4001 TON 15230			ursuant		9:60 And	12:12			异	A NE		5		
Date of Notification (1)  JUNE 20, 2019  Agencies Notified  Type Notification	13			Building ( N MATA ddress		perator	(2)			EGE		V		M
☐ EPA ☐ Initial ☐ Amended ☐ DOL ☐ Amendment #		_		te, Zip Co				Wall and the second printer		JUL -	1 2	019	Appear by the Control of Control	
□ DOH justification Cancellation	ncluding			Contact ABRAH	AMSO	N		The same of the sa	Tel	ephone Nun		. :0	&	ment-man
Name of Facility Where Abatement is Taking BRIAN MATANO PROPERTY	Place (3	5)	FACI	LITY INFO	DRMATI	ON	Type of F				401144			
Street Address							Sub	er (i.e.	r 8 (Oth	er than K-12 & commercia	al build			es,
City (5) RIDGEWOOD							Square F 4,346	eet	# o	f Floors		ldg. A 1930		
County (6) BERGEN			County (	Code (7) JSE ONLY)			Current U RESID	Jse (Pr DENC	ior if bei E	ng demolish	ed)			
Name of Monitoring Firm Hired by Building O N/A	wner (8)		ASCN	l No.			of Abatem shing Tou			(9) s Abatemer	nt Cor	p., Ir	IC.	
Street Address							Address Thompso	n Str	eet					
City, State, Zip Code							State, Zip C st Long E		h, NJ (	07764				
Project Manager for Monitoring Firm N/A			Telephor	ne No.			none No. 2.222.837	'2		License N 00040	0.			
Start Date (10) 6/26/19	Schedule 6/30/1		mpletion [	Date (11)		Name N/A	of OSHA N	Monitor	-5					
Occupancy Status During Abatement (Check  Facility Closed/Vacated During Entire Pe	eriod of A	Abater	ment				Address							
Abatement Performed Outside of Norma Other – Describe:	al Facility	Hour	s 		_	City, S	State, Zip C	ode		*		,		
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	-	tenova Jemoli				×	Mini-Er Gloveb	nclosur ag Pro	re ocedure	n Negative P			e	
Location of	h	Locat	iiy		Des	scription	of					Abate Ty	pe	t
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Ma	d Sole intena odial (12)	ince/ Staff?		tos Cont thermal surfac	aining N	flaterial (AC s insulation T, or		(5	mount Specify F or LF)	Remova	Repair	Encapsulate	Enclosure
BASEMENT	Yes	No	N/A X			TSI			2	20LF	X		te	0
						(W.5.3)								
														-
Name of Registered Waste Hauler Finishing Touch Asbbestos Abatement Corp.	, Inc.	H	NJDEP W Hauler ID 12058	77.77	Cubic of Was .5 C	ste	N:	ame of FAIRI	Registe LESS I	ered Landfill _ANDFILL	-		1	1
City, State WEST LONG BRANCH, NJ 07764					Dispos 6/28	sal Date /19	Ci	ity, Sta MORI	te RISVIL	LE, PA				
Completed by JOSEPH P. MILLER	Title PRE	ESIDI	ENT		S	ignature	4 P.M	100		Da 6	te /20/1	9		

MCB			NOTI		MOITA	OF AS	ew Jersey BESTOS ABA AC 8:60 and 5:		IENT	ID-	G. C			<u> </u>	
Date of Notification (1)					Name	of Buildin	g Owner/Operator	(2)			JUL	- 1	20	)19	
10 /	30 /	18			Ve	rizon Cor	nmunications				000		San S	, 10	17
Agencies Notified	Type Notifica	ation			Stree	t Address					PRODUCTION STATES		nun Pouls	Market College	
□ EPA							ntgomery Stree	t		AS	BEST		SING		&
□ DOLWD						State, Zip (					L-1	- Fact of	271110	-	
□ DOH	_ Amendme	2000		A			PA 15212								
DCA	☐ Emergend justification		cluding			of Contac			STREET, CONTRACTOR OF THE	Telephone	Numbe	or .	200000		-
(NJAC 5:23-8)	☐ Cancellati					thony Po				412-633					
										412-000	7 4021				
Name of Facility Where A	hatament is T	akina	Dlaco	/21	FA	CILITY	IFORMATION	Tue	oo of Engility /	A)					
Verizon Swedesbor		aking	Place	(3)				15.00	oe of Facility ( School (K-12)	100					
Street Address	0 0.0.								Subchapter 8		K-12)				
2 <sup>nd</sup> and Broad Stree	et							$\boxtimes$	Other (i.e., pr homes, etc.)	ivate and co	mmerc	ial bu	ilding	S,	
City (5)					n	DANA	5	Squ	uare Feet	# of Floor	s	Blo	lg. Ag	je	
Swedesboro					U	000	)* )	5	5,398	2		+	-50		
County (6)					Cou	nty Code (	)(STATE USE ONLY	) Cur	rrent Use (Pri	or if being de	emolish	ed)		A service of	
Gloucester								V	/erizon						
Name of Monitoring Firm	1,070			8)	ASCM	No.	Name of Abater	ment C	Contractor (9)						
USA Environmenta	l Manageme	ent In	C				BRISTOL E	NVIR	ONMENTAL	., INC.					
Street Address							Street Address								
8436 Enterprise Ave	е						1123 BEAV	ER S	TREET						
City, State, Zip Code							City, State, Zip	Code							
Philadelphia, PA 19	153						BRISTOL, F	PA 19	007						
Project Manager for Moni	toring Firm			Te	lephone	No.	Telephone No.			License 1	No.				
Mark Jenkins				2	215-36	5-5870	215-788-604	40		00509					
Start Date (10)		Sched	uled C	omp	letion Da	ate (11)	Name of OSHA	Monit	or						
6 /28 /	19	6	3/	_2	29 /	19	BRISTOL E	NVIR	ONMENTAL	., INC					
Occupancy Status During	Abatement (0	Check	only	ne)			Street Address								
☐ Facility Closed/Vacate	ed During Entir	re Per	iod of	Abat	ement		1123 BEAV	ER S	TREET						
Abatement Performed							City, State, Zip	Code							
Time of Abatement: _	AM	PN	// <u>5:00</u>	PM-	2:00AN		BRISTOL, F	A 19	007						
Scope of Work (Check all	that apply)						1								
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>			⊠ Re	nova molit			☐ Mini-Er ☐ Gloveb	nclosu pag Pro	ment with Neg ire ocedure ed (*) and Nor			e			
			Is	Loc	ation							Ab	atem	ent Ty	/ре
Location				Norm	ally lely by		Description					D	R	Ш	Ш
Asbestos-Containing I TO BE ABA		1)			nance/		estos Containing No., thermal system			Amour (Speci		Removal	Repair	Encapsulate	Enclosure
IN Facilit			Cus		I Staff?	(1.0	surfacing, VA		iation,	SF or L		oval	=	osul	sur
(13)				(12		-	other miscellar	neous)	)					ate	CD
Generator Room	matter and the second		Yes	No	N/A	VAT/M	astic			45 SI	=		П		
		-				-									
			Ш										П	Ш	
			П									П	П		
Name of Registered Was		INIC		T	NJDEP Hauler		Cubic Yards of Waste	N	lame of Regis				_		_
SERVICE TRANSPO	JAT GROUP	, IIVC			2099					-WINDLIFF	X 				
City, State YARDLEY, PA							Disposal Date TBD		ity, State WAYNESB	URG, OH					
Completed By (Print or Ty	ype)	Title					Signature			10	Dat			1000	215
Dillan DeCaro		E	stima	tor			Dilla	Inx 1	Ou Cana	/ Upc	16	2-1	26	-/ 0	7

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

				1	213uui	111 10 140	AC 0	5.00 and 5.1	0)		11				1
Date of Notification (1)					Name	e of Buildir	ng Ov	vner/Operator	(2)	111	H JI	11	1-2	919	- 11
	30 /	18			Ve	rizon Sw	redes	sboro C.O.	1 2						200
Agencies Notified	Type Notific	ation			Stree	t Address				-	ACDE	STOS (	YM	12/11	word.
⊠ EPA	☑ Initial	ation			200000000000000000000000000000000000000	& Broad		oot			AODE	LICEN			, Ct
□ DOLWD	☐ Amended	d								Louise		MATERIAL PROPERTY.	of Carrings - 18	CONTRACTORS	merce se
□ DOH	Amendm	ent #1-	-11/1	5/18	1	State, Zip									
□ DCA	☐ Emergen		luding	l		edesbor	-	J 08085							
(NJAC 5:23-8)	justificati					of Conta				Tel	ephone Nu	mber			
	☐ Cancellat	tion			Bri	an Tiltor	1			2	15640456	63			
					FA	CILITY II	NFO	RMATION							
Name of Facility Where		Taking I	Place	(3)					Type of Facility	(4)					
Verizon Swedesb	oro C.O.								School (K-12		1924 220				
Street Address									<ul> <li>☐ Subchapter</li> <li>☑ Other (i.e., p</li> </ul>				ildin	76	
2 <sup>nd</sup> and Broad Str	eet ,								homes, etc.		and comm	lercial bi	unanię	<b>J</b> S,	
City (5)									Square Feet	#	of Floors	В	dg. A	ge	2011-0
Swedesboro									5,398		2	1	+-50		
County (6)					Cour	nty Code (	7)(STA	ATE USE ONLY)	Current Use (Pr	ior if b	peina demo	lished)			
Gloucester						•		\$30	Verizon		J	,			
Name of Monitoring Fin	m Hired by Build	ding Ov	vner (	8)	ASCM	No.	Na	me of Abateme	ent Contractor (9)	)					
USA Environment	tal Manageme	ent Inc	;	1000			1		VIRONMENTA		C				
Street Address								eet Address	·intoitimEitti	_,	<u> </u>		_	-	-
8436 Enterprise A	ve							123 BEAVE	D STREET						
City, State, Zip Code				-				y, State, Zip Co		-					
Philadelphia, PA 1	19153							BRISTOL, PA							
Project Manager for Mo				Tole	phone	No	_	lephone No.	19007	11:					
Mark Jenkins	g r iiii			1000	15 365		100,000	215-788-6040		21,000,00	cense No.				
Start Date (10)	10	Schedul	lod Co	WEIL			-				00509				
11 / 13					40		1	me of OSHA N			_				
							E	SKISTOL EN	VIRONMENTA	L, IN	C				
Occupancy Status Durin							Str	eet Address							
☐ Facility Closed/Vaca	ted During Entir	re Perio	od of A	Abate	ment		1	123 BEAVE	R STREET						
Abatement Performe Time of Abatement:	AM-	ormai F DM/	acility 5.00	Hour	S - Des	cribe	City	y, State, Zip Co	ode						
			0.00	101-22.	OUATO		E	BRISTOL, PA	19007						
Scope of Work (Check a	all that apply)									900	200				
☐ >3 sf or >3 lf		Б	☑ Rer	novati	on				tainment with Neg	gative	Pressure				
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>			Der						g Procedure						
								☐ Non-Exe	mpted (*) and No	n-Fria	ble Proced	lure			
				Locat								Ab	atem	ent T	уре
Locatio Asbestos-Containing		,		lorma d Sole		A-h-		Description o				R	R	ш	Ш
TO BE AB		''	Mai	ntena	nce/			Containing Ma ermal systems			Amount (Specify	emo	Repair	nca	nclo
IN Fac			Custo		Staff?	, , ,	S	surfacing, VAT,	, or		SF or LF)	Removal	=	Encapsulate	Enclosure
(13)			V T	(12)	T	-	ot	her miscellane	ous)		창	33/4		late	е
			Yes	No	N/A										
Generator Room		] [				VAT/Ma	astic	Š			270 SF				
		1	7							-				П	
		-	=		-					-		ᆜᆜ	닏	_	
-52 mm A mm 2 mm 1		[													
Name of Registered Wa	iste Hauler			9556	JDEP \		20333903	oic Yards of	Name of Regis	tered	Landfill				
SERVICE TRANSP	ORT GROUP	, INC.		Н	auler II		Wa	ste	MINERVA						
City, State					20990	,	Dis	posal Date	City, State				-		romana. I ter
YARDLEY, PA							1	BD	WAYNESB	IIBC	OH				
Completed By (Print or	Tyne\	Title							WATNESB	ONG					
Dillan DeCaro	1 300)		imat	0.5				Signature	~ 19ª Ca		1. 1	Date 11/	/_	1	-
Jilian Decard		_ ⊏ST	imat	or				Villa	~ Wa	N	11	16/	15/	18	2

ASB-41 JAN 13 0018052

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

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

Date of Notification (1)			-		Nar	me of Build	JAC 8:60 and 5: ing Owner/Operator	,		35	.0	<u> </u>
	30	/	18				wedesboro C.O.	(2)			1 0	040
Agencies Notified	Type Not		n		Stre	et Address	3		11111 30	L.	1 4	UIS
Ø EPA 9243	☐ Initial				2	<sup>nd</sup> & Broa	d Street			and the state of t	te hellelle ytt with	NEW CARDIN
DOLWDQ 250	Amen	dment	#		City	, State, Zip	Code c		ASBES	TOS (	m	4 3 41
□ DCA	☐ Emerg			ng	S	wedesbo	ro, NJ 08085			-1 \J (-1 \)	CHTC	il Committees you
(NJAC 5:23-8)	justific	cation)			Nan	ne of Conta	act		Telephone Nu	mber		
	☐ Cance	ellation			В	rian Tilto	n		215640456			
N					F.	ACILITY I	NFORMATION					
Name of Facility Where		is Taki	ng Pla	ce (3)		380 2800-0-2		Type of Facility	(4)			
Verizon Swedesbor	ro C.O.							School (K-12	2)			
Street Address								☐ Subchapter	8 (Other than K- private and comm	12)	سناماني	
2 <sup>nd</sup> and Broad Stree	>t							homes, etc.	)	lercial i	Juliair	igs,
City (5) Swedesboro								Square Feet	# of Floors	I	3ldg. A	Age
County (6)								5,398	2		+-50	)
Gloucester					Co	unty Code (	(7)(STATE USE ONLY)		rior if being demo	lished)		
Name of Monitoring Firm	Hired by D	uilding	Owne	- (0)	1 400		1	Verizon				
USA Environmental				(8)	ASC	/I No.	1	ent Contractor (9)				
Street Address	Manager	ment	IIIC					IVIRONMENTA	L, INC.			
8436 Enterprise Ave	4						Street Address	D 070				
City, State, Zip Code	,						1123 BEAVE					
Philadelphia, PA 19	153						City, State, Zip C					
Project Manager for Monit		3-2/34 1-2		Tel	ephone	No	BRISTOL, PA	4 19007	1			
Mark Jenkins	ă			4		5 5870	215-788-6040	1	License No.			
Start Date (10)		Sche	duled (	- 1		ate (11)	Name of OSHA N		00509			
11 /13 /	18					18		VIRONMENTAL	INC			
Occupancy Status During	Abatement						Street Address	THOMBERTAL	_, 1140			
☐ Facility Closed/Vacated	d During En	ntire Pe	riod of	Abate	ment		1123 BEAVE	RSTREET				
Abatement Performed	Outside of I	Norma	I Facili	ty Hou	rs - De	scribe	City, State, Zip Co					_
Time of Abatement:		Pi	M/ <u>5:0</u> (	)PM- <u>2</u>	:00AM	ij.	BRISTOL, PA					
cope of Work (Check all t	hat apply)										_	
] ≥3 sf or ≥3 lf			⊠ R¢	enovat	ion		☐ Full Conf	tainment with Neg	ative Pressure			
≥160 sf or ≥260 lf				emoliti			☐ Mini-Enc	osure Procedure				
							☐ Non-Exe	mpted (*) and Nor	n-Friable Procedu	ıre		
Location o	£			Loca Norma			10 <u>22</u> 001 (100 - 100 00 00 00 00 00 00 00 00 00 00 00 00			At	atem	ent T
Asbestos-Containing M		M)	Use	ed Sole	ely by	Asbes	Description o stos Containing Ma	f terial (ACM)	Amount	R	R	Ш
TO BE ABAT IN Facility		70		intena todial		(i.e.	., thermal systems i	nsulation,	Amount (Specify	Removal	Repair	ncap
(13)			Cus	(12)	Otan:		surfacing, VAT, other miscellane	or or	SF or LF)	val	]	Encapsulate
07 (85)			Yes	No	N/A		other modellane	ous)				ate
enerator Room	2000 - 2000					VAT/Ma	stic		270 SF			
							en en sette de la companya de la com		210 35		ᆜ	Ш
		-	] [					-				
			П	Ш								
												П
me of Registered Waste		2000 8000			JDEP V		Cubic Yards of	Name of Registe	ered Landfill			_
SEDVICE TO COLO	GROUI	P, INC	<b>:</b> .	1 2000	auler IE <b>2099</b> 0		Waste	MINERVA L	ANDFILL			
							Disposal Date	City, State		*******		
y, State						- 1		1				
y, State YARDLEY, PA							TBD	WAYNESBU	JRG, OH			
SERVICE TRANSPOR  ty, State  YARDLEY, PA  Impleted By (Print or Type  Dillan DeCaro	<b>a</b> )	Title					TBD	WAYNESBU	JRG, OH	ite		

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

CHIOD	3.	1	NOTI	CATIO	tate of Ne N OF ASE t to NJAC	ESTOS	ABATI	EMENT		M	EG			V		n
Date of Notification (1) 06/26/2019	nv-123	lon	ì	Name	of Building Laurel S	Owner/0	Dperato			K		Check			3	
Agencies Notified	Type Notification				Address ount Lau	rel Road	d			LL	JUL	-=1	20	119	1	
☑ EPA ☑ DEP ☑ DOL	☐ Initial ☐ Amended Amendment			City, St Mount	ate, Zip Co Laurel, I	ode New Jei	rsey 08	3054			ASBEST	OS CO			. &	
☑ DOH ☑ DCA	☐ Emergency (i justification) ☐ Cancellation	ncluding			of Contact Meeker						elephone N 56-231-58					
				FAC	ILITY INF	ORMATI	ON				2-2					
Name of Facility When Hillside Elementary		ng Place (3	3)				20000000	of Fac						35		
Street Address 1370 Hainesport Ro	ad						X	Subcha	pter 8 (Oth	er tha & com	n K-12) mercial buil	dings,	home	es, e	tc.)	
City (5) Mount Laurel, New	Jersey 08054		ā				Squi 150	are Feet 00		1	of Floors		Bldg 50+	g. Ag	е	
County (6) Burlington	3				Code (7) USE ONLY	)	Curr	ent Use nentary	(Prior if be	eing de	emolished)					
Name of Monitoring Fi AHERA Consultants		Owner (8)		ASC 0005	M No. 57			e of Aba	tement Co oration	ntract	or (9)					
Street Address P.O. Box 385								t Addre: Union [	ss Boulevard		8					
City, State, Zip Code Oceanville, New Jer	sey 08231					7	City, Toto	State, Z wa, Ne	ip Code w Jersey	0751	2					
Project Manager for M Barbara Lis	onitoring Firm			Telepho 609-6	one No 52-1833			hone N 225-84			License 01104	No.				. 1
Start Date (10) 06/24/2019		Schedule 07/07/20		mpletion	Date (11)				HA Monitor mental La		ories, LLC	;				
Occupancy Status Dur	ing Abatement (Che	ck Only On	ne)					t Addres	ss 22 West							
☐ Facility Closed/Vac ☐ Abatement Perform ☑ Other – Describe:	ned Outside of Norm	eriod of Ab al Facility I	oatem Hours	ent			City,		ip Code				- 1000		<i>C 54 1992</i>	-
Scope of Work (Check	All That Apply)															_
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>			Renova Demoli				i I	☐ Mir ☐ Glo	ni-Enclosur ove Bag Pro	e ocedu	ith Negative re / <i>Limited</i> nd Non-Fria	Conta	inme		Tent	
		Is	Locat	tion						. ( )	Amount			aten	nent	
Locati Asbestos-Containir <u>TO BE A</u>	ng Material (ACM) BATED	Use Ma	Norma d Sole intena	lly ely by		stos Cor	ntaining tems in	sulation	al (ACM) (i., surfacing,		(Specify SF of LF			Тур		Ēņ
In Fa (13			(12)			othe	VAT er misc	, or ellaneou	ıs)				Removal	Repair	Encapsulate	Enclosure
Room A-1, A2, A3		Yes	No	N/A	Ceiling Pla	ster & Su	rfacing I	Residue			21	12 >	(		Ö	
Room 1A, 2A & 3A			Х		Glue Dots	5					3.	84 )	(			
		-		+	0.00000							,	-			
			_	+									-		_	
Name of Registered W	aste Hauler			JDEP V	Vaste	Cubic	Varde		Name of	Pagis	tered Landf	Fill				
Lilich Corporation			1 22	Hauler ID 18724	332020an	of Was			Fairless	678		iin				
City, State Totowa, New Jersey							sal Date /2019		City, Stat Morrisvi		Ą					
Completed by Adriana Olejarova		Title Pre	sider	nt		S	ignatur		Ja			Date 06/26	8/201	19		
ASB-41 (R-06-08)						a construction of	* Do	ot use t	his form fo	r asbe	stos licensu	ure exe	empte	ed a	tiviti	es.

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Mount Laurel School District Date of Notification (1) Check No.11523 06/10/2019 Type Notification Street Address Agencies Notified 330 Mount Laurel Road ASBESTOS CONTROL & X EPA Initial City, State, Zip Code ☑ DEP Amended Mount Laurel, New Jersey 08054 X DOL Amendment # Emergency (including Name of Contact Telephone Number ☑ DOH justification) 856-231-5886 Harry Meeker ☑ DCA Cancellation **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) Hillside Elementary School School (K-12) Street Address Subchapter 8 (Other than K-12) 1370 Hainesport Road Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age City (5) 50+ Mount Laurel, New Jersey 08054 15000 Current Use (Prior if being demolished) County (6) County Code (7) (STATE USE ONLY) Elementary School Burlington Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. 00057 Lilich Corporation AHERA Consultants, Inc. Street Address Street Address 246 Union Boulevard P.O. Box 385 City, State, Zip Code City, State, Zip Code Totowa, New Jersey 07512 Oceanville, New Jersey 08231 Project Manager for Monitoring Firm Telephone No Telephone No. License No. 609-652-1833 973-225-8400 01104 Barbara Lis Scheduled Completion Date (11) Name of OSHA Monitor Start Date (10) 06/24/2019 07/07/2019 Iris Environmental Laboratories, LLC Occupancy Status During Abatement (Check Only One) Street Address 2333 Route 22 West ☐ Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Union, NJ 07083 Occupied Other − Describe:
 \_ Scope of Work (Check All That Apply) X Full Containment with Negative Pressure □ ≥3 sf or ≥3 lf [X] Renovation Mini-Enclosure ≥160 sf or ≥260 lf Demolition Glove Bag Procedure / Limited Containment & Tent □ Non-Exempted (\*) and Non-Friable Procedure Amount Abatement Is Location (Specify Type Normally SF of LF) Description of Location of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) (i.e. Encapsulate Maintenance/ Enclosure TO BE ABATED thermal systems insulation, surfacing, Remova Repair Custodial Staff? VAT, or In Facility (12)other miscellaneous) (13)Yes No N/A Ceiling Plaster & Surfacing Residue 2112 X X Room A-1, A2, A3 NJDEP Waste Cubic Yards Name of Registered Landfill Name of Registered Waste Hauler Hauler ID No. of Waste 20 Fairless Landfill Lilich Corporation 18724 City, State Disposal Date City, State Totowa, New Jersey 07/07/2019 Morrisville, PA Completed by Signature Date

President

06/10/2019

use this form for asbestos licensure exempted activities.

