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(NJAC 5:23-8)	justificatio	n)	-			of Contac	t		Telephone Name				
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Name of Facility Where A	Abatement is T	aking	Place	(3)				Type of Facility	40.75.04				
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Street Address								Other (i.e., p	orivate and commerc	cial bu	ilding	S,	
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City (5)								Square Feet	# of Floors	Blo	dg. Ag	je	
Clark, NJ 07066						\							
County (6)					Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pr	rior if being demolisi	ned)			
Union							-						
Name of Monitoring Firm	Commence of the Commence of th	ling O	wner ((8)	ASCM	No.	Name of Abateme						
Bio Terra Solutions	5		577				VEX	NAGEMENT L	LC				
Street Address							Street Address						
P.O. Box 1224							27 Outwater						
City, State, Zip Code							City, State, Zip Co						
Union, NJ				COLUMN TO SERVICE			Garfield, NJ	07026					
Project Manager for Mon	itoring Firm			Tel	ephone	No.	Telephone No.		License No.				
Rick Eustaquio						1-3762	973-928-4888	3	1188				
Start Date (10)	0.0000					ate (11)	Name of OSHA N						
07 / _12_ /	16	0	8_ /	1	2_ /	16	ALL PRO MA	NAGEMENT L	LC				
Occupancy Status During	Abatement (C	Check	only o	one)	-11		Street Address						
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Time of Abatement.	AIVI					_AIVI	Garfield, NJ	07026					
Scope of Work (Check al	I that apply)						□ F.·.!! Con	toinmont with No	antivo Progrum				
☐ >3 sf or >3 If			⊠ Re	nova	ion		☐ Mini-End	tainment with Ne losure	gative Fressure				
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Asbestos-Containing)			ely by		estos Containing Ma	aterial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
TO BE ABA					ance/ Staff?	(i.e	e., thermal systems surfacing, VAT		(Specify SF or LF)	NOV	air	aps	uso
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Name of Registered Was	ste Hauler				NJDEP Hauler	Waste D No.	Cubic Yards of Waste	Grows La	istered Landfill				
Future Sanitation					2205		As Needed		num				
City, State							Disposal Date	City, State	- DA				
Farmingdale, NJ							TBD	Morrisville	C. 4000-C. 101 (140)-				
Completed By (Print or T	ype)	Title					Signature	Λ /	Da	te /	. /	1:	
Allen Monchik		Pi	roject	Mar	ager		NVV	V ~ \ _	\sim	16	1/	16	7

State of New Jersey

Amend #2 - Broke original notification out into (2) separate notifications.

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEME Memorial HS - NON Sub 8 (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) Job #1606-2089 2016hk. 6 13 West New York Board of Education Agencies Notified Type Notification Street Address **⊠** EPA ☐ Initial ASBESTOS CONTROL & 6028 Broadway ☑ DOLWD LICENSING City, State, Zip Code Amendment #2 □ DHSS West New York, NJ 07093 ☐ Emergency (including ☐ DCA Name of Contact (NJAC 5:23-8) justification) Telephone Number □ Cancellation Dean Austin 201-553-4000 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) Memorial High School Street Address Other (i.e., private and commercial buildings, 5501 Park Avenue homes, etc.) City (5) Square Feet # of Floors Bldg. Age West New York 420,936 3 TBD County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Hudson Unoccupied - School Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) TTI Environmental Asbestos and Mold Services, Corp. Street Address Street Address 1253 North Church Street 3859 Sylon Boulevard City, State, Zip Code City, State, Zip Code Moorestown, NJ 08057 Hainesport, NJ 08036 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Jim Guilardi 856-840-8800 609-702-0400 00862 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 7 / 5 / 16 __6__ / _ 27 / 16 EMSL Analytical, Inc. Occupancy Status During Abatement (Check only one) Street Address □ Facility Closed/Vacated During Entire Period of Abatement 200 U.S. Route 130 North ☐ Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-___PM/___PM-__AM Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ≥3 sf or ≥3 lf
 ≥160 sf or ≥260 lf □ Renovation ☐ Mini-Enclosure Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Removal Encapsulate Enclosure Used Solely by Asbestos-Containing Material (ACM) 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 SEE ATTACHED LIST OF ACM \boxtimes SEE ATTACHED LIST OF ACM X **Memorial HS Starts 6/27 Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Carnevale Disposal **GROWS Landfill** 17297 40 City, State Disposal Date City, State Hamilton, NJ 7/24/16 Morrisville, PA 19067 Completed By (Print or Type) Signature Kimberly A. Trumbetti 11-28-16 Office Coordinator



Date of Initial Notification: 6/13/16

Date of Amendment #2: 6/28/16

SEPARATE ORIGINAL NOTIFICATION INTO TWO (1)

NOTIFICATION PAGE 2 of 2

Project: Memorial High School/Annex B 551 Park Avenue West New York, NJ

SCOPE OF WORK

Memorial High School - Start date 6/27/16

- Removal and disposal of approximately 475 SF of transite lab table in classrooms #211, 212, 213,
- Removal and disposal of approximately 16 SF of transite fume hood in classroom #213.
- Removal and disposal of approximately 600 SF of floor tile and mastic in classroom #216.
- Removal and disposal of unknown quantity of chalkboards, bulletin boards and associated mastic in classrooms ##211, 212, 213, 216, 218 & 219.

