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

**Date of Notification:** July 1, 2016

**Name of Building Owner/Operator:** One Yonkers Associates, LLC

**Address:** 450 7th Avenue, Suite 701, New York, NY 10123

**Telephone Number:** 973-669-2900

**Name of Contact:** Lisa Fritz

**Facility Information**

- **Name of Facility Where Abatement is Taking Place:** Easy Pickins
- **Street Address:** 80 Broad Street, Elizabeth, NJ
- **County Code:** Union (STATE USE ONLY)
- **Current Use:** (Prior if being demolished)

**Name of Monitoring Firm Hired by Building Owner:** Sky Environmental Services Inc.

**Name of Abatement Contractor:** Be Construction Corporation

**Street Address:** 140 Boulevard, Mountain Lakes, NJ 07046

**Telephone No.:** 973-588-4821

**License No.:** 01231

**Name of OSHA Monitor:** Schneider Laboratories Global Inc.

**Street Address:** 2512 W Cary Street, Richmond, VA, 23220

**Occupancy Status During Abatement:**
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours

**Start Date:** 07/12/2016

**Scheduled Completion Date:** 07/16/2016

**Scope of Work:**
- ≥160 sf or ≥260 ft

**Description of Asbestos Material:**
- NW Storage/Sprinkler Room: Pipe and Pipe Joint Insulation, 100 LF
- Sprinkler Room: Floor Tile and Mastic, 1,700 SF

**Name of Registered Waste Hauler:** Be Construction Corporation

**NJDEP Waste Hauler ID No.:** 0035767

**Cubic Yards of Waste:**

**Name of Registered Landfill:** Tullytown Facility

**City, State:** West Orange, NJ 07052

**Disposal Date:**

**Completed by:** Barbara Reed

**Title:** President

**Date:** 07/01/2016

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

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>6/29/16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Building Owner / Operator (2)</td>
<td>Belford Seafood Cooperative Association</td>
</tr>
<tr>
<td>Street Address</td>
<td>901 Port Monmouth Road</td>
</tr>
<tr>
<td>City, State &amp; Zip Code</td>
<td>Belford, NJ 07718</td>
</tr>
<tr>
<td>Name of Contact</td>
<td>Bob Adams</td>
</tr>
<tr>
<td>Telephone Number</td>
<td>610-633-4370</td>
</tr>
</tbody>
</table>

**FACILITY INFORMATION**

<table>
<thead>
<tr>
<th>Name of Facility Where Abatement is Taking Place (3)</th>
<th>Roof</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street Address</td>
<td>901 Port Monmouth Road</td>
</tr>
<tr>
<td>City (5)</td>
<td>Belford</td>
</tr>
<tr>
<td>County (6)</td>
<td>Monmouth</td>
</tr>
<tr>
<td>County Code (7)</td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Type of Facility (4)</th>
<th>School (K-12)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subchapter 8 (Other than K-12)</td>
<td></td>
</tr>
<tr>
<td>X Other (i.e., private &amp; commercial buildings, homes, etc.)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Square Feet</th>
<th># of Floors</th>
<th>Bldg. Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>1,000</td>
<td>2</td>
<td>50+</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Current Use (Prior if being demolished)</th>
<th>Ice Production</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Abatement Contractor (9)</td>
<td>Global Abatement Services, LLC</td>
</tr>
<tr>
<td>Street Address</td>
<td>443 Schoolhouse Road</td>
</tr>
<tr>
<td>City, State &amp; Zip Code</td>
<td>Monroe Township, NJ 08831</td>
</tr>
<tr>
<td>Telephone Number</td>
<td>732-605-9062</td>
</tr>
<tr>
<td>License Number</td>
<td>00714</td>
</tr>
</tbody>
</table>

| Name of OSHA Monitor | Global Abatement Services, LLC |
| Street Address | 443 Schoolhouse Road |
| City, State & Zip Code | Monroe Township, NJ 08831 |

<table>
<thead>
<tr>
<th>Scope of Work (Check all that apply)</th>
<th>Demolition</th>
</tr>
</thead>
<tbody>
<tr>
<td>X Renovation</td>
<td></td>
</tr>
<tr>
<td>Large Project</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Quantity is ≥ 3 SF or ≥ 3 LF ACM</th>
<th>X Quantity is ≥ 160 SF or ≥ 260 LF ACM</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM)</th>
<th>TO BE ABATED in Facility (13)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is Location Normally Used Solely by Maintenance or Custodial Staff? (12)</td>
<td></td>
</tr>
<tr>
<td>Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)</td>
<td></td>
</tr>
<tr>
<td>Amount (Specify Square Feet or Linear Feet)</td>
<td></td>
</tr>
<tr>
<td>Abatement Type (Specify: Removal, Repair, Encapsulation or Enclosure)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Roof</th>
<th>N/A</th>
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<tbody>
<tr>
<td>Roofing material</td>
<td>220 SF</td>
</tr>
<tr>
<td>Removal</td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Name of Registered Waste Hauler</th>
<th>Freehold Cartage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cu. Yds. of Waste</td>
<td>5</td>
</tr>
<tr>
<td>City, State</td>
<td>GROWS</td>
</tr>
<tr>
<td>Disposal Date</td>
<td>7/13/16</td>
</tr>
<tr>
<td>Name of Registered Landfill</td>
<td>Morrisville, PA</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Project Manager</th>
<th>Dominick Tringali</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title</td>
<td>Manager</td>
</tr>
</tbody>
</table>

Signature  
Date 6/29/16

ASB-41 JUN 95 G4667
Federal Notification of Asbestos Abatement (Pursuant to NJAC 8:80-7 and 12:120-7)

Name of Building Owner/Operator
THE HOUSE OF GOOD SHEPPARD

Street Address
798 WILLOW GROVE STREET

City, State, Zip Code
HACKETTSTOWN, NJ 07840

Name of Contact
CRAG STROUD

Telephone Number
908-684-5736

Name of Facility Where Abatement is Taking Place
THE HOUSE OF GOOD SHEPPARD

Street Address
798 WILLOW GROVE STREET

City
HACKETTSTOWN

County
WARREN

County Code
State use Only

Name of Monitoring Firm Hired by Building Owner
PENNONI ASSOCIATES

Street Address
515 GROVE STREET SUITE 18

City, State, Zip Code
HADDEN HEIGHTS, NJ 08035

Project Manager for Monitoring Firm

TO BE DETERMINED

TO BE DETERMINED

Scheduled Start Date
7  11  2016

Scheduled Completion Date
8  11  2016

Month
Day
Year

Occupancy Status During Abatement (Check Only One)
X Facility Closed/Vacated During Entire Period of Abatement
Abatement Outside Normal Facility Hours
X Describe: 7:00AM TO 4:30PM
Other - Describe:

