State of NJ Notification of Asbestos Abatement

D&S Proj. #: 2014-24	*					and 12:120)						
		11/1	MAG	5472								
Date of Notification (1)	Nam	110		r/Operator (2)					- 4		-	+
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Agencies Notified Type Notificati		et Address		OCTION				- /	001	,	1	T
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DEP Amendment #:		State, Zip									8	3
DOL Emergency		ILLSIDI	E, NJ 07	205								}
DOH (including justification)		e of Conta				_	Telephone	Number		ś	100	.,
DCA Cancellation	ll A	LISON	LAMER	S								_
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Name of facility where abatement is	taking place	(3)					Type of Facility (4					
RESIDENTIAL BUILDING							School Subcha	(K - 12) pter 8 (Oth	er th	an K-	12)	
Street Address	***						Other (F	rivate/Con	nmer			
225 RETFORD AVENUE								lomes, etc	·	Blo	g. A	ge
City (5)	County	(6)				nty Code (7)	1200					
		7			(Stat	te use only)	Current Use (Pri	or if being	demo	olishe	d)	
CRANFORD	UNIO			1001111-		Name of Abatement	Contractor (9)				-	
Name of Monitoring Firm Hired by E	siag. Owner ()		ASCM No.								
Street Address						D & S RESTOR Street Address	ATION, INC.		-		_	
Street Address						20 California A	ve.					
City, State, Zip Code					-	City, State, Zip Code						
						Paterson, NJ 0	7503					
Project Manager for Monitoring Firm		Pho	ne Numb	er		Telephone Number		License N		er		
						973-345-8020		01	169			
Start Date (10)	Sched. C	ompletion	Date (11)		Name of OSHA Mor D & S Restorat						
01/20/14	01/30/1	4				Street Address	ion, nc.			-		
Occupancy Status During Abatemen	t (Check only	one)				20 California A	venue					
Facility closed/vacated during						City, State, Zip Code	9					
Abatement performed outside Describe:		nity nours	-		_							
Other-Describe: NORMAL H					<u>- 1</u>	Paterson, NJ 0						_
Scope of Work (check all that apply	.5:						Full Containment war	negative p	ress	ure		
>3 sf or >3 lf	Renovation						Glovebag procedure	е				
≥160 sf or ≥260 lf	Demolition						Non-Exempted (*)	and Non-fr	iable R		-	1
Location of	Is location n by maintena	ormally us nce/custo	sed solely idial	900 Y W	2		Amount		е	R	E	E
asbestos-containing material (acm) to be	staff(12)			Description material (sbestos-containing	(Specify SI	For	m o	p a	C	n
abated in facility (13)	Yes	No	N/A		•		LF)		V	ĭ	a p	L
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Registered Waste Hauler		Hauler ID		ubic Yards of	Waste	Name of Registere		COMER	v7			
D & S RESTORATION, INC.	13506		Disposal D	YDS			, RESOURCE RE	COVER	ĭ		-	
City, State PATERSON, NJ 07503		ا	01/21/1			City, State TULLYTOWN	J. PA					
Completed by (Print or Type)	Title			Signature		100011	.,	Date				
BOGDAN JOLDZIC	PRESIDE	T						01/16/2	2014			