Trumbetti, Office Coordinator

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

Date of Notification (1)	15		N			Owner/Operator (2	(2) / Job #	1510-2035	hk. N	IA I	1	
Agencies Notified			S	Street A	Address		\$ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		5 20		11	
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☐ DCA ☐ Emergenc		ing	_	100000000000000000000000000000000000000	ver, CO 8			T. LAGRESTOS	CON	TROL	_ GL	
(NJAC 5:23-8) justification			ı		of Contact			I elebtione Inhilip	4211A	_	1	
☐ Cancellation	on			Anth	ony Vol	kens		856-768-7072			- 11	
				FAC	ILITY IN	FORMATION	1	State Mark		~~	0.00	
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Street Address								(Other than K-12) ivate and commerce		ldings	5,	
437 North Grove Street							homes, etc.)			, i		
City (5)							Square Feet	# of Floors	Blo	lg. Ag	е	
Berlin							665,000 SF	1	5	52		
County (6)				Count	y Code (7)	(STATE USE ONLY)	Current Use (Pri	or if being demolis	ned)			
Camden							Warehouse					
Name of Monitoring Firm Hired by Build	ing Owne	er (8)	A	SCM N	No.	Name of Abateme	ent Contractor (9)					
One Source Safety & Health						Asbestos and	d Mold Service	s, Corp.				
Street Address						Street Address		133				
140 S. Village Avenue Suite 130	ĺ					3859 Sylon B	oulevard					
City, State, Zip Code						City, State, Zip Co	ode					
Exton, PA 19341						Hainesport, I						
Project Manager for Monitoring Firm		ΙT	elep	hone N	No.	Telephone No.		License No.			-1-12	
Brian Hovendon)-524-		609-702-0400	1	00862				
	cheduled	d Com				Name of OSHA M	Monitor					
				_ / _		EMSL Analyt	ical, Inc.					
Occupancy Status During Abatement (C	check on	ly one)			Street Address						
☐ Facility Closed/Vacated During Entir						200 U.S. Rou						
Abatement Performed Outside of No Time of Abatement:AM						City, State, Zip Co						
Scope of Work (Check all that apply)	37-28					01 100 100 100						
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf		Renov	vatio litior	n 1		☐ Mini-End ☐ Gloveba	g Procedure	gative Pressure	e e			
		Is Lo	catio	on					1	ateme	ent Ty	vpe
Location of Asbestos-Containing Material (ACM TO BE ABATED IN Facility (13)	,	Used S Mainte Custod	enan	y by ice/		Description of stos Containing Ma , thermal systems surfacing, VAT other miscellane	insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
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п] [\boxtimes	Transit	e Decking		9,000 SF				
п]	\boxtimes	Transit	e Flues		6 ea				
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Name of Registered Waste Hauler			N.	JDEP V	Vaste	Cubic Yards of	Name of Regis	stered Landfill				
Freehold Cartage, Inc.			11071000	auler IE		Waste	GROWS L	andfill				
City, State			1	02265)	10 Disposal Date	City, State					
Freehold, NJ						7/31/16		, PA 19067				
Completed By (Print or Type)	Title					Signature	1		ite			
Kimberly A. Trumbetti		ce Co	ord	inator	Ţ.	Signature	1		-30	-14	0	

ASB-41 MAY 11

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

Amendment #2 - Extend End Date Additional Scope of Work

NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

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3370 Progress Driv	ve. Suite J						3859 Sylon B	oulevard						
City, State, Zip Code	,						City, State, Zip Co							
Bensalem, PA 193	44						Hainesport, I							
Project Manager for Mor	310.0%		Τ.	Teler	ohone N	vin.	Telephone No.		-	License No.			-	
Mike Panepresso	intorning i mini				5-244		609-702-0400	1		00862				
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Scope of Work (Check a	all that apply)						☐ Full Con	tainment wi	th Nea	ative Pressure				
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(10)		Y	es	No	N/A			/					Œ	
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Boiler Room/Bathro	om] [\boxtimes	Pipe In:	sulation			122 LF	\boxtimes			
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Carnevale Disposa			Н	auler II 17297		Waste 5	GRO	WS La	ndfill					
City, State					11231		Disposal Date	City, Sta	ate					
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Completed By (Print or	Type)	_			Signature	1		Ti	ate					
Kimberly A. Truml		Title Office	ce Co	orc	linato	r	1	1	_			29/1	6	

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VMC COMPANY INC

PAGE 02/04

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Name of Facility Where Abatement is 7	aking Plac	₩ /31	F,	ACILITY INFORMA	MON	- Lins	732-542			erent erenta <u>r</u>	-591
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Project Manager for Monitoring Flow John Smoyer			Teleph	one No.		n, NJ 07011					
Start Date (10)	Sched	ulad C		352-1833 n Date (11)	973-2	53-8828	Ucanse 00704				
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Abetement Performed Outside of No	rmal Facil	ty Hau	rs ment		City, St	ate, Zip Code					
Scope of Work (Check All That Apply)		_									
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CK 10764

State of NJ
Notification of Asbestos Abatement
(Pursuant to NJAC 8:60 and 12:120)

