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

Date of Notification (1)
06 / 04 / 14

Name of Building Owner/Operator (2)
WASHINGTON TOWNSHIP SCHOOL DISTRICT

AGENCIES NOTIFIED

<table>
<thead>
<tr>
<th>Agency</th>
<th>Notification Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>☑ EPA</td>
<td>Initial</td>
</tr>
<tr>
<td>☑ DOLWD</td>
<td>Amended</td>
</tr>
<tr>
<td>☑ DHSS</td>
<td>Amendment #1</td>
</tr>
<tr>
<td>☑ DCA (NJAC 5:23-8)</td>
<td>Emergency</td>
</tr>
</tbody>
</table>

Street Address
30 CHURCH ROAD

City, State, Zip Code
SEWELL, NJ 08080

Name of Contact
Margaret M. Zeban

Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
WASHINGTON TOWNSHIP HIGH SCHOOL

Street Address
529 HURFVILLE-CROSS KEYS ROAD

County Code (7) (STATE USE ONLY)
GLOUSTE

Square Feet
100,000

Current Use (Prior or after being demolished)
SCHOOL

Name of Monitoring Firm Hired by Building Owner (8)
HORIZON ENVIRONMENTAL GRP., INC

ASCM No.
00073

Name of Abatement Contractor (9)
DELTA/BJDS, INC

Street Address
P.O. Box 316

City, State, Zip Code
WEST DEPTFORD, NJ 08086

Telephone No.
856 846 0800

License No.
215 322-2900

Project Manager for Monitoring Firm
David Flanagan

Telephone No.
00793

Start Date (10)
7 / 14 / 14

Scheduled Completion Date (11)
8 / 8 / 14

Name of OSHA Monitor
N/A

Occupancy Status During Abatement (Check only one)
☐ Facility Closed/Vacated During Entire Period of Abatement
☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7:00 AM - 11:00 AM

Scope of Work (Check all that apply)
☐ Full Containment with Negative Pressure
☐ Demolition

☐ Renovation

Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)
Yes
No
N/A

Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

Amount (Specify SF or LF)

Boiler Insulation
400

Boiler Insulation
200

Floor Tile and Mastic
900 SF

Breech Insulation
200

NEW BOILER ROOM (A-13)

NEW BOILER ROOM (A-13)

NEW BOILER ROOM (A-13)

OLD BOILER RM (B-1)

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility

Name of Registered Waste Hauler
SERVICE TRANSPORT GROUP INC

NJDEP Waste Hauler ID No.
20950

Cubic Yards of Waste

Name of Registered Landfill
MINERVA LANDFILL

City, State
WAYNESBURG, OH 44688

Disposal Date

Completed By (Print or Type)
DAMIAN LAVELLE

Title
PROJECT MGR.

Signature

Date
6/27/14

* Do not use this form for asbestos license-exempted activities.
<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>06 / 4 / 14</th>
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</thead>
<tbody>
<tr>
<td>Name of Building Owner/Operator (2)</td>
<td>WASHINGTON TOWNSHIP SCHOOL DISTRICT</td>
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<td>Agencies Notified</td>
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<td>Type Notification</td>
<td>Initial</td>
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<tr>
<td>Street Address</td>
<td>30 CHURCH ROAD</td>
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<td>City, State, Zip Code</td>
<td>SEWELL NJ 08080</td>
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<td>Name of Contact</td>
<td>Telephone Number</td>
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<td>FACILITY INFORMATION</td>
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<tr>
<td>Name of Facility Where Abatement is Taking Place (3)</td>
<td>WASHINGTON TOWNSHIP HIGH SCHOOL</td>
</tr>
<tr>
<td>Street Address</td>
<td>529 HURFVILLE-CROSS KEYS ROAD</td>
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<tr>
<td>City (5)</td>
<td>SEWELL</td>
</tr>
<tr>
<td>County (6)</td>
<td>GLOUCSTER</td>
</tr>
<tr>
<td>County Code (7)</td>
<td>GLOUCESTER</td>
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<tr>
<td>Name of Monitoring Firm Hired by Building Owner (8)</td>
<td>HORIZON ENVIRONMENTAL GRP., INC</td>
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<tr>
<td>ASCM No.</td>
<td>00073</td>
</tr>
<tr>
<td>Name of Abatement Contractor (9)</td>
<td>DELTA/BJDS, INC</td>
</tr>
<tr>
<td>Street Address</td>
<td>P.O. Box 316</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>WEST DEPTFORD, NJ 08086</td>
</tr>
<tr>
<td>Project Manager for Monitoring Firm</td>
<td>David Finlan</td>
</tr>
<tr>
<td>Telephone No.</td>
<td>856 848 0800</td>
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<tr>
<td>Start Date (10)</td>
<td>6 / 18 / 14</td>
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<tr>
<td>Scheduled Completion Date (11)</td>
<td>8 / 8 / 14</td>
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<tr>
<td>Type of Facility (4)</td>
<td>School (K-12)</td>
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<tr>
<td># of Floors</td>
<td>&gt;50,000</td>
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<tr>
<td>Bidg. Age</td>
<td>50</td>
</tr>
<tr>
<td>Current Use (Prior if being demolished)</td>
<td>SCHOOL</td>
</tr>
<tr>
<td>Street Address</td>
<td>1345 INDUSTRIAL BLVD</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>SOUTHAMPTON, PA 18966</td>
</tr>
<tr>
<td>Name of OSHA Monitor</td>
<td>CRITERION LABS</td>
</tr>
<tr>
<td>Street Address</td>
<td>3370 PROGRESS DRIVE</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>BENSalem PA 19020</td>
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<tr>
<td>Occupancy Status During Abatement (Check only one)</td>
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<tr>
<td>Scope of Work (Check all that apply)</td>
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<tr>
<td>Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)</td>
<td></td>
</tr>
<tr>
<td>Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12)</td>
<td>Yes</td>
</tr>
<tr>
<td>Description of Asbestos Containing Material (ACM) (i.e., thermal systems Insulation, surfacing, VAT, or other miscellaneous)</td>
<td>1 BOILER, BREECHING AND</td>
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<tr>
<td>Amount (Specify SF or LF)</td>
<td>1,000 SF</td>
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<tr>
<td>Abatement Type</td>
<td>Full Containment with Negative Pressure</td>
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<tr>
<td></td>
<td>Mini-Enclosure</td>
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<tr>
<td></td>
<td>Glovebag Procedure</td>
</tr>
<tr>
<td></td>
<td>Non-Exempted (*) and Non-Friable Procedure</td>
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<tr>
<td></td>
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<tr>
<td>NEW BOILER ROOM</td>
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<tr>
<td>NEW BOILER ROOM</td>
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<tr>
<td>ORIGINAL BOILER RM</td>
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<tr>
<td>Name of Registered Waste Hauler</td>
<td>SERVICE TRANSPORT GROUP INC</td>
</tr>
<tr>
<td>NJDEP Waste Hauler ID No.</td>
<td>20890</td>
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<tr>
<td>Cubic Yards of Waste</td>
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<tr>
<td>Name of Registered Landfill</td>
<td>MINERVA LANDFILL</td>
</tr>
<tr>
<td>City, State</td>
<td></td>
</tr>
<tr>
<td>Disposal Date</td>
<td></td>
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<tr>
<td>City, State</td>
<td>WAYNESBURG, OH 44688</td>
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<tr>
<td>Complied By (Print or Type)</td>
<td>DAMIAN LAVELLE</td>
</tr>
<tr>
<td>Date of Completion</td>
<td>6/11/14</td>
</tr>
</tbody>
</table>