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

ASB-41

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) 01/21/2013 PPG Industries Type Notification Street Address Agencies Notified One PPG Place | Initial X EPA DEP Amended City, State, Zip Code DOL Amendment # Pittsburgh, PA 15272 Emergency (including Telephone Number DOH DCA Name of Contact justification) Cancellation Brain Mc Guire FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) Commercial Builiding School (K-12) Subchapter 8 (Other than K-1 2) Other (i.e., private & commercial buildings, Street Address 45 Halladay St., homes, etc.) Square Feet # of Floors Bldg. Age City (5) 15,000 SF 60+ Jersey City, NJ Current Use (Prior if being demolished) County Code (7) (STATE County (6) Vacant Commercial Bldg USE ONLY) Hudson Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner DIA General Construction, Inc. N/A (8) J & S Environmental Laboratories Street Address Street Address 1360 Clifton, Avenue, PMB Suite 218 2333 Rt 22 West City, State, Zip Code City, State, Zip Code Clifton, NJ 07012 Union, NJ 07083 License No. Telephone No. Telephone No. Project Manager for Monitoring Firm 00693 973-389-0089 908-206-0073 Sherry Gelsomino Scheduled Completion Date (11) Name of OSHA Monitor Start Date (10) DIA General Construction, Inc. 02/28/2014 02/04/2014 Street Address Occupancy Status During Abatement (Check only one) 1360 Clifton, Avenue, PMB Suite 218 Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Clifton, NJ 07012 Other - Describe: Scope of Work (Check all that apply) Kull Containment with Negative Pressure Mini-Enclosure Renovation >3 sf or >3 lf Govebag Procedure 2160 sf or 260 lf Demolition Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Туре Normally Description of Used Solely by Location of Asbestos Containing Material (ACM) Amount Maintenance/ Asbestos-Containing Material (ACM) (Specify (i.e., thermal systems insulation, Custodial Remova TO BE ABATED surfacing, VAT, or SF or LF) staff? IN Facility other miscellaneous) (12)(13)N/A Yes No As Attached Name of Registered Landfill Cubic Yards NJDEP Waste Name of Registered Waste Hauler of Waste Hauler ID No. 20970 Minerva Landfill Service Transport Group City, State Disposal Date City, State Waynesburg, OH 44688 02/28/2014 New Castle, DE Signature Title Completed By 01/21/2014 Krutarth Jagad President

State of Navi Jarsey NOTIFICATION OF ASSESTOS ABATEMENT (Pursuant to NJAC 8:50 and 12:120)

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Date of Notification (1)			1	Varne of	Building Or	imer/O	perator (2)						• •	-	1
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City (5)									765	1	L	•	1	+5		
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County (6) BERGO	75-11 B 75-0	**************************************		STATE U	M No		Name (of Ahate	ment Conf		(9)	TAC				
Name of Monitoring Firm	History Building Ch	mer (0)		rau	es Pers		A. MA	C Contr	ading Inc							
Street Address			,					Address owell Ro								
City, State, Zip Code							City, St Glen F	ate, Zip Rock, N.	Code 1 07452							
Project Manager for Mon	toring Firm	•	1	Telepi	none No.			one No. 262-584	1		Licera 001	se No. 56				
Start Date (10)	11.6	Schedule	Name of OSHA Monitor Omega Environmental Services Inc.													
B 6 5			-	0117				Address								
Occupancy Status Durin El Facility Closed/Vaca U Abatement Performs	ded Corrier Entire P	erion of Ab	salenne	ent			City. St	uyer Str ate, Zip	Code			_	-			
Other - Describe:	Si Conside or Language	rs comy .				-	Hade	nsack, l	NJ 07606							
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Name of Registered Wa	sie i-laufer		H	UDEP W lauler ID 20785		of Wa	Yards ste	Ì	IESI PA				orp.			
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Completed by Joseph Vocaturo	**	Operal	ions						rutuo	۸			9	3/	14	<u> </u>