Adriana Olejarova

Check#3380	1)301	NO:	TIFIC	ADO	tate of N N OF AS	BESTO	SABAT	EMENT	DEG	E	] W		
Date of Notification (1)			6.	Name	of Buildin	g Owner/	Operator (	2)	HD):				111
06	27 /	19		Ed Pe		_			∐∐ JUL	- 1	201	9	L
Agencies Notified	Type Notifica				t Address								-
☐ EPA				Otroc	11001033				ASBESTO	)S CC	NTR	OL 8	<u></u>
□ DOLWD	☐ Amended			City.	State, Zip	Code			LIC	ENSI	NG	nerodole.	Supplement of the last of the
☑ DHSS ☐ DCA	Amendme		_	1000	va, NJ 07								
(NJAC 5:23-8)	Emergence   Emer		ng		of Contac				Telephone Num	ber			
*existed between the trees and *	Cancellat	June .		Ed Pe	ters				1				
					CILITY IN	IFORMA	TION						
Name of Facility Where	Abatement is T	aking Plac	e (3)					Type of Facility	(4)				
Private house		(T)	in the state of					School (K-1)					
Street Address					-			Subchapter	8 (Other than K-1 2				
								homes, etc.	private and commer	cial bu	ilding	S,	
City (5)								Square Feet	# of Floors	BI	dg. Ag	ge	
Totowa, NJ 07512													
County (6)				Cour	ity Code (7)	(STATE U	SE ONLY)	Current Use (P	rior if being demolis	shed)			
Passaic													
Name of Monitoring Firm	Hired by Build	ding Owner	(8)	ASCM	No.	Name o	of Abateme	ent Contractor (9	)				
						Gr Tec	h LLC						
Street Address						Street A	Address						
City Ctaty 7's Carl							lley Rd#						
City, State, Zip Code							ate, Zip Co						
Project Manager for Mon	itorina Eirm		7-1		N-		, NJ 0747	0	1				
1 Toject Manager for Mon	ittoring ram		181	ephone	NO.	Telepho			License No.				
Start Date (10)		Scheduled	Comple	etion Da	ite (11)	973-63	8-1777 of OSHA M	Ionitor	01127			. 7: 2-7	
		07	/ _0	8_ /		Enviro	vision Co	nsultants,Inc					
Occupancy Status During  Facility Closed/Vacat	•					Street A							
Abatement Performed					scribe			Road, Bldg .#	35E				
Time of Abatement:	AM	PM/	PM		AM	Acres are see	ate, Zip Co						
Scope of Work (Check al	I that apply)					Fair La	wn, NJ 0'		nation with negative	nress	SUIFA		
						日	Full Cont	ainment with Ne		, prose	idic		
>3 sf or >3 If > 160 sf or >260 If			enovat emoliti			×	Mini-Encl	osure Procedure	Tent with Negative	Press	sure		
			0	<b>O</b> 11			Non-Exe	mpted (*) and No	on-Friable Procedu	re			
			Is Loca							Ab	ateme	ent T	ype
Location Asbestos-Containing		) Us	Norma sed Sol		Asha		scription o	f terial (ACM)	A	Z	R	ū	ū
TO BE ABA		M	lainten	ance/			l systems i		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facil (13)	ity	Cu	stodiai (12)	Staff?		surfa	cing, VAT,	or	SIF or LF)	oval	=	Sula	sure
(13)		Van	T	T	1	other r	miscellane	ous)				ate	
Basement		Yes	No	N/A	p	•				NZ		П	
			-		Pipe ins	ulation			100 LF			Ц	Ш
Basement		_   _		$\boxtimes$	Boiler in	sulation			40 SF	$\boxtimes$			
			П	П						П	П	П	П
Name of Registered Was	ste Hauler		N.	DEP Wast	e Hauler ID No.	Cubic Ya	irds of Wast	Name of Regi	Lstered Landfill				
Gr Tech LLC				003378	35	TBI		T.R.R.F. Inc					
City, State				30331	,,,	Disposa		City, State				11,000	
Wayne, NJ 07470						TBI		Tullytown, P	Δ				
Completed By (Print or T	ype)	Title					gnature /	i unytown, P		ate			
N.Jevtic	POLITÍ WA	Owner					//	who wena	4	/27/19	2		
ASB-41		OWINGE					1/e	wic wena	y  U0.	2//15	,		

In.	11-11	3/0	)		•	IME	CE			0 0
Ch 10705 "	NO NO	TIFICATIO (Pursuan	tate of New Jers NOF ASBESTO I to NJAC 8:60 a	S ABATEMEN Ind 12 120)	IT		 IUL -	1 20	40°	
Date of Notification (1)	G	INA	of Building Owner		T		IUL	1 20	13	-
Agencies Notified Type Notification	1		Address	anchi	Den	4 40 40 40	STOS (	CONTI	TOL	Ĉt.
☐ EPA Initial ☐ Amended		City Ci	348	3 Hue	+fvil	le Gren	FICEN	SING	4	bearsean
DOL Amendment		- City, Si	tate, Zip Code	criel	1 1	15 0	308	10		
DOH Emergency ( justification) Cancellation	including	1 4	of Contact ank Fra	727		Talanhone				-
Name of Facility Where Abatement is Taking	Place (3)		ILITY INFORMA	TION	e of Facility	(A)				_
Street Address Street Address		Dwe	lling		School (K- Subchapte		K-12)	Idinas	homo	
City (5)	m(1 m 2)		·		etc.)	# of Floors		Bldg. Ag	35	s, 
County (6) Derlin		0800	1					olog. A	30	
Camber		(STATE	Code (7) USE ONLY)			ior if being dem	olished)			
The same of the sa	wner (8)	ASCI	N No.	Name of At	C TC	ntractor (9)	oq ie	§ .	Cn	L
Ro. Box 3	37			Street Addr		337	J			
City, State, Zip Code	NJ	08	533	City, State,	Zip Code	At Al	70	95	1.2	2
Project Manager for Month rigg Firm		Telepho		Telephone	- v	Licens	e No.	201		
Start Date (10)	Scheduled,		758-3365 Date (11)		8-356 SHA Monitor	25 C	,00	77	1	
Occupancy Status During Abatement (Check	7	7-12	-19	EP	'C Tec	hnologie	es I	nc		
Facility Closed/Vacated During Entire Pe	10.7	tement		Street Addre		337			,	8
Abatement Performed Outside of Norma  Other – Describe:	al Facility Ho	ours		City, State,		417	(2)(1)	577	>	. 2.
Scope of Work (Check All That Apply)				1.00	-JYPT	N-3	08	30	2	$\neg$
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Ren Dem	ovation			ull Containmoini-Enclosure lovebag Prod		ve Pressu	re		
	lala			N	on-Exempted	d (*) and Non-F	riable Pro	cedure Abaten	nent	_
Location of	Non	cation nally olely by	De	scription of	(5)			Тур		
Asbestos-Containing Material (ACM)  TO BE ABATED	Mainte	nance/ al Staff?	Asbestos Con (i.e. therma	systems insu		Amount (Specify	<sub>Z</sub>	77	Enc	En
In Facility (13)		2)	surfa other r	cing, VAT, or miscellaneous	, .	SF or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes N	o N/A					<u>a</u>		ate	re
Exterior Walls		X	Siding	Shine	iles	2000 5	SFX			
. •			J	ل			_		_	_
						-	_		+	$\dashv$
Name of Registered Waste Hauler		NJDEP W	47.500°   14.50000000	Yards	Name of I	Registered Land	dfill			$\dashv$
EPC Technologies		Hauler ID	00	12	Wast	e Manag	enent	Lof	PI	A
	VJ.		7-	sal Date - 12 - 19	City, State	isuille	PA			
Steve Schenker	Presi	dent	S	Steres	Sch		Date 6 -	Z8-	19	

RECEIVED 06.	/25/2019 04:19PM :	2013297440	BEST REMOVAL INC	
25 2019 03:38PM NJ Asbestos Control	609.633.0664	page 1	MEGEL	WEF
05/25/2019 01:42PM 201329744B		BEST REMOVAL THE		
	12/0	PEST REMOVAL THE	PAGE 02/	- 111
14511	U G		JUL -1 2	019
11/143	MOTIFICATION OF AS	SESTOS ABATEMENTO	10 DAY	
· · · · · · · · · · · · · · · · · · ·	(Pursuant to MIAC	8:60 and 12:120)	- U DAY	TROL 8
Date of Matification (1)		ng Owner/Operator (2)	LICENSING	NOL a
6/25/19			SETREST ASSOCIATE	_
Agency Hotelled Type Notification	Otreet Address		OFFITE POPULATION	-
EPA ATTION	119 Li	INGETON AUG	1011	
D DEP DAMWalled Attendment &	City, State, Zip	Swas w. Wave	TAPPROVED	<b>-</b>
ETDOM (Inch.	Name of Contro	SIMPS MISSONE	Tolephone Number	_
DI DCA DI Cancellation	HR B	in MURPHY	201-655-8216	1
	FAGILITY IN		1 041 0 22 0218	$\dashv$
Maron of Feolity Where Absterness is Taking F		Type of Fedi	By (4)	
NEW BRUDSWICK APLET	LENT ASSOCIAT	ES □ Baheel (K	(2)	
119 LIVINGSTON	11.10	C) Subohaptic	r & (Other than K-12) private & corresponds) buildings,	1.
CEVED COVER TOWN	Aue .	hotens, as	:)	
NEW BRUNZWICK		Square Feet	F of Floors Sidg. Age	
County (8)	the second secon	BOTATE USE   Current Line	- Ge 1928 Prior If heing develophed)	- 1 ′
MIDDLE SEX	ONLY		APTS	
Name of Monitoring Fam Hired by Sulchop On (4)	Tref ASCENTIO.	Name of Abatement Contractor		7
Street Address	1	Rest Removal I	nc	
	*	450 South Rive	- 54	
City, State, Zip Code		City, State, Zip Code	T 3E	-
Project Meanuper for Mandoring Flora		Hackensack, N.	J. 07601	
A solver seminifier to a remainful betti	Telephone No.	Telephone No.	Licanos No.	7
Blart Date (10) . Schoolsdad	Completed Date (11)	201-329-7444 Name of OSHA Months	00388	
6/27/19 6/2	8119	Omega Environs	mental	
Coouparity Status During Abstantiant (Check of		Othert Acidress		7
D Facility DissectiVenested During Entire Period D Absterrent Performed Outside of Normal Pe 便のmet — Despribe: 多しか みれ ばら	of Absternant	280 Huyler St		4
A OBST - DESCRIPTION OF AN AS	EL SO PM		. N.J. 07606	
Scope of Week (Cheek all limt upply)  Life 2 of or ≥ 3 if		O Full Confinients will		
	Demoition	- E NGN-Enclosure		
	7	☐ Non-Exampled (*) as	nd Non-Frieble Procedure	
	In Leopators Montestly		Abetermen Type	
, Leading of Authorito Commission (ACM)	Used Selety by	Description of Doc Gettebing Meteric (ACM)		7
TO BE ASKITED	Cantodia! 6.6	. Tracpiel Cytholic Indiabilian.	Amount 50	P .
415)	Staff? . (12)	perfection, VAT, or other criticological persons.	SFOLE)	
	Yes No NA		- S	
DA BERGELT	VILLER	MAC TO SULATION	63LF *	┦.
			1.0	7
				7
Name of Registered Victoria Hauter	NUDEP Waste Hauler	COLUMN TO THE REAL PROPERTY OF THE PERTY OF		]
Best Removal Inc	ID No.	Waste /	Mored Landfil	
Cdv. Stella	17109	2º/24 CUMBERI	AND COUNTY LANDFICL	1
Hackensack , N.J. 07	601	DWDmset Datio   City, Sinks		7
Completed by Title	AAT	6/28/19 NEW BU	Real , PA . 17240	4
J. Maiorano Est	imator	Y no over	3 6/25/19	
Alli-41 "Do no	R line this farm for subaction its	A Prince and market is a set district		

2h 9363	į	NOTIFI (P	CATION	ate of Ne NOF ASE TO NJAC	ESTOS	ABATE	MENT			R			a	₩ li
Date of Notification (1) 06/27/19 101 - 10359				of Building antville					The second second		JU	_	1 2	019
Agencies Notified Type Notification  EPA Initial			Street A 156 N	orth Ma	in Stre	et			- Commence	A			CON	
DEP Amended Amendment				ate, Zip Co antville,		232								
□ DOH	ncluding			f Contact antville I		g Auth	ority			ephone 1 9-204-3				
Name of Facility Where Abatement is Taking	Place (3	3)	FACI	LITY INF	ORMAT	ION	Туре	of Facility (4	)					
156 N. Main Street, Unit A106 Street Address 156 N. Main Street, Unit A106								School (K-12 Subchapter 8 Other (i.e. pretc.)	(Oth			iildin	gs, hon	nes,
City (5) Pleasantville							Squa	re Feet	#0	f Floors		Bldg	. Age	
County (6) Atlantic				Code (7) USE ONLY	)			ent Use (Prior ding	r if bei	ng demo	lished)			
Name of Monitoring Firm Hired by Building O	wner (8)	V	ASCN	/ No.				atement Control						
Street Address						Street 6 Wh		ss DOVE CO	URT	0				
City, State, Zip Code								ip Code OD, NJ 08	701					
Project Manager for Monitoring Firm			Telepho	ne No.	- 5	Teleph 732-6				License	No.			
	Schedule 07/11/1		pletion l	Date (11)		The state of the s		HA Monitor D PROFES	SSIO	NALS				
Occupancy Status During Abatement (Check	45	507				Street 6 WH		ss DOVE CO	URT	9				
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal Other – Describe:	al Facility	Hours	ent			City, S	tate, Z	ip Code OD, NJ 08						
Scope of Work (Check All That Apply)	ruston:							00,110 00	, 01					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovat emoliti				×	Mir Glo	Il Containmer ni-Enclosure ovebag Proce n-Exempted (	dure				ure	
		Locatio			2-2-	-	110	Lxempted	<u> </u>	u 11011-111	abic i i	Ab	atemer Type	nt
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Use Mai	d Solel intenan odial S (12)	y by ice/	Asbes (i.e.	tos Cont thermal surfa	scription aining M systems cing, VA niscellan	lateria s insula T, or	(ACM) ation,	(8	mount Specify or LF)	Remova	T	g	Enclosure
	Yes	No	N/A						1777.12				ate	ro'
INTERIOR				•	TILE A	ND MA	ASTIC		5	50SF	×	+		$\vdash$
														-
Name of Registered Waste Hauler		100000000000000000000000000000000000000	JDEP W		Cubic			Name of Re	egiste	red Land	fill			
NEWARK CARTING			suler ID 509	INU.	of Was			IESI						
City, State NEWARK, NJ					07/11	sal Date /19		City, State BETHLE	HEN	I PA				
Completed by JOSEPH PERLSTEIN	Title OWN	ER			S	ignature	);				Date 06/27	/19		

1683(e)			CATION	tate of New YOF ASB to NJAC	ESTOS /	BATE		+				0 [		Pri	int F
Date of Notification (1) 06/27/19 NV - 10358	×			of Building e Dewar		perato	r (2)			Annual Control of the	JU	L	-1	201	9
Agencies Notified Type Notification	on		Street A	Address						AS	SBES	TOS	S CO	NTR	OL 8
EPA X Initial DEP Amended Amendme	ent#			ate, Zip Co nport, No									1100	VCI	-
□ Emergence     i justificatio     □ DCA     □ Cancellatio	y (including n)		Name o	of Contact					Tele	phone	Numl	per			
_ Sort				ILITY INFO		ON								-	
Name of Facility Where Abatement is Take	king Place (3	3)					Тур	e of Facility (	4)	Ti .					
Street Address							×	School (K-1 Subchapter Other (i.e. p etc.)	8 (Othe			build	dings,	home	es,
City (5) Oceanport							Squ	are Feet	# of	Floors		В	ldg. A	\ge	
County (6) Essex				Code (7) USE ONLY	)		Cur	rent Use (Prid me	or if beir	ng dem	olishe	d)			
Name of Monitoring Firm Hired by Buildin	g Owner (8)		ASCN	M No.				atement Con			;				
Street Address						Street 6 WI		ess DOVE CO	DURT	8					
City, State, Zip Code								Zip Code OOD, NJ 08	8701						
Project Manager for Monitoring Firm			Telepho	ne No.		Telepi 732-		No. 9078		Licen:	se No.				
Start Date (10) 07/15/19	Schedule 07/17/		mpletion	Date (11)				SHA Monitor AD PROFE	SSIO	VALS					
Occupancy Status During Abatement (Ch	eck Only Or	ne)				Street									
Facility Closed/Vacated During Entire Abatement Performed Outside of No Other – Describe:	e Period of a primal Facility	Abaten Hours	nent s		_	City, S	State,	DOVE CO Zip Code DOD, NJ 0		-					
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	and the same of th	Renova Demolit				>	M G	ull Containme lini-Enclosure lovebag Proc on-Exempted	e cedure					e	
Location of	14190	Locati			Dan								Abate	ement pe	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Ma	d Sole intena todial S (12)	nce/		tos Conta thermal :	system ing, VA	Materi s insu T, or	lation,	(S	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
INTERIOR	Yes	No	N/A		PIPE IN	ICI II	٨ΤΙΟ	NI.	10	00LF				te	
INILINOR				-	rice IIV	IOUL/	110	718	10	JULF		X			
Name of Registered Waste Hauler NEWARK CARTING		H	IJDEP W lauler ID 4509		Cubic Yof Was			Name of I	Register	red Lar	ndfill				
City, State NEWARK, NJ				-	Disposi			City, State		PA					
Completed by	Title	IFR				gnature	Э			367 	Date		19		

1	4834D				ursuant	ate of Ne N OF ASB to NJAC	ESTOS 8:60 an	ABATE d 12:12	0)	Command T		)   	G	<u>E</u>	<u>U</u>	₩ M	nt Fo
	te of Notification (1), 5/27/19	-1020	1			f Building shield S							JUL		1 6	<del>013</del>	
Ag	encies Notified	Type Notification	n		Street A	ddress		3000 11 11 11 11 11 11 11			+	ASI	BEST				L &
	EPA	× Initial		-		rospect ate, Zip Co		Unit 3	801A	\	L	S CHARLES OF STREET	LI	CEN	SINC	à	
×	DEP DOL	Amended Amendme				ood, NJ		1									
×	DOH DCA	justification  Cancellation				f Contact shield S	olutior	ns LLC			100000	ephone 2-226					
		A	. 51 "		FACI	LITY INF	ORMAT	ION	_								
	me of Facility Where A 43-345 E. 3rd Stre		ing Place (	3)					Тур	e of Facility (							
	eet Address 3-345 E. 3rd Stre	et							×	School (K-1 Subchapter Other (i.e. p etc.)	8 (Oth			build	ings,	home	es,
	y (5) ainfield			(	7C	Coc	)		Sqı	uare Feet	# 0	f Floors	- 51123	BI	dg. A	ge	
	unty (6) nion	-				Code (7) USE ONLY	)	_		rent Use (Prio	or if bei	ng dem	olishe	d)			
Na	me of Monitoring Firm	Hired by Buildin	g Owner (8)		ASCN	/I No.				patement Cor AD PROFE							
Str	eet Address							Street 6 WI		ress E DOVE CO	DURT						
City	y, State, Zip Code									Zip Code DOD, NJ 0	8701				- 8 - 6		
Pro	ject Manager for Mon	itoring Firm			Telepho	ne No.		Teleph	none			Licens		88			
	rt Date (10) 7/08/19		Schedul 07/11/		npletion	Date (11)		Name	of O	SHA Monitor AD PROFE	SSIO						
Oc	cupancy Status During	g Abatement (Ch	eck Only Or	ne)				Street	Addı	ess				19071			
×	Facility Closed/Vaca Abatement Perform Other – Describe: _							City, S	tate,	Zip Code OOD, NJ 0		s					
Sco	ope of Work (Check A	ll That Apply)								,				- 100			
×	≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		terrorene .	Renova Demolit				×	N C	full Containme fini-Enclosure Blovebag Prod Ion-Exempted	e cedure					1	
				Locati											Abate	ment	
	Location Asbestos-Containing		Use	Normal ed Sole	ly by	Achae		scription		ial (ACM)	Δ	mount	-		Тур		
	TO BE ABA In Facili (13)	ATED	Cus	todial S (12)	Staff?		therma surfa	l system cing, VA niscellar	s insu T, or	ulation,	(5	Specify or LF)		Removal	Repair	Encapsulate	Enclosure
	EXTERI	OR	Yes	No	N/A		FL	ASHIN	IG		1	00LF	-	х		TD	
	me of Registered Was				JDEP W			Yards		Name of	Registe	ered Lar	ndfill				
NE	WARK CARTING				4509	INU.	of Wa	ole.		IESI							
	y, State WARK, NJ						Dispo 07/1	sal Date I/19	ij.	City, State BETHL		1 PA					
	mpleted by SEPH PERLSTEI	N	Title	JFR			5	Signature	9				Date		a		

Rrintsform

<u>J</u>	6379			NOTIF (F	CATIO	tate of Ne N OF ASE to NJAC	ESTOS	ABATE	MENT 0)				C		Pr	int Fo
	te of Notification (1)	1235/	)			of Building isroel H			r (2)				JUL	-1	201	9
Age	EPA DEP	Type Notification  Initial Amended			Street A	Address ate, Zip C	ode				AND THE PERSON NAMED IN COLUMN 1	AS	BESTO LIC	OS CO		OL &
×	DOL DOH DCA	Amendmen Emergency justification) Cancellation	(including	,—	Lakev Name o	vood, No of Contact isroel H	J 0870				Teler	ohone I	Number	N.		
Na	me of Facility Where A			3/		ILITY INF			Tun	of Facility	(4)					
	eet Address	Dutchion 13 Takin	ig i lace (						I ype	School (K-1 Subchapter Other (i.e. p etc.)	12) 8 (Other			ildings	, hom	es,
	v (5) amilton			1)5	8(01)	2()			Squa	are Feet	# of F	loors		Bldg.	Age	
	unty (6) ercer					Code (7) USE ONLY	?		Curr	ent Use (Pri	or if being	g demo	lished)			
Nar	ne of Monitoring Firm	Hired by Building	Owner (8	)	ASC	M No.				atement Cor D PROFE						
Stre	eet Address								Addre	DOVE C	OURT					
City	, State, Zip Code									Zip Code OD, NJ 0	8701					
Pro	ject Manager for Monit	oring Firm			Telepho	ne No.		Telep	hone N	lo.	1	License	e No.			
	rt Date (10) /28/19		Schedul 06/29/		mpletion	Date (11)	1.	1		HA Monitor D PROFE	SSION	ALS				
Occ	rupancy Status During Facility Closed/Vacat Abatement Performe Other – Describe:	ted During Entire	Period of	Abater	nent s			6 WI	State, 2	DOVE CO Zip Code OD, NJ 0						140.700
Sco	pe of Work (Check All ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	That Apply)	-	Renova Demoli				2	Mi Gl	III Containmoni-Enclosure ovebag Procon-Exempted	e cedure				re.	
	V 522			Locat Norma										Abat	emen	t
	Location ( Asbestos-Containing N TO BE ABA In Facility (13)	Material (ACM) TED	Use Ma	ed Sole aintena todial (12)	ely by nce/		tos Cont thermal surfa		Materia s insul T, or	ation,	(Spe	ount ecify or LF)	Remova	Repair	Encapsulate	Enclosure
	garage		Yes	No	N/A			debris							te	· CO
- 111-	garage						11.	uebns					X	-		
	ne of Registered Wasto			H	NJDEP W Hauler ID 4509		Cubic of Was 25			Name of MERCE						
	, State (EWOOD, NJ						Dispos 06/29	al Date /19		City, State						
	npleted by SEPH PERLSTEIN	J	Title	VFR			S	ignature	9				Date 05/06	/10		

Check#3379	-19655	NOT	IFICA (Pu	TIO	OF AS	ew dersey BESTOS ABA C 8:60 and 5:1	TEMENT .	DEC	E		$\mathbb{V}$	E
Date of Notification (1)				Name	of Building	Owner/Operator (	2)	HN		4 0	040	-
06	26 , 19							11 T 101	-	1 2	019	2000
Agencies Notified	Type Notification				een Derm Address	ody						-
☐ EPA	✓ Initial			Ollect	Address			ASBEST				L &
□ DOLWD	Amended			City S	State, Zip C	ode			ICEN	SINC	3	NACO PAGE AND
☑ DHSS	Amendment #_			500	on, NJ 07							
DCA (NJAC 5:23-8)	Emergency (including justification)	cluding			of Contac			Telephone Numb	er			
(110/10 0.20 0)	Cancellation			Kathle	en Derm	ody	38.	1_				
				1.20.00		FORMATION						
Name of Facility Where A	Abatement is Taking	Place	(3)	1.0	512117 110	TOTAL TION	Type of Facility	(4)				
Private house	<b>3</b>		1.7				School (K-12					
Street Address		-					Subchapter 8	(Other than K-1 2)	na raka sa	talla a		
							homes, etc.)	rivate and commerc	iai bui	laing	S,	
City (5)							Square Feet	# of Floors	Blo	ig. Ag	ge	
Boonton, NJ 07005												
County (6)	A war and the second se			Coun	ty Code (7)	(STATE USE ONLY)	Current Use (Pri	or if being demolish	ned)			
Morris												
Name of Monitoring Firm	Hired by Building C	)wner (	8)	ASCM	No.	Name of Abatem	ent Contractor (9)					
						Gr Tech LLC						
Street Address						Street Address						
						576 Valley Rd #						
City, State, Zip Code						City, State, Zip C						
Project Manager for Mon	itorina Firm		Tolo	phone	No	Wayne, NJ 074'	70	License No.	-			
Project Manager for Mon	itoring i iini		Tele	pnone	NO.	ANALYSIS ANALYSIS STATE		TOTAL STATE OF THE				
Start Date (10)	Sched	uled C	omplei	tion Da	te (11)	973-638-1777 Name of OSHA N	Agnitor	01127				-
	<u>19</u> <u>0</u>	07 /	07		19	Envirovision Co						
Occupancy Status During    Status During				mont		Street Address						
Abatement Performed					cribe	20-21 Wagaraw City, State, Zip C		35E	<u> </u>			
Time of Abatement:												
Scope of Work (Check al	I that apply)					Fair Lawn, NJ 0	The second secon	ation with negative	press	ure		-
		-	100			Full Con	tainment with Neg					
>3 sf or >3 If > 160 sf or >260 If			novation			Mini-End Gloveba	closure	Tent with Negative	Press	ure		
						Non-Exe	empted (*) and No	n-Friable Procedur	е	1		
	S-		Locat						Aba	ateme	ent T	уре
Location Asbestos-Containing			Normal d Sole		Asha	Description of stos Containing Ma	53.2 I	Amount	Re	Re	En	En
TO BE ABA	ATED	0.0000000	intena			thermal systems		(Specify	Removal	Repair	Encapsulate	Enclosure
IN Facili (13)	ity	Cus	todial ( (12)	Stan!		surfacing, VAT		SIF or LF)	val	7	sula	ure
(13)		Yes	No	N/A	1	other miscellane	ous)				te	
Dagamant				X	Din a in a	.latian		120 LF	$\boxtimes$	П	П	П
Basement				-	Pipe inst	шаноп		120 LF				
			Ш_	$\Box$					Ш	Ш	Ш	Ш
										Ш		
						© -						
Name of Registered Was	ste Hauler		NJE	EP Waste	Hauler ID No.	Cubic Yards of Was	te Name of Regis	tered Landfill				
Gr Tech LLC			0	03378	35	TBD	T.R.R.F. Inc					
City, State						Disposal Date	City, State					
Wayne, NJ 07470						TBD	Tullytown, PA	A				
Completed By (Print or T	ype) Title	)				Signature	1	Da	te			
N.Jevtic	Owi	ner					Hewic Wend	06/	26/19	1		
ASB-41	OWI						/ west	100/	-5.17			

. 1			NOT	IEIC		tate of N			CEMENT	Control	AND THE PERSON NAMED IN			-		-	
NO (h			NOT					TOS ABA1 :60 and 5:1			),[	C	E				100
Date of Notification (1)					N 2000 AND THE PARTY.			ner/Operator (	(2)	115	1						
	26 /	19			Ch	erry Hill	Publ	ic Schools		100000		JUL	- 1	20	19	and the same of	and the same
Agencies Notified	Type Notifica	ation			Stree	t Address			***************************************	1 -	lai .	002		1_0	10	- Incom	-
	☐ Initial				45	Ranoldo	Terr	ace		-	newlesson		y/wepstellere	etrore bate	NO SUMUM	1	-
□ DOLWD		d			City	State, Zip	Code			1	AS	BEST	OS C	ONT	HOL	8	-
□ DOH	Amendme		-			erry Hill,				l mount	Manager Name of	L	GEN:	ING	an empresa	NC AMERICA	-
DCA	☐ Emergen		cluding	3		of Contac				To	lonho	ne Nun	abar			-	_
(NJAC 5:23-8)	☐ Cancellat				300000000000000000000000000000000000000	n Middle				7.55		95-11					
				-				RMATION			000-1	90-11	00				_
Name of Facility Where A	batement is T	Takino	Place	(3)		OILITT II	11 01	MATION	Type of Facility	(4)	-	-					
Beck Middle Schoo			, , , , , , ,	(0)					School (K-1								
Street Address								92	Subchapter		ther th	an K-1	2)				
950 Cropwell Road									Other (i.e.,		e and	comme	ercial b	uildin	gs,		
City (5)									homes, etc					1-1- A			_
									Square Feet	#	of Flo	ors	-	ldg. A	ge		
Cherry Hill									85,000		2			80			
County (6)					Cou	nty Code (	()(STA	TE USE ONLY)	Current Use (F	rior if	being	demol	ished)				
Camden							_		School								
Name of Monitoring Firm		ding C	)wner (	(8)	ASCM		11.		ent Contractor (9	Š.							
TTI Environmental,	Inc.				000	03	S	Shade Enviro	onmental, LLC	;	V-02-02-02-02-02-02-02-02-02-02-02-02-02-						
Street Address							Str	eet Address									
1253 N. Church Stre	eet						6	23 Cutler Av	venue								
City, State, Zip Code							City	y, State, Zip C	ode		3-27-2-2-3-1000-						7
Moorestown, NJ 080	057						I N	laple Shade	, NJ 08052								
Project Manager for Monit	toring Firm			Tel	ephone	No.	Tel	ephone No.		L	icense	e No.					
Jim Guilardi				8	56-840	-8800	8	56-755-0099	)		0084	12					
Start Date (10)	S	Sched	uled C	omple	etion Da	ite (11)	Nar	me of OSHA N	Monitor		2000000000			-			
06 /25 /					3_ /		E	MSL Analyt	ical, Inc.								
Occupancy Status During	Abatement (0	Check	only o	ne)			Stre	eet Address									
□ Facility Closed/Vacate	d During Entir	re Per	iod of	Abate	ment		2	00 Route 13	0 North								
Abatement Performed							City	, State, Zip Co	ode								Ī
Time of Abatement:	AM	PI	///	_PM		AM	C	innaminsor	n, NJ 08077								
Scope of Work (Check all	that apply)						-	_									
≥3 sf or ≥3 If			⊠ Re	novat	ion			☐ Full Con	tainment with Ne	gative	e Pres	sure					
≥3 \$1 61 ≥3 11     ≥160 sf or ≥260 lf				moliti					g Procedure								
			_						mpted (*) and N	on-Fri	iable F	roced	ure				
				Loca								1012011	A	atem	ent T	уре	
Location				d Sol	aliy elv by			Description of					R	R	Ш	Ш	1
Asbestos-Containing N TO BE ABA		1)		intena	, ,			Containing Ma rmal systems			Amo (Spe		em	Repair	nca	nclo	
IN Facility			Cust		Staff?	(1.6		surfacing, VAT			SF or		Removal	=	psu	Enclosure	
(13)	•			(12)	The second	-		her miscellane				25.000.00 N	-		Encapsulate	e e	
			Yes	No	N/A					ļ			+-	_		_	-
Throughout Hallways				$\boxtimes$		Transit				-	600	SF			Ш	$\perp$	-
Right Exit of the Stage	е			$\boxtimes$		Floor T	ile a	nd Mastic			100	SF					-
Name of Registered Wast	e Hauler			100	NJDEP '		100000	oic Yards of	Name of Reg	stere	d Land	lfill					
Freehold Cartage				1	15939		Wa		Fairless L	andf	fill						
City, State								posal Date	City, State								1
Freehold, NJ							0	7/03/2019	Morrisville	e, PA	<b>A</b>						
Completed By (Print or Ty	pe)	Title						Signature			-	D	ate				1
Christina Lynch				esid	ent of	Operatio	ns	Charle					2/2	2/10	9		
		1											-		4		

