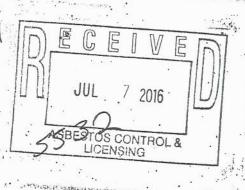
· 1 ct			0		i.	1			n telefe	Til.
& Amended X	NOTIFIC	CATION OF	f New Jersey ASBESTOS A	Neu BATEMENT	u Chi	eckt	#			
Add tional mate	(Pu	irsuant to N.	JAC 8:60 and	12:120)	55	32				٦
Date of Notification (1) 6/1/16		Name of Buil Haddon T	ding Owner/Or wp Board O	erator (2) of Education	Very C	10 miles	553	and the same	ta ₆	-
Agencies Notified Type Notification		Street Addre		(0)						
EPA DEP DOL Initial Amended Amendment # Emergency (inclination)	2	City, State, 2 Westmon	Zip Code t NJ 08108		EC	EIV	[]]]		
DOH justification)	uding	Name of Co Mike Moo			6	09-313-618	per 9		i	
La DOA Las		FACILIT	YINFORMATI	ON Type of	adility (4)	7 2010	-	-		-
Name of Facility Where Abatement is Taking Pi Haddon Twp High School	ace (3)			1 1 1 1		IOSICONTE IGENSING	OL&			
Street Address 406 Memorial Av.				1 A leto	July James				nes,	
City (5)				10,000		of Floors		. Age	لسل	
Westmont NJ 08108 County (6)	-	County Coo	de (7)			eing demolish	ed)			
Camden	mer (8)	ASCM N		Name of Abater	ment Contract	tor (9)				
Name of Monitoring Firm Hired by Building Ow Epic Environmental Ser. LLC	ilei (o)	1.00		Pernaco Inc						
Street Address 1930 Brown Road				PO Box 329						_
City, State, Zip Code			4	City, State, Zip West Berlin	NJ 08091	¥.				
Newfield NJ 08344 Project Manager for Monitoring Firm		Telephone		Telephone No. 856-753-98	00	License N 00727	lo.		(n. 9)	
James Eberts	Scheduled C	856-205		Name of OSHA						
6/20/16	7/15/16			Same Street Address						_
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire Pe	Only One)	tement								
Facility Closed/Vacated During Entitle Fe Abatement Performed Outside of Norma Other – Describe:	I Facility Ho	urs	.	City, State, Zip						_
Scope of Work (Check All That Apply)	27-27			Kwet	wedp (∠ Cu\ with Negative	Pressur	8		
≥3 sf or ≥3 if ≥160 sf or ≥260 if	Ren Den	ovation nolition	1 .	Min	i-Enclosure	lure				
2,000,010,000	KALAR Marian			☐ Nor	-Exempted (*) and Non-Fria	able Proc	Abate	ment	
	1	mally		Description of			-	Typ	e	_
Location of Asbestos-Containing Material (ACM)	Used S	Solely by enance/	Achestos C	ontaining Material nal systems insula	(ACM)	Amount (Specify	20	70	Enc	1
TO BE ABATED In Facility	Custod	lial Staff?	SI	nai systems insule irfacing, VAT, or er miscellaneous)	inori,	SF or LF)	Remova	Repair	Encapsulate	
(13)		No N/A	our	el Illiscenariocas)			<u> </u>		ate	_
Roof Top Green House	165	X	. P	ipe insulation		12 LF				-
Hoor top discit tieses	1.		we	t wrap and cut	-		-	-		-
See Lext page			See	NexT f	ruge.		-	-		-
V		I NJDEP V	Vacta C	ubic Yards	Name of R	egistered Land	dfill			_
Name of Registered Waste Hauler United Containers	¥	Hauler ID	10000	Waste	G.R.O.W		85			
City, State				isposal Date	City, State Morrisvi	lle PA 1906	7		1	
Elm NJ	Title			Signature /	7		Date		•	-0
Completed by	Presid	dent ·		CC	_		6/1/16)		_

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Scope of Work (Check All That Apply) ≥3 sf or ≥3 if ≥160 sf or ≥260 if	Desired	Renovátí Demolític		Full Containm Mini-Enclosur Glovebag Pro Non-Exempte							
	1	Locatio	55.55				Abate	ement pe			
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	d Soleh intenan todial Si (12)	y by nce/	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure		
	Yes	No	N/A	het wrop + Cit	•			O	L		
Kitchen	X			pipe insulation	209 LF	X					
Art Room CAD Shop		х		Pipe insulation	5 LF	X					
1st floor toilet room		х		pipe insulation	60 LF	X					
Sever Room	х			pipe insulation	50 LF	X					

