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CK 1972 PAI			CATION	ate of Nev I OF ASBI to NJAC	ESTOS	ABATE		The same of the sa		C	E			18.8.1	
Date of Notification (1) 01-17-2020				f Building e Payne		Operator	(2)	A facility of the second		JAN	28	20	20		
Agencies Notified Type Notification			Street A	ddress											
X EPA X Initial Amended Amendment		H	Citv. Sta	ite, Zip Co	de				- 10	5-21.20 - 2	1 - Z.			· · ·	- 1
X DOL Amendment				wood N		0		N 4.44			ick.	17.52	L.111.*	No.	
Emergency (i justification)  DCA  Cancellation	nciuaing			Contact E pAYN	ΙE				Tel	ephone	Numb	er			0.10000100
Name of Facility Wilson Abot work in Taking	DI //		FACI	LITY INFO	DRMATI	ON	T =	. C. T W	4)						
Name of Facility Where Abatement is Taking Private Dwelling	Place (	3)						of Facility ( School (K-1							
Street Address					1		×	Subchapter Other (i.e. p	8 (Oth			build	lings,	home	es,
City (5)								etc.) are Feet		f Floors		No. of	dg. A	ge	
South Orange NJ 07079				2 1 (7)			n/a		N/A		1: 1		/A		
County (6) Essex			County (	Jode (7) USE ONLY)			Priv	ent Use (Pri rate Dwel	ling		olishe	a)			
Name of Monitoring Firm Hired by Building C Standard Environmental	wner (8)		ASCM	1 No.				atement Cor ntracting		(9)					
Street Address			1			Street	Addre	ess						10000	
2108 Fulton St Suite 2A City, State, Zip Code					,		3OX	734 Zip Code							
Brooklyn NY 11233						Woo	dland	d Park NJ	0742	4					
Project Manager for Monitoring Firm Kayode Adefisoye			Telephor	ne No.		Teleph 973-	none N 692-6			Licens 0126					
Start Date (10) 01-27-2020	Schedul 02-27-		npletion I	Date (11)				HA Monitor ntracting	LLC		4 g . 1 ( ) ( ) ( ) ( ) ( ) ( )				
Occupancy Status During Abatement (Check						Street								-	
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma							SOX '								
Other – Describe:	ai i aciiti	7 110013				-		zip Code d Park NJ	0742	4					
Scope of Work (Check All That Apply)						-	7	***************************************							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Decreased .	Renova Demolit				×	Mi Gl	III Containm ni-Enclosure ovebag Pro	e cedure					_	
	T la	Locati				L	_ No	n-Exempte	d (*) an	d Non-F	nable			ement	
Location of		Normal ed Sole	ly		Des	scription	of				-		Ту	ре	
Asbestos-Containing Material (ACM)  TO BE ABATED	Ma	intena	nce/		tos Cont thermal			I (ACM) ation,		mount Specify	1	R	ת	Enc	Ē
In Facility (13)	Cus	todial S (12)	otan r			cing, VA			SF	or LF)		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A				,					<u>a</u>	7	late	ге
Basement			x		ceili	ng plas	ster		10	00 SF		X			
1st Floor			х	entire	wall a	ind cei	iling p	olaster	30	00 SF		X			
2nd Floor			х	entire	wall a	nd cei	ling p	olaster	30	00 SF		X			
3rd Floor			х		wall a		ling p		1.00	00 SF		X			
Name of Registered Waste Hauler		Н	JDEP W auler ID	No.	Cubic of Was	ste		Name of Fairles			dfill				
Amax Contracting LLC  City, State		0	036184	ļ	90 C					0 •					
Amax Contracting LLC					1	sal Date 5-2020	2 1	City, Stat Morrisv		Α					
Completed by	Title				S	ignature	1	/	7	T	Date		2000		
Tome Maslarkov	Proje	ect Ma	anager			N	160	ef			01-	1/-2	2020	•	

11/1/17	)	N	ITO	FICA	TION (	OF ASE	ew Jersey BESTOS ABAT	EMENT	Check No	o. <u>64</u>	133		
JK10405			(	Pursu	iant to	NUAC	8:60 and 12-1	204	FR	re r	7	17	G I
Date of Notification (1)					Name	of Buildin	g Owner/Operator	(2)	In E C	= =		y	
January 22, 2020					PA o	f NY &	NJ		1150				
Agency Notified	Type N	otification			Street	Address	11-14-11-14-11-14-1		IIII .IAI	V 27	20	120	1000
□ EPA	☑ Initia	1				Erie Str						/ Egy W	
TOTAL Not expiration State Reg. 10/2004	☐ Ame				2000	tate, Zip				NAME OF THE PARTY	erotorbatas	-	
⊠ DOL		endment # rgency (includi	na				, NJ 07302		ASBES:			ROL	- &
⊠ DOH	justi	fication)				of Contac			Telephone Nur		I V CI	april control	-
□ DCA	☐ Cano	cellation			Ralp	h Cam	pione		973-624-68	98			
					FACI	LITY INF	ORMATION						
Name of Facility Where A								Type of Facility (	(4)				
Aircraft Blast Fenc	e Adja	cent to Ter	mina	al A, (	Conne	ector A	1	☐ School (K-12)					
Street Address		(b) 189957 (c)						☐ Subchapter 8  ☐ Other (i.e. priv	Other than K-12) vate & commercia		as.		
Newark Liberty Int	ernatio	onal Airport						homes, etc.)					
City (5)								Square Feet	# of Floors	Bldg.	Age	1	
Newark								5,000	N/A	25+	2		
County (6)							) (STATE USE	Current Use (Pr	or if being demol	ished)			
Essex					ONLY)			Aircraft Blas	st Fence				
Name of Monitoring Firm	Hired by	Building Owner	er	ASCM	No.		Name of Abatem	ent Contractor (9)	)				
PA of NY & NJ				N/A			B&N&K Res	toration Co.,	Inc.				
Street Address							Street Address						
241 Erie Street, Ro	om 23	6					223 Randolp	oh Avenue					
City, State, Zip Code							City, State, Zip C						
Jersey City, NJ 073							Clifton, NJ 0	7011					
Project Manager for Moni	toring Fir	rm		elepho			Telephone No.		License No.				
Ralph Campione					24-689	98	973-478-468		00120			000000	
Start Date (10)		Scheduled Co		tion Da	ite (11)		Name of OSHA						
February 03, 2020	A b a t a a	May 01, 2					EMSL Analy	tical, inc.			,		
Occupancy Status During	Abatem	ent (Check on	у опе	)			Street Address	20 N					
☐ Facility Closed/Vacated					:		200 Route 13 City, State, Zip C	747 . 37					
☐ Abatement Performed (☐ Other - Describe: Fu	Uutside (	of Normal Facil	ity Ho	urs ied B	uildin	a		n, NJ 08077-2	202				
Scope of Work (Check all			Ч			9	Olimaliiiiso	11, 140 00077-2	.002				
60 40 20 00 10 10 10 10 10 10 10 10 10 10 10 10	tilut upp	-37			ПВоп	ovation		Containment with	Negative Pressur	е			
$\square \ge 3 \text{ sf or } \ge 3 \text{ If}$ $\boxtimes \ge 160 \text{ sf or } \ge 260 \text{ If}$					☑ Dem		Glove	Enclosure ebag Procedure					
							⊠ Non-	Exempted (*) and	Non-Friable Prod	edure			
				Locat							A	pate Typ	ment
Location	n of			Normal ed Sole			Description of	of					
Asbestos-Containing		I (ACM)	Ma	intena	nce/		stos Containing Ma		Amount		77		5 E
TO BE AB				Custodi Staff?		(I.e.	, thermal systems surfacing, VAT		(Specify SF or LF)		em	Rep	aps
(13)				(12)			other miscellane		5000 COST COST		Removal	Repair	Enclosure
			107.05	T	0.0000						-		6
Aircraft Blook Force Adjacent to	- Tamaiaal	۸ ۵۸۱	Yes	No	N/A	Ashast	aa aantalalaa naint	on bloot force	E	00 In ft			
Aircraft Blast Fence Adjacent to	o reminal	A, Connector A1	$\triangle$			Aspest	os containing paint	on biast lende	50	ווו וו	$\wedge$		
				-	-								
Name of David	( . II		1 44	10.55			Ouble Vest 5	Now (5 )					
Name of Registered Wast	te Hauler		10250	JDEP V No.	Vaste H	auler	Cubic Yards of Waste	Name of Registe				-200	
Jimmy Byrne Truck	king		100	9555			278	Cumberland C	County Landfill / Landfill	Minerva	En	terp	rises,
City, State							Disposal Date	City, State	- CINIII				
Bronx, NY							02/04/2020 to 05/08/20	Newburg / F	Falls Townsh	ip, Bu	ck	Co.	, PA
Completed by		Title					Signature	11		Date			
G. Roger Woodman	n	Project Ma	anag	er			1/1/1/			1/22/2	202	0	

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

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71.	