D&S Proj. #: 16-199		(Pursi	uant to NJA(S 8:60	and 12:120)	DE		\mathbb{V}	E		
Date of Notification (1)	Name o	of Building Ow	ner/Operator (2	?)				004		and the same of	
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Agencies Notified Type Notificat	tion Street A									1	$\overline{}$
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Amendment #	City, Sta	ate, Zip Code					ETTEL SIK	10			
DOL Emergency		LSIDE, NJ (77205								
DOH (including	Name o	Contact	31203			Telephon	e Number	and the same		27/4	
justification) DCA Cancellation	11 .	suriano barb	ner .								
Cancellation	1 Sina			447101	ì						
Name of facility where abatement	in taking plans (2)		CILITY INFORM	MATION	'	Type of Facility ('4\				
Name of facility where abatement	is taking place (5)						(K - 12)				
gina suriano barber					10	Subch	apter 8 (Ot	her th	nan K	-12)	
Street Address						Other	(Private/Co	mme	rcial	35	
							Homes, etc		RI	dg. A	ac.
City (5)	County (6)			I Cou	inty Code (7)	Square reet	# 01 110015		Di	uy. A	ge
	, (-,				te use only)	Current Use (P	rior if beina	dem	olish	ed)	
HILLSIDE	UNION				× .						
Name of Monitoring Firm Hired by	Bldg. Owner (8)		ASCM No.		Name of Abatement						
					D & S RESTOR	LATION, INC.					
Street Address					Street Address						
City Otata 7:- Ond-					20 California A	The same of the sa			13 A		
City, State, Zip Code					City, State, Zip Code						
Project Manager for Monitoring Firm		I Disease No.	1		Paterson, NJ 0	7503	II : N	I la			
Froject Manager for Monitoring Firm	I ·	Phone Num	ber .		Telephone Number 973-345-8020)	License N	169	er		
Charl Date (40)	10.1.1.0				Name of OSHA Mor				_	_	
Start Date (10)	Sched. Com	oletion Date (1	1)		D & S Restorat						
07/14/16	08/15/16				Street Address						
Occupancy Status During Abatemen		1.00			20 California A	venue					
Facility closed/vacated during Abatement performed outside					City, State, Zip Code						
Describe:	150	nours .		_		7500					
Other-Describe: NORMAL F					Paterson, NJ 0'						
Scope of Work (check all that apply >3 sf or >3 if	3000					Full Containment w Mini-enclosure	/negative p	ress	ure		
	Renovation					Glovebag procedu	re				
≥160 sf or ≥260 lf	Demolition					Non-Exempted (*)			proc	edure	
Location of	Is location norm by maintenance		ly					R e	R	E	E
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PATERSON, NJ 07503		07/14/1			TULLYTOWN	, PA					
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State of NJ	
tification of Asbestos Abatement rsuant to NJAC 8:60 and 12:120)	
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Date of Notification (1)	11			r/Operator (2)		*	1		JUL	0 6	UTO		1
			guerriero					105		0001		1 5	_
☐ EPA ☐ Initial	Stre	et Addre	SS					ASE	ESTOS 11/21	ULAN MELEST	j	Lα	
DEP Amended	City	State 7	Zip Code		-								
DOL Amendment #:				_									
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☐ DCA ☐ Cancellation	<u></u>	hristine	guerriero										
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Name of facility where abatement is	s taking place	(3)					Type of F						
									I (K - 12)			1.0)	
christine guerriero					-				apter 8 (C			12)	
Street Address									(Private/C (Homes, e		Glai		
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City (5)	County	(6)			Cour	nty Code (7)							
					(Stat	e use only)	Current	Use (P	rior if bein	g dem	olishe	d)	
garwood	UNIC							(8)					
Name of Monitoring Firm Hired by	Bldg. Owner	(8)		ASCM No.		Name of Abatemen							
						D & S RESTOR	RATION, I	NC.					
Street Address						Street Address							
						20 California A		- Crimorian					
City, State, Zip Code						City, State, Zip Code	е						
						Paterson, NJ 0							
Project Manager for Monitoring Firm		Ph	one Numbe	er		Telephone Number			License		er		
						973-345-8020				1169			
Start Date (10)	Sched. 0	Completion	on Date (11)		Name of OSHA Mo							
07/13/16	08/15/1	6				D & S Restora Street Address	mon, mc.						
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Facility closed/vacated during			ement.			City, State, Zip Cod							
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							Glovebag						
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City, State			Disposal D	ate		City, State							
PATERSON, NJ 07503			07/14/1	6		TULLYTOW	N, PA						
Completed by (Print or Type)	Title			Signature					Date	011.6			
BOGDAN JOLDZIC	PRESIDE	-							06/2	5/16			
	* Do not uso	thin form	for achaete	ne licensure ex	amnta	d activities							

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

					and 12:120)			111		***************************************			
ate of Notification (1)			Name of Buil	4			MONATOR METERS (1975)	liver.		JUL	E	5 20)16
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ame of Facility Where	- Abatement is Taking	g Place (3)	***************************************			Type of	Facility (4	4)					
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Project Manager for M	tonitoring Firm		Telephone	No.		hone No. 1)262-58			156				
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Start Date (10)			Completion Da	(d (1)	Om	ega Env	vironme	ntal Serv	ices				
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1,008 to 1,260 kg (1,000 kg)	alian of	is Lo	nolition scation mally	Antenton	Description	Glov Non	-Exemple	ed (*) and N			Abale	pe 	
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EDS16-164

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

Page 1 of 2

Check # 2231

Date of Notification (1) 6-30-2016		Nar Mi	ne of Building O dland Park S	wner/Op chools	erator Board	(2) d of Edu	cation	والمتاشفة	NO STA	in Torres	aktini	erflich	ali, alia	il and a
Agencies Notified Type Notification I EPA DEP Amended Amendment #_ IX Emergency (inc	cluding	Stre 25 City Mi	eet Address 0 Prospect S y, State, Zip Cod dland Park, N	treet			D	Ē ((ohone I		\mathbb{V}	E		
DOH justification) Cancellation		23.00	me of Contact cott Collins			Pin Votality		201	-444-	140	2016	-	U	
Z Serv			FACILITY INFO	RMATIC	ON	į								
Name of Facility Where Abatement is Taking F Midland Park HS	Place (3)					X Sch	ool (K-12)	SBES	STOS	ISIN	G	L &		
Street Address 250 Prospect Street						Oth etc.		vate &	comme	ercial	buildi			
City (5) Midland Park						Square F 40,000	+	2	Floors		40	dg. Aq)+	je	
County (6) Bergen			unty Code (7) ATE USE ONLY)) <u> </u>	_	School	Jse (Prior	if beir	g demo	JIISTIE	iu)			
Name of Monitoring Firm Hired by Building Ow EnviroVision Consultants, Inc.	vner (8)	1.	ASCM No. 00079			of Abatem Broup, In		actor	9)					
Street Address 20-21 Wagaraw Rd, Building 35E						Address Hambur	g Tpke							
City, State, Zip Code Fair Lawn, NJ 07410						tate, Zip C mingdal		403						
Project Manager for Monitoring Firm Guillermo M Morales		10000000	lephone No. 73) 636-9145	5		none No.)710-972	25		Licens 0108		*1			
	Scheduled (7-5-2016	Comple	etion Date (11)			of OSHA Group, In								
Occupancy Status During Abatement (Check	Only One)					Address								
		temen	ıt			Hambur	•							
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Normal Other – Describe:	I Facility Ho	ours	*	_ [state, Zip (mingdal		7403						
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Name of the last o	ovation			<u> </u>	Mini-E Glove	ontainmer inclosure bag Proce exempted	edure					9	
	lala	action										Abate	ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Nor Used S Mainte Custod	enance	by Asbest	tos Cont thermal surfac		Material (A s insulatio AT, or		(S	mount pecify or LF)		Removal	Ty Repair	e Encapsulate	Enclosure
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10 locations troughout school		X	Pi	pe & J	oint In	sulation		2:	2 LF		X			
See attached														
Name of Registered Waste Hauler		100000000000000000000000000000000000000	DEP Waste	Cubic of Was		1	Name of R	Registe	red Lar	ndfill				
GL Group, Inc			3034	TBD			Minerva							
City, State Bloomingdale, NJ				Dispos TBD	sal Date	1	City, State Naynes	burg,						
Completed by Elena Solakov	Title Preside	ent		S	Signatur	e Ele	nu Sol	ulla	ر :	Da 6-3	te 30-20	016		