State of New Jersey

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County Code (7) Current Use (Prior If being demolished) City State, 2 p. Code City	114 D	Course C. Av						Sq	•	7077-0	-011	20010				1
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Street Address City, State, Zip Code City And Norther Ci		* .					-15	meet Ack	dress				10.0			1
City, State, Zip Code Project Manager for Monitoring Firm Telephone No. Telephone No. Telephone No. Telephone No. Telephone No. 271-282-5841 Nams of OSHA Monitor Omega Environmential Services Inc. Nams of OSHA Monitor Omega Environmential Services Inc. Street Addresser Containing International During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Coop of Work (Check All That Apply) 2 as of or ≥3 if 2 set or ≥3 if 2 set or ≥2 if 3 set or ≥2 if 4 shesting Containing Illaterial (ACM) Normally Used Solely Ty Non-Exempted (*) and Non-Frishle Procedure Normally Used Solely Ty Non-Exempted (*) and Non-Frishle Procedure Normally Used Solely Ty Non-Exempted (*) and Non-Frishle Procedure Normally Used Solely Ty Non-Exempted (*) and Non-Frishle Procedure Normally Used Solely Ty Non-Exempted (*) and Non-Frishle Procedure Normally Used Solely Ty Non-Exempted (*) and Non-Frishle Procedure Normally Used Solely Ty Non-Exempted (*) and Non-Frishle Procedure Normally Used Solely Ty Non-Exempted (*) and Non-Frishle Procedure Normally Used Solely Ty Non-Exempted (*) and Non-Frishle Procedure Normally Used Solely Ty Non-Exempted (*) and Non-Frishle Procedure Normally Used Solely Ty Non-Exempted (*) and Non-Frishle Procedure Normally Used Solely Ty Non-Exempted (*) and Non-Frishle Procedure Normally Used Solely Ty Non-Exempted (*) and Non-Frishle Procedure Normally Used Solely Ty Non-Exempted (*) and Non-Frishle Procedure Normally Used Solely Ty Non-Exempted (*) and Non-Frishle Procedure Normally Used Solely Ty Non-Exempted (*) and Non-Frishle Procedure Normally Used Solely Ty Non-Exempted (*) and Non-Frishle Procedure Normally Used Solely Ty Non-Exempted (*) and Non-Frishle Procedure Normally Used Solely Ty Non-Exempted (*) and Non-Frishle Procedure Normally Used Solely Ty Non-Exempted (*) and Non-Frishle Procedure Normally Used Solely Ty Non-Exempted (*) and Non-Frishle Procedure Normally Used Solely Ty Non-Exempted (*) and Non-Frishle Procedure Normally Used Solely Ty Non-Exempte	Street Address						17	105 Low	eli Roa	d						_
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Location of Normally Used Solety by Maintenance/Custodial Staff? (12) TO BE ARATED In Facility (13) Yes No N/A PIRE IN SULLIFON Name of Registered Waste Hauter Rowic Transport Cary, State, Zip Code Rethermore, NJ 07457 Completed by Maintenance (ACM) Ashestos Containing Material (ACM) Ashestos Containing Material (ACM) Ashestos Containing Material (ACM) (Specify Sero LF) (Specify Sero LF) Ashestos Containing Material (ACM) (Specify Sero LF) (Spec						· ·			-					MOSILE		
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	Joseph Vocaturo	1	Oper	ations					- V.	Tulis	NO.					