Date of Notification (1) 1/24/2020	A A Jacob	April 10ge			Building Ow Perth Amb		perator (2)		Check	c# (C155	3	W		
Agencies Notified	Type Notification			treet Ad 60 High	dress n Street						,		1	Total and
□ EPA ☑ DEP ☑ DOL	<ul> <li>☑ Initial</li> <li>☐ Amended</li> <li>Amendment :</li> <li>☑ Emergency ir</li> </ul>		_ P	erth Ar	e, Zip Code nboy, New	Jerse	ey 08861	1		JAN :			(1 1	1.
☑ DOH □ DCA	justification  Cancellation	icidaling	1 66	ame of aniel C	Contact Cleaver			1	732-8	hone Nur 326-2010	nber )	174.1		
				FACIL	ITY INFOR	VIATIO	ON							
Name of Facility Where A	Abatement is Taking	Place (3)					Type of Facil	K-12)						
Street Address 260 High Street							☐ Subchap ☑ Other (i.e	e. private &	commerc	cial buildi	ngs, ho	mes, e	tc.)	
City (5) Perth Amboy, New Je	rsey 08861						Square Feet 30,000		# of F	icas erestre. Pla		dg. Ag )+	е	
County (6) Middlesex					Code (7) ISE ONLY)		Current Use	(Prior if beir Private	ng demol Apartme	lished) ent Bldg				
Name of Monitoring Firm Pennoni	n Hired by Building (	Owner (8)		ASCM	No.		Name of Abar Lilich Corpo		tractor (9	9)				
Street Address 31 W. 34 <sup>th</sup> Street, 8 <sup>th</sup>	floor						Street Addres 246 Union E	26 1020 LDA 16102						
City, State, Zip Code New York, New Jersey	y 10001		6				City, State, Zi Totowa, Ne	ip Code w Jersey 0	7512					
Project Manager for Mor Ralph Coppola	nitoring Firm			elephor 73-265			Telephone No 973-225-84			License N 01104	lo.			
Start Date (10) 1/25/2020		Schedule 1/27/202		pletion [	Date (11)		Name of OSH Iris Environ		oratorie	es, LLC				
Occupancy Status Durin						(4	Street Addres 2333 Route							
☐ Facility Closed/Vac ☐ Abatement Perform ☑ Other – Describe:		Period of A nal Facility	bateme Hours	ent		_	City, State, Z Union, NJ 0	ip Code 07083						
Scope of Work (Check /	All That Apply)													
□3 sf or ≥3 lf 図 ≥160 sf or ≥260 lf			enovati emolitio				☐ Mir	II Containme ni-Enclosure ovebag Prod n-Exempted	e cedure /	Limited C	ontaini	nent 7	ent	
		Is	Location	on				III Exempted	2 ( ) 41.4			Abate		
Locatic Asbestos-Containin <u>TO BE AB</u> In Fac (13	g Material (ACM) BATED illity	Use Ma	lormall d Solel intenar odial S (12)	y by nce/	(i.e. th	s Con nermal surfa	scription of taining Materia I systems insul- icing, VAT, or miscellaneous)	ation,	(Sp	nount ecify or LF)	Removal	Repair	Encapsulate	Enclosure
First Floor		X			Cleanup-	Distu	ırbance of v	inyl Tiles	2500	SF				
1113011001														
Name of Registered Water Lilich Corporation	aste Hauler		Н	JDEP V lauler ID 18724	The second second	of Wa	Yards aste	Name of Fairless			Ш			
City, State Totowa, New Jersey	07512						osal Date 1/2020	City, Star Morrisvi	te Ile, PA					
Completed by Adriana Olejarova		Title Pres	ident				Signature	10	L		ate 1/24/2	2020		

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### CELVE

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

JAN 2 8 2020

Date of Notification (1) 1/24/2020			7	Vame of City of	Building C Perth An	wner/O	perator (2)		Che	ck# 1155	8	7		
	ype Notification			Street Ad 260 Hig	idress h Street			1. 5				* 1 *		
☑ DEP ☐	11.0.0.00		- 6	City, Stat	te, Zip Cod mboy, Ne	e w Jers	ey 08861			-11	1			
☑ DOH ☐	Justification			Danjel C				\ \v	732	-826-201	nber			
Name of Facility Where Abo	stement is Taking	Place (3)		FACIL	ITY INFO	RMATI	Type of Feci					_		=
Street Address 260 High Street			_				School (	oter 8 (Other	than i	(-12) Irçla) buildir	ngs, ho	mes.	etc.)	
City (5) Perth Amboy, New Jerse	ey 08861						Square Feet 30,000			Floors		dg. A	]6	
County (8) Middlesex					SE ONLY)	-	Current Lies	Private	Apartn	ent Bldg				
Name of Menitoring Firm H Pennoni	tred by Building C	Pwnsr(8)		ASCM	No.		Name of Abs Lilich Corpo		ractor	(9)				
Street Address 31 W. 34th Street, 8th floor	or	-	- A-				Street Address 246 Union B				- 000			
City, State, Zip Code New York, New Jersey 1	0001						City, State, Z Totowa, Ne		7512					
Project Manager for Monito Relph Coppela	oring Film			felephor 973-285			Telephone N 973-225-84			License N 01104	Ó.			
Start Date (10) 1/25/2020		Scheduled 1/27/2020		plation i	Date (11)		Name of OSI		orato	les, LLC				
Occupancy Status During /				ant			Street Addres 2333 Route							
Abatement Parformed  Other - Describe;						_	Cily, State, Z Union, NJ 0	ip Code 17083						
Scope of Work (Check All	That Apply)	E Re	novat					I Containme	and to side	Manthus		_		
☐ ≥160 at or ≥260 (f			moliti				D M	ni-Enclosure oveosg Prod n-Exempted	edure	/ Limited C	ontainr	nent '		
Location o	,		ocati omal			00	scription of						men Pil	
Asbestos-Containing N IO BE ABAI In Facility (13)	fisterial (ACM) IED	Custo	tenai	nçe/	Asbast (l.e.	os Con therma surfa	taining Material systems insul- cing, VAT, or miscellaneous)	ation,	(S	mount pecify or LF)	Remova	Repair	Encapsula	Enclosure
		Yes	No	N/A							_		8	10
First Floor		×			Cleanup	-Distu	rbance of v	Inyl Tiles	2500	SF	+	-	<u> </u>	
						_					#			
Name of Registered Waste	a Hauter	4		JDEP V		Cubic of Wa	Yards	Name of	Regist	erad Landfi	1			
Litich Corporation			Τ,	18724		1		Fairless		FAL			_	
City, State Totowa, New Jersey 07	7512					1/27	sal Date 1/2020	City, Star Morrisvi	ile, P/					
Completed by Adriana Olejarova		Presid	ient				Stringsthe	70	L		1/24/2	020		

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UK029	PAI		FICATION	ate of New Jers I OF ASBESTO: to NJAC 8:60 a	ABATE		CE	.V .V=			
Date of Notification ( 01-23-2020	1)			f Building Owner Khetarpal	/Operator	(2)	JAN 28	2020	1111	7	
Agencies Notified  EPA  DEP  DOL	Type Notification    X   Initial   Amended   Amendment		State of the state	ddress ate, Zip Code ood Park NJ (	07407		1.2.2.1(10.(a.) 1.60.2.1(10.)				
DOH DCA	Emergency (justification) Cancellation		Sahil I	f Contact Khetarpal			Telephone N	lumber			
Name of Eacility Who	ere Abatement is Takin	n Diago (3)	FACI	LITY INFORMA	HON	Type of Facility	(4)		-	-	
Private Dwelling Street Address		g 1 1400 (0)				School (K-Subchapte	******	-12) rcial buil	dinas	home	as.
City (5) Elmwood Park N	NJ 07407					etc.) Square Feet N/A	# of Floors N/A	E	Bldg. A		
County (6) Beren				Code (7) USE ONLY)	3800-7	Private Dwel		ished)			
Name of Monitoring Standard Enviro	Firm Hired by Building ( Inmetal	Owner (8)	ASCN	1 No.	1000	of Abatement Co x Contracting					
Street Address 2108 Fulton St 5	Suite 2A					Address 3OX 734					
City, State, Zip Code Brooklyn NY 112		W		HUMAN)		tate, Zip Code dland Park NJ	07424				
Project Manager for Kayode Adefiso			Telephor	ne No. 41-7673	1 937233	none No. 692-6298	License 01266				
Start Date (10) 02-03-2020		Scheduled Co 02-22-2020		Date (11)		of OSHA Monitor x Contracting					
	uring Abatement (Chec		ment	32	10-10-10-10-10-10-10-10-10-10-10-10-10-1	Address 3OX 734					
	formed Outside of Norm					tate, Zip Code dland Park N.	J 07424				
Scope of Work (Chec	ck All That Apply)										
≥3 sf or ≥3 if ≥160 sf or ≥260	If	X Renov			L x	Mini-Enclosur Glovebag Pro	<del>7</del> .0			e	
	otion of	Is Local								ement pe	
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Location of	1 37	Location			D			Abatement Type  Removal  X  X	t		
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Ma	ed Solel intenar todial S (12)	nce/		Description of tos Containing Mate thermal systems ins surfacing, VAT, o other miscellaneou	sulation,	Amount (Specify SF or LF)	Remova	Abater Typ	Encapsula	Enclosure
	Yes	No	N/A					-		ate	Ф
exterior back sunroom wall	vall x transite siding 100 SF		100 SF	Х							
2ND FLOOR			Х		VAT		140 SF	Х			
Name of Registered Waste Hauler Amax Contracting LLC		Н	JDEP W auler ID 036184	No.	Cubic Yards of Waste 5 CY	Name of Fairlies	Registered Landfi S Hills	11			

Title

Project Manager

Disposal Date

02-28-2020

Signature

Completed by

Tome Maslarkov

Woodland Park NJ 07424

City, State

Date

01-23-2020

City, State

Morrisville PA

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT Check#3539 (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 01 24 / 20 JAN 2 Deirdre Watson Agencies Notified Type Notification Street Address X EPA ☐ Initial **⊠** DOLWD City, State, Zip Code X DHSS Amendment # 1 Cranford, NJ 07016 □ DCA Emergency (including Name of Contact (NJAC 5:23-8) justification) Telephone Number Cancellation Deirdre Watson **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Private house Subchapter 8 (Other than K-1 2) Street Address Other (i.e., private and commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Cranford, NJ 07016 County (6) County Code (7) (STATE USE ONLY) | Current Use (Prior if being demolished) Union Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973-356-3511 01127 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 01 / 25 / 20 \_\_01\_\_ / \_\_26\_\_ / \_\_20 Envirovision Consultants, Inc. Occupancy Status During Abatement (Check only one) Street Address ☑ Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Road, Bldg .# 35E Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: \_\_\_\_\_AM-\_\_\_PM/ Fair Lawn, NJ 07410 Scope of Work (Check all that apply) Clean up and decontamination with negative pressure Full Containment with Negative Pressure >3 sf or >3 If > 160 sf or >260 If Renovation Mini-Enclosure 7 Demolition Glovebag Procedure Tent with Negative Pressure Non-Exempted (\*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Repair Asbestos-Containing Material (ACM) Remova Encapsulate Enclosure Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SIF or LF) (12)(13)other miscellaneous) Yes No N/A 1st floor-living room and den  $\boxtimes$ VAT floor tiles 200 SF+100 SF  $\boxtimes$ X 2nd floor-bedroom VAT floor tiles M 200 SF П П П Name of Registered Waste Hauler NJDEP Waste Hauler ID No. | Cubic Yards of Waste | Name of Registered Landfill Gr Tech LLC 0033785 TBD