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120) Name of Building Owner / Operator (2) 6/4/19 East Amwell Township School District Agencies Notified Type Notification Street Address EPA 43 Wertsville Road ASBESTOS CONTRÓL & DEP Initial City, State & Zip Code LICENSING  $\boxtimes$ DOL  $\boxtimes$ Amended R#2-6/25/19 Ringoes, NJ 08551 X DOH Name of Contact Telephone Number Emergency DCA Cancellation Edward Stoloski 908-782-6464 FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) East Amwell Elementary School Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.) 43 Wertsville Road # of Floors Bldg. Age Square Feet City (5) County (6) County Code (7) Current Use (Prior if being demolished) Ringoes Hunterdon School Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) RJB Environmental Inc Bristol Environmental, Inc. Street Address Street Address 56 East Bridge Street 1123 Beaver Street City, State & Zip Code City, State & Zip Code Morrisville, PA 19067 Bristol, PA 19007 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Richard Beach 267-991-9212 (215)788-6040 00509 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 6/26/19 7/11/19 Bristol Environmental Inc. Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1123 Beaver Street X Abatement Performed Outside of Normal Hours -City, State & Zip Code Describe: 3:00 PM to 11:30 PM Bristol, PA 19007 Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure Renovation Mini-Enclosure ≥3 sf or ≥3 If ≥160 sf ≥260 lf Demolition Glove Bag Procedures Non-Exempted and Non-Friable Procedure Location of Abatement Type is Location Description of Amount Asbestos-Containing Normally Used Asbestos-Containing (Specify Material (ACM) Solely by Material (ACM) SF or LF) Encapsulate Enclsoure Removal TO BE ABATED Maintenance or (i.e., thermal systems in Facility Custodial Staff? insulation, surfacing, VAT (13)(12)or other miscellaneous) Yes No N/A Boiler Room Pipe Insulation (wrap & cut) 8 LF Boiler Room Boiler Rope/Packing 110 SF Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Service Transport Inc. 20990 6 Cu Yd Minerva Landfill City, State Disposal Date City, State Yardley, PA 7/9/19 Waynesburg, OH Completed By (Print or Type) Title Signature Date Project Gino Pizzigoni 6/25/19 Manager

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

n.	E	C	E		$\mathbb{V}$	E	M
	•	JUL	-	1	2019		

Date of Notification	(1)						wner / Operato					colores)	William Colleges	o-Participants	」
	6/4/19	-4'		East A			wnship Schoo	ol Dist	rict	ASB	ESTOS LICEI			OL8	-
Agencies Notified EPA	Type Notific	cation	117			ss Ile Ro	ad			Louisia	LIULI	MO1	IVG	СТАТИМОЛОГИИ	S engagestate
☐ DEP	☐ Initia	al				Zip Co									
⊠ DOL		nded R#1-6/24/				J 085									
☑ DOH	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ergency		Vame							Telepl	non	e Nu	mbe	r
☐ DCA		cellation	E	Edwa	rd St	olosk	i				908-7	82	-646	4	
	l			FAC	ILITY	/ INFO	ORMATION							100	
Name of Facility Wh	nere Abatem	ent is Taking Pl	ace (3				Type of Facil								
East Amwell Eler							School (								
Street Address							☐ Subchap	pter 8 (	Other than	ı K-12)				- \	
43 Wertsville Ro	ad	**								mercial build				C.)	
							Square Feet		# of Floor	'S	Bldg. A	\ge			
City (5)		County (6)	Co	unty C	ode (	7)		/D : : :	[]	!:-		-	_		-
Ringoes		Hunterdon					Current Use	(Prior i	r being de	molisnea)					
					Tion		School		1011	(0)					-
Name of Monitoring		by Building Own	er (8)		ASC	M No.	Name of Aba Bristol Env								
RJB Environmer Street Address	ital inc						Street Addre		iciitai, iii	·.					_
56 East Bridge S	troot						1123 Beave		et						
City, State & Zip Co							City, State &								
Morrisville, PA 1							Bristol, PA	100000000000000000000000000000000000000							
Project Manager for		Firm		hone		er	Telephone N			License	Numbe	er			
Richard Beach	2.573		267-	991-9	212		(215)788-60			00509					
Scheduled Start Da		Scheduled Con	npletic	on Dat	e (11)		Name of OSI			63					
ON HOL							Bristol Env		ientai ind	). 					-
Occupancy Status	During Abate	ement (Check or During Entire P	ariod	e) of Abs	tomo	nt	Street Addre		of						
		Outside of Norma			iterne	ıı	City, State &								
	7:00 AM to		ai Hoi	uis –			Bristol, PA								
		g Abatement					Diistoi, i A	15001							
Scope of Work (Ch															211111111111111111111111111111111111111
Coope or (a		77						$\boxtimes$		ainment with	Negati	ve	Pres	sure	
≥3 sf or ≥3	lf .		$\boxtimes$		ovatio				Mini-Enc						
≥160 sf ≥26	60 If			Den	nolition	1		Ц		g Procedure			_		
								Ц_	Non-Exe	mpted and N					
1	ocation of tos-Containi	na		Locati nally t			Descriptio Asbestos-Cor		,	Amount (Specify		Nua	terne	ent Ty	ype
	terial (ACM)		The second second	olely b			Material (A		1	SF or LF	)	_		ш	m
	BE ABATED		100	tenan			(i.e., thermal	system				Remova	Re	Encapsulate	Enclsoure
	in Facility		Cust	odial S	Staff?	i	nsulation, surfa					VOL	Repair	lusc	nos
	(13)		Yes	(12) No	N/A	-	or other miscel	llaneou	(S)			<u>a</u>		ate	-G
Poiler Poom			Ies	140		Din	e Insulation (	wran	& cut)	8 LF		X	П	П	П
Boiler Room Boiler Room				H	H	Lib	Boiler Rope/			110 SF			Ħ	Ħ	Ħ
Boller Room			H	H	H		Bollet Roper	Luoitii	.9		Ī	i	Ħ	Ħ	T
Name of Registere	d Waste Ha	uler		100000000000000000000000000000000000000			Cubic Yards	Nam	e of Regis	stered Landfi	ill				
Service Transpo	ort Inc			1500000	uler II <b>990</b>	O No.	of Waste 6 Cu Yd	Min	erva Lan	dfill					
City, State				1-0			Disposal Date		State	\$1					
Yardley, PA							7/9/19		nesburg	j, OH					
Completed By (Prin	nt or Type)			Tit			Signature	2 .				ate			
Gino Pizzigor	ni			10.20	oject		Seas Pr	/	acre	. / 1	6/	24	/19		
				8.8	anage	O 10	1 4120 0 1 1	100 -2		1 66					

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

		[44]		117		2    \V/	PIP
Date of Notification (1) 6/4/19			Owner / Operator (2)	1111		and the colorest transfer and	
Agencies Notified Type Notifica	ation	Street Address	ownship School Dis	strict			
EPA 5303	111011	43 Wertsville F	Road	A second	JUL	-1 2019	
DEP   Initial		City, State & Zip		lesi lesi	20.000		house
⊠ DOL I Amen		Ringoes, NJ 0			Smudovenovenova a se se	approximate section of the second section of the section of the second section of the section of	
DOHS DOHS DEMen	gency	Name of Contact			ASSESTOS		
DOHSANG ☐ Emerg	ellation	Edward Stolos		-		elephone N	
					9	08-782-64	64
		FACILITY IN	FORMATION				
Name of Facility Where Abateme	nt is Taking Place	(3)	Type of Facility (4)				
East Amwell Elementary Sch	100		School (K-12)				
Street Address			Subchapter 8	Other than K-1	2)		
43 Wertsville Road				ate & commerci	ial building	s, homes, e	etc.)
011 (7)			Square Feet	# of Floors	Ble	dg. Age	
1		County Code (7)					
Ringoes	Hunterdon		Current Use (Prior	if being demolis	shed)		
			School		1000000000000		
Name of Monitoring Firm Hired by	Building Owner (	8) ASCM No	. Name of Abatemen	t Contractor (9)			
RJB Environmental Inc			Bristol Environn				
Street Address		1	Street Address				
56 East Bridge Street			1123 Beaver Stre	et			
City, State & Zip Code			City, State & Zip Co	0.000000000			
Morrisville, PA 19067			Bristol, PA 19007				
Project Manager for Monitoring Fire	rm Tele	ephone Number	Telephone Number		License Nu	mber	
Richard Beach	267	7-991-9212	(215)788-6040	100	00509		
Scheduled Start Date (10) S	cheduled Complet	tion Date (11)	Name of OSHA Mor				
6/24/19	7/9	9/19	Bristol Environm	ental Inc.			
Occupancy Status During Abatem	ent (Check only o	ne)	Street Address				
Facility Closed/Vacated D			1123 Beaver Stre	et			
Abatement Performed Out		ours -	City, State & Zip Co	de			
Describe: 7:00 AM to 3:			Bristol, PA 19007				
☐ Facility Occupied During A	Abatement						
Scope of Work (Check all that app	oly)						
<b>5</b> 7	Notes:		$\boxtimes$	Full Containme	ent with Ne	gative Pres	sure
≥3 sf or ≥3 If	$\boxtimes$	Renovation		Mini-Enclosure			
≥160 sf ≥260 lf		Demolition		Glove Bag Prod	cedures		
				Non-Exempted		riable Proc	cedure
Location of	14	Location	Description of	A	mount	Abateme	nt Type
Asbestos-Containing		mally Used	Asbestos-Containing	(S	Specify		
Material (ACM) TO BE ABATED		Solely by ntenance or	Material (ACM)	SF	or LF)	ח	E E
in Facility	M 1000000000		(i.e., thermal systems insulation, surfacing, VA			Repair	Enclsoure
(13)	043	(12)	or other miscellaneous			oair	Sou
••••	Yes		or other impochaneous	''		<u>=</u>	re ate
Boiler Room			e Insulation (wrap &	0.16)	0.1.5		
Boiler Room					8 LF		
201101 1100111		++++	Boiler Rope/Packin	9 11	10 SF		
Name of Registered Waste Hauler		N IDED Wests	0.1:- 1 11				
value of registered waste riadier		NJDEP Waste Hauler ID No.	of Waste	of Registered	Landfill		
Service Transport Inc.		20990		min I amalein			
City, State		20000		rva Landfill			
Yardley, PA			Disposal Date City, S				
Completed By (Print or Type)		Tin		nesburg, OH			
		Title	Signature		entropy to	Date	
Gino Pizzigoni		Project	Dino Ping	MARIA !	Che 1	6/4/19	1
	E.1.90(E.1.)	Manager	Les more	1000	/		



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

M	E	C	E	I W	E	In
M		111	4		The second second	
14		UL	- 1	2019	100	

Date of Notification 06/24/19	(1)					Ilding Owner/Operator (2)				1		-013	-	
Agencies Notified	Tyne N	otification			mperi eet Addre	y Summit				1	Per Name (vide	Property and	annicae) is	-
□ EPA		Initial		54	eet Addire					ASBESTOS	CON	THO	)L 8	34-
□ DEP		Amended		Cit	y, State, Z	ip Code			lane, and	LICEN	DIM	3	N-Studying	Gerous
⊠ DOL		Amendment #		Ra	ndolph	, NJ 07869								
	X	Emergency (includin	g	Nai	ne of Con	tact			Telephone Nur	mber			Let He	
⊠ DOH		justification)		Kii	mberly	Summit			16 Sept. 10					
□ DCA		Cancelation												*
Name of Facility Who	ro Abato	ement is Taking Place (3)				FACILITY INFORMA					-			_
Residence	i e Abate	ement is raking riace (5)					1	ype of Facility (4)	121					
Street Address							_	<ul><li>☐ School (K-</li><li>☐ Subchapte</li></ul>	12) er 8 (Other than	W 421				
oti eet Addi ess								The state of the s			hama	or of	- 1	
								∆i Other (i.e.	private & com	mercial buildings,	nome	s, eu	/	
City (5)							Sq	quare Feet	# of Floors	Bldg. Age				
Randolph, NJ 07	869							,225	2	59				
County (6) Morris			1.		100000000000000000000000000000000000000	ty Code (7) FE USE ONLY)	Cu	rrent Use (Prior if I	peing demolished)					
	irm Hire	d by Building Owner (8)				ASCM No.	Na	me of Abatement (	Contractor (9)					
						Ascin No.	1,000	nicorn Contrac						
treet Address							_	eet Address						
							32	Willow Way						
ity, State, Zip Code							_	y, State, Zip Code						
								oodland Park,	NJ 07424					
oject Manager fo Mo	nitoring	Firm			Telepi	none No.		ephone No.		License No.				
							97	3-333-9176		01331				
art Date (10)				Sched	uled Com	pletion Date (11)	Nan	ne of OSHA Monito	ır					
5/25/18				06/2	9/19		En	virovision Con	sultants, Inc.					
cupancy Status Durin	g Abate	ment (Check Only One)		-			Stre	et Address						
☐ Facility Close	ed/Vac	ated During Entire Per	riod of A	bateme	ent		20-	-21 Wagaraw I	Rd., Bldg. 35-E					
] Abatement I	Perforn	ned Outside of Norma	l Facility	/ Hours			City,	State, Zip Code						
Other - Desc	ribe: _						Fair	r Lawn, NJ 07	410					
pe of Work (Check Al	II That Ap	oply)												
l ≥3 sf or ≥3 lf				$\times$	Renov	ration	X	Full Contains	ment with Nega	tive Pressure				
≥160 sf or ≥2	60 If				Demo	lition		Mini-Enclosu						
								Glovebag Pro						
								Non-Exempt	ed (*) and Non-	Friable Procedure	-	Aha	teme	nt
	0 326	6		Is Location Normall									ype	14.
	Location ntaining	of Material (ACM)	L	sed Solely		Asbesto		scription of aining Material (AC	IM)	Amount		T	1	T
	O BE ABA			/laintenan		1.0		systems insulation		(Specity		1	m	
	In Facili	ty	C	ustodial St (12)	aff?			cing, VAT, or		SF or LF)	Rei	-	caps	Encl
	(13)		Yes	No	N/A	•	otner n	niscellaneous)			Removal	Repair	Encapsulate	Enclosure
	Attic		163	X	IN/A	Verr	micu	lite Insulation		1,125 LF	X	17	T I	re
	ALLIC					V C11	mean	ite modicion	774754	1,125 C	+			H
										<u> </u>	+			$\vdash$
e of Registered Waste	Hauler			NIDEP W	aste Haul	er ID No.	Cubic \	Yards of Waste		Name of Regustered	Landfi	1		
corn Contractin				00358			20			Fairless Hills La				
State	B 301P	\$5.						al Date		City, State				
odland Park, Ne	w lerc	ev .					ГBD			Morrisville, PA				
eleted by	., 5013	-1	Title			l.		Signature			Date			
ko Nikolov			Preside	ent					-			24/1	9	

INV-1038	12								ME	C		7	V// [	
10 258815	217714	O NO	TIFIC	ATIO	State of N N OF AS ant to NJ	lew BE	Jersey STOS ABA 8:60 and 5:1	EMENT 6)		JUL		1 20		The second second second
Date of Notification (1)						4650	wner/Operator (					-		- 1
06 / 25	/ 20	19		Lui	s DaCo	eta	1	• 00 • 000	100		0.0		0000000	0
Agencies Notified	Type Notificat	ion			et Address	Sta	1		ASB	ESTO		SING SING		_ &
☑ EPA	☑ Initial								l-	SECOND SECOND	HAMETTY-UP'T	ALCO CONTRACTOR	LOSALISMONIOS	e energia
☑ DOLWD	Amended	- 1 - 11		City,	State, Zip	Code	e							- 12
☑ DOH □ DCA	Amendmer  Emergency		na	100000000000000000000000000000000000000	기가 되었다면 하지 않아 하나 하나 아니다.		, NJ, 0709	2						
(NJAC 5:23-8)	justification		ng .		e of Contac		,		Telephone	Numbe	er			_
	☐ Cancellation	on		Luis	s DaCo	sta								
				FA	CILITY IN	NFO	RMATION							
Name of Facility Where Al	batement is Ta	king Plac	ce (3)					Type of Facilit	y (4)		_			
DaCosta Residen	ice							School (K-	12)					
Street Address								Subchapter	r 8 (Other than	K-12)		r.		
								homes, etc	private and cor	nmerci	ai bi	ıllalıng	JS,	
City (5)								Square Feet	# of Floors	i	BI	dg. A	ge	
Mountainside								1,950	1		8			
County (6)						7) <i>(</i> S7.	ATE USE ONLY)		Prior if being de	molish				
Union County				20	10			Residence						
Name of Monitoring Firm F	Hired by Buildir	ng Owne	(8)	ASCM	l No.	Na	ame of Abateme	ent Contractor (9	9)					
N/A				N/A		A	cme Profe	ssional Se	rvices Cor	р				
Street Address						1000	reet Address							
N/A							50 Rifle Ca							
City, State, Zip Code							ty, State, Zip Co		10000000					
N/A							oodland P	ark, NJ 07	424					
Project Manager for Monito	oring Firm		100000	ephone ^	No.		elephone No.		License No	Ο.				
Start Date (10)	Col	hadulad i	N/		1- (44)		73-938-526		02003					
07 / 05 /		heduled 07				30	me of OSHA M							
					19	_	rsenije Ada	amov						
Occupancy Status During A  Facility Closed/Vacated				mont			reet Address	Б.						
☐ Abatement Performed (	Dutside of Norn	nal Facili	tv Hou	rs - Des	scribe		0 Rifle Ca							
Time of Abatement:	AM	_PM/	PN	_	AM	1000	y, State, Zip Co		101					
Scope of Work (Check all t	hat apply)					VV	oodland P	ark, NJ U/	424					
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf	,		enova emoliti				☑ Mini-Encl ☐ Glovebag		-					
		1	s Loca							T	Aba	ateme	ent Ty	/pe
Location of Asbestos-Containing M		Us	Norma ed Sol		Aaba	otes	Description of		A CONTRACTOR CONTRACTOR	t	200			_
TO BE ABAT	ED	M	ainten	ance/			Containing Mat ermal systems in		Amount (Specify		Removal	Repair	Encapsulate	Enclosure
IN Facility (13)		Cus	3todiai (12)	Staff?		5	surfacing, VAT,	or	SF or LF)		val	7	sula	sure
(13)		Yes	No	N/A		ot	her miscellaneo	ous)					ate	10
Crawl Space				X	Removal o	f ACI	M Pipe insulation	and fitting	50 If	$\dashv$	X			
Basement				X	ACM Cen	nent	Board Transit		45 sf	-	X	П		
Kitchen				X	ACM joint of	comp	oound		418	-	X		H	
			П	П						-		7	긁	一
Name of Registered Waste	Hauler		1	JDEP /	Vaste	Cut	bic Yards of	Name of Regis	stered I andfill			ш		ш
Acme Professiona		Corn	F	lauler II	O No.	Was	ste	Fairless Lar						
City, State	. 501 11003	COIP	10	038176			ibic yds posal Date	City, State	IGIIII					
Woodland Park, N	.1						- Joan Date	200	DΛ					
Completed By (Print or Type		itle					Signature	Morrisvilles	PA	Dot-				
Arsenije Adamov		reside	ant.				Arse	nije Ada	mov	Date	100	10		
SB-41		165IU	SIIL				Acceptance (Co. Co.	0	normaliser report to	6/25/	20	19	_	

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:420)

Check # 25908

MI- 10294	$\cap$		NOTIF	CATIO	N OF ASE	BESTOS	ABATE	MENT	C	heck #	259	08		
1111 1300	U		(F	1997	DACK of	n Sand	-			n E	P	ß	$\Pi$	// [
Date of Notification (1) 6/28/2	2019			Name o	of Building	Owner/	A. 55-51	(2) ePascale			<u> </u>	느	Π <i>(</i>	/ [
Agencies Notified	Type Notification			Street A	Address						JUL	- 1	20	10
EPA DEP	× Initial Amended		-	City, St	ate, Zip C	ode			- 1		JUL		20	15
X DOL	Amendment Emergency		<u>,                                    </u>	0.04 1000			Ewing,	NJ 08618	-	ASB	ESTO	S C	TMC	SOL
⊠ DOH □ DCA	justification)  Cancellation		,		of Contact Andrew		scale		Te	lenhono Mi	mhak	ENIS	ING	ereseres en
					ILITY INF						-3377 32			
Name of Facility Where	Abatement is Takin dential	g Place (	3)		2-1-1-1-1			Type of Facility	(4)					
Street Address	acritial			76.7614 H=42.50				School (K		er than K-1	2)			
										& commerc		dings	hom	es,
City (5)	NJ 08618							Square Feet 1500	# 0	f Floors	E	Bldg. A	- TO 17	
County (6)				County	Code (7)			Current Use (P	rior if be		hed)	75 +	/-	
Mercer					USE ONLY	)					2.55.E.Z			
Name of Monitoring Firm MECS	n Hired by Building (	Owner (8	)	ASC	M No.			of Abatement Co ens Environm			Inc.			
Street Address PO Box 34	1						- 30,000	Address Box 322						
City, State, Zip Code Chesterfield	N.I 08515						City, S	tate, Zip Code town, NJ 085	·01					
Project Manager for Mor			Т	Telepho	ne No.			one No.	01	License N	No.	-		
Bill Weisgarb	er			609 29	98-4070		100	259-9688		00493				
Start Date (10) 7/8/2019		Schedul		npletion 12/201	Date (11) 9		Name MEC	of OSHA Monito S	г					
Occupancy Status Durin	g Abatement (Chec	k Only O	ne)				200000000000000000000000000000000000000	Address						
× Facility Closed/Vac Abatement Perform	ated During Entire F	Period of	Abaten	nent				tate, Zip Code			-			
Other – Describe:			, 110011			_	The state of the state of	sterfield, NJ 0	8515					
Scope of Work (Check A	II That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	Renova Demolit				×	Full Containn Mini-Enclosu Glovebag Pro Non-Exempte	re ocedure				۵	
		Is	Locati	on				Tron Exompte		u 11011 1 11d1	1	Abate	ement	
Location Asbestos-Containing			Normal ed Sole		Ashasa		scription					T I y	ре	
TO BE AB. In Facil (13)	ATED ity	100,000,000	intena todial S (12)			thermal surfa			(8	mount Specify or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A							=		ate	9
Basem	ent		Х		Th	ermal	Pipe In	sulation	1	75 If	Х			
Name of Registered Was	ste Hauler		l N	JDEP W	/aste	Cubic	Yards	Name of	Registe	red Landfill				
Stevens Environmer			10000	auler ID 18292	No.	of Was		Fairles						
City, State Allentown, NJ				nci yezwei		Dispos	sal Date	City, Sta		Α			4500	
Completed by Mahlon E. Stevens		Title	ot Ma	nagar			ignature	11111	,,,,		ite	/004		
Marion L. Stevens		FIOJE	CL IVIS	nager			11				6/28	/201	9	

MV-12379 MO 2586111727

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

E	C	E		$\mathbb{V}$	M
٩	JUL	-	1	2019	
4.00		Tarrier Cons	Ansietrypy	North Control	