CK*00433228

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

Date of Notification (1)		Name of Buildi		Operator (2)							
January 21, 2014				Hess Corporat	ion			0014			
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Agencies Notified		Notification	<u>Type</u>		Street Address	i	8. 4				
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(x) EPA		(x) Initial No () Amende	tification	on.	City, State, Zip	Code				•	
() DEP		() Cancelle		OII	Woodbridge, N				9.3		
(x) DOL (x) DOH		() Caricelle	·u		vvoodbridge, r	0 01000		100			
() DCA					Name of Conta	act	Lī	[el. Number	t oraș	192 190 13	
() DCA	1				David Dolnick	101			-		
	1			FACILITY IN	FORMATION					2200	
Name of Facility Where Ab	atament is Ta	king Place (3)	TAGILITY	Type of Facility	(4)				77.XX	172.2
Hess Corporation Refinery		iking riace (21		() School (K-1						
Hess Corporation Reinlery					() Subchapter	8 (other th	nan K-12)				1
Street Address	0.00				(x) Other (i.e. p	orivate & co	ommercial bldgs.	, homes, etc.			1
750 Cliff Road							W. W.				ed ii
100					Sq. Feet5	12,943	# of Floors	s NA			
City (5)	County (6)		County Co								1
Port Reading	Middlesex		(State Use	e Only)	Bldg. Age 5	5 years	g demolished)_R	ofinon			1
					Current Use (p	orior it being					-
Name of Monitoring Firm H	ired by Bldg.	Owner (8)	ASCM No	<u>).</u>		*	Name of Contr		0		1
							Brandenburg I	ndustrial Serv	ice Con	прапу	1
Street Address					Street Address						
					2217 Spillman	Dr.					
					City Chata Zin	Codo			-		
City, State, Zip Code					City State, Zip Bethlehem, PA						
					betilenen, FA	10015					
D : 114	des Ciere I	Talanhana	Number		Telephone Nu	mher		icense Numb	er		- 2000
Project Manager for Monito	ring Firm	Telephone I	Number		(610) 691 - 18		107	00721	<u></u>		- 1
	1				(010) 001 10	00					
Scheduled Start Date (10)		Scheduled	Completion	Date (11)	Name of OSH	A Monitor					
Demolition – February 4, 2	014	Demolition -			Traine or cons						3
Asbestos – March 3, 2014	014	Asbestos -	April 25, 20	14							
Occupancy Status During A	Abatement (C	heck only or	ne)		Street Address	3					020
(x) Facility Closed/Vacated	During Entire	e Period of A	batement			-					
() Abatement Performed (Outside of No	rmal Facility	Hours -								
* * * * * * * * * * * * * * * * * * * *					City, State, Zir	Code	222				
Describe - Removal of ACM	In closed/sh	nutdown refi	nery								
1 ASSESSED TO THE PROPERTY OF			• 200-200-20								
Other - Work Hours will be	Mon – Fri 7:	00 am - 3:30) pm		1						
	0 1 1 1	-		_							
Source of Work (Check all	that apply)										
(a) Demolition () Bono	votion										
(x) Demolition () Renov (x) Large Proj. (>160 SF or	VALIOII	M) () SM Pr	roi (>25<16	0 SF or >10 <26	OLF ACM) () Minor Pr	roj. (<25 SF or <	10 LF ACM)			
() Full Containment with	Negative Pre	ssure ()	Mini-Enclos	sure (x) Glo	vebag Procedur	e					
Location of Asbestos-	Is Loca	tion Normall	v Used	Description of		Amount	(Specify SF or LI	F) Abate	ment Ty	<i>/</i> ре	
Containing Material (ACM)		by Maint./Cu	stodial	thermal syster	ns insulation,						
Facility (13)	Staff?		3	surfacing, VAT	Γ, or other			D		Encap I	Englaca
,	YES	NO	NA	miscell.)				Rem.	Rep.	Encap t	Ticiose
FCC/Gas Comp			X	Transite		9,900 SF		X			
Alkylation			X	Fittings and In	sulation	110 LF		X		1	
Utility			X	Transite		5,750 SF	<u> </u>	X			
Utility			X	Pipe Insulation	n	10 LF		X			
Utility			X	Floor Tile		275 LF		X			
Chemical Storage			Χ	Pipe Insulation	n	100 LF		X			100
Fuel Gas Comp.			X	Pipe Insulation		16 LF		X			
Building			X	Transite		6,800 SF		X			
Building		- 1	X	Floor Tile		6,708 SF	F	X			
Building	_	_	X	Pipe Insulation	n	677 LF		X			
Building		1	X	Roofing		3,270 SF	F	X			
Building	-		X	Exterior Duct	Sealant	68 SF		X			
9			X	Window Caull		20 LF		X			
Building Steam Lines			x	Pipe Insulatio		400 LF	-	X			
Steam Lines	_		+^-	i ipo modiado							
			1								
								and the second second			

Name of Reg. Waste Hauler Brandenburg Industrial Service Co.	NJDEP Waste Hauler ID # 21838	Cubic Yards of Waste 160 NT		Name of Re	eg. Landfill
<u>City, State</u> Bethlehem, PA		V P	Disp. Date March 4, 20	14	<u>City, State</u> Bethlehem, PA
Completed by (Print or Type)	<u>Title</u>	Signature		<u>Date</u>	
Jennifer Strobel	Contract Manager	U 965	_	01/21/14	

