State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

CHECK#23205

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

							:120)				_	_
201 115 11 - (A)				Na	me of Buildi	ng Owner/O	perator (2)		ζ÷.			
te of Notification (1)				IC	E FILOON	AGENT I	OR HOMEO	WNER				_
1/2013	- N. C. ofic				eet Address				•	~		
0110100 1111111	Type Notificatio	n			4 KINGFIS		D	100 100 100				_
☑ EPA	X Initial	s			y, State, Zip							
□ DEP	Amended				JCKERTO							
☑ DOL	☐ Emergend		ing		me of Conta				Telephon	e Num	ber	
☑ DOH	justificatio							<u></u>				
DCA	☐ Cancellati	ion			AVID J. D'		M					
				FA	CILITY INF	URMATIC	1-	Type of Facility (4)				
ame of Facility Where Ab	atement is Tak	ing Place	e (3)					School (K-12)				
RIVATE RESIDENCE								Subchapter 8 (Othe	r than K-1	2)		
treet Address								Other (i.e., private	& commer	cial bu	ildin	gs
74 KINGFISHER ROA	D							Square Feet	# of Floo	rsBldo	a. Ag	ge
City (5)							ľ	Square reet	" 0, 1 100		, .	
						100		Current Use (Prior if be	ng demol	ished)		_
TUCKERTON, NJ				0	ounty Code	(7) (STATE	USE ONLY)	Current Use (Prior ii be	ng demon	Silouy		
County											-	
OCEAN Name of Monitoring Firm I	Hirod by Buildin	ng Owner	(8)	A	SCM No.	Name of A	patement Contra	actor (9)				
Name of Monitoring Firm	Tilled by Buildin	ig Ourio	(0)			CREAM	RIDGE ENVIR	RONMENTAL INC.				
						Street Add						
Street Address						15 BLAC	K FOREST RO	DAD				_
			_	_		City, State						
							ON, NJ 08691		0.40.0		77	_
		1	Nie			Telephone			License	No.		
Project Manager for Moni	toring Firm	Telepho	ne No.			609-890-7			00676			_
8				1.17	- Data (11)	Name of (SHA Monitor					
Start Date (10)		Schedu	led Co	npietio	n Date (11)		0,0,0,0					
7/2/2013		7/2/201				N/A Street Add	frace				A. 749-U.S.	
Occupancy Status During	Abatement (C	heck onl	y one)			Street Au	11033					
Facility Closed/Vaca	ated During Ent	tire Perio	d of Ab	ateme	nt	Oit Chat	, Zip Code					
Abatement performed o	utside of working	ng hours				City, State	e, Zip Code					
A MARIAN SHARE AND A CONSTRUCTION OF THE STATE OF THE STA								Full Containment	with Nega	tive P	ressu	ure
			7									
Scope of Work (Check a												
Scope of Work (Check a					x Renova			Mini-Enclosure				
≥ 3 sf or ≥ 3 lf			,		Renova Demoi			☐ Mini-Enclosure ☐ Glovebag Proced	ure		Proce	ed
		-			Y			Mini-Enclosure	ure) & Non-F	riable	Proce	ed
≥ 3 sf or ≥ 3 lf		Is	Locatio		Demol	ition	- Cantolning	☐ Mini-Enclosure ☐ Glovebag Proced	ure	riable nent Ty	ype	
≥ 3 sf or ≥ 3 lf ⇒ ≥ 160 sf or ≥ 260 lf	ll that apply)	ls Non	Location mally U	sed	Demoi	ition	tos Containing	☐ Mini-Enclosure ☐ Glovebag Proced ☐ Non-Exempted (*	ure) & Non-F Abaten	riable nent Ty	ype	
\geq 3 sf or \geq 3 lf \geq 160 sf or \geq 260 lf	Il that apply)	ls Non S	Location mally U	sed y	Description	on of Asbes	ermal systems	☐ Mini-Enclosure ☐ Glovebag Proced	ure) & Non-F Abaten	riable nent Ty	ype	
≥ 3 sf or ≥ 3 lf ≥ 160 sf or ≥ 260 lf Location of Asbestor Material (ACM) TO B	Il that apply) s-Containing E ABATED In	Is Non S Mainte	Locationally Usolely benance	sed y Custo	Description	on of Asbes ACM) (i.e. th	ermal systems VAT, or other	☐ Mini-Enclosure ☐ Glovebag Proced ☐ Non-Exempted (* Amount (Specify SF 6)	ure) & Non-F Abaten	riable nent Ty	ype	Enclosure
\geq 3 sf or \geq 3 lf \geq 160 sf or \geq 260 lf	Il that apply) s-Containing E ABATED In	Is Non S Mainte	Location ally Usolely benance	sed y Custo	Description	on of Asbes	ermal systems VAT, or other	☐ Mini-Enclosure ☐ Glovebag Proced ☐ Non-Exempted (* Amount (Specify SF of LF)	Abaten	riable nent Ty	ype	
≥ 3 sf or ≥ 3 lf ⇒ 160 sf or ≥ 260 lf Location of Asbeston Material (ACM) TO B Facility (1	Il that apply) s-Containing E ABATED In	Is Non S Mainte	Location mally Usolely benance Staff?	sed y Custo (12)	Description Material (A insulation	on of Asbes ACM) (i.e. th n, surfacing, miscellane	ermal systems VAT, or other	☐ Mini-Enclosure ☐ Glovebag Proced ☐ Non-Exempted (* Amount (Specify SF 6)	ure) & Non-F Abaten	riable nent Ty	ype	
≥ 3 sf or ≥ 3 lf ≥ 160 sf or ≥ 260 lf Location of Asbestor Material (ACM) TO B	Il that apply) s-Containing E ABATED In	Is Non S Mainte	Location ally Usolely benance	sed y Custo (12)	Description Material (A insulation	on of Asbes ACM) (i.e. th	ermal systems VAT, or other	☐ Mini-Enclosure ☐ Glovebag Proced ☐ Non-Exempted (* Amount (Specify SF of LF)	Abaten	riable nent Ty	ype	
≥ 3 sf or ≥ 3 lf ⇒ 160 sf or ≥ 260 lf Location of Asbeston Material (ACM) TO B Facility (1	Il that apply) s-Containing E ABATED In	Is Non S Mainte	Location mally Usolely benance Staff?	sed y Custo (12)	Description Material (A insulation	on of Asbes ACM) (i.e. th n, surfacing, miscellane	ermal systems VAT, or other	☐ Mini-Enclosure ☐ Glovebag Proced ☐ Non-Exempted (* Amount (Specify SF of LF)	Abaten	riable nent Ty	ype	
≥ 3 sf or ≥ 3 lf ⇒ 160 sf or ≥ 260 lf Location of Asbeston Material (ACM) TO B Facility (1	Il that apply) s-Containing E ABATED In	Is Non S Mainte	Location mally Usolely benance Staff?	sed y Custo (12)	Description Material (A insulation	on of Asbes ACM) (i.e. th n, surfacing, miscellane	ermal systems VAT, or other	☐ Mini-Enclosure ☐ Glovebag Proced ☐ Non-Exempted (* Amount (Specify SF of LF) 1000 S.F.	With the second	riable nent Ty	ype	
≥ 3 sf or ≥ 3 lf ⇒ 160 sf or ≥ 260 lf Location of Asbestor Material (ACM) TO B Facility (1	s-Containing E ABATED In 3)	Is Non S Mainte	Location mally Usolely benance Staff?	sed y Custo (12)	Description Material (vinsulation	on of Asbes ACM) (i.e. th n, surfacing, miscellane	ermal systems VAT, or other	☐ Mini-Enclosure ☐ Glovebag Proced ☐ Non-Exempted (* Amount (Specify SF of LF)	With the second	riable nent Ty	ype	
≥ 3 sf or ≥ 3 lf ⇒ 160 sf or ≥ 260 lf Location of Asbeston Material (ACM) TO B Facility (1	s-Containing E ABATED In 3)	Is Non S Mainte	Location mally Usolely benance Staff?	sed y Custo (12)	Description Material (A insulation	on of Asbes ACM) (i.e. th n, surfacing, miscellane	vatermal systems VAT, or other ous)	☐ Mini-Enclosure ☐ Glovebag Proced ☐ Non-Exempted (* Amount (Specify SF of LF) 1000 S.F.	With the second	riable nent Ty	ype	
≥ 3 sf or ≥ 3 lf ≥ 160 sf or ≥ 260 lf Location of Asbestor Material (ACM) TO B Facility (1 EXTERIOR Name of Registered Wa	s-Containing E ABATED In 3)	Is Non S Mainte	Location mally Usolely benance Staff?	sed y Custo (12)	Description Material (A insulation Insulatio	on of Asbes ACM) (i.e. th n, surfacing, miscellane	vAT, or other ous)	☐ Mini-Enclosure ☐ Glovebag Proced ☐ Non-Exempted (* Amount (Specify SF of LF) 1000 S.F.	With the second	riable nent Ty	ype	
≥ 3 sf or ≥ 3 lf ⇒ 160 sf or ≥ 260 lf Location of Asbestor Material (ACM) TO B Facility (1	s-Containing E ABATED In 3)	Is Non S Mainte	Location mally Usolely benance Staff?	sed y Custo (12)	Description Material (A insulation TRANSIT	on of Asbes ACM) (i.e. th n, surfacing, miscellane	Cubic Yards of Waste 5 YD.	☐ Mini-Enclosure ☐ Glovebag Proced ☐ Non-Exempted (* Amount (Specify SF of LF) 1000 S.F. Name of Registered GROWS	With the second	riable nent Ty	ype	
≥ 3 sf or ≥ 3 lf ≥ 160 sf or ≥ 260 lf Location of Asbestor Material (ACM) TO B Facility (1 EXTERIOR Name of Registered Wa	s-Containing E ABATED In 3)	Is Non S Mainte	Location mally Usolely benance Staff?	sed y Custo (12)	Description Material (A insulation Insulatio	on of Asbes ACM) (i.e. th n, surfacing, miscellane	Cubic Yards of Waste 5 YD. Disposal Date	☐ Mini-Enclosure ☐ Glovebag Proced ☐ Non-Exempted (* Amount (Specify SF of LF) 1000 S.F. Name of Registered GROWS City, State	Abaten or Removal X Landfill	riable nent Ty	ype	
≥ 3 sf or ≥ 3 lf ⇒ 160 sf or ≥ 260 lf Location of Asbeston Material (ACM) TO B Facility (1) EXTERIOR Name of Registered Wa TIMSTER TRUCKIN	s-Containing E ABATED In 3)	Is Non S Mainte dial Yes	Location mally Usolely benance Staff?	sed y Custo (12)	Description Material (A insulation Insulatio	on of Asbes ACM) (i.e. th n, surfacing, miscellane E SIDING	Cubic Yards of Waste 5 YD. Disposal Date 7/3/2013	☐ Mini-Enclosure ☐ Glovebag Proced ☐ Non-Exempted (* Amount (Specify SF of LF) 1000 S.F. Name of Registered GROWS City, State MORRISVILLE, F	Abaten or Removal X Landfill	riable nent Ty	ype	
≥ 3 sf or ≥ 3 lf ≥ 160 sf or ≥ 260 lf Location of Asbestor Material (ACM) TO B Facility (1) EXTERIOR Name of Registered Wa TIMSTER TRUCKING City, State	s-Containing E ABATED In 3)	Is Non S Mainte dial Yes	Location mally Usolely benance Staff?	sed y Custo (12) N/A	Description Material (A insulation Insulatio	on of Asbes ACM) (i.e. th n, surfacing, miscellane E SIDING	Cubic Yards of Waste 5 YD. Disposal Date	☐ Mini-Enclosure ☐ Glovebag Proced ☐ Non-Exempted (* Amount (Specify SF of LF) 1000 S.F. Name of Registered GROWS City, State	Abaten Removal X Landfill	riable nent Ty	ype	