Date of Notification (1)					Nom	o of Duildin	~ 0		(0)	100 000					5.10
	24 /	20	40		100000			wner/Operator	100						
			19_				y A	American V	Vater		ASBI				ROL
Agencies Notified  EPA	Type Notific	cation			177115-5713	et Address					Olette totalise	LIC	ENS	ING	
☑ DOLWD	Amende	ed				ailroad .									
☑ DOH	Amenda	ment #			100000	State, Zip C			2222						
	☐ Emerge	ncy (in	cludin	g				, New Jers	sey, 08069						
(NJAC 5:23-8)	justificat  Cancella				11300300000	e of Contac				Telephone					
	L Caricella	auon			Dor	na M. S	Sla	ck		856-764	4-69	22			
					FA	CILITY IN	IFO	RMATION							
Name of Facility Where At		Taking	Place	(3)					Type of Facility	(4)					
Vacant Storage F	acility								School (K-1						
Street Address									☐ Subchapter ☐ Other (i.e.,				uildin	20	
3 Railroad Avenue	9								homes, etc		miner	uai D	unun	ys,	
City (5)									Square Feet	# of Floors	S	В	ldg. A	ge	
Penns Grove									1,058	1		5	0+		
County (6)							(ST	ATE USE ONLY)	Current Use (P	rior if being de	molis	hed)			
Salem					170	08			Vacant						
Name of Monitoring Firm H	lired by Buil	lding C	)wner	(8)	ASCM	No.	Na	me of Abateme	ent Contractor (9	)					
N/A							A	rsenije Ada	amov/Acme	Professi	ona	I Se	rvic	es	Cor
Street Address								reet Address							
N/A							55	50 Rifle Ca	ımp Rd						
City, State, Zip Code								y, State, Zip Co							
N/A							W	oodland P	ark, NJ, 07	424					
Project Manager for Monito	ring Firm			Tele	phone	No.		lephone No.		License N	0.				
N/A				N/A	4		97	73-938-526	36	02003					
Start Date (10)		Schedi	uled C	omple	tion Da	te (11)	Na	me of OSHA M	onitor						$\neg$
07 / 08 / 2	019	07	/	15	_ / _	2019	Ar	senije Ada	mov						
Occupancy Status During A	Abatement (	Check	only o	ne)	100			eet Address							-
☐ Facility Closed/Vacated	During Enti	re Peri	iod of	Abate	ment		55	0 Rifle Ca	mp Rd						
Abatement Performed C	outside of N	ormal	Facility	/ Hour	s - Des	cribe 1		y, State, Zip Co			1101				$\dashv$
Time of Abatement:	AIVI	PIV		_PM-		AM			ark, NJ 074	124					
Scope of Work (Check all the	nat apply)								,						=
≥3 sf or ≥3 If			☐ Re	novoti	00				ainment with Ne	gative Pressur	е				
≥160 sf or ≥260 If			☑ De					☐ Mini-Encl							
								☑ Non-Exer	npted (*) and No	n-Friable Prod	edure	•			
				Locat								Ab	atem	ent Ty	уре
Location of Asbestos-Containing Ma		,		lorma d Sole		Anhon	+	Description of Containing Mat				R	D	m	Ш
TO BE ABATE	ED PROPERTY	"	Mai	intena	nce/			ermal systems in		Amount (Specify		Remova	Repair	ncar	nclo
IN Facility			Cust	odial ( (12)	Staff?		S	surfacing, VAT,	or	SF or LF		val	_	Encapsulate	Enclosure
(13)		t	Yes	No	N/A		oth	her miscellaned	us)					ate	TO
1st Floor Interior			П	X		ACM Ti	lo	& Mastic		600 FT					
1st Floor Interior		-								600 FT					믬
Exterior	Harris II							dow Caul	(	20 LF					
LXterior				ADMINI		ACIVI VV	all	Patching		20 LF		X	Ш	Ц	
Name of Registered Waste	Hauler				IDEB V	Vanta	Cub	is Vanda of	N (5 :						
				10000	JDEP V auler ID	NORTH AND ADDRESS OF THE PARTY	Cub Was	oic Yards of ste	Name of Regis						
Acme Professional City, State	Service	es Co	orp	00	38176	4	4 ya	rds	Fairless L	andfill					
Woodland Park, N.	L							oosal Date /10/2019	City, State Morrisvilles	: PA					
Completed By (Print or Type		Title					011	Signature	omovinos		Det				
Arsenije Adamov		In a martin	منطم	nt				Arsen	ije Adam	ov	Date				
Alselije Adamov		rie	side	IIL					/	A 45 (10 A)	6/2	4/2	019		

Date of Notification (1)
Agencies Notified  Agencies Notified  EPA  DOLWD  Amended  Amended  Amended (NJAC 5:23-8)  DCA  (NJAC 5:23-8)  Telephone Number  Carl McDonald  FACILITY INFORMATION  Name of Facility Where Abatement is Taking Place (3)  Robert Wood Johnson Place  FACILITY INFORMATION  Name of Robert Wood Johnson Place  Telephone Number  908-892-2758  FACILITY INFORMATION  Street Address  One Robert Wood Johnson Hospital  Type of Facility (4)  Street Address  One Robert Wood Johnson Place  City (5)  New Brunswick  County (6)  County Code (7)(STATE USE ONLY)  Current Use (Prior if being demolished)
Agencies Notified    Type Notification   Street Address   One Robert Wood Johnson Place   ASBESTOS CONTROL LICENSING
Sepa
DOLWD
DHSS
DCA
Name of Contact   Telephone Number   908-892-2758
FACILITY INFORMATION  Name of Facility Where Abatement is Taking Place (3) Robert Wood Johnson Hospital  Street Address One Robert Wood Johnson Place  City (5) New Brunswick  County (6)  County (6)  FACILITY INFORMATION  Type of Facility (4) School (K-12) School (K-12) Other (i.e., private and commercial buildings, homes, etc.)  Square Feet # of Floors Bldg. Age
Name of Facility Where Abatement is Taking Place (3)  Robert Wood Johnson Hospital  Street Address  One Robert Wood Johnson Place  City (5)  New Brunswick  County (6)  County Code (7)(STATE USE ONLY)  Type of Facility (4)  School (K-12)  Subchapter 8 (Other than K-12)  Other (i.e., private and commercial buildings, homes, etc.)  Square Feet # of Floors Bldg. Age
Robert Wood Johnson Hospital  Street Address One Robert Wood Johnson Place  City (5) New Brunswick  County (6)  County (6)  School (K-12) Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, homes, etc.)  Square Feet # of Floors Bldg. Age Current Use (Prior if being demolished)
Street Address One Robert Wood Johnson Place  City (5) New Brunswick  County (6)  Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, homes, etc.)  Square Feet # of Floors Bldg. Age County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished)
One Robert Wood Johnson Place  City (5)  New Brunswick  County (6)  County Code (7)(STATE USE ONLY)  Current Use (Prior if being demolished)
City (5)  New Brunswick  County (6)  County Code (7)(STATE USE ONLY)  Current Use (Prior if being demolished)
New Brunswick  County (6)  County Code (7)(STATE USE ONLY)  Current Use (Prior if being demolished)
County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished)
BALL-Harans
Middlesex
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9)
Omega Environmental AbateTech, Inc.
Street Address Street Address
280 Huylar Street 30 Maple Ave. PO Box 25
City, State, Zip Code  City, State, Zip Code
South Hackensack, NJ 07606 Lumberton, NJ 08048
Project Manager for Monitoring Firm Telephone No. Telephone No. License No.
Geiser Fajardo 201-489-8700 609-265-2107 00529
Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor
Occupancy Status During Abatement (Check only one)  Street Address
Facility Closed/Vacated During Entire Period of Abatement  200 Route 130 North
Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:AMPM/PMAM City, State, Zip Code
Cinnaminson, NJ 08077
Scope of Work (Check all that apply)
☐ Full Containment with Negative Pressure ☐ Saf or ≥3 If ☐ Renovation ☐ Mini-Enclosure
□ ≥160 sf or ≥260 lf □ Demolition □ Glovebag Procedure
■ Non-Exempted (*) and Non-Friable Procedure  Is Location Abstement T
Normally
Location of Normally Description of
Asbestos-Containing Material (ACM)  TO BE ABATED IN Facility (13)  Used Solely by Maintenance/ Custodial Staff? (12)  Yes No N/A  Used Solely by Maintenance/ Custodial Staff? (12)  Yes No N/A  Used Solely by Maintenance/ Custodial Staff? (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Amount (Specify SF or LF)
Asbestos-Containing Material (ACM)  TO BE ABATED IN Facility (13)  Used Solely by Maintenance/ Custodial Staff? (12)  Asbestos Containing Material (ACM) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Amount (Specify SF or LF)
Asbestos-Containing Material (ACM)  TO BE ABATED IN Facility (13)  Ves No N/A  Used Solely by Maintenance/ Custodial Staff? (12)  Yes No N/A  Vibration Sleeves  To SF  Amount (Specify SF or LF)  Amount (Specify SF or LF)  To BE ABATED (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  To BE ABATED (Specify SF or LF)  To BE ABATED (Speci
Asbestos-Containing Material (ACM)  TO BE ABATED IN Facility (13)  Yes No N/A  10th Floor Penthouse Mechanical  Discription of Material (ACM) Maintenance/ Custodial Staff? (12)  Yes No N/A  Vibration Sleeves  70 SF  The Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Amount (Specify SF or LF)  The Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  The Description of Asbestos Containing Material (ACM) (Specify SF or LF)  The Description of Asbestos Containing Material (ACM) (Specify SF or LF)  The Description of Asbestos Containing Material (ACM) (Specify SF or LF)  The Description of Asbestos Containing Material (ACM) (Specify SF or LF)  The Description of Asbestos Containing Material (ACM) (Specify SF or LF)  The Description of Asbestos Containing Material (ACM) (Specify SF or LF)  The Description of Asbestos Containing Material (ACM) (Specify SF or LF)  The Description of Asbestos Containing Material (ACM) (Specify SF or LF)  The Description of Asbestos Containing Material (ACM) (Specify SF or LF)  The Description of Asbestos Containing Material (ACM) (Specify SF or LF)  The Description of Asbestos Containing Material (ACM) (Specify SF or LF)  The Description of Asbestos Containing Material (ACM) (Specify SF or LF)  The Description of Asbestos Containing Material (ACM) (Specify SF or LF)  The Description of Asbestos Containing Material (ACM) (Specify SF or LF)  The Description of Asbestos Containing Material (ACM) (Specify SF or LF)  The Description of Asbestos Containing Material (ACM) (Specify SF or LF)  The Description of Asbestos Containing Material (ACM) (Specify SF or LF)  The Description of Asbestos Containing Material (ACM) (Specify SF or LF)  The Description of Asbestos Containing Material (ACM) (Specify SF or LF)  The Description of Asbestos Containing Material (ACM) (Specify SF or LF)  The Description of Asbestos Containing Material (ACM) (Specify
Asbestos-Containing Material (ACM)  TO BE ABATED IN Facility (13)  Ves No N/A  10th Floor Penthouse Mechanical  Discription of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Vibration Sleeves  70 SF
Asbestos-Containing Material (ACM)  TO BE ABATED IN Facility (13)  Yes No N/A  10th Floor Penthouse Mechanical  Discription of the miscellaneous  Wibration Sleeves  TO SF  TO SF  To SF  To Specify SF or LF)  To SF  To S
Asbestos-Containing Material (ACM)  TO BE ABATED IN Facility (13)  Yes No N/A  10th Floor Penthouse Mechanical  Discription of Registered Waste Hauler  Name of Registered Waste Hauler  Asbestos-Containing Material (ACM) Maintenance/ Custodial Staff? (12) Yes No N/A  Vibration Sleeves  To SF  Name of Registered Waste Hauler  Abate Tech, Inc.  Amount (Specify SF or LF)  Absestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Amount (Specify SF or LF)  Amount (Specify SF or LF)  NAME of Registered Waste Hauler  NJDEP Waste Hauler ID No.  Bescription of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  Amount (Specify SF or LF)  NAME of Registered Landfill  Amount (Specify SF or LF)  NAME of Registered Landfill  NJDEP Waste Hauler ID No.  Name of Registered Landfill  CR O.W.S. Landfill
Asbestos-Containing Material (ACM)  TO BE ABATED IN Facility (13)  Yes No N/A  10th Floor Penthouse Mechanical Pm  Name of Registered Waste Hauler AbateTech, Inc.  Asbestos-Containing Material (ACM) Maintenance/ Custodial Staff? (12)  Yes No N/A  Vibration Sleeves  70 SF  Name of Registered Waste Hauler AbateTech, Inc.  NJDEP Waste Hauler ID No. 18750  Name of Registered Landfill G.R.O.W.S. Landfill
Asbestos-Containing Material (ACM)  TO BE ABATED IN Facility (13)  Yes No N/A  10th Floor Penthouse Mechanical Pm  Name of Registered Waste Hauler AbateTech, Inc.  Asbestos Containing Material (ACM) Maintenance/ Custodial Staff? (12)  Yes No N/A  Vibration Sleeves  70 SF  Name of Registered Waste Hauler AbateTech, Inc.
Asbestos-Containing Material (ACM)  TO BE ABATED IN Facility (13)  Yes No N/A  10th Floor Penthouse Mechanical Pm  Name of Registered Waste Hauler AbateTech, Inc.  Used Solely by Maintenance/ Custodial Staff? (12)  Yes No N/A  Vibration Sleeves  70 SF  Name of Registered Waste Hauler AbateTech, Inc.  Used Solely by Maintenance/ Custodial Staff? (12)  Yes No N/A  Vibration Sleeves  70 SF  Name of Registered Waste Hauler Hauler ID No. 18750  Name of Segistered Landfill G.R.O.W.S. Landfill  G.R.O.W.S. Landfill  G.R.O.W.S. Landfill

Ch11410	1W-1	1		TIFI (	FICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)								7 [				
Date of Notification (1)	27 /		19					Owner/Operator	1.500	06-5504 Check	- 1	201	19				
Agencies Notified	Type Noti							ownship out	7013 7 300 # 13	THE RESIDENCE OF THE PERSON NAMED IN	-	-					
⊠ EPA	☑ Initial	ilicatio	11		100000000000000000000000000000000000000	eet Addres: O Conove		and		ASBEST	OS CO CENSI	DNTR	OL 8	1			
☑ DOLWD	☐ Amend	ded				, State, Zip	1 22		Sa.		MONTH OF THE PARTY	140	comme	anners (ten			
☑ DHSS	Amend			_		olts Necl											
DCA (NJAC 5:23-8)	☐ Emerg justific			ing		ne of Conta	255	3 01122		T-1-1-1-1	•						
(110/10/0.20/0)	☐ Cance				1	incent Ma				Telephone N		441					
					-					732-946-0	USS ex	(1.41)	13				
Name of Facility Where A	batement is	s Taki	na Pla	co (3)	г	ACILITY	INF	ORMATION	T	7.0							
Cedar Drive MS	Datoment i	3 Taki	ng r ia	ce (3)					Type of Facility								
Street Address									School (K-1	· 8 (Other than K-	12)						
73 Cedar Drive									Other (i.e.,	private and comr	nercial l	buildir	igs,				
City (5)									homes, etc		- 1.	21.1.	•				
Colts Neck, NJ 0772	2								Square Feet	# of Floors	1	3ldg. A	4ge				
County (6)					Cor	unty Code	(7)/S	TATE USE ONLY)	Current Hea /P	rior if being demo	alichod)						
Monmouth						,	(· //o	2 002 01121)	School	nor it being dent	Jilstieu)						
Name of Monitoring Firm F	lired by Bu	ilding	Owne	(8)	ASCN	/ No.	IN	ame of Abateme	ent Contractor (9	)			_				
RJB Environmental,				1.0			- 11	AbateTech, I		,							
Street Address							_	treet Address				w 107-5					
615 Prospect Avenue	е							30 Maple Ave	e. PO Box 25								
City, State, Zip Code				255		111111		ity, State, Zip Co									
Morrisville, PA 19067	7							Lumberton, N									
Project Manager for Monito	ring Firm			Tel	ephone	No.		elephone No.		License No.							
Jim Frisbee						1-9121		609-265-2107		00529							
Start Date (10)						ate (11)	Na	ame of OSHA M	onitor								
7/22/		100			6_ /	19		EMSL Analyti	cal								
Occupancy Status During A	batement	(Chec	k only	one)	-0.0000 - 04.000		St	reet Address									
☐ Facility Closed/Vacated ☐ Abatement Performed C	During Ent	ire Pe	riod of	Abate	ment			200 Route 130	0 North								
Time of Abatement:	AM-	PI	M/	y Hou PM	rs - De: -	AM		ty, State, Zip Co									
Scope of Work (Check all th							(	Cinnaminson	, NJ 08077								
<u></u>	iat apply)							☐ Full Conta	ainment with Neg	ative Pressure							
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>				enovat emolitic				☐ Mini-Encle	osure	, and i recoure							
				HOHLI	311			☐ Glovebag ☑ Non-Exen		n-Friable Proced	ure						
				Local					, ,,			atem	ent Ty	vne			
Location of Asbestos-Containing Ma		<b>a</b> \		Norma ed Sole			0.02	Description of				_					
TO BE ABATE		(1)	Ma	intena	nce/	Asbe	stos	Containing Maternal systems in	erial (ACM)	Amount (Specify	Removal	Repair	nca	nclo			
IN Facility			Cus	todial (12)	Staff?	,	5	surfacing, VAT,	or	SF or LF)	oval	=	Encapsulate	Enclosure			
(13)			Yes	No	N/A	1	ot	her miscellaneo	ous)				ate	w			
See Attached						See Att	ach	ed		See Attached	1 12						
						0007110				See Attachet							
											닏						
Name of Registered Waste H	Hauler		<u> </u>			Vaste	Cuk	oic Vards of	Name of Regis	torod I andfill		Ш		Ц			
AbateTech, Inc.				H	auler ID No. Waste GPO			G.R.O.W.S.									
City, State					18750 40 Gity, State				9								
Lumberton, NJ								/26/19	Tullytown,	PA							
Completed By (Print or Type)	)	Title				Signature Date				-							
Gwendolyn Trumbetti		OF	perati	ons C	oordi	nator											
ASB-41								Operations Coordinator 6-37-19									

E

ASBESTOS CONTROL & LICENSING

Technical Specifications Cedar Drive Middle School, Colts Neck, NJ

Codar Drive Middle 6.	Cedal Dilve Middle School, Colts Neck, NJ	May 14, 2019	Page 5
	KIN TIN TIN TIN TIN TIN TIN TIN TIN TIN T	JNI 'JVINILLIE VILLE INC.	

	CM	Vinyl Asbestos Floor Tile/Mastic	(SF)		.850		850	850		850	850		4.250
	Table 1: Summary of Estimated Quantities of ACM	Base Cove Molding/Adhesive	(LF)		120		120	120	120		120	009	
Toble	Taple 1	Location		Room 12	44	Room 15		Room 16	Room 17	Dom 10	NOO!! TO	Totals	

1111-12213	5	NOTIFICAT	ON OF AS	IEW JERSEY BESTOS ABATEMEN C 8:60-7 AND 12:120-		leck-	# 01	25			
Date of Notification (1) 06 / 19 / 19		L		Building Owner / Ope	erator (2)	Walley Marca					
_/_/_			Street Ad			In	5 (G 15	\  \			
	otification		Control of the last of the las	te 208 North			5 6 5		[]		
☑ EPA ☐ ☐ DEP ☑	Initial Amended		- Control (Control (C	e, Zip Code New Jersey, 07410							
☑ DOH	Amendment #	£ 1	Name of 0			Telephor	ne Number	2019	11 000		
☑ DOL □	Emergency w Cancellation	/ justification	PETER VI	LLANO		201-794-		2010			
		F	ACILITY IN	FORMATION		A	SBESTOS C	ONTROL &			
Name of Facility Where Abatem Mondelez International	ent is Taking I	Place (3)		Type of Facility (4)	(40)	1	LIGENC	11.67.3	AND LONG TO SERVICE AND ADDRESS OF THE PERSON NAMED AND ADDRES		
Street Address 2211 Route 208				✓ Other (I.e.)	ter 8 (Other ., private & omes, etc.)						
City (5) County (6) Fairlawn Bergen	)	County Code	(7)	Square Feet	# Of Floor		Building Age	)			
Fairlawn Bergen				1,000,000 Current Use (Prior if		olishod\		40 +			
				Bakery	being dein	onsneu)		4U T			
Name of Monitoring Firm Hired	by Bldg. Own	er (8)	ASCM NO	SCM NO \							
AET				NODTHETAD CONT							
Street Address		NAME OF THE OWNER		NORTHSTAR CONTRACTING GROUP, INC.  Street Address							
907 Doolittle Drive				Otreet Address							
City, State, Zip Code				32 Williams Parkway							
Bridgewater, NJ 08807				City, State, Zip Code							
Project Mngr. For Monitoring Fi Eric Houseknecth	ırm	Telephone Nu 908-218-1108	mber	East Hanover, NJ 079	36				- 1		
Sheduled Start Date (10)	Sched. Comp	letetion Date (1	1)	Telephone Number	300	License N	Number		$\dashv$		
06/	06/	/23/	20						1		
Occupancy Status During Abate	ment (Check	() () () () () () () () () () () () () (		973-884-8682			00860				
Facility Closed/Vacat	ement (Check t	only 1) ire Period of		Name of OSHA Moni NORTHSTAR CONTI		ROUP IN	C		- 1		
Abatement	77K			Street Address	U TOTINO O	11001, 111	· ·		$\neg$		
☐ Abatement Performe		ormal Facility									
Hours - Describe:  Other - Describe:		20.4		32 Williams Parkway							
Other - Describe:	7.00AW - 3;30	-IVI		City, State, Zip Code East Hanover, NJ 079							
Scope of Work (Check All That	Apply)				-		-				
Demolition		Denember	-	F. II O	d. M d.	_			- 1		
□ ≥3sf or >3lf	$\Box$	Renovation		Full Containment wi Mini - Enclosure	th Negative	Pressure			-		
≥160 sf or ≥260 lf			V	Glovebag Procedure	)				- 1		
				Non-Exempted (*) ar	nd Non-Fria	ble Proce	dure		- 1		
Location of	ls		Descripti	on of		Abateme	of Type	-	-		
Asbestos Containing	Location	As	bestos - C			R	E E	lΕ			
TO DE ADATED	Normally		Material (		Amount	E	R N	N			
TO BE ABATED in Facility	Used Solely		e., thermal	systems acing, VAT,	(Specify SF or LF)	M	E C	C	į		
(13)	by Main-		other misc		SF OI LF)	V	A P	0			
	tenance/			50 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		A	I S	s			
	Custodial Staff (12)					L	R U	U	NAMES		
	YES NO N/A						L	R	_		
BAKERY WAREHOUSE		PIPE & FITTING	G		130 LF	V					
BAKERY MEZZANINE		PIPE INSULAT	_		60 LF 70 LF	7					
BAKERY WAREHOUSE		PIPE & FITTING	G								
Name of Registered Waste Hau	er	NJDEP Waste	Cubic	Name of Registered	l andfill						
NEWARK CARTING		Hauler ID No.		GROWS	Lanumi						
NORTHSTAR CONTRACTING G	ROUP, INC.		of Waste						- Carlo		
City, State NEWARK, NJ					,						
EAST HANOVER, NJ			Date	Morrisville, PA 19067							
Completed by (Print or Type)	THE RESERVE TO SERVE THE PARTY OF THE PARTY	Title		Signature		1	Dat	e	$\neg$		
Stove Stiles				13///	5 ml	08	2	₹2)	THE STATE OF THE S		
Steve Stiles ASB-41		Project Manage	) 	1300				06/28/19			

Location of Asbestos Containing  TO BE ABATED in Facility (13)	t t	Is located lorm Use Sole Sole enan custo Staff (	ion ally d lly ain- ce/ dial	Description of Asbestos - Containing Material (ACM) (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatem R E M O V A L	R E P A I R	E N C A P S U L	E N C L O S U R
	YE	YES NO N					1		
BAKERY 1ST FLOOR HALL		1		PIPE & FITTING	12 LF	7		$+ \sqcap$	
BAKERY WAREHOUSE	TU	1		PIPE & FITTING	25 LF	7		1 1	1 1
	TU	V				V			1 -
		1				<b>V</b>			
		4				V			
		7				V			
		1				7			
		4				V			
		1				1			
		1				J			



'IN	LIN !				BESTOS ABA		CX	515	1	-
111V-111	717	(Pui	rsuant	to NJAG	8:60 and 12:	120)	IN E	可能了	·\//	F
Date of Notification (1)	7 10		Nam	of Buildin	ng Owner/Operato	r (2)		77 11 11	-	
6/27/19				1.00	JAY STY	1000				
Agency Notified	Type Notification		_	t Address				11 1	201	9
								, ,	LUI	J
D EPA	Ja Initial ☐ Amended		City,	State, Zip	Code .					
EDOL	Amendment #			CEARN	. ICA . Y	07032	- ASSES	STOS COI	VTR	OL.
₽DOH	☐ Emergency (include justification)	ling		e of Conta			Telephone Num	ber - 151	G	normana.
D DCA	☐ Cancellation			ur s	TYLHAN		1			
			_		FORMATION		_			
Name of Facility Where	Ahatement is Taking P	ace (3)			- Contraction	Type of Facility	(A)			1,100
D-25						1				
	STYLMAN					School (K-1)	2) 8 (Other than K-12	n -		
Street Address					(E)		rivate & commercia			
				· ·	2	homes, etc.	)			
City (5) .						Square Feet	# of Floors	Bldg. Age	2.2	
KEAR	-NY					2200.	2	195	0	
County (6)					7) (STATE USE	Current Use (F	rior if being demol	ished)		
HUDSON	Ŋ		ONL	r) .		RE	SIDENCE			
Name of Monitoring Firm	n Hired by Building Own	ner AS	CM No.		Name of Abater	nent Contractor (	9)			
(8)					Best Re	moval In	С			
Street Address					Street Address				-	
			120		450 SON	th River	St			
City, State, Zip Code			10		City, State, Zip		00			
			-0.		Hackens	ack, N.J	. 07601			
Project Manager for Mor	nitorina Firm	Tele	phone No		Telephone No.		License No.			
,			7.	-	201-329		00388			
Start Date (10)	Scheduleg (	Completion	Date (11	)	Name of OSHA	Monitor				
7/12/1	9 7/1		- 3	Š.	Omega	Environm	ental			
Occupancy Status Durin	ng Abatement (Check or	nly one)			Street Address					
D = T 0 40/					280 H	uyler St				
☐ Facility Closed/Vacate ☐ Abatement Performed					City, State, Zip					5 U - 30
Other - Describe: 8	:22 DATO S:	DD PH					,N.J. 07	606		
Scope of Work (Check a	all that apply)									
De3sfor≥3if			DT D	enovation		Containment with -Enclosure	Negative Pressur	e		
□ ≥ 160 sf or ≥ 260 lf				molition		ebag Procedure		*:		
					☐ Non	-Exempted (*) an	d Non-Friable Proc			
		Is Lo	ocation					^	bate Tyr	
Locati	ion of		rmally Solely by	1 :	Description	of	W 20.07			
Asbestos-Containin	ng Material (ACM)		enance/		estos Containing M	laterial (ACM)	Amount	-	Repair	9
TO BE A			stodial	(1.4	e_ thermal systems surfacing, VA		(Specify SF or LF)	em	Rep	cap
(1:		1	taff? (12)		other miscellan		01 <u>012.7</u>	Removal	air	Encapsulate
				_				-		to l
		Yes	No N/	/						1
BASEMENT	7		1	THER	mu systems	INSULATION	1151	FX		
<u> </u>								4.3		
									П	
Name of Registered Wa	iste Hauler	NJDE	EP Waste	Hauter	Cubic Yards of	Name of Reg	stered Landfill		-	
Best Remo		ID No			Waste				_	
			17109	9	2/2c	Y CUMBERL	AND COUNT	Y LAND	MC	L
City, State				V-11	Disposal Date	City State				0
	ck , N.J. 0	7601			7/13/19	NEW BU	ROH, PA.	1724	0	0.000
Completed by	Title				Signature			Date		
J.Maiorano	Est	imato	or		1/10	anarón		6/2:	7/1	9
ASR-41	* Do =	of use this				1 - Aires				0.00