(2)	M	lr)	Check 5538	•	•	00/12/2000		
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	CANADA CONTRACTOR OF THE PARTY	tenovat emoliti		Full Containm Mini-Enclosur X Glovebag Pro				e	#
Localismos	1	Locatio	190	Description of				ement pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	d Solel intenar todial S (12)	ice/	Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
8	Yes	No	N/A	S		-		ite	CD
Auditorium Foyer		Х		Pipe insulation	6 LF	x			
Girls Room Basement		Х		pipe insulation wet wrap & cut	50 LF	x			
Boys Room Basement	-	х		pipe insulation wet wrap & cut	50 LF	x			
2nd floor Bathroom				pipe insulation wet wrap & cut	12 LF	x			

CK 245

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Date of Notification (1)		1	Name o	f Building (Owner/0	Operator	(2)	3/2	E	6 E	<u> </u>	<u> </u>		
Agencies Notified Type Notification		1	Street A	ddress					Th	1111	7 20	10	Π	\prod
EPA Initial			-11	9			_			JUL	/ 20	16	L	7
DEP Amended X DOL Amendment	¥	1	City, Sta	ate, Zip Co	de . O Clu	Ala	· 1	Hr.	x607					
Emergency (- -	Vame o	f Contact	KIN	IIL	1/0			BTOS hone.AN		ROL	&	+
DOH justification) DCA Cancellation			Eric P	5.055					-	HOHE, AG	CHURCH-			
		_	STREET, SERVICE	LITY INFO	RMAT	ION	L	Year of a	7 7	wij we jar	SCHOOL STATE	***	123/07/3	
Name of Facility Where Abatement is Taking	Place (3)	1900-00					provide the second	Facility (4			- 18 Jay Kellens S	TWO THE	M. W. H. C.	Contraction of
Street Address	ŧ	60					Sub	ochapter l er (i.e. pr	8 (Other			dings,	home	es,
City (5)	0						Square F	/	# of F	loors	В	ldg. A	ge	
County (6) CP +		(County (Code (7) USE ONLY)			Current	Use (Prio	or if being	demolis	hed)			
Name of Monitoring Firm Hired by Building C	wner (8)		ASCN	/ No.		1	of Abaten	nent Conf	tractor (9))				
Street Address			L		-1107		Address	100 1110.				ATT TO		
							Box 91	5						
City, State, Zip Code						City, S	tate, Zip 0	Code						
	7						, New J	ersey 0	8723					
Project Manager for Monitoring Firm		7	Γelepho	ne No.		10 00	one No.)899-74	99		_icense	No.			
Start Date (10)	Scheduled	Som	pletion	Date (11)		Name	of OSHA	Monitor						
Occupancy Status During Abatement (Check	Only One)	110			Street	Address							
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe:			ent			City, St	tate, Zip 0	Code						
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	and the same of th	novat molitie				7	Mini-E Glovel	ontainme inclosure bag Proce xempted	edure				-	
	Τ.,		200				I NOII-L	xempled	() and i	VOII-FIIA	DIE FIO	Abate	Alla Sala	
Location of	1	ocation mally			De	scription	of					Ту	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Custo	tenan	ce/		os Con thermal surfa	taining M	laterial (A insulation T, or		(Sp	ount ecify or LF)	Removal	Repair	Encapsulate	Enclosure
			V	Un	26	20			60	O(F	V			
			0	Y IM	21 1	110				004	1-7			
Name of Registered Waste Hauler		19000000	JDEP Wauler ID		Cubic of Wa	Yards ste ;)		lame of R		d Landfi	1			
Brick Industries Inc.		10331633	602			4		GROWS						
City, State Brick, New Jersey					Dispo	sal Date	F 3	ity, State PA						
Completed by	Title				5	Signature	611	0)		D	ate	77	11	
Eric Plackis	Presid	ent					Ull	K_			011	5	16	