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

e esc	NOTIFICA	TION	OF AS		State of No TOS ABATEI uant to NJAC	MENT	•	CHECK#23204				
				(2 415			27	٠. 	٧,	,~		
Date of Notification (1)					Name of Build	ding Own	er/Operator (2)		-			
7/1/2013					JOE FILOO	N/AGE	NT FOR HOME	OWNER		779	3.	-
Agencies Notified	Type Notificat	tion			Street Addres						4	
□ EPA	X Initial				8 WEST DO		VE					
☐ DEP	Amende			t #	City, State, Z							
□ DOL	☐ Emergei		cluding		MYSTIC IS	And in case of the same of the	Ŋ		1= .			
□ DOH	justificat				Name of Con				Tele	ohone	Num	oer.
DCA	☐ Cancella	ation			DAVID J. D							
			(0)		ACILITY IN	FORMA	TION	Tr (F112- (A)				
Name of Facility Where At		iking P	lace (3)	NC .				Type of Facility (4)				
PRIVATE RESIDENCE								School (K-12)				
Street Address								Subchapter 8 (Other				
8 WEST DORY DRIVE								Other (i.e., private			_	
City (5)								Square Feet	# 011	-10015	Bldg.	Age
MYSTIC ISLAND, NJ					los stronds	(7) (CT)	TE USE ONLY	Current Use (Prior if be	na do	malia	hod\	
County					County Code	(1) (514	TE USE ONLY)	Current Use (Prior if be	ing de	HOUS	ileu)	
OCEAN Name of Monitoring Firm F	lies of his Divilatio		(0)		ASCM No.	Name	f Abatement Cont	rooter (0)				
Name of Monitoring Firm F	nied by Buildii	ig Owi	lei (o)		ASCIVI NO.	Lancas and the same and the sam		NAME OF THE PROPERTY OF THE PARTY OF THE PAR				
Street Address						Street A		RONMENTAL INC.			_	
Street Address							CK FOREST R	OAD				
			-		****		ite, Zip Code	OAD				
							TON, NJ 0869	1				
Project Manager for Monito	oring Firm	Telen	hone N	0		Telepho			Licer	se No).	
i rojout managor for month	,g	. 0.0p		•		609-890			0067			
Start Date (10)		Sched	duled C	omplet	ion Date (11)		OSHA Monitor		1000.			
7/2/2013		7/2/20				N/A						
Occupancy Status During	Abatement (CI		4-17-20-2)		Street A	ddress					
Facility Closed/Vacate					ent							
Abatement performed out	NA 14 1375					City, Sta	ite, Zip Code		Sin Sec.			
Scope of Work (Check all	that apply)							Full Containment w	rith Ne	gative	Pres	sure
≥ 3 sf or ≥ 3 lf					Renovat	tion		☐ Mini-Enclosure				
≥ 160 sf or ≥ 260 lf					Demoliti	ion		Glovebag Procedu	re			
					H a iso			☐ Non-Exempted (*)	& Non	-Friab	le Pro	cedur
		Is	Locati	on	1	3-HISE-04-43-23			Abat	ement	Туре	,
Location of Asbestos-0	Containing		mally l				stos Containing				m	т
Material (ACM) TO BE			Solely be enance		College and Edition and		hermal systems , VAT, or other	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
Facility (13)			Staff?			niscellane],	370	pair	Sula	unsc
		Yes	No	N/A				A CONTRACTOR OF THE PARTY OF TH	_		ate	o o
EXTERIOR			Х		TRANSITE	SIDING		1000 S.F.	X			
Name of Registered Waste	e Hauler		a-1000M——		NJDEP Waste Hauler ID No.		Cubic Yards of Waste	Name of Registered La	ndfill			
TIMSTER TRUCKING		306			21079		5 YD.	GROWS				
City, State							Disposal Date	City, State				
WEST CREEK, NJ							7/3/2013	MORRISVILLE, PA	-			
Completed By		Title				Signatur	27-Mar	10 1.0	Date			
DAVID D'ANDREA		PRES	SIDEN	<u>T</u>		Wer	V AND	Cerdies	7/1/2	013		
ASB-41						8000	U	ACC-				

^{*} Do not use this form for asbestos licensure exempted activities

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

	OTIFICATION OF AS	(Pursuant to	NJAC 8	3:60 and	0 12.22				547	3 En 1
N	OTIFICATION	(Pursuant et		- OWI	ner/Operator (2) ENT FOR HOMI	- OWNT	ER		-	-
		Name	of Build	ing Ow	ner/Operator (2) ENT FOR HOMI	EOWIN				1
		1-OF	ELLOO	1417	1112					1
Date of Notification (1)		Stree	t Addres	69 - 201 M	n					4
Date of Noting	ype Notification	1	- OTDI	P DITA	le .			Trele	phone Number	1
7/1/2013 Agencies Notified	Initial andm	-						1		+
Agencies No		ent "	ATA TIA	MINT.	3					-1
DEP	- Emergency ("	Na	me of C	Ollico	DREA			5. (A)		1
DOL DOL	inetification,	D	AVIDJ	INFOR	RMATION	TT	ype of Facili	ty (¬) v 12)	.0)	1
□ DOH	Cancellation	FA	CILITY	IIVI G		- 1	School (K-12) pter 8 (Other t	han K-12)	ings)
DCA	Diac	ce (3)				$\neg \uparrow$	□ Subchar	e private & C	han K-12) commercial buildi t of Floors Bldg. /	Age
DCA Name of Facility Where	Abatement is Taking I is					7	Square Fee	#t #	of Floors	
Name of Facility Where	E			-			Square 100	`	demolished)	
DOTY A LE RUS					2000		Current Us	se (Prior if beir	ng demolished)	\rightarrow
					(7) (STATE USE	ONLY)	Callenga			. \
79 MORRIS BLVD.			TCount	y Code	(7) (517.1-		Leagtor (9)		+	
	J		1		Name of Abaten	nent Cor	MITACION	NTAL INC.		
City (5) MANAHAWKIN, N	2		ASCI	M No.	I -DEAM KID		IROLL			\longrightarrow
County	Firm Hired by Building O	wner (8)	1_		Street Address		DOAD			1
OCEAN Monitoring	Firm Hired by						No			
					City, State, Zip	b Cone	8691		License No.	
Street Address					LANGE TOP	4, 110	001		00676	
5000					Telephone IV	40				
	T	Telephone No.			609-890-711 (11) Name of OS	SHA Mor	nitor	2		
\	for Monitoring Firm	10.01	Intio	Date ((11) Name of OS	J				
Project Manager	for Monitoring Firm	Scheduled Co	mpierio		N/A Street Add	ress				
(10)		7/3/2013			1000					
Start Date (10)	tus During Abatement (Closed/Vacated During En erformed outside of work	heck only one) Nateme	ent	City, State	e, Zip Co	ode		nment with Negati	ve Pressu
7/3/2013	tus During Abatemon	itire Period of I	4Date.		City,			Full Contain	ment with	
Occupano)	osed/Vacated During	ing hours								
					Renovation			☐Mini-Enclos	procedure pted (*) & Non-Fi Abaten	riable From
Abate	rk (Check all that apply)			X.	Demolition			□ Non-Exem	Abaten	nent Type
Scope of Wo	rk (Check all sin						$\overline{}$		25.05	Enca
Scope of Wo	r≥3 lf					estos C	ontaining	Amount (Spe	cify SF 01 g	capsulate Repair
\\ \(\) ≥ 160 \$	r ≥ 3 11 sf or ≥ 260 lf	- Is L	ocation	. I	Description of Ash Material (ACM) (i.e.	e. therma	al systems	LF)	ecify SF or Removal	ir late
V		Norm	ally Use	_ / 1	Material (A	ind VA	1,010	1	+x	+
	on of Asbestos-Containin	ng So	-ncell		miscel	laneous)	·	1000 S.F.		T
Location	on of Asbestos-Containing (ACM) TO BE ABATED Facility (13)	dial	Staff? (*	WA _	TIP SID	ING		1.00	+	
Materia	Facility (13)	Yes	No !		TRANSITE SID			+	-	T
1		$\overline{}$	<u>├</u> ^					+	Registered Landfi	III
EXTER	IOR	-	+-				Cubic Yards of	Name of	Kediator	
EATE			+-	T_	NJDEP Waste	- 10	Waste	GROWS	s	
<u> </u>					Hauler ID No.	1	e VD.	1	rte.	
	istored Waste Ha	uler			21079		Disposal Da	MORR	USVILLE, PA	Date
Name	of Registered Waste Ha	500					715/2013	- V	7 1	7/1/2013
TIME	STER TRUCKING					Signatu	ri 27-Mar	V K/e	ndies	127
	Chote					1 / / /	Wat -	-A-A-A		
	ST CREEKS	<u> T</u>	itle	ENT		- Albert	- 0	ted activities		
		1	PRESIT	121.12		stos licer	isure exemp	100 02		
n A	VID D'ANDREA		* Do n	ot use t	his form for asbes					
DA	6B-41		יו טען -							
Ac	Total Color									



MAY 11

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

Date of Notification (1)				Name	of Building	Owner/Operator (2	2)		-			
	03 / 13	_		JC I	Penney C	Corporation Inc.	2513 1111	than ever				
Agencies Notified	Type Notification			Street	Address			Y 40 80 50				
⊠ EPA	☐ Initial			650	1 Legacy	Drive						
⊠ DOLWD			1	City, S	tate, Zip C	ode	-0.1					
☑ DHSS ☑ DCA	Amendment #2	T-		PLa	no, TX 7	5024	1-1					
(NJAC 5:23-8)	justification)	cluding	ı	Name	of Contact			Telephone Number	er			
	☐ Cancellation			Soy	Thomas	1						
			(A)	FAC	ILITY IN	FORMATION						
Name of Facility Where A	2.	Place	(3)				Type of Facility	(4)				
Ocean County Mall							School (K-12					
Street Address						***************************************		3 (Other than K-12) rivate and commerc	ial bu	ildina		
1201 Hooper Avenu	ie						homes, etc.)		iai bu	liding	٥,	
City (5)		***				101-001-001	Square Feet	# of Floors	Blo	ig. A	ge	
Toms River							150000	2	- 7	75		
County (6)	Mir. Jak		2	Coun	ty Code (7)(STATE USE ONLY)	Current Use (Pri	ior if being demolish	ed)			
Ocean								alliana de la computado de la computada de la comp				
Name of Monitoring Firm	Hired by Building C	Owner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)				-	
Hillmann Consultin	g LLC			6225	2	JVN Restorat	tion Inc					
Street Address				0.8.50-10.00		Street Address				-		
1600 Route 22 East	ŧ					47 Foster Ro	ad					
City, State, Zip Code	75.993					City, State, Zip Co	ode					
Union NJ 07083						Staten Island						
Project Manager for Mon	itoring Firm		Tele	phone I	No.	Telephone No.		License No.	-			
Tom Rubino			90	8-956	-1233	718-605-6256		00774				
Start Date (10)	Sched	luled C	omple	tion Dat	te (11)	Name of OSHA M	lonitor			10		
7 / 10 /	13	8 /	30	_ / _	13	Testor Tech						
Occupancy Status During	Abatement (Check	c only o	ne)			Street Address				-		
☐ Facility Closed/Vacate				nent		10 59 Jackso	n Avenue					
						City, State, Zip Co	ode				-	
Time of Abatement: _		и/ <u>10:0</u>	<u>0</u> PM- <u>6</u>	3:00AN	<u>/I</u> AM	LIC, NY 1110						
Scope of Work (Check al	I that apply)				1	□ Full Conf	rainmant with No.	nativa Danasura	1 Earl (+)			
☐ ≥3 sf or ≥3 lf		☐ Re	novati	on		☐ Mini-Enc	tainment with Neg losure	gative Pressure				
≥160 sf or ≥260 lf		☐ De	molitio	n		Gloveba	Procedure					
		la la	Lanat	-	1		mpted (*) and No	n-Friable Procedure	1	200		
Location	of	7170	Locat Iorma			Description o			Ab		ent Ty	ype
Asbestos-Containing		Use	d Sole	ly by	Asbe	stos Containing Ma		Amount	₽	Re	E	Ē
TO BE ABA	TED	1 7 SALEST 1955	intena odial S			., thermal systems	insulation,	(Specify	Removal	Repair	caps	Enclosure
IN Facili (13)	ty	Ousi	(12)	Jan:		surfacing, VAT, other miscellane		SF or LF)	<u>a</u>		Encapsulate	ure
(10)		Yes	No	N/A		other modelland	000)				fe	
1 st Level Furniture De	ept.		\boxtimes		VAT/MA	ASTIC		10,000SF				
	-	П			1100000000				П	П	П	П
		-	- Transition					···	1=			
Name of Posistered Wes	to Haules				Monte	Cubia Vanda of	Nome of David	tored Landell		Ш	Ш	Ш
Name of Registered Was			1,430	JDEP \ auler ID		Cubic Yards of Waste	Name of Regis					
Global Waste Indus	oules, Inc.			NJ-22		80	G.R.O.W.S	., INC.				
City, State						Disposal-Date	City, State					
Hackettstown, NJ						8/1/13	Morrisville	PA				
Completed By (Print or T	ype) Title	,				Signature /	1/-	Dat	e_/	, /	1 2	
John Tardy	S	enior	Proje	ct Mar	nager	on	1 Coix	sty 1.	7/3	5/1	3	
ASB-41						177	W 0 0 0		1	1		