Mail to: NJDEP-DSHW-BRRTP 401 E. State St., PO 414 Trenton, NJ 08625-0414

Telephone 609-984-6620

C:\WORD\MYDOCS\ASBESTOS 9/18/00

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

2014-09

Check #6367

B & G proj. #: 2014-09	6 7						CHECK #			_	_	
	11	ilding Owner/O	perator (2)		Ε.		Į.	84 - 1t			7	
te of Notification (1)	Robin K										_	
0 1 / 2 1 / 1 4	Street Addr											
encies Notified Type Notification	Street Addi	andview Circ	:le					1111	1	201/		
initial linitial							7	UF.				
DEP Amendmen	City, State,	vood, NJ 074	450									-
DOL Amendmen		The second second second					Telephone	Number	*			
DOH DOH	Name of C					_						
☐ DCA ☐ Cancellatio	n Robin	Kanen										
		FACILIT	TY INFORMA	TION		Type	of Facility (4	3)				
Name of facility where abatement is to	aking place (3)					Lype	School	(K - 12)				
							Subcha	pter 8 (Othe	r than l	<-12)		
Robin Kanen							Other (Private/Com Homes, etc.	mercial			
Street Address						Sans		# of Floors	1	3ldg. /	Age	
344 Grandview Circle					Codo (7\							=
City (5)	County (6)			County (Curi	rent Use (P	rior if being	demolis	hed)		
Ridgewood, NJ 07450	Bergen					res	idential					=
			ASCM No.	Na	me of Abateme	nt Contra	ctor (9)					
Name of Monitoring Firm Hired by B	ldg. Owner (o)			E	& G Restora	ation, Inc	·			_		=
N/A		با ــــــــــــــــــــــــــــــــــــ		Str	eet Address							
Street Address					105 Ryerson I	Road				_		
					y, State, Zip Co							
City, State, Zip Code					Lincoln Park	, NJ 070.	33	License	Number			
Project Manager for Monitoring Firm		Phone Numb	er	Te	973-696-686	61 59		0378				_
Project Manager for Montoring 7		-	500		ame of OSHA	Monitor						
	Sched. Com	pletion Date (1	1)		B & G Resto	ration, Ir	nc.			_		
Scheduled Start Date (10)	01/31/2			S	treet Address							
01/31/2014					105 Ryerson	Road				_		=
Occupancy Status During Abateme Facility closed/vacated during	antire period of	abatement			ity, State, Zip C	ode						
Facility closed/vacated during Abatement performed outside	e of normal facilit	y hours-				NI 07/	025					
Describe:				$= \parallel$	Lincoln Pari	k, NJ 07	055	□ wrap	& cut			_
Other-Describe:	ly)				00 00		o processing		bag pro		re	
Scope of Work (check all that app	Renovation				II Containment	w/negativ	e pressure		riable p			
	≥160 sf or ≥260) If		M M	ini-enclosure				TR	R	E	E
✓ >3 sf or >3 lf	Lie location no	rmally used sole	ely		(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		Amou	nt	e m	e p	n c	n
Location of	by maintenan	ce/custodial	Descr	iption of as	bestos-contain	ing	(Spec	fy SF or	0	a	a	C
asbestos-containing material to be	staff(12)	No. NI/A		ial (ACM)			LF)		v e	1	р	L
abated in facility (13)	Yes	No N/A		1-4:			36 If				旦	1
h-semont .		X	pipe ins				50 lf			旧	#	+
basement boiler room		Y X		sulation sulation			10 lf			븯	#	+
electrical panel closet		X		sulation			9 If		N	井	#	卡
main room		X	pipe in	Juliation								T
		1114-15#	Cubic Yard	s of Waste	Name of Reg	istered La	andfill	very Cente	r			
Registered Waste Hauler	NJDEP 19563	Hauler ID#	Cable 14.5	1	Tullytown	Resourc	e & Keco	very cente				
B & G Restoration, Inc.	1930.	Dispos	al Date		City, State	n DA		34.23				_
City, State	Auto-particular and a service		2/03/2014		Tullytown			Date				
Lincoln Park, NJ 07035 Completed by (Print or Type)	Title		Signati	ıre	Gordana S	Luna		01/	21/20	14		_
Gordana Luna	Secretary/	Treasurer										