Disposal Date

TBD

Signature

T.R.R.F. Inc

Tullytown, PA

ewho wenad

Date

01/24/20

City, State

N Jevtic

City, State

Wayne, NJ 07470

Completed By (Print or Type)

Title

Owner

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

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MAS REULIE	rig i rass ç	-/						of Facility School (K-						
SPedt Address								Buischabta	e & coen	er then K-1: A sommerol	t) 81 buil	dinge,	ham	DB,
TEANECK							Squa	Faat Ges	60	Floor	T	lides, A	ge	
BERLEL			County (	Code (7)	,		Curre	nt Use the	or If had	ng demotel		1		
Mame of Monitoring Firm Fired by Building	Owner (8)		ABGN	No.		Name A. M	of Aba	tement Co intracting	mineter Inc	(0)	emmolitrati	por equality.	-	-Marchal
Breet Address	- Company			The second	709	Street	Addres		<u> </u>			-	(Annual Control	-
City, State, 2p Code	-			- ul-di-		City, 8	tato. Z	o Code			n (lesso de lesso)	-		
Project Manager for Monitoring Firm	-	1	Telapho	ne Na.		Teleph	one No	nrk, NJ 6	7432	Licenae N	n		-	_
Bisit Delp (10)/	(816), Tap	ad Cos	JEY WATE	Deta (11)			162-6			00156	G1			
Coulphray Status During Abatement (Cha	116	31/	20		72	Ome	ga En		ntal 8	ervicer in	3,			
	Standard at	Alasan	nest	200		Street 250	Addres	Street			Parlocusia.			
Facility Cipaed/resited During Entire Abetentent Performed Cutation of Nor Other - Describe:	mai Pacitiq	Hour	)			CNy, E	tata, Zi	p Code ck, NJ O	1440		-			
Scope of Work (Check All Tries Apply)				- Tak		LIGHT	(B(1)-04	er, Ma o	rayo				-	
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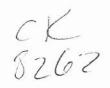
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Date of Notification (1) 01-23-2020	r A	見見》	100		Building Ov		perator	(2)		ı	AN 2 9	202	9	- 1		
Agencies Notified	Type Notification			Street Ad	Idress emarest F					U	AIV -	<del>- 202</del> 1	<del>]</del>		.* 7	
× EPA × DEP × DOL	Initial Amended				e, Zip Code			***************************************		i suli ese	Literation		-			-
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DOH DCA	justification)	Š	1985	Name of Neil Zi	Contact mmerma	nn				- M	ephone N 3-670-2					
	1-			Secretary Secretary	ITY INFOR		ON									in the
Name of Facility Where Commercial	Abatement is Takir	g Place (3)	)					Туре	of Facility (							
Street Address								H	School (K-1 Subchapter	8 (Oth	er than K-	-12)				
266 West Main St								×	Other (i.e. p etc.)	rivate 8	& commer					s,
City (5) Denville NJ 07834	ŀ							Squa N/A	are Feet	# o	f Floors A	- 1	Bldg N/A	. Ag	e	
County (6) Morris				County C	Code (7) ISE ONLY)				ent Use (Prio	or if bei	ng demol	ished)				***************************************
Name of Monitoring Fir		Owner (8)		ASCM	No.				atement Cor		(9)					
Done Right Testin	iy	<del></del>					Street			LLO						
168 Lafayette St			517607.00					зох	12/7/23							
City, State, Zip Code Hawthorne NJ 075	506						1 70000		Zip Code d Park NJ	0742	4					
Project Manager for Mo Steve Scoles	onitoring Firm		1	Telephor	ne No.		Telepi 073		No. 6298		License 01266				Stan Slies	
Start Date (10)		Schedule							SHA Monitor		01200					
02-102020		03-10-2		705-17-15-1					ntracting	LLC						
Occupancy Status Duri							Street	Addre BOX						11.7		
Facility Closed/Va Abatement Perfor Other – Describe:	reated During Entire med Outside of Nor	Period of A mal Facility	Hours	nent S					Zip Code id Park NJ	10743					-000000	
Scope of Work (Check							VAOC	Julan	u Paik NJ	0742	.4	-				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		and the same of th	lenova emolit				2	FINE M	ull Containm lini-Enclosure lovebag Pro- on-Exempte	e cedure	•			dure	•	
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Asbestos-Containir TO BE A	BATED		intena todial S	1,000 (700) but to the		hermal	system	is insu	lation,	(	Specify F or LF)	Ren		Re	Encapsulate	Enclosure
In Fa			(12)				miscella			3	r OI LI )	Removal		Repair	sula	osure
		Yes	No	N/A											te	
Baser	ment			×		pipe	insula	ation		5	50 LF	X				
1st F	loor			X		VA	T & Ma	astic		18	340 SF	X				_
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Name of Registered W Amax Contracting			H	IJDEP W lauler ID 1036184	No.	of Wa			Fairles		ered Land S	21161				
City, State Woodland Park No	J 07424						sal Date 8-2020	- 1	City, Sta		Α					
Completed by Tome Maslarkov		Title	oct MA	anager			Signatur	1	cen	0		Date 01-23	3-21	020	)	
TOTTIE Wasiarkov		Pioje	SCL IVI	anayer			/_	VIa				01-21				

JAN 2 3 2020

Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely Maintenan Custodial Staff? (12)	y by	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Тур		ent	to is
	Yes   No	N/A			Rem	Rep	Encap	Encl
2nd Floor		х	wall&ceiling plaster	8440 SF	х			
2nd Floor		х	VAT & Mastic	120 SF	Х			
Basement		х	VAT & Mastic	926 SF	x			
Exterior		х	window &door caulk	561 LF	х			

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a of Notification (1)	1	Name Peror		sing Owner/Op	gralor (	2)			1	AN	Z 3	of spental line
endes Notified Type Notificetion			Ando	var Sparta R	oad			1)				Bern
DEP Amended Amended Amendment Management Man		city, 8 Spar	iste, Z te, N.	Lip Code J 07571			-	AIVER APP	(0)	/FD		+
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ime of Fsoliky Where Abstement is Taking Plac erona Farms	(3)					Maria Maria	d (K-12)	(Other than K-12) ste & commercial bu	ildina	a ho	nes.	- Angeletistischen
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iams of Monitoring Firm Hired by Building Owns	or (8)	AS	BCM N	0.	AA	lec Contr	acting I	nc.		-	esselves.	
ireat Address					185	n Address Vresiand			_			_
Rty, State, Zip Code	The State of the S		***		Mid	etele, Zip ( land Pari	000 00 LN 07					_
Project Manager for Monitoring Firm		Teld	phone	No.	20	phone No. 1-282-584		Cloense No. 00158				
Start Date (10) //23/20 50	hadulad (	empa	tion Di	ato (11)	Nun	e of OSHA rege Envi	Meniter Meniter	tel Services, inc		-		-
Occupancy Status During Abatement (Check O					87/18	el Address O Huyler I	Street			•		
Feality Closed/Vegated During Entire Peri Abstement Performed Outside of Normal Other = Describe:	led of Abe Facility Hi	gurs gurs	t .		CKIA	, State, Zip schennaci	Cede	806				
Scope of Work (Check All That Apply)  23 of or 23 if 2160 of or 2260 if	Rer	rovetion nolition	ń )			Mint	Engleswid	ent with Negative Ph codure d (*) and Non-Friable	Proc	eduri		
		goation		and the second s						Abste Ty	Ment	_
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Main Çuete	rmally Bolely tenanc dist Sti (12)	au i	Asheston C	nei lys Macing	ng Maleriei toma insulai , VAT. or alienacus)	(ACM)	Amount (Specify SF of LF)	Florence	Raspair	Emagandale	
	Y00	No	N/A	-	716	E		400 SF	X			
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									+	+		1
Name of Registered Waste Hauler Newark Carting Inc.		H	JOEF V auter II JE09	D No. n	Waste Waste	)	54.	Registered Landfill SEX Color	> 1		-	
City, State Newsrk, NJ 07105				0	1/23/	ab On	City, St	pavette /vo	م لبلاد 860	412	H.	-
Completed by R. McDonald	Title Pres	ident			Sig	22/1	1/.	-11	1	123	12	C