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

STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NJAC 8:60-7 AND 12:120-7

ANNUAL NOTIFICATION

check# 1406

Date of Not	ification (1)				Name of B	uilding Own	er / Opera	tor (2)					
07 /	03	/13			T.	MARS SNA	CK FOODS			/0:-				
/	/	Type of No	tificatio	n		700 HIGH	5,000,000		4	$\mathcal{D}(\mathfrak{F}_{j})_{ij}$	1,5			
Agencies N	EPA		Initial	11	- 1	City, State	Zip Code)-		÷ 2,	Ħ ε: ;	10	
	DEP		Amende		1	Name of C	STOWN, NJ (7840	- 17	elenhon	<u> Number</u>		(14	-
Q	DOH		Amendr			BURT TOT			\					- 1
	DOL DCA		Cancell								15-11	in in		
					FA	CILITY IN	ORMATION						7000	
Name of Fa	acility Whe	re Abatem	ent is Ta	aking Pl	ace (3)		Type of Faci	lity (4)						
MARS SNA	CK FOOD	S			0-10-10-00-4-in • in			shool (K	12)					
								chool (K- ubchapte	r 8 (Other t	han K-12)			
Street Add							া ত	ther (I.e.,	private & c	mmercia	1			
700 111011	JIII.							1000	mes, etc.) # Of Floors		Building	Age		
City (5)		County (6)		19	County Code (7)	Square Feet 800.0	San 1	3		Dunaning	40+		
HACKETTS	STOWN	WARREN					Current Use	(Prior if	being demo	lished)	2			
							MANUFACT	URING	2.000					
Name of M	lonitoring	Firm Hired	by Bldg	. Owne	r (8)	ASCM NO	Name of Ab	atement (Contractor ((9)				
A = T							LVI Demoliti	on Service	es Inc.					
AET Street Add	iress		-				Street Addr							
907 DOOL	ITTLE DRI						20 14611:	Darkway						
City, State	, Zip Code	00007					32 Williams City, State,							
BRIDGEW Project Mr	AIER, NJ	onitoring F	irm		Telephone Nu	mber								
ERIC HOU	SEKNECH	T			908-218-1108		East Hanove		36	License	Alumbar			
Sheduled		(10)		27.3	etetion Date (1	13	Telephone	Number		License	Number			
07 _/	/ _ 08_	<u> 13</u>	0	<u>'</u> -/			973-772	-3660			00	117		
Occupanc	v Status D	uring Abat	ement (Check (Only 1)		Name of OS							
	Facility C	losed/Vaca	ted Dur	ing Enti	re Period of		LVI Demoliti		es Inc.					
	Abatemer	nt 	امارات	do of N	ormal Eacility		Street Addr 32 Williams							
	Hours - D		ea Outsi	ue or iv	ormal Facility									
v	Other - De	escribe: _	7:00AN	1-3:30P	M		City, State,							
	At at (Cha	ale All That	Annly)				East Hanov	ei, Nj 079.	30					
Scope of	Work (Che	ck All That	Apply)											
	Demolitio	n	E	7	Renovation		Full Contai Mini - Encl		th Negative	Pressur	е			
	≥3sf or ≥						Glovebag F	rocedure	•					
	≥160 sf o	r <u>≥</u> 200 II					Non-Exemp	oted (*) ar	nd Non-Fria	ble Proce	edure			
						D	tion of			Abateme	ent Type			
	Location o			ls ation	Δ	Descript sbestos - 0	cion of Containing			R		E	E	
ACOUST 10, 100	estos Cont laterial (A			mally		Material	(ACM)		Amount	E	R	N	N	
	O BE ABA		Us	sed	(l.e., therma	l systems		(Specify SF or LF)	M	E P	C A	C	
	in Facilit			lely	ins	ulation, su	rfacing, VAT cellaneous)		or or Lr)	l v	A	P	0	
	(13)			Main- ance/	l or	outer mis	Jenaneous)			Å	1	s	s	
			3000	todial						L	R	U	UR	
				ff (12)					-		+	-	十	
				NO N/A	PIPE FITTING	3			3 LF	V				
TANK FA				爿片	PUMP INSUL				4 SF	V			T	
TANK FA	LVIAI											1	+	-
					N IDED W	alCubia	Name of R	enietered	Landfill					
		Waste Ha	uler		NJDEP Wast Hauler ID No		I.E.S.I.	egistered	Lanum					
NEWARK	CARTING					9 of Waste							-	
City, Stat	e					Disposa								
NEWARK						Date	BETHLAHI	_IVI, FA						
Complete	ed by (Prin	t or Type)			Title			Signatur	е	0	1.	Date		
		•••			PROJECT M.	ANACED		24	N	Sho			0	7/03/1
STEVE S	TILES				ILKOTEC I W	MINAGER								

Date of Notification (1) June 28, 2013	- 000				Building C Ranieri		perator Check		22	5	*/· .					
Agencies Notified	Type Notification			Street Ad 129 N.	ddress Sacram	ento A	venue)	4 Zillin	28,4	A. O.	îo.				
EPA DEP DOL	Initial Amended Amendment #				te, Zip Coo or, NJ 08				14	476						
DOH DCA	Emergency (in justification) Cancellation	ncluding	11.8		Contact Ranier	i				Tele	ph <u>one N</u>	Numb	er			
				FACII	LITY INFO	RMATI	ON			-						
Name of Facility Where A Ranieri Residence	Abatement is Taking	Place (3))					x	of Facility (4	2)		(10)				
Street Address 129 Sacramento Av	/enue							Ħ	Subchapter 8 Other (i.e. pr etc.)				build	ings,	home	s,
City (5) Ventnor, NJ 08406	Til.			¥77				Squa 2,00	re Feet 0	# of 2	Floors		10000	dg. A)()	ge	
County (6) Atlantic				County C	Code (7) JSE ONLY)				ent Use (Prio idence	r if bei	ng demo	lishe	d)			
Name of Monitoring Firm Mangement & Envi			 3	ASCN	No.				itement Cont vironment							
Street Address P.O. Box 341								Addre:	ss r Ave.							
City, State, Zip Code Chesterfield, NJ 08	515								ip Code ade, NJ 0	8052						
Project Manager for Mor William Weisgarber		1000	Telephor	ne No. 98-4070		Teleph	none N 755-0	0.		License						
Start Date (10) July 13, 2013		Schedule	d Con	pletion I	Date (11)		550000000	of OSI	HA Monitor							
Occupancy Status Durin								Addre	SS		-				- in	
Facility Closed/Vac	ated During Entire P	eriod of A	batem						on Ave							
Abatement Perform Other – Describe:	ed Outside of Norma	al Facility	Hours				Grant Control		ip Code t, New Je	rsey	08108	3				
Scope of Work (Check A	II That Apply)	25 - 30 - 30 - 30 - 30 - 30 - 30 - 30 - 3						_								100000
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		The state of the s	enova emolit				2	Mir Glo	II Containme ni-Enclosure ovebag Proc on-Exempted	edure					0	
							<u> </u>	a INO	II-LXeIIIpteu	() ain	I NOTE I	IIable			ement	_
Location		1	Locati Icrmal			Do	scription	of						Ту	ре	
Asbestos-Containing TO BE AB In Faci (13)	Material (ACM) ATED lity	Mai	d Sole intenar odial S (12)	nce/		tos Cont thermal surfa	aining N	Materia s insula T, or		(5	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
Living/Dining/Laund	In Poom/Stairs	163	X	INA		Trans	ita She	actino		81	32 SF	-	XXX	-		_
Living/Dining/Laund	-	^			Tialis	ite one)Z ()	-	722				
	¥							O. W. Co.								
Name of Registered Wa	ste Hauler		50.5	JDEP W		S-100 S-100 S	Yards		Name of F			dfill				
Freehold	1	auler ID 2253	140.	of Wa			Grows L		11							
City, State Mount Holly, New Je				7/15/	Aldramost .		City, State Tullytow		۸.							
Completed by Christina Lynch	ations	s Mana	iger	1	ignature 14	AHO	De			Date Jur		3, 20	13			

28/3 JUL.	.5													Pnin
Date of Notification (1)	AH	NO7	ificati (Pursus	State of Nev ON OF ASB Int to NJAC	w Jere ESTO: 6:60 E	ey B ABATE nd 12;12	EMEW		DOL - 10) DA	Y	7		
06/27/13 CK# 2708 \$200	Mannin	1824	Oak	Knoll Sch					JUN 2 8	201	 B.	\dagger		<u>.</u>
EPA Initial	1		44 B	t Address Blackburn F					SAM	n				
DOL Amendmer	(Indudir	19	Sum	State, Zip Co irnit, New . of Contact	de Jerse	y 0 79 0	1 L	_WA		PRO	-			
図 DCA Cancellatio	'n		Johr	Daura CILITY INFO	DILLA	NA.,			-lacht	DIE NUI	noei	_		
Name of Facility Where Abatement is Taki Oak Knoll School of the Holy Chili	ng Place d, Bons	(3) Ventu			JKMAT	ION	2000	of Facilit						
Breet Address 44 Blackburn Road				-				Other (i.e	(-12) ter 8 (Other thi i. private & con	an K-12 nmerd:	2) 81 bu	ılding	e, hor	nes.
City (5) Summit, New Jersey	-						3qui 20,0	etc.) irs Fest 100	# of Floo	DF8		Bidg. 55÷	Age	
County (6) Union			County (3 FATE	y Code (7) E USE CIVILY)			Sch	int G ea (F pol	rior it being de	dellame	ed)			
Name of Monitoring Firm Hired by Building T&M Associates Street Address	Öwner (6	3)	ASC	M No.		Name	of Abi	itement C	ontractor (9)					
11 Tindall Road City, Stale, Zip Coda				12		51ree1 608 [de Ave	านอ					
Middleton, New Jersey 07748						City, 8	tate, 2 diand	Park, N	JJ 07424				1.000-3	
Project Manager for Monitoring Firm Kevin Burns			908-3	one No. 347-4396		Teleph 973-2	1000 N	o. 400	Lice 011	nae No	Ö,			
Stert Date (10) 07/02/13	07/05/	13	mpletion	Date (11)		Name of	of OSI	A Monito	26.4			_		
Facility Closed/Vacated During Entire I Abstement Performed Outside of Norm Control Describe: April 1881	Darlad of	A bada.	ment B	*		Street / 2333	Rout				_			
cope of Work (Check All That Apply)									y 07083					
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Location of	1 1	Locat	lly) and Nor		I FIG	Abat	emen	1
Asbestos-Containing Material (ACM) <u>TO BE ABATEO</u> In Facility (13)	Ma	id Sois intens todisi ((12)	nce/ Stuff?	4156	s Conti terma) a aurisc	cription of the control of the contr	eterial Insula:	(ACM) lion,	Amount (8pecify 8F or LF	,	Removal	Repair	Encapsulate	Athenday.
Basement Teachers Lounge	Yes	No X	N/A		Disa								H H	₹:
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ems of Registered Waste Hauler Ich Corporation		Н	JDEF W auter 1D		Cubic Y				Registered La					
ly, State codiand Park, NJ 07424				Č	Branco e e e	Date	+	City, Stat			_			
empleted by Itiana Kalenikova	Title Vice I	Présid	dent		846	nature				Date 06/2		3		

ASB-41 (R-05-08)

^{*} Do not use this form for asbestos licensure exempted activities

2	19 JUL	-5	150 00	ate of New I DPASSEL IO NJAC 3: Suilding O	laman			DO	L - 10 D	AY		19		
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Date of Notification (1) 06/28/13 CK# 2711 \$200	N. ()	$\mathcal{E}_{I_{i}} _{I}$	Name o	Suliding O	wnewo; Waste	Mana	(em	BIT ABSOC	1-4	1	\exists		٠	
Agendes Notified Type Notification			Street A			.,,,,,,	-	The state of the s	R APPR	OV	ED			
EPA Initial Amended Amendment		_	City, Sta Parsip	pany, Ne	e w Jers	sey 07	054						-1000	
Emergency (Justification) DCA Cancellation		,	Craig	Contact Gorsczya	logic process and the same				LTelephone	Nur	ober			
Name of Facility Where Abstement is Taking	Place (3	3)	FACI	LITY INFO	RMATIC	N	Type	of Facility (0					
Service Station #2								School (K-1		K-12	2)			
96 Snyder Avenue							图	Other (l.e. p etc.)	rivate & comm	BICH	et build			18
City (5) Berkeley Helghis, New Jersey							1,20		2 of Floors	_	5	idg. A 5+	ge	
County (6) Union			County (Code (7) USE ONLY)		_	Gas	Station	or if being dem	olish	ed)			
Name of Monitoring Firm Hired by Building C Environmental Dealgn Inc.	Owner (8)		ASCA	No.				iement Con oration	tractor (8)					
Street Address 5434 King Avenue, Sulte 101							VICBI	de Avenu	6					
City, State, Zip Code Pennsauken, New Jersey 08109						City, 8 Wood	ute, Z dland	Park, NJ	07424					
Project Manager for Monitoring Firm Tom Pruno			Telepho 809-74	ne No. 14-7482		Teleph 973-2	225-8		Lican 0110		ο.			
Start Data (10) 07/01/13	20/08/		rpletton i	Date (11)				la Monitor onmental	Labs LLC				*	
Occupancy Status During Abatement (Chec					$\neg \uparrow$	Streat		s 22 Wes	,t			•		1
Facility Closed/Vaceted During Entire F Abelement Performed Outside of Norm Other - Describe: 7AMatert	Period of A	Hours	ent		_	City, S	tete, Z	p Code w Jersey		_	2000			
Scope of Work (Chack All That Apply)	V						4							
조) 명이 로 3 lf 로 2180 로 or 2280 lf		gmoliti Senova				4	Mir	i-Enclosure	sdure				- ce	
	7	Locati	on	1		112	a NO	-EXEMPLEO	(C) and Non-	- LIND	10 110	Abate	ment	: -
Lacation of	P	Vormali d Solei	A	15 20 22 80 1	Des	oription	of				-	Ту		Γ
Asbestos-Conteining Material (ACM) TO BE ABATED In Facility (13)	Cusi	intensr lodial 8 (12)	ice/ item?	11.	nemal s	ng, VA	s insuls T, <i>o</i> r	ition,	Amount (Specify SF or LF)	•	Removal	Repair	Encapaulete	RATICACIONICS
Exterior	Yes	No	N/A X		Roof	Flash	ing		320 SF		×			-:
Extenor			X	,	Windo	21	-		6 ig 2 sn	1	x			
Parkett et														
Name of Registered Waste Hauler		H	JDEP W	No.	Cuble Y				Registered La		ــــــــــــــــــــــــــــــــــــــ			L
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Voodland Park, NJ 07424 Campleted by ations Kelenikova	Title	Presid	dent				7	e la		Öz		3		