10 check

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

Date of Notification (1)				Name	of Building	Owner/Operator (2	2)			15		
	14			Sou	thern Ne	w Jersey Family	Medical Cent	ers, Inc		3 1		
Agencies Notified Type Notifica	tion			Street	Address				0011			
⊠ EPA ☐ Initial				1 W	hitehorse	Circle		JAN 2 4	2014	8 1	4	
☑ DOLWD ☑ Amended				City, St	tate, Zip Co	ode	i) e			5		
☑ DOH Amendme ☐ DCA ☐ Emergen	5,750	lina	1	Ham	monton,	NJ 08037						1
(NJAC 5:23-8) justification		iling	1	Name	of Contact			Telephone Num	nber			1
☐ Cancellat	on			Ms.	Linda Fla	ake						-
				FAC	ILITY IN	ORMATION						
Name of Facility Where Abatement is 7	aking Pla	ace (3)				Type of Facility (4)				
Southern NJ Family Medical Co	enter						School (K-12		21			
Street Address							☐ Subchapter &	(Other than K-1)	z) ercial bui	lding	3,	
651 High Street						N 0	homes, etc.)					
City (5)							Square Feet	# of Floors	Blo	g. Ag	е	
Burlington							20,000	2	E	0		
County (6)				Coun	ty Code (7)	(STATE USE ONLY)	Current Use (Pri	or if being demol	ished)			
Burlington							Medical Fac	ility				
Name of Monitoring Firm Hired by Build	ling Own	er (8)	1	ASCM I	No.	Name of Abateme	ent Contractor (9)		MA.			
Cardno ATC			Ja			ecoservices,	LLC					
Street Address	n					Street Address						
3 Terri LAne						407 West Lin	coln Hwy, Suit	e 500				
City, State, Zip Code			7.20			City, State, Zip Co	ode					
Burlington, NJ 08016					89	Exton, PA 19	341					
Project Manager for Monitoring Firm			Tele	phone I	No.	Telephone No.	- Hallyon - L	License No.				
John Lutz			60	9-386	8800	610-755-7563	}	01161				116.2
Start Date (10)	Schedule	d Con	nple	tion Dat	te (11)	Name of OSHA N	Monitor	- · ·				
1/13/14	1_	_ / _	28	_ / _	14	EMSL						
Occupancy Status During Abatement (Check or	nly one	3)			Street Address						
☐ Facility Closed/Vacated During Enti	re Period	of At	ater	ment		200 Route 13	0 North					
☐ Abatement Performed Outside of N					cribe	City, State, Zip C	ode					
Time of Abatement: 7:00AM-5:00	PM/	_PM-	-	AM		Cinnaminsor	n, NJ 08077					1000
Scope of Work (Check all that apply)												
☐ >3 sf or >3 lf		Reno	wati	on		∐ Full Con ⊠ Mini-End	tainment with Neg	gative Pressure				
≥3 \$1 01 ≥3 11 ≥ 160 \$f or ≥260 If		Dem				⊠ Gloveba	a Procedure					
						⊠ Non-Exe	empted (*) and No	n-Friable Proced				
			ocat rma			<u> </u>			Ab	atem	ent Ty	
Location of Asbestos-Containing Material (ACM	4×			ely by	Ashe	Description of stos Containing Ma		Amount	Re	Repair	Enc	Enc
TO BE ABATED	***	Main				., thermal systems	insulation,	(Specify	Removal	air	aps	Enclosure
IN Facility	'		วเลเ (12)	Staff?		surfacing, VAT other miscellane		SF or LF)	<u>a</u>		Encapsulate	Тe
(13)	Y		No	N/A		Other miscelland					Ю	
Crawlspace, main building	D	3 [pipe ins	sulation/transite	conduit	955 If	\boxtimes			
Garage roof	Σ	3 [flashing	3		330 sf	\boxtimes			
Garage exterior	Σ	3 [window	/s		2 ea	\boxtimes			
Garage furnace room	D	3 1			boiler b	reeching/boiler	gasket	60 sf	\boxtimes			
Name of Registered Waste Hauler			100	JDEP '		Cubic Yards of	Name of Regis	stered Landfill				
ecoservices, LLC			H	lauler II		Waste 8	Minerva L	andfill				
City, State			1			Disposal Date	City, State					
Exton, PA						TBD	Waynesbu	ırg, OH				
Completed By (Print or Type)	Title					Signature			Date			
Jack Bally	Sr.	P.M.				Dack	Bally	_ QD	Date 1 23	14		