* Do not use this form for asbestos licensure exempted activities.
### State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60-7 and 12:120-7)

**Date of Notification (1) 6/27/14**

**Name of Building Owner/Operator (2) MERCK SHARP & DOHME CORP.**

**Agency Notified**
- [ ] EPA
- [ ] DEP
- [x] DOL
- [x] DOH
- [x] DCA

**Type Notification**
- [ ] Initial Notification
- [ ] Amended Notification
- [ ] Cancellation
- [ ] On Hold
- [ ] EMERGENCY NOTIFICATION

**Address**
126 E. LINCOLN AVENUE, P.O. BOX 2000, RY2726

**City, State, Zip Code**
RAHWAY, NEW JERSEY 07065

**Name of Contact**
MARY BETH BAKER
**Telephone Number**

---

**Name of Facility Where Abatement is Taking Place (3)**
MERCK SHARP & DOHME CORPORATION

**Street Address**
126 EAST LINCOLN AVENUE

**City (6)**
RAHWAY
**County (6)**
UNION
**County Code (7)**
(STATE USE ONLY)

**Type of Facility (4)**
- [ ] School (K-12)
- [ ] Subchapter 8 (Other than K-12)
- [x] Other (i.e. private & commm. blds., homes, etc.)

**Square Feet**
20,000
**# of Floors**
1
**Bldg. Age**
40
**Current Use (Prior if being demolished)**
VACANT

**Name of Monitoring Firm Hired by Building Owner (8)**
ENVIRONMENTAL HEALTH INVESTIGATIONS, INC.
**ASCM No.**
17

**Street Address**
655 WEST SHORE TRAIL

**City, State, Zip Code**
SPARTA, NEW JERSEY 07871

**Project Manager for Monitoring Firm**
WILLIAM S. KERBEL, CIH
**Telephone Number**
973-729-5649

**Name of Abatement Contractor (9)**
PAR ENVIRONMENTAL CORPORATION

**Street Address**
313 SPOOK ROCK ROAD

**City, State, Zip Code**
SUFFERN, NEW YORK 10901

**License Number**
545-369-7500
**Telephone Number**
1101

**Expected State Date (10) 7/11/14**
**Sched. Completion Date (11) 8/15/14**

**Occupancy Status During Abatement**
- [ ] Facility Closed/Vacated During Entire Period of Abatement
- [x] Abatement Performed Outside of Normal Facility Hours - Describe: FRIDAY 7AM-3:30PM/SAT URDAYS & SUNDAY 7AM-7PM

**Scope of Work**
- [ ] Demolition
- [ ] Renovation
- [ ] Full Containment with Negative Pressure
- [ ] Glovebag Procedure
- [ ] Non-Friable Procedure

**Location of Asbestos-containing Material (ACM) TO BE ABATED**

<table>
<thead>
<tr>
<th>Location</th>
<th>Description</th>
<th>Amount</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>building #53 Roof-exterior pipe rack</td>
<td>Pipe Insulation</td>
<td>70 Lf. Ft.</td>
<td>X</td>
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<tr>
<td>building #57 Roof-exterior pipe rack</td>
<td>Pipe Insulation</td>
<td>20 Lf. Ft.</td>
<td>x</td>
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</table>

**Name of Registered Waste Hauler**
FREEHOLD CARTAGE, INC.
625 HIGHWAY 33

**Cubic Yards of Waste**
5

**Name of Registered Landfill**
LYCOMING COUNTY RESOURCE MANAGEMENT
447 ALEXANDER DRIVE/ROUTE 15

**City, State**
FREEHOLD, NEW JERSEY
**Disposal Date**
07/12-8/15/2014

**City, State**
FREEHOLD, NEW JERSEY
**Signature**

**Title**
DIRECTOR OF OPERATIONS
**Completed by (Print or Type)**
BENJAMIN SANchez
**Date**
9/27/14
STATE OF NEW JERSEY
NOTIFICATION OF ASBESTOS ABATEMENT
(PURSUANT TO NJAC 8:60-7 AND 12:120-7)

Date of Notification (1)
6 / 13 / 2014

Name of Building Owner / Operator (2)

Street Address
345 St. Peter Street

City, State, Zip Code
St. Paul, MN 55102

Name of Contact
Melissa Sherman

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
1161 Lorraine Avenue

Type of Facility (4)
[ ] School (K-12)
[ ] Subchapter 8 (Other than K-12)
[ ] Other (i.e., private & commercial bldgs., homes, etc.)

Square Feet
1,500

# Of Floors
2

Building Age
64 yrs

Current Use (Prior if being demolished)
Residential home - empty

Name of Monitoring Firm HIRED by Bldg. Owner (8)
Steve Rich Environmental Contractors d/b/a OPUS Abatement

Name of Abatement Contractor (9)
Steve Rich Environmental Contractors d/b/a OPUS Abatement

Street Address
222 Delawanna Avenue

City, State, Zip Code
Clifton, NJ 07014

Telephone Number
973-458-1189

License Number
1219

Occupancy Status During Abatement (Check Only 1)
[ ] Facility Closed/Vacated During Entire Period of Abatement
[ ] Abatement Performed Outside of Normal Facility Hours - Describe:
[ ] Other - Describe:

Scope of Work (Check All That Apply)
[ ] Demolition
[ ] Renovation
[ ] Full Containment with Negative Pressure
[ ] ≥3sf or ≥38f
[ ] ≥180 sf or ≥280 lf
[ ] Mini - Enclosure
[ ] Glovebag Procedure
[ ] Non-Exempt (*) and Non-Friable Procedure

Location of Asbestos Containing Material (ACM)
(I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

