In1-125	(03)		NO.	TITI		State of N							-			
VIV. 11/11/20	TITO A "	H H	NO					STOS ABA 8:60 and 5:1		U E	C	E				7
CK 114/0	PA			1,			2000		116	リー			-	~~		
Date of Notification (1)					- 1		565	wner/Operator	511			_				-
_ 7 / _	2 /	1	9		R	umson- F	air I	Haven HS / Jo	ob #1906-550	5 Che	ec##11	4705	20	19		91
Agencies Notified	Type Notific	cation			Stre	et Address				\top						
⊠ EPA					74	Ridge R	oad		- Allerson	AS	BESTO	15 CC	MTM	301	2	PERMITTER
☑ DOLWD ☑ DHSS	☐ Amende Amendn	5575	i		City,	State, Zip	Cod	е	No.	710		ENS		1 Color		
□ DCA	☐ Emerge			-	R	umson, N	J 07	7760	Service Sp. opports			PORTUR DIRECTOR AND	wayana.		TO THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TO THE PERSON NAMED IN COLUM	amoran of
(NJAC 5:23-8)	justificat		ioraaiii	9	Nam	e of Contac	ct			Tel	ephone	Numb	er			
	☐ Cancella	ation			To	m Buffa				7	32-890	-6987				
					FA	CILITY IN	NFO	RMATION								
Name of Facility Where A	batement is	Takin	g Place	e (3)					Type of Facility	y (4)						=12.57
Rumson- Fair Have	n HS								School (K-1							
Street Address									Subchapter Other (i.e.,				ial bu	ildina		
74 Ridge Road									homes, etc		and con	mileic	iai Di	manng	5,	
City (5)									Square Feet	# 1	of Floors	S	BI	dg. A	ge	
Rumson, NJ 07760																
County (6)					Cou	inty Code (7	7)(ST	ATE USE ONLY)	Current Use (P	rior if b	eing de	molish	ed)			
Monmouth									High Scho	ol						
Name of Monitoring Firm I	Hired by Buil	ding (Owner	(8)	ASCN	l No.	Na	ame of Abateme	ent Contractor (9	9)						
Health & safety Serv	rices						1	AbateTech, Ir	nc.							
Street Address				3	8		Sti	reet Address								
PO Box 365							:	30 Maple Ave	. PO Box 25							
City, State, Zip Code							Cit	ty, State, Zip Co	ode							
Berlin, NJ 08009							_	Lumberton, N	IJ 08048							
Project Manager for Monito	oring Firm			1 - 9	ephone		100	lephone No.		10000	cense N	0.				
James Proctor		2		1		1-8850		609-265-2107			00529					
Start Date (10) 7 / 12 /						ate (11) 19		me of OSHA M								
		- 6		(a)	<u></u>			EMSL Analyti	cai							
Occupancy Status During							9.5	reet Address								
☐ Facility Closed/Vacated ☐ Abatement Performed (scribe	_	200 Route 130								
Time of Abatement:								y, State, Zip Co								
Scope of Work (Check all t	hat apply)		0.000		Sa			Cinnaminson	, NJ 000//							
	mat apply)		atabasa (1917) (Sec. Co.)					☐ Full Conta	ainment with Ne	gative	Pressur	e				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			⊠ Re □ De					☐ Mini-Encl								
				mont	On				npted (*) and No	on-Fria	ble Prod	cedure				
			3,500,00	Loca							110000000000000000000000000000000000000		Aba	ateme	ent T	уре
Location o Asbestos-Containing M				Norma	ally ely by	0.000		Description of					Re	Re	m	m
TO BE ABAT		')	Ma	intena	ance/			Containing Mat ermal systems in		1	Amount (Specify	22	Removal	Repair	cap	Enclosure
IN Facility			Cust	todial (12)	Staff?		5	surfacing, VAT,	or		F or LF		val	7	Encapsulate	sure
(13)			Yes	No	N/A	1	ot	ther miscellaned	ous)						ate	
Classroom #312								J BAnadin			40.05	-		П		П
Class100111 #3 12				\boxtimes		Chaikbo	oarc	d Mastic		_	10 SF		\boxtimes	Ш		
				П	П									П	П	П
Name of Registered Waste	Hauler			do to	JDEP '	Vaste	Cul	bic Yards of	Name of Regi	stered	Landfill		_			_
AbateTech, Inc.				1833	lauler II	D No.	Wa	ste	G.R.O.W.S							
City, State					18750	,	Dis	posal Date	City, State							_
Lumberton, NJ								/15/19	Tullytown	, PA						
Completed By (Print or Typ	e)	Title	1					Signature				Date		-		-
Gwendolyn Trumbett				ons	Coord	inator		CV	W					-1	9	

Inv-12-560

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

JUL = 5 · 2019

Chado.	具加工			(Pursu	ant to NJ	AC 8:60 and 5:1	16)	- Verilland				The second
Date of Notification (1)			3	Nar	me of Buildi	ng Owner/Operator	(2)	ACRECTOS	CON	TRO	1 2	1
July / _3	/	2019		J	efferso	on Township	Board of	Educations	VSIN	G	- CA	ned shift of the
Agencies Notified	Type Notific	ation			eet Address 31 Stat	te Route 181						
	Amende Amendm		2	City	, State, Zip	Code				-		
☑ DOH ☐ DCA	Emergen	IOIIL IF			Lake Ho	patcong NJ	07849					
(NJAC 5:23-8)	Justificati	ion)	~	100000	ne of Conta			Telephone Nun				
] Cancella	tion		_	Dora Ze	eno		973-663-	5/82			
					ACILITY II	NFORMATION	T= 4= 1111	775				
Name of Facility Where Aba			ce (3)			Type of Facility School (K-1					
Jefferson Middl Street Address	le Scho	01					Subchapter	8 (Other than K-12	2)			
1000 Weldona Ro	ad						Other (i.e., homes, etc	private and comme	rcial b	uildin	gs,	
City (5)		-		****		7.	Square Feet	# of Floors	В	ldg. A	ge	
Oak Ridge							1 Dec 201 1 1 1 1 1 1 1 1 1	3				
County (6)	*		Hotok	Cou	unty Code (7	7)(STATE USE ONLY)	Current Use (P	rior if being demoli	shed)			
Passaic							School					
Name of Monitoring Firm		ragxowns	Kak	ASCN	1 No.	Name of Abateme)				
Sky Environmenta						Polmax Co:	rporation					
Street Address						Street Address 44 Koster	Ctroot E	loor 2				
140 Boulevard City, State, Zip Code						City, State, Zip Co	THE CANADA STATE OF STATE	1001 2	-			
Mountain Lakes N	I 07046	5				Wallington		7				
Project Manager for Monitori			T	elephone	No.	Telephone No.		License No.				
Leonid Shereshev	sky		9	73-58	8-4821	973-809-1	122	01361				
Start Date (10)		cheduled				Name of OSHA M	onitor					
July / 5 . / 20		July		3/	2019	tbd						
Occupancy Status During Ab						Street Address						
☐ Facility Closed/Vacated D ☑ Abatement Performed Ou					ecribe							
Time of Abatement:						City, State, Zip Co	de					
Scope of Work (Check all tha	t apply)											
and the control of the control of	. арр.уу							gative Pressure				
		□ R				☐ Mini-Encl ☐ Glovebag						
The state of the s						☑ Non-Exer	npted (*) and No	n-Friable Procedu	re			
			Loc Norm						Ab	atem	ent T	уре
Location of Asbestos-Containing Mate	rial (ACM)	Use	ed Sc	lely by	Asbes	Description of stos Containing Mat		Amount	Ren	Repair	m	Enc
TO BE ABATED IN Facility				ance/ Staff?		, thermal systems in	sulation,	(Specify	Removal	pair	Encapsula	Enclosure
(13)			(12			surfacing, VAT, other miscellaneo		SF or LF)	<u>a</u>		ulat	ЭД
		Yes	No	N/A							Ф	
Classroom B-4				X	floo	r tile		20 sf				
Classroom B-3				\square	floo	t tile		30 sf				
Classroom B-11					floo	r tile		20 sf				
ı				- 1		T.			+		П	П
Name of Registered Waste Ha				NJDEP V		Cubic Yards of	Name of Regis	tered Landfill	-	_		-
Polmax Corporation	n		1	Hauler ID	75. 75	Waste 2		Landfill				
City, State						Disposal Date	City, State	The second second				
Wallington NJ							Morrisvi	lle PA 1905	7			
Completed By (Print or Type)	T	itle				Şignature	11.	Da	te			
Kielczewski Slawor	ndr D	brootd	ent			110	, [] 0.	1. 7	1.	2	701	a

NOCK			TION O	of New Jer F ASBESTO NJAC 8:60	DS AI						臣 (<u>C</u>			<u> </u>	VS
Date of Notification (1) 7/1/19				uilding Owner of Treasi					The same of the sa	U	J	UL	- 5	20	119	de de la constante de la const
Agencies Notified Type Notification		10000000	eet Add West	ress State Str	eet,	3rd Fl	loor		and the same of th		ASBE	STO	S CO	ITAC	ROL	8
EPA Initial Amended Amendment #	2	100000		, Zip Code NJ 08625							***********	LIC	ENS	ING		
Emergency (inclusion) DOA Emergency (inclusion) Cancellation	iding		me of C chael	ontact O'Reilly					1000000		hone Nu					
Land —			FACILI	TY INFORM	ATIO	N			1			(Nac - 3/14/A	,			-
Name of Facility Where Abatement is Taking Pla Edna Mahan Correctional Facility	ace (3)						Тура	of Facility (4 School (K-12								
Street Address 30 Route 513								Subchapter Other (i.e. pretc.)	8 (Oth				uilding	gs, ho	mes,	
City (5) Clinton							Squ	are Feet	# 0	of F	loors		Bldg	ı. Age		
County (6) Hunterdon			unty Co	ode (7) SE ONLY) _		_		rent Use (Prio rectional fa			demoli	shed)				
Name of Monitoring Firm Hired by Building Own Environmental Connection	er (8)	1.3	ASCM 1 00030					atement Con ave Inc	tracto	or (9	9)					
Street Address 120 N. Warren Street						Street 15 S		ess rset Place				33-2				
City, State, Zip Code Trenton, NJ 08608				38			0.3	Zip Code IJ 07012			74					
Project Manager for Monitoring Firm Jordan Reed	121	1 200	lephone 109) 39	e No. 92-4200		Telept (973		No. 0-0200		13.	License 00357	No.				
* on hold temp	heduled (Compl	etion D	ate (11)		Name	of O	SHA Monitor						VERSE S		
Occupancy Status During Abatement (Check C		temer	nt			Street	Add	ress								
Abatement Performed Outside of Normal Other – Describe:						City, S	State,	Zip Code			÷					
Scope of Work (Check All That Apply)	volensia		,								100000					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	TOWN -	ovatio	33.7					Full Containm Mini-Enclosur Glovebag Pro	e cedu	re	•					
	le l e	cation				- 1	का	Non-Exempte	(^)	and	Non-Fi	nable			ment	\dashv
Location of	Not	mally			De	scriptio	n of							Тур	е	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used S Maint Custoo ((i.e. th	erma surfa		ns ins			(S	mount pecify or LF)		Removal	Repair	Encapsulate	Enclosure		
	Yes	No	N/A												te	w
Blog 5 CoHage C			X	PARTIO	1	Wat	orp	rooping	1	8	5F		X			
								/								
Name of Registered Waste Hauler		l N.	JDEP V	Vaste	Сиьі	c Yards	5	Name	of Ren	aist	ered La	ndfill				
Progreen		H	auler ID 2051		of W	aste		Grow	s No	30,,,	/Fairle					
City, State East Brunswick, NJ			Disp	osal Da		City, S		e, F	PA							
Completed by Sharon Hendee	Title Presid	dent				Signat	ture	9/M /	4			Da	te ,	N.	η	11