A88-41 (R-08-08)

^{*} Do not use this form for asbestos licensure exempted activities

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Carrier (1)	E	nviron	mente	I AAMPIO IA	-			PROVED				
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encies Notified Type Rolling	// /											
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isme of Facility Where Abdition Service Station #1					1	豐 Otha	r (i.a. privata	her then K-12) & commercial bu	Miditigo.	1101111	, 	
1.141005					لسن	Square F		of Floors	Bkig. A 55+	√3 8		
310 Springfield Avenue							1 2	- number				
				296		Current L	(Prior if t	eing demolished	.			
City (6) Berkeley Heights, New Jersey		COURT	Code	Nilva	+	Gas St	ent Contrac	for (9)				-
County (6)	- 1		CM No.		Naum	n Corpor	ation					_
Union Name of Monitoring Firm Hired by Building Owner (I	5)	1	•		1	Address						
Environmental Design Inc.					808	McBride	Avenue					_
							0.40	7474				
5434 King Avenue, Dans					MAC	podlana r	RINGITO	License No.				-
City, Siets, Zip Code Pannsauken, New Jersey 08109		Tale	phone N	10.	Tel	3-225-84	00	01104				
Land of the control o		809	1-744-	7462			-1000		Talle et Geke (a			
Tom Pruno Sche	dulad C	comple	lion Dat	e (11)	Na	S Enviro	nmental L	abs LLC				
Grant Date (10))8/13				1	11						
07/01/13	y One)				23	333 Kour	9 22 44001					
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☑ ≥160 af or ≥280 if										Тур		
	18	Locatio	n		Desc	ription of		Amount	_			١.
	I too	ormally Solely	by I	Asbastos		ription of hing Materi ystems Inst	el (ACIVI)	(Specify SF or LF)	Removal	Repair	Encapsulate	
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Asbestos-Contains	Çusi	(12)		}	other m	scellaneou	"			1_	9	_
(13)	Yes	No	N/A			- Bankaida	al .	1,350 SF	X			L
			×		Rooth	Materia	<u>.</u>	1,350 SF	X			
Exterior		-	×		Joint 1	Compour		1				
Exterior	-	+-	1									
		+	-	1			Namo	of Registered Lar	ndfill			
	1	1	NJDEP	Waste	Cubic of Wa	Yards	G.R.	D.W.S Landfill				
Name of Registered Waste Hauler			Haular I	DNo.	15	_					1 9/20	_
			10124		Dispo	sal Date	Morr	isville, Pennsy	BINGVI			_
Lilian Corporation					10110	OFF			/ Date			
Lilion Corporation	3339					Rin'nature	195	1-00	1 06/2	8/13		
Lilich Corporation City. State Woodland Park, NJ 07424	TIEN	•	sident		1	Signalum Talles		m for sabestos lic	06/2			

Zari	×										~ [3	ES OFF	4
## NOTIFICATION OF ASBEST ASAT EMERY Ferror and to NAZO 650 and 972 200 Reference to NAZO 650 and 972 200 Remery School District: Find	N X & 8			_		[_	DOL -	10 DAY		1000		
Activities and (1) Activi			NO.				MENI	DUL-	10 0111		1		
Zarifa Ck# 2709 \$200 Ramsey School District Typs Notification Typs of Facility Where Abatement is Taking Place (3) Typs of Facility Where Abatement is Taking Place (3) Typs of Facility Where Abatement is Taking Place (3) Typs of Facility Where Abatement is Taking Place (3) Typs of Facility Where Abatement is Taking Place (3) Typs of Facility Where Abatement is Taking Place (3) Typs of Facility Where Abatement is Taking Place (3) Typs of Facility (4) Typs of									i		1		
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EPA Internated Armendrents 2	6/28/13 CK# 270			Rams	ey School Dis				W		1	-	
DBD DOL Amendment is Amendment in Amendment in Control of Committee (A. 1972) Committe				266 E	ast Main Stree	Bt		IAIVER	APPROV	ED		1	
DOA	DOL	Amendment #		City, Si Rama	ate, Zip Code 16y, New Jerse	y 0744	_	17 (14 m) -			5	S	7
FAGILITY INFORMATION FAGILITY INFORMATION FAGILITY INFORMATION To of Facility Where Ababament is Taking Place (3) adale Elementary School Ist Address O Island Avenue School (6-12) Subchapiar 2 (Other than K-12) Su	HOD E	justification)	actiging			٠,	•			Jeimher	7.		
and Facility Where Abbatement is Taking Place (3) adiale Elimentary School set Address (76) Olstend Avenue (76) Immedy, New Jersey 07448 (76) Immedy, New Jersey 07448 (76) County Code (7) (77) (77) (78) Immedy, New Jersey 07448 (78) County Code (7) (78) Immedy, New Jersey 07448 (79) County Code (7) (78) Immedy New Jersey 07448 (79) County Code (7) (78) Square Feet 1 & of Fleore 1 Stidg, Aga 20,000 2 55± . Square Feet 20,000 2 2 55± . Immedy New Jersey 08109 Immediate 10 Street Address Street Address Street Address Street Address Street Address Street Address Gold Moderfide Avenue (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (78) (J DOX . 1E	7				TIÓN						-	-? }
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City, State, Zip Code winnsauken, New Jersey 08109 ject Manager for Monitoring Firm	treet Address 434 King Avenue, Si	uite 101				100000000000000000000000000000000000000		500 TO 100 TO 10	9				
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Fecilty Closed/Vacated During Entire Parlod of Abstement Abstement Performed Outside of Normal Facility Hours Other - Describe: 4pm start Other - Describe: 4pm	6/28/13	1			•				Labs LLC				
Absterment Outside of Normal Facility Hours City, State, Zip Code Union, New Jersay 07083 Pull Containment with Negative Pressure Mini-Endosure Mini-Endos	4 14 15 16 16 16 16 16 16 16				ryon filtura condition to the condition of the condition	77/7/2013/15/20		Delica Co	+				
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	ompleted by stiana Kalenikova			resident		Stonetun	· co	inela	lelan		3/13		

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^{*} Do not use this form for sebestoe licensure exempted activities.

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	N		Sta ICATION ursuant t		STOS A					28/3 _{/10}	: N	#	2	75
Date of Notification (1) 07/01/13				Building Coorris Coo				sion	*		5	AM	0	
Agencies Notified Type Notification			Street Ad 353 Ea	dress st Hano	ver Ave	nue			1	* C/2/2			की	O
区PA DEP DOL Amended Amendment #			AND DESCRIPTION OF THE PARTY OF	e, Zip Coo own, NJ							10/1/	gi C	-7	
■ Emergency (ii justification) ■ DCA ■ Cancellation	ncluding		Name of Mr. Wa	Contact Ilace Ch	nang				Tele	nhone Nur	mber			
			FACIL	ITY INFO	RMATIO	N		\						
Name of Facility Where Abatement is Taking Mennen Sports Arena	Place (3)						of Facility (4 School (K-12	2)					
Street Address 161 East Hanover Avenue							n	Subchapter of Other (i.e. propertion)				lings,	home	s,
City (5) Morristown								re Feet ,000 +	# of 4+	Floors	5.3	dg. A	ge	
County (6) Morris			County C	ode (7) SE ONLY)			Curre	ent Use (Prio	r if bein	ng demolisi	ned)			
Name of Monitoring Firm Hired by Building C Westchester Environmental, LLC	wner (8)		ASCM 0012					atement Con Contracting						
Street Address 307 North Walnut Street							Addre Sarge	ss eant Aven	ue					
City, State, Zip Code West Chester, PA 19380	M.V.							Zip Code J 07013						
Project Manager for Monitoring Firm Mr. Mathew Abraham		T	Telephor	ne No. 1-7545			none N 689-6			License N 01099	lo.			
Start Date (10) 07/22/13	Schedule 07/30/1		mpletion [Date (11)				HA Monitor ronmental	Labor	atories l	LC			
Occupancy Status During Abatement (Check	k Only Or	ne)	West (2000) (2000)			Street	Addre	ss						
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: OCCUPIED BUILDIN	al Facility				-	City, S	State, Z	te 22 Wes	st					
						Unic	on, No	07081						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renov Demol					Mi	ull Containme ni-Enclosure ovebag Proc on-Exempted	e edure				a	
The state of the s	Т.							DII-EXCITIPIO	/ / dire	2140111110	1	Abate		
Location of	14.55	Loca Norma			Dec	cription	n of					Ту	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	inten	ely by ance/ Staff?		tos Conta thermal s surfac other m	ining I system ing, V	Materia is insul AT, or	lation,	(S	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
Front Lobby and Vestibule Area	Yes	No X	N/A		Floor T	ile &	Masti	С	2.6	00 SF	Х		е	
Name of Registered Waste Hauler Pyramid Contracting Corp.	-		NJDEP W Hauler ID		Cubic of Was			Name of G.R.O.		red Landfi Landfill	11			
City, State Clifton, New Jersey					Dispos 07/30/		<u> </u>	City, State		enpsylva	nia		VIII .	
Completed by Dimo Golcev	Title Pres	iden	t			gnatur		1	le	D	ate 7/01/	13		
ASB-41 (R-06-08)			10		d	Do n	ot use	this form for	asbest	os licensu	re exer	npted	activi	ties.