Abatement Type
R E M O V A L  R E P A I R  E N C A P S U L E  E N C L O S U R E

Location of Asbestos Containing Material (ACM)

TO BE ABATED
in Facility
(13)

Location

Description of
Asbestos - Containing Material (ACM)

Amount
(Specify
SF or LF)

basement

180 LF

Pipe insulation

Name of Registered Waste Hauler
Newark Carting

Cubic Yards of Waste
4509

Name of Registered Landfill
IESI

City, State
Bethlehem, PA

Complied by (Print or Type)
Tracey O'Connell

Title
Office Manager

Signature
Tracey O'Connell

Date
6/27/14

ASB-41
**State of New Jersey**

**NOTIFICATION OF ASBESTOS ABATEMENT**

(Pursuant to NJAC 8:60 and 12:20/N.J.A.C. 7:26-2.12)

<table>
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<tr>
<th>Date of Notification (1):</th>
<th>06/25/2014</th>
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<tbody>
<tr>
<td>Name of Building Owner/Operator (2):</td>
<td>Matawan-Absecon Board of Education</td>
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<td>Agencies Notified (3):</td>
<td>DEPA, DDP, DOL, DOH, DCA</td>
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<tr>
<td>Type Notification:</td>
<td>Initial</td>
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<tr>
<td>Street Address:</td>
<td>1 Crest Way, Aberdeen, NJ 07747</td>
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<tr>
<td>City, State, Zip Code:</td>
<td></td>
</tr>
<tr>
<td>Name of Contact:</td>
<td>Mrs. Elaine Badalamenti</td>
</tr>
<tr>
<td>Telephone Number:</td>
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</table>

**FACILITY INFORMATION**

<table>
<thead>
<tr>
<th>Name of Facility:</th>
<th>Ravine Drive Elementary School</th>
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<tbody>
<tr>
<td>170 Ravine Drive</td>
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<tr>
<td>City / County:</td>
<td>Matawan / Monmouth</td>
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<tr>
<td>County Code / Zip Code:</td>
<td>07747</td>
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<tr>
<td>Type of Facility (4):</td>
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<tr>
<td>- School (K-12)</td>
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<tr>
<td>- Subchapter 8 (Other than K-12)</td>
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<tr>
<td>- Other (i.e., private &amp; commercial buildings, homes, etc.)</td>
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</tr>
<tr>
<td>Square Feet:</td>
<td></td>
</tr>
<tr>
<td># of Floors:</td>
<td></td>
</tr>
<tr>
<td>Name of Monitoring Firm Hired by Building Owner:</td>
<td>ENVIRONMENTAL CONNECTION, INC.</td>
</tr>
<tr>
<td>ASCM No.:</td>
<td>00030</td>
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<tr>
<td>Name of Abatement Contractor (9):</td>
<td>Apex Development, Inc.</td>
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<tr>
<td>Street Address:</td>
<td>658 Rutgers Place, Paramus, NJ 07652</td>
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<tr>
<td>City, State, Zip Code:</td>
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</table>

<table>
<thead>
<tr>
<th>Project Manager for Monitoring Firm:</th>
<th>Roland C. Jones</th>
</tr>
</thead>
<tbody>
<tr>
<td>Telephone No.:</td>
<td>609-392-4200</td>
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<tr>
<td>Name of OSHA Monitor:</td>
<td>Apex Development, Inc.</td>
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<tr>
<td>Street Address:</td>
<td>658 Rutgers Place</td>
</tr>
<tr>
<td>City, State, Zip Code:</td>
<td>Paramus, NJ 07652</td>
</tr>
</tbody>
</table>

**Start Date (10):**

| 07/17/14 |

**Scheduled Completion Date (11):**

| 07/25/14 |

**Occupancy Status During Abatement (Check only one):**

- Facility Closed/vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours

- Other

**Scope of Work (Check all that apply):**

- ≥ 3 sf or ≥ 3 1/2
- ≥ 160 sf or ≥ 260 sf

**Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13):**

<table>
<thead>
<tr>
<th>Location</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
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<tbody>
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<tr>
<td>Boiler Room and Custodial Storage</td>
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<tr>
<td>Boiler Room and Custodial Storage</td>
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<td></td>
</tr>
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**Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous):**

- Breeching Insulation
- Cementitious Fitting Insulation
- Ceiling Plaster

**Amount (Specify SF or LF):**

- 250 SF
- 80 LF
- 20 SF

**Abatement Type:**

- Enclosure
- Encapsulant
- Repair
- Removal

**Name of Registered Waste Hauler:**

| TRI-STATE TRANSFER ASSOC., INC. |

**Name of Registered Waste Hauler ID No.:**

| NJDEP Waste Hauler ID No.: |
| Cubic Yards of Waste: 30 |

**Name of Registered Landfill:**

**ENTERPRISES MINERVA ASSOC., INC.**

<table>
<thead>
<tr>
<th>Disposal Date:</th>
<th></th>
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<tbody>
<tr>
<td>City, State:</td>
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<tr>
<td>Bronx, NY 10474</td>
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**Name of Registered Landfill:**

**ENTERPRISES MINERVA ASSOC., INC.**

<table>
<thead>
<tr>
<th>City, State:</th>
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<tbody>
<tr>
<td>Waynesburg, OH 44688</td>
<td></td>
</tr>
<tr>
<td>Completed By:</td>
<td>Title:</td>
</tr>
<tr>
<td>--------------------</td>
<td>------------</td>
</tr>
<tr>
<td>Sylvester Oraegbunam</td>
<td>President</td>
</tr>
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</table>

**RECEIVED**

JUL 10 PH 1-38
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:20/N.J.A.C. 7:26-2.12)

Date of Notification (1): 06/25/2014

Name of Building Owner/Operator (2): Matesan-Aberdeen Board of Education

Agencies Notified:
- EPA
- DEP
- DOL
- DOH
- DCA

Type Notification:
- Initial
- Amended
- Emergency
- Notification (including justification)
- Cancellation

Street Address: 1 Crest Way
City, State, Zip Code: Aberdeen, NJ 07747
Name of Contact: Mrs. Elaine Badalamenti
Telephone Number: 

FACILITY INFORMATION

Name of Facility: Lloyd Road Elementary School
401 Lloyd Road
City: Aberdeen
County (6): Monmouth
County Code (7): 07747
Name of Monitoring Firm Hired by Building Owner: ENVIRONMENTAL CONNECTION, INC.
ASCM No.: 00030

Type of Facility (4):
- School (K-12)
- Subchapter 8 (Other than K-12)
- Other (i.e., private & commercial buildings, homes, etc.)