								114/1						MH				
Date of Notification (1) 07/01/2016	1 may				Building Own Grove Boa			JUl	- 7	20′	16		-					
Agencies Notified	Type Notification		- 1	Street Ad 520 Po	ddress ompton Ave	enue												
EPA X DEP X DOL	Initial Amended Amendment	#			te, Zip Code Grove, NJ	07009			ASBEST LI	OS C	SING	ROL	<u> </u>	i				
DOH DCA	Emergency (justification) Cancellation	including	4.0	Name of Mario (Telepho 973-2									
	- Carrosnation				ITY INFORM	MATION												
Name of Facility Where A		g Place (3)	1701		in the state of th	-	of Facility (4 School (K-12	Ω) 									
Street Address 90 Rugby Road				<u>-</u>				Subchapter (Other (i.e. pretc.)	Other th			dings,	home	s,				
City (5) Cedar Grove								e Feet	# of Flo	ors	В	Bldg. Age						
County (6) Essex				County C	Code (7) ISE ONLY)		Curre	nt Use (Prio	r if being o	lemolish	ied)							
Name of Monitoring Firm Ahera Consultants	Hired by Building	Owner (8)		ASCM	l No.	tement Cont oration	ractor (9)											
Street Address POB 385						ss de Ave												
City, State, Zip Code Ocenaville, NJ 0823	31						City, State, Zip Code Woodland Park, NJ 07424											
Project Manager for Moni John SMoyer	toring Firm		Telephor 609-65	ne No. 2-1833		none No 225-8		4	cense N 104	0.								
Start Date (10) 07/02/16		Schedule 07/6/16		pletion [Date (11)			AA Monitor Onmental	Laborato	ories,L	L.C							
Occupancy Status During	Abatement (Chec	k Only On	e)				Street Address 2333 Route 22 West											
× Facility Closed/Vaca Abatement Performe Other – Describe:	ted During Entire I ed Outside of Norn	Period of A nal Facility	Hours	ent		City, S	City, State, Zip Code Union, NJ 07083											
Scope of Work (Check Al	That Apply)							**	, ,									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emolit				O&M wrap/cut Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Proc											
			Locati	-000 to 100 to 1								Abate	ement pe					
Location Asbestos-Containing TO BE ABA In Facili (13)	Material (ACM) ATED	Use Ma Cust	d Sole intenar odial S (12)	iy by nce/ staff?	(i.e. the	Description Containing Normal system surfacing, VA her miscellar	Material s insula T, or		(Spec	Amount (Specify SF or LF)		Repair	Encapsulate	Enclosure				
		Yes	No	N/A	-1 4	ittin en la alla	.aaliai	nto	25.1									
throughout th	e school			X	pipe i	ittings/valv	/es/joi	nts	25 L	.r 	×							
Name of Registered Was	te Hauler		l N	JDEP W	laste C	ubic Yards		Name of F	Registered	Landfil		L						
Lilich Corporation						f Waste		GROWS	S, Landfi									
City, State Woodland Park, Nev	ate land Park, New Jersey					isposal Date		City, State Morrisvi										
Completed by Momo Glavatovic					esident					Date 07-01-2016								

		OTIE			te of New		7 4 TF	MENT										
Check#2537						ESTOS AB 8:60 and		MENI	NECE		V [<u> </u>	A					
Date of Notification (1)			- 11	Name o	f Building (Owner/Opera	tor (2)		7			1	\Box					
07 ;	02 / 16		E	Bender	Mike				<u> </u>	7 0	016	-	U					
Agencies Notified	Type Notification		-		Address				<u> </u>	1.0	010	1	-					
□ EPA					2 T-2 (COT (2 - 20) + (COT)													
□ DOLWD	☐ Amended		H	City, St	ate, Zip Co	de			ASBESTOS	CON	TRC)L &						
□ DHSS □ DHS	Amendment #_	1	F	Rutherf	ford, NJ 0	7070			LICE	NSIN	G_	-	_					
DCA (NJAC 5:23-8)	Emergency (inc justification)	luding			of Contact	, , , ,			Telephone Number									
4	Cancellation		E	Bender	Mike													
						ORMATIO	N											
Name of Facility Where	Abatement is Taking	Place ((3)				T	ype of Facility (4)	Misseri								
Private house	_							School (K-12)									
Street Address			-					Subchapter 8	(Other than K-1 2) rivate and commen	i cial bui	dinas							
0							1	homes, etc.)		ciai bui	uniga	9						
City (5)							5	Square Feet	# of Floors	Bld	g. Age	е						
Rutherford, NJ 07070)			County	Code (7) (9	STATE USE OF	N/Y)	Current Use (Pri	or if being demolis	hed)			- 7					
County (6)				Journey	, 0000 (1) (0	001 01	/			-/								
Bergen Name of Monitoring Fir	m Hired by Building O	wner (8	3) [4	ASCM N	No.	Name of Ab	atemen	t Contractor (9)	·									
713113 01 110111011113						Gr Tech LL												
Street Address						Street Addre												
.53				=		576 Valley												
City, State, Zip Code						City, State, . Wayne, NJ												
Project Manager for Mo	onitoring Firm		Tele	phone f		Telephone N			License No.									
				D.		973-638-17		itor	01127									
Start Date (10)				tion Dat	16	Name of OS Envirovision		sultants,Inc					-2/2/2					
Occupancy Status Dur						Street Addre	ess											
						20-21 Wag	araw F	Road, Bldg .#	35E									
Abatement Perform Time of Abatement	ed Outside of Normal :PI	Facility M/	/ Hour PM	s - Des	AM	City, State, Fair Lawn,												
Scope of Work (Check	all that apply)								nation with negativ	e press	ure							
		V Ro	novati	ΔD		II Mir	ni-Enclo	osure	gative Pressure									
☐ ≥ 160 sf or ≥260 lf			molitic			X GI	ovebag	Procedure	Tent with Negative on-Friable Procedu	e Press	ure							
		l le	Locat	ion			III EXOII	iptod () ond in			ateme	ent T	vne					
Locati	on of	1	Norma	lly		Descri	ption of				1 1							
Asbestos-Containir	ng Material (ACM)		d Sole	650		stos Containi			Amount	Removal	Repair	Encapsulate	Enclosure					
TO BE A		1	todial		(I.e.	thermal sys, surfacing			(Specify SIF or LF)	SVO	air	psu	SUL					
(13			(12)			other misc			•	=		late	G.					
		Yes	No	N/A														
Basement				\times	Pipe insu	ılation			8 LF	\boxtimes								
		П																
			П							П	П	П	П					
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					11. 1. 10.11.	To :: : : :	. 5 16/ 4	. II Norman of Dogs	stand I andfill	ᆜᆜ		Ш	Ш					
Name of Registered V	Vaste Hauler			0EP Wasi 00337	e Hauler ID No.	TBD	or waste	Name of Region T.R.R.F. Inc										
Gr Tech LLC City, State				0033/	0.0	Disposal D	ate	City, State	<u></u>									
						72) A									
Wayne, NJ 07470	or Type) Tit	le .				TBD Signat	ture	Tullytown, F		ate								
Completed By (Print of			Signa		entre Wen	0		116										
N.Jevtic	Ow	ner	ACT-1-11				//	ewic wen	na 0	7/02/20	710		V-10 10					
AGD-91							V											