Pantion

NUCK			NUI				AC 8:60 and 5:10)) 🖺 😉		<u>U</u>	7	
Date of Notification (1)					Name	e of Buildin	g Owner/Operator (2)	3			-	Ш
	03 /	19)		The state of the state of		lley Regional Sc	113	U JUL	- 5 2)19		9
Agencies Notified	Type Notific	ation			Stree	t Address						1	-
□ EPA	☐ Initial				28	West Gra	and Avenue		ASBESTO	S CON	TROL	8	
☑ DOLWD ☑ DHSS		17-014 CONTRA	2		City,	State, Zip 0	Code		LIC	ENSING	1		-
□ DCA	Amendm Emerger		265771 573	n	Мо	ntvale, N	J 07645						
(NJAC 5:23-8)	justificat		ioiaaiii	9	Name	of Contac	t		Telephone N	Number			
	☐ Cancella	ition			Ro	bert Dona	ahue		(201) 358	3-7004 E	xt 21	007	
					FA	CILITY IN	IFORMATION						
Name of Facility Where Al		Takin	g Place	e (3)				Type of Facility					
Pascack Valley High Street Address	School							School (K-1	2) 8 (Other than k	(12)			
200 Peirmont Ave								Other (i.e.,	private and com		uildin	gs,	
City (5)								homes, etc	•				
Hillsdale						COLFI	2	Square Feet	# of Floors	В	ldg. A	ge	
County (6))(STATE USE ONLY)	110,000	rior if being den	1:-11	50		
Bergen					Cour	ity code (/	(STATE OSE ONET)	High Scho		nolisnea)			
Name of Monitoring Firm H	lired by Buil	ding (Owner	(8)	ASCM	No.	Name of Abateme						
Health and Safety Se	73	12,222			001	17	SAI Environn						
Street Address						Sec. 1	Street Address				-		
PO Box 365							277 Fairfield	Road, Suite 1	02				
City, State, Zip Code							City, State, Zip Co	ode					
Berlin							Fairfield, NJ (7004					
Project Manager for Monito	oring Firm			Tele	phone	No.	Telephone No.		License No				
Jim Proctor				1		-1311	(973) 852-344		01349				
Start Date (10)06 /20 /						te (11) 19	Name of OSHA M						
						15	SAI Environm	ientai Service	es, LLC			4000	
Occupancy Status During / Facility Closed/Vacated				200000000	mont		Street Address	De-al 0.34.4	00				
☐ Abatement Performed (cribe	277 Fairfield I	33	U2 				
Time of Abatement:	AM	P	Λ/	_PM-		AM	City, State, Zip Co Fairfield, NJ 0						
Scope of Work (Check all t	hat apply)												
☐ >3 sf or >3 lf			M Pa	novati	on			ainment with Ne	gative Pressure	9			
≥160 sf or ≥260 lf				molitic			☐ Mini-Encl						
						1	Non-Exer Non-Exer	npted (*) and No	on-Friable Proce	edure			
Location of	F		11,555	Locat			Densitation of			Al	oatem	ent T	уре
Asbestos-Containing M	aterial (ACM	1)	Use	d Sole	ly by	Asbes	Description of stos Containing Mat		Amount	Re	Repair	En	En
TO BE ABAT IN Facility				intena todial s			, thermal systems in	nsulation,	(Specify	Removal	pair	caps	Enclosure
(13)				(12)	1		surfacing, VAT, other miscellaned		SF or LF)	2		Encapsulate	лге
			Yes	No	N/A							е	
Music Rooms					\boxtimes	Floor Ti	le/Mastic		2900 SF				
Music Rooms - Additio					Floor Ti	le/Mastic (Will n	ot be	800 SF					
						Perform	ed as per the re	quest of					
						The Ow	ner) Project is C	ompleted					
Name of Registered Waste			- 7158	18.55	JDEP V		Cubic Yards of	Name of Regi	stered Landfill	10			
Service Transport Gr	oup, Inc			24.7 44.7	auler ID SW21		Waste 20	Minerva L	andfill				
City, State				-			Disposal Date	City, State					
Yardley, PA							Various	Waynesbu	ırgh, OH				
Completed By (Print or Typ	e)	Title					Signature	A.		Date	/_	/	
Mary Petrovski		Pr	eside	ent			1/1/111	11/1/11	121	7/	51	11	7

State of New Jersey

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

Date of notinication () Pasacack Valley Regional School District Date of Notinication	Date of Notification (1)	72.66	15555			100000000000000000000000000000000000000			ner/Operator (- Comment	THE PERSON NAMED IN	.11	11 -	5	2010	02
DOLMO		28 /	19	-		Pas	scack Va	lley	Regional Sc	hool District	bd	H	00	/ L	~	2019	
Dirick D		100000	ation			Street	Address				1	L	-	-		-	- Control
DISS						28	West Gra	nd /	Avenue		Marie Sanda	A	SBES	TOS (CON	TRO	L&
Data (NJAC \$23-5)	[. (1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1						595-0-515 DAMES 15-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0				L. Wasses	NATURE OF THE PERSON	-	-10-11	OHVE	J	William Control
Cancellation									645								
Name of Facility Where Abstement is Taking Piace (3)	(NJAC 5:23-8)	justification	on)			Name	of Contac	t			Tele	phon	e Num	ber			- : 2 -
Name of Facility (Where Abatement is Taking Place (3)		☐ Cancellat	ion			Rol	pert Dona	ahue	9		(2	01) 3	58-70	04 Ex	t 210	007	
School (K-12) Street Address Stree						FA	CILITY IN	FOF	RMATION		11						
Sizer Address	Name of Facility Where A	Abatement is T	aking	Place	(3)					Type of Facility (4)				-11 1525		
Other (i.e., private and commercial buildings, homes, etc.) City (5)		h School								School (K-12)	(041-	41	- 1/ 10	N.			
County (6)															ilding	S,	
Hillsdale																55	
County (6) Bergen Name of Monitoring Firm Hired by Building Owner (8) Health and Safey Services, Inc Street Address PO Box 385 City, State, Zip Code Berlin Froject Manager for Monitoring Firm Jim Proctor Start Date (10) OB / 20 / 19 OT / 19 / 19 OCCUpancy Status During Abatement (Check only one) Time of Abatement: _AMPMPMAM Scope of Work (Check all that apply)											100000		rs	1,500	200	ge	
Bergen Name of Molitoring Firm Hired by Building Owner (8)										100000000000000000000000000000000000000					50		
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Malth and Safey Services, Inc Name of Abatement Contractor (9)						Cour	nty Code (7)(STA	ATE USE ONLY)			eing o	lemolis	shed)			
Health and Safey Services, Inc	•										g						
Street Address	F		2000	wner (8)						5.020						
277 Fairfield Road, Suite 102		ervices, Inc				0011	17			nental Services	s, LL	C					
City, State, Zip Code Berlin	0.1.0017.1001.000							Uparadia.			_						
Pairfield, NJ 07004	The companies of the co										2						
Project Manager for Monitoring Firm																	
Start Date (10)		Andre Fire			1			1000		07004	1						
Start Date (10)		toring Firm						1.505									1
SAI Environmental Services, LLC	ASSESSED CONTRACTOR	l c	Chadi	ulad C				,				7134	,				
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe ☐ Time of Abatement:AMPMAM ☐ PMAM ☐ PMAM ☐ PMAM ☐ Facility Closed (Check all that apply) ☐ 23 sf or ≥3 if ☐ Sepond Work (Check all that apply) ☐ 23 sf or ≥3 if ☐ Demolition ☐ Demolition ☐ Demolition ☐ Demolition ☐ Description of ☐ Asbestos-Containing Material (ACM) ☐ IN Facility ☐ (12) ☐ Yes No N/A ☐ Ph. Description of ☐ Asbestos Containing Material (ACM) ☐ Asbestos Containing Material (ACM) ☐ Specify ☐ Specify ☐ Specify ☐ Description of ☐ Asbestos Containing Material (ACM) ☐ Specify ☐ Specify ☐ Specify ☐ Description of ☐ Substation ☐ Normally ☐ Description of ☐ Asbestos Containing Material (ACM) ☐ Specify ☐ Specify ☐ Description of ☐ Asbestos Containing Material (ACM) ☐ Specify ☐ Specify ☐ Description of ☐ Specify ☐ Specify ☐ Description of ☐ Substation ☐ Specify ☐ Description of ☐ Asbestos Containing Material (ACM) ☐ Specify ☐ Specify ☐ Description of ☐ Specify ☐ Description of ☐ Specify ☐ Description of ☐ Specify ☐ Description of ☐ Specify ☐ Specify ☐ Description of ☐ Specify ☐ Description of ☐ Specify ☐ Specify ☐ Description of ☐ Specify ☐ Description of ☐ Specify ☐ Specify ☐ Description of ☐ Specify ☐ Description of ☐ Specify ☐ Description of ☐ Specify ☐ Specify ☐ Description of ☐ Specify ☐ Specify ☐ Description of ☐ Specify ☐ Specify ☐ Specify ☐ Description of ☐ Specify ☐ S					100		25 32 3				110						
Second					4					ional ocivioco	,	_					_
Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: AM-PM/PM-AM						ment				Road, Suite 10:	2						
Scope of Work (Check all that apply)							cribe										
Scope of Work (Check all that apply) Scope of Work (Check all that apply) Scope of Work (ACM)	Time of Abatement: _	AM	PM	/	_PM		AM	10.80									
Solution of Solution of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Yes No N/A N	Scope of Work (Check all	that apply)							ALLES MITS AND ALLES AND ALLES	0.752	-4:						
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Music Rooms Music Rooms - Additional Work Name of Registered Waste Hauler Service Transport Group, Inc City, State Yardley, PA Completed By (Print or Type) Mary Petrovski Is Location of Is Location of Asbestos Containing Material (ACM) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Persident Abatement Type Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Persident Abatement Type Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Persident Abatement Type Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Persident Abatement Type Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Persident Abatement Type Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Persident Abatement Type Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Persident Abatement Type Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Persident Abatement Type Procure Type Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Procure Type Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Procure Type Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Procure Type Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Procure Type Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) About Type Asbestos Containing Material (ACM) (i.e			- 1	⊠ Re	novat	ion					auve	Press	ure				
Secretary Containing Material (ACM) Asbestos Containing Material (ACM) Asbestos Containing Material (ACM) Amount (Specify SF or LF) Containing Material (ACM) Containing Material (ACM) Amount (Specify SF or LF) Containing Material (ACM) Containing Material (ACM) Amount (Specify SF or LF) Containing Material (ACM) Containing Material (ACM) Containing Material (ACM) Amount (Specify SF or LF) Containing Material (ACM) Containing Material (ACM) Amount (Specify SF or LF) Containing Material (ACM)	≥160 sf or ≥260 lf		1	☐ Dei	moliti	on								22			
Normally Used Solely by Material (ACM) Specify Secretary S				le	Loca	tion	T		⊠ Non-Exe	mpted (*) and Nor	n-Fria	ole Pr	oceau				
Asbestos-Containing Material (ACM) Your Dear Aba Custodial Staff? (13) N Facility (13) Yes No N/A	Location	of		N	lorma	ally			Description o	ıf				10000		1000000	
Music Rooms Continue Contin)						Containing Ma	terial (ACM)				Ren	₹ер	Enc	Enc
Music Rooms							(I.e							SVOL	air	apsı	uso
Music Rooms		•	-	,,		1	-				_		/	_		ılate	Ге
Music Rooms - Additional Work	Music Rooms		-			-	Floor T	ile/N	Mastic		2	900	SF	M		П	
Name of Registered Waste Hauler Service Transport Group, Inc City, State Yardley, PA Completed By (Print or Type) Mary Petrovski Mary Petrovski Mary Petrovski Mary Petrovski Cubic Yards of Waste Hauler ID No. SW2117 Cubic Yards of Waste President Cubic Yards of Waste Cubic Yards of Waste Prosident Cubic Yards of Waste Cubic Yards of Waste Various Name of Registered Landfill Minerva Landfill City, State Waynesburgh, OH Completed By (Print or Type) Mary Petrovski Cubic Yards of Waste Yards of Waste Various Signature Signature August August City State Waynesburgh, OH City State Waynesburgh, OH Completed By (Print or Type) Mary Petrovski City State Waynesburgh, OH			_									-					
Name of Registered Waste Hauler Service Transport Group, Inc City, State Yardley, PA Completed By (Print or Type) Mary Petrovski NJDEP Waste Hauler ID No. SW2117 NJDEP Waste Hauler ID No. SW2117 Disposal Date Various Name of Registered Landfill Minerva Landfill City, State Various Waynesburgh, OH Date 6/28/2019	music Rooms - Additi	IOIIAI VVOIK	-		_		FIOOLI	iie/iv	lastic			000 8	or_				
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Service Transport Group, Inc Hauler ID No. SW2117 City, State Yardley, PA Completed By (Print or Type) Mary Petrovski Hauler ID No. SW2117 Disposal Date Various Waste 25 City, State Waynesburgh, OH Signature Date 6/28/2019				Ш	Ц												
City, State Yardley, PA Completed By (Print or Type) Mary Petrovski SW2117 SW2117 SW2117 Disposal Date Various Waynesburgh, OH Signature Mary Landini Disposal Date Waynesburgh, OH Date 6/28/2019					- 1			1.77					ill				
Yardley, PA Completed By (Print or Type) Mary Petrovski Title President Various Waynesburgh, OH Signature May Public Completed By (Print or Type) Obate 6/28/2019	The state of the s	roup, Inc						2	5		ndfil	l,					
Completed By (Print or Type) Mary Petrovski President Signature Multiplication 6/28/2019																	
Mary Petrovski President // Aug Julium 6/28/2019	Yardley, PA							V	arious	Waynesbur	gh, (HC					
77/9009/0009/000019		rpe)	Title	1	300-7				Signature	v. A.		/	Da	ate			
			Pr	eside	nt				1/14	My Keller	DI	N		6/28	/20	19	

ASB-41 MAY 11

* 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)