CK# 4542

Date of Notification (1)		P	iame o	of Building Owner/Operator	(2)	A 73- 0	13/1/1			
7/1/13	<u></u>			15. KATHY	(2) 1 /W	4110	40			_
Agency Notified Type Notification	•		Street /	25 PASCA	CIC RI	٥ 🐑		5	n	
		1	City, S	the 7in Code		*/	8;	3	17	,
☐ DEP ☐ Amended Amendment # ☐ Emergency (inclu	dina.	L	. 6	ARK RUDG	E. NJ.	07656	•		Ó	
E DOH justification			Hame o	MS. CONTR	ATTO	Tolonhone Number	er .			
			FACE	LITY INFORMATION	,			_	=	
Name of Facility Where Abatement is Taking I	Place (3)				Type of Facility	(4)		F. 155.555		
MS. CONTR	477	0	~ <u></u>		School (K-12	2)				
Street Address 25 PASCACK	Res	. H.W.			2 Subchapter 2 Other (i.e. pr homes, etc.	8 (Other than K-12) rvate & commercial to	ouildings,			
City (5)	_:=				Square Feet	-	Bidg. Age		٠,	
PARK TRIDGE	•				2005	2	.85	75	16	2
County (6)				Code (7) (STATE USE	10 mm	nor if being demolish				
BERGEN	\$		ONLY)			ESIDON CE				
Name of Monitoring Firm Hired by Building Ov (8)	ner	ASCM	No.		nent Contractor (145				
					emoval I	nc				_
Street Address				Street Address	Diman Ca					
City, State, Zip Code				450 S.	River St	·				
- المار مستر عبر محمد	•					J. 07601	*:			
Project Manager for Meniloring Firm	Te	lephon	e No.			License No.	-			
				201-329-	7444 -	00388				
Start Date (10) Scheduled	Completi	iph Dat	e (11)	Name of OSHA	Monitor					
7/10/13	111/	13			vironmer	ital inc				
Occupancy Status During Abatement (Check				Street Address 280 Huy	ler St					
☐ Pacifity Closed/Vacated During Entire Perio ☐ Abatement Performed Outside of Normal F	citity Hor			City, State, Zip (Code					
Domes - Describe: 714 To SEF	1	ented		South H	ackensac	k, N.J. 0	7606			
Scope of Work (Check all that apply)						Negative Pressure				9
#≥3 sfor≥3#				ovation 2 Mini-	Enclosure		•			
□ ≥ 160 af or ≥ 260 if		ا	u Den	notition 2 Glov	ebag Procedure Exempted (*) an	d Non-Friable Proces				
	ls	Locatio	on			-		ader Tvo	mend No	
· Location of	- N	iormali d Solei	У	Description	of			Ť	Ť	_
Asbestos-Containing Material (ACM)	- Mai	intonar	ice/	Asbestos Containing Mi	atorial (ACM)	Amount (Specify	20		8	
TO BE ABATED IN Facility		usbdi: Statis	-	(i.e., thermal systems surfacing, VAT	r, or	SF or LF)	Removal	eg -	ncapaulati	2
(13)		(12)		other miscellan	eous)		Val.	Repair	1	5
<u> </u>	Yes	No	NA				$ \square$		\perp	
FIRST FLOOR			po	THERMAL INSUL	ATION	IPLF	X			
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Name of Registered Waste Hauler		DEP W No.	laste H	tauler Cubic Yards of Waste	Name of Regi					
Best Removal Inc	4	710	9	. , 07		a Enterpri	ses			
Caty. State Hackensack, N.J.	076	01		Disposal Date 7/14/13	Waynesi	ourg , Oh				
Completed by Title				Signature	1)		late /	1		_
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Ct 23788

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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Date of Notification (1)			(Pur		to NJAC 8: 60 and 12: 120-) me of Building Owner/Opera	tor (2)		6/3 1			4	
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473	Notification			1	reet Address		c	4 L		2/1	i.	···
[X] EPA					Industrial Avenue			1/2			<u>∂. </u>	
[] DEP [X] Init	ial			Ci	ty, State, Zip Code						-	0
[X] DOL [] Am				Lit	ttle Ferry NJ 07643			*	11%	έ,		
[X] DOH [] Em	endment # ergency (including			Na	me of Contact		Tele	phone Numbe	r	1	4	
	ification) cellation			I Tou	san P. Duran		\$ 					
[] Dea [] Can												
Name of Facility Where Abatement is Taking I	Place (3)			FACII	LITY INFORMATION	Type of Facili	ity (4)					
Scientific Design					200	[]	School (K-12	2)				
Street Address						[]	57522	Other than				
49 Industrial Avenue						[X]	Other (i.e., p	rivate & comn mes. etc.)	nercia	ı		
	inty (6)			Cou	inty Code (7)	Square Feet		Floors	В	dg. A	ge	
				(ST	ATE USE ONLY)							
Little Form						Current Use (Prior if being de	molished)				
Name of Monitoring Firm Hired by Building C			ASC	M	Name of Abateme	nt Contractor (9)					
	(1)			707								
					J.R. Contracting &	& Environmental	Consulting, Inc.					
Street Address					Street Address							-00
					1141 Route 23							
					City, State, Zip Co	ode						
					Wayne NJ 07470	7. 7. 1. 1.						
Project Manager for Monitoring Firm		Tele	phone	Numb	er Telephone Numbe	er	Lice	nse No.				
	,				973 628-9500		0040	8				
Scheduled State Date (10)	Scheduled Com				Name of OSHA M	lonitor						
			Day	_	Year Enviro Vision Cor	isultants, Inc.						
Occupancy Status During Abatement (Check of X) Facility Closed/Vacated During Abatement	0 7 1 1 1 / 1 3 0 7 1 1 1 worth 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2					oad, Bldg. #34A						
Abatement Performed Outs	ide of Normal Fac	mity ric	urs		City, State, Zip Co Fairlawn NJ 0741							
[] Other - Describe: Scope of Work (Check all that apply)					Fairiawn NJ 0/41							
cropt of work (enter an inn apply)					[]	Full Contains	nent With Negati	ve Pressure				
13 > 7 of on > 2 M		[X]		ovation								
$[] \geq 3 \text{ sf or } \geq 3 \text{ lf}$ $[X] \geq 160 \text{ sf or } \geq 260 \text{ lf}$		[]	Dem	olition	[]	Glovebag Pro	cedure (*) and Non-Fri	abla Dusasdura				
[A] E100 31 01 E 200 11		Г			[X]	Non-Exemted	(") and Non-FF	able Procedur		batem	ent T	vpe
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Material (ACM)			olely by		(i.e., thermal system	ns		r LF)	0	P	P	0
TO BE ABATED in Facility (13)			ntenan Istodia		insulation, surfacing or other miscellan				V	A	SU	S U
in Facility (13)		8.00	aff (12		or other miscenan	leousj			A L	R	L	R
		Yes	No	N/A							E	E
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	2.	_	-	-						_	_	
Name of Registered Waste Hauler		NJD	EP W	aste	Cubic Yards of Waste	Name	of Registered La	ndfill		_		
	-2002-6-2	0.00000000	ler ID	No.								
J.R. Contracting & Environmental Consulting,	Inc.		1781	9		G.R.O				_		
City, State					Disposal Date	7 City, S						
Wayne NJ 07470	Tia.				1 181-14	Morris	sville PA	In.				
Completed by (Print or Type)	Title				Signature	-		Date				
Jerry Bijelonic	Project Manage	r							6/28	/2013		
ASB-41								-		04667	-	-

He way

Date of Notification (1)				Name	of Building	Owner/	Operator	(2)						
7–1–13				Camo	len Cou	inty ?	rechni	ical Schoo	1					
Agencies Notified	Type Notification				Address Cross	Keys	Road	4)				
₩ EPA □ DEP ₩ DOL	☐ Initial X Amended Amendment ☐ Emergency (#1	_ [Sick	tate, Zip C lervi	lle, I	30 U	3081		7,7	101			
DOH DCA -	justification) Cancellation	· · . · · · · · · · · · · · ·			of Contact Aceve				Teleph	one Nur	nber	9		
Name of Facility Manager	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	DI (0)		FAC	ILITY INF	ORMAT	ION	T (5 111	(4)	5			7	
Name of Facility Where A Building 4 & 1		g Place (3)						Type of Facility School (K	-12)	Ç			13	; :2
Street Address 343 Cross Keys	Road							☐ Other (i.e. etc.)	er 8 (Other t private & co	mmerci	al bui	14		ne \$
City (5) Sicklerville								Square Feet 12,000	# of Flo			Bldg. 40 y:		
County (6)					Code (7) USE ONLY	0		Current Use (Pr	rior if being	demolish	ed)			
Camden Name of Monitoring Firm	Hired by Building (Numer (8)		LASC	M No.		Name	of Abatement Co	entractor (0)					
West Chester E	0.55%			001				nouth Envi		al C	٥.,	Inc	-	
Street Address							Street A	Address						
307 North Walnu	ut Street				_26_3			Haws Aven	iue					
City, State, Zip Code West Chester, I								ate, Zip Code Cistown, P	A 19401					
Project Manager for Moni Matthew Abrahar	n		- 1		31–754	- 1		one No. -239–9920	Lic	00398				
Start Date (10) 6-14-13		Scheduled 7-15-		npletion	Date (11)		1	of OSHA Monitor Nouth Envi		al Co	D.,	Inc		
Occupancy Status During	Abatement (Check	Only One)					Address						
☐ Facility Closed/Vacat X Abatement Performe					8		COSTON	Haws Aven	ue					
Other - Describe: _	w-s					_		ristown,PA	19401					
Scope of Work (Check All	That Apply)						-							
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		le I	ocati	nn				THE LABORITOR	- (<i>)</i>			Abate		t
Location	of	No	rmall	У		Des	scription o	of				Ту	ре	_
Asbestos-Containing M <u>TO BE ABA</u> In Facility	ΓED.	Used Maint Custoo	tenar	ice/		thermal		insulation,	Amou (Spec SF or L	fy	Rer	Re	Encapsulate	End
(13)	,	((12)				niscellane		37 01 1	-۲)	Removal	Repair	osula	Enclosure
		Yes	No	N/A							10125		te	(0
Bldg. 4 Mechanic		х			pipe				75 I		х			
Bldg. 11 Mechani	cal Room	х			pipe				75 I		X			
Bldg. 11 Mechani	cal Room	х			heat	excha	nger	insulatio	n 32 S	F	х			
Name of Registered Waste	Hauler		LN	JDEP W	asta	Cubic \	/arde	Name of	Registered I	andfill				
Robinson Waste I			Ha	uler ID 17304	No.	of Was			S_{i} Inc.	Lationii				
City, State Bellmawr, NJ						Dispos		City, State		מם.				
Completed by		Title				7–15- Si	gnature	MOT	isville A	Date				
Timothy E. Bryan	1	Vice-	-Pre	eside	nt		1 ~	1/2	/	7–1		3		
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Date of Notification (1)			Building Owne	-	(2)	20	13 JU 5	Ť.,				
6/25/2013			ealty hoist	Realty		~6/	3/1/1		12 -			
Agencies Notified Type Notification		Street Ad				s	-5	<i>p</i> .				
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DEP Amended Amendment #		Irvingto	e, Zip Code			50	Chilery .		€, €	5		- 1
DOL Amendment # Emergency (include	ding	Name of					Telephone N		_	_		\dashv
DOH justification) Cancellation		Marty N				1	rolophono 14	difficult				
DCA Cancellation			ITY INFORM	ATION					7	-		
Name of Facility Where Abatement is Taking Place	ce (3)				Type of	f Facility (4)						
Private Property					☐ So	chool (K-12)						
Street Address						ubchapter 8	(Other than K- ate & commer	-12)	dino	ıc h	oma	
1 Lisbon Street						c.)	ate & Comme	Clai Dui	unig	jS, 11	OHIO.	"
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Clifton NJ					5000		1 ·		+50			
County (6)		County C	ode (7)				if being demol	ished)				
Passaic						nouse						
Name of Monitoring Firm Hired by Building Owner	er (8)	ASCM	No.			Carra In						
N/A		N/A				Group In	C		- 22			
Street Address					Address	s Street Suite	a#16					1
N/A					State, Zip		5# 10					
City, State, Zip Code						York NJ 0	7093					
N/A		Telephor	ne No		hone No.		License	No.			_	-
Project Manager for Monitoring Firm N/A		N/A	16 140.	1	758-71		00114					
B - 2000 2000 (1 in the control of	neduled Co		Date (11)			A Monitor				-		
1	20/2013			J&S	Enviro	nmental C	Corp					
Occupancy Status During Abatement (Check On	ily One)			Stree	t Address	5						
Facility Closed/Vacated During Entire Perio		ment		2333	3 Route	e 22 West					,	
Abatement Performed Outside of Normal Fa	acility Hou	rs		City,	State, Zip	Code						
Other – Describe: 8 hours	· · · · · · · · · · · · · · · · · · ·			Unio	on NJ 0	7083		2000	23.5			
Scope of Work (Check All That Apply)	4			<u></u>								
23 sf or ≥3 lf	Renov			-	5050 F000 F6		t with Negativ	e Press	ure			
\(\times\) ≥160 sf or ≥260 lf	Demo	lition		t	Glov	i-Enclosure vebag Proce	dure					
					Non	-Exempted ((*) and Non-Fr	iable Pr				
	Is Loca	ition							Ab	ate Typ	ment	å
Location of	Norm Used So			Descriptio					Т	7		
Asbestos-Containing Material (ACM)	Mainten			Containing mal systen			Amount (Specify	7	١.	_	Enc	m
TO BE ABATED In Facility	Custodia		s	urfacing, V	AT, or	,	SF or LF)	Remova	1	Renair	aps	Enclosure
(13)	(12	,	otl	ner miscella	aneous)			¥ <u>a</u>	. '	+	Encapsulate	enu.
	Yes No	N/A					*				Φ	
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						Name of D		4611				
Name of Registered Waste Hauler		NJDEP W Hauler ID		ubic Yards Waste			egistered Lan					
Asbestos Transportation Company		24310	20075			Minerva	Enterprises	5	<u> </u>			
City, State			D	isposal Dat	te	City, State						
Shirley NY 11967						. ,	ourg OH 440	688				
Completed by	Title			Signatu	re	Rel		Date		_		
Edwin Precilla	Project N	/lanager		Edi		nea		6/25/	201	3		