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OF 932023	H95	NOTIFI (Pi	Sta CATION ursuant	ate of New Jersey OF ASBESTOS / to NJAC 8:60 and	/ ABATE i 12:120	ME 0)	NT D	E	CE [7				
Date of Notification (1) 06/30/2016				f Building Owner/Cons Institute Of					JUL 7	20	16		排			
Agencies Notified Type Notific	cation		Street A	ddress le Point on Hu	dson				-0700.00	OLIT	DOL	70				
EPA Initial Amend	ded dment #	-	City, Sta	ite, Zip Code en, NJ 07030				ASBE	ESTOS CO LICENS	ING	HUL	α				
DOH Emerg	ency (including ation)	_	Name of	f Contact Fernandez					ephone Num							
DCA Cance	llation			LITY INFORMATI	ON			201-912-4651								
Name of Facility Where Abatement is	Taking Place (3	3)	FACI	LITTINFORMATI	ON	Т	ype of Facility	pe of Facility (4)								
Alexander House						×										
Street Address 1 Castle Point on Hudson							Subchapte Other (i.e.	8 (Oth	er than K-12 & commercia		dings,	home	es,			
City (5) Hoboken						1000	etc.) quare Feet I/A	# o	f Floors	1 03	Bldg. A	ge				
County (6) Hudson County			County (Code (7) USE ONLY)			urrent Use (Pri		ing demolish	ed)						
Name of Monitoring Firm Hired by Bui TTI Environmental, Inc	ilding Owner (8))	ASCN 0003		0.0010000000000000000000000000000000000		Abatement Co batement, Ir		(9)							
Street Address 1253 N. Church Street					Street 11 R		ldress engren Ave	nue								
City, State, Zip Code Moorestown, NJ 08057	3		101				e, Zip Code a, NJ 07512									
Project Manager for Monitoring Firm Jim Guilardi		T	Telepho 609-3	ne No. 14-1683	Telep	hor			License No	0.						
Start Date (10) 07/11/2016	Schedul 07/12/			Date (11)	Name of OSHA Monitor D&S Abatement, Inc.											
Occupancy Status During Abatement							Idress									
☐ Facility Closed/Vacated During E			nent		11 R	Ros	engren Ave	nue								
Abatement Performed Outside o Other – Describe:							e, Zip Code a, NJ 07512									
Scope of Work (Check All That Apply))									10001111						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli			2	×	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure				-0				
	100	s Locat Norma			Eu-		Non-Exemple	u () aii	id Noti-i flab		Abate	emen /pe	t			
Location of Asbestos-Containing Material (AC TO BE ABATED In Facility (13)	Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Used Mair Custo					ns ir AT,	erial (ACM) nsulation,	(5	Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure			
	Yes	No	N/A									O				
Alexander House		X		wa	ll plas	ter		2	20 SF	X						
			-							-			-			
										-	-		_			

Cubic Yards Name of Registered Landfill Name of Registered Waste Hauler NJDEP Waste Hauler ID No. of Waste Waste Management of PA D&S Abatement, Inc. 20996 TBD Disposal Date City, State City, State TBD Totowa, NJ Tullytown, PA Completed by Oliver Hegedis Date Signature Project Manager 06/30/2016

