Stiles Project Manager 01/18/19

ASB-41

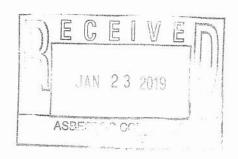
STATE OF NEW JERSEY

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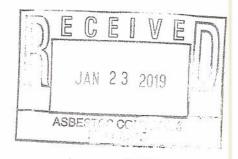
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Eric Sutherland	nitoring F	irm	Telephone Nu 610-891-0114	mber	Fast Hand	ver, NJ 079	36				
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STATE OF NEW JERSEY
NOTIFICATION OF ASBESTOS ABATEMENT

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NORTHSTAR CONTRACTING GROUP, INC Hauler ID No. Yards of Waste City, State EAST HANOVER, NJ 07936 Completed by (Print or Type) Steve Stiles Title FAIRLESS LANDFILL City. State MORRISVILLE, PA 10967 Signature Date 01/18/19											
NORTHSTAR CONTRACTING GROUP, INC Hauler ID No. Yards of Waste City, State EAST HANOVER, NJ 07936 Completed by (Print or Type) Steve Stiles Title FAIRLESS LANDFILL City. State MORRISVILLE, PA 10967 Date Date O1/18/19	Name of Daniet	Mast- II		N. IDEE							
City, State EAST HANOVER, NJ 07936 Completed by (Print or Type) Steve Stiles Of Waste Disposal Date MORRISVILLE, PA 10967 Signature Date Date O1/18/19											
City, State EAST HANOVER, NJ 07936 Completed by (Print or Type) Steve Stiles Disposal Date MORRISVILLE, PA 10967 Signature Date 01/18/19	INCINITIONAR CONTR.	ACTING G	ROUP, INC	nauler ID No.		FAIRLESS LANDFIL	L				
EAST HANOVER, NJ 07936 Date MORRISVILLE, PA 10967 Completed by (Print or Type) Steve Stiles Project Manager Date MORRISVILLE, PA 10967	City, State					City State					
Completed by (Print or Type) Title Steve Stiles Project Manager Date 01/18/19	[4] [1] [3] [4] [4] [4] [4] [4] [4] [4] [4] [4] [4	07936					0967				
Steve Stiles Project Manager Tong 101/18/19						7	2007				
Steve Stiles Project Manager Tope of 1/18/19	Completed by (Print of	or Type)		Title		Signature	9 //			Date	
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	ASB-41			Project Manage	er	Moore	MAL	XX	1	01.	/18/19

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MD CX			CATION	tate of New N OF ASBE to NJAC 8	ESTOS A			т) E	C	E		<u> </u>		
Date of Notification (1) January 2019	1			of Building (n Genera				LLC		1	JAN	2.	3 20	119	1, 1	
Agencies Notified Type Notified	cation		Street A	Address .S. Route	e 9 Sou	ıth				ASB	EST	in C	Ci.		<u>_</u>	
X EPA X Initial Amen Amen Amen	ded dment #			ate, Zip Coo d River, I		rsev (187	31			and the state of t	essential			*	
☑ Emer	gency (including cation)	_	Name o	f Contact Dreher	TOW OC	racy (-		ephone						
Z DCA Cand	ellation			ILITY INFO	DMATIO	NAT .			00	9-971	-211	0				
Name of Facility Where Abatement is	Taking Place (3	3)	PAC	ILIT INFO	RIVIATIO	N .	Typ	e of Facility (4	1)	<u> </u>	i i		-			
Oyster Creek Generating Sta							П	School (K-1)								
Street Address 741 U.S. Route 9 South				5)			×	Subchapter Other (i.e. p	8 (Oth	er than & comn	K-12 nercia) Il buik	dings,	home	es,	
City (5) Forked River		x		V S			Squ	etc.) uare Feet	10000000	f Floors	3	1 22	ldg. A	-		
County (6) Ocean	- 1 h			Code (7)		31 10	Cui	rent Use (Prio	10000		nolish		3 .7-			
Name of Monitoring Firm Hired by Bu Accredited Environmental Te			ASCN	/I No.				patement Con			2				-	
Street Address	crinologies		#000)21		Street	Addı	77 Fa 14		tracto	rs	1				
28 North Pennell Road City, State, Zip Code				N				h Lime Stre	et						_	
Media, PA 19063			T-11-	1 4		Lanc	aste	er, PA 1760	2							
Project Manager for Monitoring Firm Tony Smith	₂₀ 00			12-0461		Teleph 800-4				Licen #007			Α			
Start Date (10) February 01, 2019	Scheduk Decem			Date (11) 9				SHA Monitor eher - Oyste	er Cre	ek G	ener	ating	Sta	tion		
Occupancy Status During Abatement	- N - N - N - N - N - N - N - N - N - N		Street Address													
Facility Closed/Vacated During It Abatement Performed Outside of Other – Describe: Notification is	of Normal Facility	Hours		tement	(City, St	tate,	Zip Code River, New	larea	v 087	31		1			
Scope of Work (Check All That Apply)					1 01110	-	aron, now	,0100	, 007						
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	-	denova demoliti	10.7555				N G	ull Containme lini-Enclosure llovebag Proce lon-Exempted	edure					е		
	- ASSETS	Location				n 2	N.						Abate	ment pe		
Location of Asbestos-Containing Material (AC <u>TO BE ABATED</u> In Facility (13)	CM) Use Ma	d Solel intenar odial S (12)	(i.e. t		ystems	lateri insu T, or		(S	mount pecify or LF)		Removal	Repair	Encapsulate	Enclosure		
-	Yes	No	N/A					n 113				al	12.0	ate	ге	
Site-Wide (contingency)			х			lisc.				25 sf						
Site-Wide (contingency)		2"	Х	Ther	mal Sys	stem I	Insu	lation	<	10 If						
															\vdash	
Name of Registered Waste Hauler (PSC Industrial)		H	JDEP W auler ID EP #S\	No.	Cubic Ya of Waste			Name of R	300 0 300000000							
City, State 2869 Sandstone Drive, Hatfield	PA 19440				Disposal 12/31/1			City, State Morgant		PA						
Completed by Keith Dreher	Title Sr. Si	te Inc	I. Safe	ty Adviso		nature	<u></u>	Del	,		Date		/19			