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State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8: 60 and 12: 120-) 2013 11 -5 64 8: 20 Date of Notification (1) Name of Building Owner/Operator (2) 0 Hetti and Jeff Misenti Street Address Agencies Notified [X] EPA 206 10th Street [] DEP [X] Initial City, State, Zip Code DOL [] Amended Hooboken, NJ Amendment# DOH] Emergency (including Name of Contact Telephone Number Justification) [] Cancellation Gerald Eglentowics [] DCA FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Residence School (K-12) Street Address Subchapter 8 (Other than K-12) 1 1 Other (i.e., private & commercial [X] buildings, homes, etc.) 206 10th Street City (5) County Code (7) Square Feet # of Floors Bldg. Age County (6) (STATE USE ONLY) Current Use (Prior if being demolished) Hoboken Hudson Name of Monitoring Firm Hired by Building Owner (8) ASCM Name of Abatement Contractor (9) J.R. Contracting & Environmental Consulting, Inc. Street Address Street Address 1141 Route 23 City, State, Zip Code Wayne NJ 07470 License No. Project Manager for Monitoring Firm Telephone Number Telephone Number 973 628-9500 00408 Scheduled Completion Date (11) Scheduled State Date (10) Name of OSHA Monitor 0 7 0 9 / 0 7 1 3 Enviro Vision Consultants, Inc. Day Month Day Month Year Year Occupancy Status During Abatement (Check only one) Street Address [X] Facility Closed/Vacated During Entire Period 20-21 Wagaraw Road, Bldg. #34A of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code [] Fairlawn NJ 07410 Other - Describe: Scope of Work (Check all that apply) Full Containment With Negative Pressure Mini-Enclosure Renovation $[] \ge 3 \text{ sf or } \ge 3 \text{ lf}$ Demolition [] Glovebag Procedure $[X] \ge 160 \text{ sf or } \ge 260 \text{ lf}$ Non-Exemted (*) and Non-Friable Procedure [X] Abatement Type Is E E Location Description of N N Location of Normally Asbestos-Containing Amount E R C C Asbestos - Containing Material (ACM) M E L Used (Specify A o V 0 Material (ACM) Solely by (i.e., thermal systems SF or LF) S TO BE ABATED Maintenance / insulation, surfacing, VAT, A S Custodial or other miscellaneous) U U A I in Facility (13) L R Staff (12) L R Yes No N/A X 900 SF Roof Roofing Name of Registered Landfill Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Waste Hauler ID No. G.R.O.W.S J.R. Contracting & Environmental Consulting, Inc. 17819 City, State Disposal Date City, State Wayne NJ 07470 Morrisville PA Date Completed by (Print or Type) Title Signature 6/28/2013 Jerry Bijelonic Project Manager

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State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:-120-7)

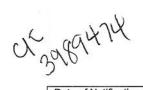
Date of Notification (1) 05/28/13					Name of B Princeton	uilding Owner/C University	perator	(2)	[13 JIJ]	_		
Month/Day/Year	lm Ni di	c	54.00						- U.//	<u> گ</u> نــ	Frank S	
Agency Notified	Type Noti				Street Add						M 6	: 11
EPA		Initi		edinia.	P.O. box 2	455.75						<u> </u>
DEP		1070000	tificati	on		e, Zip Code			Œ / //			
DCA	x #1		nded		Princeton			Im i			1.	st.
DOH			ificati		Name of C	(7-(7-37))7-(7)		[I ele	nhonovie	Phan		10
		Can	cellation	on	Robert Ot							(13)
					FACILIT	TY INFORMAT	ION					
Name of Facility Where Abate Princeton University Fine Street Address Princeton University		_		(3)	= 7/			Type of Facility (4) School (K1) Subchapter 8 x Other (i. e. 1) buildings, h	(Other Private &	comme		
								Square Feet # of 1	Floors	Bldg.	Age	
City (5)		Cou	nty (6)		County Code	(7)	10000	6	50+		0
Princeton						(STATE USE ONLY	7)	Current Use (Prior if	being den	olished	l)	
						T		University				
Name of Monitoring Firm Hir ATC Associates, Inc	ed by Build	ling C)wner	(8)		ASCM No.		of Abatement Contracto iated Specialty Contracti				
Street Address 3 Terri Lane								Address Crue Avenue				
City, State, Zip Code				511								
[2] - [0.750	State, Zip Code				
							-	Wills, PA 19342		-		
5.11.75.1 5 .17.75.17.11.11.11.11.55.11.11.11.11.11.11.11.11.	oject Manager of Monitoring Firm ke Keehn							hone Number			ce Numb	er
Mike Keenn	ke Keehn						610-36	64-9622		1103	3	
Scheduled Start Date (10)			Sche	d. Cor	npletion Date	(11)	Name	of OSHA Monitor				13
06/12/13					07/31/13		Criter	ion Labs				
Month/Day/Year					onth/Day/Yea	ır		190 - A - OH 2000 T - 42AU				
Occupancy Status During Aba							Street	Address	Carolina de la caroli			
Facility Closed/Vacate	-				atement		3370 I	Progresive Drive				
x Abatement Performed				cility			City, S	State, Zip Code				
Hours - Describe:	8:00 AM t	0 4:3	0 PM				Bensal	lem PA 19020				
Other - Describe:	10)					_						
Scope of work (Check all that a	ipply)							Full Containment with	Negative	Pressu	re	
Demolition	T-T-17/17			x	Renovation	1		Mini - Enclosure				
x >3 sf or >3 if							x	Glovebag Procedure				
>160 sf or >260 lf							x	Non-Friable Procedur				
			T.					Non-Friable Frocedur	4	Ten .		
Location of		1.	Is cation		Door	ription of			Ab	atemen	_	Г
Asbestos - Containing		100000	rmally			s-Containing		Amount	R		E N	E N
Material (ACM)			sed		F. 15 F. S. C. S.	rial (ACM)		(Specify	E	R	C	C
TO BE ABATED		J. 1933	lely			ermal systems		SF or	M	E	A	L
In Facility		M	Main			surfacing, VAT		LF)	0	P	P	o
(13)		N	ance/			miscellaneous)	3 3	LIL)	l v	A	s	s
* *		1. 100000	stodia						l A	I	ľ	Ū
		Sta	ff (12)						L	R	L	R
		Yes	No	N/A								E
4th floor room 408			x		floor tile			30 SF	x			
10th floor room 1002	illere d		x		floor tile			30 SF	x			
									х			
Name of Desistant W	ulan			NUMBER	en w	To the state	Ç	lu en la la				
Name of Registered Waste Hau	ner				EP Waste er ID No.	Cubic Yards of Waste		Name of Registered La	indfill			
Horizon Disposal						1		GROWS				
City, State Trenton NJ						Disposal Date As needed		City, State Morrisville PA				
Completed By (Print or Type)			-	Title		-	Signati	ure 2			Date	
Mark Goshow					ct Manager		Signal	Tack Sole,			Date	12
ADC 41		_					11	waysu.			110	17)

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Date of Notification (1) July 1, 2013		1	Name of E Rancoc	Building O as Valle	wner/Oper	perator ional I	(2) Distric	இர _{் !!!} ,CI	neck i	# 5a2	14			
Agencies Notified Type Notification		5	Street Add	dress cksonvill				·10 , [[]]		1M 8: . C				
EPA Initial Amended Amendment #	ali i dia a			e, Zip Cod ly, NJ 08				d Ligi		, <u>, , , , , , , , , , , , , , , , , , </u>				
Emergency (inc justification) DCA Emergency (inc justification) Cancellation	ciuding	1.00	Name of O	Contact ovanelli					Tele	ephone Num	her			
			FACIL	ITY INFO	RMATIC	ON				-		-		
Name of Facility Where Abatement is Taking Rancocas Valley Regional High Sch							×	of Facility (4 School (K-1)	2)	er than K-12	١			
Street Address 520 Jacksonville Road								Other (i.e. p etc.)	rivate 8	& commercia	l build			s,
City (5) Mt. Holly, NJ 08060							10,0		2	f Floors	10	dg. A	je 	
County (6) Burlington			County C (STATE U	ode (7) SE ONLY)	9 4 - 15 -		Res	idence		ng demolish	ed)			
Name of Monitoring Firm Hired by Building Ov Westchester Environmental	vner (8)		ASCM	No.				tement Con vironmen						
Street Address 307 N. Walnut Street							Addre Cutle	ss r Ave.						
City, State, Zip Code West Chester, PA 19380								ip Code ade, NJ ()8052					
Project Manager for Monitoring Firm Matt Abraham		- 1	Telephon	e No. 1-7545		(C.	none N 755-0			License No.	0.			
Start Date (10)	Scheduled August	l Con	pletion D			Name		HA Monitor		l				
Occupancy Status During Abatement (Check	•			-		THE PART OF THE PA	Addre	99						-
			TOTAL SECTION					on Ave						
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe:					_			Zip Code t, New Je	ersey	08108				
Scope of Work (Check All That Apply)													-1	20
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	enova emolit					Mi	ni-Enclosure	e cedure	n Negative F			α.	
							140	JII-EXCITIPIO	u () ui	id Holl I Hab	-		ment	
75 XE7 60 Y2 35		₋ocati ormal			17-200	000 to 1400 to 1400 to 1				**		Ту	ре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	.Used	Sole ntena	ly by nce/	Asbest (i.e.	tos Cont thermal surfa	scription taining I system cing, V/ niscella	Materia is insul AT, or		(mount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
Hallway outside Rooms C201-C221	100	X	10//	2'v4'	Asbes	stos C	eilina	Tiles	5.	856 SF	XXX			
Hallway outside Rooms C201-C221		^		2 14	Asper	3103 0	Cilling	11100	0,					
Name of Registered Waste Hauler		400	IJDEP W lauler ID		Cubic of Wa	Yards ste	-	Name of Grows		ered Landfill				
Freehold		2	2253	0.1850.5	8									
City, State Mount Holly, New Jersey 08060					8/15/	sal Date 2013		City, Star			8			
Completed by Christina Lynch	Title Opera	ation	s Mana	iger	Ć	ionatur AHO	180	De	1		ate uly 1,	201	3	

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Agency Notified Type Notification Street Address S	Date of Notification (1)	0.00				Name o	f Building	Owner/Operator	(2)	3/1	,				
BEFA	7-1-,		27				DI	QUID CARA	e				+		
Amended Amen	Agency Notified	Type No	otification			Street A		- ^	0	· ·	0.				+
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Street Address Stre	DVDEP .				1	City, Sta	ate, Zip C	ode		_ '''	2	(7: /		
Street Address Stre	CL COL						1	DIR PAU	en Ni	1 07709				<i>C</i> ,	
Street Address Stre	₽ DOH			ıg	Γ	Name o	of Contact	,		Telephone Numi	ber	7	,		
Name of Facility Where Abalement is Taking Place (3) Carry (6) Street Address City (6) County (6)							Kei	eri		1		1			
Street Address Carry George County (6) County (6) County (6) County (7) County (8) County (8) County (9) Name of Monitoring Firm Hired by Building Owner (9) Street Address City, State, Zip Code City, State, Zip						FACIL	ITY INFO	RMATION				~		30.7	
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City (5) AIR MANUEL N Square Feet \$ of Floors \$ digital Age \$ 3						-11-23-55					10				
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Name of Abatement Contractor (9) ASCM No. Name of Abatement Contractor (9) ACC INSULATION (0, INC.) Street Address City, State, Zip Code City, State, Zip	County (6)							(STATE USE	Current Use (P	14 M. P. G. J. G. S.					
Name of Monitoring Firm Hired by Building Owner (8) Street Address Steet	mon	mou	ナカ			ONLY)				RESIDEN	CO				
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Street Address City, State, Zip Code City, State	(8)							Acol	TOSULO	tim ('D.	TO	~	200		
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Scope of Work (Check all that apply) □ 3 sf or ≥ 3 lf □ Renovation □ Demolition □ Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing (AT) □ Separation □ Demolition □ Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing (AT) □ Other miscellaneous) □ Demolition □ Demoliti	Abatement Performed	Outside	of Normal Faci	lity Ho	urs					TOTO					
Renovation Re			/ /					01210	ech, N.	J. UT 10	<u> </u>	-		_	_
Solution Completed by Complete	Scope of Work (Check a	iii that ap	piy)					□ Full (Containment with	Negative Pressure	е				8
Secretary Secr	□≥3 sf or ≥ 3 lf														
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Date of Notification (1) 7/01/13					Building O		perator	(2)		8/3	1111				
13.7.11.12	Type Notification			Street Ad		mus				-	· · · ·		- 12		
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DEP	Amended				e, Zip Cod					16/	c_{r_1,\ldots,r_n}		~ C'		
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DOH DCA	justification)	•	1000	Name of	Contact ucille Re	mue									
DCA	Cancellation				ITY INFO		N.			-					
Name of Facility Where	Abatement is Taking	Place (3)		FACIL	III INFO	CINIATIO	JI4	Ту	pe of Facility (4)					
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Street Address											ner than K-1 & commerci		inaa	homo	.
21 Redmond Drive								×	etc.)	nivate	a commerc	ai Duliu	ii iys,	HOHIE	ъ,
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County (6) Moris				County C (STATE U	ode (7) ISE ONLY)			622330	urrent Use (Pri ouse	or if be	ing demolis	hed)			
Name of Monitoring Firm	n Hired by Building (Owner (8)		ASCM	No.		Name	of A	Abatement Cor	ntracto	r (9)			-	
N/A									oatement, Ir						
Street Address	<u>,</u>						Street		dress engren Ave	nue					
City, State, Zip Code									e, Zip Code	iiuo					-
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Project Manager for Moi	nitoring Firm			Telephon	ne No.		Teleph 973-		e No. 5-8685		#00675				
Start Date (10) 7/22/13		Scheduled 7/23/13	Con	npletion E	Date (11)				OSHA Monitor patement, Ir						
Occupancy Status Durin	ng Abatement (Chec	k Only One)					Street	t Add	dress	-				1000	
	cated During Entire I		atem	nent			11 R	Rose	engren Ave	nue					
Abatement Perform	ned Outside of Norn					l	10000		e, Zip Code						
Other – Describe:							Toto	owa	i, NJ 07512					_,	
Scope of Work (Check /	All That Apply)						_				***************************************	5. W. C.			
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D&S Abatement, In	c.		100	lauler ID 20996	No.	of Wa TBD	ste		10000000000000000000000000000000000000		agement (of PA			
City, State Totowa, NJ					- (8).0	Dispo:	sal Date	e	City, Sta Tullyto		PA			50	
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Deanna Brkusanin		Project	t Ma	anager			10		elle Ki	Mu	Wer 7	7/01/1	3		