ASB-41 JAN 13

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

D&S Proj. #: 2014-24	Notification of A	Spestos Abatement	NJ Dept. of Health & Sc	D-1
	(Larguant to May	AC 8:60 and 12 120)	(Signalure)	
Date of Notification (1)	Name of Building Owner/Operator	(B)	Date: 116/ruffir	ne: 3: 34
Agencies Notified Type Notification	BRINKS CONSTRUCTION	(-)		
Agencies Notified Type Notification Initial	Street Address			
DEP Amended	48 LOOKER STREET			
DOL Amendment #:	City, State, Zip Code		1411 2 /	1 0011
DOH (including justification)	HILLSIDE, NJ 07205	1	JAN 2 4	2014
DCA Cancellation	ALISON LAMERS	i l	Talephone Num	IDer
	FACILITY INFORM	MATION		74
Name of facility where abatement is taking	place (3)	WATION	Tunn of English (4)	
RESIDENTIAL BUILDING	*	1 6	Type of Facility (4) School (K - 1	(2)
Street Address			Subohapter 8	(Other than K-12)
225 RETFORD AVENUE			Other (Private Bldgs./Homes	s, etc.
	ounty (6)	County Code (7)	Square Feet # of Flo	oora Bidg, Age
CRANFORD	INION	(State use only)	Current Use (Prior If be	elng demolished)
Name of Monitoring Firm Hired by Bidg. On	wher (8) ASCM No.	I Nome of the		- Ing domonariady
	, , , , , , , , , , , , , , , , , , ,	Name of Abatement D & S RESTOR	4 5	
Street Address		Street Address	ATION, INC.	
City, State, Zip Code		20 California A		
•		City, State, Zip Code		,
Project Manager for Monitoring Firm	Phone Number	Paterson, NJ 07		e Number
Start Date (10)		973-345-8020		01169
01/00/14	ed. Completion Date (11)	Name of OSHA Mon		
Occupancy Status During Abatement (Check	30/14 (DDV 009)	Street Address	*	
Li racility closed/vacated during entire no	rind of alaman,	20 California Av	спие	
Abatement performed outside of normal Describe: Other-Describe: NORMAL HOURS	facility hours-	Oity, State, 210 Code		
Scope of Work (check all that apply)		Paterson NJ 07.	503	*
⊠ >S of or >S if ⊠ Renovati	ion.		ull Containment w/negative	e pressure
2160 of or ≥260 lf Demolitic			Mini-enclosure Blovebag procedure	4-4
Location of asbestos-containing by main	on normally used solely tenance/oustodial		Non-Exempted (") and Non-	
material (acm) to be statt(12) abated in facility (13)	Description	of aspestos-containing	Amount	HHEE
Yas	No N/A material (A	OW)	(Specify SF or LF)	Oalac
BASEMENT	PIPE INSUL	ATION	1267 1790	e r p L
			136 L FT	
PONICIA PARA NACA				
D & S RESTORATION, INC. 135	P Hauler ID# Cubic Yards of Wa	L. MILLIO ON LINES HOLD ON P	andill	
City, State	Disposal Date	TULLYTOWN, R	ESOURCE RECOVER	Y
PATERSON, NJ 07503 Dompleted by (Print of Type) Title	01/21/14	TULLYTOWN, P	A	
BOGDAN JOLDZIC Title PRESID	ENT		Date	
	e this form for aspeatos licensure exem	pted activities.	01/16/	2014