State of New Jersey-

Check No. 1776		NOTIF (P	State of New Jersey OTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)						5						
Date of Notification (1) 06/26/2019	П		Name o	of Building Neiman	Owner/	Operator	(2)				<del>-JU</del> l		1 -	2019	13
Agencies Notified Type Notification  X EPA Initial	5 (		Street /	Address						ASI			CON	TRO	L &
X DEP Amended Amendment		_		ate, Zip C Ridge, N		28			Latingen			e separations	1,,,,,		Сируні пітької
DOH Emergency (injustification)  Cancellation	including	,	Name o	of Contact Neiman					Tele	ephone	Nim	-br			
Name of Facility Where Abatement is Taking	Place (	3)	FAC	ILITY INF	ORMAT	ION	T	-6FW6-74							
House	i lace (	J)					-	of Facility (4	rice con						
Street Address								School (K-12 Subchapter 8 Other (i.e. pr	(Othe				dings.	home	es,
City (5) Glen Ridge							Squar	etc.) re Feet		Floors	3		Bldg. A	ige .	
County (6)			County	Code (7)	4		N/A	nt Use (Prior	N/A		olich	- 1	I/A		
Essex				USE ONLY	)		Hous	se		5	1011511	eu)			
Name of Monitoring Firm Hired by Building C N/A	wner (8	)	ASCI	M No.				tement Cont ement, Inc		(9)					
Street Address			-				Addres	s gren Aveni	ue	,					
City, State, Zip Code								p Code J 0712							
Project Manager for Monitoring Firm			Telepho	one No.		Teleph 973-3	one No			Licen:		i.			
	Schedul 07/11/		Completion Date (11)  Name of OSHA  D&S Abatel					IA Monitor							
Occupancy Status During Abatement (Check	Only O	ne)	Street Address												-
Facility Closed/Vacated During Entire Portion Abatement Performed Outside of Normal Other – Describe: Occupied	eriod of all Facility	Abatem Hours	rs City, State, Zip Code												
Scope of Work (Check All That Apply)						Totov	va, N	J 07512	237010-						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	APPROXIMATE .	Renova Demoliti				×	Min Glo	Containmer i-Enclosure vebag Proce i-Exempted	dure					9	
		Location												ment	
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility  (13)	Use Ma	ed Solel intenar todial S (12)	ly by nce/		tos Cont thermal surfac	scription aining M systems cing, VAT niscelland	aterial insulat F, or		(Sp	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
0	No	N/A											te	· CD	
Garage Laundry Room	X				Insulat				) LF		X				
Lauridry Room		Х			Pipe	nsulat	ion		10	) LF		X		_	_
															_
Name of Registered Waste Hauler		0.000	JDEP W	150535	Cubic		Т	Name of Re	egister	ed Lan	ndfill	ė.			-
Atlantic Carting  City, State			Hauler ID No. of Waste TBD					Grand Ce	entral						
Wayne, NJ		Disposal Date City, State TBD Pen Argyl, PA													
Completed by Oliver Hegedis	t Manager Signature Date 06/26/20				019										

	-
Print	Form

O		Ú	NOTIF	SICATIO	tate of Ne	w derse	ABATE	WENT	4	-		and the second				
Check No.	d 12:12	PU			1)_[[	0			W	E						
Date of Notification (1) 06/26/2019	1-123	10		Name of Mike I	of Building Dezic	Owner/0	Operator	(2)		1		1200	24			
1	ype Notification	()		Street A	Address							JU		1	2019	
X EPA X DEP X DOL	Initial Amended				ate, Zip Co						100	mercial comm	en e	Neckenský zac	t-more product	
	Amendment Emergency (		_		, NJ 088	863		5.11.750		Index-tonic appear	-	L	ICEN	COM	TROI	L &:
DOH DCA	justification) Cancellation			Mike I	of Contact Dezic					Tel	ephone	Nun	nber		ome apop	TOTAL PROPERTY.
Name of Facility Where Aba	atement is Taking	g Place (	(3)	FAC	ILITY INF	ORMAT	ION	Type	of Facility (	1)						
House		g , ,ass (							School (K-1	2)						
Street Address								×	Subchapter Other (i.e. p etc.)	8 (Oth private 8	& comm	nercia	al build			es,
City (5) Fords								Squa N/A	are Feet	# of N/A	f Floors A			lldg. A	\ge	
County (6) Woodbridge					Code (7) USE ONLY	)		Curre	ent Use (Pri	or if bei	ng dem	nolish	ed)			
Name of Monitoring Firm His	red by Building (	Owner (8	)	ASC	M No.				atement Cor tement, In		(9)					
Street Address							Street 11 R		ss gren Aver	nue						
City, State, Zip Code							City, S	state, Z	Zip Code							
Project Manager for Monitor	ing Firm		T	Telepho	ne No.		Teleph	none N	lo.		Licens		).			
Start Date (10)		Schedul	ed Cor	npletion	Date (11)		973-3 Name		HA Monitor		0131	7				
07/08/2019 Occupancy Status During Al	natoment (Cheel	07/09/							ement, In	C.						
Facility Closed/Vacated	During Entire P	eriod of	Abaten	nent			Street 11 R		<sub>ss</sub> gren Aver	nue						
Abatement Performed Other – Describe: Occ	Outside of Norm	al Facilit	y Hours	5		_			ip Code IJ 07512							
Scope of Work (Check All Th	nat Apply)							m								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit			Full Containment with Negative Pressure  Mini-Enclosure  Glovebag Procedure										
		Is	Locat	ion			<u> </u>	1 110	n-Exempted	(°) and	I NON-F	riabi			e ement	
Location of Asbestos-Containing Ma	terial (ACM)	Use	Normal ed Sole	ly ly by	Ashasi		scription		L/ACM)					Ту	pe	
TO BE ABATE In Facility (13)		0.000	todial ( 12)	372 T. 173 St				insula T, or		(S	mount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
		N/A									al		ate	ē		
Basement			Х			Pipe Insulation 10 LF					Х					
										-						
Name of Registered Waste F Atlantic Carting	lauler		H	JDEP W auler ID		of Was			Name of F			dfill				
City, State Wayne, NJ		_	20	5085		TBD Dispos TBD	al Date	,	City, State	1						-
Completed by		Title		nager			ignaturé	1/1	Pen Arg	yı, PA		Date	9			_
Oliver Hegedis	-	1	06/26/2019													

Chear No. 2142		NOTIF	HCAFION	tate of Ne N OF ASE to NJAC	BESTOS	ABATE	MENT 0)		FE	G I		V		
Date of Notification (1) 06/26/2019 WV-1236	9			of Building rd Cuilh		Operator	(2)			JUL	1	2019		벵
Agencies Notified Type Notification			Street A	Address				100	100	SBESTO	is co	NTRO	)L &	
X EPA Initial Amended Amendment	#			ate, Zip C wood, N		40			A	LIC	ENSA	VG	ndunis de me	and the same
Emergency justification)  DCA  Cancellation	(including		Name o	of Contact rd Cuilh		+0			Tel	ephone N	Numbe			
Name of Facility Where Abatement is Takin	a Place (	3)	FACI	ILITY INF	ORMAT	ION	T (5		1					
House	y riace (	3)					Type of Fa	ol (K-12)						
Street Address							Subci	hapter 8	(Oth	er than K & comme		ıildings	s, hom	nes,
City (5) Maplewood							Square Fe N/A	et	# of N/A	Floors		Bldg. N/A	Age	
County (6) Essex				Code (7) USE ONLY	)		Current Us House	e (Prior	if bei	ng demol	ished)			
Name of Monitoring Firm Hired by Building N/A	Owner (8)	)	ASCN	ЛNo.			of Abateme			(9)				
Street Address		1				Street	Address osengren							
City, State, Zip Code						City, S	tate, Zip Coo wa, NJ 07	de				3772		
Project Manager for Monitoring Firm			Telephor	ne No.		Teleph	ione No. 345-8685	12		License 01311	No.			
Start Date (10) 07/09/2019	Schedul		mpletion [	Date (11)		Name	of OSHA Mo			01311				
Occupancy Status During Abatement (Chec							Abatemer Address	it, inc.						
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm	eriod of a	Abaten / Hours	nent				osengren tate, Zip Coo		е		-			
Other – Describe: Occupied		*			_		wa, NJ 07							
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf	X F						1							
≥160 sf or ≥260 lf		Renova Demolit				×		losure Proced	dure	-			227	
	Is	Locati	ion				1 NON-Exe	mpted (	) and	I NOH-FIR	able Pr	Abat	emen	t
Location of Asbestos-Containing Material (ACM)		Normal d Sole		Ashaa		scription	of aterial (ACN					T	уре Т	
TO BE ABATED In Facility (13)	TO BE ABATED In Facility  Main Custo							")	(S	nount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes										1 22		ate	Ге
Crawl Space		X			Pipe	tion		25	5 LF	Х				
											-			
N 69														
Name of Registered Waste Hauler Atlantic Carting		Н	NJDEP Waste Hauler ID No. 26085  Cubic Yards of Waste TBD					ne of Re and Ce	200000000	ed Landf	ill			
City, State Wayne, NJ			Disposal Date					State	г.	0				
Completed by	Title		TBD Signature					n Argyl	, PA		ate			
Oliver Hegedis	t Manager				//				)6/26/	2019				

Print Form

Charle No Mas	1/2	N	OTIFI (Pi	CATION	te of New OF ASBE o NJAC 8	STOS	ABATEI	MENT	)			E (	p [		V	E
CAUCA NO. 14	T		- 100 			di dan							-			
Date of Notification (1) 06/27/2019	BOK				Building C		100		ols	į		Jl	IL	1	201	9
Agencies Notified Type Notifica	tion			Street Ac						1.						
X EPA X Initial				and the contract of the	rinceton	Mar Independ				-	A	SBES				OL 8
EPA Initial Amende DOL Amende					te, Zip Coo nceville,		648			1			LiGi	INSI	NG	-
Emerge	ncy (inc	luding	- F	Name of		145 00				Tele	ephone I	Numbe	or .	-		
DOH justificat					s Eldrid	ge					9-671-					
				FACIL	ITY INFO	RMAT	ON									
Name of Facility Where Abatement is T Lawrence Middle School	aking P	lace (3	)					_	of Facility (4)							
Street Address									School (K-12 Subchapter 8		er than k	K-12)				
2455 Princeton Pike									Other (i.e. pri etc.)	vate 8	comme	ercial l	ouildi	ngs,	home	s,
City (5) Lawrenceville								Squa 104,	re Feet 000	# of	Floors		BI6	dg. A	ge	
County (6)				County C					ent Use (Prior		ng demo	olished	1)			
Mercer				(STATE U	ISE ONLY)	-	_	Mid	dle School						-3-27	
Name of Monitoring Firm Hired by Build TTI Environmental, Inc	ding Ow	ner (8)		ASCM 0000			14 1404 32		tement Cont fety LLC	ractor	(9)					
Street Address 1253 North Church St								Addres				,	227.5			
City, State, Zip Code							City, S	State, Z	ip Code							
Moorestown, NJ 08057									ark, NJ 070	)35				.,		
Project Manager for Monitoring Firm Michael R. Keehn				Telephor 856-84	ne No. 10-8800		D. S. S. S. S. S.	hone N -276-0			Licens 0131					
Start Date (10) 07/11/2019	1 0 0	chedule 8/02/2		mpletion [	Date (11)				HA Monitor fety LLC							
Occupancy Status During Abatement (	Check (	Only On	e)	Street Address												
Facility Closed/Vacated During Er								roy L							S-000-11	
Abatement Performed Outside of Other – Describe:	Normai	racility	Hours						2 <b>5</b> 10	035						
Scope of Work (Check All That Apply)																
≥3 sf or ≥3 lf     ≥160 sf or ≥260 lf			enova emoli				2	Fu Mir	Il Containme ni-Enclosure ovebag Proce		Negati	ve Pre	ssur	е		
		-						No	n-Exempted	(*) an	d Non-F	riable				
1			Locat Vorma	1000 C										Ту	ment pe	
Location of Asbestos-Containing Material (ACM	(N)	Use	d Sole	ely by	Asbest		scription taining N		I (ACM)	А	mount				П	
TO BE ABATED	.,	10173165	intena todial	ince/ Staff?		therma	l system	s insul		(8	specify or LF)		Rer	Re	nca	Encl
In Facility (13)			(12)				icing, VA miscella		120	31	OI LI)		Remova	Repair	Encapsulate	Enclosure
÷	No	N/A		* #							-		ate	æ		
Work #1A Corridor Rms 108-	Χ		Tra	ansite	Ceilin	g Pan	els	2,8	15 SF		Х					
Work #1A Corridor Rms 108-	115		Χ			Pipe	Insula	ation		5	0 LF		Х			
Work #1B Corridor Rms 301-	305		Χ		Tra	ansite	Ceilin	g Pan	els	3,8	350 SF		Χ			
Work #2A Corridor Rms 200-	212		Х		Tra	ansite	Ceilin	g Pan	els	3,9	15 SF		Χ			
Name of Registered Waste Hauler	1	NJDEP W			: Yards		Name of F	65		ndfill						
Service Transport Group/United	d Safe	ty LLC		SW2117/00368 TBD Fairle				Fairless		dfill		7				
City, State Yardley, PA/Lincoln Park, NJ						Dispo TBD	sal Date	9	City, State Morrisvi		Α					
Completed by	let and described		9	Signatur	е		_		Date							
Vanco Petkov											7-1	06/2	27/2	019		

. ..... . ....

			I	$\lambda$	1	110	1	-(n	20	<u></u>	-	-9
1NV-19369		NOTIF	ICATIO	Tate of N N OF ASI to NJAC	BESTOS	ABATEME 12:120)	NT	DE	#		0	
Date of Notification (1) 6 - 28	-19		Name o	of Building	-	Operator (2)	Fin	K JI	JL	1 2	2019	- 1
Agencies Notified Type Notification			Street A	Address	100	11 113	(11)	24 1000	0	1	-	, he
☐ EPA Initial ☐ Amended Amendmen		-37	City, Sta	ate, Zip C	1	. '11	λi	TAO	370) 1013	to	iroi 3	18
DOH Emergency justification	(including	7	3	of Contact		ERVIL	1 N		00	1		F.
□ DCA □ Cancellation	n			enn ILITY INF		W (/) [	<u>,                                     </u>	<u></u> j				
Name of Facility Where Abatement is Takin	ng Place (				Oraniza		pe of Facility	(4)				
Street Address.) le tanil	4	DW	ellin	5	82		School (K- Subchapte Other (i.e.	12) er & (Other than K private & comme	-12) rcial bu	ildinas	. hom	es.
City (5)	72-71						etc.)	# of Floors		Bldg.		
Domerville	N	T	09	80-	7		, auto i cor	2		biog.	1 + ·	_
County (6) Somerse +				Code (7) USE ONLY	n	Ci	rrent Use (Pr	ior if being demol	ished)	<b>(6)</b>	21	
Name of Monitoring Firm Hired by Building	Owner (8	_	ASCN	No.		Name of A	batement Co	A	200	e	7	
Street Address	37	•		4-14-		Street Add	ATTION .	<u>chnole</u> .332	310	9	In	16
City, State, Zip Code	N.	7	08	5.3	3	City, State	, Zip Code	1 30	7/	0	<b>2</b>	2
Project Manager for Monit ri g Firm	^		Telepho		222 00	Telephone	No.	License	No.	20	L	3
Start Date (10)	Schedul			758- Date (11)			8-330 SHA Monitor	The same of the sa	Q,	בכ	1	
7-12-19	7	- /	19 -	19				hnologie	< I	200		
Occupancy Status During Abatement (Cher						Street Add	ress	7				
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor. Other – Describe:	Period of nal Facility	Abaten y Hours	nent S			City, State	, Zip Code	337			-	10. 10.
Scope of Work (Check All That Apply)						Ivew	Egypt	NJ	08	53	3	
≥3 sf or ≥3 lf	XET I	Renova	ition				-ull Containm	ent with Negative	Procei	ıra		
△ ≥160 sf or ≥260 lf		Demolit					Mini-Enclosur Glovebag Pro	e cedure				
	le	Locati	ion				voii-Exemple	d (*) and Non-Fria	able Pro		e ement	t
Location of		Normal	ly		De	scription of				Т	/pe	
Asbestos-Containing Material (ACM)  TO BE ABATED	Ma	ed Sole aintena	nce/			taining Mater systems ins		Amount (Specify	l a		En.	E
In Facility	Cus	todial 8 (12)	Staff?	(	surfa	cing, VAT, o	r	SF or LF)	Remova	Repair	Encapsulate	Enclosure
(13)	Yes	No	,N/A		outern	niscellaneou	5)		val	l ir	ulate	ure
Basement	X							120 LF		$\top$		
Besement Lending	X							50 SF				
Name of Registered Waste Hauler			JDEP Wauler ID		Cubic of Was			Registered Landf				
EPC Technologie	S			00		4	Wast	te Manage	men	t 0	e P	A
City, State  New Equat	NJ	` ` `			Dispos	sal Date	City, Stat	te	PA	+11		
Completed by Schen Kee		ent		S	ignature	35.0		lata	71	3-10	a	
viewe scrientified	TIKE	Sid	enl		6	Merci	1 Del Che	on	0	C	ا د	7

Ch 24141		поп	FICATIO	Hate of N N OF ASI to N AC	BESTOS	ABATE	MENT 0)		DE	C								
Date of Notification (1) 6/25/2019 NV - 123	2019 MV-12566						Name of Building Owner/Operator (2) LONG BRANCH BOARD OF EDUCATION											
Agencies Notified Type Notificati	540 E	Address BROAD\		ASBESTOS CONTROL &														
DEP X Amended Amendm			City, State, Zip Code LONG BRANCH, NJ 07740															
DOH justification	January 1						Name of Contact ANN DEGNAN						Telephone Number 732-571-2868					
Name of Facility Where Abatement is Ta	FAC	ILITY INF	(4)															
MORRIS AVENUE ELEMENTAL Street Address 318 MORRIS AVENUE	RYSCHO	OCL					Type of Facility  School (K- Subchapte Other (i.e. etc.)	12) er 8 (Ot			ilding	s, hom	nes,					
City (5) LONG BRANCH				Square Feet						loors Blo			Bldg. Age					
County (6) MONMOUTH			County (STATE	Code (7) USE ONL	n		Current Use (Pr	ior if be	if being demolished)									
Name of Monitoring Firm Hired by Buildir ENVIRONMENTAL CONNECTION		)	ASCI 0003	M No. 30			of Abatement Co		ractor (9)									
Street Address 120 NORTH WARREN STREET				Street	Address REELAND AV		107											
City, State, Zip Code TRENTON, NJ 08608		City, State, Zip Code TOTOWA, NJ 07512																
Project Manager for Monitoring Firm JORDAN REED	Telepho	one No. 92-4200	)	Teleph	phone No. License No. 3-956-8700 00494													
Start Date (10) 7/8/2019							npletion Date (11) Name of OSHA Monitor SAME AS (9) ABOV					E						
Occupancy Status During Abatement (Ch					Address													
Facility Closed/Vacated During Entir Abatement Performed Outside of No Other – Describe: OCCUPIED	ment s	City, State, Zip Code																
Scope of Work (Check All That Apply)																		
≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	ation  **  Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								re									
20	Locat Norma					•				Abatement Type								
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	ely by ence/ Staff?	Description Asbestos Containing N (i.e. thermal system surfacing, VA other miscellar			laterial (ACM) s insulation, T, or	(	Amount (Specify SF or LF)		Repair	Encapsulate	Enclosure							
1	N/A								ate	ci l								
BOILER ROOM		Х					ULATION		00 SF	Х								
				2000			SULATION		6 SF	X								
			BOILER BREECHING FLANGE GASKET						6 SF	X			$\vdash$					
Name of Registered Waste Hauler		1	JDEP W	/aste	Cubic			Registe	ered Landf	ill	_							
TWO BROTHERS CONTRACTIN	IG	10.00	lauler ID 8743	No.	of Was		WAST	E MAI	MANAGEMENT G.R.O.W.S.									
City, State TOTOWA, NJ		Disposal Date City, State 7/12/2019 MORRISVILLE, PA																
Completed by VIVECA RAMOS	COOF	RDINAT		gnature	F /	- 21		ate 5/25/20	019									

Print Form

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

Date of Notification (1) 6/12/2019					Name of Building Owner/Operator (2) LONG BRANCH BOARD OF EDUCATION							JUL	-	1 ;	2019				
Agencies Notified Type Notification					Street Address														
X EPA	× Initial			540 BROADWAY						- APPENDEN	ASP	ESTO	120	CON	ITRO	11 &			
DEP	Amended		City, State, Zip Code								ASBESTOS CONTROL & LICENSING								
X DOL	Amendment Emergency												MICH ALES	Unicase	PHILIP COLUMN				
DOH DCA	justification)		Name of Contact								Telephone Number								
X DCA	Cancellation	1	ANN DEGNAN									732-571-2868							
Name of Facility Where /	FACILITY INFORMATION  Type of Facility (4)																		
Name of Facility Where Abatement is Taking Place (3) MORRIS AVENUE ELEMENTARY SCHOOL																			
Street Address							School (K-12) Subchapter 8 (Other than K-12)												
318 MORRIS AVENUE							Other (i.e. private & commercial buildings, homes,									es,			
City (5)							etc.) Square Feet # of Floors Bldg. Age												
LONG BRANCH								Oque	e Feet # 01 Floors   Bidg. Ag					ige					
County (6)				County Code (7)					Current Use (Prior if being demolished)					-					
MONMOUTH					USE ONLY	J. 1. 000 (1. 1.10)		ing dom	01101100	.,			1						
Name of Monitoring Firm	Hired by Building	Owner (8	)	ASCI	M No.		Name	of Aba	atement Cont	ractor	(9)					-			
ENVIRONMENTAL	CONNECTION	N, INC.								RS CONTRACTING, INC.									
Street Address							Street	Addre	SS										
120 NORTH WARR	EN STREET						11 VREELAND AVENUE												
City, State, Zip Code									ip Code	14					11				
TRENTON, NJ 0860			TOTOWA, NJ 07512																
Project Manager for Moni					hone No. License No.														
JORDAN REED						956-8700 00494													
Start Date (10) 6/26/2019	mpletion	tion Date (11) Name of OSHA Monitor						/E											
6/26/2019 7/3/2019 Occupancy Status During Abatement (Check Only One)							SAME AS (9) ABOVE												
Occupancy Status During				Street Address															
Facility Closed/Vacated During Entire Period of Abatem Abatement Performed Outside of Normal Facility Hours Other – Describe: OCCUPIED					nent City, State, Zip Code														
							City, S	tate, ∠	ip Code										
Scope of Work (Check All	That Apply)												_			$\dashv$			
≥3 sf or ≥3 lf		ation X Full Containm						ent with Negative Pressure											
× ≥160 sf or ≥260 if	ation ition			i Containmer ni-Enclosure	nt with	Negati	ve Pres	ssure	3										
						Glo		E4-11- D											
						I No	n-Exempted	(*) and Non-Friable Proce				of standard	(standard standard st						
Location of Asbestos-Containing Material (ACM) TO BE ABATED  Is Loca Norma Used Sola Maintena											Abatement Type								
					Ashasi	Description of bestos Containing Material (ACM) i.e. thermal systems insulation,			(ACM)	Amount		-							
									Amount (Specify			D	77	Enc	四				
In Facility Custodial (13)							surfacing, VAT, or other miscellaneous)			SF	or LF)		Remova	Repair	aps	Enclosure			
(13)			90.0	T	other in	niscellaneous)						₹	Encapsulate	ure					
		Yes	No	N/A											(D				
BOILER RO	MOO		X		BOIL	BOILER RIB INSULATION				30	00 SF	2	2						
			BOILE	ER DO	OR INSULATION		6	SF	>										
					CHING FLANGE		6	SF	,	,									
	-											-							
Name of Registered West	JDEP W	/osto	GASKET																
Hau					No. of Waste			Name of Registered Landfill											
TWO BROTHERS CONTRACTING 18					20 WASTE					MANAGEMENT G.R.O.W.S.									
City, State						Dispos			City, State		And Inserv								
TOTOWA, NJ						7/3/20	019	MORRISVILLE, PA											
Completed by	- 000	DIN 14 T	Signature Date																
VIVECA RAMOS		PRO.	JECT	COOF	RDINATO	JK /	120	YE	a Ma	17	7	6/12/	201	19					

	5	State of N	ew Je	rsey - Notifi	cation of	Asbestos Aba	temer	P) [	G		W/	EF				
JH31254			(Purs	uan BJ.A.	8:60-7 and	20-7)				***************************************	**************************************					
Date of Notification (1) June 21, 2019	Name of Building Owner/Operator (2) UL - 1 2019															
Agencies Notified							Michaels Corp Street Address									
XEPA		Initial	Notific		PO Box 128, 817 Main Street ASBESTOS CONTROL &											
DCA				-June 21, 2019	City, State, Zip Code  Brownsville, Wisconsin 53006											
xDOL Emergency (				including	Name of Co											
X DEP x DOH ☐ Cance					Name of ContactTelephone NumberJake Wetsch920.924.4300											
				FACILITY IN	NFORMATION											
Name of Facility Where Abatement is Taking Place (3)  Exterior						Type of Facility (4) ☐ School (K-12)										
Street Address						er 8 (other than K-1	2)									
200 Outwater Lane					Other	(i.e. private & comr	mercial bu	uildings	, homes,	etc.)						
City (5)	County (6	3)	Count	v Code (7)	Sq. Feet:	Unknown #	of Floor	<u>s:</u> <u>B</u>	ldg. Age	<u>e:</u> NA	year	s				
Carldstadt	Berger			Use Only)	Current Use	(prior if being den	nolished)	:								
				0.000	VIADOUR SEED ON THE DESIGNATION											
Name of Monitoring Firm Hired	d by Blda.	Owner (8)	ASCM	No.	Name of Con	tractor (9)	78.50									
					GREENW	OOD ABATEM	ENT C	ONSU	LTAN	S, INC	Э.					
Street Address					Street Addre	ss										
					511 MAIN STREET											
City, State, Zip Code						City State, ZipCode Rutlor, N. I. 07405										
Project Manager for Monitoring Firm Telephone Number					Butler, NJ 07405  Telephone Number											
Scheduled Start Date (10) Scheduled Com				on Date (11)	973-492-0477   00840 Name of OSHA Monitor											
June 21, 2019		July 31, 2														
Occupancy Status During Ab	atement (	Check only or	ne)		Street Addres											
Facility Closed/Vacate	d During I	Entire Period o	f Abate	ment	22222											
Abatement Performed Describe	Outside o	of Normal Faci	lity Hour	'S -	1056 Stelton Road <u>City, State, Zip Code</u>											
Other - Describe: Exterior Pipe Trench					Participate and the second											
						ay, NJ 08854										
Source of Work (Check all that	apply)															
	Full Containment with Negative Pressure															
$\geq$ 3 sf or $\geq$ 3 lf $\square$ $\geq$ 160 sf or $\geq$ 26	Mini-Enclosure Glovebag Procedure															
	x Non-Exempted (*) and Non-Friable Procedur															
Location of Asbestos-Containir Material (ACM) in Facility (13)		cation Normall by by Maint./Cu		Description of Ast (ACM) (i.e. therm		ng Material	Amount (Specifi		Abatement Type							
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	f? (12)		VAT, or other mis		nation, surfacing.	of LF]										
Exterior	YES	S NO	NA X	Asbestos no	n-friable n	ine coating	100 s	-	X	_	Т					
				ASSESTED NO	ii-iiiabie p	ipe coating	100 5	'	ĽΔI							
Name of Reg. Waste Hauler See Hauler Below # 1 & 2	,	NJDEP Wast See Below		· ID #	Cubic Yards				of Regist		ndfill					
See Delow						40 Fairless Landfill Grand Central Land										
Hauler #1) Greenwood Abatement Consultants, Inc Butler						er, NJ <u>Disposal Date</u> <u>City. State</u>										
07405-NJ DEP # 12561						July 31, 201	9		ville, PA							
Hauler #2) Newark Carting, Inc. – Newark, NJ 04509, NJ DEP # 1						# 19551 Permit No.18072 GCL-1963 Pen Argyle										
						Pen Argyle,PA 18072										
Completed to /D	Permit No. 100265															
Completed by (Print or Type) Marin Graure	Signature Marin G	'ma u ua		Date	21, 20	110										
Marin Graure SENIOR PROJECT MANAGER				Marin 4	ruure		June	21, 20	113							

GAC # 2019-679. Please Note: Amendment # 1 includes a new completion date of July 31, 2019 & 80 additional sf of pipe flashing/ coating.