D	ECEIVE	M
A CONTRACTOR OF THE PROPERTY O	JUL - 5 2019	IJ
	ASSESTOS CONTROL & LICENSING	

Date of Notification (1)					Name	of Building	g Owner/Operator ((2)	17 11 90) 2	919	-11
06 /	19 /	10			1		lley Regional So	1 B)					-
	19 / -	10			Газ	SCACK VA	ney Regional So	nooi District	ASSEC	FC) C C			
Agencies Notified	Type Notifica	ation			Street	Address	Water		ASSES	ICENS	SINIC	HOL	- &
□ EPA	☐ Initial				28	West Gra	nd Avenue		The state of the s	100111	31140	-	-
☑ DOLWD ☑ DHSS	Amended Amendme				City, S	State, Zip C	Code						
□ DCA	⊠ Emergen				Mo	ntvale, N	J 07645						
(NJAC 5:23-8)	justification		adding.		Name	of Contac	t		Telephone Nun	nber			
***************************************	☐ Cancellat	ion			Rol	pert Dona	ahue		(201) 358-7	004 Ex	t 21	007	
					FΔ	CILITY IN	FORMATION		. ,				
Name of Facility Where A	hatement is T	aking	Place	(3)	170	OILITT III	OKMATION	Type of Facility	(4)				
Pascack Valley Hig		aiting	1 lacc	(5)				School (K-12					
Street Address	ii ociiooi								3 (Other than K-1	2)			
200 Peirmont Ave								Other (i.e., p	rivate and comme		uilding	IS,	
								homes, etc.)				1000	
City (5)								Square Feet	# of Floors	BI	dg. A	ge	
Hillsdale								2900	1		-		
County (6)					Cour	ity Code (7)(STATE USE ONLY)	10	ior if being demol	shed)			
Bergen								School					
Name of Monitoring Firm	Hired by Build	ding O	wner (8)	ASCM	No.	Name of Abatem	ent Contractor (9)					
Health and Safey So	ervices, Inc				0011	17	SAI Environr	nental Services	s, LLC				
Street Address							Street Address						
PO box 365							277 Fairfield	Road, Suite 10	12				
City, State, Zip Code							City, State, Zip C	ode					\neg
Berlin							Fairfield, NJ	07004					
Project Manager for Moni	toring Firm			Tel	ephone	No	Telephone No.		License No.				
Jim Proctor					56-452		(973) 852-344	LA	01349				
Start Date (10)	5	Schedu	ıled Co		etion Da		Name of OSHA N		01010				-
_ 05 / 20 /					0 /			nental Services	LIC				
								incintar oci vicci	3, LLO				
Occupancy Status During							Street Address		_				
 ☑ Facility Closed/Vacate ☑ Abatement Performed 						oribo	A 10	Road, Suite 10	2				
Time of Abatement:							City, State, Zip Co						
A service of the serv							Fairfield, NJ	07004					
Scope of Work (Check all	that apply)						□ Full Con	tainment with Nee	active Pressure				
☐ ≥3 sf or >3 lf		N	⊠ Rei	novat	ion		☐ Mini-End	tainment with Neg losure	jative Pressure				
≥160 sf or ≥260 lf		1	☐ Der	moliti	on			g Procedure					
								mpted (*) and No	n-Friable Procedi	ıre			
				Loca lorma			120 (4.10)	_		Ab	atem	ent T	ype
Location Asbestos-Containing I		n			ely by	Ashe	Description of stos Containing Ma		Amount	Re	Re	Ē	四
TO BE ABA		'			ance/		., thermal systems		(Specify	Remova	Repair	cap	COS
IN Facilit	ty		Cust	(12)	Staff?		surfacing, VAT	50 00	SF or LF)	va	~	Encapsulate	Enclosure
(13)		1	Yes	No	N/A	1	other miscellane	ous)				ate	
		-			37.57.00						_	_	
Music Rooms						Floor T	ile/Mastic		2900 SF	\boxtimes			Ш
			П	П									
		_		=	+					ᆜᆜ	Ш	Ш	닏
Name of Registered Wast	te Hauler			1325	NJDEP \		Cubic Yards of	Name of Regis	tered Landfill				
Service Transport G	Group, Inc			1	lauler II SW21		Waste 20	Minerva La	indfill				
City, State		0.00.1			34471	11	Disposal Date	City, State					
Yardley, PA							Various	Waynesbu	rah. OH				
Completed By (Print or Ty	ma)	Title					. /	A/		atc			
Mary Petrovski	(pe)	(3) (3)	eside	n4			Signature,	WINI	The last	ate	0 10		
Wary Petrovski		F	esiue	HIL.			11000	www	v ~	6/1	9/20)19	<u></u>

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

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11 1	16	1111	_ =	2040	

Cle 14 02
Date of Notification (1) Name of Building Owner/Operator (2) 6/28/19 Claudia Lavecchio Agencies Notified Type Notification Street Address **ASBESTOS CONTROL & EPA** X Initial LICENSING City, State, Zip Code DEP Amended X Haledon, NJ 07508 DOL Amendment # Emergency (including Name of Contact Telephone Number X DOH justification) Eileen Mellay DCA Cancelation **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) Other (i.e. private & Commercial buildings, homes, etc.) X City (5) Square Feet # of Floors Bldg, Age Garfield, NJ 1285 SF 2 92 County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) Bergen Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Unicorn Contracting Corp. Street Address Street Address 32 Willow Way City, State, Zip Code City, State, Zip Code Woodland Park, NJ 07424 Project Manager fo Monitoring Firm Telephone No. Telephone No License No. 973-333-9176 01331 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 7/7/19 7/8/19 Envirovision Consultants, Inc. Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Rd., Bldg. 35-E Abatement Performed Outside of Normal Facility Hours City, State, Zip Code X Other - Describe: 08:00 AM Start Fair Lawn, NJ 07410 Scope of Work (Check All That Apply) X ≥3 sf or ≥3 lf X Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 lf Demolition X Mini-Enclosure X Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Normally Type Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e. thermal systems insulation. (Specity Encapsulate Custodial Staff? In Facility surfacing, VAT, or SF or LF) (12)(13) other miscellaneous) Yes No N/A Basement X Pipe Insulation 150 LF Name of Registered Waste Hauler NJDEP Waste Hauler ID No. Cubic Yards of Waste Name of Regustered Landfill Unicorn Contracting Corp. 0035844 2+ Fairless Hills Landfill City, State Disposal Date City, State Woodland Park, New Jersey TBD Morrisville; PA Completed by Title Signature Date Zhivko Nikolov President 6/28/19

10000000000000000000000000000000000000			st	ate of	New J	ersey N	6		Check	# 16	671	
Inv-16	1937	NOTI (Pursu	ant t	o NJAC	8:60-	TOS ABATEMENT 7 and 12:120-7		In E	G	3	\mathbb{W}	EI
Date of Notification	(1)		1			Owner/Operator	(2)			id.	Control of the A	-1
7/1/2019			De	nnis	Don	ahue					1	- Transmission
Agencies Notified	Type Notific	ation	Stree	et Addı	ess				JUL	- 5	2019	
[]EPA	[X] Initial Notific	ation										
[]DEP	[]Amended			State			•	AS	BESTO			1.8
[X]DOL	Notific	ation	Inter	brew	000,	NJ,07040			LIU	ENSIN	G	
[X] DOH	[]EMERGENC			of Cor			Telepho	ne Number	250,700			
[]DCA	[]Cancella		De	nnis	Don	ahue						
Name of Westlife Whe	77-4					INFORMATION					·	
Name of Facility When Dennis Donahue		is Taki	ng Pl	ace (3))	•	Type of Facil	Lity (4)				
Dennita Donaine	-						[]School	(K-12) oter 8 (Oth	or ther	K-1	2)	
Street Address				7917				(i.e., priv				
1081							cial l	ouildings,	homes,	etc.)	
	398						Square Feet	# of Flo	ors B	ldg.	Age	
City		County			1000000	nty Code (7)						
Maplewood					(SI	ATE USE ONLY)	Current Use	(Prior if b	eing de	molis	shed)	
		Essex					1					
Name of Monitoring F: Owner (8)	irm hired by	Buildin	g AS	CM No.		Name of Abater						
N/A						AZTECH M	ANAGEMENT	, Inc.				
Street Address						Street Address						
							topher St					
City, State, Zip Code	9				200	City, State, 2		4.0	20			
						Montclai	r, NJ 070	142				
Project Manager for 1	Monitoring Fi			e Numb	er	Telephone Numb			License		oer	
		M	A			(973) 744	-8800		003.	71		
Scheduled Start Date	(10) Sche	d. Compl		Date	(11)	Name of OSHA N	Monitor					
07 24 19	1		25	19		N/A						
Month Day Ye Occupancy Status Duri			only	Year		Street Address						
[X] Facility Clos	ed/Vacated Du						**					
of Abatement []Abatement Per		e of No	rmal	Facili	tev	City State 7	rin Code					
Hours - Descr	ibe: «OffHours	Descri	pt»		-1	City, State, 2	arp code					
[]other - Descr	ibe: «Other Oc	cupancy	Desc	ript»								
Scope of Work (Check	all that app	ly)				r 155-11 (Containment wi	th Nogativ	o Proce	1120		
[X]>3 sf or :	>3 lf	[2	K]Ren	ovation	1		Enclosure	I Negativ	e rress	ure		
[]≥160 sf o	r ≥260 lf	Į]Dem	olition	1		bag Procedure riable Procedu					
		1	Is		· ·	[]NON-E	crable bloced	Tre Tre	Ab	ateme	nt T	ype
Location			ocati ormal			Description				T	E	E
Asbestos-Cont Material (Used Solel			Asbestos-Cont Material (1970	Amount (Specif	E	R	C	010
TO BE ABA		B	y Mai	n-	75	(i.e., thermal	\$400 mpin	SF or	0	E P A	P	0
In Facili	ty	Cu	stodi	al	20181000	sulation, surfa or other miscel	1시 구시 1 1000 -	LF)	V A	IR	SU	S
(13)		Yes	aff (N/A		or order miscer	Laneous)		L		L	R
Basement				X	Pipe	Insulation	on	140 LF	X			
		1										
Name of Registered Wa	ste Hauler	UNI	DEP W	aste	Cul	oic Yards	Name of Regi	stered Lan	dfill			7
AZTECH MANAGE	MENT, IN	C. Ha	uler 704(ID No.	of	Waste 1.5	Tri - S	tate				
City, State		-	1020		Dis	posal Date	City, State				-	
Montclair, NJ	07042					7/25/19	Bronx,	NY, 104	74			
								7				
Completed By (Print o						Signature	41.	1/	Date			
Constantine Vi	vian Pr	eside	nt			1	na bita	ollina	7/1/	2019		
92 Oakland Rd							101 C	×1-1-				

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CHIMNU			NOTI	DIS	State of Nev	Ë\$TO	SABATE	MEN	T dl		1		2/	L H	Pr	int Fo
Date of Notification (1)	0 -11152	f a		Name	of Building	Owne	er/Operator	870		en	9-	<u> </u>		4		E
7/1/19	Time Nationalism	-/			amin Hell	man					3					
Agencies Notified	Type Notification			Street	Address						and the same	JI	JL	- 5	201	9
EPA DEP	X Initial Amended			City. S	tate, Zip Co	de				- 1	1 1000					
× DOL	Amendmen				well NJ 0		6			-	Δ_	SRE	STO	s cc	NTF	ROL 8
ĭ DOH	Emergency justification)		g	Name	of Contact					Tel	ephone	Num	delC	ENS	NG	
☐ DCA	Cancellation			Benja	amin Helli	man							-			
Name of Facility Where A	hatement is Takir	a Place	(3)	FAC	CILITY INFO	DRMA	ATION	-								
home	Datement is Takii	ig Place	(3)					Тур	e of Facility (1 50						
Street Address								H	School (K-1 Subchapter		er than	K-12	1			
								×	Other (i.e. p	rivate 8	& comn	nercia	l build	dings,	hom	es,
City (5)					_ = _ <u></u>			Squ	etc.) are Feet	# 01	Floors		ТВ	ldg. A	ae	
Caldwell								100		1				0	.30	
County (6)					Code (7)			Curr	rent Use (Prid	or if bei	ng dem	olishe	ed)		-	
Essex	, , , , , , , , , , , , , , , , , , ,				USE ONLY)	No.		hor								
Name of Monitoring Firm I	Hired by Building	Owner (8)	ASC	M No.				atement Con							
Street Address							Street		rironmenta	Serv	ices,	LLC				
							10.000		ess 483, 4 E G	ate D	rive					
City, State, Zip Code									Zip Code	ato D	1140			-		
									d, NJ 074	18						
Project Manager for Monit	oring Firm			Telepho	one No.		Teleph				Licens	se No	•75			
0: -5 - (-0)							973-	764-	2276		703					
Start Date (10) 7/20/19		Schedu 7/26/1		mpletion	Date (11)		Name	of OS	HA Monitor							
Occupancy Status During	Abatement (Char		7.7					A -1 -1								
V 1 100 100 100				anne e e			Street	Adare	ess							
Facility Closed/Vacat Abatement Performed Other – Describe: ba	d Outside of Norn	nal Facilit	y Hour	nent s			City, S	tate, 2	Zip Code							
Scope of Work (Check All	That Apply)												_77.00			_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demoli				×	Mi Gl	ull Containme ini-Enclosure ovebag Proc on-Exempted	edure					_	
		10	s Locat	ion					JA Exempted	/ June	14011-1	Habie			ment	
Location of	of		Norma	lly		D	escription	of						Ту	ре	
Asbestos-Containing N TO BE ABAT			ed Sole aintena		Asbesto	os Co	ntaining M	lateria	al (ACM)		nount				Щ	_
In Facility		Cus	todial ((12)	Staff?	(i.e. t		al systems facing, VA		ation,		pecify or LF)		Remova	Repair	Encapsulate	Enclosure
(13)			(12)	-	1	other	miscellan	eous)			8		ova	bair	sula	Sure
		Yes	No	N/A											e e	w
basemer	nt			х		pip	e insulat	tion		80) LF		х			
Name of Registered Waste	Hauler		1000	JDEP W			c Yards		Name of F	Register	red Lan	dfill				
Newark Carting			0.000	lauler ID 4509	No.	of Wa)		Grand C		I Sani	itary	Lan	dfill		
City, State Newark, NJ						Dispo	osal Date		City, State							
Completed by		Title					Signature		Pen Arg	Iyi PA	Т	Date				
A. Scott Higgins		200000	ident				J.griditii Ç	/	/			7/1.				
								-11				1512 1/	-			