Midland Park HS

EDS16-164

- 1. M.3 24 lf
- 2. Rm 22 56 lf
- 3. Rm 21 22 lf
- 4. Rm 25 22 if
- 5. Rm 28 office 18 If
- 6. Rm 29 22 If
- 7. Rm A-4 22 lf
- 8. Rm 33 22 lf
- 9. Rm 37 22 If
- 10. Rm 35 22 lf

Total: 252 lf

check #2231 page 2 of 2

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

EDS16-178	(F	Pursuant to	NJAC 8:	60 and 12:12	20)	Che	ck # 223,9.	+ 1			_
Date of Notification (1) 7-1-2016	17		Building Ov Public S	wner/Operato Schools	or (2)		ECE				1
Agencies Notified Type Notification		Street Ad	dress cust Stre	et			1881	C 00	10		
EPA Initial Amended Amendment #		City, Stat	e, Zip Code e, NJ 072	e		 	JUL	6 20	16	-	7
■ DOH	ling	Name of Kelvin	Contact				45888000 908-482-6			3	
DCA Cancellation			ITY INFOR	RMATION							
Name of Facility Where Abatement is Taking Place Washington Elementary School	e (3)				x s	Facility (4) chool (K-12)	TO SECURE	d' - ab	C THE STATE OF	
Street Address 501 Washington Ave	ii				S O	ubchapter 8 ther (i.e. pri tc.)	(Other than K vate & comme	-12) ercial build	dings,	homes	s,
City (5) Roselle					Square 40,00	e Feet	# of Floors 2	100	ildg. A	ge	
County (6) Union		County C	Code (7) ISE ONLY)		Curren		if being demo	lished)			
Name of Monitoring Firm Hired by Building Owne EnviroVision Consultants, Inc.	r (8)	ASCM 0007		10.53800	e of Abate Group,	ement Cont Inc	ractor (9)				No.
Street Address 20-21 Wagaraw Rd, Building 35E					et Address) Hambu	s urg Tpke					
City, State, Zip Code Fair Lawn, NJ 07410					State, Zip omingd	o Code ale, NJ 07	7403				
Project Manager for Monitoring Firm Guillermo M Morales		Telephor (973) 6	ne No. 336-9145	N 1975	phone No 11)710-9		License 01084				
Start Date (10) Sch	eduled C 0-2016	ompletion I	Date (11)	1	ne of OSH Group,	A Monitor Inc					
Occupancy Status During Abatement (Check On	y One)			470.000	et Addres						
Facility Closed/Vacated During Entire Perior Abatement Performed Outside of Normal Facility Other – Describe:	d of Abate acility Hou	ement urs		City	, State, Zi	urg Tpke p Code ale, NJ 0	7403				
Scope of Work (Check All That Apply)			30 - 324		701111119						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		vation			Min Glo	i-Enclosure vebag Proc				e	
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Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used So Mainter Custodia (1.	olely by nance/ al Staff? 2)		Description Containing thermal system surfacing, other miscel	g Material ems insula VAT, or		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	es N	o N/A	-	Duct Inst	ulation		950 SF	X			
	X		Din	e & Fittings	100	tion	300 LF	X			
	X			Boiler Insula		rior Boiler	680 SF	X			
Boiler Room	^					Material	300 01				
Name of Registered Waste Hauler GL Group, Inc		NJDEP V Hauler ID 0033034	No.	Cubic Yard of Waste TBD	s	Name of I	Registered Lan	ndfill			
City, State Bloomingdale, NJ				Disposal Da	ate	City, State Waynes	sburg, OH	Х			
Completed by	itle Preside	nt		Signat	ture	Pour S	Indian)	Date 7-1-20	016		

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

Page 1 of 1

EDS16-178

Check # 2237 Name of Building Owner/Operator (2) Date of Notification (1) Roselle Public Schools 7-1-2016 Street Address Agencies Notified Type Notification 710 Locust Street **EPA** Initial City, State, Zip Code Amended DEP Roselle, NJ 07203 × Amendment # DOL 2016 Emergency (including Name of Contact Telephone Number justification) DOH 908-482-1527 Kelvin White × DCA Cancellation ASBESTOS CONTROL & LICENSING FACILITY INFORMATION Type of lility (4) Name of Facility Where Abatement is Taking Place (3) Harrison Elementary School X Subenapter 8 (Other than K-12) Street Address 310 Harrison Avenue # of Floors Square Feet Bldg. Age City (5) 40.000 + 2 40+ Roselle Current Use (Prior if being demolished) County (6) County Code (7) (STATE USE ONLY) School Union Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) 00079 GL Group, Inc. EnviroVision Consultants, Inc. Street Address Street Address 140 Hamburg Tpke 20-21 Wagaraw Rd, Building 35E City, State, Zip Code City, State, Zip Code Bloomingdale, NJ 07403 Fair Lawn, NJ 07410 License No. Telephone No. Project Manager for Monitoring Firm Telephone No. (973) 636-9145 01084 (201)710-9725 Guillermo M Morales Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor GL Group, Inc. 7-11-2016 7-20-2016 Street Address Occupancy Status During Abatement (Check Only One) 140 Hamburg Tpke Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours Other - Describe: Bloomingdale, NJ 07403 Scope of Work (Check All That Apply) Renovation Full Containment with Negative Pressure ≥3 sf or ≥3 If Mini-Enclosure Demolition ≥160 sf or ≥260 lf Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Type Normally Description of Location of Used Solely by Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Encapsulate Maintenance/ (i.e. thermal systems insulation. Enclosure (Specify Remova TO BE ABATED Repair Custodial Staff? surfacing, VAT, or SF or LF) In Facility (12)other miscellaneous) (13)Yes No N/A 370 SF X X Duct Insulation Boiler Room 245 LF X Pipe & Fittings Insulation Boiler Room 110 SF X X Exterior Water Tank Insulation Boiler Room Exterior Boiler Insulation/Interior Boiler X 680 SF X Boiler Room NJDEP Waste Cubic Yards Name of Registered Landfill Name of Registered Waste Hauler of Waste Hauler ID No. Minerva GL Group, Inc 0033034 TBD Disposal Date City, State City, State TBD Waynesburg, OH Bloomingdale, NJ Date Signature Completed by Title Elone Stulla 7-1-2016 President Elena Solakov