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



TALL!						· (A)	F .	
Date of Notification 1/17/2020 Type Notification			Building Own	ner / Operator (2)		3 (6		Y
1 17	ency Notification		gedale Ave		. 1	JAN	2 8 20	20
	lotification		te & Zip Code		18			
	ed Notification		n Park, NJ	07932		Acres	.a	N. A.
X DOH Cancell	lation	Name of						e Number
DCA		Manny			*-		973-243	7004
Name of Facility Where Abatement	i. Talia - Dia		LITY INFOR	The state of the second				
Vacant	t Building	e (3)		Type of Facility (4) School (K-12)				
Street Address	748 47 E			Subchapter 8				
182 Ridg	gedale Ave			X Other (i.e., pri				s, etc.
2:4. (5)	1 (0)			Square Feet	# of Floor	rs B	ildg. Age	
F1.11	ounty (6)	County Cod		7000	<u> </u>	1	-	70+
Florham Park N	lorris			Current Use (Prior	if being de	molished)		
In a series of Maria and Transport		(0)		Commercial				
Name of Monitoring Firm Hired by E	Building Owner	(8) A		Name of Abateme				
Environmental Tactics, Inc				Global Abateme Street Address	ent Servic	es, LLC		
64 Broad Street				street Address 143 Schoolhous	o Dood			
City, State & Zip Code				City, State & Zip C				
Matawan, NJ 07716				Monroe Townsh		831		
Project Manager for Monitoring Firm	n Te	elephone Nu		Telephone Numbe		License N	umber	
Tom Geiger		32-290-221		732-605-9062			00714	Į.
Scheduled Start Date (10) Scheduled Start Date (10)	heduled Compl	letion Date (		Name of OSHA Mo	onitor			
1/18/20		/28/20		Global Abateme	nt Servic	es, LLC		
Occupancy Status During Abateme	nt (Check only	one)	5	Street Address		1		
X Facility Closed/Vacated Dur				143 Schoolhous	e Road			
Abatement Performed Outs	ide of Normal F	Facility Hours		City, State & Zip C				
Describe: Other - Describe:			ľ	Monroe Townsh	ip, NJ 08	831		
Scope of Work (Check all that apply	()							
Demolition	X Renovation	1		X Full Co	ntainment v	vith Negative P	ressure	
X Large Project				Mini-En				
Quantity is ≥ 3 SF or ≥ 3 LF	F ACM			Glove-b	ag Procedi	ure		
X Quantity is ≥ 160 SF or ≥ 2	60 LF ACM			Other:	Clean up	)		
Location of	25%	Is Location		Description of		Amount		ment Type
Asbestos-Containing	l N	lormally Use	ed A	sbestos-Containin		(Specify		y: Remova
Material (ACM)		Solely by		Material (ACM)		Square Feet or		Repair,
TO BE ABATED in Facility		laintenance ustodial Staf		e., thermal system lation, surfacing, \		Linear Feet)		osulation or closure)
(13)	0	(12)	1000	other miscellaneou			L11	Closule)
Main Floor						C 000 CE	D.	-mayal
Wall Floor		N/A		Floor tile		6,000 SF	Ke	emoval
I				la w				1611
lame of Registered Waste Hauler	NJ		Hauler ID#	Cu. Yds. of W	2007年20日	lame of Regist		atill
Freehold Carting		18	693	Diametel Date		airless Land	ITIII	- S
City, State				Disposal Date		ity, State	DΛ	
Trenton, NJ Completed By (Print or Type)	Title			1/28/2	.u   F	airless Hills	, FA	Dete
Dominick Tringali	Title Manager			Signature  Dominick	Tringali			Date 1/17/202
CD 44 IIIN 05 C4667								

### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT Check#3540 (Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) Date of Notification (1) 01 24 / 20 JAN 2 8 2020 Joe Britt Type Notification Agencies Notified Street Address X EPA Initial DOLWD. City, State, Zip Code 1 Male Attaintes X DHSS Amendment # 1 Fanwood, NJ 07023 Emergency (including □ DCA Name of Contact Telephone Number justification) (NJAC 5:23-8) Cancellation Joe Britt FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Private house Subchapter 8 (Other than K-1 2) Street Address Other (i.e., private and commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Fanwood, NJ 07023 County Code (7) (STATE USE ONLY) | Current Use (Prior if being demolished) County (6) Union Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973-356-3511 01127 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 01 / 26 / 20 \_\_01\_\_ / \_\_27\_\_ / \_\_20 Envirovision Consultants,Inc Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Road, Bldg .# 35E Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: \_\_\_\_\_AM-\_\_\_PM/ PM\_\_\_AM Fair Lawn, NJ 07410 Scope of Work (Check all that apply) Clean up and decontamination with negative pressure Full Containment with Negative Pressure Renovation >3 sf or >3 lf > 160 sf or >260 lf Mini-Enclosure Glovebag Procedure Tent with Negative Pressure Non-Exempted (\*) and Non-Friable Procedure Abatement Type Is Location Normally Description of Location of Encapsulate Enclosure Used Solely by Removal Repair Asbestos-Containing Material (ACM) Amount Asbestos Containing Material (ACM) Maintenance/ (i.e., thermal systems insulation, TO BE ABATED (Specify Custodial Staff? SIF or LF) IN Facility surfacing, VAT, or (12)other miscellaneous) (13)Yes No N/A X $\bowtie$ 430 SF VAT floor tiles 2nd floor П П

0033785

Title

Owner

NJDEP Waste Hauler ID No. | Cubic Yards of Waste | Name of Registered Landfill

T.R.R.F. Inc

Tullytown, PA

Date

01/24/20

City, State

Teutre Wenad

TBD

TBD

Signature

Disposal Date

Gr Tech LLC

Wayne, NJ 07470

City, State

Name of Registered Waste Hauler

Completed By (Print or Type)

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

J. MAIORANO

Estimator

\* Do not use this form for animomy i

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page 1

01/23/2020 04:50PM 2013297440 BEST REMOVAL INC PAGE 82/84 State of New Jersey NOTIFICATION OF ASSESTOS ABATEMENT (Pursuant to MJAC \$180 and 12:120) MR PEDRO 1123 20 Type Notification D EPA D DEP 48 COL SPER PONTERIR D Amended ETOH DOCA MR REYES PACILITY INFORMATION Marro of Paulity Where Abstatrant is Taking Place (5) Type of Peality (4) Me REDRO REYES School (K-12)
 School (K-12)
 School (K-12)
 School (Le. private & commercial buildings. Princes, etc.) offer MONTEVUR 3 of Floors 2000. 1940 County Docto (7) CATATE LOS Current Use (Prior & being demot BERGEN ONLY) PESIDENCE Hearts of Mordinsky Flore Hand by Building Owner ARCM No. Moures of Adolescents Contraster (8) (4) Best Removal Inc Street Address Street Address 450 South River St City, State, Zip Code City, Stein, Zip Cur Hackensack, N.J. 07601 Project Manager for Manhoting Parts Telephone He. 201-329-7444 00388 Scheduled Completion Date (11) 1/24/20 1/24).

Triang Status Durling Abstraction (Chack only only) North of OBMA Monley Omega Environmental G Feelily Classic Venetal During Entitle Period of Abstract
D Apathement Performed Classics of Normal Feelily Hours
Performed Classics of Normal Feelily Hours
Performer - Describer 6100AM TO 5100PM 280 Huyler St City, Clab. Zip Code S. Hackensack , N.J. 07606 Shope of Worls (Cheek all that apply) ☐ Pull Contributers with Negative Pressure
AT The Estate p.
AT The State processes
AT The State process 2-23 et or 2 3 H 2 2 160 et or 2 200 H -W Renoveson

Demailier ht Lecution Hermally Used Solely by TO BE ABATED SENT? ownering VAT, or (13) (12) Yes No NA BASSTOWS THERMAL STETEHINGS ATICK 251-FX Name of Registered Viewto Hattley NAME Village Hauter Cubic Yards of Marte of Registered Langilli Best Removal Inc ID No. 2 MECHUMBERLAND COUNTY LANDFILL 17109 Hackensack , N.J. 07601 27/2 PIVEN BURGH 17240 emploised by



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Date of Notification (1) 1/14/2020 check # 0	343		#02	Name	of Building	Owner/	Operator	(2)			JAN 2	8 2	2020		
Agencies Notified  EPA DEP	Type Notification			108 F	Address IRST AV	H1027972				7.5		(ji.a.			i
× DOL	Amended Amendment  Emergency				THORN		7407			K 04.	4 (1)/4-	15 4 15 54		etter a	*
DOH DCA	justification) Cancellation		9		of Contact ELETTC					Tel	lephone N	lumbe			
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ranc or racinty vinere A	Datement is Takii	ly Flace	(3)						of Facility (4	33					
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City (5) HAWTHORNE NJ 0	7407								re Feet	# o	f Floors		Bldg. 50+	Age	
County (6) BERGEN					Code (7) USE ONLY	)			ent Use (Prior	if bei	ng demol	ished)			
Name of Monitoring Firm I	Hired by Building	Owner (8	3)	ASCI	M No.				Itement Contr			NG			
Street Address				J			Street 24 C		ss CH ST						
City, State, Zip Code							City, S	tate, Z	ip Code	7			110 2003 200		
Project Manager for Monito	oring Firm	ELMWOOD NJ 07407   Telephone No.													
Start Date (10)		Schedu	led Cor	npletion	Date (11)				HA Monitor		01301				
01/16/2020 Occupancy Status During	Abatament (Chee	01/17/	/2020						JTIONS CO	TNC	RACTIN	IG			
Facility Closed/Vacate	ed During Entire F	Period of	Abaten	nent			Street 24 Cl		SS CH ST						
Abatement Performed  Other – Describe: ST	d Outside of Norm	al Facilit	y Hours	5		_	50 2,500		ip Code D NJ 0740	7					
Scope of Work (Check All	That Apply)													27.11	$\dashv$
≥3 sf or ≥3 lf  × ≥160 sf or ≥260 lf			Renova Demolit				×	Min Glo	I Containmen i-Enclosure vebag Proce n-Exempted (	dure					
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Name of Registered Waste	Hauler		1 61	JDEP W	acto	Carle : - Y	Vorda		Nes	_1_/					
ATLANTIC CARTING	1 203	auler ID	STEEDING N	of Was	200000000000000000000000000000000000000		Name of Re			tt					
City, State PEN ARGYL PA 1807				Dispos TDB	al Date		City, State PEN ARC	SYL	/I PA 18072						
Completed by .UIS ARCILA		Title PRES	SIDE	NT			gnature	,		1	D	ate 1/14/	2020		
						19			0-1	2	70	11 17/	_020		