OVINI	100	1				State of	New Jersey		FXF	@ F	3 n			
1370-03	ld		NO.	TIFIC (P	ATIO ursua	NOE AS	BESTOS ABA	TEMENT	() <u>E</u>	G		\mathbb{V}	E	
Date of Notification (1)													-	
	22 /	19	9				ng Owner/Operator Partners LLC	(2)	Ji W J	AN 2	2 3	2019	9	
Agencies Notified	Type Notific	cation			Stre	et Address								
⊠ EPA					2	Riverside	Drive Suite 500		ASBE	STOS	CO	. 11		
□ DOLWD	☐ Amende	ed				State, Zip				-	4616	5		
□ DOH	Amenda			20	0.752						*****			
□ DCA	☐ Emerge	ncy (ir	ncludin	ig		amden N	ALTO CONTRACTOR OF SECURITION				-200-120	200120011		
(NJAC 5:23-8)	justificat	1.00			Nam	e of Conta	ct		Telephone Nun 1 800 971-6					
					FA	CILITY	NFORMATION							
Name of Facility Where At	patement is	Takin	g Plac	e (3)				Type of Facility (4)					
The Victor Bldg			_	. ,				School (K-12)	. 61					
Street Address								Subchapter 8	Other than K-1	2)				
201 N. Front Street								Other (i.e., pri	ivate and comme	rcial b	uildin	ıgs,		
City (5)								homes, etc.)						
Camden								Square Feet	# of Floors	В	ldg. A	Age		
O CONTRACTOR OF THE PARTY.								90,000	7		100	+		
County (6)					Cou	nty Code	7)(STATE USE ONLY)	Current Use (Price	or if being demoli	shed)				
Camden														
Name of Monitoring Firm F	lired by Buil	lding (Owner	(8)	ASCN	l No.	Name of Abatem	ent Contractor (9)					_	
Vertex							DELTA/BJDS	S, INC						
Street Address							Street Address	M. 022						
700 Turner Way Suit	e 105						1345 INDUST	TRIAL BLVD						
City, State, Zip Code	TO THE DEVE													
Aston Pa 19014	Oity, Ctate, 2ip Gode													
Project Manager for Monito	oring Firm			Tel	ephone	No	Telephone No.	TORTA 10900	111					
David Brown	anig i iiii				•	3-8902	215 322-2900		License No.					
Start Date (10)		School	ulod C	1		ate (11)			00783					
2 / 1 /	19	45					Name of OSHA N							
					1_/	19_	Criterion Lab)S						
Occupancy Status During A							Street Address				A			
Facility Closed/Vacated	During Enti	re Per	riod of	Abate	ment		400 Street Ro	oad						
Abatement Performed C Time of Abatement: 7Al	Outside of N	ormal	Facilit	y Hou	rs - Des	scribe	City, State, Zip Co	ode						
Time of Abatement. IA	IVI-4-PIVI/	—PIV	1	_AIVI			Bensalem Pa	19020						
Scope of Work (Check all to	hat apply)													
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			⊠ Re □ De	novati			☐ Mini-Enc ☒ Glovebad	Procedure						
			Is	Locat	ion		LI NOII-EXE	mpted (*) and Non-	-Friable Procedu					
Location of				Norma	70 00000		Description o	f			_	ent T	ype	
Asbestos-Containing Ma	aterial (ACM	1)		d Sole		Asbe	stos Containing Ma		Amount	Removal	Repair	Ē	E	
TO BE ABATI	<u>ED</u>			intena todial	No. of Control of Control	(i.e	., thermal systems i	insulation,	(Specify	mo	pair	сар	Clos	
IN Facility (13)			Ouo	(12)	otan:		surfacing, VAT, other miscellane		SF or LF)	val	1.30	Encapsulate	Enclosure	
Yes No N/A						Other miscellane	ous)				ate			
1 st Floor Office						Pipe in	sulation		160 LF					
											П			
			10 m							1	ш	П	Ш	
Name of Registered Waste	Hauler			100000	JDEP V		Cubic Yards of	Name of Registe	red Landfill				$\overline{}$	
SERVICE TRANSPORT GROUP City, State						No.	Waste	MINERVA LA						
							Disposal Date	City, State	1000					
58 PYLES LANE NEW CASTLE DE								WAYNESBU	RG, OHIO					
Completed By (Print or Type	Title					Signaturé		/ Da	te			\neg		
CHRISTINE DEL VISC	10	AS	ST. A	ADMII	NISTR	ATOR	1/ /00	1	ONLATIC		7 -	201	Q	
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	n (1) /18	- U		D&R H	DBOKEN, L	Owner / Op LC	erator (2)		J) [· C	FI	I W E
Agencies Notified	Type of	Notification			Address	01.70			1)/-			1 W E
☐ EPA		Initial			MMERCE E ate, Zip Co				-1			
☐ DEP	V	Amended			TADT, NJ C					JAN	23	2019
☑ DOH ☑ DOL		Amendmer		Name o	f Contact			Teleph	none Nun			2013
DOL.		Emergency Cancellation	w/ justification	NICHOL	AS DINAL	LO		201-48	7-5657			
		Cancellatio	THE RESERVE OF THE PARTY OF THE	FACILITY	INFORMAT	TION			AS	BEST	<u>ି ୯୯</u>	y o e e e e Ma
Name of Facility W 414 JEFFERSON S	here Abate TREET	ment is Takin	g Place (3)		Type of	Facility (4)					Martingon way way	
Street Address 414 JEFFERSON S	TREET					Other (I.e	K-12) eter 8 (Othe e., private 8 omes, etc.)	cmmer	·12) cial			
City (5) HOBOKEN	County (County Code	e (7)	Square	Feet	# Of Floo		Buildi	ing Age)	
HOBOKEN	HODSON					2,500	f haire de	3	_		100000000	
	-				RESIDE	Use (Prior i NCE/HOUSE	t being der =	nolished)		40 +	
Name of Monitoring	Firm Hire	d by Bldg. Ow	ner (8)	ASCM N		NOE/11000L						
AET												
Street Address						STAR CONT	RACTING (GROUP,	INC.			
907 Doolittle Drive					Street A	aaress						
City, State, Zip Cod	е				32 Willia	ms Parkway						
Bridgewater, NJ 088 Project Mngr. For M	07		-		City, Sta	te, Zip Code	9					
Eric Southerland	ionitoring i	-irm	Telephone No 610-891-0114		East Han	NOVOE NILOZO	220					
Sheduled Start Date	(10)	Sched. Com	pletetion Date (nover, NJ 079	936	License	Number		_	
02_//04_	/19	_04_	30	/19		io manibol		License	Number			
Occupancy Status [/ Juring Abot	tomont (Cheel	/			384-8682				00860		
☐ Facility C	losed/Vaca	tement (Cneci	ntire Period of		Name of	OSHA Moni TAR CONTI	itor	DOLLD I				
Abateme	nt				Street Ad		VACTING 6	ROUP, I	NC.			
Abateme	nt Performe	ed Outside of	Normal Facility									
	escribe: _	8:00AM - 4:3	0014		The same of the sa	ns Parkway						
	escribe	MON-FRI	JPIVI		Fast Han	te, Zip Code over, NJ 079	36					
Scope of Work (Che	ck All That	Apply)			Lastrian	OVEI, 143 07 3	30					
☐ Demolitio ☐ ≥3sf or ≥3 ☑ ≥160 sf or	Blf	V	Renovation		Mini - En Glovebag	tainment wit closure g Procedure mpted (*) an	F.C.					
Location o		ls		Descript				Abateme	ent Type			
Asbestos Conta	aining	Location	As	sbestos - C	ontaining			R	1	ĮΕ	Į.	Ε
TO BE ABAT	ED	Normally Used	//	Material .e., therma			Amount	E	R	N	I	V
in Facility		Solely	insu	lation, sur	facina. VA	т.	(Specify SF or LF)	M	E P	C	C	
(13)		by Main-		other misc			or or Ery	v	A	A	L	3.13
		tenance/						A	1	s	s	
		Custodial Staff (12)	1					L	R	U	L	
		YES NO N/A							-	┖	R	<u> </u>
ROOF			ROOF & FLAS	HING			2,500 SF	J		+	_	
										1	5	
										Ī		
Name of Registered	Waste Hau	ler	NJDEP Waste	Cubic	Name of I	Registered L	andfill					
NORTHSTAR CONTR	RACTING G	ROUP, INC	Hauler ID No.			S LANDFILL	-andilli					
City, State				of Waste								
AST HANOVER, NJ	07936			Disposal	City. State							
				Date	WORRISV	ILLE, PA 10	967					- 1
completed by (Print	or Type)		Title			Signature		12		Date		
teve Stiles			Design			VEn	1	()	Date	10	- 1
SR-41			Project Manage	er		100	M M	0			01/22	2/19

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Ch 2704		NOT	FCATIO Pursuan	State ON N ON OE AS It to NJAC	ew Jerse BESTOS C 8:60 ar	ABATE d-12-12	EMEN	IT .	3	E C	E			
Date of Notification (1)				of Building Schundl			r (2)		П	JAN	2 3	20	19	
Agencies Notified Type Notification			Street	Address Vhitmar						SBEST	○ C(01 ,	-	_
EPA Initial Amended	,,		City, St	tate, Zip C	Code			L				NG.		1- 4
X DOL Amendment Emergency (justification)		g	750000000000000000000000000000000000000	on, NJ 0					Tele	phone Nu	ımher	3# #		
DCA Justification			Dale	Cross, (Owner's		esen	itative		0-503-16				
Name of Facility Where Abatement is Taking	g Place	(3)	FAC	ILITY IN	FORMAT	ION	Typ	e of Facility	(4)	÷				
Schundler, Inc.								School (K-1	12)					
Street Address 150 Whitman Avenue							×	Subchapter Other (i.e. petc.)				ldings	, hom	ies,
City (5) Edison, NJ 08817					7			uare Feet	# of	Floors		Bldg. 7	Age	
County (6) Middlesex			County (STATE	Code (7) USE ONL	Y)		Cur	rent Use (Pri	or if beir	ng demolis	hed)			
Name of Monitoring Firm Hired by Building C Lead Consultants of America, Inc.)wner (8	3)	ASCI	M No.		Name Prisn	of At	esponse, Ir	ntractor ((9)				
Street Address 220 Davidson Avenue						Street	Addr	20						
City, State, Zip Code Somerset, NJ 08873						City, S	tate,	Zip Code PA 15632						
Project Manager for Monitoring Firm Scott Gill		T	Telepho	ne No. 18-9006	3	Teleph 724-3	none	No.		License N	lo.			
	Schedu 2/15/2			Date (11)		Name	of OS	SHA Monitor		01121				
Occupancy Status During Abatement (Check						Street								
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma	eriod of al Facilit	Abaten y Hours	nent s					e Dr., Suite	e 200 ((branch	office	e)		
Other – Describe: Scope of Work (Check All That Apply)						Drum	ns, F	PA 18222						
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	×	Renova Demolit	ation tion	6		×	M G	ull Containme ini-Enclosure lovebag Proc on-Exempted	edure	25 The Co.	ressu)	re roof	rea o	
Location of		Locati Normal			Dos	cription			1000			Abate	emen vpe	l
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole aintenar todial S (12)	nce/	Asbes (i.e.	tos Conta thermal surfac	aining M	ateria insu T, or	lation,	(Sp	ecify or LF)	Remova	Repair	Encapsulate	Enclosure
Potoh House Ctarage Date D	Yes	No	N/A										ate	e
Batch House - Storage Parts Room			X	Vin	nyl Asbe	estos F	loor	Tile	1	00	Œ			
Storage Building			Х	A	CM Roo	ofing S	hing	les	44	00	SF			
ame of Registered Waste Hauler		N	JDEP W	aste.	Cubic \	/arde		Name of E	Pagistore	d I andfil				
aste Management		Н	NJDEP Waste Hauler ID No. 17273 Cubic Yards of Waste Fairless Landfill											
city, State wing, NJ					Dispos	al Date		City, State Morrisvil		nsylvar	nia			
Completed by essica Wolfe	Title Admi	nietro	tive Su	nnort	Si	gnaturé		in 11)		Dat	10	ລລ	19	
CONTRACTOR OF THE CONTRACTOR O	C 11 11 111								- FF 9 6 11					