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Date of Notification (1) 7/01/13		26156	ame of Frin Pe	Building Owner erillo	Operator	(2)			- 2013 J	7			
Agencies Notified Type Notification		100	treet Ac	ldress untain Ave		ii.			4, 2	- (A)	7.0	
EPA Initial Amended Amendment		C	ity, Stat	e, Zip Code Plainfield, NJ	07060				-3 00			<i>σ</i> .•	to
□ Emergency (in justification) □ DCA □ Cancellation	ncluding	1 2000	lame of Erin Pe	Contact erillo	****			Tele	phone Nun	her	·6'	4	
Name of Facility Where Abatement is Taking	Dlace (2)		FACIL	ITY INFORMA	TION	Timo	of Facility (4)						
House	riace (3)		ű.			-	School (K-12						
Street Address 75 Mountain Ave						X C	Subchapter 8 Other (i.e. pri etc.)				lings,	home	es,
City (5) North Plainfield						Squar N/A	e Feet	# of N/A	Floors		ldg. A	ge	
County (6) Somerset				ode (7) ISE ONLY)		Curre	nt Use (Prior se	if bei	ng demolish	ed)		a	
Name of Monitoring Firm Hired by Building C N/A	Owner (8)		ASCM	No.			tement Contr ement, Inc		(9)	,			
Street Address						Addres	s gren Aveni	ue					
City, State, Zip Code					City, S	State, Zi							
Project Manager for Monitoring Firm		Т	elephor	ne No.	Telep	hone No	D.		License N #00675	0.			
Start Date (10) 7/23/13	Scheduled 7/24/13	Comp	oletion [Date (11)	Name	of OSH	A Monitor ement, Inc				-		
Occupancy Status During Abatement (Chec	PARTITION SALES NOT BEEN	72.				Addres				<u> </u>			-
Facility Closed/Vacated During Entire F	Period of Aba	ateme	ent .				gren Aveni	ue					
Abatement Performed Outside of Norm Other – Describe: Occupied	al Facility H	ours			100000000000000000000000000000000000000	State, Zi owa, N	p Code J 07512						
Scope of Work (Check All That Apply)					-	-							
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(13)		No I	N/A	othe	miscella	neous)				va.	1	ulate	ure
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Name of Registered Waste Hauler		NJ	IDEP W	aste Cub	ic Yards		Name of R	egiste	ered Landfill		L		
D&S Abatement, Inc.			uler ID 0996	No. of W	/aste)		Waste M	/lana	gement o	fΡΑ			
City, State Totowa, NJ				Disp TBI	osal Date	Э	City, State Tullytow		4				
Completed by Deanna Brkusanin	Title Project	Mar	nager		Signatur	e WW	K. Muse	un	_ Da	te 01/13	3		

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Date of Notification (1) 7/01/13	14	16			Building Ow Altemose	ner/Op	perator	(2)		287	3 JUL	-5				
Agencies Notified	Type Notification		200	Street Ad 16 Hor	ddress ner Ave					- 1		,	17	∂:	0	
EPA DEP DOL	Amended Amendment				te, Zip Code Plains, NJ		50				4162	ršķi	1		/	
DOH DCA	Emergency (justification) Cancellation	including	- 1		Contact Altemose				8	Tel	ephone N	Number	=			
				FACII	LITY INFOR	MATIC	N			W		_				
Name of Facility Where A House	Abatement is Takin	g Place (3)						-	of Facility (4 School (K-1)	130						
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Name of Monitoring Firm N/A	Hired by Building (Owner (8)		ASCM	No.				ement Con ement, Inc		(9)					
Street Address								Addres	s Iren Aven	nue						
City, State, Zip Code	· · · · · · · · · · · · · · · · · · ·								p Code J 07512	80, 20						
Project Manager for Mor	nitoring Firm		T	Telephor	ne No.		Teleph	one No 345-8).		License #0067					
Start Date (10) 7/23/13									IA Monitor ement, Inc	С.						
Occupancy Status Durin	g Abatement (Chec	k Only One	e)				Street	Addres	S	-				-		
	ated During Entire I				*	8			ren Aven	iue						
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Name of Registered Wa	ste Hauler		N	JDEP W	aste (Cubic \	Yards		Name of F	Registe	ered Land	dfill				
D&S Abatement, Inc			0.000	auler ID 20996	5.00	of Was	te		Waste N				4			
City, State Totowa, NJ	22					BD	al Date)	City, State Tullytow		Α					
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Deanna Brkusanin		Proje	ot Ma	nager			NR	UU	4 Kell		u	7/01/	13			

Ct 43651

Date of Notification (1) 7/01/13	***************************************				Building Own lennon	er/Op	erator	(2)		<	973 JUZ				
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▼ DEP	Amended				te, Zip Code	1107	024				4/5	, Sec		10)
	Amendment # Emergency (ii			One of College And College	Arlington, N	13 07	031			1	* / _/	57	y .		
DOH DCA	justification) Cancellation		- 1	Name of Rich G	lennon					Tele	ephone Nu	Imber		(
	В			FACIL	LITY INFORM	ATIO	N								
Name of Facility Where	Abatement is Taking	Place (3)	e ue					Туре	of Facility (4)					
House Street Address									School (K-12 Subchapter 8		ar than K-	12)			
174 Baltimore Ave								×	Other (i.e. pr				ldings	, hon	nes,
City (5)									etc.) e Feet	# 01	Floors	T	Bldg.	Age	
North Arlington	1//							N/A		N/A			N/A		
County (6) Bergen				County C	Code (7) ISE ONLY)			Currer	nt Use (Prior	r if bei	ng demoli	shed)			
Name of Monitoring Firm	Hired by Building C	wner (8)		ASCM	l No.	-	Name		ement Cont	ractor	(9)		-		
N/A	, , , , , , , , , , , , , , , , , , , ,								ement, Inc		.,				
Street Address								Addres							
City, State, Zip Code						-		State, Zi	ren Aven	ue					
Oity, State, Zip Gode									J 07512						107
Project Manager for Mor	nitoring Firm			Telephor	ne No.		0.000	none No 345-80			License #00675				
Start Date (10) 7/17/13		Scheduled 7/18/13	Con	npletion [Date (11)		9.000000000		IA Monitor ement, Inc).					
Occupancy Status Durin	g Abatement (Check	Only One)					Addres							
	ated During Entire P								ren Aven	ue					
Abatement Perform Other – Describe:	ned Outside of Norm Occupied	al Facility F	Hours					State, Zi	p Code J 07512						
Scope of Work (Check A	All That Apply)						<u> </u>								
≥3 sf or ≥3 lf			nova		R		E		Containme	nt with	Negative	Press	ure		
≥160 sf or ≥260 lf		De	molit	ion			2		i-Enclosure vebag Proce	edure					
		Т				- 2/5		Nor	n-Exempted	(*) an	d Non-Fria	able Pr	V4725		
		7759653	ocati ormal	1017500							8			teme ype	nt
Location Asbestos-Containing		Used	Sole	ly by	Asbestos		criptior aining N		(ACM)	Α	mount			T_m	
TO BE AB	ATED `	Custo	itena idial S	VINT95V6	(i.e. the	rmal s		is insula			Specify or LF)	F G	Re	nca	End
(13)	(. 1 0		(12)					neous)		01	OI LI)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A								-		te	6
basem	ent		X		ŗ	oipe i	insula	ation		1	25 LF	Х			
					10000					y					
)														
Name of Registered Wa		9000 <u> 53</u>		IJDEP W		ubic \			Name of F						
D&S Abatement, Inc	3.		1 1 1 1 1 1 1 1 1	20996	TI	BD			Waste N		gement	of PA	V.		
City, State Totowa, NJ			84		1.00	ВĎ	al Date	7	City, State Tullytow	n, P					
Completed by		Title	4 8 8 .	nnoco-		Si	gnatur	Dans	e Relle	1	1	Date 7/01/	13		
Deanna Brkusanin		Projec	I IVI	anager			VV	Mill	U By MI	M	C	1/01/	13		