86/11/2013 86:22 97325	39928			4	MC COM	PANY	INC			P	4GE	8
CK 4685	No	OTIFIC	Bti MOITA:	ite of New Jer OF ASBESTO	Sey	MENT	,	DEGI] [7. 1	er i
77		(Pu	TE UNITE	NJAC 8:80	and 12:12	2)						
Date of Nolltication (1) 06/29/2016				Building Owns				HW-JUL)	117 7	- 20	16	1
Agencies Notified Type Notification		100	Alreet A		אם		11	ASBESTO	S.CC	THIC	30	. &
EPA I Initial Amended DOL Amendment		1		ta, Zlp Code	ra _	_		JUI LICE	- INSI	NG.	4	
Emarganou /		- [Param	us, NJ 0766	52		i ,			1	7	
DOH justification) Cancellation	•	1000	Name of Stever	Contact Cea.			1.55	201-281-780	10	17	V	
				LITY INFORM	MOTE							
lame of Facility Where Abatement is Taking Paramus High School	g Place (3)						f Fapility (4	***				_
Freet Address 99 E. Century Rd						1 8	thool (K-1) libchapter ther (l.e. p	?) 8 (Other than K-12 'wate & commercia	!) al buik	dinas.	home	92.
Olly (5)					_	Square	c.)	# of Floors		idg, A		
Péramus											y.	
County (6) Bergen		1	County (Code (T) USE ONLY)		Scho		r if being demolish	ed)			
lame of Monitoring Firm Hired by Building (R.K. Occupational	Owner (6)		Q090	70000	VMC	of Abate Comp	ment Con	tractor (9)				
Ireat Address O1 St. James Ave				1	Street	Address Piaget	1		200			
ity. State, Zip Coda Philipáburg, NJ 08865			-2		City, 8	State, Zip	Code					_
roject Manager for Monitoring Firm on athan Gilbert			Telepho	ne No. 54-6316	Telep	hone No. 253-88	_	License N	0.	-		
tarl Date (10)	Schedule	d Com	plation	Date (11)	Name	of 08H	Monitor	00704	_			-
OCCUPANCY Status DUring Abatement (Chec	k Only One	1)	111	5016		Address	eny Inc					_
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other - Describe:	eriod of A	hatam	ent			Støte, Zip						_
cope of Work (Check All That Apply)									_	_		_
23 of or 23 if 2180 of or 2280 if	XI Ro	avone Itilome	ion on		Ē	Glov	ebsa Proc	edure				
-	ls	Location	on			1900	c yéwbiác	(*) and Non-Frish	la Pro		emeni	_
Location of Asbestos-Containing Material (ACM)	Used	ormail Solal	v bu		Description	n of	1		-	T)	D#	_
TO BE ABATED In Facility (13)	Custo	odiei S (12)	ico/ raff?	SU	nai system mai system iriacing, VA er miscella	is insulat AT, or	ACM)	Amount (Specify SF or LF)	Removat	Repair	Encapsulate	T ALMOSTIC
2/TIBOON	Yes	No	N/A								75	L
BATHROOM	+	×	-	PIPE F				14 EA	x	_	-8	
	+			" h	RY6	<u>CU</u>	7		-			_
ame of Regis(ared Waske Hauler	<u> </u>	LAI	JDEP V	facts 1 Ou								
ewark Carling Inc		H	2014r ID	No. of	veste		GROWS	Registered Landfill 3				
ity, State cwark, NJ		1		Dis	posel Date		City, State Morrisvi					
ompleted by	Title				Signal			Da Da	Ło.			_
oytek Roszkowski	Presid	Sont			111)	1	/		150	11	1

(X52747958-2
	Date of Notification (1)