Square Feet: 
# of Floors:

Bldg. Age: Current Use: School

Name of Abatement Contractor (9):
Apex Development, Inc.
Street Address:
658 Rutgers Place
City, State, Zip Code: Paramus, NJ 07652

Project Manager for Monitoring Firm: Roland C. Jones
Telephone No.: 609-392-4200
License No.: 01215

Start Date (10): 07/17/14
Scheduled Completion Date (11): 07/25/14
Name of OSHA Monitor:
Apex Development, Inc.

Occupy Status During Abatement (Check only one):
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours
- Other

Scope of Work (Check all that apply):
- > 3 sf or > 3 ft
- > 160 sf or > 260 lf
- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13):

<table>
<thead>
<tr>
<th>Location</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
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</thead>
<tbody>
<tr>
<td>BOILER ROOM</td>
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<tr>
<td>BOILER ROOM</td>
<td>X</td>
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Is Location Normally Used Solely by Maintenance/Custodial/Staff? (12):

- Breeching Insulation: 200 SF
- Cementitious Fitting Insulation: 40 LF

Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAR, or other miscellaneous):

Abatement Type:
- Removal
- Repair
- Encapsulation
- Enclosure

Name of Registered Waste Hauler:
TRI-STATE TRANSFER ASSOC., INC.
NIDEP Waste Hauler ID No.: 
Cubic Yards of Waste: 30
Name of Registered landfill: ENTERPRISES

City, State: Paramus, NJ 07652
Disposal Date: 06/25/2014

Completed By: Sylvester Oruegbunam
Title: President
Signature: 

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:20/NJ.A.C. 7:26-2.12)

State of New Jersey

Date of Notification (1): 06/25/2014
Name of Building Owner/Operator (2): Matawan-Aberdeen Board of Education

Agencies Notified:
- DEP
- DOL
- DOH
- DCA

Type Notification:
- Initial
- Amended
- Amendments:
- Emergency (including justification)
- Cancellation

Street Address:
1 Crest Way
City, State, Zip Code:
Aberdeen, NJ 07747

Name of Contact:
Mrs. Elaine Badalamenti
Telephone Number:

FACILITY INFORMATION

Name of Facility: Matawan-Aberdeen Regional Middle School
469 Matawan Avenue

City (5): Cliffwood
County (6): Monmouth
County Code (7): 07721

Name of Monitoring Firm Hired by Building Owner:
ENVIRONMENTAL CONNECTION, INC.
ASCM No.:
00030

Type of Facility (4):
- School (K-12)
- Other (i.e., private & commercial buildings, homes, etc.)

Square Feet: # of Floors:

Name of Abatement Contractor (9):
Apex Development, Inc.
Street Address:
658 Rutgers Place
City, State, Zip Code:
Paramus, NJ 07652

Project Manager for Monitoring Firm:
Roland C. Jones
Telephone No.:
609-392-4200

License No.:
01215

Start Date (10):
07/27/14
Scheduled Completion Date (11):
08/05/14

Name of OSHA Monitor:
Apex Development, Inc.
Street Address:
658 Rutgers Place
City, State, Zip Code:
Paramus, NJ 07652

Scope of Work (Check all that apply):
- ≥ 3 sf or ≥ 3 lft
- ≤ 160 sf or ≤ 260 lft

Location of Asbestos-Containing Material (ACM)

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>BOILER ROOM</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BOILER ROOM</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BOILER ROOM</td>
<td>X</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Is Location Normally Used Solely by Maintenance/Custodial/Staff? (12)

Amount (Specify SF or LF)

Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

Abatement Type

BOILER ROOM
Breeching Insulation
100 SF
Removal

BOILER ROOM
Tank Insulation
300 SF

BOILER ROOM
Cementitious Fitting Insulation
50 LF

Abatement Type

Name of Registered Waste Hauler:
TRI-STATE TRANSFER ASSOC., INC.

Name of Registered Landfill:
MINERVA ASSOC., INC.

Cubic Yards of Waste: 30

Other (i.e., private & commercial buildings, homes, etc.)

City, State:
Bronx, NY 10474
Completed By:
Sylvester Onagbunagun
Title:
President
Signature:

Disposal Date:

City, State:
Waynesburg, OH 44688
Date:
06/25/2014
# NOTIFICATION OF ASBESTOS ABATEMENT

**State of New Jersey**

**NOTIFICATION OF ASBESTOS ABATEMENT**

(Pursuant to NJAC 8:60 and 12:20/N.J.A.C. 7:26-2.12)

---

### FACILITY INFORMATION

- **Name of Facility**: Strathmore Elementary School
- **Street Address**: 282 Church Street
- **City**: Aberdeen
- **County**: Monmouth
- **County Code**: 07747
- **Type of Facility (4):** School (K-12)
- **Name of Abatement Contractor (9):** Apex Development, Inc.
- **Address**: 658 Rutgers Place, Paramus, NJ 07652

### Scope of Work (Check all that apply):

- □ ≥ 3 sf or ≥ 3 ft
- □ ≥ 160 sf or ≥ 260 ft
- □ Renovation
- □ Demolition

### Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility

<table>
<thead>
<tr>
<th>Location</th>
<th>Asbestos-Containing Material (ACM) (13)</th>
<th>Normally Used Solely by Maintenance/Custodial Staff?</th>
<th>Description of ACM (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) (12)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>BOILER ROOM</td>
<td>X</td>
<td>Cementitous Pipe Insulation</td>
<td>40 LF</td>
<td>*</td>
<td></td>
</tr>
<tr>
<td>BOILER ROOM</td>
<td>X</td>
<td>Cementitous Fitting Insulation</td>
<td>100 LF</td>
<td>*</td>
<td></td>
</tr>
</tbody>
</table>

---

### Name of Registered Waste Hauler

- **Name of Registered Waste Hauler**: TRI-STATE TRANSFER ASSOC., INC.
- **NJDEP Waste Hauler ID No.**: Cubic Yards of Waste: 30
- **Name of Registered Landfill**: MINERVA ENTERPRISES

---

**City, State**: Bronx, NY 10474

**Completed By**: Sylvester Omoregbon

**Title**: President

**Signature**:  
**Date**: 06/25/2014

---

**Date of Notification (1): 06/25/2014**

---

**RECEIVED 2014 JUL - 1 PM 1:41**
# NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:20/N.J.A.C. 7:26-2.12)

<table>
<thead>
<tr>
<th>Date of Notification (1):</th>
<th>06/25/2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Building Owner/Operator (2):</td>
<td>Matawan-Aberdeen Board of Education</td>
</tr>
</tbody>
</table>