Scope of Work (Check Only One)

Demolition
X Full Containment with Negative Pressure
>3sf or >3fl
Mini-Enclosure
X Glovebag Procedure
>10sf or >260lf
Non-Firable Procedure

Location of ACM Facility

Is Location Normally Used by Custodial Staff
Yes
NO
N/A

Description of ACM to be Removed
TANK INSULATION
PIPE INSULATION

Amount to be Removed (Specify SF/LF)
400SF
60 LF

Abatement Type
X

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

NJ DEF Waste ID No.
SW1996

Cubic Yds waste
TBD

City, State
BRONX, NY

Disposal Date
TBD

Name of Registered Landfill
MINERVA ENTERPRISES, INC

City, State of Registered Landfill
WAYNESBURG, OHIO

Completed By (Print or Type)
ANITA SMOLAR

Title
GENERAL MANAGER

Signature

Date
7/11/16
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1):
07-01-16
Name of Building Owner/Operator (2):
Verizon Communication

Agencies Notified:
- EPA
- DEP
- DOL
- DOH [X]
- DCA

Type Notification:
- Initial [X]

Street Address:
700 Hidden Ridge
City, State, Zip Code:
Irving, TX 75038

Name of Contact:
Brian Kingsbury

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3):
315 Park Avenue
City (5):
Linden
County (6):
Union

County Code (7) (STATE USE ONLY):

Square Feet:
80,000

Current Use (Prior if being demolished):
Commercial

Type of Facility (4):

Subclass (Check One):
X School (K-12)
X Office (Other than K-12)
Other Commercial buildings, homes, etc.

Name of Monitoring Firm Hired by Building Owner (8):
ESIS Health, Safety & Environmental

ASCM No.:

Name of Abatement Contractor (9):
Pinnacle Environmental Corp.

Street Address:
P.O. Box 430
City, State, Zip Code:
North Versailles, PA 15137

Telephone No.:
(201) 366-5166

License No.:
007566

Name of OSHA Monitor:
Even-Air Inc.

Street Address:
200 Broad Street
City, State, Zip Code:
Carlstadt, NJ 07072

Start Date (10):
07-15-16

Scheduled Completion Date (11):
10-31-16

Occupancy Status During Abatement (Check Only One):
X Facility Closed/ Vacated During Entire Period of Abatement

Abatement Performed Outside of Normal Facility Hours

Scope of Work (Check All That Apply):
23 sf or 23 if
X 150 sf or 230 sf

□ Renovation
□ Demolition

□ Full Containment with Negative Pressure
□ Mini-Enclosure
□ Gluebag Procedure
□ Non-Exempted (*) and Non-Friable Procedure

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

Main: Throughout

Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12):
No [X]

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

Amount (Specify SF or LF):
144SF [X]

Abatement Type:

Location of Registered Waste Hauler:
ATC, Inc./ JBT (50071)
NJDEP Waste Hauler ID No.:
24310

Cubic Yards of Waste:
TBD

Name of Registered Landfill:
Minerva Enterprises

City, State:
Waynesburg, OH 44688

Disposal Date:
TBD

Completed by:
Joseph Patrick
Title:
Project Manager
Signature:

Date:
07-01-16

* Do not use this form for asbestos licensure exempted activities.
# Federal Notification of Asbestos Abatement

**Date of Notification:** 07/18/2016

**Name of Building Owner/Operator:** MACY'S CORPORATE SERVICES (FEDERATED)

**Street Address:** 7 WEST SEVENTH STREET

**City, State, Zip Code:** CINCINNATI, OHIO 45202

**Name of Contact:** David Gibbons

**Telephone Number:** 212-494-4324

## FACILITY INFORMATION

**Name of Facility Where Abatement is Taking Place:** MACY'S STORE - PARAMUS PARK MALL

**Street Address:** 100 PARAMUS PARK

**City:** BERGEN

**County:** PARAMUS

**County Code:** ASGM

**State Use Only:** ASCM No.

**Name of Abatement Contractor:** ACM CONSULTING CORP.

**Street Address:** 515 GROVE STREET SUITE 18

**City, State, Zip Code:** HADDEN HEIGHTS, NJ 07605

**Telephone Number:** 908-687-1008

**License Number:** 00575

**Name of OSHA Monitor:** ENSL ANALYTICAL

**Street Address:** 307 WEST 38TH STREET

**City, State, Zip Code:** NEW YORK, NY 10118

**Occupancy Status During Abatement (Check Only One):**
- [X] Abatement Outside Normal Facility Hours
- [ ] Facility Closed/Vacated During Entire Period of Abatement

**Other - Describe:**

**Description of Work (Check Only One):**
- [X] Demolition
- [ ] >35f or >3f
- [ ] >160sf or >260lf
- [ ] Renovation

**Location of ACM Facility Used by Custodial Staff:**

**Description of ACM to be Removed:**

**Amount to be Removed (Specify SF/LF):** 2000SF

**Abatement Type:**[X] VAT & MASTIC

**Name of Registered Waste Hauler:**

**City, State:** BRONX, NY

**Disposal Date:** TBD

**Name of Registered Landfill:** MINERVA ENTERPRISES, INC

**City, State of Registered Landfill:** WAYNESBURG, OHIO

**Completed By (Print or Type):** ANITA SMOLAR

**Title:** GENERAL MANAGER

**Signature:** [Signature]

**Date:** 07/18/2016
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1) 7 / 6 / 16

Name of Building Owner/Operator (2)
Spotswood Board of Education

Agencies Notified
☒ EPA
☒ DOLWD
☒ DOH
☐ DCA
(NJAC 5:23-B)

Type Notification
☒ Initial
☐ Amended
☐ Amendment #____
☐ Emergency (including justification)
☐ Cancellation

Street Address
105 Summerhill Rd

City, State, Zip Code
Spotswood, NJ 08884

Name of Contact
Thomas Calder -Principal

RECEIVED JUL 7 2016

ASBESTOS CONTROL & LICENSING

Name of Facility Where Abatement is Taking Place (3)
Spotswood High School

Street Address
105 Summerhill Rd

City (5)
Spotswood

County (6)
Middlesex

County Code (7)(STATE USE ONLY)