	1	State of N	ew Je	rsey - Notifi	cation of A	Asbestos Abatei	nent	ECEIVER
~								
V 11			(Purs	suant to N.J.A.C	. 8:60-7 and	1 12:120-7)	lin	
Date of Notification (1)					Name of Bu	ilding Owner/Operator	-(2)	JUL - 1 2019 11 J
June 19, 2019					Michaels		1	The state of the s
Agencies Notified	5.*	Notification		# 12.	Street Addr		-	ACRECTOCOCONTENDO
XEPA				fication		128, 817 Main Str	eet	ASBESTOS CONTROL & LICENSING
DCA		Amend			City, State,	Control of the Contro	5200	The second secon
xDOL			cation)	including	Name of Co	ville, Wisconsin		
X DEP x DOH		☐ Cance			Jake Wetsc		- 1	Telephone Number 920.924.4300
				FACILITY IN	FORMATION			020.021.1000
Name of Facility Where Abate	ment is Ta	aking Place (3)			Type of Faci			
Exterior					School (K			
Street Address						er 8 (other than K-12)		
200 Outwater Lane					Other	(i.e. private & commerc	ial build	dings, homes, etc.)
City (5)	County (	6)	Count	y Code (7)	Sq. Feet.	UIKIIOWII # 01 F	10015.	Bldg. Age: NA years
Carldstadt	Berge	n		Use Only)	Current Use	(prior if being demolis	shed):	
N								
Name of Monitoring Firm Hired	d by Bldg.	Owner (8)	ASCM	No.	Name of Con	tractor (9)		
7							T CO	NSULTANTS, INC.
Street Address					Street Addre	SS		
					511 MAIN	STREET		
City, State, Zip Code					City State, Zi	pCode		
Droingt Manager for Maritaria	F:	TTILLE			Butler, N.			
Project Manager for Monitoring	<u>a Firm</u>	Telephone N	lumber	/	Telephone N	umber	<u> 1</u>	icense Number
					973-492-0			00840
Scheduled Start Date (10) June 21, 2019	/	Scheduled C		on Date (11)	Name of OSI	HA Monitor		
Julie 21, 2019	1	June 24,	2019		EMSL inc			
Occupancy Status During Ab				/	Street Addres			
Facility Closed/Vacate					1056 9401	ton Road		
Abatement Performed Describe	Outside (	of Normal Faci	lity Hou	rs -	City, State, Z			
Other - Describe: Ex	terior F	Pipe Trencl	า					
		5 to \$1500   2000 to 1200 to 1			Piscataw	ay, NJ 08854		
Source of Work (Check all that	annly)							
and the state of t	. срріуј					Full Co	ntainm	ent with Negative Pressure
$\geq$ 3 sf or $\geq$ 3 If				Renovation		Mini-Er		
$\square \ge 160 \text{ sf or } \ge 20$	60			Demolition		Gloveb	ag Pro	cedure
Location of Asbestos-Containir	ag le L	ocation Normal	u Hood	Description of Ast		x Non-E		ed (*) and Non-Friable Procedure
Material (ACM) in Facility (13)		ely by Maint./Cu		(ACM) (i.e. therm			nount pecify S	Abatement Type
	Staf YES	f? (12) S NO	NIA	VAT, or other mise			EE)	Remove Repair Encap Enclose
Exterior	16,	3 110	NA X	Asbestos no	n friable n	ing ageting / 20	) sf	X
			L.L.	Aspestos IIO	II-II lable p	the coating 20	151	
Name of Reg. Waste Hauler		NJDEP Was		ID#	Cubic Yards	of Waste:	I	lame of Registered Landfill
See Hauler Below # 1 & 2	2	See Below				40		airless Landfill
Hauler #1) Greenwood	Abato	ment Cons	ultant	s Inc. Butler	- N. I	Disposal Date		Grand Central Landfill  Gity, State
07405-NJ DEP # 1256		ment cons	untant	s, mc. – butlet	, 140	June 24, 2019		L-1000 New Ford Rd.
Hauler #2) Newark Car		c. – Newark.	NJ 04	509, NJ DEP#1	19551			forrisville, PA 19067 ermit No.18072
•	0/			,			G	CL-1963 Pen Argyle Rd
								en Argyle,PA 18072 ermit No. 100265
Complete II (D.)		Territa						O. 1111 140. 100200
Completed by (Print or Type) Marin Graure		<u>Title</u> SENIOR PF	אר ובי	`T	Signature	0.3 2		<u>late</u>
		MANAGER		'	Marin G	raure	٦	une 19, 2019

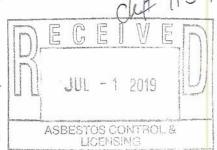
Ch 1157

## NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NAC 8 60 and 12 429)

	E	C		Print	drn	D
Ñ		JUL	- 1	2019	And the Constitution of th	

Date of Notification (1)	9		Name	of Building O	wnorlC	Inorator	r (2)			-l -l-l	`				110
6/21/2019 \\\\/-\\\)	04			wood Pro			1 (2)				a company	An iosumito	nondokiw	-	
Agencies Notified Type Notification	3		Street A		•				+		ASB			ONT	
☐ EPA ☒ Initial			1260	Stelton R	d				i dene	filderrasseyes	divisionintota	Lat V	Jim 195	A 6 1 TO THE A	
DEP Amended Amendment	ш			ate, Zip Cod											
Emergency		-		taway NJ	0885	4									
DOH justification) DCA Cancellation				Gautam					1179-58	ephon 32-98					
				ILITY INFO	RMATI	ON				2-30	J- 13				_
Name of Facility Where Abatement is Taking	g Place (3	3)					Туре с	f Facility (4	4)						
former Coka Cola Building								chool (K-1							
Street Address 704 Hwy 35								ubchapter ther (i.e. p					dinas	hom	es
City (5)							et et	c.)					27600	1	
Neptune		1	577	53			Square 1000		1 1	f Floor:	S		3ldg. <i>A</i> -50	Age	
County (6)		7	County	Code (7)			NEW STREET	t Use (Pric	or if be	ina den	nolish	- 3			
Monmouth County			(STATE	USE ONLY)											
Name of Monitoring Firm Hired by Building ( N/A	Owner (8)	)	ASCN	ЛNo.				ement Con			1 2 2				
Street Address			N/A					ons Serv	vices	LLC					
N/A							Address 51st S								-
City, State, Zip Code							State, Zip								
N/A	=;							en NJ 07	047						
Project Manager for Monitoring Firm			Telepho	ne No.			nane No.			Licen	se N	0.			
N/A						000000000	552-96			0138	34				
Start Date (10) 7/1/2019	Schedule 7/10/2		npletion	Date (11)				Monitor mental L	ohor	otorio	_				
Occupancy Status During Abatement (Check							Address		abor	atorie	S				
▼ Facility Closed/Vacated During Entire F		1,005	ont					22 Wes	t						
Abatement Performed Outside of Norm	al Facility	/ Hours	ient.		İ	City, S	tate, Zip	Code							
X Other – Describe: 7:00 AM to 4:00 PM					-	Unio	n NJ 0	7803							
Scope of Work (Check All That Apply)	-						77	***************************************							
≥3 sf or ≥3 if × ≥160 sf or ≥260 if	processor.	Renova Demolit	5 ( ) ( ) ( ) ( )			×	Full (	Containme Enclosure		Negat	ive P	ressu	re		
		Zerrione	1011			×	w	ebag Proce	edure						
	T	42 743				×	l Non-	Exempted	(*) an	d Non-l	Friabl	e Pro			
Location of		Locati Vormali			D								Ту	ement pe	
Asbestos-Containing Material (ACM)	Use	d Sole	ly by	Asbesto	s Conta		laterial (		Α	mount				т	
TO BE ABATED In Facility		todial S		(i.e. th		systems ing, VA	s insulati	on,		pecify or LF)		Ren	Re	nca	Encl
(13)		(12)		C		iscellan			O.	0, 1,		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A									-		ate	ej.
			х			350						х			
SEE ATTACHEMENT	20			SEI	E ATT	ACHE	EMENT						-		
					-					1 - 2 - 3					
										- 2					
Name of Registered Waste Hauler	1	0.0	JDEP W	707	Cubic Y	/ards		Name of R	egiste	red Lar	ndfill				
Newark Carting Inc		-72.57	auler ID	No.	of Wast	te		ISES Be	0.0 The 0.00			ndfil			
City, State		104	.003		Disposa	al Date		City, State,						-	
Po Box 5670						رمر رمر		2335 Ap		tter F	B	ethle	hem	PA	
Completed by	Title				Sig	gnature	Z	T	3		Dat				-
Galo Zumba	Principal						,	6/2	1/20	119					





#### Asbestos and Lead Abatement –Inspections Air sampling for Asbestos

acmsolutionsservicesllc@gmail.com Asbestos DOL # 01384

#### ASBESTOS ABATEMENT SCOPE OF WORK

Date: 7/1/2019

Job Location: 704 Route 35 Neptune NJ (Former Coke Cola)

Re: Asbestos Abatement @ Main floor

#### Scope of work.

Type of Asbestos	Location	Quantities
Floor tile and mastic	Main floor	1815 SF
Caulk and glazing	Main floor	25 Windows
Fire door	Exterior main floor	1 door
Terrazzo material	Main floor	27 SF
Pipe insulation	Main floor	100 LF
Fittings	Main Floor	15 LF
Carpet glue	Main Floor	234 SF

Galo Zumba

	Ei ra	t 1	23	70		0							rii	IIIL FUITI
PAID'	, ) \ ,		CATION	OF ASE	W Jersey BESTOS AB 8:60 and 1		100 mm - 100 mm	ICC N 778	0.	) <u>E</u>	G E		$\mathbb{V}$	
Date of Notification (1) 06-04-2019				77	Owner/Ope nship Sc		37.	rict		J	UL	1	2019	平
Agencies Notified Type Notification			Street A	ddress rk Ave						ASBE	STOS			L&
EPA  DEP  DOL  Amendment  Emergency (		_	Hamil	ate, Zip C ton NJ (	08690				- Instruction	Surprise Control of the Control of t		MSIN	<u>G</u>	INCOME DESCRIPTION
DOH justification) DCA Cancellation	•			f Contact ar Mitan					0.000	ephone No 3-771-8				
Name of Facility Where Abatement is Taking Hamilton High School West Street Address 2720 S Clinton Ave	g Place (3	)	FACI	LITY INF	ORMATION	N	Туре	School (K-12 Subchapter to Other (i.e. pr	2) 8 (Othe			dings	, home	es,
City (5) Trenton NJ 08610							Squa N/A	etc.) are Feet	# of	Floors	100	Bldg. A	Age	
County (6) Mercer				Code (7)	n		Curr	ent Use (Prio				W//\		
Name of Monitoring Firm Hired by Building (	Owner (8)		ASCN	No.	1			atement Cont intracting L		(9)				
Street Address						Street PO E		27.71 to 1						
City, State, Zip Code					- 1	5000		Zip Code d Park NJ (	0742	4				
Project Manager for Monitoring Firm			Telepho	ne No.		eleph 973-0		lo. 6298		License I	No.	-		
Start Date (10) 06-28-2019	Schedule		npletion	Date (11)	1 2000			HA Monitor ntracting L	LC					
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	Period of A	baten	nent		C		BOX tate, 2		0742	4				
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	United Street	enova emolit	T1 T 11			×	Fu Mi Gl	ull Containment ini-Enclosure ovebag Proce on-Exempted	nt with	Negative			e	
Location of	1000000	Locati			Dagge	intina	-6						ement /pe	
Asbestos-Containing Material (ACM)  TO BE ABATED  In Facility  (13)	Mai	d Sole ntenar odial S (12)	nce/		Descritos Contain thermal sy surfacing other mise	ing M stems g, VA	lateria insul T, or	ation,	(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
Exterior	Yes	No	N/A X		Windo	w Ca	ulk		48	00 LF	X		Ф	
Name of Registered Waste Hauler		14 7127	JDEP W		Cubic Ya			Name of R	egiste	red Landfi	II.			
Amax Cpntracting LLC		1 200	auler ID 036184		of Waste 35 CY			Fairless						
City, State Woodland ParkNJ 07424					Disposal 12-07-2			City, State Morrisvil						
Completed by	Title				Sign	ature	1	11	1	D	ate	-		

												L	rı	шкг			
PAIDIN	123	NOTII	FICATION	tate of New N OF ASB to NJAC	<b>ESTOS</b>	ABATE	MENT	7h.oc	Y 1	(0)	77	9	W				
Date of Notification (1) 06-04-2019				of Building					4	VO. 1	JIII	1	201	9			
Agencies Notified Type Notification	1		Street A	ton Tow	nsnip	School	Dist	rict			3,04						
X EPA X Initial				rk Ave									UTA(	DL 8.			
X DEP Amended		V		ate, Zip Co													
X DOL Amendmer Emergency	nt # (including	<u> </u>		ton NJ 0	8690												
DOH justification Cancellation	)	3		of Contact ar Mitano						lephone		r					
Caricellatio	n			ILITY INFO		ION			91	73-771-	8123						
Name of Facility Where Abatement is Taki	ng Place	(3)	IAO	ILLI HAT	JNIIIAI	ION	Туре	of Facility (	(4)								
Robinson Elementary School							×	School (K-1	12)								
Street Address 495 Gropp Ave							H	Subchapter Other (i.e. p etc.)	8 (Oth private	er than k & comme	<-12) ercial bu	uilding	s, hom	ies,			
City (5) Hamilton NJ 08610		**************************************						are Feet	# o	f Floors		Bldg.	Age	II			
County (6) Mercer				Code (7) USE ONLY)			Curre	ent Use (Pri	or if be	ing demo	olished)						
Name of Monitoring Firm Hired by Building	Owner (8	5)	ASCN	A No.				atement Cor		(9)							
Street Address	Amax Contracting Street Address									LLC							
City, State, Zip Code	PO BOX 734 City, State, Zip Co																
						Woo	dland	Park NJ	0742	4							
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 973-	one N 692-6			License 01266		1147/					
Start Date (10) 06-28-2019				Date (11)				HA Monitor					-				
Occupancy Status During Abatement (Che	11-20		1					ntracting I	LLC								
Facility Closed/Vacated During Entire Abatement Performed Outside of Non	Period of	Abater	ment				3OX	734					<del>leases, as</del>				
Other - Describe:	nai i aciii	y i loui	s 					tip Code d Park NJ	0742	Δ							
Scope of Work (Check All That Apply)						*****	diaric	21 611(140	0142								
≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	<b>Comments</b>	Renova Demoli				×	Mir Glo	Il Containme ni-Enclosure ovebag Proc n-Exempted	e edure				ıre				
Location of		s Locat Norma	0.000		-		,						temen ype	t			
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Ma	ed Sole aintena stodial : (12)	nce/ Staff?		os Cont thermal surfac	scription aining M systems sing, VA niscellan	laterial s insula T, or		(8	mount Specify or LF)	Remova	Repair	Encapsulate	Enclosure			
	Yes	No	N/A										ite	Ø			
Exterior			x		Wind	dow Ca	aulk		44	00 LF	х						
												-	-	-			
			-								+	+-	+				
Name of Registered Waste Hauler		I	JUDEP W	aste	Cubic	Yards		Name of F	Registe	red Land	Ifill						
Amax Contracting LLC		1	lauler ID 036184		of Was			Fairless	157.4								
City, State Woodland Park NJ 07424		nes Messi				al Date -2019		City, State Morrisvi		A							
Completed by Tome Maslarkov	Title Proje	ect Ma	anager		Si	gnature	1	C.	1	1	Date 06-04	-201	9				
							_		2-1					80 - 21 82			

FIIII FUITI

PAID

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

CK#2162

Date of Notification (1) 6/26/19  ANH Management  Agencies Notified  Type Notification  Street Address 958 Main St  DEP Amended Amendment #  Paterson N.I. 07503	TOO WILL BETTER THE PARTY	
Agencies Notified Type Notification Street Address  EPA Initial 958 Main St  DEP Amended City, State, Zip Code	1 1	7 E
DEP Amended City, State, Zip Code	U U	Lin
Amendment #	1 20	19
Amendment # Paterson, NJ 07503	,	
Emergency (including justification)  Name of Contact  Telephone Number		
DCA Cancellation ASBESTOS C	CONTR	30L 8
FACILITY INFORMATION LICEN	SIMG	
Name of Facility Where Abatement is Taking Place (3)  Type of Facility (4)		
Residential House School (K-12)		
Street Address  Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildin		
etc.)	ngs, non	nes,
	g. Age	
Paterson 67,503 2000 2 50	+	
County (6) County Code (7) Current Use (Prior if being demolished)		-
Passaic (STATE USE ONLY) Residential House		
Name of Monitoring Firm Hired by Building Owner (8)  ASCM No.  Name of Abatement Contractor (9)		
n/a n/a Harmony Contracting Inc		
Street Address Street Address		
n/a 360 Palisade Ave		
City, State, Zip Code City, State, Zip Code		
n/a Garfield, NJ 07026		
Project Manager for Monitoring Firm Telephone No. Telephone No. License No.		
1//2 9/3400,0020 01200		
6/5/19 6/25/19 Harmony Contracting Inc  Occupancy Status During Abatement (Check Only One) Street Address		-
Abatement Performed Outside of Normal Facility Hours		
Other - Describe: Scheduled for Demo Garfield, NJ 07026		
Scope of Work (Check All That Apply)		
Service States		
≥3 sf or ≥3 if Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 if Demolition Mini-Enclosure		
Glovebag Procedure	PROCESSION OF THE PROCESSION O	
Non-Exempted (*) and Non-Friable Proces	V	
Name	atemer Type	11
Location of Used Solely by Asbestos Containing Material (ACM) Amount		T
TO DE ADATED (Maintenance)	Enc	g
Custodial Staff? (i.e. thermal systems insulation, (Specify Rules) (13) (12) (12) (13) (14) (15) (15) (15) (15) (16) (17) (18) (18) (18) (18) (18) (18) (18) (18	capsul	Enclosure
4. TO SECURE 1 OF THE SECURE SECURITION SECURITICAL SECURITION SECURITION SECURITION SECURITION SECURITION SECURITICAL SECURITION SECURITION SECURITION SECURITION SECURITION SE	Encapsulate	Ballh
Yes No N/A	40	
Roof x Roofing Material 800 SF <		
Goodfoot V. State Living Afficial		
		<del> </del>
Goodfoot V. State Living Afficial		
Basement x Pipe Insulation 150 LF <		1
Basement X Pipe Insulation 150 LF (  Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste		<u> </u>
Basement x Pipe Insulation 150 LF <		
Basement X Pipe Insulation 150 LF <  Name of Registered Waste Hauler  Newark Carting  Name of Registered Landfill  Hauler ID No. Of Waste TBD  City, State  Disposal Date City, State		
Basement X Pipe Insulation 150 LF   Name of Registered Waste Hauler  Newark Carting  City, State  Newark, NJ  Name of Registered Landfill  Name of Registered Landfill  Od So9  TBD  Disposal Date TBD  TBD  TBD		
Basement X Pipe Insulation 150 LF   Name of Registered Waste Hauler  Newark Carting  Olivy, State  Name of Registered Landfill  Newark Carting  Name of Registered Landfill  Olivy State  Disposal Date  City, State		

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) 6/26 MS. PAULIN PALMA Type Notification Agency Notified Street Address 2 Initial D EPA City, State, Zip Code D DEP ☐ Amended SBESTOS CONTROL & 07631 Amendment# ENGLEWOOD NJ. 2 DOL LICENSING ☐ Emergency (including Telephone Number Name of Contact justification) ADOH E MS. PALMA ☐ Cancellation D DCA **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) PAULIN PALMA School (K-12) ☐ Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) # of Floors Bldg. Age Square Feet City (5) 1935 ENGUENOOD 2000 . Current Use (Prior if being demolished) County (6) County Code (7) (STATE USE ONLY RESIDEN LE BERGEN Name of Monitoring Firm Hired by Building Owner Name of Abatement Contractor (9) ASCM No. Best Removal Inc Street Address Street Address 450 South River St City, State, Zip Code City, State, Zip Code Hackensack, N.J. 07601 Telephone No. Project Manager for Monitoring Firm Telephone No. 201-329-7444 00388 Name of OSHA Monitor Start Date (10) Scheduled Completion Date (11) 9/19 Omega Environmental Street Address Occupancy Status During Abatement (Check only one) 280 Huyler St ☐ Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code ☐ Abatement Performed Outside of Normal Facility Hours D'Other - Describe: 8:00 pm TO 5:00 PM S. Hackensack , N.J. 07606 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure Renovation & Mini-Enclosure BE3sfor≥3lf D ≥ 160 sf or ≥ 260 lf □ Demolition & Glovebag Procedure ☐ Non-Exempted (\*) and Non-Friable Procedure Abatement Is Location Type Normally Description of Location of Used Solely by Asbestos Containing Material (ACM) Amount Containing Material (ACM) Encapsulate Maintenance/ Removal Repair TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial SF or LF) IN Facility surfacing, VAT, or Staff? other miscellaneous) (13)(12)No NA BASEMEUT THERMAL SYSTEM INSUMTION 120 LF

Name of Registered Landfill Name of Registered Waste Hauler NJDEP Waste Hauler Cubic Yards of ID No Best Removal Inc CUMBERLAND COUNTY LANDFICL 11/207 17109 Disposal Date City, State NEW BURGH, PA. Hackensack , N.J. 07601 Title Completed by J.Maiorano Estimator \* Do not use this form for asbestos licensure exempted activities.

ASB-41

No Chock.	ı		CATION	ate of Ne I OF ASB to NJAC	ESTOS	ABATE		Т	(D)	EC	E		E	
Date of Notification (1) 6/25/2019				f Building UNIVE		A Secretary of the second	r (2)			JUL	1	20	19	
Agencies Notified Type Notification			Street A	ddress MORRIS	S AVE	NUE			land lateral	Ration growns and				
EPA Initial DEP Amended Amendment #	1			ate, Zip Co N, NJ 07		ARE 11 11 11		III III III III III III III III III II	NORMAL TO THE OWNER OF THE OWNER	ASBEST	OS CO DENS	NTR NG	OL 8	
Emergency (in justification)  DCA  Emergency (in justification)  Cancellation	ncluding		Name o	f Contact E REMC						ephone Nu 8-737-5(				
Name of Facility Where Abatement is Taking	DI (2			LITY INFO		ION		, =						
WILLIS HALL	Place (3	)					П	oe of Facility  School (K-						
Street Address 1000 MORRIS AVENUE	ă						×	Subchapte Other (i.e. petc.)	8 (Oth			dings,	home	es,
City (5) UNION, NJ 07083							Squ	uare Feet	# 0	f Floors	E	lldg. A	ge	
County (6) UNION				Code (7) USE ONLY			Cur	rent Use (Pri	or if bei	ng demolis	hed)			
Name of Monitoring Firm Hired by Building O TTI ENVIRONMENTAL, INC.	wner (8)		ASCN	1 No.				patement Cor ROTHERS			IG. IN	IC.		
Street Address 1253 NORTH CHURCH STREET			J.			Street	Addı							
City, State, Zip Code MOORESTOWN, NJ 08057						110000000000000000000000000000000000000		Zip Code A, NJ 075	12					
Project Manager for Monitoring Firm JAMES GUILARDI		- 17	Telephoi	ne No. 10-8800		Teleph	none			License N	No.			
	Schedule 7/9/201		pletion I	Date (11)		Name	of O	SHA Monitor	VF					
Occupancy Status During Abatement (Check	Only On	e)				Street		-						
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Normal Other – Describe:	eriod of A I Facility	Abatem Hours	ent			City, S	state,	Zip Code						
Scope of Work (Check All That Apply)				3 - 3 - 10 1										
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	-	enoval emoliti				××××	N G	full Containm Mini-Enclosure Blovebag Pro- Ion-Exempte	e cedure				,	
		Location						ion Exempte	<u> </u>	3 14011 1 1101	10	Abate Ty	ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	lormall d Solel intenar odial S (12)	y by nce/		tos Cont thermal surfac		Materi s insu T, or	500X50X5010 #	(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A										te	
SEE ATTACHED														_
					2 0	*			-					-
Name of Registered Waste Hauler TWO BROTHERS CONTRACTING		Ha	JDEP W auler ID 8743		Cubic of Was 200 +	ste				red Landfil NAGEME		.R.O	.W.S	S.
City, State TOTOWA, NJ					125 13	sal Date		City, Stat		_E, PA				
Completed by VIVECA RAMOS	Title PRO	JECT	COOF	RDINATO		ignature	ve	7	in	D	ate 5/25/2	019		

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

				N OF ASBEST t to NJAC 8:6			In E	C		W	E
Date of Notification (1) 5/16/2019				of Building Ow		r (2)		UL	4	201	1
Agencies Notified Type No	tification			Address MORRIS A	VENUE			UL		201.	
DEP Am	ended endment#			ate, Zip Code N, NJ 0708	3		ASBE		S COI		)L &
DOH just	ergency (including ification) ncellation	1		of Contact 'E REMOTT	1		Telephone N 908-737-5				
Nome of Facility IAII			FAC	ILITY INFORM	MATION						
Name of Facility Where Abatemen WILLIS HALL Street Address	t is Taking Place (	3)				Type of Facility	12)	1500			
1000 MORRIS AVENUE							8 (Other than K- private & commer		ildings	, hom	es,
City (5) UNION, NJ 07083						Square Feet	# of Floors		Bldg.	Age	
County (6) UNION			County (STATE	Code (7) USE ONLY)		Current Use (Pri	or if being demoli	shed)			
Name of Monitoring Firm Hired by I TTI ENVIRONMENTAL, INC		)	ASC	M No.		of Abatement Cor BROTHERS		VG, II	NC.		
Street Address 1253 NORTH CHURCH ST	REET					Address REELAND AV	ENUE				
City, State, Zip Code MOORESTOWN, NJ 08057						State, Zip Code OWA, NJ 0751	2				
Project Manager for Monitoring Firm JAMES GUILARDI	n		Telepho 856-84	ne No. 40-8800		none No. -956-8700	License 00494	No.		37102 112	
Start Date (10) 5/28/2019	Schedul 6/25/2		mpletion	Date (11)		of OSHA Monitor IE AS (9) ABO	VE				
Occupancy Status During Abateme	nt (Check Only O	ne)				Address					
X Facility Closed/Vacated During Abatement Performed Outside Other – Describe:	Entire Period of of Normal Facility	Abaten / Hours	nent s		City, S	tate, Zip Code					
Scope of Work (Check All That App	ly) ,										
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	and the same of th	Renova Demolit			××××	Mini-Enclosure Glovebag Proc				'e	
Location of	- CONT.	Locati	27/2011		Description	of				ement /pe	
Asbestos-Containing Material (A <u>TO BE ABATED</u> In Facility (13)	Ma Ma	d Sole intena todial S (12)	nce/	(i.e. there	ontaining M	laterial (ACM) s insulation, T, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A							e	
SEE ATTACHED				2							
		7.									
Name of Registered Waste Hauler		1 1 2000	JDEP W		bic Yards	Name of F	Registered Landfil	1			$\neg$
TWO BROTHERS CONTRA	CTING	1000	auler ID 8743	200	Waste ) +/-	V-C1100 C (000 A 1 - 3-	MANAGEME	NT G	R.C	).W.S	<b>S.</b>
TOTOWA, NJ				1700000	posal Date 25/2019		SVILLE, PA				
Completed by VIVECA RAMOS	Title PRO	JECT	COOR	RDINATOR	Signature	reca Pa		ate 116/20	19		