Ch 1550	0		NOTIF (F	ICATTO	tale of Ne NOF ASE t to NJAC	ESTOS.	ABATEMENT	D	EC		\mathbb{V}	7 E		
Date of Notification (1) 07/01/2019	11-104	08		Name of Union	of Building Congreg	Owner/Cation Ch	Operator (2) nurch	A CONTRACTOR OF THE PARTY OF TH	JUL	Che	c ₽ #)'	9 556		圳
Agencies Notified EPA	Type Notification			176 C	Address ooper Ave				ASBESTO			ROL	3	-
☑ DEP ☑ DOL	Amended Amendment Emergency	(including		Montcl	ate, Zip Co lair, New of Contact		07043			ZENSI			90HHQQ0	POSMOZOL
☑ DOH ☑ DCA	☐ Cancellation	stification)		Ann A					Telephone 973-744-		Jei			
Name of English Where	0 b - t t i - T - t i -	Di (0		FAC	ILITY INF	ORMATI								
Name of Facility Where A Union Congregation C	Church	ig Place (3)				Type of Faci							
Street Address 176 Cooper Avenue							☐ Subcha ☑ Other (i.	pter 8 (Other e. private & c	than K-12) ommercial b	uilding	js, ho	mes,	etc.)	
City (5) Montclair, New Jersey	07043				0)		Square Feet 30,000		# of Floors	3		ldg. A O+	ge	
County (6) Essex				County (STATE	Code (7) USE ONLY)	Current Use	(Prior if being Church		d)				
Name of Monitoring Firm Detail Associates Inc	Hired by Building	Owner (8)		ASCI	M No.		Name of Aba Lilich Corpo	tement Contro ration	actor (9)					
Street Address 560 Sylvan Avenue, S	uite 3065					8	Street Addres 246 Union E							
City, State, Zip Code Englewood, New Jerse	ey 07632						City, State, Z Totowa, Ne	ip Code w Jersey 07	512					
Project Manager for Mon Anthony Valentine	itoring Firm			Telepho 201-56	one No 9-6708		Telephone No. 973-225-84		Licen 0110	se No.				
Start Date (10) 07/08/2019		Schedule 07/17/1	ed Cor	npletion	Date (11)		Name of OSH Iris Environ		ratories, L	LC				
Occupancy Status During Facility Closed/Vaca				ont			Street Address 2333 Route							
☐ Abatement Performe ☐ Other – Describe:	ed Outside of Norn	nal Facility	Hours	ent 5			City, State, Z Union, NJ 0	ip Code 7083						
Scope of Work (Check A	I That Apply)										14-11-5			-
□≥3 sf or ≥3 lf 図≥160 sf or ≥260 lf			tenova emolit				☐ Min	I Containment ni-Enclosure vebag Proced -Exempted an	ure / Limite	d Cont	ainm	ent T	ent	
Location	of	2000	Locat		Ashas		scription of aining Material					Abate Ty		
Asbestos-Containing TO BE ABA In Facili (13)	Material (ACM)	Ma	d Sole intena odial ((12)	nce/	(i.e.	thermal surface	systems insula cing, VAT, or niscellaneous)	ation,	Amount (Specify SF or LF)		Remova	Repair	Encapsulate	Enclosure
	No	N/A							_		ite	TO .		
Boiler Room		X			Boiler II					0 SF				
Breeching		X					tion Materia	al		5 SF				
Boiler Room		X			Pipe Ins	ulation)		30	00 LF	X			
Name of Registered Was	te Hauler		Н	JDEP W lauler ID		Cubic of Was	ste	Name of Re		ndfill				
Lilich Corporation				18724		20		Fairless La	andfill					
City, State Totowa, New Jersey		- P				07/10/	1	City, State Morrisville	, PA					
Completed by Adriana Olejarova		Title Presi	dent			S	ignature	188		Date 07/	01/2	019		

		NO		ICATION	te of New OF ASBE to NJAC 8	STOS	BATEMENT	DE	BE] V E	The state of the s			
Date of Notification (1) 06/05/2019				Name of Union C	Building Congrega	Owner/O tion Ch	perator (2) urch	ال ال	JL -	5 2019 _{he}	;k#-	1513		
Agencies Notified EPA DEP	Type Notification ☑ Initial ☐ Amended			City, Stat	oper Ave	de	77043	ASBE	STOS LICEI	CONTROL	&	-		
☑ DOL ☑ DOH ☑ DCA	Amendment Emergency just Cancellation	(including stification)		Name of Ann Ayr	e					ephone Numb 3-744-7424	er			
Name of Facility Where Union Congregation (Street Address 176 Cooper Avenue		g Place (3)		FACIL	LITY INFO	RMATIO	Type of Fac	K-12) pter 8 (Othe		<-12) ercial building	s, hor	mes,	etc.)	
City (5) Montclair, New Jersey	y 07043						Square Feet 30,000		# of 1	Floors	50 50	dg. A	ge	
County (6) Essex		2		County C	Code (7) ISE ONLY)		Current Use	(Prior if bei Chur		iolished)				
Name of Monitoring Firm Detail Associates Inc	n Hired by Building	Owner (8)		ASCM	l No.		Name of Aba Lilich Corpo		ntractor	(9)				
Street Address 560 Sylvan Avenue, S	Suite 3065						Street Addre							
City, State, Zip Code Englewood, New Jers	sey 07632						City, State, Z Totowa, Ne		07512					
Project Manager for Mor Anthony Valentine	nitoring Firm			Telephor 201-569			Telephone N 973-225-84			License No. 01104				
Start Date (10) :07/01/2019		Scheduled 07/10/19		mpletion [Date (11)	•	Name of OSI Iris Environ		porator	ries, LLC				9
Occupancy Status Durin Facility Closed/Vaca Abatement Perform Other – Describe:	ated During Entire I	Period of Ab	atem				Street Addre 2333 Route City, State, Z Union, NJ 0	22 West						
Scope of Work (Check A	All That Apply))									ú		
□≥3 sf or ≥3 lf ⊠≥160 sf or ≥260 lf			enova	200000000000000000000000000000000000000	•		☐ Mi	ni-Enclosure vebag Prod	e edure /	Negative Pro Limited Cont on-Friable Pro	ainm	ent T	ent	
	2	100	Locat	The state of the s			scription of	¥				Abate Ty	ment pe	8
Asbestos-Containing TO BE AB In Fact (13)	g Material (ACM) ATED ility	Used Mair Custo	Sole ntena odial (12)	ely by ince/ Staff?		thermal surface	taining Materia systems insul cing, VAT, or niscellaneous)	ation,	(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
Boiler Room		Yes	No	N/A	Boiler Ir	nsulatio	on			300 SF	Х			
Breeching		X					tion Materi	al		75 SF				
Boiler Room		X		_	Pipe Ins					300 LF			1	
Name of Registered Wa	ste Hauler		1 10	NJDEP W Hauler ID 18724		Cubic of Was	7.77	Name of Fairless	- 3	ered Landfill	Sec. 10.			

Disposal Date 07/10/2019

Signature

Title President Date 06/05/2019

City, State Morrisville, PA

City, State Totowa, New Jersey

Completed by Adriana Olejarova

NOTIFICATION & **Check 2502** (Pursuant to N.J.A.C.)8:60 and 12:120) Date of Notification (1) Name of Building Owner / Operator (2) 6/26/2019 Servicemaster Agencies Notified Type Notification Street Address X **EPA** PO Box 177 DEP Initial City, State & Zip Code ASBESTOS CONTROL & 図 DOL Amended Vineland, NJ LICENSING \boxtimes DOH X Emergency Name of Contact Telephone Number DCA Cancellation Jesse Hand 856-692-4269 **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) Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 2000 +50 Vineland Cumerland Current Use (Prior if being demolished) Residential Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Alpha Environmental LLC Street Address Street Address P O Box 8297 City, State & Zip Code City, State & Zip Code Trenton, NJ 08650 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number 609-847-2956 01222 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 6/28/2019 6/29/2019 **EMSL** Analytical 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 Hours - 7am to 3pm City, State & Zip Code Describe: Cinnaminson, NJ 08077 Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 lf Renovation Mini-Enclosure ≥160 sf ≥260 If Demolition Glove Bag Procedures Non-Exempted and Non-Friable Procedure Location of Is Location Description of Amount Abatement Type Asbestos-Containing Normally Used Asbestos-Containing (Specify Material (ACM) Solely by Material (ACM) SF or LF) Encapsulate Enclsoure Remova TO BE ABATED Maintenance or (i.e., thermal systems **Custodial Staff?** in Facility insulation, surfacing, VAT (13)(12)or other miscellaneous) Yes No N/A 1st Floor X VAT X 320sf Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste ALPHA ENVIRONMENTAL LLC 00033330 **Grows Landfill** City, State Disposal Date City, State Trenton, NJ Various Morrisville, PA Completed By (Print or Type) Title Signature Date Rod Richardson Project 6/26/2019 Manager

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Date of Notification (1)	21 /	19		Cura-cus	The contribution of the			er/Operator (sity-Office	of Design and	Construction	!	5 20	019	The state of the s
Agencies Notified EPA	Type Notific				0.0000	t Address DEIm Dr.				ASBES	ros c	ONT	ROL	&
☑ DOLWD ☑ DHSS	Amended Amendm		-6/28	/19	10	State, Zip (deresson						
☐ DCA	☐ Emergen		cluding	1		nceton, N		544		·				
(NJAC 5:23-8)	justificati				Japanes	of Contac	77.75			Telephone Num				
	☐ Cancella	tion			Ro	bert Orte	ego			609-258-184	1			
					FA	CILITY IN	NFOR	MATION						
Name of Facility Where A		Taking	Place	(3)					Type of Facility					
Princeton Universit	У								School (K-12		1)			
Street Address										B (Other than K-12 rivate and comme		ildino	is.	
31 Edwards Place			60. T. 101-01.						homes, etc.)				• 100 fo	
City (5) Princeton									Square Feet	# of Floors		dg. A 70	ge	
County (6)					Cour	nty Code (7	7)/STAT	E USE ONLY)	Current Use (Pri	ior if being demoli		, ,		-
MERCER					0001	ity code (i	MOTATI	L OOL ONLI)	Vacant Resi		sileu)			
Name of Monitoring Firm	Hired by Build	dina O	wner /	'81	ASCM	No	Nam	e of Ahateme	ent Contractor (9)					-
TTI Environmental		umg C		.0)	7100111	110.			VIRONMENTAI					
Street Address			Harris					et Address	VIICONNENTAL	L, INC.				
1253 North Church	Rd						0.000000	23 BEAVE	PSTREET					
City, State, Zip Code								State, Zip Co						
Moorestown, NJ 08	057							RISTOL, PA						
Project Manager for Moni				Tal	ephone	No		ohone No.	19007	License No.				
Michael Keehn	toring r inti			The second second	09-386		20000000	5-788-6040		00509				
Start Date (10)		Schedu	ıled C	ompl	etion Da	ite (11)	Nam	e of OSHA M	lonitor					
ON HOL		2			/ .		BF	RISTOL EN	VIRONMENTAI	L, INC.				
Occupancy Status During				335, 5050			Seminaria de la constanta de l	et Address						
☐ Facility Closed/Vacate ☐ Abatement Performed								23 BEAVER						
Time of Abatement: 7							0.0000000000000000000000000000000000000	State, Zip Co						
Scope of Work (Check all	that apply)							•						
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			⊠ Re □ De	nova moliti				Mini-Enc Glovebag	g Procedure	pative Pressure n-Friable Procedu	re			
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Location	(T(A))			Norma				Description o	P.D. and the control of the control		-	_		
Asbestos-Containing I TO BE ABA		1)			ely by ance/			ontaining Ma nal systems i		Amount (Specify	Remova	Repair	Encapsulate	Enclosure
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(13)		-		(12)	T			er miscellane					late	Ф
Throughout			Yes	No	N/A	loint C	'amna	und		20.65				
Tilloughout					1	Joint C	ompo	unu		20 SF		Ш	Ш	Ш
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Name of Registered Wast	e Hauler				NJDEP I	Waste	Cubic	Yards of	Name of Regis	tered I andfill	10			
BRISTOL ENVIRON		VC.		100	Hauler II	D No.	Wast		FAIRLESS					
City, State					18706	5	Dieno	sal Date	City, State					
BRISTOL, PA 19007							Dispo	oai Dale		LLE, PA 19067				
Completed By (Print or Ty		Title					1	Signature	100000000000000000000000000000000000000		ate			
Brian Scafiro		100000	timat	tor				Prince	Scotion	1mc 1	n -	28	1/	7