Ch3480

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

D: FRANKLIN	MEYER
NJPOL	12/6/18

Date of Notification		- Miles		Nar	me of	Building	Owner / Opera	tor (2)	F	市市	CEE)	1	V/ F	3-1
	12/6/18			Tre	enton	Board	of Education	1	ت ر . ; ا		<u> </u>	10	<i>y</i> <u>E</u>	-11
Agencies Notified EPA	Type Notif	ication		The second		dress	_		(fill		5 1	1		111
DEP	□ Init	ial					Street				AN 23	3 20	19	
⊠ DOF	⊠ Init	iai iended				e & Zip			LITT				.0	1
Ø DOH	_	ergency				, NJ 08			By_		-	1		
DCA		ncellation		1. ZX. 2. 2. 2. 4.		Contact yne M			1-1-	ASBE	STEER			per
											609-6	56-4	300	
Name of Facility W	here Abater	ment is Taking	Place	(3)	ACIL	II Y IN	FORMATION	ilibu (A)						
Grace Dunn		mork to running	1000	(5)			Type of Fac		NON FE	DIARIE				
Street Address										ian K-12)				
401 Dayton Street	et						Other (i.e. priv	ate & co	mmercial build	ings ho	mpe	etc \	
							Square Fee		# of Flo		Bldg. A		C(0.)	
City (5)		County (6)	C	ounty	Code	e (7)	6000		J# 01.11	3	blug. A	75.00 mm.		
Trenton		Mercer		•					f heina	demolished)		60-		
							School	(, bomig	demonstred)				
Name of Monitoring	Firm Hired	by Building Ow	mer (8	3)	IAS	SCM No		atemen	t Contra	ctor (0)				
Environmental C	onnection	1		,	"	20111111	Bristol En	vironn	rental	inc				
Street Address	2000						Street Addre		·orrear,					-
120 North Warre							1123 Beav	er Stre	et					
City, State & Zip Co							City, State 8	Zip Co	de	****		-		
Trenton, NJ 0801	10						Bristol, PA							
Project Manager for Steve Mania	Monitoring	Firm			e Nun		Telephone N			License	Number			
Scheduled Start Da	to (10)	Cabadulad Ca			-4200		(215)788-6		= -	00509				
12/6/18		Scheduled Co				1)	Name of OS							
Occupancy Status [ment (Chack o		7/18			Bristol En		ental l	nc.				
Facility Clos	ed/Vacated	During Entire F	Period	of Al	hatem	ent	Street Addre		-4					
Abatement I	Performed (Outside of Norm	nal Ho	ours -	- 7am	to 3nm	City, State &					-		
Describe:	3:00PM -	12:30AM				to opin	Bristol, PA	1.5						
☐ Facility Occu	upied During	Abatement					Distoi, 17	13001						
Scope of Work (Che	ck all that a	pply)												
≥3 sf or ≥3 lf				122					Full Cor	ntainment with	Negative	e Pre	ssure	2
≥ 160 sf ≥ 260			\boxtimes		novat	1475131800			Mini-En					
△ = 100 SI ≥200	JII			De	molitie	on				ag Procedures				
10	cation of		l lo	1 000	tion		· · ·		Non-Ex	empted and No				
0.00	os-Containir	ng		Loca	Used	1	Asbestos-Cor			Amount	Ab	atem	ent T	ype
	erial (ACM)	J		olely			Material (A	CM)		(Specify SF or LF)			m	
	E ABATED				nce or		(i.e., thermal s	systems		0. 0. 1.	Re	R	nca	Enc
ın	Facility (13)		Cust		Staff?	1	insulation, surfa	cing, VA	\T		Remova	Repair	psi	Enclsoure
	(10)		Yes	(12) No	N/A	-	or other miscell	laneous)		/a	=	Encapsulate	ure
Rm A-11X			П	X		-	Nail Cre	to		25.05	1	N2		
			Ħ	Ī	TH	1	11011 016			25 SF			님	님
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	W		T	Ħ	TH					-	$\dashv H$	H	井	+
Name of Registered	Waste Hau	er		N.	JDEP	Waste	Cubic Yards	Name	of Regi	stered Landfill				
Bristol Environme	ntal Inc			1		D No.	of Waste		- 					
City, State	milai inc			18	3706		1 Cu yd		ess Lan	dfill	Calcination and Charles			100
Bristol, PA							Disposal Date 12/7/18	City, S		DA.				
completed By (Print	or Type)		V	Tit	le le		Signature	INIOILI	sville,	ra				
Gino Pizzigoni	75-7			17730037	oject			• •	. /	1.0	Date	114-		1
					anag		Gino Ruy	gego	we/	K	12/6	118		
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01011			Towns or other teachers.	D) _s	tate of Ne	w Jerse	M			1)	EC	E			rint
Chisil		N	OTIF (F	CATIO ursuan	N OF ASE	BESTOS 8:60 ar	ABATE d 12:12	MEN 0)	IT	小					
Date of Notification (1) 1/17/19					of Building Defilipp		Operator	(2)			JAN	23	201	9	
Agencies Notified Type	e Notification			Street /	Address						ASBESTO	3.00	71		1
EPA DEP	Initial Amended		-	City St	ate, Zip C	ode					TODIC	00			one on the face
⊠ DOL ⊠	Amendment #_	edilos es	_		Vale, N		5							2011	
DOH DCA	Emergency (incligustification) Cancellation	uaing			of Contact Defilipp					Te	ephone Nu	mber			
Name of Facility Where Abate	ment is Taking Pl	ace (3)		FAC	ILITY INF	ORMAT	ION	Tve	oo of Engility	(4)					
Residential Home	ment to running th	acc (5)						T I y	oe of Facility School (K-						
Street Address								×	Subchapte	r 8 (Oth	er than K-1. & commerci	2) ial buil	dings	hom	es,
City (5) River Vale									uare Feet 00	# o	f Floors		3ldg. <i>A</i>	-	
County (6) Bergen					Code (7) USE ONLY)			rrent Use (Pri esidential H		ng demolisl	hed)			
Name of Monitoring Firm Hired Project Manager	by Building Own	er (8)		ASCI	M No.				batement Co es Abatem		(9)				
Street Address							Street			_					
City, State, Zip Code							City, S	tate,	Aidland Av Zip Code Brook, NJ (
Project Manager for Monitoring	Firm		T	Telepho	ne No.		Teleph	one		01003	License N	0.			
Start Date (10)	Sch	neduled	Con	npletion	Date (11)		2-66%	200	SHA Monitor		01303				-
1/18/19		21/19					//								
Occupancy Status During Abat				en-sep QV			Street	Addı	ress						
Facility Closed/Vacated D Abatement Performed Out Other – Describe: 8A.M to	tside of Normal F	acility F	lours	ent			City, St	tate,	Zip Code				-14-		
Scope of Work (Check All That	Apply)														
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	<u> </u>		nova molit	20.770			×	N G	ull Containm fini-Enclosure Glovebag Prod Ion-Exempted	e cedure				2	
Wasalisa		ls L	ocati	on					ion Exemples	u () ain	1 NOTE HAD	10	Abate		
Location of	-1 (4 0 4 4	No Used	rmall Sole				scription					-	Ту	pe	
Asbestos-Containing Materi TO BE ABATED In Facility (13)	ai (ACM)	Main: Custoo	tenar	ice/		thermal surface	aining M systems cing, VAT niscelland	insu T, or		(S	mount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
	Y	'es	No	N/A					·			a	- T	ilate	лге
Basement			Х				VAT			38	9 SF	x			
Name of Barrier															
Name of Registered Waste Hau All Stages Abatement	ller		H	JDEP W auler ID 36592	No.	of Was 2 yd	2000		1 383 383	E 557%	red Landfill Il Sanitary	/ Lan	dfill	=	
City, State Saddle Brook, NJ							al Date		City, State		Λ				
Completed by Richard Cristofol	addle Brook, NJ completed by Title					Si	ignature	1/	1-4		Dat	te 17/19)		

State of NJ

Notification of Asbestos Abatement 2019-15 ursuant to NJAC 8:60-7 and 12:120-7) B & G proj. #: Check # 9112 Date of Notification (1) Name of Building Owner/Operator (2) <u>| ⁰ | ¹ | / | ¹ | / | ¹ | 9 |</u> Anne Klar Agencies Notified Type Notification Street Address ☐ EPA JAN 23 2019 Initial ☐ DEP City, State, Zip Code DOL Amendment South Orange, NJ 07079 ASBESTOS CO X DOH Name of Contact Telephone Number Cancellation ☐ DCA Anne Klar **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) Anne Klar Subchapter 8 (Other than K-12) Street Address X Other (Private/Commercial Bldgs./Homes, etc. Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) (State use only) Current Use (Prior if being demolished) South Orange, NJ 07079 Essex residential Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Abatement Contractor (9) n/a B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Project Manager for Monitoring Firm Telephone Number Phone Number License Number (973)696-6869 00378 Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) B & G Restoration, Inc. 01/30/2019 01/31/2019 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Lincoln Park, NJ 07035 Other-Describe: Scope of Work (check all that apply) ☐ Demolition X Renovation Full Containment w/negative pressure ★ Glovebag procedure >3 sf or >3 If Mini-enclosure ≥160 sf or ≥260 lf Non-friable procedure Is location normally used solely Location of E by maintenance/custodial e e asbestos-containing n Amount Description of asbestos-containing n staff(12) m p material to be C (Specify SF or material (ACM) C 0 a abated in facility (13) a Yes No N/A D Basement pantry, boiler room & pipe insulation 33 LF X closet Registered Waste Hauler NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill B & G Restoration, Inc. 19563 Grand Central Landfill Disposal Date City, State Lincoln Park, NJ 01/31/2019 Pen Argyl, PA Completed by (Print or Type) Signature Date Gordana Luna Gordana Luna Secretary/Treasurer 01/17/2019