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT OCIGINAL chale # 10613

(Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) City of Camden 1 Type Notification Street Address Agencies Notified **⊠** EPA ☐ Initial PO Box 95120 ☑ DOLWD M Amended City, State, Zip Code Amendment #1 **⊠** DOH Camden, NJ 08101 JUL □ DCA ☐ Emergency (including Name of Contact Telephone Number (NJAC 5:23-8) justification) 856-374-6094 ☐ Cancellation John Bond ASBESTOS CONTROL & FACILITY INFORMATION LICENSING Type of the stage (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Subtharts ROYDEN STREET RESIDENCES Street Address Other (i.e., private and commercial buildings, 429, 651 ROYDEN STREET RESIDENCES homes, etc.) # of Floors City (5) Square Feet Bldg. Age Camden varies varies 50+ County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) HOUSING DEEMED UNSAFE CAMDEN Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Health and Safety Services 117 Controlled Environmental Systems Street Address Street Address 1121 N. Bethlehem Pike - Suite 60 PO Box 365 City, State, Zip Code City, State, Zip Code Berlin, NJ 08009 Spring House, PA 19477 Telephone No. Project Manager for Monitoring Firm Telephone No. License No. Jim Proctor C 609-839-2432 215 542 7000 00847 Name of OSHA Monitor Start Date (10) Scheduled Completion Date (11) 5 / 5 / 16 9 / 30 / 16 Occupancy Status During Abatement (Check only one) Street Address 1121 N Bethlehem Pike -Suite 60 □ Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: 7:00AM-5:00PM/__ PM-Spring House, PA 19477 Scope of Work (Check all that apply) Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Renovation ≥3 sf or ≥3 lf ≥160 sf or >260 lf □ Demolition ☐ Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Repair Encapsulate Used Solely by Amount Asbestos Containing Material (ACM) Asbestos-Containing Material (ACM) Maintenance/ (i.e., thermal systems insulation, (Specify TO BE ABATED Custodial Staff? SF or LF) surfacing, VAT, or IN Facility (12)other miscellaneous) (13)Yes No N/A SEE ATTACHED 200 YD per res SEE ATTACHED П П П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Maste **GROWS** Waste Management of NJ 200/residenc 17273 City, State City, State Disposal Date Tullytown PA Fairless Hills, PA 9/30/16 Completed By (Print or Type) Signature Title Patricia Visco Office Manager

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT @ LIGHT 10612
(Pursuant to NJAC 8:60 and 5:16)
Smt 4/22/16

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Date of Notification (1)	5 /	16				me of Buildi	ng Owner/Operator	(2)					
Aganaias NI-MS 1			_			nty or Gar	nuen	-		Laure			
Agencies Notified EPA	Type Notifi				1000000	eet Address O Box 95				4.75	7	ROBERT OF THE PARTY OF THE PART	
⊠ DOLWD	☐ Amende				Cit	, State, Zip	Code	- "III			74	1	Maria.
☑ DOH ☐ DCA	Amendr				100000	amden, N		112		1 1/	7 1	7	
(NJAC 5:23-8)	☐ Emerge justifica		ciuain	ıg	-	me of Conta			/ Tolombana Num		_[5	1	11
	☐ Cancella				11 2	ohn Bond	7.70	14 4	Telephone Num	4]]]]	
					F	ACILITY I	NFORMATION		4	1/10	1	11/	H^-
Name of Facility Where LINE STREET RES	Abatement is	Taking	Plac	e (3)				Type of Facility	ASSESTOS CONTI 12) LICENSONTI r 8 (Other than Ways			-/	1
Street Address								Subchapte	12) LICENSONTI r 8 (Other than 1840)2	ROL	8	1	
515 517 519 LINE	STREET R	ESIDE	ENCE	S				☑ Other (i.e., homes, etc.	private and commer	oial b	uildin	gs	
City (5)								Square Feet	# of Floors	TP	ldg. A	ne	- 227
Camden								varies	varies	The state	50+	.gc	3
County (6) CAMDEN					Co	ounty Code	(7)(STATE USE ONLY)	Current Use (F	Prior if being demolis	shed)	301	No. of London	
Name of Monitoring Firm	Lirod by Dui	11411		(0)	1100				DEEMED UNSAF	E			
		ilaing O	wner	(8)		M No.	Name of Abatem						
Health and Safety	Services				11	7	Controlled E	nvironmental	Systems				
Street Address							Street Address						
PO Box 365							1121 N. Beth	nlehem Pike -	Suite 60				
City, State, Zip Code							City, State, Zip C						
Berlin, NJ 08009							Spring Hous	se, PA 19477					
Project Manager for Mon Jim Proctor	itoring Firm				lephor	e No. -839-2432	Telephone No. 215 542 7000)	License No.				
Start Date (10)5 / 5 /	16	Schedu	uled C			Date (11)	Name of OSHA		00047				
Occupancy Status During	Abatement ((Check	only										
☐ Facility Closed/Vacate	ed During Ent	ire Peri	ind of	A hat	omont		Street Address						
☐ Abatement Performed	Outside of N	Jormal F	Facilit	v Ho	ire - D	escriba		lehem Pike -S	uite 60				
Time of Abatement: 7	:00AM- <u>5:00</u>	PM/	PI	VI	AM	COCIDO	City, State, Zip C Spring Hous						
Scope of Work (Check al	I that apply)						Π F::!! C = :						-
☐ ≥3 sf or ≥3 if ☑ ≥160 sf or ≥260 if			□ Re 図 De				☐ Mini-End ☐ Gloveba	g Procedure	on-Friable Procedure	9			
			Is	Loca	ation				- Habie i roccuii	T	atom	ont T	1/100
Location	of			Norm			Description of	of	(atem	T	-
Asbestos-Containing I TO BE ABA		VI)	Ma	inten	lely by ance/	Long	estos Containing Ma	aterial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
IN Facilit					Staff?	(1.6	e., thermal systems surfacing, VAT	insulation,	(Specify	10/	a:	aps	losı
(13)				(12)		other miscellane	ous)	SF or LF)	<u>m</u>		ula a	Te.
			Yes	No	N/A	4		/				te	
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Name of Registered Wast	e Hauler				-	110/0-1-	0.1:-1/	т.,			Ш	Ш	
Waste Management				1.0		Waste ID No.	Cubic Yards of Waste 200/residenc	Name of Regis	stered Landfill				
City, State					1141	J	Disposal Date	City, State			-		1
Fairless Hills, PA							9/30/16	Tullytown	PA				
Completed By (Print or Ty	pe)	Title			_		Signature						
Patricia Visco	50. 51		fice N	Mana	ager		Patric	an Alin-	Date	7/-	1.		
SR-41		1					1 20000	car Visic	10 1	10	12	016	2