**FACILITY INFORMATION**

<table>
<thead>
<tr>
<th>Name of Facility</th>
<th>Matawan Regional High School</th>
</tr>
</thead>
<tbody>
<tr>
<td>450 Atlantic Avenue</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City (5)</th>
<th>Aberdeen</th>
</tr>
</thead>
<tbody>
<tr>
<td>County (6):</td>
<td>Monmouth</td>
</tr>
<tr>
<td>County Code (7):</td>
<td>07747</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Monitoring Firm Hired by Building Owner:</th>
<th>ENVIRONMENTAL CONNECTION, INC.</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASCM No.:</td>
<td>00030</td>
</tr>
<tr>
<td>Name of Abatement Contractor (9):</td>
<td>Apex Development, Inc.</td>
</tr>
<tr>
<td>Street Address:</td>
<td>658 Rutgers Place</td>
</tr>
<tr>
<td>City, State, Zip Code:</td>
<td>Paramus, NJ 07652</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Project Manager for Monitoring Firm:</th>
<th>Roland C. Jones</th>
</tr>
</thead>
<tbody>
<tr>
<td>Telephone No.:</td>
<td>609-392-4200</td>
</tr>
</tbody>
</table>

| Start Date (10): | 07/09/14 |
| Scheduled Completion Date (11): | 07/17/14 |

<table>
<thead>
<tr>
<th>Occupancy Status During Abatement (Check only one):</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Facility Closed/vacated During Entire Period of Abatement</td>
</tr>
<tr>
<td>☐ Abatement Performed Outside of Normal Facility Hours</td>
</tr>
</tbody>
</table>

| Scope of Work (Check all that apply): |
|--------------------------------|----------------|
| ☑ ≥ 3 sf or ≥ 3 ft² |
| ☑ 160 ft² or ≥ 260 ft² |
| ☑ Renovation |
| ☐ Demolition |
| ☑ Full Containment with Negative Pressure |
| ☐ Mini-Enclosure |
| ☐ Glovebag Procedure |
| ☐ Non-Exempted (*) and Non-Friable Procedure |

| Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13): |
|-------------------------|----------------|
| Boiler Room: | X |

| Is Location Normally Used Solely by Maintenance/Custodial/Staff? (12): |
|--------------------------|----------------|
| Control Room: | X |

<table>
<thead>
<tr>
<th>Description of Asbestos-Containing Material (ACM) (i.e., thermal insulation, surfacing, VAT, or other miscellaneous):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cementitious Fitting Insulation</td>
</tr>
</tbody>
</table>

| Amount (Specify SF or LF): | 50 LF |

<table>
<thead>
<tr>
<th>Abatement Type:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Removal</td>
</tr>
<tr>
<td>Repair</td>
</tr>
<tr>
<td>Encapsulant</td>
</tr>
<tr>
<td>Enclosure</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Name of Registered Waste Hauler:</th>
</tr>
</thead>
<tbody>
<tr>
<td>TRI-STATE TRANSFER ASSOC., INC.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NJDEP Waste Hauler ID No.:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cubic Yards of Waste: 30</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Registered landfill:</th>
</tr>
</thead>
<tbody>
<tr>
<td>MINERVA ASSOC., INC.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City, State:</th>
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</thead>
<tbody>
<tr>
<td>Bronx, NY 10474</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Disposal Date:</th>
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<tbody>
<tr>
<td>City, State:</td>
</tr>
<tr>
<td>Waynesburg, OH 44688</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Completed By:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sylvester Oraegbunam</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Title:</th>
</tr>
</thead>
<tbody>
<tr>
<td>President</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Signature:</th>
</tr>
</thead>
<tbody>
<tr>
<td>___________________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>06/25/2014</td>
</tr>
</tbody>
</table>
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification (1)
6/25/14

Name of Building Owner / Operator (2)
VERIZON COMMUNICATIONS

Agencies Notified
☑ EPA
☑ DEP
☑ DOL
☑ DOH
☑ DCA

Type Notification
☐ Initial
☐ Amended
☐ Emergency
☐ Cancellation

Street Address
144 ROUTE 10 AND HUNTER STREET

City, State & Zip Code
SUCCASUNNA NEW JERSEY

Name of Contact
ALEX BAYLOR

Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
SUCCASUNNA CENTRAL OFFICE

Street Address
144 RTE 10 & HUNTER STREET

City (5) County (6) County Code (7)
SUCCASUNNA MORRIS

Type of Facility (4)
☐ School (K-12)
☐ Subchapter 8 (Other than K-12)
☐ Other (i.e. private & commercial buildings, homes, etc.)

Square Feet # of Floors Bldg. Age
11570 1

Current Use (Prior to being demolished)

COMMUNICATIONS

Name of Abatement Contractor (9)
BRISTOL ENVIRONMENTAL INC

Street Address
1123 BEAVER STREET

City, State & Zip Code
BRISTOL, PA 19007

Telephone Number
215-788-6040
License Number
00509

Name of OSHA Monitor
BRISTOL ENVIRONMENTAL INC

Street Address
1123 BEAVER STREET

City, State & Zip Code
BRISTOL, PA 19007

Scope of Work (Check all that apply)

☑ ≥3 sf or ≥3 If
☐ ≥150 sf ≥260 If
☐ Renovation
☐ Demolition

Location of Asbestos-Containing Material (ACM)
TO BE ABATED in Facility

(13)

Is Location Normally Used Solely by Maintenance or Custodial Staff?
Yes No N/A

(12)

Description of Asbestos-Containing Material (ACM)
(i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)

Amount (Specify SF or LF)
Abatement Type

Full Containment with Negative Pressure
Mini-Enclosure
Glove Bag Procedures
Non-Exempted and Non-Friable Procedure

1ST FLOOR BATTERY AREA

☑ VAT/MASTIC
70 SF

1ST FLOOR FOYER

☑ VAT/MASTIC
55 SF

1ST FLOOR HVAC ROOM

☑ VAT/MASTIC
750 SF

1ST FLOOR DIESEL ROOM

☑ VAT/MASTIC
225 SF

1ST FLOOR FRAME AREA

☑ PIPE INSULATION
8 LF

Name of Registered Waste Hauler
SERVICE TRANSPORT GROUP, INC.
NJDEP Waste Hauler ID No.
20990

Cubic Yards of Waste
10

Name of Registered Landfill
MINERVA LANDFILL

City, State
NEW CASTLE, DE 19720

Disposal Date
City, State
WAYNESBURG, OH 44688

Completed By (Print or Type)
PATRICK T. DeCARO

Title
PROJ. MGR.