Ch 267		NOTII (I	Pursuar	State of N ON OF AS at to NUAC	ew Jers BESTOS 8:60 ar	ey S ABATE nd 12/12	MEN	Т	()	E C	EI	\mathbb{V}	E	n.
Date of Notification (1) 1/11/2019			Name Ame	of Building eritrust R	Owner/ esiden	Operato tial Ser	(2) vices	S		IAN	2 3	2010	a	
Agencies Notified Type Notification EPA Initial				Address Piedmo	ont Roa	ad, Buil	lding	7, Suite	Z00	UAII		LUI	,	
DEP Amended Amendment		_		tate, Zip C nta, Geo					^	SBEST	<u></u>	45	7	
DOH justification) Cancellation		g		of Contact e Pfund	ł					ephone i 1-486-				
Name of Facility Where Abatement is Takin N/A	g Place	(3)	FAC	CILITY INF	ORMAT	ION	Тур	e of Facility	/ (4)					
Street Address 103 Passaic Ave							×	School (K Subchapte Other (i.e. etc.)	er 8 (Oth	er than K & comme	-12) rcial bui	ldings	s, hom	nes,
City (5) Hawthorne							Squa 1,5	are Feet	# of 2	Floors		Bldg. 1923		
County (6) Passaic				Code (7) USE ONL	0		Curr	ent Use (P Occupied	rior if bei	ng demo	lished)			
Name of Monitoring Firm Hired by Building (Owner (8	3)	ASC	M No.		Name Che	of Ab	atement Co ark Indus	ontractor trial	(9)				
Street Address						Street 54 N		ess an Dr						
City, State, Zip Code								Zip Code J 07871						
Project Manager for Monitoring Firm	23		Telepho	one No.		Teleph 973-		lo. 2645		License 01334		-		
Start Date (10) 1/12/2019	Schedu 1/18/2	led Cor 2019	npletion	Date (11)				HA Monito			-			
Occupancy Status During Abatement (Check			2			Street . 54 N						2000		
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe:	eriod of al Facilit	y Hours	nent			City, St	tate, Z	Zip Code J 07871				O-1277		
Scope of Work (Check All That Apply)														-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Enterent Co.	Renova Demolit				×	Fu Mir Glo No	ll Containm ni-Enclosur ovebag Pro n-Exempte	e cedure				Α.	
Location of		Locati Normal			_							Abate	ement pe	:
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole aintenar todial S (12)	ice/	Asbes (i.e.	tos Conta thermal surfac	scription aining M systems cing, VAT niscelland	aterial insula r, or	I (ACM) ation,	(Sp	nount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
Basement	Yes	No X	N/A		nino	inculat	ion		10	0.1.5			ate	e)
	Basement X pipe insulation 120 LF x													
Name of Registered Waste Hauler		N.	JDEP W	/aste	Cubic \	Yards		Name of	Pegista-	مرا محاد	11			
Atlantic Carting		1555555	auler ID	74777	of Was				Manag		П			
City, State Wayne NJ					Dispos	al Date		City, Stat Tulleyto						
Completed by Corey Stankovic	Title CEO				Si	gnature (Jacko	· M		ate /11/20	19		

2h00042006		NOT!	CATION Pursuant	tate of No NoF ASI t to NJAC	ew Jerse BESTOS 8:60 ar	ABATE	MENT 0)	•		E		<u>U</u>	W [5
Date of Notification (1) 01/17/2019				of Building Chemic			(2)		L	JA	N 2	3 2	019	i
Agencies Notified Type Notification EPA Initial	1			Address lekeland	d Avenu	ue				ASBES	POP.	001		_
DEP Amended Amendment				ate, Zip C esex, N		6								
□ DOH)			of Contact Borroni						lephone N 67-249-(r		
Name of English Where Abele and J. T. Li	5.		FAC	ILITY INF	ORMAT	ION								
Name of Facility Where Abatement is Takin DOW Chemical Bound Brook - Bu Street Address 65 Baekeland Avenue	ilding 10)4					B	School (K-1 Subchapter Other (i.e. p	12) 8 (Oth	ner than K & comme	(-12) ercial bu	uilding:	s, hom	nes,
City (5) Middlesex							_	etc.) are Feet		f Floors		Bldg. 40+		
County (6) Middlesex				Code (7) USE ONLY	n		Curre	ent Use (Pri	or if be	ing demo Bldg	lished)			
Name of Monitoring Firm Hired by Building One Source Safety and Health	Owner (8)	y ·	ASCN	M No.			of Aba	atement Cor urg Indus	ntracto	(9)	Comp	any	-71	
Street Address 140 S. Village Ave, Suite 130						Street	Addre						V	
City, State, Zip Code Exton, PA 19341								ip Code n, PA 180	15		,			
Project Manager for Monitoring Firm			Telepho 610-52	ne No. 24-5525		Teleph 610-6				License 00721	No.			
Start Date (10) 01/31/19	02/05/1	19	npletion	Date (11)	X	Name o Brand		HA Monitor urg						
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire	Period of A	Abaten	nent			Street / 2217		ss man Drive	Э					
Abatement Performed Outside of Norr Other – Describe: DEMO - 02/06/2019	nal Facility	Hours	S					ip Code n PA 1801	15					
Scope of Work (Check All That Apply)		-110 110 110												-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	R X D	enova	ition ion			×	Mir Glo	Il Containme ni-Enclosure ovebag Proc n-Exempted	edure				re	
Location of	N	Locati	ly		Des	scription						Abat	emen	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	d Sole ntenar odial S (12)	nce/	Asbes (i.e.		aining M systems cing, VAT niscelland	insula F, or	(ACM)	(8	mount Specify or LF)	Remova	Repair	Encapsulate	Enclosure
Roof of Cylinder Shed	Yes	No	N/A X		Т.	ransite			3(00 SF	X		te	(D
,						ranoito			30	70 31				
										-				
Name of Registered Waste Hauler Brandenburg Industrial Service Co		Н	JDEP Waller ID I		Cubic of Was			Name of F	7000		fill			
City, State Bethlehem, PA					Dispos 2/6/19	al Date		City, State Fairless		PA				
Completed by Stephen Carne	Title Enviro	nme	ntal Ma	anager	Si	ignature	5	12			Date 1/17/1	9		

NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)				Nam	e of Buildin	a O	wner/Operator ((2)	Vocati					
1 / 14 /	19			1000000			erties, LLC	(-)		THE STREET STREET	t-word	opperation	DESCRIPTION OF THE PARTY OF THE	- Nove
Agencies Notified Type Notifi	cation	_			t Address	•				ASBE	570	n C	<u>01</u>	
⊠ EPA	Cation			Service State	15 Walnu	+ 9+	root		Auto-Contraction		retou wat	erc.		FS 12
☑ DOLWD ☐ Amende	ed				State, Zip (
□ DOH Amendr				11599	banon, P.									
☑ DCA		luding	g		e of Contac		7042		Talasta		000			
Cancell	200 CO. C.			100000000000000000000000000000000000000	bert Bon		olta		Telephone					
							RMATION		917-74	4-0440	£			
Name of Facility Where Abatement is	Taking	Place	(3)	FA	CILITY	IFU	RMATION	T	4)					
Residential	raking	. 1000	. (0)					Type of Facility (4	153					
Street Address								☐ Subchapter 8	(Other than	1 K-12)				
								Other (i.e., pri	vate and co	mmerc	ial bu	uilding	js,	
City (5)			-7					homes, etc.) Square Feet	# of Floor	rc	ПП	dg. A	-	
Port Murray, NJ 07865								200	2	5		og. A 20	ge	
County (6)				Соц	ntv Code (7	YST.	ATE USE ONLY)	Current Use (Prio		omoliah		20		
Warren County					, 0000 (.	ησ.,	THE OOL ONE IT	Residential	i ii beilig di	SHIOHSH	eu)			
Name of Monitoring Firm Hired by Bui	Iding Ov	vner ((8)	ASCM	No.	Na	me of Abateme	ent Contractor (9)						
CA Environmental						1 3	Super LLC	on contractor (9)						
Street Address						-	reet Address							
2200 Patterson Plank Road						S SCHOOL	203 Belmont	Avenue						
City, State, Zip Code						_	y, State, Zip Co					_		
North Bergen, NJ 07047							Haledon, NJ (
Project Manager for Monitoring Firm			Tele	phone	No.		lephone No.		License N	Vo.				
Carmelo Altomonte						2	201-336-0477		01195					- 1
	Schedul	led C	omple	tion Da	te (11)	Na	me of OSHA M	onitor						
1 /15 /19	2	/	15	_ /	19	5	Super LLC							
Occupancy Status During Abatement	Check (only o	ne)			Str	eet Address							-
☐ Facility Closed/Vacated During Ent	ire Peric	d of	Abate	ment		2	03 Belmont	Avenue						
Abatement Performed Outside of N	ormal F	acility	/ Hour	s - Des	cribe	City	y, State, Zip Co	de						-
Time of Abatement:AM	PM/		_PM-		AM	F	łaledon, NJ 0	7508						
Scope of Work (Check all that apply)									2794 92971					\neg
≥3 sf or ≥3 If	Г	7 Rei	novati	on			☐ Full Conta	ainment with Nega	tive Pressu	re				
≥160 sf or ≥260 lf	111	100000000000000000000000000000000000000	molitic				☐ Glovebag	Procedure						
			•				Non-Exer	mpted (*) and Non-	Friable Pro	cedure				
Location of		100	Locat Iorma	200							Aba	atem	ent T	уре
Asbestos-Containing Material (ACN	A)	Use	d Sole	ly by	Asbes	stos	Description of Containing Mat		Amoun	, l	Re	Re	En	m n
TO BE ABATED			ntena odial s			, the	ermal systems in	nsulation,	(Specif	у	Remova	Repair	cap	Enclosure
IN Facility (13)			(12)	otan.			surfacing, VAT, her miscellaned		SF or LF	-).	<u>a</u>		Encapsulate	ure
5.444.004	,	Yes	No	N/A				,					te	
1st Floor, Ground Level				\boxtimes	Gray Flo	or	Tile and Mas	tic	100 SF	F	\boxtimes			
Roof					Black R	oofi	ing Material		150 SF	=	\boxtimes			
Interior Windows				\boxtimes	Gray Ca	ulki	ing		15 SF		\boxtimes			
2 nd Floor Bedroom, Attic Area, A	ttic [Vermicu	lite			880 SF	=	\boxtimes		П	
Name of Registered Waste Hauler			10.00	JDEP V	0.000		oic Yards of	Name of Registe	red Landfill					
SUPER, LLC			1000	auler ID 00348	200000000000000000000000000000000000000	Was	ste BD	G.R.O.W.S, \			nent			
City, State				00340	33		oosal Date	City, State						-
Haledon, NJ							BD	Morrisville, F	PA					
Completed By (Print or Type)	Title		-				Signature			Date			-154,100	
Tailor Dominguez		ject	Mana	ger				horde-	111	Jale				
SB 41				J		- N		185	WES.	8				

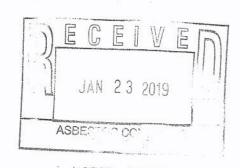
Charatader		NOTIF (P	ICATIO	tate of New Jer N OF ASBESTO t to NJAG 8:60	SABATE	MENT				7 [\mathbb{V}	E
Date of Notification (1) 01/17/2019		T		of Building Owner Chemical Co		r (2)		1	JA	N a	2 3	201	9 j
Agencies Notified Type Notification		+	Street /	Address			-	A.C.		VT-/- /		N.	
EPA Initial Amended		-		ekeland Ave	nue		- Annual Control	AS	SBES		UC.		- //
X DOL Amendment :		_		esex, NJ 088	46			S					
DOH justification) Cancellation	ricidaling			of Contact Borroni			10000000	ephone 7-249					
				ILITY INFORMA	TION			1-240	-007				
Name of Facility Where Abatement is Taking DOW Chemical Bound Brook - Build	Place (3 ding 21	³⁾				Type of Facility							
Street Address 65 Baekeland Avenue	5269					School (K- Subchapter Other (i.e. petc.)	8 (Oth	er than & comm	K-12) nercia	l buile	dings	, hom	es,
City (5) Middlesex						Square Feet 5500	# o	f Floors		1000	ldg. <i>A</i> 0+	Age	
County (6) Middlesex			County (STATE	Code (7) USE ONLY)		Current Use (Pri Offices/Labs	or if bei	ng dem	olishe	ed)			
Name of Monitoring Firm Hired by Building O One Source Safety and Health	wner (8)		ASCI	M No.		of Abatement Condenburg Indus			Cor	npa	ny		
Street Address 140 S. Village Ave, Suite 130						Address Spillman Driv	e						
City, State, Zip Code Exton, PA 19341						State, Zip Code lehem, PA 180	15						
Project Manager for Monitoring Firm			Telepho	ne No. 24-5525	FEEDO-0-10-0	none No. 691-1800		Licens					
	Schedule	ed Com		Date (11)	Name	of OSHA Monitor denburg		0072	1				
Occupancy Status During Abatement (Check	Only Or	ne)			Street	Address							
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal Other – Describe: DEMO - 03/04/2019 -	al Facility	Hours	ent		City, S	Spillman Drive tate, Zip Code							
Scope of Work (Check All That Apply)					Beth	lehem PA 180	15		Шерте				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	_	Renoval Demoliti			×	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	edure					e.	
		Location									Abate	ement	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normall d Solel intenan todial S (12)	y by ice/	Asbestos Co (i.e. therm sur		faterial (ACM) s insulation, T, or	(S	mount specify or LF)		Remova	Repair	Encapsulate	Enclosure
1st Floor	Yes	No	N/A									te	
1st Floor Roof			X	Floo	r Tile/M	astic	200	80 SF	-	X			
11001			^		Roof		200	00 SF		X			
									-				
Name of Registered Waste Hauler		100000000000000000000000000000000000000	JDEP W auler ID		c Yards aste	Name of I	Registe	red Lan	dfill				
Brandenburg Industrial Service Co			838	100		GROW		th					
City, State Bethlehem, PA				4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	osal Date 19-2/28/	City, State 19 Fairless		PA					
Completed by Stephen Carne	Title Envir	onme	ntal M	anager	Signaturé				Date 1/1)		

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Date of Notification (1) 01/17/2019				Building (Chemica			(2)				JAN	20	-20	15	
Agencies Notified Type Notification X EPA X Initial		11 3	Street Ad 65 Bae	ddress ekeland	Avenu	е				ASB	ESTO (10	15 CI	DNO.	77. •======	3
DEP Amended Amendment #		1 0	Third	te, Zip Co sex, NJ						59 34.0					
■ DOH	ricidality		Name of Ken Bo	Contact orroni						ephone 7-249					
Nome of Facility Where Abstract is Taking	Dlaga (2)		FACIL	LITY INFO	RMATI	ON	Tun	o of Facility (4)		75.11.E				
Name of Facility Where Abatement is Taking DOW Chemical Bound Brook - Build							Тур	e of Facility (65 						
Street Address	3						H	School (K-1 Subchapter	8 (Oth	er than	K-12)				
65 Baekeland Avenue							×	Other (i.e. p etc.)	rivate	& comm	nercial				S,
City (5) Middlesex							800	303	3	f Floors		40	dg. A	ge 	
County (6) Middlesex			County C STATE U	Code (7) ISE ONLY)				rent Use (Pric fices/Labs	or if be	ing dem	nolishe	d)			
Name of Monitoring Firm Hired by Building C One Source Safety and Health	wner (8)		ASCM	No.				batement Con burg Indus			e Con	npar	ny		
Street Address 140 S. Village Ave, Suite 130						Street 2217		ess illman Drive	Э						
City, State, Zip Code Exton, PA 19341	on, PA 19341 Bethlehem, PA 18015														
Project Manager for Monitoring Firm															
	Scheduled 02/28/19		pletion [Date (11)		Name Bran		SHA Monitor burg							
Occupancy Status During Abatement (Check	Only One)				Street			0						
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe: DEMO - 03/04/2019 -	al Facility	Hours	ent		_	City, S	tate,	Illman Drive Zip Code em PA 180							
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		enovat emoliti				×	N G	full Containme Mini-Enclosure Blovebag Prod Ion-Exempted	e edure					e	
Location of		_ocatio			Da	scription							Abate		
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mair Custo	Solel ntenan odial S (12)	ice/		os Cont thermal surfa		fateri s insu T, or		(Amount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A											te	· CD
Throughout			X			Insula				40 LF		X		-77272	
Throughout			X			ittings				15 EA	_	X			
1st Floor			X			ransite	-			12 SF		X	-		
Roof		1	X			f/Flash	ing			000 SF		X			
Name of Registered Waste Hauler Brandenburg Industrial Service Co		Ha	JDEP Wauler ID 838		Cubic of Was 150	ste		Name of GROW	S No		ndfill				
City, State Bethlehem, PA						sal Date 9-2/28/		City, State Fairless		, PA					
Completed by Stephen Carne	Title Enviro	nme	ntal Ma	anager	S	ignature	_	12			Date 1/1	e 7/19	9		