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

Date of Notification (1)					Nam	e of Buildin	na Ov	wner/Operator (1 1	
7 /	1 /	16						vp. Board Of	111711					
							y 1.v	vp. Doard Or	Ludcation	JUL 6	2016	<u> </u>		
Agencies Notified EPA	Type Notific ☐ Initial	cation				et Address						1		
⊠ DOLWD	☐ Initial	d				1 Levis D			_ L	BESTITE				
☑ DHSS	Amenda		2			State, Zip			AS	DE :		_ &	8	
☑ DCA	☐ Emerge		cludin	g	4.500	. Holly, N		3060	L	-		-		
(NJAC 5:23-8)	justificat				1	e of Contac	ct			Telephone N				
	☐ Cancella	ation			Bil	I Buffa				609-267-7	606			
					FA	CILITY IN	NFO	RMATION						
Name of Facility Where A	batement is	Takin	g Place	e (3)					Type of Facility	(4)				
FW Holbein Middle	School								School (K-12		120			
Street Address									Subchapter 8			auildir	nas	
331 Levis Dr									homes, etc.)		noroiar	Juliun	90,	
City (5)							77.55		Square Feet	# of Floors	1	3ldg.	Age	
Mt. Holly										l l				
County (6)					Cou	nty Code (7)(ST	ATE USE ONLY)	Current Use (Pri	or if being dem	olished)			
Burlington									School					
Name of Monitoring Firm	Hired by Bui	lding (Owner	(8)	ASCN	No.	Na	ame of Abateme	ent Contractor (9)					
USA Environmental	Managem	ent, l	nc.		011	2		BRISTOL EN	VIRONMENTAL	_, INC.				
Street Address				3-10-10			St	reet Address						
344 West State St.								1123 BEAVE	R STREET					
City, State, Zip Code							Cit	ty, State, Zip Co	ode					
Trenton, NJ 08618								BRISTOL, PA	19007					
Project Manager for Monit	toring Firm			Tel	ephone	No.	Te	lephone No.		License No.				
William Weisgarber				6	09-656	6-8101	1	215-788-6040	15.	00509				
Start Date (10)	T.	Sched	luled C	ompl	etion Da	ate (11)	Na	me of OSHA N	lonitor				0.000	
7 /5 /	16		7/	_ 2	9_ /	16	1	BRISTOL EN	VIRONMENTAL	, INC.				
Occupancy Status During	Abatement (Check	c only o	one)	-		Str	reet Address						
☐ Facility Closed/Vacate				- 02	ement			1123 BEAVE	R STREET					
Abatement Performed	Outside of N	ormal	Facilit	у Ноц	rs - Des			y, State, Zip Co	CONTROL OF THE CONTRO					
Time of Abatement:	AM- <u>3:3</u>	0PM/		PM-1	:00AM		4	BRISTOL, PA						
Scope of Work (Check all	that apply)							- , , - , - , , , ,						
									ainment with Neg	ative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			⊠ Re □ De					☐ Mini-Enc	losure Procedure					
				ar roma	011				mpted (*) and Nor	-Friable Proced	dure			
			1000	Loca							A	batem	ent 7	Type
Location of				Norma	ally ely by	Western Mission		Description o			Z	Z	т	m
Asbestos-Containing N TO BE ABAT		1)			ance/			Containing Ma ermal systems i		Amount	Removal	Repair	nca	nclo
IN Facility			Cust		Staff?	(1.6		surfacing, VAT,		(Specify SF or LF)	oval	=	Encapsulate	Enclosure
(13)				(12)		-	ot	her miscellane	ous)	e.			late	(D)
			Yes	No	N/A								11005	
Boiler room			\boxtimes			Pipe Ins	sula	tion		475 LF	\boxtimes			
Boiler room			\boxtimes			Breechi	ing	Insulation		650 SF				
Boiler room			\boxtimes			Boiler I	nsu	lation		450 SF	\boxtimes			
Boiler room						Tank In	sula	ation		350 SF				
Name of Registered Waste				11 (192)	JDEP \		1375-34	oic Yards of	Name of Registe	ered Landfill				
SERVICE TRANSPO	RT GROUP	, INC	: .		lauler II 20990		10000	ste 0	MINERVA L	ANDFILL				
City, State					2000			posal Date	City, State					
NEW CASTLE, DE 19	9720						7	/29/2016		JRG, OH 446	88			
Completed By (Print or Typ	ne)	Title						Signature			Date	10		
Brian Scafiro		Es	stimat	or				Bin	Scalin ((A)	1/1	116	7	