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NIAC 8:60 and 5:46)

(Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 6 21 19 Princeton University-Office of Design and Construction Agencies Notified Type Notification JUL Street Address ☐ EPA 200 Elm Dr. □ DOLWD ☐ Amended City, State, Zip Code ☑ DHSS Amendment # ASBESTOS CONTROL & Princeton, NJ 08544 □ DCA ☐ Emergency (including) LICENSING justification) Name of Contact (NJAC 5:23-8) Telephone Number ☐ Cancellation Robert Ortego 609-258-1841 FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Princeton University School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 31 Edwards Place homes, etc.) City (5) Square Feet # of Floors Bldg. Age Princeton 70 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) MERCER Vacant Residence Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) TTI Environmental Inc BRISTOL ENVIRONMENTAL, INC. Street Address Street Address 1253 North Church Rd 1123 BEAVER STREET City, State, Zip Code City, State, Zip Code Moorestown, NJ 08057 BRISTOL, PA 19007 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Michael Keehn 609-386-8800 215-788-6040 00509 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 7 / 1 / 19 7 / 31 / 19 BRISTOL ENVIRONMENTAL, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 1123 BEAVER STREET Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: 7:00AM-5:30PM/____PM-___AM BRISTOL, PA 19007 Scope of Work (Check all that apply) ☐ Full Containment with 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 Abatement Type Normally Location of Description of Used Solely by Repair Enclosure Asbestos-Containing Material (ACM) Removal Encapsulate Asbestos Containing Material (ACM) Amount TO BE ABATED Maintenance/ (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (13)(12)other miscellaneous) Yes No N/A Throughout X Joint Compound 20 SF \boxtimes П П П П П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste BRISTOL ENVIRONMENTAL, INC. FAIRLESS LANDFILL 18706 City, State Disposal Date City, State BRISTOL, PA 19007 MORRISVILLE, PA 19067 Completed By (Print or Type) Title Signature Brian Scafiro Estimator

ASB-41 MAY 11 B 5 190 82

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

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Date of Notification (1) 07/01/2019			Name o	f Building	Owner/0	Operator (2) I of Education	IK		Chec	k No	. 15	43	
Agencies Notified Type Notification			Street A 356 Elv	ddress wood Av	enue		H L JI	JL 5	2019	1 1 1	IJ		
☐ EPA ☐ Initial ☐ Amended ☐ DOL Amendment #_	1			ate, Zip C		Jersey 0797	ASBE	STOS CON		&			
☐ Emergency (in ☑ DOH justification)		-	Name o	f Contact Trench		,		Telephone 908-464-	Numbe	ſ	ericumy-c		
DCA Cancellation	-			LITY INF	ODMAT	ION		900-404-	9042				
Name of Facility Where Abatement is Taking New Povidence High School	g Place (3)		FACI	LITTINE	OKWATI	Type of Fac	cility (4)					- 35	
Street Address 35 Pioneer Drive						□ School □ Subcha □ Other (i.	(K-12) pter 8 (Other the .e. private & co	nan K-12) mmercial bi	uildings,	hom	es, e	etc.)	
City (5) New Providence, New Jersey 07974	63					Square Fee 20,000	t	# of Floors 2		Bldg 50-	g. Ag	je	
County (6) Bergen				Code (7) USE ONLY)	Current Use	(Prior if being High Scho		1)				
Name of Monitoring Firm Hired by Building C Westchester Environmental, LLC	Owner (8)		ASCN	No.		Name of Aba Lilich Corpo	atement Contra oration	ictor (9)					
Street Address 1248 Wrights Lane			1			Street Addre 246 Union							
City, State, Zip Code West Chester, PA 19380						City, State, Z Totowa, Ne	Zip Code ew Jersey 075	512					
Project Manager for Monitoring Firm Philip Conteh			Telephor 610-43			Telephone N 973-225-84		Licens 0110					
Start Date (10) 07/01/2019	Scheduled C 07/08/201		letion Da	te (11)		Name of OS Iris Environ	HA Monitor mental Labor	atories, LL	_C				
Occupancy Status During Abatement (Check	Only One))				Street Addre							
□ Facility Closed/Vacated During Entire Pe □ Abatement Performed Outside of Norma □ Other – Describe: □ Scope of Work (Check All That Apply)	riod of Abate I Facility Ho	emei	nt			2333 Route City, State, Z Union, NJ 0	ip Code						
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		nolitio				☐ Min	Containment on ni-Enclosure ove Bag Proced n-Exempted (*)	dure / Limite	ed Conta	inme	ent &	Tent	f
	Is Lo	catio					, , ,	Amou (Spec	nt ify			nent e	
Location of Asbestos-Containing Material (ACM)	Used S	Solel	y by	Asbe		Description of taining Materia	al (ACM) (i.e.	SF of L	_F)				
TO BE ABATED	Mainte Custod			ther	mal syst	ems insulation	, surfacing,			Re	Z	Enca	En
In Facility (13)		12)			othe	VAT, or er miscellaneo	us)			Removal	Repair	Encapsulate	Enclosure
	20002	No	N/A							/al	Ξ.	ilate	ıre
Cafeteria		X			Tr	ansite Panel	S	1346 \$	SF	X			
<i>2</i> .													
							11						
Name of Registered Waste Hauler		1,100,000	JDEP W		Cubic	INTERNATION IN	Name of Reg	gistered Lan	ıdfill				
Lilich Corporation			auler ID I 8724	NO.	of Was		Fairless La	andfill					
City, State Totowa, New Jersey	Title				07/08/	al Date 2019	City, State Morrisville,	PA					
Completed by Adriana Olejarova	dent			S	igriature	\UQ		Date 07/01	/201	9			

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

Date of Notification (1) 06/21/2019		N:	ame of Buildin ew Providen	a Owner/	Operator (2)	ation	Ch	eck No	15	43	
Agencies Notified		St	treet Address 56 Elwood Av			JUL	-5 2019 				
☑ DEP ☐ Amended ☑ DOL Amendment #		Ci	ity, State, Zip (ew Providenc	Code ce, New	Jersey 07	974ASBESTO	S CONTROL & ENSING				
☑ DOH justification) ☐ DCA ☐ Cancellation	oldding		ame of Contac ames Trench			2	Telephone Num 908-464-9042				
Name of Facility Where Abatement is Takin	g Place (3)		FACILITY IN	ORMATI		Facility (4)					
New Povidence High School					⊠ Sch	iool (K-12)					
Street Address 35 Pioneer Drive	12				☐ Sub ☐ Othe	chapter 8 (Other er (i.e. private & c	than K-12) ommercial building	gs, hom	es, e	tc.)	
City (5) New Providence, New Jersey 07974					Square 1 20,000		# of Floors 2	Bldg 50-	g. Ag	е	
County (6) Bergen		(\$7	ounty Code (7) FATE USE ONL	n		Use (Prior if being High Sch	ool				
Name of Monitoring Firm Hired by Building (Garden State Environmental	Owner (8)		ASCM No.		Name of Lilich Co	Abatement Control propration	actor (9)				
Street Address 500 South Broad Street					Street Ac 246 Uni	idress on Boulevard					
City, State, Zip Code Glen Rock, New Jersey 07452					City, Stat Totowa,	e, Zip Code New Jersey 07	7512				-
Project Manager for Monitoring Firm Bruce Wolf			lephone No 1-652-1119		Telephor 973-225		License No 01104		***************************************		
Start Date (10) 07/01/2019	Scheduled Co 07/08/2019		ion Date (11)			OSHA Monitor ronmental Labo	oratories, LLC				
Occupancy Status During Abatement (Chec			***************************************		Street Ac 2333 Ro	idress oute 22 West				/ 5.54	
 ☑ Facility Closed/Vacated During Entire Performed Outside of Normal ☐ Other – Describe: 						te, Zip Code NJ 07083		#15.4			
Scope of Work (Check All That Apply)							V. V.				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		ovation olition	7.			Mini-Enclosure Glove Bag Proc	t with Negative Pre	ntainm		Tent	L
	Is Lo	cation	T			Non-Exempted (*) and Non-Friable Amount		pater		
Location of		nally	hv		Description		(Specify SF of LF)		Тур	e	Г
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mainte Custodi	nance	e/ Aso	ermal sys				Removal	Repair	Encapsulate	Enclosure
	Yes N	lo	N/A	B		entropics of the second		<u>a</u>		late	ıre
Cafeteria		<		T	ransite Pa	anels	1346 SF	Х			
		T									
Name of Registered Waste Hauler		Hau	EP Waste iler ID No.	of Wa			egistered Landfill			-	-
Lilich Corporation City, State Totowa, New Jersey	N	18	3724		sai Date	Fairless City, State Morrisville					
Completed by Adriana Olejarova	Title Presid	lent	***************************************		ignature	Z Northeville	Dat	e /21/20	19		
	1,000			- [i]	Who s	~ U ~		/20			

2019-145 (Pursuant to NJAC 8:60-7 and 12:120-7) B & G proj. #: Check # 6388 Date of Notification (1) Name of Building Owner/Operator (2) 10 16 1/12 15 1/11 19 1 Park Ridge School District Type Notification Agencies Notified Street Address JUL - 5 2019 EPA 2 Park Avenue X Initial ☐ DEP City, State, Zip Code Amendment X DOL ASBESTOS CONTROL & Park Ridge, NJ 07656 Telephone Number NSING X DOH Name of Contact Cancellation ☐ DCA 201-573-6000 Robert Wright **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Park Ridge High School (Sub 8) Subchapter 8 (Other than K-12) Other (Private/Commercial Street Address Bldgs./Homes, etc. 2 Park Avenue Bldg. Age Square Feet # of Floors 50 years County (6) County Code (7) City (5) (State use only) Current Use (Prior if being demolished) Park Ridge Bergen Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Westchester Environmental LLC 127 B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road 1248 Wrights Lane City, State, Zip Code City, State, Zip Code West Chester, PA 19380 Lincoln Park, NJ 07035 License Number Telephone Number Project Manager for Monitoring Firm Phone Number (973)696-6869 00378 610-996-3515 Matthew Abraham Name of OSHA Monitor Sched. Completion Date (11) Scheduled Start Date (10) B & G Restoration, Inc. 06/27/2019 06/30/2019 Street Address 105 Ryerson Road Occupancy Status During Abatement (Check only one) Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-LincolnPark, NJ 07035 Other-Describe: start work @ 7:00 am Scope of Work (check all that apply) Full Containment w/negative pressure Glovebag procedure Demolition ✗ Renovation Non-friable procedure Mini-enclosure ≥160 sf or ≥260 lf >3 sf or >3 lf E Is location normally used solely E Location of е e n by maintenance/custodial Amount n asbestos-containing Description of asbestos-containing m p C (Specify SF or staff(12) C material to be material (ACM) 0 a LF) abated in facility (13) ٧ N/A Yes No e X wood shelving w/ floor tile & mastic 70 sf Band Store Room X Name of Registered Landfill Cubic Yards of Waste Registered Waste Hauler NJDEP Hauler ID# Grand Central Landfill B & G Restoration, Inc. 19563 City, State Disposal Date City, State 07/01/2019 Pens Argyl, PA Lincoln Park, NJ Signature Completed by (Print or Type) Title Gordana Luna 06/25/2019 Gordana Luna Secretary/Treasurer