Name of Monitoring Firm Hired by Building Owner (8)
Environmental Connections

ASCM No.
30

Name of Abatement Contractor (9)
Controlled Environmental Systems

Street Address
1121 N. Bethlehem Pike - Suite 60

City, State, Zip Code
Spring House, PA 19477

Telephone No.
215 942 7000

License No.
00847

Project Manager for Monitoring Firm
Roland Jones

Telephone No.
609 392-4200

Start Date (10) 7 / 18 / 16

Scheduled Completion Date (11) 8 / 3 / 16

Name of OSHA Monitor
CES

Occupancy Status During Abatement (Check only one)
☐ Facility Closed/Vacated During Entire Period of Abatement
☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7:00AM-5:00PM____PM____AM

Scope of Work (Check all that apply)
☒ 3 sf or ≥3 If
☒ 160 sf or ≥260 If

☐ Renovation
☒ Demolition

☐ Full Containment with Negative Pressure
☐ Mini-Enclosure
☐ Glovebag Procedure
☒ Non-Exempted (*) and Non-Friable Procedure

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

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

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

Amount (Specify SF or LF)

Abatement Type
☐ Removal
☐ Repair
☐ Encapsulate
☐ Enclosure

Exterior Windows
☐ Window Caulk
☒ Window Glazing

Exterior Shutters

Name of Registered Waste Hauler
Geppert Recycling

NJDEP Waste Hauler ID No.

Cubic Yards of Waste
20 Yards

Name of Registered Landfill
Western Berks Community Landfill

City, State
Hatfield, PA

Completed By (Print or Type)
Patricia Visco

Title
Office Manager

Signature

Disposal Date
8/3/16

City, State
Birdsboro, PA 19508

Date
7/6/16

* Do not use this form for asbestos licensure exempted activities.
**State of New Jersey**

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

**Date of Notification (1)**
7 / 6 / 16

**Name of Building Owner/Operator (2)**
Spotswood Board of Education

**Agencies Notified**
- [x] EPA
- [x] DOLWD
- [x] DOH
- [ ] DCA (NJAC 5:23-8)

**Type Notification**
- [x] Initial
- [ ] Amended
- [ ] Emergency (including justification)
- [ ] Cancellation

**Street Address**
105 Summerhill Rd

**City, State, Zip Code**
Spotswood, NJ 08884

**Name of Contact**
Nancy Torchiano - Principal

**Telephone Number**
(732) 723-2220

**Name of Facility Where Abatement is Taking Place (3)**
G. Austin Schoenly Elementary School

**Square Feet**
30,000

**Current Use (Prior if being demolished)**
School

**County Code (7) (STATE USE ONLY)**

**FACILITY INFORMATION**

**Street Address**
80 Kane Ave

**City (5)**
Spotswood

**County (6)**
Middlesex

**Name of Monitoring Firm Hired by Building Owner (8)**
Environmental Connections

**AsCM No.**
30

**Name of Abatement Contractor (9)**
Controlled Environmental Systems

**Street Address**
1121 N. Bethlehem Pike - Suite 60

**City, State, Zip Code**
Spring House, PA 19477

**Telephone No.**
215 542 7000

**License No.**
00847

**Project Manager for Monitoring Firm**
Roland Jones

**Telephone No.**
609 3924200

**Start Date (10)**
7 / 20 / 16

**Scheduled Completion Date (11)**
8 / 5 / 16

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

- [ ] ≥3 sf or ≥3 lf
- [ ] ≥100 sf or ≥250 lf
- [x] Renovation
- [x] Demolition
- [ ] Full Containment with Negative Pressure
- [ ] Mini-Enclosure
- [x] Glovebag Procedure
- [ ] Non-Exempted (*) and Non-Fireable Procedure

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

<table>
<thead>
<tr>
<th>Location of ACM Used Solely by Maintenance/Custodial Staff? (12)</th>
<th>Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>[x] Yes</td>
<td>Pipe insulation</td>
<td>2 LF</td>
<td>[x]</td>
</tr>
<tr>
<td>[ ] No</td>
<td>Pipe insulation</td>
<td>2 LF</td>
<td>[x]</td>
</tr>
<tr>
<td>[ ] N/A</td>
<td></td>
<td></td>
<td>[x]</td>
</tr>
</tbody>
</table>

**Room 2**
- [ ] Pipe insulation
- [ ] 2 LF

**Room 4**
- [ ] Pipe insulation
- [ ] 2 LF

**3 Locations - TO BE DETERMINED**
- [ ] Pipe insulation
- [ ] 2 LF

**Name of Registered Waste Hauler**
Geppert Recycling

**NJD EP Waste Hauler ID No.**

**Cubic Yards of Waste**
1

**Name of Registered Landfill**
Western Berks Community Landfill

**City, State**
Hatfield, PA

**Disposal Date**
8/5/16

**City, State**
Birdsboro, PA 19508

**Completed By (Print or Type)**
Patricia Visco

**Title**
Office Manager

**Signature**

**Date**
7/6/16

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*Do not use this form for asbestos licensure exempted activities.*
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1) 6/20/2016

Name of Building Owner/Operator (2) OCEAN TWP. BD. OF EDUCATION

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

Type Notification
- Initial

Street Address 163 Monmouth Road
City, State, Zip Code Oakhurst, NJ 07755
Name of Contact David J. D'Andrea

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3) WAYSIDE ELEMENTARY SCHOOL

Street Address 733 BOWNE ROAD
City (5) OCEAN, NJ
County Monmouth
County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished)

Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) CREAM RIDGE ENVIRONMENTAL INC.

MANAGEMENT ENVIRONMENTAL CONSULTING

Street Address P.O. BOX 341
City, State, Zip Code CROSSWICKS, NJ 08515

Project Manager for Monitoring Firm WILLIAM WEISGARBER

Telephone No. 609-396-9208

Start Date (10) 6/27/2016

Occupancy Status During Abatement (11)
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours

Scope of Work (Check all that apply)
- ≥ 3 sf or ≥ 3 if
- ≥ 260 sf or ≥ 260 if
- Renovation
- Demolition

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

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

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

Amount (Specify SF or LF)

Abatement Type

Location of Registered Waste Hauler

CARNEVALE DISPOSAL COMPANY

City, State HAMILTON, NJ

Completed By DAVID D'ANDREA

Title PRESIDENT

Signature

Date 6/20/2016

* Do not use this form for asbestos licensure exempted activities
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 6:88 and 12-120)

Date of Notification (1)
07/01/2016

Name of Building Owner/Operator (2)
ECC GROUP, INC.