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

JAV#17571

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

UK 35086

To. A.	M.M.H.			1	lame of	Building (	)wner/	Operator (	(2)			74 1	
Date of Notification (1)				V	<b>MERCK</b>	SHARP & [	OHM	E CORP.		5 C	E		W (H
1 / 23 /20	20			5	Street Ac	ddress				3 9	57:11	11	1. 11-0
Agencies Notified Type Not							/ENUE	PO BOX	2000, RY28-41	14			- 1
EPA Initi	al Notifica				City, Sta	te, Zip Code	9		2000111120	JAI	V 2	8 20	020
	ended No ncellation		on	F	RAHWA	Y, NEW JE	RSEY	07065					
	Hold					Contact			Telephone Nu	mber:			
DCA X EM	ERGENC	Y NOT							732-594-6352		r Casal r Casal		
Name of Facility Where Abatement	lo Tokin	a Dias	- (2)	FACILIT	Y INFO	RMATION	1=	/ F 100		. 'an-me			
Name of Facility Where Abatemen	is такіп	g Plac	e (3)				Туре	of Facility School (K					
MERCK SHARP & DOHME CORPO	RATION							Subchapte	er 8 (Other than	K-12)			
Street Address							X		private & comm				
126 EAST LINCOLN AVENUE -EXT	FRIOR PI	IPF RA	CK				Sq	uare Feet	# of Floors		Ria	g. Age	1
	unty (6)			T C	ounty C	ode (7)	Curr	ant Hea /Dr	ior if being dem	olioboo	11		
	ION					E ONLY)	RES	FARCH LA	BORATORY A	ND OF	I) FICE I	FACII	
Name of Monitoring Firm Hired by	The state of the s	Owne	r (8)	1 (0.		ASCM No.			ment Contract		IOLI	AOIL	
ENVIRONMETAL HEALTH INVESTI						104			MENTAL CORI		ION		
Street Address							Stree	et Address					
655 WEST SHORE TRAIL				- CHIEFT THE CAS					OCK ROAD				
City, State, Zip Code	A1514/ 15	-0051						State, Zip			Was Aree Co.		
	, NEW JE						_		W YORK 10901				
Project Manager for Monitoring Firm		-		e Numbe	er			ohone Num		cense N	Numbe	er	
WILLIAM S. KERBEL, CIH	10	137/05/10	3-729-5		1 (44)			369-7500		101			
Expected State Date (10) 1 / 26 /20	50		Jompi 1 /	etion Da	26 (11)	/20	100000000000000000000000000000000000000	e of OSHA				44400	. 1
Month Day Year		Month	1 /	Day		Year	AIVIE	HISUI LAB	ORATORIES II	NC.	#	11480	
Occupancy Status During Abatement			e)	Day		1 Gai	Stree	t Address					_
X Facility Closed/Vacated D	uring Enti	ire Peri	od of A	Abateme	nt		100000000000000000000000000000000000000	EAST 30TH	STREET				
Abatement Performed Ou	tside of N	ormal	Facility	Hours -	Describ	oe:	200,000						
X Other - Describe: SUI	NDAY 7A	M-5PM					City,	State, Zip					$\neg$
									V YORK, NEW	YORK	10016		
Scope of Work (Check all that apply)								nt with Nega	ative Pressure				
Demolition x >3SF OR LF	X R	enovati	on		V	Mini Enclo Glovebag		ali ina					
>160 SF OR 260 LF					^	Non-Friab			(EXTERIOR)				
Location of	T	Is Loca	ation		Desc	ription of As			(EXTENION)	Τ Δ	batem	ont T	vno.
Asbestos-containing	In	ormally				ning Materi			Amount			_	
Material (ACM)		solely				Thermal sy	7.11	,	(Specify	REMOVAL	REPAIR	ENCAPSUL	ENCLOSUR
TO BE ABATED	М	aint/Cu	0.00			tion, surfaci		Т.	SF or LF)	Ò	lĕ	¥	15
in Facility (13)		Staff	(12)			ner miscella			,	À	12	Sc	)SC
	Ye	es No	N/A	1			i i			'		ال	'n
EXTERIOR STEAM PIPE BETWEEN	1												
BUILDINGS 55 & 32	- 1		x	PIPE IN	NSULAT	ION			4 LF	x			
										- 1	+		
		-	+-	-							_	_	$\vdash$
											T		
		$\top$	1							$\vdash$	+		
		+	+	-			_			-	-	-	
					****								
Name of Registered Waste Hauler	100000	JDEP V		Cubic \	ards of	Waste	Name	e of Registe	ered Landfill				
FREEHOLD CARTAGE, INC. 825 HIGHWAY 33	Ha	auler ID			1		LYCC	JMING CO	UNTY RESOUR	HCE MA	ANAG	FMEN	II SE
City, State		1593	9	Dienos	al Date			State/	R'DRIVE/ROU	IE 15			
FREEHOLD, NEW JERSEY				1/26/20					, PA 17752		1		1
Completed by (Print or Type)	Title				Sign	nature /	//	/ / ×		ate /	1	77	1
BENJAMIN SANCHEZ		OR O	OPE	RATION	S	//	1	X	1	1	10	+7	1712

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

Date of Notification (1)				Name	of Buildin	g Ow	ner/Operator (	(2)	JAN -	<del>3 202</del>	20	15.	1,- 1
	20	_		Wa	Iters Res	ider	ntial	4	_ 3	.81	6.1		
Agencies Notified Type Notifica	ation			Street	Address			3	in the	12 1 1		-	
☑ EPA   ☑ Initial     ☑ DOLWD   ☐ Amended	4							(#)					
☐ DOH Amendm				City, S	State, Zip C	Code							
☐ DCA ☐ Emergen		dina		Bar	negat, N	J 08	005						
(NJAC 5:23-8) justificati	on)	J		Name	of Contac	t			Telephone Nur	nber		CHIEF THE	-
☐ Cancella	tion			Vic	tor								
				FA	CILITY IN	IFOF	RMATION						
Name of Facility Where Abatement is 1	raking P	lace (	3)					Type of Facility	. /			1/2	
Residence Street Address								School (K-12	2) 8 (Other than K-1	2)			
Street Address								Other (i.e., p	rivate and comme	ercial bu	uilding	IS,	
City (5)			w.					Square Feet	# of Floors	BI	dg. A	ne	
Surf City								1600	1		65	90	
County (6)				Cour	ity Code (7	)(STA	TE USE ONLY)		ior if being demol				
Ocean								Residence	3				
Name of Monitoring Firm Hired by Build	ding Owr	ner (8)	) [	ASCM	No.	Nai	me of Abateme	ent Contractor (9)					
N/A	75					0.00		ntracting, Inc.					
Street Address			_				eet Address	-					
						1	889 Route 9	), Unit 61					
City, State, Zip Code		7				City	y, State, Zip C	ode .					1,1,000 = 11.
						Т	oms River,	New Jersey 08	755				
Project Manager for Monitoring Firm			Tele	phone	No.	Tel	ephone No.		License No.				
						7	32-349-9932	2	00624				
	Schedule		950			Nar	me of OSHA N	Monitor					
02 / 05 / 20	02	_ / _	06		20	E	.M.S.L. Ana	lytical					
Occupancy Status During Abatement (	Check or	nly on	e)			Stre	eet Address						
☐ Facility Closed/Vacated During Entire						1	056 Stelton						
Abatement Performed Outside of No						City	y, State, Zip Co	ode					
Time of Abatement:AM	PIVI/_		PIVI-		AIVI	P	iscataway, l	New Jersey 08	854				
Scope of Work (Check all that apply)							□ F./II Co	taines and with No.	-t: - D				
≥3 sf or ≥3 if		Reno	ovatio	on			☐ Mini-End	tainment with Neg closure	gative Pressure				
≥160 sf or ≥260 If	$\boxtimes$	Dem	olitio	n				g Procedure					
		le I	ocati	ion			⊠ Non-Exe	mpted (*) and No	n-Friable Procedi				
Location of			mal				Description of	\f		Ab	atem		
Asbestos-Containing Material (ACM	)	Used			Asbe	stos	Containing Ma		Amount	Rer	Repair	Enc	Enc
TO BE ABATED IN Facility		Main: Custo		nce/ Staff?	(i.e		ermal systems		(Specify	Removal	air	aps	Enclosure
(13)			(12)				surfacing, VAT her miscellane		SF or LF)	<u>a</u>		Encapsulate	ге
75 %	Y	es	No	N/A								a	
exterior		] [	X		asbesto	s si	iding		1600 sf				
		] [											
		] [									П	П	
	Г	7   [	7	П			31						
Name of Registered Waste Hauler			N	JDEP V	Vaste	Cub	oic Yards of	Name of Regis	tered Landfill				
Guardian Contracting, Inc.				auler ID 20223		Was	ste	T.R.R.F.	NOI DU LUITUM				
City, State			1	20223			posal Date	City, State			A-100-00-00	77 1	
Toms River, New Jersey 02/06/20 Tullytown, Pennsylvan							Pennsylvania						
Completed By (Print or Type)	Title					-	Signature		[	ate	1		
Nicholas Fernicola	Proj	ect N	lana	ager				´+		1/2	1/2	0	