LLQ5182 IN#125 State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) JUI - 5 2019 Date of Notification (1) Name of Building Owner/Operator (2) 07 / 03 / 2019 Janssen Pharmaceuticals, Inc. ASBESTOS CONTROL & Agencies Notified Type Notification LICENSING Street Address VI EPA ✓ Initial 1000 Route 202 ☑ DOLWD ☐ Amended City, State, Zip Code ☑ DOH Amendment # Raritan, NJ ☐ DCA ☐ Emergency (including (NJAC 5:23-8) justification) Name of Contact Telephone Number ☐ Cancellation Harold Marsan 908 927-6912 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) JANSSEN PHARMACEUTICAL, INC (Johnson & Johnson School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 1000 ROUTE 202 homes, etc.) City (5) Square Feet # of Floors Bldg. Age RARITAN >50.000 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Hunterdon Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Environmental Health Investigations Delta/BJDS, Inc Street Address Street Address 655 West Shore Trail 1345 Industrial Blvd City, State, Zip Code City, State, Zip Code Sparta, NJ 07871 Southampton, Pa 18966 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973 729-5649 215 322-2900 00783 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 7 / 18 / 2019 9 / 30 / 2019 N/A Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: 7:00 AM-4:00 PM/ Scope of Work (Check all that apply) Full Containment with 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 Abatement Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Removal Enclosure Encapsulate Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (13)(12)other miscellaneous) Yes No N/A Bldg B Floors 1-4 X Window Panel Caulking 3.500LF Х Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste Service Transport Group Inc 20990 City, State

58 Pyles Lane New Castle DE

Completed By (Print or Type)

Christine Del Viscio

Asst. Admin

Disposal Date

Signature

City, State

Waynesburg, Ohio

Date

7/3/2019

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Date of Notification (1) 07/01/2019	17V		Name o Stever	f Building (n Dai	Owner/C	perator	(2)			JU	<u> </u>	5	2019		L
Agencies Notified Type Notification EPA Initial	N.		Street A	ddress					1	ASBES	TOS	CON	NTRO)L &	
X DEP Amended X DOL Amendment				ate, Zip Co rest, NJ				Unarra			(CO-CO-CO-CO-CO-CO-CO-CO-CO-CO-CO-CO-CO-C	PERSON-1	AN WEST PROTECTION	marithua	ensemble
□ Emergency justification) □ DCA □ Cancellation		100	Name of Stever	f Contact n Dai					Tel	ephone	Numi	ber			
			FACI	LITY INFO	DRMATI	ON									
Name of Facility Where Abatement is Takir House	ng Place (3	5)					Тур	e of Facility (School (K-1							
Street Address							×	Subchapter Other (i.e. p	8 (Oth				lings,	home	es,
City (5) Demarest			*				Squ N/A	etc.) ıare Feet \	# o	f Floors	i		ldg. A	ge	
County (6) Bergen			County (Code (7) USE ONLY)			Cur	rent Use (Pri			nolishe	-1 -88			
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCN	-0.00			of At	patement Cor patement, Ir		(9)		1.500			
Street Address						Street	Addr								
City, State, Zip Code								Zip Code	100				22760		
						Toto	wa,	NJ 0712		,					
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 973-		No. -8685		Licen 0131	se No I 1				
Start Date (10) 07/11/2019	Schedule 07/13/2		npletion	Date (11)				SHA Monitor atement, Ir	IC.						
Occupancy Status During Abatement (Chec	ck Only On	ie)				Street			2110						
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe: Occupied						City, S	State,	ngren Aver Zip Code NJ 07512	nue		_113/=				
Scope of Work (Check All That Apply)							,				77	-2-2			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	THE REAL PROPERTY.	Renova Demolit					N O	full Containm Mini-Enclosure Blovebag Pro Mon-Exempte	e cedure					2	
		Locati				E	<u></u>	ion-Exemple	u () an	IG INOTI-	riiabie		Abate		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normal d Sole intenar todial S (12)	ly by nce/		tos Cont thermal surfac		Materi s insu AT, or		(Amount Specify F or LF		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A			\/A.T			45	-00.05				te	
Basement & Lower Level		X				VAT			15	500 SF		X			
Name of Registered Waste Hauler		1000	JDEP W		Cubic			Name of	Regist	ered La	ndfill				
Atlantic Carting		100	lauler ID 6085	No.	of Was	ste		Grand	Centr	al					
City, State Wayne, NJ					Dispos TBD	sal Date	1	City, Stat		A					
Completed by Oliver Hegedis	Title Proje	ct Ma	anager		S	Signature		1/_			Date 07/		2019		

							ent.				-			Pri	nt For
Ch 297	1	NOTIF (P	ursuant	ate of New POF ASB to NJAC	ESTOS A	12:12	0)	т			G				
Date of Notification (1) 07/01/2019	152	8		f Building n Goetz		perator	(2)				JUL	-	5 2	019	ATT AND ADDRESS OF THE PARTY OF
Agencies Notified Type Notification	1		Street A	Address				0	-	AS	BEST				L &
X EPA				ate, Zip Co		8			Descriptions	Participant India	LI	GEN	ISING	<i>3</i>	-
X DOL Amendmen Emergency justification DCA Cancellation	(including	-	Name o	Hills, NJ f Contact					Tele	nhone	Mumb				
DCA Cancellation	n			n Goetz		ON	¥-11-								
Name of Facility Where Abatement is Takin	ng Place (3	3)	1 701	LITT MILL	OKWATI	ON	Тур	e of Facility (4	4)	-3/2 17		_			
House Street Address								School (K-1) Subchapter Other (i.e. p	8 (Othe	r than	K-12)	huild	inge	home	26
City (5)					-		2322257	etc.) are Feet		Floors			dg. A		15,
Short Hills County (6)			Country	Code (7)			N/A		N/A		- 11 - 1	3.0	/A		
Essex			(STATE	USE ONLY,)	_		rent Use (Pric use	or it bein	g dem	iolisne	a)			
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCN	И No.				atement Con atement, In		9)					
Street Address						Street 11 R		ess ngren Aven	nue						
City, State, Zip Code								Zip Code NJ 0712							
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph	none			Licen 0131	se No.				
Start Date (10) 07/15/2019	Schedule 07/17/2		mpletion	Date (11)				SHA Monitor	c.						
Occupancy Status During Abatement (Che	ck Only Or	ne)	20025-000			Street									\neg
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Atlantic Carting			lauler ID 6085	No.	of Was	ite		Grand C	Central	I					
City, State Wayne, NJ					Dispos TBD	al Date	6	City, State Pen Arg							
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City (5) Lakewood							72	Squ	etc.) are Feet	# of	Floors		Blo	lg. A	ge	
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City, State, Zip Code							City, S	State, 2	Zip Code OOD, NJ 08							
Project Manager for M	onitoring Firm		1	Telepho	ne No.		Telepi	none N			Licens					
Start Date (10) 07/14/19		Schedul 07/18/		pletion	Date (11)				SHA Monitor D PROFE	10122	NALS					
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Name of Registered W	Vaste Hauler		IN	JDEP W	Vaste	Cubic	Yards		Name of	Registe	red Lar	ndfill				
IEWARK CARTIN			Н	auler ID 4509		of Was	ste		IESI							
City, State NEWARK, NJ						Dispos 07/18	sal Date 1/19)	City, State		I PA					

Signature

Date

07/02/19

JOSEPH PERLSTEIN

Completed by

Title

OWNER

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Date of Notification (1) 07/02/19 TOV-125	25		Name of Meyer	f Building Shore	Owne , LLC	r/Operato	r (2)			- 501		20	19	
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City (5) Long Beach Twp			0	801	78		Squ	are Feet	# 01	f Floors		Bldg.	Age	
County (6) Ocean			County C	Code (7) JSE ONLY	n	- 1 72	Curi	ent Use (Prio	r if bei	ng demol	ished)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	l No.				atement Cont						
Street Address						Street 6 Wh		ess DOVE CO	URT					
City, State, Zip Code								Zip Code OOD, NJ 08	701					
Project Manager for Monitoring Firm		T	Геlephor	ne No.		Teleph 732-6	none l	No.		License 1200	No.			
Start Date (10) 07/11/19	Scheduled 07/16/19		pletion [Date (11)	X	Name	of OS	HA Monitor D PROFES	SSIO					
Occupancy Status During Abatement (Che						Street	Addre	ess					15	
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	No	N/A								<u>a</u>		late	IГе	
EXTERIOR					SIDING			20	00SF	х				
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Name of Registered Waste Hauler NEWARK CARTING		Ha	DEP Wa		of Wa	: Yards aste		Name of Ro	egister	ed Landfi				
City, State NEWARK, NJ					5 Dispo	sal Date		City, State BETHLE	HENA	DΛ				
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	te of Notification (1) 7/02/19 10 10 5	22			Building Ridge at			(2)		lol b						i con
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	eet Address							×	Subchapter Other (i.e. petc.)	8 (Oth			build	lings,	home	es,
	y (5) anchester							Squar	re Feet	# 0	f Floors		В	ldg. A	ge	
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Stre	eet Address						Street 6 WH		SS DOVE CO	DURT						
City	, State, Zip Code								p Code DD, NJ 08	3701						
Pro	ject Manager for Monitoring Firm			Telephor	ne No.		Teleph 732-6				Licens 1200	e No.				
	rt Date (10) /14/19	Schedul 08/25/		mpletion I	Date (11)				A Monitor PROFE	SSIO	NALS					
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Date of Notification (1) 07/02/19 TNV - 125	10			of Building Ridge at			r (2)	ĺ		JU) (2019		
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Street Address						1 3 3 3 7 7 7	Addre:	ss DOVE C	OURT	-					
City, State, Zip Code								ip Code OD, NJ 0	8701					3 24 25 5	
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 732-6	none N 668-9			Licens 1200	e No.				
	Schedule 08/25/		pletion	Date (11)				HA Monitor		NALS					
Occupancy Status During Abatement (Check		0.00	- //2			Street 6 WH		SS DOVE C	OURT	-		-11-10			
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe:	I Facility	Hours	ent			City, S	tate, Z	ip Code OD, NJ (
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Date of Notification (1) 07/02/19	0			of Building Ridge at			r (2)		المالما		-		201	J	
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City, State, Zip Code							Zip Code OOD, NJ 0	8701							
Project Manager for Monitoring Firm		Telepho	ne No.		Teleph 732-				Licens 1200	e No.		1119-1103			
Start Date (10) 07/14/19	Schedule 08/25/		npletion	Date (11)				HA Monitor D PROFE		NALS					
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JOSEPH PERLSTEIN

OWNER

07/02/19

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Project Manager for Monitoring Firm			Telepho	one No.		Teleph 732-6	one N	lo.	3701	Licens	e No.				ı.
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IEWARK, NJ	Title				08/25/	19		BÉTHLE	HEM						
OSEPH PERLSTEIN	Title OWN	ER			Si	gnature					Date 07/02	2/19)		

Ch 8393		NOTIF	ICATIO	tate of Ne N OF ASE t to NJAC	BE\$TOS	ABATE	MEN 0)	Т) <u> </u>	<u>(</u>	<u>L</u>		V (511
Date of Notification (1) 07/02/19	7			of Building Ridge at			(2)				JUL	(2(319	Lores
Agencies Notified Type Notification EPA Initial				Address Street						ASB			ONT	ROL	&
EPA Initial Amended Amendment	#		700	ate, Zip C							L1	UL 131	31140		
DOH Emergency (justification) Cancellation	including	,	Name o	of Contact Ridge at		wood				elephon 32-350					
Name of Facility Where Abatement is Taking	n Diago /	3)	FAC	ILITY INF	ORMAT	ION	-	.=							
Street Address	y r lace (□ □ ×	School (K-1 Subchapter Other (i.e. p etc.)	2) 8 (Oth				dings	, hom	es,
City (5) Manchester							Squ	are Feet	# 0	of Floor	S	E	lldg. A	Age	
County (6) Ocean				Code (7) USE ONLY	0		Cur	rent Use (Prid	or if be	ing der	nolish	ed)			
Name of Monitoring Firm Hired by Building C	Owner (8))	ASCI	M No.				atement Con			3				
Street Address						Street	Addr				16				
City, State, Zip Code						City, S	tate,	Zip Code OOD, NJ 08			- 10.2540-00				
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 732-6	one I	No.	,, 01	Licen	ise No).			
	Schedul 08/25/		npletion	Date (11)		Name	of OS	SHA Monitor LD PROFE	SSIC				100000		
Occupancy Status During Abatement (Check	1/20	- O.				Street	Addre								
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe:	eriod of a al Facility	Abaten / Hours	nent S			City, St	ate,	Zip Code OOD, NJ 08		4					-
Scope of Work (Check All That Apply)						LANE	EVVC	DOD, NJ 08	3701					1700	_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Transmill	Renova Demolit				×	M G	ull Containme ini-Enclosure lovebag Proc on-Exempted	edure					۵	
Location of		Locati Vormal						J. Zaniptou	() () ()	4 110111	TIGO		Abate	ement pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	d Sole intenar todial S (12)	ly by nce/		tos Cont thermal surfac	scription aining M systems cing, VAT niscelland	ateria insu r, or	lation,	(5	mount Specify or LF)		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A									71		ate	9
EXTERIOR						OOFING				00SF		х			
					FL/	ASHIN	G —		1	00LF					
Name of Registered Waste Hauler NEWARK CARTING		H	JDEP W auler ID 1509		Cubic of Was 7			Name of R	egiste	ered Lar	ndfill				
City, State NEWARK, NJ					Dispos 08/25	al Date /19		City, State BETHLE		1 PA					
Completed by JOSEPH PERLSTEIN	Title OWN	ER			S	ignature					Date 07/	e 02/1	9		\exists