Agencies Notified

<table>
<thead>
<tr>
<th>Agency</th>
<th>Notification</th>
</tr>
</thead>
<tbody>
<tr>
<td>EPA</td>
<td>Initial</td>
</tr>
<tr>
<td>DEP</td>
<td>Amended</td>
</tr>
</tbody>
</table>

Street Address
30 US ROUTE 46 EAST
Lodi, NJ 07644

Name of Contact
ED SALAMEH

Name of Facility Where Abatement is Taking Place (3)
ECC GROUP, INC.

Location of Asbestos-Containing Material (ACM) To Be Abated

<table>
<thead>
<tr>
<th>Location</th>
<th>Normally Used Solely by Maintenance/Custodial Staff? (13)</th>
</tr>
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<tbody>
<tr>
<td>ROOF</td>
<td>X&lt;br&gt;ACM ROOFING MATERIAL&lt;br&gt;10,500 LF</td>
</tr>
</tbody>
</table>

Name of Registered Waste Hauler
TRI STATE - ASSOC. INC

Name of Registered Landfill
MINERVA ENTERPRISE INC.

Date of Completion
07/01/2016

Do not use this form for asbestos licensure exempted activities.
<table>
<thead>
<tr>
<th>Administrative Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Notification: 6/29/16</td>
</tr>
<tr>
<td>Name of Building Owner / Operator: Heritage Capital Group</td>
</tr>
<tr>
<td>Type of Notification: Emergency Notification</td>
</tr>
<tr>
<td>Street Address: 123 Prospect Street, Ridgewood, NJ 07450</td>
</tr>
<tr>
<td>Name of Contact: Jeff Greenberg</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Facility Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Facility Where Abatement is Taking Place: Office Building</td>
</tr>
<tr>
<td>Street Address: 210-214 Main Street</td>
</tr>
<tr>
<td>City: Hackensack, County: Bergen, County Code: 00714</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Monitoring Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Monitoring Firm: Whitestone Associates</td>
</tr>
<tr>
<td>Address: 35 Technology Drive, Warren, NJ 07059</td>
</tr>
<tr>
<td>Project Manager: Jeremy Hassett, Telephone Number: 908-668-7777</td>
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<tr>
<td>Scheduled Start Date: 7/13/16, Scheduled Completion Date: 8/15/16</td>
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<table>
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<tr>
<th>Abatement Details</th>
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</thead>
<tbody>
<tr>
<td>Occupancy Status During Abatement: Facility Closed/Vacated During Entire Period of Abatement</td>
</tr>
<tr>
<td>Scope of Work: Demolition, Renovation</td>
</tr>
<tr>
<td>Location of Asbestos-Containing Material (ACM): Throughout, 1st fl., mezzanine</td>
</tr>
<tr>
<td>Description of ACM: Pipe insulation, Joint compound</td>
</tr>
<tr>
<td>Amount: 5,000 LF, 1,000 SF, 2,000 SF</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Disposal Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Registered Waste Hauler: NJDEP Waste Hauler ID # 18693 GROWS</td>
</tr>
<tr>
<td>City: Freehold, NJ</td>
</tr>
<tr>
<td>Disposal Date: 8/16/16, City: Morrisville, PA</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Compliance Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Compliance Status: As per regulations</td>
</tr>
<tr>
<td>Approving Authority: N/A</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Certification</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date: 6/29/16</td>
</tr>
<tr>
<td>Signature: [Signature]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Additional Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Abatement Contractor: Global Abatement Services, LLC</td>
</tr>
<tr>
<td>Street Address: 443 Schoolhouse Road, Monroe Township, NJ 08831</td>
</tr>
<tr>
<td>Telephone Number: 732-605-9062, License Number: 00714</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Enforcement Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Use: Office</td>
</tr>
<tr>
<td>Type of Facility: School (K-12)</td>
</tr>
<tr>
<td>Subchapter: Other (Other than K-12)</td>
</tr>
<tr>
<td>Other: N/A</td>
</tr>
</tbody>
</table>

| ASB-41 JUN 95 G4657 |
**NOTIFICATION OF ASBESTOS ABATEMENT**
(Pursuant to NJAC 8:80 and 12:120)

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>July 1, 2016</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Agencies Notified</th>
<th>Type Notification</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓ EPA</td>
<td>Initial Amendment #</td>
</tr>
<tr>
<td>✓ DEP</td>
<td>Amended Amendment #</td>
</tr>
<tr>
<td>✓ DOL</td>
<td>Emergency (including justification)</td>
</tr>
<tr>
<td>✓ DOH</td>
<td>Cancellation</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Building Owner/Operator (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Toms River Municipal Building</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>33 Washington Street</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>City, State, Zip Code</th>
<th>Toms River, NJ 08753</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Name of Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Robert Chankalian</td>
</tr>
</tbody>
</table>

**FACILITY INFORMATION**

<table>
<thead>
<tr>
<th>Name of Facility Where Abatement is Taking Place (3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Toms River Municipal Building</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>33 Washington Street</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>City (5)</th>
<th>Toms River</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>County (6)</th>
<th>Ocean</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>County Code (7) (STATE USE ONLY)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Name of Monitoring Firm Hired by Building Owner (8)</th>
<th>ASCM No.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Name of Abatement Contractor (9)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Peter V. Pirozzi General Contracting LLC</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>64 Sand Bridge Road</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>City, State, Zip Code</th>
<th>Pittsgrove, NJ 08318</th>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Project Manager for Monitoring Firm</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Telephone No.</th>
<th>(866)521-0749</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>License No.</th>
<th>01279</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Start Date (10)</th>
<th>7/15/16</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Scheduled Completion Date (11)</th>
<th>7/18/16</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Occupancy Status During Abatement (Check Only One)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility Closed/Vacated During Entire Period of Abatement</td>
</tr>
<tr>
<td>Other – Describe: 7:00am - 3:00pm</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Scope of Work (Check All That Apply)</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓ ≥2 sf or ≥23 ft</td>
</tr>
<tr>
<td>≥160 sf or ≥2260 ft</td>
</tr>
<tr>
<td>□ Renovation Demolition</td>
</tr>
<tr>
<td>□ Full Containment with Negative Pressure</td>
</tr>
<tr>
<td>□ Mini-Enclosure</td>
</tr>
<tr>
<td>□ Glovebag Procedure</td>
</tr>
<tr>
<td>□ Non-Exempted (*) and Non-Friable Procedure</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (15)</th>
</tr>
</thead>
</table>