Signature

Date
6/25/14

PD14046
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:80 and 5:16)

Date of Notification (1) 6 / 24 / 14

Name of Building Owner/Operator (2) Arbor Management, LLC

Agencies Notified
☐ EPA
☐ DOLWD
☐ DHSS
☐ DCA (NJAC 5:23-3)

Type Notification
☐ Initial
☐ Amended
☐ Amendment #
☐ Emergency (Including justification)
☐ Cancellation

Street Address 4 Denny Rd.

City, State, Zip Code Wilmington, DE 19809

Name of Contact: Guy Pollice

Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3) Burlington Manor Apartments

Street Address 255 S. Pearl St.

City (5) Burlington

County (6) Burlington

County Code (7) (STATE USE ONLY)

Current Use (Prior if being demolished) Apartments

Name of Monitoring Firm Hired by Building Owner (8) Brightfields, Inc

ASCM No.

Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, INC.

Street Address 1123 BEAVER STREET

City, State, Zip Code BRISTOL, PA 19007

Project Manager for Monitoring Firm Monty Krough

Telephone No. 302-656-9600

License No. 215-788-6040

Name of OSHA Monitor BRISTOL ENVIRONMENTAL, INC.

Street Address 1123 BEAVER STREET

City, State, Zip Code BRISTOL, PA 19007

Start Date (10) 7 / 10 / 14

Scheduled Completion Date (11) 7 / 11 / 14

Occupancy Status During Abatement (Check only one)
☐ Facility Closed/Vacated During Entire Period of Abatement
☐ Abatement Performed Outside of Normal Facility Hours - Describe

Time of Abatement: 8:30AM-5:30PM/____PM-____AM

Scope of Work (Check all that apply)
☐ ≥3 sf or ≥3 if
☐ ≥160 sf or ≥260 if
☐ Renovation
☐ Demolition
☐ Full Containment with Negative Pressure
☐ Mini-Enclosure
☐ Glovebag Procedure
☐ Non-Exempted (*) and Non-Friabile Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)

Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A

Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

Amount (Specify SF or LF)

Boiler Room Boiler caulk 120 SF

Name of Registered Waste Hauler SERVICE TRANSPORT GROUP, INC.

NJDEP Waste Hauler ID No. 20990

Cubic Yards of Waste

Name of Registered Landfill MINERVA LANDFILL

City, State WAYNESBURG, OH 44688

Disposal Date

Completed By (Print or Type) Brian Scafiro

Title Estimator

Signature

Date 6/24/14

* Do not use this form for asbestos licensure exempted activities.
**NOTIFICATION OF ASBESTOS ABATEMENT**

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

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>Name of Building Owner/Operator (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>6/23/14</td>
<td>Passaic Valley Sewerage Commission</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Agencies Notified</th>
<th>Type Notification</th>
<th>Street Address</th>
<th>City, State, Zip Code</th>
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</thead>
<tbody>
<tr>
<td>EPA</td>
<td>Initial</td>
<td>600 Wilson Ave</td>
<td>Newark, NJ 07105</td>
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<tr>
<td>DEP</td>
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<td>DOL</td>
<td>Amendment #</td>
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<td>DOH</td>
<td>Emergency (including justification)</td>
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<tr>
<td>DCA</td>
<td>Cancellation</td>
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**FACILITY INFORMATION**

<table>
<thead>
<tr>
<th>Name of Facility Where Abatement is Taking Place (3)</th>
<th>Type of Facility (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Passaic Valley Sewerage Commission</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>City, State, Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>600 Wilson Ave</td>
<td>Newark, NJ 07105</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>County Code (7)</th>
<th>Current Use (Prior if being demolished)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Essex</td>
<td>Office/locker room</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Monitoring Firm Hired by Building Owner (8)</th>
<th>Name of Abatement Contractor (9)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Briggs Associates, Division of H&amp;R Environmental</td>
<td>New States Contracting, LLC</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Telephone No.</th>
<th>License No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>609-298-5520</td>
<td>00749</td>
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<table>
<thead>
<tr>
<th>Start Date (10)</th>
<th>Scheduled Completion Date (11)</th>
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<tbody>
<tr>
<td>7/8/14</td>
<td>8/1/14</td>
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</table>

<table>
<thead>
<tr>
<th>Occupancy Status During Abatement (Check Only One)</th>
<th>Scope of Work (Check All That Apply)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility Closed/Vacated During Entire Period of Abatement</td>
<td>23 sf or 23 if</td>
</tr>
<tr>
<td>Abatement Performed Outside of Normal Facility Hours</td>
<td>160 sf or 260 if</td>
</tr>
<tr>
<td>Other – Describe:</td>
<td>Renovation Demolition</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (15)</th>
<th>Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12)</th>
</tr>
</thead>
<tbody>
<tr>
<td>X</td>
<td>Yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
<th>Amount (Specify SF or LF)</th>
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</thead>
<tbody>
<tr>
<td>Thermal Pipe insulation</td>
<td>300 lf</td>
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<table>
<thead>
<tr>
<th>Name of Registered Waste Hauler</th>
<th>Cubic Yards of Waste</th>
<th>Name of Registered Landfill</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frechold Cartage</td>
<td>40</td>
<td>Western Berks</td>
</tr>
</tbody>
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<table>
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<tr>
<th>Disposal Date</th>
<th>City, State</th>
</tr>
</thead>
<tbody>
<tr>
<td>7/31/14</td>
<td>Birdsboro, PA 19508</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Completed by</th>
<th>Name</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Michael Migliore</td>
<td></td>
<td></td>
<td>6/23/14</td>
</tr>
</tbody>
</table>
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to N.J.A.C. 7:26-2.12)

Date of Notification (1):
6/30/2014

Name of Building Owner/Operator (2):
NAVFAC Mid Atlantic – Northeast IPT

Agencies Notified:
(X) EPA
(X) DOL
(X) DOH
( ) DCA

Notification Type:
( ) Initial Notification
(X) Amended Certification
( ) Cancelled

Street Address:
9742 Maryland Ave – Bldg. Z-144

City, State, Zip Code:
Norfolk, VA 23511

Name of Contact:
Romeo LeGuirato

FACILITY INFORMATION

Name of Facility Where Abatement Is Taking Place (3):
P237 – VADM James H. Doyle, Jr. Combat System Engineering Development Site (CSEDS)

City (5):
Moorstown

County (6):
Camden

County Code (7):
( ) Intended Use Only

Name of Monitoring Firm Hired by Bldg. Owner (8):
Environmental Management International

Type of Facility (4):
( ) School (K-12)
(X) Subchapter B (other than K-12)
( ) Other (i.e. private & commercial bldgs., homes, etc.)