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

K52141958	3 —		TIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)								\mathbb{V}		n				
Date of Notification (1) 06/30/2016				Building (r/Operator	(2)	and the second s	N				004	_			
	otification		Street A		0.000					J U	_	7	2016)			
X EPA X Ini	tial		City Ct-	4- 7:- 0-								00	NITO	OL.			
× DOL _ Ar	nended nendment #			te, Zip Co ston, NJ		39			AS	SBEST L	ICE	ASI	101H	OL 6	α		
Er	nergency (including stification)	. 130	3	Contact				l-n	Tel	ephone	Numl	per					
DCA Ca	ancellation			w Tullocl		TION											
Name of Facility Where Abateme	nt is Taking Place (3)	FACI	LITY INFO	KMA	IION	Туре	e of Facility	(4)						-		
House	\$2-0 N							School (K-	ool (K-12)								
Street Address							×	Subchapte Other (i.e. etc.)				build	lings,	home	es,		
City (5) Livingston							Squ:	are Feet # of Floors Bldg. Age N/A									
County (6) Essex				Code (7) JSE ONLY)			Curr	rent Use (Pr use	ior if bei	ng dem	olishe	d)					
Name of Monitoring Firm Hired by N/A	y Building Owner (8)	ASCM No. Name of Abatement D&S Abatement							(9)		V.C					
Street Address			1			Street 11 R		ess ngren Ave	nue								
City, State, Zip Code							City, State, Zip Code Totowa, NJ 07512										
Project Manager for Monitoring Fi	irm		Telepho	ne No.		100000000000000000000000000000000000000	Telephone No. License No. 973-345-8685 00675										
Start Date (10) 0713/2016	Schedu 0714/		pletion I	Date (11)				SHA Monitor									
Occupancy Status During Abaten	nent (Check Only C	ne)			ess												
Facility Closed/Vacated Duri				ngren Ave	nue												
Abatement Performed Outsi Other – Describe: occupied		y Hours	City, State, Zip Code Totowa, NJ 07512														
Scope of Work (Check All That A	party.					X											
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure											
		0.12				L	_ N	on-Exempte	ed (*) an	d Non-F	riable		cedure Abate				
Location of	у. 8	s Locati Normal	22		г	Description	n of							ре			
Asbestos-Containing Material TO BE ABATED		ed Sole aintenar			tos Co	ontaining National system	Materi			mount Specify		71		Ē	Ш		
In Facility	Cu	stodial S (12)	Staff?	(1.6.	sur	facing, VA	AT, or			or LF)		Remova	Repair	Encapsulate	Enclosure		
(13)	Yes	T No	N/A		ourie	r miscella	neous	,)				val	Ŧ	ılate	ure		
attic							ate		8	80 SF		x					
Name of Registered Waste Haule D&S Abatement, Inc	er -	Н	JDEP Wauler ID	A 100 A	oic Yards Vaste		Name of Waste				PA						
City, State Totowa, NJ			Disposal Date				;	City, Sta		Α							
Completed by Ned Joksimovic	Francisco III				Signatur	e \	An /				Date 06/30/2016						
	d Joksimovic PM							06/30/201									

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) 2016 Stevens Institute Of Technology JIII 06/30/2016 Agencies Notified Type Notification Street Address 1 Castle Point on Hudson Initial ASBESTOS CONTROL & **EPA** City, State, Zip Code × DEP Amended LICENSING Hoboken, NJ 07030 X DOL Amendment # Emergency (including Name of Contact Telephone Number justification) DOH David Fernandez 201-912-4651 × DCA Cancellation FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Williams Library-Mezzanine × School (K-12) Subchapter 8 (Other than K-12) × Street Address Other (i.e. private & commercial buildings, homes, 1 Castle Point on Hudson # of Floors Bldg. Age Square Feet City (5) N/A N/A Hoboken N/A Current Use (Prior if being demolished) County (6) County Code (7) (STATE USE ONLY) Library Mezzanine **Hudson County** ASCM No. Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) 0003 D&S Abatement, Inc. TTI Environmental, Inc. Street Address Street Address 1253 N. Church Street 11 Rosengren Avenue City, State, Zip Code City, State, Zip Code Totowa, NJ 07512 Moorestown, NJ 08057 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 609-314-1683 973-345-8685 00675 Jim Guilardi Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 07/11/2016 07/15/2016 D&S Abatement, Inc. Street Address Occupancy Status During Abatement (Check Only One) 11 Rosengren Avenue Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours Other - Describe: Occupied × Totowa, NJ 07512 Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf Renovation Full Containment with Negative Pressure Demolition Mini-Enclosure ≥160 sf or ≥260 lf Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Type Normally Location of Description of Used Solely by Asbestos Containing Material (ACM) Asbestos-Containing Material (ACM) Amount Encapsulate Maintenance/ TO BE ABATED (i.e. thermal systems insulation, (Specify Remova Custodial Staff? surfacing, VAT, or SF or LF) In Facility (12)(13)other miscellaneous) Yes No N/A X Ceiling Spray On 800 SF X Library Mezzanine

Name of Registered Waste Hauler	NJDEP Waste	Cubic Yards	Name of Registered Landfill
D&S Abatement, Inc.	Hauler ID No. 20996	of Waste TBD	Waste Management of PA
City, State		Disposal Date	City, State
Totowa, NJ		TBD //	Tullytown, PA
Completed by	itle Project Manager	Signature	Date 06/30/2016