### Tectonic '

# Table 5 - Asbestos Containing Materials Estimate Willis Hall, Kean University 1000 Morris Avenue, Union, NJ

Homogenous Area	U.O.M.	Basement	1st Floor	2nd Floor	3rd Floor	4th Floor	Penthouse
9" Tile (BEI-WHT) + Mastic	S.F.		1,500	1,500	1,390	1,400	
9" Tile (BLK) Mastic Only	S.F.					10	
9" Tile (BRN) + Mastic	S.F.		570				
9" Tile (CRM) + Mastic	S.F.			50			
9" Tile (CRM) + Mastic	S.F.		210				
9" Tile (CRM) + Mastic	S.F.					200	
9" Tile (GRN) + Mastic	S.F.				320		
9" Tile (GRY) + Mastic	S.F.		120	250	70	450	
9" Tile (GRY) + Mastic	S.F.				20		
9" Tile (OLV) + Mastic	S.F.		4,600	6,760	2,740	5,700	
9" Tile (OLV) + Mastic	S.F.			100			
9" Tile (TAN) + Mastic	S.F.		410	1,150	660	950	
9" Tile (TAN) + Mastic	S.F.		850	350	700	500	
9" Tile (TAN-BEI) + Mastic	S.F.		1,170	600	590	980	
12" Tile (BEI)	S.F.		480				
12" Tile (BEI)	S.F.		1,000	1,000	400	400	
12" Tile (BEI) Mastic Only	S.F.				40		
12" Tile (BLUE) Mastic Only	S.F.			1,050	1,760		
12" Tile (CRM) + Mastic	S.F.		170				
12" Tile (GRN) + Mastic	S.F.				40		
12" Tile (TAN) + Mastic	S.F.		1,000				
ACM Elbow Joints (-6")	EA		10				
ACM Fittings (-2")	L.F.	2	80	10		20*	
ACM Fittings (~24")	EA						2
ACM Fittings (-4")	EA		10			30*	5
ACM Pipe / Fitting Insulation	L.F.		20				
ACM Pipe / Fitting Insulation	L.F.	1	190				
Black Mastic	S.F.					1,400*	
Carpet Glue	S.F.					1,400*	
Duct Caulk (BLK)	S.F.			40		.,	
Hidden ACM Pipes in wall risers	L.F.		180	190	210	180	
Hidden ACM Pipes perimeter risers	L.F.		175	175	175	175	
aboratory Countertop	S.F.			30			
Off-WHT Spray-On (Ceiling) ***	S.F.		170				
Plaster Soffit ***	S.F.		1,800	2,450	2,970	2,780	
Plaster Soffit (BRN) ***	S.F.		400				
ile under 12" (BLUE)	S.F.			100			
ile under 12" (TAN) + Mastic	S.F.		800°				
"ile under 12" Tile (BRN) + Mastic	S.F.				620		
ile under Carpet + Mastic	S.F.				770		
ransite®	S.F.		1,210	1,210	1,210	1,210	
Ceiling Plaster (Under landing) ***	S.F.		180	360	360	.,	-
Vall Plaster (Stair backing) ***	S.F.		100	200	200		

#### Notes:

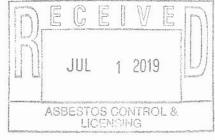
\*Double layer

\*Sub-Carpet

\*Some Fittings in Stairwells

S.F. (Square Feet) L.F. (Linear Feet) EA (Each)





AUUNA	08	LONOT	IFICATION	State of New ON OF ASBI nt to NJAC (	ESTOS	ABATE	MENT	١,					
Date of Notification (1)	00	W		of Building (			, (	LK.	#2	66	3		
6/26/19			ANH	H Manager	ment			11000	T) E	(C)	E		/ F
Agencies Notified Type Notification	n		Street	Address				- #	4		-	r T	( )
EPA Initial DEP Amended			958	Main St									
777			City, S	State, Zip Coo	de			-11		<del>JUL</del>	-1	-20	19-
DOL Amendme			Pate	erson, NJ (	07503			1					
DOH   justification	s) S (moraals	ıg	Name	of Contact				Te	Jenhona N	Umbo	go-1082.0-150		arrest description of
DCA Cancellation								1.	elephone N	2810	SCC	NTF	OL
Name of Facility Miles			FA	CILITY INFO	RMATI	ON				LIU	ENSI	NG	-
Name of Facility Where Abatement is Tak Residential House	ing Place	(3)				1	Type of Facility	(4)				~~~	
Street Address				And the last of th	STORES IN STREET		Subchapte	er 8 (Oti	er than K-	12)			
			$\bigcirc$	1502	)		Other (i.e.	private	& commer	clal bu	iliding	s, hor	nas,
City (5)		·					Square Feet	1 # 6	of Floors		Dida		
Paterson							2000	2	A FIGURE		Bldg. 50+	AGS	
County (6)	-	( <del>,,,,,,,,</del> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,	County	Code (7)			Current Use (Pr	4 750	ing domesti	= = = = 1	304		***********
Passaic			(STATE	USE ONLY			Residential	Harres	ing dameli	sned)	100		
Name of Monitoring Firm Hired by Building	Owner (8	3)	ASC	M No.	—	Nama	of Abatement Co						
n/a			n/a				nony Contrac						
Street Address	-						Address	ung m	U				
n/a							Palisade Ave						
City, State, Zip Code				-									
n/a							ate, Zip Code	_					
Project Manager for Monitoring Firm		1	Telepho	na No		Telepho	eld, NJ 07026	<u> </u>					
n/a			n/a	2016 140.	1		one No. 30.6026		License	No.			
Start Date (10)	Schedu	led Co	1222	Date (11)			f OSHA Monitor		01255		-		
6/5/19	8/25/1		nipiedon	Date (11)	-								
Occupancy Status During Abatement (Cher						Street A	ony Contract	ing inc	;				
							alisade Ave						
Apatement Performed Outside of Norr	nal Facilit	v Hour	nent S		F		te, Zip Code						
Other - Describe: Scheduled for Demo					_								
Scope of Work (Check All That Apply)						Gaine	old, NJ 07026	······	-				
33 of or >3 If	2 3					g	HERMANNE DE MO						
≥160 sf or ≥260 lf	PROSect	Remova Demoli				500	Full Containm Mini-Englosure	ent with	Negative I	Pressu	ire		
See that see the see that s	CARROL					press.	Glovebag Prod	oedure					
			e mac of marks and con-		United Special	図	Non-Exempted	d (*) and	Non-Frial	ole Pro	cedur	6	
		Locat										amen	
Location of		Normal ed Sole			Desc	ription o	ř				Ty	/pe	
Asbestos-Containing Material (ACM) TO BE ABATED		intens		Asbestos	Contell	ning Ma	terial (ACM)		riount			rn	
In Facility	Çus	todial 8	Staff?	មុរ.១. មេខ	ermei sy surfacin	/stems i ig. VAT,	nsulation,		pecify or LF)	Reg	R	Encapsulate	Enclosure
(13)		(12)				cellane		31	01 21-7	Remova	Repair	psu	iso;
	Yes	No	N/A							Ü	1	late	931
1st & 2nd Floors			1			. A.5 .				<del></del>	-		
the state of the s			X			Mate		4,00	00 SF	<			
Exterior		-	X	1	Windo	w Cau	lk	50	) LF	K			
	1												
Name of Registered Waste Hauler	L	1 61	JDEP W	·					***********				
Newark Carting		H	auler ID :	No. of	lubic Ya f Waste			Register	ed Landfill			- Marine Ja	
City, State		0.	4509		BD		TBD						
Newark, NJ					isposal	Date	City, State	:					
Completed by			name of the same	T	BD		TBD						
Stevan Lazarevich	Title					ature			Da	te		*******	
Truvelli Lazai GVIUII	Secre	etary			1	Anger San	Les cours	/	6/	26/19	7		i

			5		ΛП		7	Γ			Pı	rint Fo
Chocr#515424	49	NOTI	FICATIO	state of New . N OF ASBES t to NJAC 8.6	TOS ABATE	EMEN 20)	IJ					V E
Date of Notification (1) 04-23-2019 \\ \\ \\ \\ \\ \\ \\ \\ \ \ \\ \\ \\ \	78		Name o	of Building Ov 3	vner/Operato	r (2)			JU	L	1 21	)19
Agencies Notified  Type Notification  EPA  Initial  Amended	1		80 Pa	Address ark Plaza					SBEST	ne r		
DOL Amendmen			Newa	tate, Zip Code ark, NJ 071					- Control Special Control	oden constitution in the	SING	IOL &
DOH justification Cancellatio	)		555	of Contact ce James				Telephone 856-339		er	t)	
Name of Facility Where Abatement is Takin	ng Place (	(3)		ILITY INFOR	MATION	Tvo	e of Facility (4)		220			
Salem Unit 1 - 78' Elevation - Unit	Contair	nmen	t				School (K-12)	)				
Street Address End of Alloway Creek Neck Road				,		×	Subchapter 8 Other (i.e. pri etc.)	(Other than vate & comr	n K-12) mercial b	uilding	s, hom	es,
City (5) Hancocks Bridge			C	RD35		Squ 50	are Feet	# of Floors	S	Bldg.	Age	
County (6) Salerri			(STATÉ	Code (7) USE ONLY)			rent Use (Prior sulation	if being den	nolished)			
Name of Monitoring Firm Hired by Building Eagle Industrial Hygiene Associate		)	17.55	M No. - 01357			oatement Contr Zimmermar					
Street Address 359 Dresher Road					Street 1827		ress edom Road	, Suite 10	11			
City, State, Zip Code Horsham, PA 19044				3	57 1255		Zip Code er, PA 17601				WCX -	
Project Manager for Monitoring Firm Rich Mason			Telepho 215-6	one No. 51-4078	Telepi 856-		No. 2317	Licen 0135	ise No.			
Start Date (10) 04/23/2019	Schedu 04/23/		mpletion	Date (11)			SHA Monitor rellis, but wil	l be John	DiLuzi	0		
Occupancy Status During Abatement (Che	-				Street	-		. Na ala Da				
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe: Abatement controlle	mal Facility	y Hour	S	onment	City, S	State,	lloway Creel Zip Code s Bridge, NJ		oad			
Scope of Work (Check All That Apply)			V		11011	COCK	5 bridge, 140	00000				
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf or ≥260 lf</li><li>.</li></ul>		Renova Demoli			2	M G	ull Containmen lini-Enclosure llovebag Proced on-Exempted (	dure			uro.	
1	100	Locat Norma					OII Exempled (	) and North	Tiable F	Aba	temeni ype	
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Use Ma	ed Sole aintena todial (12)	ely by ince/	(i.e. the	Description Containing N ermal system surfacing, VA ther miscellar	Materia s insu T, or	lation,	Amount (Specify SF or LF)		Repair	Encapsulate	Enclosure
	Yes	No	N/A						<u>a</u>	-   -	late	ıre
78' Salem Unit Containment		X		As	sbestos Bl	anke	t	50 SF	Х			
Name of Registered Waste Hauler			JDEP W	vaste C	ubic Yards		Name of Re	nistered I a	ndfill			
C&H Disposal Service Inc		H	lauler ID 903	No. of	f Waste ulk		Salem Co	manual british		ent A	uthori	.y
City, State Elmer, NJ 08318					isposal Date /23/2019	1	City, State Alloway, I	NJ 08001				
Completed by Lou Nociti	Title DZ -	Site [	Director	r	Signature	A			Date 4/25/2	2019		

Unor#5	5834		NOT		ATIO	NOF AS	BESTOS ABAT AC 8:60 and 5:1		DEG	El	$\overline{\mathbb{V}}$	E	M
Date of Notification (1)	*	811111111	*		Nam	e of Buildir	ng Owner/Operator (	2)	<u> </u>		200-200		
06/	26 /	19				l Banks		į	JUL	1	2019	)	L
Agencies Notified	Type Notific	ation			Stree	et Address			lead libro				
⊠ EPA									ASBESTO	35 CO	NTRO	11 &	
□ DOLWD	☐ Amended				City.	State, Zip	Code			JENSIN		/ low Suit	
☑ DOH	Amendm		70 00		- 200		, NJ 08046	L	selection enterior and control of Advantage Louisia	angli transport medical transport	Physical Comments in	Bishalamag	NAME OF TAXABLE PARTY.
DCA (NJAC 5:23-8)	☐ Emergen justificati		cludin	g		e of Contac			Telephone Nu	mher			
(110/10 0.20 0)	☐ Cancella					l Banks			receptione ita	11001			
					F/	CILITY	NFORMATION						
Name of Facility Where A	batement is	Takino	Place	(3)	- 17	COLLITTI	VI OKWATION	Type of Facility	<i>i</i> (4)				-
Banks Residence			, , , , , , ,	(0)				School (K-1					
Street Address								☐ Subchapter	8 (Other than K-				
								Other (i.e., homes, etc	private and comm	ercial b	uilding	JS,	
City (5)				100001				Square Feet	# of Floors	B	ldg. A	ne	
Willingboro								1,685	2		50	90	
County (6)					Cor	nty Code (	7)(STATE USE ONLY)		Prior if being demo		-		
Burlington					000	inty Code (	THOTATE OUE ONET	Residence		listicu)			
Name of Monitoring Firm	Hired by Build	dina C	)wner	(8)	ASCN	I No	Name of Abateme					-	
Management & Env	0.7	1000		T 50	710011	1110.	A process town many cases	onmental, LLC	- No.				
Street Address	no. consui	ung	oci vi	003			Street Address	Jillielitai, EEC					
PO Box 341							623 Cutler Av	(enue					
City, State, Zip Code							City, State, Zip Co						
Chesterfield, NJ 085	515						Maple Shade						
Project Manager for Monit				Ta	lephone	No	Telephone No.	, 145 00032	Liconso No				
Bill Weisgarber	toring r iiiri					3-4070	856-755-0099		License No. 00842				
Start Date (10)	T 6	School	ulod C	1	MUTASS SYRVES	ate (11)	Name of OSHA M		00042				
07 /11 /					3 /		EMSL Analyt						
Occupancy Status During				- 170			Street Address						
☐ Facility Closed/Vacate							200 Route 13	0 North					
Abatement Performed							City, State, Zip Co	ode					
Time of Abatement:	AIVI	—PI	"/	_PIV	'I	_AIVI	Cinnaminson	, NJ 08077					
Scope of Work (Check all	that apply)						In-						
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf or ≥260 lf</li></ul>			⊠ Re □ De		2000		☐ Mini-Enc ☐ Glovebag	losure g Procedure	egative Pressure on-Friable Proced	lure			
				Loca						Ab	atem	ent T	уре
Location	T(1)			Norm	ally iely by		Description o				_	_	-
Asbestos-Containing N TO BE ABA		1)			ance/		estos Containing Ma e., thermal systems i		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facility			Cus		Staff?	,	surfacing, VAT,	or	SF or LF)	oval	=	usc	Sure
(13)			Yes	(12 No		-	other miscellane	ous)				ate	(D
Utility Room and Laur	ndry Room					Floor T	ile and Mastic		72 SF				
							-					П	
							- Was a server and			ᆜᆜ	+=-		
			Ш			<u> </u>						Ш	
Name of Registered Wast Freehold Cartage	e Hauler			- 1	NJDEP Hauler I	D No.	Cubic Yards of Waste	Name of Regi Fairless L	stered Landfill				
City, State					1593	3	Disposal Date	City, State					
Freehold, NJ							07/13/2019	Morrisville	e, PA				
Completed By (Print or Ty	pe)	Title					Signature			Date			
Christina Lynch	F*/		ce Pr	esid	ent of	Operatio			11/0	(0/21	101	a	

INV-12396		NO	TIFI	CATIC	State of	New	Jersey STOS ABA	TEMENT								
Check# 583	3		. (1	Pursu	ant to N.	AG	8:60 and 5:1	6	-	F	C	E		\ <u>/</u>	E	m
Date of Notification (1)  06 / 25		0		17 8500			Owner/Operator	(2)	D)		100	100	U			
		9			ictoria W		ton	in pulling	1	\	_1111		4	2019	١	IIU
Agencies Notified	ification	1		Stre	et Address	5			A Company	1	JUI	-	1	LUTE		Lentand
☑ DOLWD ☐ Amen	222 E3V			City	, State, Zip	Coc	de				ecomente div	anamaras ma			21.0	al annual
	dment		-		illingbor					AS	BES	TOS	CON	VTRO	)L &	
	gency (i ation)	nciuair	ng	-	ne of Conta					Telepl		National States	and the same	unicanité	percented	
☐ Cance	llation			V	ctoria W	hort	ton									
None of Facility 1811				F	ACILITY	INFO	ORMATION						<del></del>			
Name of Facility Where Abatement Whorton Residence	is Takir	ng Plac	e (3)					Type of Facilit					All III A Para			- Non-
Street Address								☐ School (K- ☐ Subchapte		Other	than I	K-12)				
3,000								Other (i.e.,	priva	ate an	d con	nmer	cial b	uildin	gs,	
City (5)								homes, etc	C.)	# of F	Innre		T <sub>R</sub>	ldg. A	100	
Willingboro								1,267		1	10013			54	ige	
County (6)				Co	unty Code	(7) <i>(</i> S	TATE USE ONLY)	Current Use (F	Prior	if beir	ng der	molisi	ned)	-		
Burlington								Residence								
Name of Monitoring Firm Hired by B				ASC	ΛNo.	N	lame of Abateme						era hani	- 15-		
Management & Enviro. Cons Street Address	ulting	Serv	ices					onmental, LL	С				325,775			
PO Box 341						18-35	treet Address 623 Cutler Av									
City, State, Zip Code							ity, State, Zip Co						-			
Chesterfield, NJ 08515						11000	Maple Shade									
Project Manager for Monitoring Firm			Te	lephone	No.	-	elephone No.	,		Licen	se No	).	195411			
Bill Weisgarber			(	09-29	8-4070		856-755-0099			008	342					
Start Date (10)				etion D 8 /	ate (11) 19		ame of OSHA M EMSL Analyt									
Occupancy Status During Abatemen						St	treet Address				HY524-20	KV-13-A				
<ul><li>☐ Facility Closed/Vacated During E</li><li>☐ Abatement Performed Outside of</li></ul>	ntire Pe	riod of	Abat	ement			200 Route 13	0 North								
Time of Abatement:AM	P	M/	y Hoi	irs - De 1	AM		ity, State, Zip Co									
Scope of Work (Check all that apply)							Cinnaminson	, NJ 08077								
								ainment with Ne	egativ	ve Pre	ssure	9				
≥3 sf or ≥3 If     ≥160 sf or ≥260 If		⊠ Re □ De	enova emolit				<ul><li>☐ Mini-Encl</li><li>☐ Glovebag</li><li>☒ Non-Exer</li></ul>		on-F	riable	Proce	edure				
		1 1	S Loca Norm						T					atem	ent T	уре
Location of Asbestos-Containing Material (AC	(M)	Use	ed So	lely by	Asbe	estos	Description of Containing Mat			Δm	ount		Re	Re	m	E
TO BE ABATED  IN Facility			1000000	ance/ Staff?		e., th	ermal systems i	nsulation,		(Sp	ecify		Removal	Repair	Encapsulate	Enclosure
(13)			(12		_		surfacing, VAT, ther miscellaned			SF c	or LF)		'al	- 68	sula	ure
		Yes	No	N/A											ю	
Laundry Room			$\boxtimes$		Floor T	ile				18	SF		$\boxtimes$			
40																
Name of Registered Waste Hauler			100	NJDEP			bic Yards of	Name of Regi	stere	d Lan	dfill					
Freehold Cartage			'	1593		Wa 1	aste I	Fairless L	and	fill						
City, State Freehold, NJ							posal Date 07/08/2019	City, State Morrisville	e, PA	Α.						
Completed By (Print or Type)	Title					J	Signature				T	Date			y Avecto	
Christina Lynch	Vi	ice Pr	esid	ent of	Operatio	ns	Christa	9	٥			6	125	10		

P	ri	n	+	Г	0	r	m	i
H	П	П		-	O	Г	П	r

INV-12394		NOTIF	Pursuan	tate of Ne N OF ASB t to NJAC	8 60 a	S ABATE ind 12:12	0)	Ch	wk 1	90	13			
Date of Notification (1) 6/3/19				of Building skill Dept						7 [	(A)	ΓĒ	. П	η/7
Agencies Notified Type Notificatio	n	-		Address	01 P	ublic vvo	JIKS			)) [5			<u>U</u>	A
X EPA X Initial				Piermont	Road	d				3				
DEP Amended			1500	ate, Zip Co							JU	L	1	201
X DOL Amendmen		_	-	skill, NJ	0762	6						052.753		
DOH justification Cancellation	)		103405275	of Contact Terhune	0				Telephor	ne-Numi	oer_	7.5	COL	NTR
Cancellation	// I		3000,000,000	ILITY INFO	(7-3)	TION		es a line s	- Indonesia			"Ě	VSIN	JG.
Name of Facility Where Abatement is Tak	ng Place (	3)	170	ILIT IN	OKWIA	TION	Туре	of Facility (	4)					
Home								School (K-1	2)					
Street Address									8 (Other tha rivate & com		huild	inas	home	29
City (5)								etc.)						
Cresskill							250	re Feet 0	# of Floor	rs	65 65	dg. A	ge	
County (6)			County	Code (7)				.T.V	or if being de	molishe				
Bergen			(STATE	USE ONLY			hon				- 10			
Name of Monitoring Firm Hired by Building	Owner (8)	)	ASCI	M No.				tement Con		9.1850e-00				
Street Address								a regime was relatively for their	I Services,	LLC				
Street Address						Street		ss 83, 4 E G	ate Drive					
City, State, Zip Code								ip Code	ate Dilve					
								, NJ 074	18					
Project Manager for Monitoring Firm	West of the second		Telepho	ne No.		Teleph 973-	none N 764-2		Lice 703	nse No.	6			
Start Date (10) 6/17/19	Schedul 7/1/19		mpletion	Date (11)		Name	of OSI	HA Monitor						
Occupancy Status During Abatement (Che	1000 0000					Street	Addre	SS						
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:	Period of	Abater	nent s					ip Code						
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	protection and the same of the	Renova Demoli		10		×	Mir Glo	ni-Enclosure ovebag Proc					1	
	Is	Locat	ion									bate	ment	
Location of		Norma ed Sole		7.400.000		escription		ACCO COMPANIES CO.		-		Тур	oe	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Ma Cus	intena todial ( (12)	nce/ Staff?		therm: surf	ntaining M al systems acing, VA miscellan	s insula T, or		Amount (Specify SF or LF		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A						- Samuel Control				(D	
			X			t insula			300 SF	2	4			
			X		9"x	9" floor	tile		300 SF	2	۷			
Basement			X		pip	e insulat	tion		2 LF	2	۲.			
Exterior			X			siding			2,800 S		۲			
Name of Registered Waste Hauler		5.0	IJDEP W lauler ID		Cubi of W	c Yards aste		Name of F	Registered La	ındfill			-	
Newark Carting		1000	4509	State State	TBD			Grand C	Central Sar	nitary I	Land	lfill		
City, State						osal Date		City, State						
Newark, NJ Completed by	Title				TBD			Pen Arg	ıyl PA					
A. Scott Higgins	5,1,0,000	ident				Signature		1		Date 6/3/	19			
							. ,	1	_		2050			

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8/60 and 12:120)

D-1- (N-15 1: 74)		-					IX U	- XX	1 1	21		
Date of Notification (1) 6/26/19 TOV-1030	3			f Building Ow Vilhovsky	ner/Operato	(2)		EG	E		7 E	In
Agencies Notified Type Notification			Street A					<u> </u>	<u> </u>	0 0	L	
☐ EPA 🗵 Initial								2111		-00	40	100
DEP Amended  X DOL Amendment	#			ate, Zip Code ville NJ 07				JUL		20	19	Langer
Emergency		-		f Contact	109		1 76	lephone N	umbor			1
DOH justification)  DCA Cancellation				/ilhovsky							ROL	Ž.
			FACI	ILITY INFOR	MATION		Instead of		14 47 132	THAT.	NEWANIA SERVICE	режитольна
Name of Facility Where Abatement is Takin home	g Place (3)	)				Type of Facility	(4)					
Street Address						School (K-		er than K-	12)			
						Other (i.e.				ldings	, home	es,
City (5)						etc.) Square Feet	# 0	f Floors	T	Bldg. A	\ge	_
Belleville						1300	2			70		
County (6) Essex				Code (7) USE ONLY)		Current Use (P	rior if be	ing demoli	shed)			
Name of Monitoring Firm Hired by Building	Junor (9)		ASCN	(50) =	Nome	home		(0)				
Name of Morntolling Firm Fined by Building (	JWHEI (6)		ASCI	i No.		of Abatement Co			C			
Street Address						Address				12.50		
					POI	Box 483, 4 E	Gate D	rive				
City, State, Zip Code					275.33	State, Zip Code	110					
Project Manager for Monitoring Firm		-	Telepho	ne No		wood, NJ 07	418	License	No			
· · · · · · · · · · · · · · · · · · ·			releptio	He No.	20000000	764-2276		703	IVO.			
Start Date (10)	Schedule	d Con	npletion	Date (11)	Name	of OSHA Monito	r					
7/5/19	7/12/19											
Occupancy Status During Abatement (Chec					Street	Address						
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm	Period of A al Facility	batem Hours	ent		City S	tate, Zip Code						
Other – Describe: exterior	-		8		Oity, C	idio, Zip Oodo						
Scope of Work (Check All That Apply)												
≥3 sf or ≥3 lf		enova				Full Containn		n Negative	Press	ure		
x ≥160 sf or ≥260 lf	∐ De	emolit	ion		×	Mini-Enclosu Glovebag Pro						
						Non-Exempte	ed (*) an	d Non-Fria	able Pr			
	3222	_ocati									ement /pe	
Location of Asbestos-Containing Material (ACM)	Used	Sole	ly by	Asbestos	Description Containing M	of laterial (ACM)	Δ	mount		T		
TO BE ABATED In Facility	Custo	ntenar odial S		(i.e. the	rmal system:	s insulation,	(5	Specify	Re	R	nca	Enc
(13)		(12)			surfacing, VA her miscellar		Si	or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A						<u>m</u>		ate	re
exterior		_	×	1	ransite sic	ling	10	00 SF	x			
												$\neg$
					-							
Name of Registered Waste Hauler			JDEP W		ubic Yards	Name of	L f Registe	ered Landf	ill			
Tonys Cleanup & Hauling		1 1/2-13	auler ID	100.70	Waste BD	E same as a		rs Sanita		ndfill		
City, State		1			isposal Date	City, Sta	ite					
Bridgewater, NJ				T	BD	Eastor						
Completed by	Title	Ja 1			Signature	1.			ate	_		
A. Scott Higgins	Presid	ent				111	_	1	3/26/1	9		