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

									111111				111	111					
Date of Notification (1) 7 / 1 / 16						Name of Building Owner/Operator (2) Mount Holly Twp. Board Of Education													
						Charact Address													
Agencies Notified Type Notification ⊠ EPA □ Initial						t Address 1 Levis D	ONTRO)L	&										
		d				State, Zip			LICENSING										
□ DHSS	Amendm	ALC: UNKNOWN	7.0			Holly, N													
	Emerger justificat		cluding	9		of Contac			Telephone Number										
(NJAC 5:23-8)	☐ Cancella				0.0000000000000000000000000000000000000	l Buffa	0.		5-20-5-20-11-11-20-5-7-5	609-267-7606									
		7	-		FA	CILITY	NFO	RMATION											
Name of Facility Where Ab	atement is	Takino	Place	(3)		OILIT II	-	TUNATION	Type of Facility	(4)		-							
FW Holbein Middle School									School (K-12)										
Street Address						Subchapter	8 (Other than I												
331 Levis Dr									Other (i.e., private and commercial buildings, homes, etc.)										
City (5)							-		Square Feet	# of Floors	s Bldg. Ag			ge					
Mt. Holly												9761 B							
County (6)					Cou	nty Code (7)(ST	ATE USE ONLY)	Current Use (Pr	ior if being der	nolished)							
Burlington									School										
Name of Monitoring Firm H	ired by Buil	ding C	wner	(8)	ASCM	No.	Name of Abatement Contractor (9)												
USA Environmental I	Managem	ent, li	nc.		011	2	1	BRISTOL EN	NVIRONMENTAL, INC.										
Street Address							Sti	reet Address											
344 West State St.			115				1	1123 BEAVE	R STREET										
City, State, Zip Code					ty, State, Zip C														
Trenton, NJ 08618					BRISTOL, PA														
Project Manager for Monitoring Firm Tele							11/07/25	lephone No.		License No.									
						5-8101	-	215-788-6040		00509									
Start Date (10)7 /5 /		etion Da 9 /	ate (11) 16	1000000	ime of OSHA M BRISTOL EN	VIRONMENTAL, INC.													
Occupancy Status During Abatement (Check only one)								reet Address											
☐ Facility Closed/Vacated					ment		0.00	1123 BEAVE	R STREET										
Abatement Performed Outside of Normal Facility Hour				rs - Des		_	y, State, Zip Co												
Time of Abatement:	AM- <u>3:3</u>	<u>0</u> PM/_		PM- <u>1</u>	:00AM		1000000	BRISTOL, PA											
Scope of Work (Check all th	nat apply)						1												
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			⊠ Re					☐ Mini-End	tainment with Neg dosure g Procedure mpted (*) and No										
				Loca							P	Abatement Type							
Location of Norma Ashestos Containing Material (ACM) Used Sole							Description of			Z	T	R	Ш	m					
Asbestos-Containing Ma TO BE ABATE		1)	Ma	intena	ince/			Containing Ma ermal systems		Amount (Specify	Kemova		Repair	Encapsulate	Enclosure				
IN Facility			Cust	todial (12)	Staff?			surfacing, VAT,	, or	SF or LF)	\\\ \alpha \\			Sul	sure				
(13)		ŀ	Yes	No	N/A	1	ot	ther miscellane	ous)			-		ate					
Boiler room						Fire Bri	ick			300 SF		1	П	П	П				
						Boiler I	Rib I	nsulation		300 SF		-	\Box	$\overline{\Box}$	П				
Boiler room						Gasket				2 SF		-			П				
Boiler room				П	In	Inciner	ator			300 SF		-		П					
						Waste	_	bic Yards of	Name of Registered Landfill										
SERVICE TRANSPORT GROUP, INC.					auler II 20990	D No.	Wa	iste 60	MINERVA LANDFILL										
City, State							1-7.00	posal Date	City, State										
NEW CASTLE, DE 197	720						7	/29/2016	WAYNESBURG, OH 44688										
Completed By (Print or Type	;)	Title	Ž.					Signature	017	7	Date								
Brian Scafiro Estimator								Buc	Scafin (8	7/	11	16						

ASB-41 MAY 11 STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NJAC 8:60-7 AND 12:120-7

Date of Notification (1) Name of Building Owner / Operator (2) First Energy 05 15 07 Street Address Type of Notification Agencies Notified 76 South Street City, State, Zip Code **EPA** Initial J DEP П Amended Akron, Ohio 44308 Telephone Number DOH Amendment Name of Contact 215-931-4351 Emergency w/ justification Jim Halsey DOL 2016 MII Cancellation FACILITY INFORMATION ASBESTOS CONTROL & Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) LICENSING School (Kg Subchaptics (Other than K-12) Street Address V 283 LENOX AVENUE Other (I.e., private & commercial bldgs., homes, etc.) City (5) County (6) County Code (7) Square Feet # Of Floors **Building Age** LONG BRANCH MONMOUTH Current Use (Prior if being demolished) Telephone Pole ASCM NO Name of Monitoring Firm Hired by Bldg. Owner (8) Environmental Health Investigations NORTHSTAR CONTRACTING GROUP, INC. Street Address Street Address 655 West Shore Trail City, State, Zip Code 32 Williams Parkway City, State, Zip Code Sparta, NJ 07871 Project Mngr. For Monitoring Firm Telephone Number Dino Nappi 212-682-9271 East Hanover, NJ 07036 Telephone Number License Number Sheduled Start Date (10) Sched, Completetion Date (11) 07 __19__ 16 07 00860 973-884-8682 Name of OSHA Monitor Occupancy Status During Abatement (Check Only 1) NORTHSTAR CONTRACTING GROUP. INC. Facility Closed/Vacated During Entire Period of Street Address Abatement Abatement Performed Outside of Normal Facility Hours - Describe: ___ MON-FRI 8:00 am to 5;00 pm 32 Williams Parkway City, State, Zip Code 1 Other - Describe: East Hanover, NJ 07036 Scope of Work (Check All That Apply) Demolition Renovation Full Containment with Negative Pressure 1 >3sf or >3lf Mini - Enclosure >160 sf or >260 lf Glovebag Procedure 1 Non-Exempted (*) and Non-Friable Procedure Description of Abatement Type Location of Is Asbestos - Containing Location R Asbestos Containing N N Normally Material (ACM) Amount E R E С C M (Specify TO BE ABATED Used (l.e., thermal systems L Solely insulation, surfacing, VAT, SF or LF) 0 P A in Facility P 0 by Mainor other miscellaneous) V Α (13)s S tenance/ A 1 R U U Custodial R Staff (12) YES NO N/A Exterior Telephone Pole Transite Conduit 25 LF NJDEP Waste Cubic Name of Registered Landfill Name of Registered Waste Hauler NEWARK CARTING Hauler ID No. Yards I.E.S.I. 4509 of Waste City, State Disposal City. State Date BETHLEHEM, PA 18105 NEWARK, NJ Completed by (Print or Type) Title Signature Date 07/05/16 Steven Stiles Project Manager