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

<table>
<thead>
<tr>
<th>Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Cubic Yards of Waste</th>
<th>10</th>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Name of Registered Waste Hauler</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carnevale Disposal</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NJDEP Waste Hauler ID No.</th>
<th>17297</th>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Name of Registered Landfill</th>
</tr>
</thead>
<tbody>
<tr>
<td>GROWS</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City, State</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hamilton, NJ</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Disposal Date</th>
<th>7/18/16</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>City, State</th>
<th>Morrisville, PA</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Completed by</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thomas Pirozzi</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project Manager</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>[Signature]</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>July 1, 2016</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Removal</td>
</tr>
<tr>
<td>Repair</td>
</tr>
<tr>
<td>Encapsulation</td>
</tr>
<tr>
<td>Endorsement</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Amount (Spacial SF or LF)</th>
<th>1 sf</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Endorsement</th>
<th>x</th>
</tr>
</thead>
</table>

# Notification of Asbestos Abatement

**State of New Jersey**  
**NOTIFICATION OF ASBESTOS ABATEMENT**  
**Pursuant to NJAC 8:60 and 8:18**

<table>
<thead>
<tr>
<th>Date of Notification</th>
<th>Name of Building Owner/Operator</th>
</tr>
</thead>
<tbody>
<tr>
<td>06 / 30 / 2016</td>
<td>ExxonMobil</td>
</tr>
</tbody>
</table>

**Agencies Notified**  
- [ ] EPA  
- [ ] DOLWD  
- [ ] DOH  
- [ ] DOA  

**Type Notification**  
- [ ] Initial  
- [ ] Amended  
- [ ] Amendment # 1  
- [ ] Emergency (Including Justification)  
- [ ] Cancellation

**Street Address**  
1 Avenue J

**City, State, Zip Code**  
Bayonne, NJ 07002

**Name of Contact**  
Chris Troy  
(713) 299-1277

**FACILITY INFORMATION**

**Name of Facility Where Abatement Is Taking Place**  
Former Bayonne Lubricating Mfg. Plant

**City**  
Bayonne

**County**  
Hudson

**Current Use (Prior if being demolished)**  
N/A

**Storage Tanks**

**Name of Monitoring Firm Hired by Building Owner**  
Asset Inspection Technologies

**ASCM No.**  
Armenian

**Name of Abatement Contractor**  
Terra Contracting Services, LLC

**Street Address**  
5100 West Michigan Avenue

**City, State, Zip Code**  
Kalamazoo, MI 49006

**License No.**  
01208

**Project Manager for Monitoring Firm**  
Peter Ellams  
(917) 450-9217

**Start Date**  
03 / 14 / 2016

**Scheduled Completion Date**  
08 / 04 / 2016

**Name of OSHA Monitor**  
Analytical Testing & Consulting Services

**Street Address**  
14626 Doster Road

**City, State, Zip Code**  
Plainwell, MI 49080

**Occupancy Status During Abatement**  
Facility Closed/Vacated During Entire Period of Abatement

**Time of Abatement**  
AM/PM/AM/PM

**Scope of Work**  
- [ ] ≥ 500 sf or ≥500 sf
  - [ ] ≥ 400 sf or ≥400 sf
  - [ ] ≥ 200 sf or ≥200 sf
  - [ ] ≤ 200 sf or ≤200 sf
  - [ ] ≥ 300 sf or ≥300 sf
  - [ ] ≥ 300 sf or ≥300 sf

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

**Is Location Normally Used Solely by Maintenance/ C custodial Staff?**

- [ ] Yes
- [ ] No
- [ ] N/A

- [ ] Asphal core Coating on Tanks 147,450 SF

**Description of Asbestos Containing Material (ACM)**
  - [ ] Thermal Systems insulation, surfacing, VAT, or other miscellaneous

**Amount (Specify SF or LF)**  
[ ] 147,450 SF

**Abatement Type**

- [ ] Full Containment with Negative Pressure
- [ ] Mold-Enclosure
- [ ] Glovebag Procedure
- [ ] Non-Exempted (*) and Non-Fireable Procedure

**Name of Registered Waste Hauler**  
Hazmat Environmental Group

**NDRP Waste Hauler #**  
1686

**Cubic Yards of Waste**  
120

**Name of Registered Landfill**  
High Acres Landfill

**City, State**  
Buffalo, NY

**Disposal Date**  
2-26-16

**Completed By**  
Greg Moe  
Director of Abatement Services

**Signature**  
[Signature]

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

<table>
<thead>
<tr>
<th>Date of Notification</th>
<th>Name of Building Owner / Operator (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>6/17/16</td>
<td>MINTEQ International</td>
</tr>
</tbody>
</table>

### FACILITY INFORMATION

<table>
<thead>
<tr>
<th>Name of Facility Where Abatement is Taking Place (3)</th>
<th>Type of Facility (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sayreville Plant</td>
<td>School (K-12)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>Subchapter 8 (Other than K-12)</th>
</tr>
</thead>
<tbody>
<tr>
<td>195 Bordentown Amboy Parkway</td>
<td>X Other (i.e., private &amp; commercial buildings, homes, etc.)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Square Feet</th>
<th># of Floors</th>
<th>Bldg. Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>50,000</td>
<td>1.5</td>
<td>50</td>
</tr>
</tbody>
</table>

### Current Use (Prior if being demolished)

<table>
<thead>
<tr>
<th>Manufacturing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Global Abatement Services, LLC</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>License Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>443 Schoolhouse Road</td>
<td>00714</td>
</tr>
</tbody>
</table>

### Project Manager for Monitoring Firm

<table>
<thead>
<tr>
<th>Name</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tom Geiger</td>
<td>732-217-2290</td>
</tr>
</tbody>
</table>

### Name of Monitoring Firm Hired by Building Owner (8)

<table>
<thead>
<tr>
<th>Name of Monitoring Firm</th>
<th>ASCM No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Environmental Tactics Inc.</td>
<td>N/A</td>
</tr>
</tbody>
</table>

### Name of Abatement Contractor (9)

<table>
<thead>
<tr>
<th>Name of Abatement Contractor</th>
<th>Street Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Global Abatement Services, LLC</td>
<td>443 Schoolhouse Road</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>City, State &amp; Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monroe Township, NJ 08831</td>
<td></td>
</tr>
</tbody>
</table>

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

- Demolition  
- Large Project
- Renovation
- Full Containment with Negative Pressure
  - Mini-Enclosure
  - Glovebag Procedure
- Other - Describe:

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

<table>
<thead>
<tr>
<th>Facility</th>
<th>Is Location Normally Used Soley by Maintenance or Custodial Staff? (12)</th>
<th>Description of Asbestos-Containing Material (ACM)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kiln Room</td>
<td>N/A</td>
<td>Flue Insulation</td>
</tr>
<tr>
<td>Boiler Room</td>
<td>N/A</td>
<td>Ceiling</td>
</tr>
</tbody>
</table>