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Date of Notification (1) 06/30/2016				Building C h Mcinto		perator	(2)			<u> </u>		31			To the second
Agencies Notified Type Not		3	Street Ad	ddress				THE L	i	JUL	7	20	16		7
limited 1 Europe 1	al ended endment#			te, Zip Coo					L ASBE	STOS	3 CO	NTI	ROL	8	
➤ DOH justi	ergency (including ification)		Name of	Contact					Tele	LICE			-		_
DCA Can	ncellation			h Mcinto		ON									
Name of Facility Where Abatement House	t is Taking Place (3)	1 701	2111 1141 0	Killerii	O.R	-	of Facility (4					N 975		
Street Address								School (K-12 Subchapter of Other (i.e. pr	8 (Othe			huild	inas	home	20
City (5)								etc.) re Feet		Floors	OI OIGI		dg. A		.0,
Paterson							N/A		N/A	١.		N.	/A	J-	
County (6) Passaic			County C (STATE L	Code (7) ISE ONLY)			Hou	nt Use (Prio se	r if beir	ng demo	olished	1)			
Name of Monitoring Firm Hired by N/A	Building Owner (8)		ASCM	l No.				tement Cont ement, Inc		(9)					
Street Address							Addres	ss gren Aven	ue	e					
City, State, Zip Code						City, S	tate, Z	ip Code J 07512			-112-22 E				
Project Manager for Monitoring Firm	Project Manager for Monitoring Firm						none No 345-8	0.		Licens		0-2-2			
Start Date (10)	ed Com	npletion [Date (11)		8-16-7-6		HA Monitor		0007	J					
07/15/2016	07/16/2	2016	*#####################################					ement, Ind	D						
Occupancy Status During Abateme Facility Closed/Vacated During			ont				Addres	ss gren Aven	u.e						
Abatement Performed Outside Other – Describe: Occupied															
Scope of Work (Check All That App	oly)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	THE REAL PROPERTY.	lenovat emoliti	5775555			Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
	ls	Location	on I				i NO	II-Exempled	() and	1 14011-1	TIADIC		Abate	ment	
Location of	1	Normall d Solel	у			scription					1	-	Ту	pe	
Asbestos-Containing Material (TO BE ABATED In Facility (13)	Ma Cusi	intenar odial S (12)	ice/ staff?		thermal surfa	taining N system cing, VA miscellar	s insula T, or		(S	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A								4				
basement		X			pipe	insula	tion		24	IO LF	+	X			
Name of Registered Waste Hauler		l NI	JDEP W	aste T	Cubic	Yards		Name of F	Registe	red I an	dfill				
D&S Abatement, Inc.	auler ID 0996		of Wa			Waste N				PA					
City, State Totowa, NJ					Dispo:	sal Date		City, State Tullytow							
Completed by Ned Joksimovic Title Project Manager						Signature	e \	FN			Date 06/3		016		
			(11				1000	9 98						

CK 299	63	N		FICATION Pursuant t		STOS	ABATE							10		
Date of Notification (1) July 1, 2016					Building (lace Scl		perator	(2)	er -	et .e. +	.T ****					
Agencies Notified	Type Notification Initial Page	1 of	玄	Street Ad 42 Nor	ddress wood A	venue)				PE I] [
DEP DOL	X Amended Amendment #	3	_	7557	te, Zip Co it, NJ 07			١.	IM.	<u>E</u>			2016	1		1
DOH DCA	Emergency (in justification) Cancellation	cluding		Name of Frank	Contact Lemire						0 one	Numi	ber			1
<u> Бол</u>	Cariocilation				LITY INFO	RMATI	ON	-	1/7 /	71			71171	101	3	1
Name of Facility Where A Kent Place School	Abatement is Taking	Place (3)					×	of Facility (School (K-1	4) AS 2)	BESTO	CEN	il VG		1 . 6	i e
Street Address 42 Norwood Avenu	е								Subchapter Other (i.e. r etc.)	a tothe	er than h	(-12)	12.10	NW. T T	4.	s,
City (5) Summit, NJ 07902									re Feet	# of 2	Floors		BI	dg. A	ge	
County (6) Union				County C	Code (7) USE ONLY)			Curre	nt Use (Pri ant	or if bei	ng demo	olishe	d)			
Name of Monitoring Firm Partner Engineering				ASCN	l No.		0.0000000000000000000000000000000000000		tement Coi uction Co			X				
Street Address 611 Industrial Way	West			Street 235					ss nung Ave	nue						
City, State, Zip Code Eatontown, NJ 077	24								ip Code nge, NJ 0	7052						
Project Manager for Mor Brian Nemetz		Telephor 732-38	ne No. 30-1700		100000000000000000000000000000000000000	none N 669-2			Licens 0123							
Start Date (10) June 13, 2016		Schedule July 8,		ompletion I	Date (11)				HA Monitor Laborate	ories G	Slobal	Inc.				
Occupancy Status Durin	g Abatement (Check	Only Or	ne)					Addres								
Abatement Perform	ated During Entire Pe led Outside of Norma								ary Stree ip Code	:t						
Other - Describe:	II That Apply			Richmond, VA. 23220												
Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ш г пат Арріу)			vation lition			E	→ Ful	I Containm		Negativ	ve Pr	essur	e		
	****	_					E		ovebag Pro n-Exempte		d Non-F	riable				
Location	n of		Loca			De	scription	n of							ment pe	
Asbestos-Containing TO BE AB In Facil (13)	Material (ACM) ATED lity	Ma	inten	lely by ance/ I Staff?		tos Con thermal surfa	taining N I system icing, VA miscellar	Materia s insula AT, or		(5	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
	To the second se	Yes	No									,			Ф	
1st and 2n			X	4			oor Tile				730SF		X			
1st and 2n			X				/ Trans				200SF		X			
1st and 2n	X				Inderc]		2SF		X					
1st and 2n	X				Mastic				00SF	1611	X					
Name of Registered Was Future Sanitation Inc	- 1	NJDEP W Hauler ID		of Wa	Yards ste		Name of Tullyton			ndfill						
City, State Passaic, NJ 07055		*				Dispo	sal Date		City, Star Tullyton		Ą					
Completed by Barbara Reed	iden	lent Signature Lee July					e y 1, 2016									