ASB-41

CK: 4684	State of New J NOTIFICATION OF ASBES* (Pursuant to NJAC 8:6							TOS ABATEMENT 0 and 12:120)									
Date of Notification (1) 07/02/2016							(2) sity) [5 (G	5 1	$ \forall$	13	1		
Agencies Notified Type Notification		Street A	ddress River Ro	oad				1	J	IUL	5	201	6	世			
EPA X Initial Amended Amendment #				ite, Zip Co													
Emergency (in justification) DCA Emergency (in justification) Cancellation	ncluding		Name of	f Contact Gorczyc			OS CONTROL & DEENSING										
		FACI	LITY INFO	DRMATI	ON												
Name of Facility Where Abatement is Taking Dreyfuss Building	3)					Type of Facility (4)											
Street Address 145 Park Avenue						School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes,											
City (5) Florham Park						etc	etc.)					Bldg. Age					
County (6) Morris			Code (7) USE ONLY)			Current Use (Prior if being demolished)											
Name of Monitoring Firm Hired by Building O	wner (8)		ASCN	1 No.		— School Name of Abatement Contractor (9)											
Environmental Design Inc Street Address			0095				VMC Company Inc Street Address										
5434 King Ave City, State, Zip Code					Piaget Avenue State, Zip Code												
Pennsauken, NJ 08109						Clifton, NJ 07011											
Project Manager for Monitoring Firm Jay Murray	Telepho 888-30	ne No. 06-4545		Teleph 973-		License No. 00704											
Start Date (10) 07/19/2016	Date (11)		Name of OSHA Monitor VMC Company Inc														
Occupancy Status During Abatement (Check	-	35				Street Address											
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe:	Abatem / Hours	ent			City, S	State, Zip Code											
Scope of Work (Check All That Apply)											-				_		
	Renova Demoliti				×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure											
(a)	ls	Locati	on			_	1 1011	LXciripted () and	INOII	-i iiau	Abatement					
Location of Norm				Ashari		scription		of aterial (ACM)			A			Туре			
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) (13)					thermal surfa	system: cing, VA niscellar					Remova	Repair	Encapsulate	Enclosure			
	Yes	No	N/A											te	CD		
Auditorium	Х			Ceili	ng pla	ster		12 SF			Х						
												-			-		
N																	
Name of Registered Waste Hauler Newark Carting Inc	Н	TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL TOTAL			Yards ste		Name of Registered Landfill IESI Betlehem Landfill										
City, State Newark, NJ		. 100		Dispos	sal Date		City, State Bethlehe	m. P.	Α		<u> </u>			7			
Completed by			S	ignature					Da	te	-	-					
Voytek Roszkowski President						V. Costo of 07/02/2016											

Print Form

Company of the Company of the Company

EDS16-164

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

Page 1 of 2 Check # 2236

Date of Notification (1) 6-30-2016	1	Name of Building Owner/Operator (2) Midland Park Schools Board of Education										, C. € Parent								
Agencies Notified Type Notification		Street Ad		FINED																
EPA DEP Amended Amendment #_	Amended Amendment #				250 Prospect Street City, State, Zip Code Midland Park, NJ 07432					E			V	E		1				
□ Emergency (inc justification) □ DCA □ Cancellation					Name of Contact Scott Collins						Telephone Number 201444-14002016									
		FACIL	ITY INFO	ION	T	True (SE ville) (A)														
Name of Facility Where Abatement is Taking P Midland Park HS Street Address						Type of Fability (4) X School (K-12) A BESTOS CONTROL & Subchapter 8 (Other than K-12)														
250 Prospect Street				(i.e. pi	private & commercial buildings, homes,															
City (5) Midland Park					Square Feet # of Floors Bldg. Age 40,000 + 2 40+															
County (6) Bergen			County Code (7) (STATE USE ONLY)					rent Us hool	e (Prio	r if bei	ng dem	olishe	ed)							
Name of Monitoring Firm Hired by Building Ow EnviroVision Consultants, Inc.	mer (8)							ne of Abatement Contractor (9) Group, Inc												
Street Address 20-21 Wagaraw Rd, Building 35E						et Address) Hamburg Tpke														
City, State, Zip Code Fair Lawn, NJ 07410						, State, Zip Code comingdale, NJ 07403														
Project Manager for Monitoring Firm Guillermo M Morales		elephor (973) 6	ne No. 36-9145	5	100000000000000000000000000000000000000	Telephone No. License No. (201)710-9725 01084														
	Com 6	,					e of OSHA Monitor Group, Inc													
Occupancy Status During Abatement (Check C		77797					t Address													
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal		ement					Hamburg Tpke State, Zip Code													
Other – Describe: weekend work only, Fri	o Sur	nday	B	0.00	mingdale, NJ 07403															
Scope of Work (Check All That Apply)																				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	novat moliti			2	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure															
	ocatio	n I			- Eur	<u>1</u> 12	NOII-EXC	mptec	() air	u Non-i	Habi		Abate	ment						
Location of	rmally	y		D	escription	otion of ng Material (ACM) tems insulation, , VAT, or ellaneous)			Amount (Specify SF or LF)				Туре							
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Soleli tenan dial S (12)	ce/		therma surf	al system acing, VA							Remova	Repair	Encapsulate	Enclosure					
N 35	No	N/A										22		ate	ė					
24 locations troughout school				Pipe & Joint				ation		49	499 LF									
See attached																				
	Lat	IDED W	la a la	O. Ibi	a Varda	ds Name of Registered Landfill														
Name of Registered Waste Hauler GL Group, Inc			JDEP Wauler ID 033034	c Yards aste)		Mi														
City, State Bloomingdale, NJ		Disposal Da TBD					City, State Waynesburg, OH													
Completed by Elena Solakov	ent				Signatur	e &	Elony Stulla Date 6-30-2016													

Midland Park HS EDS16-164

- 1. Rm 16-12 lf
- 2. Kitchen entering Café 22 If
- 3. Bond Rm 20 If
- 4. Men's Phys Ed 18 If
- 5. Continuing Ed Office 35 If
- 6. Special services 22 If
- 7. Main office 38 lf
- 8. Guidance 20 If
- 9. Small facility men's Rom 20 If (stalls)
- 10. Café S1 22 If
- 11. Small facility women's Rm 22 lf
- 12. Rm 53 22 lf
- 13. Rm 54 22 lf
- 14. Kitchen office 16 lf
- 15. Outside kitchen office 22 lf
- 16. Kitchen waste Rm 15 lf
- 17. Kitchen locker Rm 22 lf
- 18. Rm next to kitchen 22 If
- 19. Meeting Rm 22 lf
- 20. Girls locker Rm 22 If (next to shower)
- 21. Trainers Rm 12 If
- 22. Outside trainers Rm in boys locker 14 lf
- 23. Girls locker room leading to storage closet 15 lf
- 24. Girls locker shower 22 If

Total: 499 If

Check #2236 page 2 of 2