INV-1730	12		NOTII	FICATIO	ON OF ASE	ESTO	SABATE	MEN	D)	0	lear	lk	19	(	16	7
Date of Notification (1) 6/26/19					of Building	Owne	r/Operato	r (2)		-		0	F	П	n n	D2
. Al-construction	Suma Nakita - P			1. 3. 5. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10	n Chen						) <u>[</u>	6	E	U	$\mathbb{V}$	L
Agencies Notified T	ype Notification			Street	Address	Ī				Inser!						
	Initial			City C	7. 0						]	JUL			0.40	1
DEP X DOL	Amended Amendmen	t #			itate, Zip Co nne, NJ		2			141	1	JUL		1 4	2019	11
	Emergency	(including	g		of Contact	0700	12									
DOH DCA	justification) Cancellation				n Chen					Te	lephone	Numi	er	\	TRO	2
				_0000 (0000 V)	CILITY INF	OPMA	TION			1		East C	last Va	mv6		
Name of Facility Where Aba	atement is Takir	g Place (	(3)	IA	SILIT HAT	OKWA	TION	Тур	e of Facility	(4)						m-second 20
home								П	School (K-							
Street Address								Ħ	Subchapter	r 8 (Oth	er than	K-12)				
								×	Other (i.e. p	private	& comm	ercial	build	lings	, hom	es,
City (5)				07	InIT	7		Squ	etc.) are Feet	# 0	f Floors		Тв	dg. A	Age	
Jersey City				()	04			200		2			7		.90	
County (6)					Code (7)			Curr	ent Use (Pri	or if bei	ng demo	olishe	d)			
Hudson				(STATE	USE ONLY			hor			_					
Name of Monitoring Firm Hi	red by Building	Owner (8	)	ASC	M No.	200100			atement Cor							
0							ABS	Env	ironmenta	l Serv	rices, L	LC				
Street Address							Street	200000000000000000000000000000000000000							Water.	
City State 7in Code									183, 4 E G	ate D	rive					
City, State, Zip Code									Zip Code	uran osto		- Historia				
Project Manager for Monitor	ina Eiro			<b>-</b>					d, NJ 074	18						
r roject Manager for Mornitor	ing rimi			Telepho	one No.		Teleph				Licens	e No.				
Start Date (10)		Sahadul	ad Car		D-1- (14)		973-	CONTRACTOR OF THE PARTY			703					
6/28/19	1	7/10/1		npietion	Date (11)		Name	of OS	HA Monitor							
Occupancy Status During Al	patement (Chec		700				Chrost	Λ al al a a								
Facility Closed/Vacated							Street	Adare	:SS							
Abatement Performed Other – Describe: base	Outside of Norm	al Facility	Abaten / Hours	nent			City, St	tate, Z	Zip Code							
Scope of Work (Check All Th	nat Apply)															
≥3 sf or ≥3 if ≥160 sf or ≥260 if			Renova Demolit				×	Mi	II Containme ni-Enclosure ovebag Proc n-Exempted	edure					3	
		Is	Locati	on				. ,,,,	- Zxomptou	( ) and	11011-11	Table I			ment	4
Location of		1	Normal	ly		De	scription	of						Ту		
Asbestos-Containing Mai	terial (ACM)		d Sole intenar		Asbest	os Con	taining Ma	ateria	I (ACM)	Ar	nount				ш	
TO BE ABATE In Facility	D		todial S		(i.e.		I systems icing, VAT		ation,		pecify		Re	Z	Encapsulate	Enclosure
(13)			(12)		1		miscellane			SF	or LF)		Remova	Repair	nsq	losu
		Yes	No	N/A				- 59					<u>n</u>	٦	late	Ire
basement				100000000000000000000000000000000000000			1					_	-	-		
baooment		-		X		pipe	insulati	ion		12	0 LF	X				
			14													
													+			
Name of Registered Waste H	lauler		1000000	JDEP W	220000000	Cubic	Yards		Name of F	Register	ed Land	lfill	_			
Newark Carting			100000	auler ID	No.	of Wa	ste		Grand C				250	fill:		
City, State			102	4509		TBD					Janil	ary L	anc	HHE		
Newark, NJ						Dispo:	sal Date		City, State							
Completed by		Title				100	·		Pen Arg	IYI PA						
A. Scott Higgins		Presi	dent			8	Signature		1,		1.14	Date	140			
		. 1031	Joint							_	-	6/26	19			



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

CK 5145

Date of Notification (1)  Name of Building Owner/Operator (2)  Name of Building Owner/Operator (2)  Name of Building Owner/Operator (2)				i
	n n	172	3	1
Agency Notified Type Notification Street Address	V	Ē	3	1
Lagor Automotive Autom	BRETSHEET & SPANS		7	
□ EPA □ Amended City, State, Zip Code		_		1
DEP Amended Amendment# LYNDHURST.NJ.07071JUL 1	201	9		1
Name of Contact			1	1
DCA Cancellation ML. (UNZO		Phase	model	-
FACILITY INFORMATION ASBESTOS CON		)L	čŁ	
Name of Facility Where Abatement is Taking Place (3)  Type of Facility (4)	novamope	PROPERTY		2
AR PETER PRINZO School (K-12)				-
☐ Subchapter 8 (Other than K-12)				
Office (i.e. private & constructed business	5,			
homes, etc.)  Square Feet # of Floors Bldg. A	ge			1
City (5)		)		
CONTROL OF THE PROPERTY OF THE				+
County (6)				-
1,5000		-	_	-
Name of monthship t and the day seeming of the				
Best Removal Inc				-
Street Address Street Address				
450 South River St				-
City, State, Zip Code City, State, Zip Code				
Hackensack, N.J. 07601			- 22	_
Project Manager for Monitoring Firm Telephone No. Telephone No. 201-329-7444 License No. 00388				
	-		_	-
Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor				
7/10/19 7/1/19 Omega Environmental Occurred Status During Absterment (Check only one) Street Address				-
Occupancy status Delining Abdition (Sincer Sing Sinc)				
☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Participated Outside of Normal Facility Hours ☐ City, State, Zip Code				+
D Abatement Performed Outside of Normal Facility Hours  D Other - Describe: 8:00 At TO 5:00 PM  S. Hackensack , N. J. 07606				
Scope of Work (Check all that apply)				
LI Fui Containment wan Negative Pressure				
☐ ≥ 3 sf or ≥ 3 lf ☐ Renovation ☐ Mini-Enclosure ☐ ≥ 160 sf or ≥ 260 lf ☐ Demolition ☐ Glovebag Procedure				
☐ Non-Exempted (*) and Non-Friable Procedure				_
Is Location		tem Type		
Normally : Description of	T	T	T	
Amount	-	Encapaulate	1 1	7
TO BE ABATED Custodial (i.e., thermal systems insulation, (Specify Strifacing, VAT, or SF or LF)	Remova	Cab	1010	-
IN Facility Staff? surfacing, VAT, or SF or LF) (13) (12) other miscellaneous)	Removal	and a	Enconsulation	1
(13) (12) Guier miscendireous)	-	6	9	)
Yes No N/A	-	+	+	_
BASSMENT UTHERWAL SYSTEM MUST WATER BELF	7	1	1	
1.0		1	1	
,			1	
Name of Registered Waste Hauler   NJDEP Waste Hauler   Cubic Yards of   Name of Registered Landfill				
Doot Domorro I Too ID No. Waste	1	/1		
17109 2720 CONBECTAND COUNTY LAN	Uri	u	_	_
City, State Hackensack, N.J. 07601  Disposal Date City, State NEW BURGH, PA. 172	10	_		
I Date	40	_		_
Completed by	7/	/,	9	
J. Maiorano Estimator V 17 descent	-	11	1	

Completed by

Tome Maslarkov

Title

Project Manager

Date

06-24-2019

Signature

			100	$ / \setminus $	ПГ	1	1	hock	1 1	-		-	L	rı	IIIL FUI
INV-10388		NOTI	FICATIO Pursuan	tate of Ne NOF ASB TO NJAC	8:60 and	ABATE d 12:12	MENT 0)		N		良		亳	The state of the s	y E
Date of Notification (1) 06/24/2019				of Building Kozak	Owner/C	Operator	(2)				,	JUL	1	20	)19
Agencies Notified Type Notificati	on		Street A												
	0.11		Cuccin	1001000						1	ASB	EST(	OS C	TINC	ROL 8
× DEP Amended	I		City, St	ate, Zip Co	ode				- 1 b		-	LIC	SHE	ING	
Emergen	ent # cy (including	1		ord NJ 0	******										
DOH justification	on)	,		of Contact					Tel	lephone	Num	nher		200 11-202	
DCA Cancellat	ion			Kozak	ODMATI	ON.									
Name of Facility Where Abatement is Ta	king Place (	3)	PAC	ILITY INF	ORMAII	ON	Тур	e of Facility (4	1)					-	
Private Dwelling	•						П	School (K-1)							
Street Address								Subchapter	8 (Oth				4.		
							×	Other (i.e. poetc.)	rivate	& comm	iercia	al buile	dings,	home	es,
City (5)								are Feet	10000	f Floors			ldg. A	ge	
Cranford NJ 07016							N/A	-	N/.			1	I/A		
County (6) Union				Code (7) USE ONLY	)			ent Use (Prio vate Dwelli		ing dem	olish	ed)			A CONTRACTOR OF THE PARTY OF TH
Name of Monitoring Firm Hired by Buildin	o Owner (8)	)	ASCI			Namo		atement Con	-	· (Q)		10.110.00			
Standard Environmental	ig Owner (o	,	Acci	vi ivo.				ntracting L		(9)					
Street Address						Street									-
2108 Fulton St Suite 2A						PO E	30X	734							
City, State, Zip Code						87890		Zip Code							
Brooklyn NY 11233								d Pak NJ 0	7424		ur				
Project Manager for Monitoring Firm Kayode Adefisoye			Telepho	ne No. 41-7673		Teleph				Licens		).			
Start Date (10)	Schedul	ed Co		Date (11)				6298 SHA Monitor		0126	0			,	
07-03-2019	08-03-			Date (11)				ontracting L	LC						
Occupancy Status During Abatement (Ch						Street									
Facility Closed/Vacated During Entir	e Period of	Abate	ment			PO E	зох	734							
Abatement Performed Outside of No	ormal Facility	y Hou	rs		Ì	City, S	tate, 2	Zip Code							
Other - Describe:					_	Woo	dlan	d Park NJ	0742	4					
Scope of Work (Check All That Apply)	_					_	-								
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	ADDRESS TO SELECTION OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TRANSPORT NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TRANSPORT NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TRANSPORT NAMED	Renov Demol				×××	Mi	ull Containme ini-Enclosure lovebag Proce	edure						
				Γ			J No	on-Exempted	(*) and	d Non-F	riable				
€ 15.05 (200 ± 15.200 × 0	100	S Loca Norma	T1 T1 S1 T0		Ngtales rea		1989						Abate Ty		ě.
Location of Asbestos-Containing Material (ACM)	Use	ed Sol	ely by	Asbes	Des tos Conta	scription aining M		al (ACM)	А	mount					
TO BE ABATED In Facility		intena todial	ance/ Staff?		thermal	systems	s insul		(8	Specify		Re	Z.	Encapsulate	Enc
(13)		(12)			other m	ing, VA	ı, or eous)	)	SF	or LF)		Remova	Repair	psu	Enclosure
	Yes	No	N/A				(0					<u>a</u>	7	late	re
Attic			×		Ver	micula	ite		43	32 SF	_	X			
		-	-				<i>2</i> 112-111								
Name of Registered Waste Hauler			NJDEP W	aste	Cubic `	Yarde		Name of R	Perioto	red I ac	dfill				
Amax Contracting LLC		1	Hauler ID 036184	No.	of Was	te		Fairless		ieu Län	uiii				
City, State			1000 104	r		al Date		City, State							
Woodland Prk NJ 07424					08-10			Morrisvil		4					
Completed by	Title					gnature	1	0	1)	Т	Date	е			
Tome Maslarkov	Proje	ect M	anager			/		C	1_		06-	-24-2	2019		
		V 1000 TO 1000				7			1						

GAC# 676-2019 N-	1336r	1 1	3)	ΔΠΓ	7			: h cek	#	32	2 55
	6, 2019	boots erroused	7		Name of Building Owner CELGENE CORPOR	/Operator (2)					
Agencies Notified  XEPA	.0, 2010	Notification IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII		ation	Street Address 86 MORRIS AVEN		DE			W	
DCA DOL			jency (	including	City. State, Zip Code SUMMIT, NJ 07901 Name of Contact	ſ	HT	JUL one Num	1	201	9
☑ DEP- No Longer REQUII ☑ DOH	RED	□ Cance	ation) lled		MR. Janos Angeli Director - Engineer		(908)	897-46 BESTO	46	NTRO	OL &
					Construction	L	Mark Control of the C		ENSI		The second section
Name of Facility Where Abater	ment is Tak	(ing Place (3)		FACILITY IN	IFORMATION						
CELGENE CORPORATION	ON – "I"	BUILDING			Type of Facility (4)  School (K-12)						
Street Address 86 MORRIS AVENUE					Subchapter 8 (other that  Other (i.e. private & co	mmercial build	dings, home	es, etc.)_	_		
<u>City (5)</u>	County (6)	)	Count	y Code (7)	Sq. Feet: 35,000 #	of Floors: 2	Blag. Ad	<u>qe:</u> ~/	0+ ye	ars	
SUMMIT		RRIS		Use Only)	Current Use (prior if bein RESEARCH LABS	g demolished	): ADMI	NISTRAT	IVE O	FFICE	E &
Name of Monitoring Firm Hired McCABE ENVIRONME	NTAL	Owner (8)	ASCM 001		Name of Contractor (9)						
SERVICES, LLC Street Address					GREENWOOD ABA	TEMENT C	ONSUL	TANTS.	, INC.		
464 VALLEY BROOK A	VENUE	#3A			Street Address 268 MAIN STREET						
City, State, Zip Code					City State, ZipCode						
LYNDHURST, NJ 07071  Project Manager for Monitoring		Telephone N	lumbor		BUTLER, NJ 07405						
JOHN CHIAVELLO	<del> </del>	201-438			Telephone Number		License	Number			
Scheduled Start Date (10)		Scheduled C	omnletic	n Date (11)	973-492-0477 Name of OSHA Monitor		00840				
07/05/2019		07/29/201	9	in Date (11)	ENVIROVISION, INC	C.					
Occupancy Status During Aba  Facility Closed/Vacated During Aba	atement (0	Check only or	<u>ne)</u>		Street Address						
☐ Abatement Performed Out Describe	side of No	e Period of A ormal Facility	bateme Hours	nt	20-21 WARGARAW City, State, Zip Code	ROAD		- 10			
▼ Facility Occupied During E     SUB 8 – Friday 8AM – Mond	Entire Peri lay 6AM (	od of Abatem 24 hrs. & we	ent, Are ekends	a Vacated (NOT as needed)	FAIRLAWN, NJ 0741	10					
Scope of Work (Check all that a	pply)			541105000110000000	<u></u>						
$\square \ge 3$ sf or $\ge 3$ If $\square \ge 160$ sf or $\ge 2$	60 If			■ Renovation     □ Demolition	X	Full Containr Mini-Enclosu Glovebag Pre	re (Tent)	Vegative	Press	ure	
Location of Asbestos-Containing	a leloc	ation Normall	Llood	Description of Aul	<b>X</b>	Non-Exempt				ocedu	ıre
Material (ACM) in Facility (13)	Solely	by Maint.  odial Staff? (1		(ACM) (i.e. therm VAT, or other mis	bestos Containing Material al systems insulation, surfacir cell.)	Amoun (Specif or LF)	v SF	batement emove Re		ncap E	Enclose
1204/1204-1 Hallway		X		Thermal System	ns Insulation (pipe)	200 LF	- IX		Т		
1204/1204-1 Roof top MER	X			Roofing		600 SF	=	1	-		
1204/1204-1 Roof top MER	X				roofing Mastic & Vibration	0.0000000000000000000000000000000000000	250		$\neg$		
Name of Reg. Waste Hauler		NJDEP Wast	a Haula-	ID#	Cukia Vanta atuu		, i				
Newark Carting, Inc. Newark, NJ 04509		NJ DEP #		10 #	Cubic Yards of Waste: 20 CY		G.R.O.V				II
Notes: None						Disposal Date 07/29/201			State New F		ill Rd.

Title
SENIOR PROJECT RAYMOND C. PEDALINO June 26, 2019 Raymond C. Pedalino MANAGER

Signature

Morrisville, Pa 19067 215-736-1700

Date

Completed by (Print or Type)

Check No. 203	,	IOTIFI (Pi	CATION	of New OF ASBE to NAC 8	STO\$	ABATE d 12:120	MENT			) E	G			W	
Date of Notification (1) 06-26-19				Building (	Owner/0	Operator	(2)					L	ш	U :	
Agencies Notified Type Notifica	tion	1	Street Ac	ddress					l l		JUI		1 2	019	
EPA Initial Amende	nent #	_		te, Zip Co et, NJ 07						ASI		TOS C		TROL	. &
DOH justificat		T	Name of	Contact nt Butar					Tele	ephone	Num	ber			-
DCA Cancella	ation			LITY INFO	RMAT	ION			1				-		
Name of Facility Where Abatement is T Private Home	aking Place (3	)					Туре	of Facility (4	.)						
Street Address								School (K-12 Subchapter of Other (i.e. pretc.)	B (Othe				ings,	home	es,
City (5) Carteret							Squa	re Feet	# of	Floors		BI	dg. A	ge	
County (6) Middlesex			County C	Code (7) USE ONLY)			Curre	ent Use (Prio	r if bei	ng dem	nolish	ed)			
Name of Monitoring Firm Hired by Build N/A	ling Owner (8)		ASCM	No.	,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		itement Cont itracting Ll		(9)					
Street Address							Addre 7th S								
City, State, Zip Code								ip Code / NJ 0708	7						
Project Manager for Monitoring Firm			Telephor	ne No.		100000000000000000000000000000000000000	hone N 216-9			Licen 0120		L <sub>e</sub> s			
Start Date (10) 07-05-19	Schedule 07-08-		npletion [	Date (11)				HA Monitor tracting Ll	_C						
Occupancy Status During Abatement (0	To						Addre 7th S								
Facility Closed/Vacated During En Abatement Performed Outside of Other – Describe:						City, S	State, Z	ip Code y NJ 0708	7						
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit					Mi Gle	II Containme ni-Enclosure ovebag Proc on-Exempted	edure	**************************************				e	
	Is	Locat	ion									7,		ement pe	
Location of Asbestos-Containing Material (ACN TO BE ABATED In Facility (13)	I) Use Ma	Normal d Sole intena todial ( (12)	ely by nce/		os Cor therma surfa	escription staining N I system acing, VA miscellar	Materia is insul AT, or	ation,	(5	mount Specify F or LF		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A			0.1.				00.05	_			ω	
Exterior		X				Siding			28	00 SF		х	Paramite.		
												х			
Name of Registered Waste Hauler			NJDEP W Hauler ID		Cubic of Wa	Yards aste		Name of F							
Delfa Contracting LLC		10.00	356240			10		Tullytow		sourc	e Re	COVE	ery F	acili	ty
City, State Union City, NJ					07-0	sal Date 8-19	9	City, State		4					
Completed by Jaime Delgado	Title Proj.	Mana	ager.			Signatur	e	4			Dat 06	e -26-1	19		

1

## NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant of NJAC 8:50 and 12:120)

D)-	ECEL Write	Form
M	JUL - 1 2019	

Date of Notification (1) 6/27/19 TION (- 103/9)					Name of Building Owner/Operator (2) Tiffany Gonzalez															
Agencies Notifie	ied	Type Notification		Street Address						ASBESTOS CONTROL &										
X EPA		× Initial									LICENSING									
DEP DOL		Amended	44.1		City, State, Zip Code															
_		Amendment Emergency	(including	_	San		wn, NJ 07410													
DOH DCA		justification) Cancellation			Name of Contact Telephone Number Tiffany Gonzalez															
						LITY INFO		TION						_			_			
Name of Facility Residential		Abatement is Takir	g Place (3	3)					Тур	e of Facility (	4)									
Street Address	School (K-12							2) 8 (Other than K-12)												
01100171441000			private & commercial buildings, homes,																	
City (5)									Squ	etc.) are Feet	# 0	f Floors		В	ldg. A	ge	-			
Fair Lawn										00	2			6	65 +/-					
County (6) Bergen					County Code (7) (STATE USE ONLY)					rent Use (Priesidential H		ng dem	emolished)							
Name of Monitoring Firm Hired by Building Owner (8)					ASCM No. Nam					e of Abatement Contractor (9)										
Project Manager										ages Abatement										
Street Address					Street Address 280 N. Midlan															
City, State, Zip Code					City, Sta					tate, Zip Code										
						Saddle Brook, NJ 07663														
Project Manager for Monitoring Firm					Telepho		1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Telephone No. 201-600-3184				License No. 01305								
Start Date (10) Scheduled (6/28/19 7/1/19				ed Con	ompletion Date (11) Nam					e of OSHA Monitor										
Occupancy Status During Abatement (Check Only One)				e)	Street Address															
Facility Closed/Vacated During Entire Period of Abat Abatement Performed Outside of Normal Facility Ho Other – Describe: 8 A.M to 4 P.M					City, State, Zip Code															
Scope of Work (	(Check Al	l That Apply)																		
≥3 sf or ≥3	enova			×	1 5	ull Containme	ent with	nt with Negative Pressure												
≥ 160 sf or ≥260 lf D				emolit	ion					lini-Enclosure lovebag Prod										
			_	-		1			] N	on-Exempted	d (*) an	d Non-F	riable		55 m = 777	CONTRACT				
	Locati Iormal					occription of						Abatement Type								
Location of Asbestos-Containing Material (ACM)			Use	Used Solely by As				Description of estos Containing Material (ACM)					Ī			ш				
TO BE ABATED In Facility				Custodial Staff?				(i.e. thermal systems insulation, surfacing, VAT, or				(Specify SF or LF)			Repair	ncap	Encl			
(13)				(12)			other miscellaneous)				0. 0. 2. 7			Removal	pair	Encapsulate	Enclosure			
			Yes	No	N/A											te	(0)			
Basement				Х				VAT	VAT			712 SF								
Name of Registered Waste Hauler					JDEP W auler ID	A75 (T. F. T.	Cubi of W	este			Registered Landfill									
All Stages Abatement				U 1883	036592	North Control of the	3 yc	i	Grand			Central Sanitary Landfill								
City, State Saddle Brook, NJ							Disp TBE	osal Date		City, State Pen Argyl, PA										
			Title			T	Signature	/	Date											
Richard Crist	Presi	dent			het he				6/27/19											

													Γ	Pr	int	
Ch099148		NO.	TIFICATIO (Pursuab	to NAA	8:60 ar	id 2:12	9)	т	R	E (	C E	7 7 7			7 7	
Date of Notification (1) 6/27/2019 W- 1935	34		LANX	of Buildin (ESS S	g Owner/ olutions	Operator US In	r (2) C.			J	UL	- 1	20	)19		
Agencies Notified Type Notification  EPA Initial		1000	Address Kings (	George	ASBESTOS CONTROL &											
DEP X Amended Amendment				ate, Zip ( , <b>NJ 08</b>		LICENSING										
□ Emergency     i justification)     □ DCA    □ Cancellation	3	1000000	of Contact Daniels	t		Telephone Number 732-306-4959										
N. C. W.			FAC	ILITY IN	FORMAT	ION										
Name of Facility Where Abatement is Takin LANXESS Solutions US Inc.	g Place (	3)					Тур	e of Facility (4 School (K-1						SIN CHESTON		
Street Address 1020 King George Post Road		Subc						ochapter 8 (Other than K-12) er (i.e. private & commercial buildings, homes,								
City (5) Fords							Squ	etc.) uare Feet	# of	Floors		В	ldg. A	\ge		
County (6) Middlesex		Code (7) USE ONL	у)		Current Use (Prior if being demolished) boiler house piping, processing plant & tanks											
Name of Monitoring Firm Hired by Building C Emilcott Associates, Inc.	ASC	ASCM No. Name of Abatement (														
Street Address 190 Park Avenue							Street Address 992 Old Eagle School Road, STE 910									
City, State, Zip Code Morristown, NJ 07960							City, State, Zip Code Wayne, PA 19087									
Project Manager for Monitoring Firm Telephone No.  David Tomsey 973-538-1110						Telephone No. License No. 484-581-7428 01286										
Start Date (10) 2/18/2019	Completion	mpletion Date (11)  Name of OSHA Monito  Stryker Demolition						r a & Environmental Services, LLC								
Occupancy Status During Abatement (Check	8/2/20 k Only Or					Street	Addr	ess			-		VICE	5, LI		
Facility Closed/Vacated During Entire P     Abatement Performed Outside of Norm     Other – Describe: boiler house	Period of a al Facility	Abat y Ho	ement urs			City, S	tate,	Eagle Scho	ol Ro	ad, ST	E 91	0				
Scope of Work (Check All That Apply)						vvayı	ne, i	PA 19087								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			vation olition			×	M G	ull Containme lini-Enclosure lovebag Proc on-Exempted	edure					۵		
Location of	ation	Do	scription						Abatement Type							
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Ma	inter	olely by nance/ al Staff? 2)		stos Coni thermal surfa	ntaining Material (ACM) al systems insulation, acing, VAT, or miscellaneous)			Amount (Specify SF or LF)			Remova	Repair	Encapsulate	Enclosure	
<b>"</b> 0 = 11:	Yes	No												ate	Ф	
#6 Fuel Line  Door Gasket boiler, caulk, counter	-	X			Pipe In:			31)		7 LF	X	-				
QA, M1D, Ester 2 Area	-	X		1		ner Mis		530 LF		X						
ZAA, Ester 2, PA Tank, Ester 1		X			sulation (TSI)			1406 LF								
Name of Registered Waste Hauler			NJDEP W	Surfacing Waste Cubic Yards												
Horwith Trucks, Inc.			Hauler ID SW-1998	No.	of Was			Cumberl	3570			llift				
City, State Northampton, PA					Dispos 7/19/2	al Date		City, State Shippen:		PA						
Completed by			ignature	7		Date										
Mark Klotzbach	Vice	ce President					Mulling				6/27/2019					