### Cu. Yds. of Waste (Specify Square Feet or Linear Feet)

<table>
<thead>
<tr>
<th>Amount</th>
<th>Abatement Type (Specify: Removal, Repair, Encapsulation or Enclosure)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1,200 SF</td>
<td>Removal</td>
</tr>
<tr>
<td>120 SF</td>
<td>Removal</td>
</tr>
</tbody>
</table>

### Name of Registered Waste Hauler

<table>
<thead>
<tr>
<th>Name of Registered Waste Hauler</th>
<th>NJDEP Waste Hauler ID #</th>
</tr>
</thead>
<tbody>
<tr>
<td>Freehold Cartage</td>
<td>18693</td>
</tr>
</tbody>
</table>

### Cu. Yds. of Waste (Specify Square Feet or Linear Feet)

<table>
<thead>
<tr>
<th>Cu. Yds. of Waste</th>
<th>Name of Registered Landfill</th>
</tr>
</thead>
<tbody>
<tr>
<td>30</td>
<td>GROWS</td>
</tr>
</tbody>
</table>

### Disposal Date

<table>
<thead>
<tr>
<th>Disposal Date</th>
<th>City, State</th>
</tr>
</thead>
<tbody>
<tr>
<td>7/31/16</td>
<td>Morrisville, PA</td>
</tr>
</tbody>
</table>

### Completed By (Print or Type)

<table>
<thead>
<tr>
<th>Dominick Tringali</th>
<th>Title</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Freehold, NJ</td>
<td>Manager</td>
<td></td>
<td>6/17/16</td>
</tr>
</tbody>
</table>

ASB-41 JUN 95 G4667
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:80 and 12:120)

Date of Notification (1)
6/30/2016

Name of Building Owner/Operator (2)
School District of the Chathams

Agencies Notified Type Notification
[ ] EPA
[ ] DEP
[ ] DOL
[ ] Initial
[ ] Amended
[ ] Amendment #
[ ] DOH
[ ] DOH
[ ] Emergency (including justification)
[ ] DCA
[ ] Cancellation

Street Address
58 Meyersville Road
City, State, Zip Code
Chatham NJ 07928

Name of Contact
Peter Daquilla
Telephone No.
873-457-7400

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
Southern Boulevard School

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

Square Feet
30,000+

City (5)
Chatham Township

[ ] # of Floors
[ ] 3+

County (6)
Morris

Bldg. Age
50+

Current Use (Prior if being demolished)

Name of Monitoring Firm Hired by Building Owner (8)
RK Occupational & Environmental Analysis Inc

ASCN No.
0090

Name of Abatement Contractor (9)
Unicorn Contracting Corp.

Street Address
401 St. James Avenue
City, State, Zip Code
Totowa NJ 07512

Project Manager for Monitoring Firm
Jonathan Gilbert

Telephone No.
908-454-6316

Telephone No.
973-333-9176

License No.
973-339-9747

Name of OSHA Monitor
Envirovision Consultants Inc.

Street Address
20-21 Wagaw Rd Bldg 35E
City, State, Zip Code
Fair Lawn NJ 07410

Start Date (10)
7/18/2016

Project No.

Scheduled Completion Date (11)
7/23/2016

Occupy Status During Abatement (Check Only One)
[ ] Facility Closed/Vacated During Entire Period of Abatement
[ ] Abatement Performed Outside of Normal Facility Hours
[ ] Other - Describe: Occupied, Working Hours 7:00am-3:30pm

Scope of Work (Check All That Apply)
[ ] ±3 sf or ±3 if
[ ] ±160 sf or ±280 If
[ ] Renovation
[ ] Demolition
[ ] Full Containment with Negative Pressure
[ ] Mini-Endosures
[ ] Glovebag Procedure
[ ] Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED
In Facility (12)

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

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

Amount (Specify SF or LF)

Abatement Type

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED</th>
<th>Is Location Normally Used Solely by Maintenance/ Custodial Staff?</th>
<th>Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boiler Room/ Boiler 1</td>
<td>X</td>
<td>Boiler Insulation</td>
<td>200 SF</td>
<td>X</td>
</tr>
<tr>
<td>Boiler Room/ Boiler 2</td>
<td>X</td>
<td>Boiler Insulation</td>
<td>200 SF</td>
<td>X</td>
</tr>
<tr>
<td>Boiler Room</td>
<td>X</td>
<td>Boiler Breeching</td>
<td>250 SF</td>
<td>X</td>
</tr>
<tr>
<td>Boiler Room</td>
<td>X</td>
<td>Pipe Insulation</td>
<td>150 SF</td>
<td>X</td>
</tr>
</tbody>
</table>

Name of Registered Waste Hauler
Unicorn Contracting Corp.

N/DEP Waste Hauler ID No.
0035644

Cubic Yards of Waste
15

Name of Registered Landfill
Tullytown Resource Recovery Facility

City, State
Totowa NJ 07512

Disposal Date
TBD

Date
6/30/2016

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

Date of Notification (1):
7-6-16

Name of Building Owner/Operator (2):
DEPT OF THE ARMY

Street Address:
P.O. BOX 1600

City, State, Zip Code:
HUNTSVILLE, PA 35807

Telephone Number:
256-895-1694

AGENCIES NOTIFIED

<table>
<thead>
<tr>
<th>Agency</th>
<th>Type Notification</th>
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<td>Postponed</td>
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<tr>
<td>DEP</td>
<td>Initial</td>
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<tr>
<td>DOL</td>
<td>Amended</td>
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<tr>
<td>DOH</td>
<td>Amendment #1</td>
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<tr>
<td>DCA</td>
<td>Emergency (including justification)</td>
</tr>
<tr>
<td></td>
<td>Cancellation</td>
</tr>
</tbody>
</table>

FACILITY INFORMATION

Name of Facility Where Abatement Is Taking Place (3):
FORT MONMOUTH ARMY BASE

Street Address:
502 BREWER AVENUE

City (5):
OCEANPORT

County (6):
MONMOUTH

County Code (7):
MONMOUTH

Name of Monitoring Firm Hired by Building Owner (8):
AET, INC.

Name of Abatement Contractor (9):
PEPPER ENVIRONMENTAL SERVICES, INC.