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) 2020 1/15/2020 CHECK #0344 #03 Agencies Notified Type Notification Street Address 12 EGBERT HILL RD × **EPA** Initial City, State, Zip Code DEP Amended 16/15/15/15 × MORRISTOWN NJ 07960 DOL Amendment # × Emergency (including Name of Contact Telephone Number DOH iustification) LESLI MAIETTA DCA Cancellation **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, × 12 EGBERT HILL RD etc.) # of Floors Square Feet Bldg. Age City (5) 50X100 50+ MORRISTOWN NJ 07960 2FL County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) MORRIS COUNTY **EMPTY FOR DEMOLISH** Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) ALL SOLUTIONS CONTRACTING Street Address Street Address 24 CHURCH ST City, State, Zip Code City, State, Zip Code ELMWOOD NJ 07407 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 201-873 9418 01301 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 01/20/2020 ALL SOLUTIONS CONTRACTING 01/21/2020 Occupancy Status During Abatement (Check Only One) Street Address 24 CHURCH ST Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: 7:30 AM TO 5:30PM × ELMWOOD NJ 07407 Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 If Demolition Mini-Enclosure Glovebag Procedure × Non-Exempted (\*) and Non-Friable Procedure Abatement Is Location Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ Encapsulate (i.e. thermal systems insulation, TO BE ABATED (Specify **Custodial Staff?** In Facility surfacing, VAT, or SF or LF) (12)other miscellaneous) (13)N/A Yes No

Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste **GRAND CENTRAL** ATLANTIC CARTING TDB City, State Disposal Date City, State TDB PEN ARGYL PA 18072 PEN ARGYL PA 18072 Completed by Signature Date

PEPER INSULATION

X

LUIS ARCILA PRESIDENT

BASEMENT, 1ST FL

ASB-41 (R-06-08)

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

80 SF

X

Q1/15/2020

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

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1 5	6	fi.,	H W	Hen	
111	erior access			1	1 1

Data (National)			_						1111		2000		1111				
Date of Notification (1)	,				Name	of Building	g Owner/Operator (	2)	JAN 4	1	2020						
01 / 2:		2020			Jans	ssen Pha	armaceuticals	, Inc					1				
Agencies Notified	Type Notifica	ation				t Address	2002				1. 1	1.1	-				
☑ EPA ☑ DOLWD	☐ Initial ☐ Amended	4			100000000000000000000000000000000000000	1 Route		9	1.11.No. 1	(40)		"****					
☑ DOH	Amendm					State, Zip C	Code										
□ DCA	☐ Emergen		cluding			tan, NJ											
(NJAC 5:23-8)	justification	100				of Contact	[일		Telephone Numb			317					
	☐ Cancellat	tion			Hard	old Mars	an		908 927-691	2							
					FA	CILITY IN	IFORMATION		•								
Name of Facility Where A	Abatement is 7	Taking	Place	(3)				Type of Facility	(4)								
Johnson and John	ison							School (K-12									
Street Address								(Other than K-12)	2) ercial buildings,								
1001 US-202								homes, etc.)		nui oc		,					
City (5)								Square Feet	# of Floors	BI	dg. A	ge					
RARITAN								>50,000	6								
County (6)					Cour	nty Code (7	)(STATE USE ONLY)	Current Use (Pr	ior if being demolish	ned)							
Hunterdon																	
Name of Monitoring Firm				8)	ASCM	No.	Name of Abateme										
Environmental Hea	alth Investi	igations Delta/BJDS, Inc Street Address															
Street Address																	
655 West Shore	Trail		1345 Industrial Blvd														
City, State, Zip Code							City, State, Zip Code										
Sparta, NJ 07871							Southamptor	ı, Pa 18966									
Project Manager for Moni	itoring Firm				phone		Telephone No.		License No.								
				0.27 (2.27)		9-5649	215 322-290	00	00783								
Start Date (10)	- common and the comm					te (11)	Name of OSHA M	lonitor									
02 / 06 /	2020	03	/	31	_ / _	2020	N/A	122			ě						
Occupancy Status During	W					- 3- 3-1 - 3-1 - 3-1 - 3-1 - 3-1 - 3-1 - 3-1 - 3-1 - 3-1 - 3-1 - 3-1 - 3-1 - 3-1 - 3-1 - 3-1 - 3-1 - 3-1 - 3-1	Street Address										
Facility Closed/Vacate																	
Abatement Performed Time of Abatement: 7	Outside of No :00 AM- 11:0	ormal F 10 PM	-acility /	Hour PM-	s - Des	cribe AM	City, State, Zip Co	ode									
Mon	day-Sunda																
Scope of Work (Check all	I that apply)						□ Eull Cont	ninmont with No.	estiva Dessayura								
≥3 sf or ≥3 lf			☑ Rei	novati	on		☑ Full Cont	ainment with Neg losure	jauve Pressure								
≥160 sf or ≥260 lf		[	☐ Dei	nolitic	n		Glovebag										
							∐ Non-Exe	mpted (*) and No	n-Friable Procedure	т —							
Location	of		200	Locat lorma	57555		Doggistian			Ab	ateme	ent T	ype				
Asbestos-Containing I		)	Use	d Sole	ely by	Asbes	Description o stos Containing Ma		Amount	Rer	Repair	Enc	Enc				
TO BE ABA				ntena	nce/ Staff?	(i.e.	., thermal systems		(Specify	Removal	pair	aps	Enclosure				
IN Facilit	ty		Oust	(12)	otan:		surfacing, VAT, other miscellane		SF or LF)	<u>a</u>		Encapsulate	лe				
()			Yes	No	N/A	1	outor moodilano					е					
B West 1st Floor	· · · · · · · · · · · · · · · · · · ·			X		Floor T	ile and Mastic		9,600 SF	X							
B West 2nd Floor	r			X		Floor	Tile and Mas	tic	3,000 SF	X							
B West 3rd Floor				X			le and Mastic		560 SF	X		П					
			П	П								$\overline{\Box}$					
Name of Registered Wast	te Hauler				JDEP \	Vaste	Cubic Yards of	Name of Regis	tered Landfill		_	_	1				
Service Transpor		nc		Н	auler II		Waste	Minerva lar									
City, State	t Croup II	110		20	0990		Disposal Date	City, State	Idilii								
	DW Cootl-	חר					Disposal Date		um Obie								
58 Pyles Lane No		-					I Cianata	Waynesbu	-	Landfill							
Completed By (Print or Ty	(7)(1)(5))	Title					Signature	70	1								
Christine Del Viso	CIO	Ass	st. A	imir	١		What	10. Lel	1/2000 1/2	3/2	J20						

## State of NJ

Proj. #: <u>20-29</u>		MO				s Abatoment and 12:120)		BEI	V/ [	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A CAMPAGA				
	A C	LIL!						111 0 0 <u>0</u>	108	1					
Date of Notification (1)		Vame of Bu	uilding Own	er/Operator (2	2)		U/	<del>M 2 3 2</del>	IZU	: [.					
0 1 1/12 10 1/12 10		Marcon	Ridgewoo	d, LLC											
Agencies Notified   Type Notificat	ion   3	Street Addr	ess				Louiselâ	dice comi	ηŲΙ,	12					
DEP Amended		79 Chest	tnut St.					LiCalvante	-	Andre .					
Amendment #:	1	City, State,	Zip Code												
DOL Emergency		Ridgew	ood, NJ 0	7450											
DOH (including justification)	IN	lame of Co					Telephone	e Number							
DCA Cancellation		Eloy Qu	iero				973-447	7-5675							
			FAC	ILITY INFORM	ATION										
Name of facility where abatement i	s taking pla	ace (3)					Type of Facility (4								
								(K - 12)							
Commercial Building								apter 8 (Other		-12)					
Street Address								Private/Comm Homes, etc.	ercial						
40 West Ridgewood Ave.								# of Floors	B!	dg. A	ge				
City (5)	Cour	nty (6)			Cour	nty Code (7)		)2	80						
					(Stat	te use only)	Current Use (Pr	ior if being de	nolish	ed)					
Ridgewood, NJ 07450		gen			L.,		Offices								
Name of Monitoring Firm Hired by I	3ldg. Own	er (8)		ASCM No.		Name of Abatement									
N/A						KLOMAX, LLC									
Street Address						Street Address									
						309 W. End Ave									
City, State, Zip Code						City, State, Zip Code									
						Hopatcong, NJ	07843	<del></del>							
Project Manager for Monitoring Firm		] Pr	one Numb	er		Telephone Number 833-455-6629		License Num 02007	per						
					}	Name of OSHA Mon	vitor	02007							
Start Date (10)	Sched	l. Completion	on Date (1	)		KLOMAX, LLO	W. T. S.								
01/30/2020	02/12	2/2020				Street Address									
Occupancy Status During Abatemer	t (Check o	nly one)				309 W. End Ave	e								
Facility closed/vacated during					İ	City, State, Zip Code									
Abatement performed outside Describe:	of normal	facility hou	rs-												
Other-Describe:						Hopatcong, NJ	07843								
Scope of Work (check all that apply	')					×	Full Containment w	/negative pres	sure						
☐ > <u>3</u> sf or > <u>3</u> lf	Renovation	n				$\boxtimes$	Mini-enclosure								
≥160 sf or ≥260 lf	Demolition	1				H	Glovebag procedur Non-Exempted (*)		a proc	edur	a				
Location of	Is location	n normally	used solely	1			Tron-Exempted ( )	R	R	E	190000				
asbestos-containing		enance/cus	todial	Descripti	on of as	sbestos-containing	Amount	_ e m	e p	n	E n				
material (acm) to be	staff(12)		1	material		3	(Specify S LF)	F or o	a	a	C L				
abated in facility (13)	(13) Yes No N/A						V   i   e   r								
Main Building Attic		X	1	Vermiculat	te		2,500 SF	×	巾		10				
Annex Bldg. Attic		X		Vermiculat	e		600 SF	X							
Annex Bldg. Boiler Room		X		Ceiling Pap	er Inst	ulation	150 SF								
Annex Bldg. Crawl Space		X		Debris Clea	an Up		600 SF								
Registered Waste Hauler		EP Hauler		ubic Yards of	Waste	Name of Registered		001:22							
KLOMAX, LLC		8241		0 yds.		The second second second second second	RESOURCE RE	COVERY	-						
City, State Hopatcong, NJ 07843		*	Disposal D TBD	alt		City, State TULLYTOWN	DΔ								
Completed by (Print or Type)	Title			Signatura		I TOLLTTOWN	, 1 1	Date		-					
Paige Boylan	Owner			1				01/20/2020	)						