Location B 205 Exterior

Description Window Caulk

Amount 70 SF REMOVAL X



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Date of Notification (1) 1/9/2019				Name o	of Building uction H	Owner/e	Operator s LLC	r (2)			7/	N 2:	3 20	110	
	pe Notification				Address East 18th	n Stree	et			- la				113	
DEP X DOL	Initial Amended Amendment				ate, Zip Co son NJ						ASBE	STOG (, r , r , r , r , r , r , r , r , r , r	<u>r</u>
DOH DCA	Emergency (injustification) Cancellation	ncluaing			of Contact o Stanko		roject N	Mana	ıger		ephone 73-570-				
Name of Facility Where Aba	tement is Taking	Diago (3/	FAC	ILITY INF	ORMAT	ION	-							
N/A	terrient is Taking	riace (3)					Тур	e of Facility (
Street Address 190 Governor Street								×	School (K-1 Subchapter Other (i.e. petc.)	8 (Oth	er than h & comme	(-12) ercial bu	lding	s, horr	nes,
City (5) Paterson								Squ 7,8	are Feet	# o 3	f Floors		Bldg. 75	Age	
County (6) Passaic					Code (7) USE ONLY)		Curr	ent Use (Prio	or if be	ng demo	lished)			
Name of Monitoring Firm Hir	ed by Building C	wner (8))	ASCI	M No.		Name Che	of Ab ckma	atement Cor ark Industr	tractor	(9)				
Street Address							Street 54 N		ess an Dr						
City, State, Zip Code	***************************************								Zip Code J 07871						
Project Manager for Monitoria	ng Firm			Telepho	ne No.		Teleph	none N			License 01334	3,000 D T 10			
Start Date (10) 1/10/2019		Schedul	ed Cor	mpletion	Date (11)		Name	of OS	HA Monitor ark Industr	ial	0100-	-			
Occupancy Status During Ab	atement (Check						Street	Addre	ess	iai					
Facility Closed/Vacated Abatement Performed C Other – Describe:	During Entire Po Outside of Norma	eriod of all Facility	Abater / Hour	nent s				tate, 2	Zip Code						
Scope of Work (Check All Th	ot Annly)					_	Spar	rta N	J 07871						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	αι Αρριγ)	Committee	Renova Demoli				×	Mi Gl	ill Containme ni-Enclosure ovebag Proc on-Exempted	edure				re	
Is Location							Abat	emen	t						
Location of Asbestos-Containing Mate	erial (ACM)	Use	Norma d Sole	ly by	A-b		scription aining M						T -	уре	-
TO BE ABATEI In Facility (13)			intena todial ((12)			thermal surface	systems cing, VA niscellan	insul T, or	ation,	(S	mount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A								=		ate	0
Roof			Χ			roofir	ng mate	erial		6,1	70 SF	Х			
Roof			Χ			pipe	insulat	tion		20	00 LF	Х			
Roof			Χ			fla	ashing			42	9 SF	Х			
Name of Registered Waste H	auler		N	JDEP W	aste	Cubic	Yards		Name of F	Registe	red Land	fill			
Atlantic Carting			Н	lauler ID	No.	of Was			Waste N						
City, State Wayne NJ						Dispos	al Date		City, State Tulleyto		Ą				
Completed by Corey Stankovic	ayne NJ mpleted by Title					S	ignature	(<	FRIKA	U		Date 1/9/20	19		

Ch 2ldo		NOTIF	S ICATIO ursuan	tate of Ne NOFASE TO NJAC	w Jerse ESTOS 8:60 an	y ABATE d-12:12	MENT 0))_[C	E		V	
Date of Notification (1) 1/11/2019			Name of Euge	of Building ne Bony	Owner/0 /enca	Operator	r (2)				IAN	1 2	3 2)19	
Agencies Notified Type Notification			Street A	Address							OAN		0 2	JiJ	
EPA Initial Amended Amendment	#			ate, Zip C nne NJ					anner a	AS	BEST	000	YOY UUU	1,7,2	e ·
DOH justification) Cancellation	including		Name o	of Contact ne Bony					Tel	enhon	e Nur	nber			
Name of Facility Where Abatement is Taking	Place (3)	FAC	ILITY INF	ORMAT	ION	Type	of Facility (4	1)						
N/A Street Address							I S	School (K-1; Subchapter Other (i.e. poetc.)	2) 8 (Oth	er thar & com	n K-12 mercia	?) al buil	dings	hom	es,
City (5) Bayonne							Squar 2,39	e Feet 3	# 0	f Floor	s		ldg. A		
County (6) Hudson				Code (7) USE ONLY)		Curre	nt Use (Prio dence	r if bei	ng der	nolish	ed)			
Name of Monitoring Firm Hired by Building C	wner (8))	ASCI	/I No.				ement Con k Industri		(9)					
Street Address						C-00 Res C. 100 P. C.	Addres /lorgar								
City, State, Zip Code							state, Zi	p Code 07871							
Project Manager for Monitoring Firm			Telepho	ne No.			one No 570-2			Licer 013	nse No	D.			
Start Date (10) 1/13/2019	Schedul 1/18/2	ed Cor	npletion	Date (11)				A Monitor k Industri	al						
Occupancy Status During Abatement (Check	Only Or	ne)				Street	Addres	s							
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe:	eriod of A	Abaten / Hours	nent S			City, S	forgar								
Scope of Work (Check All That Apply)		No. No.				Эраг	ila INJ	0/6/1							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				×	Min Glo	Containme i-Enclosure /ebag Proce -Exempted	edure						
	1985	Locati					_ 11011	Exempted	() and	14011	1 Habi		Abate Ty	ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	d Sole intena todial S (12)	ly by nce/	Asbes (i.e.	tos Cont thermal surfac	scription aining M systems cing, VA niscellan	laterial s insulat T, or	(ACM)	(S	mount pecify or LF		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A									al	_	late	ire
Furnace		Χ				pipe			20	0 LF		Х			
Name of Registered Waste Hauler Atlantic Carting		UNBAN	JDEP W auler ID		Cubic of Was			Name of R Waste N							
City, State Wayne NJ					Dispos	al Date		City, State Tulleyto	wn P	4					
Completed by Corey Stankovic Title CEO Signature		~		Date 1/	e 11/20)19									

10 Ch	-	NOTII	FICATIO	State of New Jers ON OF ASBESTO nt to NJAC 8:60 a	SABATE	MENT 0)	1		W-	E	
Date of Notification (1)			5	of Building Owner		. 1	JAN JAN	23_	2019		- 1
Agencies Notified Type Notification EPA Initial			Street	CQUeline Address	Jan	itos	ASBESTO	1001 (5)			
DEP Amended Amendment Emergency		10	1 .	State, Zip Code OCOU of Contact	7 (01307					
DOH justification) DCA Cancellation			TO	Caupline	50	ntos	Telephone N	umber		{	
Name of Facility Where Abatement is Takin	g Place	(3)	FA	CILITY INFORMA	TION	Type of Facilit	y (4)				
Street Address				jt.		School (H Subchapi Other (i.e etc.)	K-12) ter 8 (Other than K- c. private & commer	12) cial bui	ldings	, hom	ies,
City (5) Kearny						Square Feet	# of Floors		Bldg. /	Age	
County (6) Hudson			County (STATE	Code (7) USE ONLY)		Current Use (F	Prior if being demolis	shed)			
Name of Monitoring Firm Hired by Building Comego environmental	Owner (8 <u>9 52</u>	3) (Vices	ASC	M No.	Street	Address	environne	nfa	0 1	lc.	
280 Huyler Street	<u>+</u>			•	City, S	Vree Vov	nd owe	50735B1B	<u> </u>		
Project Manager for Monitoring Firm	KI			OO(o one No.	Teleph	one No.	ckensacy License	- r	5()H	ما0م
Mr. deiser fatardo	Schedu	led Con	npletion	48q-8700 Date (11)		-546-2 of OSHA Monito		43			- {
O 1 3 19 Occupancy Status During Abatement (Check	0) (Only 0	29/1	g		Nich		145,5				
Facility Closed/Vacated During Entire Padbatement Performed Outside of Normal Other – Describe:	eriod of	Abatem	nent		390 City, St	ate, Zip Code	baw				
Scope of Work (Check All That Apply)					wn:	te Pla	I PU eni	00	03		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoliti			124	Mini-Enclosu Glovebag Pro	ocedure				
		Location				Non-Exemple	ed (*) and Non-Friat	ole Pro	Abate	ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED DESCRIPTION	Use Ma	Normall ed Solel aintenar todial S	y by ice/	Asbestos Cont (i.e. thermal	systems	aterial (ACM) insulation.	Amount (Specify	R	Ту		E I
In Facility (13)		(12)		surfa other n	cing, VAT niscellane	or (ous)	SF or LF)	Removal	Repair	Encapsulate	Enclosure
Kitchen	Yes	No X	N/A	Pipe in	Sulte	β C	1011	X		ie i	
Basement		Х			Scela		7019	X			
							7001	1			
Name of Registered Waste Hauler		1	IDEP W			Name of	Registered Landfill				
Newark Carting	3		20x	1509	al Date	Tes City, Stat	SI		4		
Newark no	Title					100	nlehem po	a 1	80	15	
Darcellys mora		Fic.	e M	ianager si	gnature	\supset	Da	te i / i ·	2/	Û.	