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Agencies Notified Type Notification Size Address SO Glibert Place City, State, Zip Code West Orange, NJ 07052 Name of Contact County (6) Street Address County (6) County (7) County (7) County (7) County (7) County (7) County (7) County (8) Cou	Date of Notification (1) 7/01/13			277	Name of E	Building C	wner/O	perator	(2)		3/1/	,				
Amended Amended Amended Amended Carrage, NJ 07052 Carr	Agencies Notified Ty	pe Notification		+;	Street Ad	dress	е					5 1/4				
Name of Facility Where Abatement is Taking Place (3) House Street Address Street Addr		Amended Amendment Emergency (justification)	including	-	City, State West O	e, Zip Coo range, I Contact	ie)52					-0			
School (K-12) School (K-12					FACIL	ITY INFO	RMATI	NC	-	- / F - W. //				-		
Street Address 50 Gilbert Place City (5) West Orange County Code (7) Street Address N/A	T (1)	tement is Takin	g Place (3)						Type							20
Solution Practs				-			-		H	Subchapter	8 (Oth					
County (6) County (7) County (7) County (8) Co	50 Gilbert Place								×		rivate	& commerci	al build	ings,	home	s,
Street Address									100000000000000000000000000000000000000		1000000				ge	
Street Address City, State, Zip Code Totowa, NJ 07512 Project Manager for Monitoring Firm Telephone No. Toles Abatement, Inc. Street Address 11 Rosengren Avenue City, State, Zip Code Totowa, NJ 07512 Scope of Work (Check All That Apply) 23 sfor x23 lf 2160 sf or ≥260 lf To Street Address 11 Rosengren Avenue City, State, Zip Code Totowa, NJ 07512 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Type Abatement Type Abatement Type Abatement Type Abatement Type To Street Address 11 Rosengren Avenue City, State, Zip Code Totowa, NJ 07512 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Type Abatement Type Abatement Type Abatement Type To Street Address To Location of Asbestos Containing Material (ACM) (I.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) To Street Address Abatement Type Abatement Type Abatement Type Abatement Type To Street Address Abatement Type Abatement Type To Street Address Abatement Type To Street Address Abatement Type To Street Address Abatement Type Abatement Type Abatement Type To Street Address Abatement Type To Street Address Abatement Type To Street Address To War Address Abatement Type To Street Address To War Address Abatement Type T	and the second s								1.0000000000000000000000000000000000000	[18] [18] [18] [18] [18] [18] [18] [18]	r if be	ing demolisl	ned)			
Street Address Street Address 11 Rosengren Avenue City, State, Zip Code Cocupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code City, State, Zip Code City, State, Zip Code City, State, Zip Code Totowa, NJ 07512 Scope of Work (Check All That Apply) Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) SF or LF) Asbestos Containing Material (ACM) Type Asbestos Containing Material (ACM) (Specify Specify S	Name of Monitoring Firm Hir	red by Building	Owner (8)		ASCM	No.			10 To 100			(9)				
City, State, Zip Code City, State, Zip Code Totowa, NJ 07512 Project Manager for Monitoring Firm Telephone No. Telephone No. 973-345-8685 Start Date (10) 7/18/13 Cocupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Totowa, NJ 07512 Street Address 11 Rosengren Avenue City, State, Zip Code Totowa, NJ 07512 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure, Non-Exempted (*) and Non-Friable Procedure Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A Dasement Non-Exempted (*) and Non-Friable Procedure Aspect Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Name of Registered Waste Hauler Name of Registered Landfill Name of Registered Landfill Name of Registered Landfill	N/A	1000 8000	12-2009,		<u></u>			12008/001.000-0.		maked of heavens and a summer	C, .					
Totowa, NJ 07512 Project Manager for Monitoring Firm Telephone No. Telephone	Street Address									777	nue					
Start Date (10) 7/18/13 Scheduled Completion Date (11) 7/18/13 Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe: Occupied Street Address 11 Rosengren Avenue City, State, Zip Code Totowa, NJ 07512 Scope of Work (Check All That Apply) 3 23 sf or 23 lf 1 End Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Type Abatemen	City, State, Zip Code															
7/19/13 D&S Abatement, Inc. Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe: Occupied Street Address 11 Rosengren Avenue City, State, Zip Code Totowa, NJ 07512 Scope of Work (Check All That Apply) ≥ 3 sf or ≥3 lf ≥ 160 sf or ≥260 lf Pull Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Type Abatement Type Abatement Type Abatement Type Asbestos Containing Material (ACM) TO BE ABATED In Facility (13) Period of Abatement Type Abatement Type Abatement Type Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) SF or LF) By B	Project Manager for Monitor	ing Firm		T	Telephon	ne No.		1100-1510-151					lo.			
Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other − Describe: Occupied Street Address 11 Rosengren Avenue City, State, Zip Code Totowa, NJ 07512 Scope of Work (Check All That Apply) Statis Period of Abatement Performed Outside of Normal Facility Hours Other − Describe: Occupied Totowa, NJ 07512 Renovation Demolition Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Type Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A Dasement X pipe insulation 108 LF X Name of Registered Waste Hauler Name of Registered Waste Hauler Name of Registered Waste Hauler Name of Registered Landfill Hauler ID No				Con	npletion D	Date (11)		1 2000000000000000000000000000000000000			с.					
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours		batement (Che	ck Only One)				Street	Addr	ess						
≥3 sf or ≥3 lf	Abatement Performed	Outside of Norr	Period of Atmal Facility I	aten	nent s			City, S	State,	Zip Code	nue		-			
Demolition Solution Demolition Demoli	Scope of Work (Check All Ti	hat Apply)				1000										
Substantial (ACM) Subs								2	× N	fini-Enclosure Blovebag Prod	e cedure				e	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Name of Registered Waste Hauler Normally Used Solely by Maintenance/ Custodial Staff? (12) Normally Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Amount (Specify SF or LF) To BE ABATED (I.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) NAME OF Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste			le l	ocat	ion			_		ton Exemples	2 () (id itoit i iid	1	252		t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A Name of Registered Waste Hauler NJDEP Waste Hauler ID No of Waste Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Application Amount (Specify SF or LF) Proce Procedular in the procedular i	Location of		No	orma	líy		De	scription	n of				_	Т	pe	
Name of Registered Waste Hauler Name of Registered Waste Hauler Name of Registered Landfill	TO BE ABATE In Facility		Mair	tena	nce/ Staff?		thermal surfa	system cing, V	ns insu AT, or	ulation,	(Specify	Remova	Repair	Encapsula	Enclosure
Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste			Yes	No	N/A						9.		-		te	· ·
Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste	basemen	t		Χ			pipe	insula	ation		1	08 LF	х			
Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste								100					-	-		
Hauler ID No. of Waste			+	_									+			
Hauler ID No. of Waste	Name of Registered Waste	Hauler		1	NJDEP W	/aste	Cubic	Yards		Name of	Regis	tered Landfi	11			
D&S Abatement, Inc. #20996 TBD Waste Management of PA	D&S Abatement, Inc.			H	Hauler ID			ste							336	
City, State Totowa, NJ Disposal Date Tullytown, PA Tullytown, PA							100000000000000000000000000000000000000	sal Date	e T			Ά .				
Completed by Deanna Brkusanin Title Project Manager Signature 7/01/13		1	V 500000000	t M	anager		1	Signatur	11	wa R	lle	ven 7		3		

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Date of Notification (1) 7/01/13					Building (dmonds		perator	(2)		-cla	/UL -5	At.			
Agencies Notified	Type Notification		- 1	Street A	ddress outh Ro	ad				- , , , , , , , , , , , , , , , , , , ,	i .	117	9: _~ {	2	
EPA DEP DOL	Amended Amendment	#			te, Zip Co town, N.		0				Grand	13/	37		
☑ DOH	Emergency justification)		F	Name of	Contact					7	-shone Nij	mber			
☐ DCA	Cancellation				dmonds		ON.								
Name of Facility Where	Abatement is Takin	g Place (3)	FACI	LITY INFO	KMAII	ON	Туре	of Facility ((4)				-	
House									School (K-1						
Street Address 2 Plymouth Road								×	Subchapter Other (i.e. p etc.)				dings,	home	es,
City (5) Morristown							*	Squa N/A	re Feet	# o N//	f Floors A		Bldg. A N/A	ge	
County (6) Morris				County (Code (7) JSE ONLY)			Curre	ent Use (Pri se	or if bei	ng demolis	hed)			
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCM	l No.				tement Cor ement, Ir		(9)				
Street Address								Addre	ss gren Ave	nue					
City, State, Zip Code		S. S					City, S	State, Z	ip Code				-		
Project Manager for Mor	nitorina Firm			Telepho	ne No			wa, N	J 07512		License N	Jo.			
							973-	345-8	685		#00675	0.00.0			
Start Date (10) 7/16/13		7/17/13		npletion I	Date (11)		100 W 100 100 100 100 100 100 100 100 10		HA Monitor ement, Ir						
Occupancy Status Durin		•					200 P 70	Addre	ss gren Ave	nue				2	
Facility Closed/Vac Abatement Perform Other – Describe:	ned Outside of Norn						City, S	State, Z	ip Code					CP Long Co	
Scope of Work (Check A						_	loto	wa, N	IJ 07512						
23 sf or ≥3 lf	ш тпастрыу)	☐ R	enova	tion] Fu	II Containm	ent with	Negative	Pressu	ire		
2160 sf or ≥260 lf			emolit	ion		86	2	≦ Mir	ni-Enclosure	е	,				
		T			- S				n-Exempte		d Non-Fria	ble Pro	77-77	7 (3)	
l continu		107	Locati	177.00				() ()						ement vpe	•
Location Asbestos-Containing	Material (ACM)	Use	d Sole	ly by		tos Cont		Materia	I (ACM)		mount			ш	_
TO BE AB In Faci			odial (12)		(i.e.	thermal surfa	system cing, VA		ation,		Specify f or LF)	Remova	Repair	псар	Enclosure
(13)						other r	niscella	neous)				oval	air	Encapsulate	sure
	****	Yes	No	N/A											_
attio	,	-	X	1		ve	rmicul	ite		3	0 SF	X			_
		-										-	_		
		+													
Name of Registered Wa	ste Hauler			JDEP W	laste.	Cubic	Yards		Name of	Registr	ered Landfi				
D&S Abatement, Inc			H	lauler ID 20996		of Wa			1996-1997 - 106-0 B		gement o				
City, State Totowa, NJ						Dispo: TBD	sal Date	<u>ה</u>	City, Stat		Α		0.000		
Completed by		Title			1	1 8	Signatur	nn.	1	1.		ate			
Deanna Brkusanin	7)	Proje	ct Ma	anager			VIS	Illu	Method	uu	7	/01/1	3		

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Date of Notification (1) 7/01/13				Name of Building Owner/Operator (2) Michael Leahy						*	344							
Agencies Notified	Type Notification			Street Address							C	3	٠.					
EPA PER		1 Williams Road							-4		3/9	?.						
EPA DEP DOL	Amended Amendment			City, State, Zip Code Chatham, NJ 07928							18/1			0	,			
100 mm - 170	Emergency justification)	(including	Name of Contact							Tel	ephone Nu	mber .						
DOH DCA		Michael Leahy																
Name of Facility Where	,	FACILITY INFORMATION Type of Facility						(4)										
House		☐ Sch					School (K-12)											
Street Address							Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes,											
1 Williams Road			20 CONTRACTOR		- e	etc.)		f Floors		ldg. A								
City (5) Chatham								N/A	e Feet	N/A		7 512	/A	ge				
County (6)				County Code (7)					nt Use (Prio	or if bei	if being demolished)							
Morris					SE ONLY)		House											
Name of Monitoring Firm Hired by Building Owner (8)					No.	121-2010/03/03/03/03	e of Abatement Contractor (9) S Abatement, Inc/=.											
Street Address				Street Address					-									
					11 Rosengren Aven						nue							
City, State, Zip Code					City, State, Zip Code Totowa, NJ 07512													
Project Manager for Monitoring Firm				1 2 2 2				elephone No. License No. #00675										
Start Date (10) 7/18/13	Con						of OSHA Monitor S Abatement, Inc.											
Occupancy Status Durin)						Address											
Facility Closed/Vacated During Entire Period of Abatem										enue								
Abatement Performed Outside of Normal Facility Ho Other – Describe: Occupied									, NJ 07512									
Scope of Work (Check A	All That Apply)		-7,74															
≥3 sf or ≥3 lf		ovation					l Containme		Negative	Pressu	re							
2160 sf or ≥260 lf	molit	olition					ii-Enclosure vebag Prod											
						Nor	n-Exempted	d (*) an	(*) and Non-Friable Proced									
		cation nally					8				Abatement Type							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility Used So Maintel Custodia			Sole	ly by	Asbest		escription of taining Material (ACM)				mount	Remova		т	_			
			dial S			ll systems insulation,				(Specify SF or LF)		Repair	ncap	Enclo				
(13)			(12)					miscellaneous)			J. 51 El /		pair	Encapsulate	Enclosure			
Yes			No	N/A										te				
gara	ge		X			duct	ct insulation			30 SF		x						
Name of Registered Waste Hauler				NJDEP Waste Cubic Hauler ID No. of W			ooto			Registered Landfill								
D&S Abatement, Inc.				#20996 TBD				Waste Management of PA										
City, State Totowa, NJ					Disposal Date City, State TBD Tullytown, PA					Δ								
Completed by Title					Structure) // Date													
Deanna Brkusanin										we		/01/1	3					

Cleck, 12193

Date of Notification (1) 6/27/13				Name of Building Owner/Operator (2) Mark Cummins Street Address 18 Horse Shoe Drive															
Agencies Notified	encies Notified Type Notification EPA Initial					Street Address 18 Horse Shoe Drive													
DEP X DOL	Amended Amendment #		10	City, State, Zip Code Newton, NJ															
☑ DOH DCA	Emergency (including justification) Cancellation					3			V	elephone Number									
				FACI	LITY INFO	RMAT	ION	I I											
Name of Facility Where Abatement is Taking Place (3) house Street Address						3 30 30 30 30 30 30 30 30 30 30 30 30 30		Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12)											
18 Horse Shoe Drive					□ Oth						[18] [18] [18] [18] [18] [18] [18] [18]								
City (5) Newton						Squar 2000	re Feet	# of Floors 2			Bldg. Age 50								
County (6) Sussex					Code (7) JSE ONLY)			Current Use (Prior if being demolished)											
Name of Monitoring Firm Hired by Building Owner (8)									e of Abatement Contractor (9)										
Street Address									S Environmental Services, LLC										
Street Address							4 E (Gate Drive, PO Box 483											
City, State, Zip Code									ity, State, Zip Code Glenwood, NJ 07418										
Project Manager for Monitoring Firm				Telephone No.			Telephone No. License No. 703												
Start Date (10) 7/9/13	Com	ompletion Date (11) Name				e of OSHA Monitor													
Occupancy Status Durin	2)	Stree				t Address													
Facility Closed/Vacated During Entire Period of Abat Abatement Performed Outside of Normal Facility Ho								State, Zip Code											
Other – Describe:						**************************************													
Scope of Work (Check A						T-1													
≥3 sf or ≥3 lf							Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure												
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Location of Norm						De	scription	of				-	Туре						
(13)			ntenan odial S (12)	taff?		therma surfa		s insula T, or			Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure			
			No	N/A		ormio	ulite ins	vulatio	_	145.05			_						
attic				×	V	emici	inte ms	sulatio	11	145 SF			2						
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		+ +	2.00 mm			- 177.33				_		+							
Name of Registered Waste Hauler			I N.	NJDEP Waste Cubic Yards			Yards		Name of R	egistered Landfill									
Tri State Transfer				Hauler ID No. of Waste 10				Minerva Enterprises											
City, State Bronx, NY				Disposal Date TBD				e City, State Waynesburg OH											
Completed by Andrew Scott Higgins Title President					Signatu				re Company				Date 6/27/13						