Sq. Feet: 20,000
# of Floors: 2

Bldg. Age: 30+
Current Use (prior if being demolished): Naval Development

Name of Contractor (9):
NCM Demolition and Remediation, LP

Project Manager for Monitoring Firm:
David Cassenti

Telephone Number:
610-277-0405

License Number:
01066

City, State, Zip Code:
East Norristown, PA 19401

Street Address:
34 East Germantown Pike, Suite 204

Occupancy Status During Abatement (Check only one):
( ) Facility Closed/Vacated During Entire Period of Abatement
( ) Abatement Performed Outside of Normal Facility Hours -
Describe ______ Non Business Hours

Other X Describe ______ Isolate work area within regulated area

Street Address:
395 Turner Industrial Way

City State, Zip Code:
Aston, PA 19014

Scheduled Start Date (10):
07/03/2014

Scheduled Completion Date (11):
7/15/2014

Name of OSHA Monitor:
EMSL Analytical

Source of Work (Check all that apply):
( ) Demolition
( ) Renovation
(X) Large Proj. (>160 SF or >260 LF ACM) ( ) M Proj. (>25-160 SF or >10 <260 LF ACM) ( ) Minor Proj. (<25 SF or <10 LF ACM)
(X) Full Containment with Negative Pressure ( ) Mini-Enclosure ( ) Glovebag Procedure

Location of Asbestos-Containing Material (ACM) in Facility (13):

Northeast Exterior Wall X

Is Location Normally Used Solely by Maint./Custodial Staff? (12):
YES NO NA

Description of ACM (i.e. thermal systems insulation, surfacing, VAT, or other miscell.):
Gablestos coated corrugated metal siding

Amount (Specify SF or LF):
400 SF

Abatement Type:
X


Name of Req. Waste Hauler:
NJDEP Waste Hauler ID #
A901 #209090 / SW2117

Cubic Yards of Waste:
3

Name of Req. Landfill:
Minerva

Disp. Date:
7/12/2014

City, State:
Waynesboro, OH

Completed by (Print or Type):
Richard P. Semea, Jr.

Title:
Branch Manager

Signed:

Date:
6/30/2014
X. Description of Planned Demolition or Renovation Work and Methods to be Used: Removal of 400 sf of galbestos siding.

XI. Description of Engineering Controls and Work Practices to be Used to Control Emissions of Asbestos at the Demolition or Renovation Site: Regulated work area, wet removal methods, HEPA filtration equipment, wet material and wrapping.

XII. Waste Transporter#1 Service Transport Group

Address: 58 Pyles Lane
City: New Castle County: New Castle State: DE Zip: 19720
Contact: Randy Bridges Telephone: 877-999-9559

Waste Transporter#2 Same as #1

Address
City
County
State
Zip
Contact
Telephone

XIII. Waste Disposal Site Minerva Landfill

Address: 8999 Minerva Road
City: Waynesburg County: State: OH Zip: 44688
Contact: Telephone: 330-866-3435

EPA Certification Number: P0104584

XIV. If the Demolition was Ordered by a Government Agency, Please Identify the Agency Below:

Name
Title
Authority
Date of Order (MM/DD/YY)
Date Ordered to Begin (MM/DD/YY)

XV. For Emergency Renovations:

Date and Time of Emergency: (MM/DD/YY) (HH:MM)

Description of Sudden, Unexpected Event

Explanation of how the Event caused unsafe conditions, or a serious disruption of industrial operations

XVI. Description of Procedures to Be Followed in the Event that Unexpected Asbestos is Found, or that Previously Non-Friable Asbestos Material Becomes Crumbled, Pulverized or Reduced to Powder

Segregate area, wet materials, post signs, alert generator

XVII. I Certify that an Individual, Trained in the Provisions of this Regulation (40CFR, Part 61, Subpart H) Will be On-Site During the Demolition or Renovation, and that Evidence that the Required Training has Been Accomplished by this Person will be Available for Inspection During Normal Business Hours (Required one (1) year after promulgation).

[Signature of Owner/Operator] (Date) 06-30-2014

XVIII. I Certify that the Above Information is Correct

[Signature of Owner/Operator] (Date) 06-30-2014
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1)
6/30/14

Name of Building Owner/Operator (2)
Princeton University, Facilities Procurement Office

Agencies Notified

<table>
<thead>
<tr>
<th>Agency</th>
<th>Type Notification</th>
</tr>
</thead>
<tbody>
<tr>
<td>EPA</td>
<td>Initial</td>
</tr>
<tr>
<td>DEP</td>
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<tr>
<td>DOL</td>
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<tr>
<td>DOH</td>
<td></td>
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<tr>
<td>DCA</td>
<td></td>
</tr>
</tbody>
</table>

Street Address
EA McMillan Building

City, State, Zip Code
Princeton, NJ 08544

Name of Contact
Bob Ortego

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
Residence

Street Address
143 Hartley Avenue

City (5)
Princeton

County (6)
Mercer

Square Feet
1600

# of Floors
2

Bldg, Age
59

Name of Monitoring Firm Hired by Building Owner (8)
Pennoni Associates, Inc.

ASCM No.

Name of Abatement Contractor (9)
ecoservices, LLC

Street Address
515 Grove Street, Suite 1B

City, State, Zip Code
Haddon Heights, NJ 08035

Name of OSHA Monitor
EMSL

Telephone No.
856-547-0505

Project Manager for Monitoring Firm
R. Alan Lloyd

Telephone No.
484-872-8804

Telephone No.
01161

License No.

Start Date (10)
7/14/14

Scheduled Completion Date (11)
8/1/14

Occupancy Status During Abatement (Check Only)

- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours

Other - Describe: Hours: 8 am - 4:30 pm

Scope of Work (Check All That Apply)

- ≥23 sf or ≥23 if
- ≥160 sf or ≥260 if
- Renovation
- Demolition

Location of Asbestos-Containing Material (ACM)

TO BE ABATED

in Facility

In Facility

(13)

Is Location Normally Used Solely by Maintenance/Custodial Staff?
Yes No N/A

Heater Room

x

Flue Patch

3 sf

Outside Wall

x

Caulk @ AC unit

1 sf

Interior Walls / Ceiling

Joint Compound on GWB

6910 sf

Description of Asbestos-Containing Material (ACM)

(i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)

Name of Registered Waste Hauler
Waste Management of New Jersey

LDEP Waste Hauler ID No.