B & G proj. #: 2019-19

State of NJ
Notification of Asbestos Abatement
(Pursuant to NJAC 8:60-7 and 12:120-7)

	•	•			D	Check	# 9114_		2 2	77	_
Date of Notification (1)	Name of E	Building Own	er/Operator (2)		Briston and the control of the contr	E) E C	9 [W	E
10 11 1/1 18 1/1 19		Taylor	•					ם נו	<u> </u>	U	
Agencies Notified Type Notification EPA Initial	Street Add	ress			MITTER STATE OF THE STATE OF TH		JA	N	2 3	201	9
DEP Amendment	City, State					-					
	Linder	n, NJ 0703	36				ASBES	TO	00		
DCA Cancellation	Name of C Willian	n Taylor				l elephoni	e Number	to compa			
	Ш —	FAC	ILITY INFORM	ATIO	N						
Name of facility where abatement is tak	ing place (3)					Type of Facility (
William Taylor							I (K - 12)			46)	
Street Address						X Other (apter 8 (Oti Private/Co Homes, etc	mme		-12)	
						Square Feet	# of Floors		Blo	dg. A	ge
City (5)	County (6)			1000000	unty Code (7) ate use only)	Current Use (Pr	ior if heing	dem	olishe	hd)	
Linden, NJ 07036	Union			,		residential	ior ii beilig	uciii	0113110		
Name of Monitoring Firm Hired by Bldg.	Owner (8)		ASCM No.		Name of Abatement C	202		2000			
Street Address			n/a	_	B & G Restoration	on, Inc.					
Street Address					105 Ryerson Ro	oad					
City, State, Zip Code					City, State, Zip Code Lincoln Park, N	J 07035					
Project Manager for Monitoring Firm	F	Phone Numb	per		Telephone Number (973)696-6869)	License N		er		
Scheduled Start Date (10)	Sched. Comple	tion Date (1	1)	_	Name of OSHA Monit						
01/29/2019	01/30/2019		17		B & G Restoration	on, Inc.					
Occupancy Status During Abatement (Ch	neck only one)				105 Ryerson Ro	pad					
Facility closed/vacated during entir Abatement performed outside of no					City, State, Zip Code						
Describe: Other-Describe:				=1	Lincoln Park, N.	J 07035					
Scope of Work (check all that apply) Demolition Ren				П	Full Containment w/neg	F					
	ovation ovation ovation			_	Mini-enclosure	ative pressure	Gloveba	•			
	ocation normally	y used solely	y					R	R	E	\ _
ashestos-containing by i	maintenance/cu ff(12)	ıstodial			asbestos-containing	Amount (Specify S	For	e m	e p	n	n
abatad in facility (12)	es No	N/A	material (ACM)	LF)	. 01	o v e	a i	a p	L
pasement		×	pipe insula			66 If		X			
pasement		×	pipe subs	trate		15 lf		무		X	
	-	#	1	-	And the September of Market September 1	-		屵		H	H
	-	#]					片	금		一
Registered Waste Hauler B & G Restoration, Inc.	NJDEP Haule 19563	r ID# C	ubic Yards of V	Vaste		Landfill htral Landfill					
City, State Lincoln Park, NJ		Disposal D	Date 30/2019		City, State Pen Argyl, I						
Completed by (Print or Type) Title	e cretary/Treas	surer	Signature		Gordana Luna		Date 01/18	/201	9	- V	

B & G proj. #: 2019-18

State of NJ
Notification of Asbestos Abatement
(Persuant to NJAC 8:60-7 and 12:120-7)

Check # 9113

Date of Notification (1) Name of Building Owner/Operator (2) 10 11 1/11 18 1/11 19 Steven Singer Type Notification Agencies Notified Street Address ☐ EPA JAN 23 2019 Initial ☐ DEP City, State, Zip Code Amendment X DOL Montclair, NJ 07042 ASBESTOR CO X DOH Name of Contact Telephone Number Cancellation ☐ DCA Steven Singer **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Steve Singer Subchapter 8 (Other than K-12) Other (Private/Commercial Street Address Bldgs./Homes, etc. Bldg. Age # of Floors Square Feet City (5) County (6) County Code (7) (State use only) Current Use (Prior if being demolished) Montclair, NJ 07042 Essex residential Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. n/a B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number License Number Project Manager for Monitoring Firm Phone Number (973)696-6869 00378 Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) B & G Restoration, Inc. 01/31/2019 02/01/2019 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Lincoln Park, NJ 07035 Other-Describe: Scope of Work (check all that apply) Demolition X Renovation ☐ Full Containment w/negative pressure Glovebag procedure Non-friable procedure >3 sf or >3 If Mini-enclosure >160 sf or >260 lf Is location normally used solely E Location of E e е by maintenance/custodial n Amount asbestos-containing Description of asbestos-containing n m staff(12) (Specify SF or material to be C material (ACM) 0 a a LF) abated in facility (13) Yes No N/A p file room, main room, boiler pipe insulation 160 If X room, storage room & bottom of stairs Cubic Yards of Waste Name of Registered Landfill Registered Waste Hauler NJDEP Hauler ID# Grand Central Landfill B & G Restoration, Inc. 19563 2 1/2 Disposal Date City, State City, State 02/01/2019 Pen Argyl, PA Lincoln Park, NJ Completed by (Print or Type) Signature Ciordana Luna Gordana Luna Secretary/Treasurer 01/18/2019

Poch DletDl	78°	NOTIFE (P	CATION ursuant	of ASBE to NJAC 8:	stos i :60 and	1 12:120)	:) [2	J 70	int E
Date of Notification (1) 01/18/2019				of Building O Ort Author				& New Jer	sey		OAN	-		10
Agencies Notified Type Notification EPA Initial			Street A 70 Bre	ddress ewster Ro	ad					AS	BEST	09.0	Oì	
DEP X Amended Amendment #				ate, Zip Cod rk, NJ 071						1	:			-
■ Emergency (ir justification) ■ DCA	nciuaing			f Contact el DaCost	ta		-		V - 0 - 0 0 0 - 0 - 0 0 0 0 0 0 0 0 0 0	hone N 961-6		ð		
			FACI	LITY INFOR	RMATI	ON						V 129		
Name of Facility Where Abatement is Taking Newark Airport	Place (3	3)					(month)	of Facility (4 School (K-12						
Street Address 350 Scargo Earhart Drive							×	Subchapter 8 Other (i.e. pr etc.)	Other t	than K	-12) rcial bu	ilding	s, home	es,
City (5) Newark							Squa N/A	are Feet	# of FI N/A	loors		Bldg. 35+	Age	
County (6) Union				Code (7) USE ONLY)		_		ent Use (Prio lerground l			ished)			
Name of Monitoring Firm Hired by Building Of Matrix New World Engineering	wner (8)		ASCN	/ No.				atement Cont urg Indust		500 and 100	Comp	any		
Street Address 26 Columbia Turnpike						Street /		ss man Drive						
City, State, Zip Code Florham Park, NJ 07932								Zip Code n, PA 1801	15				13	
Project Manager for Monitoring Firm			Telepho	ne No. 10-1800		Telepho	one N	lo.	L	icense	No.			
	Schedule	ed Con		Date (11)		Name o	of OSI	HA Monitor		0121				
Occupancy Status During Abatement (Check						Brand Street /			<u> </u>					
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal Other – Describe: Piping is subsurface of Normal	I Facility	Abatem Hours	ent			City, St	ate, Z	man Drive ip Code n PA 1801						
Scope of Work (Check All That Apply)						Detrill	CHE	II FA 1001	3					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoliti				×	Mir	Il Containmer ni-Enclosure ovebag Proce n-Exempted	edure				ıre	
Location of		Location			Des	cription						Aba	tement ype	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Solel intenar todial S (12)	nce/	100000000000000000000000000000000000000	s Conta nermal : surfac		ateria insula r, or	ation,	Amo (Spe SF or	cify	Removal	Repair	Encapsulate	Enclosure
Underground Fuel Piping	Yes	No	N/A X	Bloc	ok Tor	Mastic	o/Doi	nor	4000	115	v	-	Ф	
onderground Lact Fibility			^	Diac	JN I dl	iviasti	ura	hei	4000	, LP	X		-	
Name of Davids and Alexander		1	IDEE:											
Name of Registered Waste Hauler		H	JDEP W auler ID 1838	No.	Cubic \ of Was 500	200		Name of R Minerva			till			
Brandenburg Industrial Service Co		-						1						-
City, State Bethlehem, PA					6.0	al Date 3-3/28/	19	City, State Waynesl	ourg, O	Н				