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Date of Notification (1) 07/02/19	110			of Building			(2)			J. J.	<u> - </u>	5 20	119	
Agencies Notified Type Notification	on		Street	Address Street						ASBE	STOS	ONISING	ROL	. &.
DEP Amended Amendme	ent # cy (includin			tate, Zip C										
DOH justification Cancellati	n)	g	Pine I	of Contact Ridge a	t Crestv				100000	lephone 1 32-350-9				
Name of Facility Where Abatement is Ta	king Place	(3)	FAC	ILITY INF	ORMAT	ION	Туре	of Facility	(4)					
Street Address	7						×	School (K- Subchapte Other (i.e. etc.)	er 8 (Oth			ildings	, hom	es,
City (5) Manchester							Squa	re Feet	# 0	f Floors		Bldg.	Age	
County (6) Ocean			County (STATE	Code (7) USE ONL	0		Curre	ent Use (Pr	rior if be	ing demo	lished)			
Name of Monitoring Firm Hired by Buildin	g Owner (8	3)	ASC	M No.				tement Co D PROF						
Street Address						Street 6 WH		ss DOVE C	OURT			5000		
City, State, Zip Code								ip Code OD, NJ (08701					
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 732-6				License	No.			
Start Date (10) 07/14/19	08/25/	19	mpletion	Date (11)				HA Monitor D PROFE		NALS				
Occupancy Status During Abatement (Ch Facility Closed/Vacated During Entire		1000000	nont			Street /		ss DOVE C	OURT					
Abatement Performed Outside of No Other – Describe:	rmal Facilit	y Hour	S			City, St	ate, Zi	p Code			1 10 10			
Scope of Work (Check All That Apply)			60				1		500, 5000.					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Distributed.	Renova Demoli				×	Min Glo	l Containm i-Enclosur vebag Pro n-Exempte	e cedure				e	
Location of	1.	Locat Norma	200									Abate	ement pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Sole aintena todial ((12)	ely by nce/		tos Cont thermal surfac		aterial insula Γ, or		(S	mount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
EXTERIOR	Yes	No	N/A										ite	Ф
EXTERIOR					RC	OFINO	3		60	00SF	x			
											1	-		
N (5)														
Name of Registered Waste Hauler NEWARK CARTING		H	IJDEP W lauler ID 4509		Cubic of Was			Name of IESI	Registe	red Landf	fill			
City, State NEWARK, NJ					Dispos 08/25/	al Date /19		City, Stat BETHL		PA				
Completed by JOSEPH PERLSTEIN	Title OWN	IER			Si	gnature					Date 07/02/	19		

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Date of Notification (1) 07/02/19 Inv - 125	15			of Building Ridge at			r (2)		ll L	JU	L -	5	2015)	L
Agencies Notified Type Notification EPA Initial	า		AMERICAN PROPERTY.	Address Street						ASBES!	TOS (S JC	
EPA Initial Amended Amendmer	nt#			tate, Zip C						THE PERSON NAMED OF	The state of the second	MOTOMATO	ALC: SECTION ASSESSMENT	Postoria	WAY STANISH
■ Emergency justification ■ DCA)	9	Name o	of Contact Ridge at		vood				Telephone					
Sand Sand				ILITY INF						32-330	<i>j</i> -9000				
Name of Facility Where Abatement is Taki	ng Place ((3)					Тур	e of Facilit	y (4)						
Street Address							P	School (F Subchap		thor then	V 12)				
							×	Other (i.e	e. privat	e & comn	nercial	buile	dings	, hom	es,
City (5) Manchester		CA.	575	99			Squ	uare Feet	#	of Floors	3	В	ldg. A	Age	
County (6) Ocean			County (STATE	Code (7) USE ONLY)		200	rent Use (F me	Prior if b	eing dem	nolishe	d)			
Name of Monitoring Firm Hired by Building	Owner (8)	ASCI	M No.				batement C AD PROF			3				
Street Address						Street 6 Wh		ess DOVE (COUR	RT					
City, State, Zip Code								Zip Code DOD, NJ	0870	1					
Project Manager for Monitoring Firm	1		Telepho	one No.		Teleph	none				se No.				n Kerini
Start Date (10) 07/14/19	Schedul 08/25/		mpletion	Date (11)		Name	of OS	SHA Monito							
Occupancy Status During Abatement (Che	ck Only O	ne)				Street					,			-	
Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other – Describe:	Period of mal Facility	Abaten y Hours	ment s		-	City, S	tate,	Zip Code							
Scope of Work (Check All That Apply)						LAKI	=VVC	DOD, NJ	0870	1					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demolii				×	M G	ull Contain lini-Enclosu llovebag Pr on-Exempt	ıre ocedur	е					
	Is	Locati	ion			-	,	on Exemple	1	ind Non-	Habic		Abate	ement	Ž
Location of Asbestos-Containing Material (ACM)		Normal ed Sole		A - h		cription					-		Ту	ре Г	
TO BE ABATED In Facility (13)	Ma	todial ((12)	nce/		thermal s	systems ing, VA	insu T, or			Amount (Specify SF or LF)		Remova	Repair	Encapsulate	Enclosure
1.7	Yes	No	N/A		outer III	Journali	Jous	*				/al	Ŧ	ılate	ure
INTERIOR					FLC	ORIN	G			400SF	×				
EXTERIOR					RO	OFIN	G			100LF					
					and the same of th										
ame of Registered Waste Hauler EWARK CARTING		Н	IJDEP W lauler ID 4509		Cubic Y of Wast 5			Name of IESI	f Regis	tered Lan	ndfill				
ity, State EWARK, NJ					Disposa 08/25/			City, Sta		M PA					
Completed by OSEPH PERLSTEIN	Title	IFR			Sig	gnature					Date	2/1	ο		

Date of Notification (1)		130	CATIO Irsuan	Stafe of New He NOF ASBEST 16-NJAC 8:60	and 12:12	(0)	IT .			GE	5 2	W	int ac
07/02/19 Inv-1951	4			of Building Own Ridge at Cre		r (2)		lad bad	0	U L	0-6	010	-
Agencies Notified Type Notification	n	- 1		Address Street				1	ASBE	STOS			. &
EPA Initial DEP Amended Amendme				ate, Zip Code				- Inches				A on Tributorious	D76ert vladinosida
Emergenc	y (including			ng, NJ 08759	3			Tolon	hone !	M. makar			
DCA justification Cancellation				Ridge at Cre	stwood				-350-	Number 9000			
Name of Facility Where Abatement is Tak	ing Place (3)	FAC	ILITY INFORM	ATION	Tyn	e of Facility (4	1)				1425	
							School (K-1)	10					
Street Address				V.		×	Subchapter Other (i.e. p etc.)	8 (Other	than k	(-12) ercial bui	ldings	, hom	es,
City (5) Manchester		987	15	1		Squ	are Feet	# of F	loors		Bldg. A	Age	
County (6) Ocean		(5	County STATE	Code (7) USE ONLY)		Cur	rent Use (Prio me	r if being	demo	lished)			
Name of Monitoring Firm Hired by Building	g Owner (8)		ASCI	M No.			atement Con AD PROFE						
Street Address					Street 6 WI		ess DOVE CC	URT			/		
City, State, Zip Code							Zip Code OOD, NJ 08	701					
Project Manager for Monitoring Firm		T	elepho	ne No.	Teleph	none l		TL	icense	No.		-	
Start Date (10) 07/14/19	Schedule 08/25/1		oletion	Date (11)	120,710,000		SHA Monitor	SSION	ALS			-	
Occupancy Status During Abatement (Che	eck Only On	ne)			Street	Addre	ess						
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:	Period of A mal Facility	Abateme Hours	ent		City, S	tate, 2	DOVE CO						-
Scope of Work (Check All That Apply)					LAKI	EVVC	OOD, NJ 08	701					
23 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renovation Remolition			×	M Gl	ull Containmer ini-Enclosure lovebag Proce on-Exempted	edure				e	
Location of	N	Location lormally		Г	Description						Abate	ement	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	d Solely intenanc odial Sta (12)	:e/	Asbestos Co (i.e. therm sur		lateria insul T, or	lation,	Amo (Spe SF or	cify	Remova	Repair	Encapsulate	Enclosure
INTERIOR	Yes	No	N/A							<u>a</u>		late	Ге
INTERIOR EXTERIOR	-				LOORIN	_		400		х			
EXTERIOR				F	LASHIN	G		100	LF				
Name of Registered Waste Hauler		NJE	DEP W	aste Cub	ic Yards		Name of Re	egistered	Land	fill			
NEWARK CARTING		045	uler ID 509	No. of W	/aste		IESI	3-10.00	urran				
City, State NEWARK, NJ					osal Date 25/19		City, State BETHLE	НЕМ Р	Ά				
Completed by JOSEPH PERLSTEIN	Title OWN	ER			Signature		-			Date 07/02/1	19		

								lumand	PC	o P	ПВ	ПГ	EHP E
3389		NOTI	ICATIO Pursuan	State of N N OF ASI	ew Jerse BESTOS 8:60 ar	ABATE	MENT 0)				UT	<u> </u>	n n
Date of Notification (1) 07/02/19/19	13		Name Pine	of Building Ridge a	Owner/	Operato	r (2)		JU	L - !	5 20	19	
Agencies Notified Type Notification	1		Street	Address	COTOST	wood		-	ACDEC	TOCO	TIAO		O
EPA Initial Amended				Street tate, Zip C	`ode				ASBES	LICENS	SING	iUL	C
DOL Amendmen Emergency		_	Whitir	ng, NJ 0	8759								
DOH justification Cancellation)			of Contact Ridge at		wood			elephone N 32-350-9				_
Entral Entral				ILITY INF					02-300-8	3000			_
Name of Facility Where Abatement is Takir	ng Place ((3)					Type of Facilit						_
Street Address							School (F	(-12) ter 8 (Oth	ner than K	-12)			
							Other (i.e etc.)	. private	& comme	rcial bui	ldings	hom	E
City (5) Manchester		0	370	59			Square Feet	# 0	of Floors		Bldg. /	\ge	_
County (6) Ocean			County (STATE	Code (7) USE ONLY	0		Current Use (F home	Prior if be	ing demol	lished)			_
Name of Monitoring Firm Hired by Building	Owner (8)	ASCI	M No.		Name AAA	of Abatement C LEAD PROF	ontracto	r (9) DNALS				_
Street Address							Address HITE DOVE (COURT	-				-
City, State, Zip Code						City, S	tate, Zip Code EWOOD, NJ						-
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph	none No. 668-9078		License	No.			
Start Date (10) 07/14/19	Schedul 08/25/	ed Cor	npletion	Date (11)	%	1 22 23.55	of OSHA Monito		NAI S		11/10-12		=
Occupancy Status During Abatement (Chec						Street	Address						-
Facility Closed/Vacated During Entire R Abatement Performed Outside of Norm Other – Describe:	Period of a nal Facility	Abaten y Hours	nent			City, S	tate, Zip Code EWOOD, NJ						-
Scope of Work (Check All That Apply)						LAND	EWOOD, NJ	08701					_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	×	Renova Demolit	ition ion			ı.	Full Contains Mini-Enclosu Glovebag Pr Non-Exempt	re ocedure				8	
Location of	1	Locati	ly		Des	scription					Abate	63	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole intenar todial S (12)	nce/	Asbes (i.e.	tos Conta thermal surfac	aining M	aterial (ACM) insulation, T, or	(8	mount Specify or LF)	Removal	Repair	Encapsulate	
EVTEDIOD	Yes	No	N/A							<u>a</u>		late	
EXTERIOR					RC	OFIN	3	4	00SF	x			
Name of Registered Waste Hauler NEWARK CARTING		H	JDEP W auler ID		Cubic of Was		Name o	f Registe	red Landf	ill			
City, State NEWARK, NJ		102	1509		5 Dispos 08/25/	al Date	City, Sta		1 DA				
Completed by IOSEPH PERLSTEIN	Title OWN	IER				gnature	DETRI	I		ate 07/02/	19		_