Cubic Yards of Waste
40

Disposal Date
TBD

Name of Registered Landfill
GROWS

City, State
Trenton, NJ

Completed by
Jack Bally

Title
Sr. Project Manager

Signature

Date
6/30/14

Do not use this form for asbestos licensure exempted activities.
# NOTIFICATION OF ASBESTOS ABATEMENT

**Date of Notification:** 6/30/14  
**State:** New Jersey  
**Name of Building Owner / Operator:**  
**Address:** 1695 Hylton Road, Pennsauken, NJ 08110  
**Name of Contact:** Mr. Jack Killian  
**Telephone Number:**  

**FACILITY INFORMATION**

- **Name of Facility Where Abatement is Taking Place:** H.M. Phifer Middle School  
- **Type of Facility:** School (K-12)  
- **City:** Pennsauken  
- **County:** Camden  
- **County Code:**  
- **Square Feet:** 5,000  
- **Building Age:** 40+  

**Name of Monitoring Firm Hired by Bldg. Owner:** Arcadis U.S., Inc  
**Name of Abatement Contractor:** LVI Environmental Services Inc.  
**Street Address:**  
- **City, State, Zip Code:** Branchburg, NJ 08876  
- **City, State, Zip Code:** East Hanover, NJ 07936  

**Sheduled Start Date:** 7/14/14  
**Sched. Completion Date:** 7/17/14  
**Occupancy Status During Abatement:** Facility Closed/Vacated During Entire Period of Abatement  
**Other - Describe:** MON-FRI, 7:00AM-3:30PM  

**Location of Asbestos Containing Material (ACM) TO BE ABATED in Facility:**  
- **Description of Asbestos - Containing Material (ACM):** (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  

**Abatement Type:** Full Containment with Negative Pressure  
**Location:** Multi purpose room kitchen  
**Amount:** 5500  
**Name of Registered Landfill:** Minerva Landfill  
**Name of Registered Waste Hauler:** NJDEP Waste Hauler SW2117  
**Cubic Yards:**  
**Disposal Date:**  
**City, State:**  
**New Castle, DE:**  
**Completed by:** Gary Bowman  
**Title:** Project Manager  
**Date:** 6/30/14
State of NJ
Notification of Asbestos Abatement
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1)
10/15/11 12/14/11

Name of Building Owner/Operator (2)
PETER LATIMER

Agencies Notified
☐ EPA ☑ DEP ☑ DOL ☑ DOH ☑ DCA
Type Notification
Initial Amended Emergency
Amendment #: (including justification)
Cancellation

Street Address
31 VALHALLA WAY

City, State, Zip Code
VERONA, NJ 07044

Name of Contact
PETER LATIMER

FACILITY INFORMATION

Type of Facility (4)
☐ School (K - 12)
☐ Subchapter 8 (Other than K-12)
☒ Other (Private/Commercial Bldgs./Homes, etc.)

Square Feet

# of Floors

Bldg. Age

Current Use (Prior to being demolished)

Name of facility where abatement is taking place (3)
PETER LATIMER

Street Address
31 VALHALLA WAY

City (5) County (6) County Code (7)
VERONA ESSEX (State use only)

Name of Monitoring Firm Hired by Bldg. Owner (8)

ASCM No.

Name of Abatement Contractor (9)
D & S RESTORATION, INC.

Street Address
20 California Ave.

City, State, Zip Code
Paterson, NJ 07503

Telephone Number
973-345-8020

License Number
01169

Name of OSHA Monitor
D & S Restoration, Inc.

Street Address
20 California Avenue

City, State, Zip Code
Paterson, NJ 07503

Start Date (10)
07/08/14

Scheduled Completion Date (11)
07/25/14

Occuancy Status During Abatement (Check only one)
☐ Facility closed/vacated during entire period of abatement.
☐ Abatement performed outside of normal facility hours—
Describe: NORMAL HOURS

Other—Describe:

Scope of Work (check all that apply)
☒ ≥ 3,000 sf or ≥ 3,000 sf
☒ Renovation
☒ Demolition
☐ ≥ 160 sf or ≥ 280 sf

Location of asbestos-containing material (acm) to be
abated in facility (13)

BASEMENT
PIPE INSULATION

Location is normally used solely by
maintenance/custodial staff (12)

Yes ☒ No ☑ N/A

Description of asbestos-containing
material (ACM)

Amount (Specify SF or LF)

Removal Repair Encapsulation

Non-Exempted (*) and Non-Friable Procedure

Registered Waste Hauler
D & S RESTORATION, INC.

Customer ID
13506

Cubic Yards of Waste
1 YD

Name of Registered Landfill
TULLYTOWN, RESOURCE RECOVERY

City, State
Paterson, NJ 07503

Disposal Date
07/09/14

Completed by (Print or Type)
BOGDAN JOLDZIC
Title
PRESIDENT

Signature

Date
06/24/2014

* Do not use this form for asbestos licensing exempted activities.
State of NJ  
Notification of Asbestos Abatement  
(Pursuant to NJAC 8:60 and 12:120)  

Date of Notification (1)  
1/16/14  

Name of Building Owner/Operator (2)  
GERARD COONEY  

Agencies Notified:  
- EPA  
- DEP  
- DOL  
- DOH  
- DCA  

Type Notification: Initial  

Amendment #:  

Street Address:  
17 SAND HILL ROAD  

City, State, Zip Code:  
ANNANDALE, NJ 08801  

Name of Contact:  
GERARD COONEY  

FACILITY INFORMATION  

Name of facility where abatement is taking place (3)  
GERARD COONEY  
17 SAND HILL ROAD  

City (5)  
ANNANDALE  

County (6)  
HUNTERDON  

County Code (7)  
(State use only)  

Name of Abatement Contractor (9)  
D & S RESTORATION, INC.  
20 California Ave.  
Paterson, NJ 07503  

Project Manager for Monitoring Firm:  
Location of asbestos-containing material (ACM) to be abated in facility (13)  

- Basement:  
  - PIPE INSULATION  
  - CHIMNEY PACKING  

- Basement:  
  - PIPE INSULATION  
  - CHIMNEY PACKING  

Amount (Specify SF or LF)  
45 L FT  
1 SQ FT  

Name of Registered Landfill:  
TULLYTOWN, RESOURCE RECOVERY  

Cubic Yards of Waste:  
1 YD  

Registered Waste Hauler:  
D & S RESTORATION, INC.  
NJDEP Hauler ID# 13506  

City, State  
Paterson, NJ 07503  

Disposal Date:  
07/02/14  

Completed by (Print or Type):  
BOGDAN JOLDZIC  
Title  
PRESIDENT  
Signature  

Date  
06/24/2014  

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