Check # 25773

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

	120)			2 @	F	3 N	1/1	7 12								
Date of Notification (1) 1/19/2019		Name of	f Building Ov	nc)	E C	L	3		<u> </u>							
Agencies Notified Type Notification		Street A	ddress	404 5		JAI.	V a	2 3	201	19						
× EPA × Initial		-	City Sta	te Zin Code	491 E	10.2 LA										
X DOL Amendment										mo	CC	1	7-1			
□ Emergency (in justification) □ DCA □ Cancellation	Name of Contact								ASBESTOS COL							
			FACI	LITY INFOR	RMATION											
Name of Facility Where Abatement is Taking Residential		Type of Facility (4)														
Street Address						\dashv	School (K-12) Subchapter 8		<-12)							
	×	Other (i.e. pri	vate & comme	ercial b	uildir	ngs, l	nome	s,								
City (5)						Square Feet # of Floors Bldg. Age										
Somerset, NJ 088	373					2 85+/-										
County (6) Somerset			County (JSE ONLY)		Ci	urrent Use (Prior	if being demo	olished)							
Name of Monitoring Firm Hired by Building C Environmental Tactics		ASCN	1 No.		Name of Abatement Contractor (9) Stevens Environmental Services, Inc.											
Street Address 64 Broad Street						Street Address PO Box 322										
City, State, Zip Code Matawan, NJ 07747	/3	City, State, Zip Code Allentown, NJ 08501														
Project Manager for Monitoring Firm Tom Geiger		Telephor (732) 2	ne No. 290-2217	7,33307	elephone No. License No. 009 259-9688 00493											
Start Date (10) 2/5/2019	d Con		Date (11)	1000000	me of 0	ne of OSHA Monitor										
Occupancy Status During Abatement (Check	Stre	Street Address														
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe: 8 am 4 pm		PO Box 341 City, State, Zip Code Chesterfield, NJ 08515														
Scope of Work (Check All That Apply)					- 01	ieste	illeiu, NJ 005	15	-	_						
≥3 sf or ≥3 lf										nt with Negative Pressure edure (*) and Non-Friable Procedure						
8	Locati	7			-0.				Abatement Type							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	d Sole ntena odial S (12)	ly by nce/ Staff?	(i.e. th	s Containin ermal syste surfacing,	escription of ntaining Material (ACM) al systems insulation, facing, VAT, or miscellaneous)			1000	Removal	Repair	Encapsulate	Enclosure				
16 A Exterior	Yes	No X	N/A	88	Transite	Cidi-	_	2200 sf	-	_	+					
7/2/2/2 (2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/		- 2000				The second secon				-						
16 B Exterior		X			Transite	g	1320 sf X 664 sf X			-						
Main Floor / 2nd Floor X				VAT				664 sf	- 2	2	-		_			
Name of Registered Waste Hauler		N	JDEP W	/aste	Cubic Yard	s	Name of R	egistered Lan	dfill							
Stevens Environmental Services	NJDEP Waste Hauler ID No. 18292 Cubic Yards of Waste Fairless L															
City, State Allentown, NJ			Disposal Da 2/15/201		City/State Morrisvill											
ompleted by Title ahlon E. Stevens Project Manager						Signature Date 1/19/201						19				

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

Check # 25772

					to NOAO	S254-500-250-40.00				1	11	F	C.	F	11	\mathbb{V}		
Date of Notification (1) 1/19/2019					Name of Building Owner/Operator (2)								<u> </u>		<u>u</u>			
Agencies Notified Type Notification					Chuang								v - 2,000		Si see			
				Street Address							Ш		AN	2 3	3 20)19		
EPA DEP	Initial Amended		H	City, Sta														
X DOL	Amendment		Princeton, NJ 08540							-	ASBESTOS CON							
⊠ DOH	Emergency (justification)	Name of Contact									Telephone Number							
DCA Cancellation Ivy Wen - Realtor FACILITY INFORMATION										4								
Name of Facility Where	FACI	ILITY INFO	DRMATI	ON	Tv	oe of Facility (4)				7							
Traine or radiily vinoro					School (K-12)													
Street Address										Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes,								
City (5)		27,2						etc.) Square Feet # of Floors Bldg. Age										
	Princeton, NJ 08	3540							2000	The second secon			95+/-					
County (6) Merce	r				Code (7) USE ONLY			Current Use (Prior if being demolished)										
Name of Monitoring Firm MECS	Hired by Building (Owner (8)		ASCN	ΛNo.	Abatement Contractor (9) as Environmental Services, Inc.												
Street Address PO Box	341		11.1111				Street Address PO Box 322											
City, State, Zip Code Ci									City, State, Zip Code Allentown, NJ 08501									
Project Manager for Mon		Telephone No. Telep						License No.					_					
Bill Weisgarber		(609) 298-4070 609				259-9688 00493												
								Name of OSHA Monitor MECS										
									eet Address									
Facility Closed/Vaca Abatement Perform Other – Describe:			PO Box 341 City, State, Zip Code															
			_	Ches	ster	field, NJ 08	515		-17 23									
Scope of Work (Check A	Il That Apply)					7												
								Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure										
	ation					von-Exempled	a () and	NOITE	nable	Abatement								
Location	Normal		De	scription of							Туре							
Asbestos-Containing <u>TO BE AB/</u> In Facili (13)	d Sole intenar todial S (12)	nce/ Staff?		tos Cont thermal surfa	ontaining Material (ACM) nal systems insulation, facing, VAT, or r miscellaneous)			(Sp	Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure				
		Yes	No	N/A											W			
Basement X					Thermal Pipe Ir						30 If		X					
Crawl Space X					Thermal Pipe Insu								X					
							ap & C	ut)										
Name of Registered Was	h1	IDED W	losto	Cubic	Vord-		No	Dogists	ad I = -	46"								
Stevens Environmen		JDEP Waste						egistered Landfill Landfill										
City, State Allentown, NJ				V	al Date /2019	Λ	City, State											
Completed by		Title					ignature	# 1	1//			Date			-			
Mahlon E. Stevens Project Manager							1/4	1	1/			1	/19/	2019	9			



CK#858

Date of Notification (1)					Name	of Buildin	g Owner/Operator (2)	FOR	J [= n	0.0				
01 / 21 / 19						izon	g Owner/Operator (DECEIVE								
Agantia Natified					080732				1-1/2							
Agencies Notified EPA	Type Notification	ation			000000000000000000000000000000000000000	Address				AI /	2 2	004				
⊠ DOLWD	⊠ Amended	4				erizon W		JE U J	N C	2 3	201	y				
☑ DHSS	Amendm					State, Zip (
☐ DCA	☐ Emergen		ding			sking Rid		ASBES	TOC	CO		0.1.0				
(NJAC 5:23-8)	justificati					of Contac			Telephone Number 301-802-5112							
	☐ Cancellat	tion			Bria	an Kings	bury			ese com						
					FA	CILITY IN	IFORMATION									
Name of Facility Where A	Abatement is 1	Taking Pl	ace	(3)		Type of Facility (4)										
Verizon						School (K-12)										
Street Address						☐ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings,										
399 Clinton Avenue)					homes, etc.)										
City (5)				Square Feet # of Floors Bldg. A												
Wyckoff, NJ 07481								10,000	3							
County (6)					Cour	nty Code (7)(STATE USE ONLY)	Current Use (Prior if being demolished)								
Union																
Name of Monitoring Firm	Hired by Build	ding Owr	er (8	3)	ASCM	No.	Name of Abateme	ent Contractor (9)		1077						
ESIS Health and Sa	fety						JVN Restoration Inc									
Street Address	-						Street Address									
10 exchange Place			47 Foster Road													
City, State, Zip Code		City, State, Zip Code														
Jersey City ,NJ 073	02					Staten Island NY 10309										
Project Manager for Moni		No.	Telephone No. License No.													
Chrispher Pierce		3165	718-605-6256 00774													
Start Date (10)	Schedule	te (11)	Name of OSHA Monitor													
01 /28 /	19	03	_ /	31	/	Testor Tech										
Occupancy Status During	Check or		Street Address				-		_							
☐ Facility Closed/Vacated During Entire Period of Abatement							10 59 Jackso	n Avenue								
Abatement Performed Outside of Normal Facility Hours - Description						cribe	City, State, Zip Co	ode					-			
Time of Abatement:AMPM/ <u>5:00</u> PM- <u>1:30</u> AM							LIC NY 11101									
Scope of Work (Check all	that apply)												\dashv			
U - 2 - 5 2 5	-					ainment with Neg	ative Pressure									
□ ≥3 sf or ≥3 lf ☒ Renovation ☒ ≥160 sf or ≥260 lf ☐ Demolition							☐ Mini-Enc									
⊠ ≥160 sf or ≥260 lf																
			ocati			***************************************			Abatement Type							
Location of No.					ly ly by		Description o			Remova	_	1000	T			
Asbestos-Containing I TO BE ABA				itena			stos Containing Ma ., thermal systems i		Amount (Specify		Repair	nca	nclo			
IN Facility Custodi					Staff?	(surfacing, VAT,	SF or LF)		=	Encapsulate	Enclosure				
(13)		_	es	(12) No	N/A		other miscellane				ate	O				
4ST EL COR PREAK D	0014					FI 00D	TU E /MACTIC		400.05							
1 ST FLOOR BREAK ROOM							TILE /MASTIC		180 SF							
Basement 🗵 🗆						FLOOR	TILE MASTIC	30SF								
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]															
Name of Registered Wast		Naste	Cubic Yards of	Name of Regis												
Newark Carting Hauler ID No. NJ-566							Waste 20	G.R.O.W.S	., Inc.							
City, State							Disposal Date	City State								
Hackettstown, NJ							01/31/19	Morrisville	,PA		.000					
Completed By (Print or Ty	rpe)	Title	-				Signature	1	Dat	e	1		-			
Charles Tardy		Proj	ect	Man	ager		1 \ \ \ \ \ \			Ì	12	1	9			