			0	Section 1970	<b>A</b>	PR 1	managa.	(6)							Prir	nt Fo	
CK 4020		Ν	IOTIFI (R	Station CATION Irsuant	of Nev OF ASBI to NJAC	y Jerse STOS 3 60 an	ABATE	MENT		B		C [	3	$\mathbb{V}$	E		
Date of Notification (1) 01/24/2020	W-171	pH	0	Name of Reside	Building (	Owner/C	perator	(2)			J	AN	28	202		L	
Agencies Notified	Type Notification			Street A	ddress						ASBE	STO	S CC	NTRO	OL 8	-	
× EPA × DEP × DOL	<ul><li>Initial</li><li>Amended</li></ul>		-		te, Zip Co	de				L	***************************************	LIC	ENSI	NG	-	: empression and an	
2000000	Amendment Emergency		-	Union,	NJ					Tal	ephone	Num	hor				
DOH DCA	justification) Cancellation				n Reyes					Tel	ерпопе	Num	Dei				
Name of Facility Where A	hatement is Takin	n Place (3	1	FACI	LITY INFO	DRMATI	ON	Tyne	of Facility	(4)						_	
Residence	ibatement is Takin	g i lace (o	,						School (K-	2005 Access							
Street Address								×	Subchapter Other (i.e. petc.)	r 8 (Oth				ings, h	nome	s,	
City (5) Union				$\langle \mathcal{I} \rangle$	708	3		Squa 1,10	re Feet 00	# o 2	f Floors	i	80 80	dg. Ag )	e		
County (6) Union				County (	Code (7) USE ONLY)			Curre	ent Use (Pri	ior if be	ing dem	nolish	ed)				
Name of Monitoring Firm A. Seine Lighthouse		Owner (8)		ASCM	l No.				atement Co nk Servic		(9)						
Street Address PO Box 354								Addre Libe	ss erty Avent	ue							
City, State, Zip Code South Orange, NJ 0	7079								Zip Code IJ 07205								
Project Manager for Moni Sarah Calandra				Telephor	ne No. 19-2666		Teleph	none N 462-7	lo.		Licen 0131	se No	).				
Start Date (10) 02/14/2020		Schedule			Date (11)		Name	of OS	HA Monitor								
Occupancy Status During	Abatement (Chec	2010/02/02/02/02/02					Street	30.000									
× Facility Closed/Vaca								Box 3	54 Zip Code								
Other – Describe: _						_			ange, NJ	07079	9						
Scope of Work (Check Al  ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	i That Apply)		Renova Demoli				>	Mi Gl	ıll Containm ni-Enclosur ovebag Pro	e cedure							
		Is	Locat	ion			L	_l No	n-Exempte	d (*) an	d Non-	Friabl		Abater	ment		
Location		1	Norma d Sole	lly			scription							Тур	e	-	
Asbestos-Containing TO BE ABA	TED	Ma	intena todial	nce/		thermal	system	s insul	al (ACM) ation,	(	Amount Specify F or LF		Ren	Re	Enca	Encl	
In Facili (13)	ty	(12) Surfacing							ystems insulation, (Specify SF or LF)					Encapsulate	Enclosure		
BASEME	ENT	163	X	TWA			2	20 LF		Х							
			1000000												-		
Name of Registered Was	te Hauler		15750	JDEP W		27, 32, 52, 52, 52, 52, 52, 52, 52, 52, 52, 5	Yards		Name of	Regist	ered La	ndfill					
Newark Carting			125.0	lauler ID 4509	No.	of Wa	ste		Waste		geme	nt La	ındfil	l .			
City, State East Orange, NJ				Dispo	sal Date		City, Sta		PA								
Completed by	ompleted by Title						Signatur	A AA	11/1		Date 01/24/2020						
Alison Lamers		OTIC	e ivia	nager			72	11/11	WE			101	12412	.020			

Emergency L Name of Building Owner/Operator (2) JAN 28 2020 Date of Notification (1) Beverly Clark 10 11 1/12 13 1/12 10 1 **ASBESTOS CONTROL &** Type Notification Street Address Agencies Notified ☐ EPA initial City, State, Zip Code ☐ DEP Bayonne, NJ 07002 Telephone Number Amendment N DOL Name of Contact N DOH Cancellation Beverly Clark DCA FACILITY INFORMATION Type of Facility (4) School (K - 12) Name of facility where abatement is taking place (3) Subchapter 8 (Other than K-12) Other (Private/Commercial Beverly Clark Bidgs. Homes, etc. Bldg. Age Square Feet | # of Floors Street Address Current Use (Prior if being demolished) County Code (7) County (6) (State use only) City (5) residential Name of Abatement Contractor (9) Hudson Bayonne ASCM No. Name of Monitoring Firm Hired by Bldg. Owner (8) B & G Restoration, Inc. Street Address 105 Ryerson Road Street Address City, State, Zip Code Lincoln Park, NJ 07035 City, State, Zip Code License Number Telephone Number 00378 (973)696-6869 Phone Number Project Manager for Monitoring Firm Name of OSHA Monitor B & G Restoration, Inc. Sched. Completion Date (11) Scheduled Start Date (10) Street Address 01/28/2020 105 Ryerson Road 01/27/2020 Occupancy Status During Abatement (Check only one) City, State, Zip Code Facility dosed/vacated during entire period of abatement. Abatement performed outside of normal facility hours-Lincoln Park, NJ 07035 Describe: Other-Describe: Full Containment w/negative pressure Scope of Work (check all that apply) Non-friable procedure Renovation Demolition Mini-enclosure E ≥160 sf or ≥260 lf e е 0 >3 sf or >3 if Is location normally used solely Amount m p Description of asbestos-containing by maintenance/custodial (Specify SF or 0 2 a Location of material (ACM) asbestos-containing V D staff(12) 8 material to be NA abated in facility (13) No Yes × 73 If I Pipe insulation basement Name of Registered Landfill Grand Central Landfill Cubic Yards of Waste NJDEP Hauler ID# Registered Waste Hauler

City, State

Pen Argyl, PA

Gordana Luna

Date

01/23/2020

19563

Secretary/Treasurer

Title

Disposal Date

01/28/2020

Signature

B & G Restoration, Inc.

Completed by (Print or Type)

Lincoln Park, NJ

Gordana Luna

City, State

V4142	100	NO.			ON	DE ASE	W Versey SESTOS ABAT C.8:60 and 5 10		ho + #	-4-1-	4-	<b></b>			
Data of Natification (1)	9. 				S Book	لأحاث كا	Owner/Operator (	8	THE RE	EAL	WA	= 1	7		
Date of Notification (1)	23 /	20				r Univer		distribution of the second		A THE STATE OF THE	U L				
Agencies Notified  EPA	Type Notificat	tion	==105/10	10000		ddress	ceville Road	and the same of th	L JAN	282	020	- Lander	切		
☑ DOLWD	☐ Amended				90. W. W. W.			-				+			
☑ DOH	Amendme	nt #	_	1		ate, Zip C		-	ASBESTO	SCON	TROI	2			
☑ DCA			ng		Town Steel	The state of the s	e, NJ 08648		LIC	ENGINE		-			
(NJAC 5:23-8)	justificatio					f Contact er Eddy		0000000	Telephone Nu 609-896-50		*	10000	- Constant		
					FACI	LITY IN	FORMATION								
Name of Facility Where	Abatement is Ta	aking Plac	ce (3)					Type of Facility	(4)						
Rider University - I		TO THE OWNER OF THE OWNER.						School (K-12							
Street Address				- DEVEN				Subchapter 8							
2083 Lawrenceville	Road							Other (i.e., p homes, etc.)							
City (5)								Square Feet	# of Floors		dg. Ag	je			
Lawrenceville								75,000	2		50				
County (6)				C	County	/ Code (7)	(STATE USE ONLY)								
Mercer								school							
Name of Monitoring Firm	Hired by Build	ing Owne	r (8)	AS	CM N	0.	Name of Abateme								
Pennoni				1	02		Plymouth En	vironmental C	ompany, Inc						
Street Address							Street Address								
515 Grove Street, S	Suite 1B		-0.018				923 Haws Av	enue							
City, State, Zip Code							City, State, Zip Co								
Haddon Heights, N							Norristown, I	PA 19401							
Project Manager for Mor	itoring Firm		0.000	(*)-00 <b>*</b> 0000-1	one N	44041	Telephone No.		License No.						
Brian Clark					656-2		610-239-9920		0398						
Start Date (10) 1 / 28 /	1 1000000	cheduled 2			n Date /		Name of OSHA N Plymouth En	Monitor I <b>vironmental C</b>	ompany, Inc.						
Occupancy Status Durin	a Abatement (C	heck only	(one)				Street Address								
☐ Facility Closed/Vacat					nt		923 Haws Av	renue							
						ribe	City, State, Zip C	ode							
Time of Abatement:	7:00AM-9:00P	M/	PM		_AM		Norristown,								
Scope of Work (Check a	Il that apply)						☐ Full Con	tainment with Ne	gative Pressure						
≥3 sf or ≥3 lf			Renov				☐ Mini-End	closure	70						
≥160 sf or ≥260 lf			Demoli	ition				g Procedure empted (*) and No	on-Friable Proce	dure					
			Is Loc	cation	,			inprod ( ) dire i i			patem	ent T	vne		
Location	n of		Norn	nally			Description of	of			1				
Asbestos-Containing			sed Solainte				stos Containing Ma		Amount	em	Repair	nca	nclo		
TO BE AB IN Faci			ustodia		Salara and a	(i.e	., thermal systems surfacing, VAT		(Specify SF or LF)	Removal	=	Encapsulate	Enclosure		
(13)			(1	2)			other miscellane					late	e		
11000000000		Ye	s N	lo I	N/A										
dark room				] [		plaster			400SF						
dark room dark room			×	1 [		pipe fitt	e and mastic tings		5LF	×	П	П	П		
art gallery			1000			plaster			251 F 540SF	-					
art gallery						ceilina	skim coat		300LE		-				
art gallery						glue do							Ш		
Name of Registered Wa				100000000	DEP W		Cubic Yards of Waste		stered Landfill						
Robinson Waste D	isposal			100000	7304		40	GROWS L	.andīiii						
City, State							Disposal Date	City, State							
Voorhees, NJ 0804							2/21/20	Moorisvill	e, PA						
Completed By (Print or	Гуре)	Title					Signature		1	Date	Sh	18.			
James M. Kelly		Vice	rresi	ident	Į.		and the same	The second of th		1/1	17/1	611	11		