Date of Notification (1)		D NOTH (F	ICATIO Puggyan	ate of New Je NOF ASBEST to NJAC 8 60 of Building Own	and 12:12	0)	т)_[JUL		-	₩ ₩	int Form
07/02/19)		Plain	field MW, LL		r (2)		L		JUL		J	1019	
EPA Initial			735 F	Address Park Avenue					ASE	BEST LI	OS (CON	TRO	- &
DEP Amended Amendment Emergency			Plaint	ate, Zip Code ield, NJ 0706	60									
DOH justification) Cancellation		9		of Contact ield MW, LL(0			605.005	0.7000000000000000000000000000000000000	e Num)-476				
Name of Facility Where Abatement is Takir	ng Place	(3)	FAC	ILITY INFORMA	ATION	Ton	f F 111 - / 4			A AMERICA				
735 Park Avenue	ig i lacc	(0)				Т	e of Facility (4 School (K-12	125 125						
Street Address 735 Park Avenue						×	Subchapter 8 Other (i.e. prietc.)	(Othe	er than k comr	K-12) nercia	buil	dings	, hom	es,
City (5) Plainfield						Squ	are Feet	# of	Floors	3	E	Bldg. A	Age	
County (6) Union			County (STATE	Code (7) USE ONLY)		Curr	rent Use (Prior	if beir	ng den	nolishe	ed)			
Name of Monitoring Firm Hired by Building Street Address	Owner (8)	ASCI	M No.			atement Contr D PROFES			3				
					Street 6 Wh		DOVE CO	JRT						
City, State, Zip Code							Zip Code OOD, NJ 08	701						
Project Manager for Monitoring Firm			Telepho	ne No.	Teleph 732-6	one N	No.		Licen 1200	se No.				
Start Date (10) 07/14/19	Schedu 07/16/		npletion	Date (11)	N 15 (5) E5		HA Monitor D PROFES	SIOI	NALS					
Occupancy Status During Abatement (Chec	- 25	35%			Street		VIVII)							
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	Period of nal Facilit	Abaten y Hours	nent		City, S	tate, Z	DOVE COL Zip Code OOD, NJ 087							
Scope of Work (Check All That Apply)					LAN		OD, NJ 00	01						
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		Renova Demolit			×	Mi Gl	ull Containmen ini-Enclosure ovebag Proce on-Exempted (dure						
Location of		Locati Normal	y	Г	Description		311-Exempted () and	NOIT-	Паріс			ment	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole aintenar todial S (12)	nce/	Asbestos Co (i.e. therm sur		ateria insul T, or	ation,	(Sp	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
INTERIOR	Yes	No	N/A	DIDE	11.01.11.4	T 101					<u>a</u>		ate	ē
INTERIOR				PIPE	INSULA	IOI	N	50	DLF	2	2			
7										+				
Name of Registered Waste Hauler		l At	IDED 14	note 10.	I- V1									
NEWARK CARTING		H	JDEP W auler ID 1509		ic Yards /aste		Name of Re	gister	ed Lar	ndfill				
City, State NEWARK, NJ				11 1/20/25/20/25	osal Date 6/19		City, State BETHLE	НЕМ	PA					
Completed by IOSEPH PERLSTEIN	Title OWN	IER			Signature					Date 07/0		9		

Date of Notification (1)			(Pursua Name	State of M ON OF AS that to NJA	BESTO C 8:60 a	\$ ABATI nd 12:12	20)		JUL	<u>- 5</u>	201	PP
6/29/19 Agencies Notified Type Notifica		- 8/01/45 /100	INV	Homes,	LLC		3.5		Partie (Street, Street, Street	Service Actor		
	tion			t Address Box 595				AS	BESTO	S CO	MIHO	3 JC
X EPA X Initial Amende Amende	d			State, Zip (In the second second		and and and and	onto the same	D/ALTINOS AND
	nent#_ ncy (includi			nar, New		y 07719	3					
DOH _ justificat	ion)	ng		of Contac	t			Telepho	ne Num	ber		
L Cancella	ation		Josh					732 74	12 733	0		
Name of Facility Where Abatement is T	aking Place	2 (3)	FA	CILITY INI	FORMAT	TION	Type of Facility	v (4)				
NV Homes, LLC Property							School (K	535 B				
Street Address 2105 Parkview Terrace City (5)							Subchapt	er 8 (Other that private & con	in K-12) imercial	build	ngs, ho	mes,
Spring Lake Heights		F	777	$l \circ 0$			Square Feet	# of Floo	rs		lg. Age	
County (6)			County	/ Code (7)			1800	1.5		65	*	
Monmouth			(STATE	USE ONLY	y)		Current Use (P residence	nor it being de	molishe	d)		
Name of Monitoring Firm Hired by Buildi	ng Owner (8)	ASC	M No.		Name	of Abatement Co	ontractor (9)				
Street Address				-		Ace	Insulation Co	., Inc				
o a oct radices						1	Address					
City, State, Zip Code		-				1	ontrose Rd					
							Neck, New J	Jersey 0772	2			
Project Manager for Monitoring Firm			Telepho	one No.			one No.		nse No.			
Start Date (10)	1011	-				732 2	294 1757	000				
7/8/19	7/19/	iled Co 19	mpletion	Date (11)		Name o	of OSHA Monitor	•		-		-
Occupancy Status During Abatement (Ci						Street /	Address					
Facility Closed/Vacated During Entire Abatement Performed Outside of No Other – Describe: 7am-7pm	e Period of ormal Facili	Abater ty Hour	ment S				ate, Zip Code					
Scope of Work (Check All That Apply)												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli				X	Full Containm Mini-Enclosum Glovebag Pro Non-Exemple	e cedure			ina	
	l is	s Locati	ion					1 / 0110 / 1511	THE PARTY I		atemer	nt
Location of Asbestos-Containing Material (ACM)		Normal ed Sole			Des	scription o	of .		_		Туре	
TO BE ABATED In Facility	Ma	aintena todial S	nce/	Asbest (i.e.	os Conta thermal :	aining Ma systems	iterial (ACM)	Amount (Specify	١.	77	g g	m
(13)	-	(12)	Acail :		surfac	ing, VAT,	or	SF or LF)	DAMINA	- Appendix	caps	nclos
	Yes	No	N/A		00.01 III	1000112113	ousj		Y C		Encapsulate	Enclosure
interior			Х		oho	et rock			_	_	-	
exterior	-		X					2000 sf		1	-	
			1	-	rc	ofing		1000 sf	X	-		
									1	Total control	-	
Name of Registered Waste Hauler		l N.	JDEP W	aste	Cubic Y	farde	None	Paulot 11				
FCI City, State		H	auler ID i 5939	No.	of Wast 40	te	Fairless	Registered Lar	iohil			Control of the second loans
Freehold, New Jesrey				\$3	Disposa 7/19/19		City, State					
Completed by	Title					9 mature	Morrisvi	lle, PA	D-1			
Bree McGuire	Secre	etary 7	Treasu	rer	0.9		. 1	_	Date 6/29/1	19		

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Inv# 1254 OCK (17155 PA	AIID	NOTII	FICATIO	State of New ON OF ASBES nt to NJAC 8:	STOS ABATE	EMEN (0)	IT		EC	E			
Date of Notification (1) 06-19-19			Name PSE	of Building O	wner/Operato	r (2)			JUL	-	5 201	9	\parallel
Agencies Notified Type Notification	n			Address Hadley Ro	d.					-	Na produktivim mellini		and the same of th
DEP X Amended Amendmen	nt # 1			itate, Zip Code			200	The section of the se	ASPEST LI	OS C		OL.	3
X DOH justification DCA Cancellatio	1)	g	Name	of Contact Pentek				900000	lephone N				
				CILITY INFOR	RMATION			13	32-540-4	838		- 1	
Name of Facility Where Abatement is Tak PSEG New Milford substation	ng Place	(3)			MIRTION	Тур	e of Facility	2015		X04=7.			
Street Address 132 Henley Ave.						×	School (K- Subchapte Other (i.e.	r 8 (Oth	er than K-	12) cial bu	ildinas	. hom	ies.
City (5) New Milford NJ							etc.) iare Feet	#0	f Floors	Т	Bldg. A		-
County (6) Bergen			County	Code (7)			rent Use (Pr	N/A		- 1	N/A		
Name of Monitoring Firm Hired by Building N/A	Owner (8	3)		M No.			eatement Co						
Street Address N/A					Street	Addr							
City, State, Zip Code N/A			-		City, S	tate,	Zip Code NY 11980	<u> </u>					\neg
Project Manager for Monitoring Firm N/A			Telepho	one No.	Teleph 631-9	one l	No.		License N	No.			
Start Date (10) 06-20-19	Schedu 07-24-		npletion	Date (11)	Name	of OS	SHA Monitor	ol Con					
Occupancy Status During Abatement (Che					Street			al Selv	rices inc	•			
Facility Closed/Vacated During Entire Abatement Performed Outside of Non	Period of	Abaten	nent		17 O	d Do	ock Rd Zip Code						
Other – Describe: Normal Hours Scope of Work (Check All That Apply)							, NY 1198	30					
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Switching yard			Х		Transite pi	oe	- 1	3	0 If	x			
Jame of Decision 199													
Name of Registered Waste Hauler Vaste Management		Ha	JDEP Wauler ID 273		ubic Yards Waste		Name of F Fairless	1000	ed Landfill fill				
City, State Elizabeth, NJ					isposal Date		City, State Morrisvi		Ą		-		\neg
Completed by Raymond Tutiven	Title Supe	rvisor			Signature		1-1-	<u> </u>	Da	te 5-19-	19		

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) 7 Jackson Twp Board of Education Agencies Notified Type Notification Street Address ☐ EPA - 5 2019 .1111 151 Don Connor Blvd **⊠** DOLWD ☐ Amended City, State, Zip Code **⊠** DHSS Amendment # Jackson, NJ 08527 ☐ DCA ☐ Emergency (including ASSESTOS CONTROL & (NJAC 5:23-8) justification) Name of Contact Telephone-Number ING ☐ Cancellation Ed Ostroff 732-833-4653 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Jackson Twp Memorial High School School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, 100 Don Connor Blvd homes, etc.) City (5) Square Feet # of Floors Bldg. Age Jackson County (6) County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) Ocean Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Finog Environmental Hazards, Inc. BRISTOL ENVIRONMENTAL, INC. Street Address Street Address 617 Stokes Rd 1123 BEAVER STREET City, State, Zip Code City, State, Zip Code Medford, NJ 08055 BRISTOL, PA 19007 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Mark Rubnitz 888-715-2211 215-788-6040 00509 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor __7__ / __22__ / __19_ 7 / 26 / 19 BRISTOL ENVIRONMENTAL, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 1123 BEAVER STREET Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: 7:00AM-3:30PM/_ BRISTOL, PA 19007 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ≥3 sf or >3 lf Mini-Enclosure ≥160 sf or ≥260 lf ☐ Demolition ☐ Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Removal Encapsulate Enclosure Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Vice Principal Offices, Police X Floor tile and mastic 1,400 SF X Officer Office and CST offices П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. SERVICE TRANSPORT GROUP, INC. Waste MINERVA LANDFILL 20990 tbd City, State Disposal Date City, State NEW CASTLE, DE 19720 tbd WAYNESBURG, OH 44688 Completed By (Print or Type) Title Signature

Brian Scafiro

Estimator

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Name of Monitoring Firm Hired by Building	Owner (8	3)	ASC	M No.				atement ((9)			_		
Project Manager Street Address								s Abate			207957					
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City, State, Zip Code								dland A	Ave.							
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Project Manager for Monitoring Firm			Telepho	one No.		Teleph			3 076	003	Licen	aa M			_	
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(13)			T	1	other mi	scellan	eous)						oval	air	Encapsulate	Enclosure
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Basement Closet		X			\	/AT				20	SF		x			
Laundry Room		x			\	/AT				101	SF		x			
Name of Registered Waste Hauler		77.00	JDEP W		Cubic Y			Name o	of Reg	istere	ed Lan	dfill				
All Stages Abatement			lauler ID 036592		of Waste 3 yd	9		Grand	d Cer	ntral	Sani	itary	Lan	dfill		
City, State				79	Disposa	Date		City, St								
Saddle Brook, NJ					TBD			Pen A		PA						
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Date of Notification (1) June 3, 2019			Na Je	me of Bu fferson	lding Owr Townsh	ner/Operati	or (2)	ucation	J	UL	-5	20	19	
Agencies Notified Type	Notification		Stre	eet Addre	SS						alla William Control			200
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	Emergency (inclu	uding		ne of Con		NJ 07849	J ———							
Property	ustification) Cancellation			ra Zenc					Teleph 973-6			r		
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Street Address							X S	School (K-12	?)					
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Name of Monitoring Firm Hired by Sky Environmental	y Building Owner	(8)	AS	CM No.		Name Polm	of Abate	ement Contr rporation	actor (9)					
Street Address 140 Boulevard						Street	Address	3		-	-			
City, State, Zip Code								Street Floo	or 2					
Mountain Lakes NJ 07046							tate, Zip ngton I	Code NJ 07057						
Project Manager for Monitoring Fin Leonid Shereshevsky	rm		Teleph	none No.			one No.		Lice 013	ense N	lo.	-	2276.33	
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	2 1 20	019_		Nan Ji	ne of Build	ing Owner/Operator on Township	(2) Board of	COLUMNIA CO	ďÄ	yâ.		
		on		Sira	al Addies	te Route 181	.		881	/		
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

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☐ DCA			uding	-	Lake Hopatcong NJ 07849							
(NJAC 5:23-8)				N	ame of Cont		Telephone Number					
	- Concentat	011			Dora Z			973-663-5782				
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Street Address												
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cope of Work (Check all tha	it apply)											_
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≥3 st or ≥3 if \(\frac{1}{2} \text{Renovation} \) ≥160 sf or ≥260 if \(\sum \text{Demolition} \)					☐ Mini-Enclosure ☐ Glovebag Procedure							
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