Street Address:
2251 FRALEY STREET

City, State, Zip Code:
PHILADELPHIA, PA 19137

Project Manager for Monitoring Firm:
ERIC SUTHERLAND

Telephone No.:
610-891-0114

Start Date (10):
7-6-16

Scheduled Completion Date (11):
8-31-16

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

Scope of Work (Check All That Apply):
- [x] ≥3 sf or ≥3 if
- [x] ≥160 sf or ≥260 if
- [ ] Renovation
- [ ] Demolition
- [x] Full Containment with Negative Pressure
- [ ] Mini-Enclosure
- [ ] Glovebag Procedure
- [ ] Non-Exempted (*) and Non-Friable Procedure

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

<table>
<thead>
<tr>
<th>Location Normally Used Solely by Maintenance/Custodial Staff (12)</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] Yes</td>
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Is Location Normally Used Solely by Maintenance/Custodial Staff? (12):

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

Amount (Specify SF or LF):

Abatement Type:
- [ ] Removal
- [ ] Repair
- [ ] Encapsulate
- [ ] End Stage

SEE ATTACHED SHEET

Name of Registered Waste Hauler:
SERVICE TRANSPORT GROUP

NJDEP Waste Hauler ID No.:

Cubic Yards of Waste:

Name of Registered Landfill:
A & L SALVAGE

City, State:
NEW CASTLE, DE

Disposal Date:

City, State:
LIBSON, OH

Completed by:
JENNIFER NIVEN

Title:
DIR. OF OPERATIONS

Signature:

Date:
7-6-16

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

PRICE SPREADSHEET

Contractor may provide additional relevant fixed unit pricing if needed to complete the effort. Unit Prices included herein have no bearing of the contract price and are proposed as an estimate only to provide a basis for determining a fair and reasonable price. This is a performance based contract and the inclusion of unit prices in the proposal shall in no way be construed as the Government is procuring a specified number of units of any given service.

<table>
<thead>
<tr>
<th>Task</th>
<th>Task Name</th>
<th>Task Pricing</th>
<th>Unit Price</th>
<th>Units</th>
<th>Number of Units</th>
<th>Total Price</th>
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<td>Work Plans (to include all Drafts/ Final Documents, Draft QASP and comment response)</td>
<td>FFP</td>
<td>LS</td>
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<td>Building 209</td>
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<td>2.1</td>
<td>1st Fl, SW; Removal of ACM 50 LF</td>
<td>FFP</td>
<td>LS</td>
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<tr>
<td>2.2</td>
<td>1st Fl, NC; Removal of ACM 50 LF</td>
<td>FFP</td>
<td>LS</td>
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<td>2,500</td>
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<td>2.3</td>
<td>1st Fl, NW; Removal of ACM 50 LF</td>
<td>FFP</td>
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<td>3</td>
<td>Building 270</td>
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<td>3.1</td>
<td>Basement – Repair of 400 LF of ACM Pipe Insulation</td>
<td>FFP</td>
<td>LS</td>
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<td>Basement – Repair of 400 LF of ACM Pipe Insulation</td>
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<td>1st Fl – Repair of 15 LF of ACM Pipe Insulation</td>
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<td>3.4</td>
<td>2nd Fl – Room 4 Removal of 10 SF of ACM TSI Debris</td>
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<td>4</td>
<td>Building 271</td>
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<td>4.1</td>
<td>Basement – Removal of Flue Packing 2 SF</td>
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<td>LS</td>
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<td>4.2</td>
<td>Attic and Chase – Repair of 30 LF of Four Inch ACM Pipe Insulation</td>
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<td>5.1</td>
<td>Boiler Room – 1 St Fl – Removal of 2 LF of ACM Pipe Insulation</td>
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<td>5.2</td>
<td>Basement – Room 024A – Removal of 1 LF of ACM Pipe Insulation</td>
<td>FFP</td>
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<td>5.3</td>
<td>Basement – Room 009A – Removal of 1 LF of ACM Pipe Insulation</td>
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<td>5.4</td>
<td>2nd Fl, Women’s Room – Room 024A – Removal of 50 LF of ACM Pipe Insulation</td>
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<td>6.1</td>
<td>Southeast – Repair 25 LF of ACM Pipe Insulation</td>
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<td>7.1</td>
<td>Mechanical Rm – Repair 10 LF of ACM Pipe Insulation</td>
<td>FFP</td>
<td>LS</td>
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<td>7.2</td>
<td>Mechanical Rm – Repair 10 LF of ACM Pipe Fittings</td>
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<td>Outside Office – Removal 1 of ACM Pipe Fitting</td>
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<td>Building 1150</td>
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<td>8.1</td>
<td>Basement Battery Room – Repair 100 LF of ACM Duct Insulation</td>
<td>FFP</td>
<td>LS</td>
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<td>9.1</td>
<td>AC Room – Repair 26 ACM Duct Pipe Fittings</td>
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<td>9.2</td>
<td>Concession/HVAC/Storage Room – Repair 12 ACM Duct Pipe Fittings</td>
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<td>Boiler Room – Repair 22 SF Tank Insulation</td>
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<td>OPTIONAL TASKS</td>
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<td>Basement – Corridor – Removal of 133 LF of ACM Pipe Insulation</td>
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<td>1st Fl – Room 107 – Repair of 5 LF of ACM Pipe Insulation</td>
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<td>1st Fl – Women's Room – Repair of 10 LF of ACM Pipe Insulation</td>
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<td>10.4</td>
<td>1st Fl – Women's Room (former mens room) – Repair of 5 LF of ACM Pipe Insulation</td>
<td>FFP</td>
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<td>10.5</td>
<td>1st Fl – Janitor's Closet by room 162 – Repair of 20 LF of ACM Pipe Insulation</td>
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<td>LS</td>
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<td>10.6</td>
<td>1st Fl – Stairwell by room 162 – Repair of 25 LF of ACM Pipe Insulation</td>
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<td>10.7</td>
<td>1st Fl – Wing North – Repair of 800 LF of ACM Pipe Insulation</td>
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<td>2nd Fl – Room 231 – Repair of 10 LF of ACM Pipe Insulation</td>
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<td>10.10</td>
<td>2nd Fl – Throughout Wing on West – Removal of 20,000 SF of 2 X 2 Tiles</td>
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<td>10.12</td>
<td>Basement, Crawlspace 2 – Removal of 5200 SF of ACM Debris with Detailed cleaning</td>
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<td>Basement, Crawlspace 1 – Repair of 2000 LF of ACM Pipe Insulation</td>
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**CONTIGUENCY TASKS**

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<th>Task</th>
<th>Task Name</th>
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<th>Unit Price</th>
<th>Unit</th>
<th>Total Price</th>
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<td>Repair of 4000 LF of ACM Pipe Insulation. Provide a cost per unit up to 4000 LF</td>
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<td>11.2</td>
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<td>Removal of 1000 LF of ACM Pipe Insulation. Provide a cost per unit up to 1000 LF</td>
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<td>FFP</td>
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<td>25.00</td>
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</table>
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12-120)

Date of Notification (1)
7/1/16

Name of Building Owner/Operator (2)
Greater Egg Harbor Regional High School

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

Type Notification
- Initial
- Amended
- Amendment #
- Emergency (including justification)
- Cancellation

Address
Street Address
1824 Dr. Dennis Foreman Drive
City, State, Zip Code
Mays Landing NJ 08330

Name of Contact
Thomas Grossi

FACILITY INFORMATION

Name of Facility Where Abatement Is Taking Place (3)
Oakcrest High School

Street Address
1824 Dr. Dennis Foreman Drive
City (5)
Mays Landing NJ 08330

County (6)
Atlantic

County Code (7)

Name of Monitoring Firm Hired by Building Owner (8)
Coastal Environmental Co. LLC

ASCM No.