Inv-175	85		1						7/11	112	1/			0
262343246		NOTII (i	St. FICATION Pursuant	ate of Ne LOFASE to NJAC	V Jerse BSTOS 8160 an	ABATEM d 12:120	VEN!	Γ.	所追	7C-	信		Vi	E
Date of Notification (1)			Name of	f Building	Owner	perator	(21)		1 box					-
January 24	1. 2020		The Ha			6				JAN	28	21	)20	
	Notification		Street A		001116	zariioo,				Onn	_ 0		J 800 W	
M	(alti-)		22 Map	le Aven	ue									
EPA DEP	Initial Amended			te, Zip C					ASE	BESTO	SCC	INC	ROI	. &
☑ DOL ☐	Amendment #		Morristo			1			POST DATE OF THE OWNER, OR THE OWNER, OR THE OWNER, OR THE OWNER,	LIC	ENS	ING	·	, married participation participation participation participation participation participation participation pa
	Emergency (includir	ng		f Contact		111	-		Telephon	e Numb	ner		per-line.	
P DCA	justification) Cancellation		Project						201-336-		, C1			
				LITY INF		ION			201-330-	-04//				
Name of Facility Where Abaten	nent is Taking Place	(3)	17.01		Ortivita	.01,	Тур	e of Facility (4	)					
Former Tulnoy Lumber Si	te						П	School (K-12	2)					
Street Address				Dint.			Н		8 (Other than	1 K-12)				
90-120 Raskulinecz Road	#3						X	Other (i.e. p	rivate & com	mercial	buildir	ıgs,	home	s,
City (5)	, #5						Sau	etc.) are Feet	# of Floor	e	Bld	g. A	ne	
Carteret							Oqu	are rect	# 01 1 1001	•	Diu	g. /\	gc	
County (6)			County (	20de (7)			Cur	rent Use (Prio	r if boing dos	maliaha	4)		-	
				USE ONLY	·)		Cui	rent use (Filo		•	u)			
Middlesex  Name of Monitoring Firm Hired	by Building Owner	(0)	ACCM	I No.		Name	-f AL	-1	emp	ty		T-Line	-5455-	
	and the property of the property of the second sections.	(0)	ASCN	I NO.				atement Cont	ractor (9)					
Whitestone Associates, In Street Address	IC.					Super,						200		
						Street								
1600 Manor Drive, Suite 2	220						Old Automatic	ont Ave.						
City, State, Zip Code						City, S	tate,	Zip Code						
Chalfont, PA 18914	-							NJ 07508						
Project Manager for Monitoring	Firm		Telepho			Teleph	one	No.	Licer	nse No.				
Jeremy Hassett			$(215) 7^{2}$			(201) 6			0119	95				
Start Date (10)	Sched	luled Co	mpletion I	Date (11)		Name	of OS	SHA Monitor						
1/27/20			1/27/2	1		Super,	LL(	3						
Occupancy Status During Abat	ement (Check Only	One)				Street	Addr	ess						
Facility Closed/Vacated D	uring Entire Period o	of Abate	ment			203 Be	elmo	ont Ave.						
Abatement Performed Out Other - Describe:	tside of Normal Faci	lity Hou	rs			City, St	tate,	Zip Code						
						Haledo	on, N	NJ 07508						
Scope of Work (Check All That	Apply)													
≥3 sf or ≥3 lf		Renov	ation				☐ F	ull Containme	nt with Nega	tive Pre	ssure			
≥160 sf or ≥260 lf	$\boxtimes$	Demol	ition			-		lini-Enclosure						
						5		lovebag Proc on-Exempted		riable P	rocedu	ire		
		Is Loca	tion						V			10000	ment	
Location of		Norma			Do	scription	06					Ту	pe	
Asbestos-Containing Mater		Ised Sol		Asbes				al (ACM)	Amount				ш	
TO BE ABATED		Mainten: ustodial		(i.e		l systems		lation,	(Specify		Re	70	Encapsulate	Enclosure
In Facility (13)		(12)				cing, VA miscellan		.)	SF or LF	)	Remova	Repair	ıpsı	losi
,(,0)	-				Other (	moochan	cous	'			va	ੜੋ	ılate	ure
	Yes	s No	N/A											
underground		$\times$			tra	nsite pi	ре		TBD		$\times$			
		7	`							ľ				
		-	-							-		-		
Name of Registered Waste Hai	uler		NJ DEP W			Yards		Name of F	Registered La	andfill				
			Hauler ID		of Wa									
Super, LLC			WH1	6329		TBD			anagemer	nt				
City, State					- Contractions	sal Date		City, State						
Haledon, NJ				(XX)		1/27/21		Tullytowr	ı, PA					
Completed by	Title	9				Signature				Date				
Tailor Dominguez	Proi	ect Ma	nager			1000	1	ومستسب سريح	Fee	1/24	120			

## Inv-17583 CK2430

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

M	E	C	E	Career	$\mathbb{V}$	E	M
		Jan	2	7	2020		U

110.100				T		·,	The Paris			- CONTO	
Date of Notification (1)					ng Owner/Operato	n(2)			and the same	economic districts	
Agency Notified Type Notification			Street	Address			ASBEST	ros co			. &
						1000	-	104140	1.4.Ch		-
□ EPA  □ Initial □ DEP □ Amended		+	City, S	tate, Zip	UASKING Code	100 100	1347			-	
DOL Amendment #	4.5	ľ									
☐ Emergency (incl ☐ DOH justification)	uding		Name	of Conta	ct		Telephone Num	nber			
□ DCA □ Cancellation		1	There	stine	Lester		609-989	1-70	20	8	
					ORMATION						eville.
Name of Facility Where Abatement is Taking	Place (3)					Type of Facility	(4)				
SRI						☐ School (K-12	2)				
Street Address						☐ Subchapter 8	8 (Other than K-12	!)			
201 WAShington	Ko	AO				homes, etc.)	ivate & commercia	il bullain	gs,		
City (5)						Square Feet	# of Floors	Bldg.	Age		
Princeton, NJ.	1856	10									
County (6)		1			) (STATE USE	Current Use (Pr	rior if being demoli	shed)		SWELLIE	
mercer			ONLY)								
Name of Monitoring Firm Hired by Building Ov	vner /	ASCM			1 2	nent Contractor (9	9)				
MITCS		0	105	1	Street Address	KIDER 1	ENVIRONM	COUTA	1		
Street Address			-		Street Address	10					
Dity, State, Zip Code					15 .131	ACKTOICE	ST READ				
Crossopicks NJ	00	(5)	<b>_</b>		City, State, Zip C	Code	CALCE I				
Project Manager for Monitoring Firm			ne No.		Telephone No.	30 103	OSG91				
MECS				3420	,	-7110	Licerise No.				
Start Date (10) Scheduled	Completio	on Da	te (11)	3700	Name of OSHA		L		-		
1-21-20 1-2	7-2	10			MEC	S .					
Occupancy Status During Abatement (Check	only one)				Street Address	2.1	***************************************				
Facility Closed/Vacated During Entire Perio	d of Abate	ement				0x 34/					
☐ Abatement Performed Outside of Normal Fa ☐ Other – Describe:	acility Hou	irs			City, State, Zip C	Code	- 00	010	7		2275
					(1035m	JICKZ //	NJ.08	217			
Scope of Work (Check all that apply)					□ Full 0	Containment with	Negative Pressure	е			
□ ≥ 3 sf or ≥ 3 lf □ ≥ 160 sf or ≥ 260 lf	120		☐ Rend ☐ Dem			Enclosure ebag Procedure					
2 - 100 01 07 - 200 11				iontion	☐ Non-	Exempted (*) and	Non-Friable Proc	edure			
*	ls l	Locati	on						Ab	aten	
Location of	31 00000 C	ormali Solei	•		Description	of		-	T	Тур	T
Asbestos-Containing Material (ACM) TO BE ABATED	Mair	ntenar	nce/		stos Containing Ma , thermal systems		Amount		71	[	F
IN Facility	1	ustodi: Staff?	81	(i.e.	surfacing, VAT		(Specify SF or LF)		Remova	Repair	Cans
(13)		(12)			other miscellane	eous)	8.0		oval	Repair	ncapsulat
PrivATC OFFICE	Yes	No	N/A		TALL					(	D
	11				V · · · ·		800	SF	W	$\forall$	+
							0-0	37	+	+	+
							<del></del>		1	+	+
											+
lame of Registered Waste Hauler			laste H	auler	Cubic Yards of	Name of Regist	tered Landfill				
	IDN		0,1-0,	2	Waste	(-row)	5				
Dity, State		00	959	U	Disposal Date	City, State					
2. 0 - 1- 1	,	, 1	50	4120	Dispusal Date	Oily, State					
completed by Title	ch )	N/	) U	8638	Signature	MI		Date /	,	_	
PAUD DANDRU ON	LeA			1	1 diel	11	1	1/1	0/	20	7
	not use this	s form	for ach	nestoe lin	ensure exempted	activities		110	10		_