Name of Abatement Contractor (9)
Pernaco Inc.

Street Address
PO Box 167
City, State, Zip Code
Hammonton NJ 08037

Telephone No.
609-920-9312

Square Feet
10000+

Current Use (Prior if being demolished)

Project Manager for Monitoring Firm
Caty Ladden

Start Date (10)
7/1/16

Scheduled Completion Date (11)
7/2/16

Name of OSHA Monitor

Same

Occupancy Status During Abatement (Check Only One)
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours

Other - Describe; High and weekend

Scope of Work (Check All That Apply)
- ≥3 sf or ≥3 if
- ≥160 sf or ≥250 sf
- Renovation
- Demolition

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

| Location | Is Location Normally Used Solely by Maintenance/Custodial Staff? | Description of Asbestos-Containing Material (ACM) | Amount
<table>
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<th></th>
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<tr>
<td>Rooms 408, 410, 412, 414, 418 along window wall</td>
<td>No</td>
<td>Floor tile mastic</td>
<td>26 SF per room</td>
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Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)

Location of Registered Waste Hauler

Pernaco Inc.

NJDEP Waste Hauler ID No.

21787

Cubic Yards of Waste

2

Name of Registered Landfill

ACUA

City, State

West Berlin NJ

Disposal Date

7/5/16

City, State

Egg Harbor TWP NJ 08234

Completed by

Anthony T. Perna

Title

President

Signature

Date

7/1/16

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

Date of Notification (1)
6/30/2016

Name of Building Owner/Operator (2)
Corning Pharmaceutical Glass, LLC

Agencies Notified
☐ EPA
☐ DEP
☒ DOL
☐ DOH
☐ DCA

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

Street Address
563 Crystal Ave.

City, State, Zip Code
Vineland, NJ 08360

Name of Contact
Gene Volpe

Telephone Number
856 692-3600

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
Corning Pharmaceutical Glass, LLC Bldg. 42 Print Shop

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

Square Feet
450

# of Floors
Under Slab

Bldg. Age
60-70

County Code (7) (STATE USE ONLY)
Current Use (Prior if being demolished)
Manufacturing

Name of Monitoring Firm Hired by Building Owner (5)
EHS Environmental, Inc.

ASCM No.

Name of Abatement Contractor (9)
Neuber Environmental Services, Inc.

Street Address
411 Southgate Court

Telephone No.
856 224-0080

City, State, Zip Code
Mickelson, NJ 08056

License No.
00836

Telephone No.
610 933-4332

Name of OSHA Monitor
Neuber Environmental Services, Inc.

Project Manager for Monitoring Firm
Jack Carney

Street Address
42 Ridge Road

City, State, Zip Code
Phoenixville, PA 19460

Start Date (10)
07/05/2016

Scheduled Completion Date (11)
07/08/2016

Occuancy Status During Abatement (Check Only One)
☒ Facility Closed/Vacated During Entire Period of Abatement
☒ Abatement Performed Outside of Normal Facility Hours
☐ Other – Describe:

Scope of Work (Check All That Apply)
☐ ≥300 sf or ≥3,000 ft²
☐ ≥150 sf or ≥2,000 ft²
☒ Renovation
☒ Demolition

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

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

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

Amount (Specify SF or LF)
180 LF

Abatement Type

Former Bldg 103 Slab Demo

Name of Registered Waste Hauler
Service Transport Group, Inc.

NJDEP Waste Hauler ID No.
20990

Cubic Yards of Waste
~ 5 Cu. Yds.

Name of Registered Landfill
Minerva Enterprises, LLC

City, State
Waynesburg, OH

Completed by
Patrick Larney

Title
Project Manager

Signature

Date
08/30/2016

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

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

**Date of Notification (1)**
6/29/2016

**Name of Building Owner/Operator (2)**
City of Paterson

**City Address**
111 Broadway

**City, State, Zip Code**
Paterson, NJ 07505

**Name of Contact**
Harry Covallous

---

**FACILITY INFORMATION**

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

**Street Address**
[Redacted]

**City (5)**
Paterson

**County (6)**
Passaic

**County Code (7)**
N/A

**Name of Monitoring Firm Hired by Building Owner (8)**
ASCM No.

**Name of Abatement Contractor (9)**
East Coast Haz Mat Removal, Inc.

**Street Address**
494 E. 41st Street

**City, State, Zip Code**
Paterson, NJ 07504

**Project Manager for Monitoring Firm**

**Telephone No.**
973-345-0022

**License No.**
00507

**Start Date (10)**
June 30, 2016

**Scheduled Completion Date (11)**
July 5, 2016

**Occupancy Status During Abatement (Check Only One)**
Facility Closed/Vacated During Entire Period of Abatement
Abatement Performed Outside of Normal Facility Hours
Other – Describe: Vacant Bldg. to be demolished

**Scope of Work (Check All That Apply)**

- ≥3 sf or ≥3 l
- ≥160 sf or ≥260 l
- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*)
- Non-Friable Procedure

---

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

**In Facility (15)**

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
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<tr>
<td></td>
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</tbody>
</table>

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

**Amount (Specify SF or LF)**
150

**Abatement Type**

- Removal
- Repair
- Encapsulate
- End Cap

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**Name of Registered Waste Hauler**
Newark Carting, Inc.

**Waste Hauler ID No.**
11222

**Cubic Yards of Waste**
150

**Name of Registered Landfill**
G.R.O.W.S. North Inc.

**City, State**
Morrisville, PA

**Disposal Date**
7/5/2016

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**Completed by**
James E. Unger

**Title**
Project Manager

**Signature**

**Date**
6/29/2016

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