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

Separation Sep	Date of Notification (1) July 1, 2016		Name of Building Owner/Operator (2) Kent Place School															
DOL		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					venue			In	E C	E	$\overline{\mathbb{N}}$	7 [6	7 [
DOH	DEP DEP	× Amended		3											7	1		
DCA				-							1	phone/I	Nu210	16		#		
Name of Facility Where Abstement is Taking Place (3) Type of Facility Where Abstement is Taking Place (3) Type of Facility (1) School (1) Type of Facility (1) Type of Faci	DCA				Frank	Lemire					97	3-673-	4667					
Street Address Stre				_	FACI	LITY INFO	RMATI	ON	-		ASBES	TOS O	ONTI	ROL	&			
Street Address 42 Nonwood Avenue County Code (7) County Code (7) County Code (7) County (8) Countert Use (Prior if being demolished)		Abatement is Takir	ig Place (3)	6				9				-10 -17	SING			لـ	7	
A2 Norwood Avenue									H	SCHOOL (IX-127)								
Square Feet		e							Other (i.e. private & commercial buildings, homes,									
Summit, NJ 07902 County (6) Union Name of Monitoring Firm Hired by Building Owner (8) Partner Engineering and Science, Inc. Name of Monitoring Firm Hired by Building Owner (8) Partner Engineering and Science, Inc. Street Address Street Address S11 Industrial Way West City, State, Zip Code Eatontown, NJ 07724 Project Manager for Monitoring Firm Brian Nemetz Start Date (10) June 13, 2016 Cocupany Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code West Orange, NJ 07052 Foreign Manager for Monitoring Firm Brian Nemetz Start Date (10) June 13, 2016 Cocupany Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Richmond, VA. 23220 Scope of Work (Check All That Apply) 23 of or 23 if Start Date (1) Scope of Work (Check All That Apply) Asbestos-Containing Material (ACM) In Facility (12) Yes No N/A 1st and 2nd Floor X Pipe Insulation In Facility (12) Yes No N/A Pipe Insulation In Facility In Passement Abatement Abatement In Registered Waste Hauler Future Sanitation Inc. Normally Basement X Pipe Insulation In Segistered Landfill Tullytown, PA Name of Registered Landfill Tullytown, PA Name of Registered Landfill Tullytown, PA	City (5)										# of	Floors		BI	dg. A	ge		
Union Name of Monitoring Firm Hired by Building Owner (8) Partner Engineering and Science, Inc. Street Address 611 Industrial Way West City, State, Zip Code Eatontown, NJ 07724 Project Manager for Monitoring Firm Brian Nemetz Street Address City, State, Zip Code Eatontown, NJ 07724 Telephone No. Orange, NJ 07052 Start Date (10) June 13, 2016 Occupancy Status During Abatement (Check Only One) Facility Closed/Acated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe: Scope of Work (Check All That Apply) Scope of Work (Check All That Apply) Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A Ist and 2nd Floor X Pipe Insulation Abatement X Pipe Insulation In Facility (12) Yes No N/A Pipe Insulation In ToUre Sanitation Inc. Name of Registered Waste Hauler Future Sanitation Inc. Oisposal Date City, State Tullytown, 2A Name of Registered Landfill Tullytown, 2A Street Address 235 Watchung Avenue City, State, Zip Code West Orange, NJ 07055 West Orange, NJ 07055 Renewation Description of Asbestos Containing Material (ACM) Amount (I.e. thermal systems insulation, Specify Specify Orange, NJ 07055 Name of Registered Landfill Tullytown, 2A											2							
Partner Engineering and Science, Inc. Street Address Street Address Street Address Street Address Street Address Street Address City, State, Zip Code Eatontown, NJ 07724 Project Manager for Monitoring Firm Brian Nemetz Start Date (10) June 13, 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: Scope of Work (Check All That Apply) 23 sf or 23 lf 2160 sf or 2250 lf Asbestos-Containing Material (ACM) In Facility (13) To Be ABATED In Facility (13) To Stand Address Street Address Street Address Street Address Street Address City, State, Zip Code West Orange, NJ 07055 Name of OSHA Monitor Schneider Laboratories Global Inc. Street Address 2512 W Cary Street City, State, Zip Code Richmond, VA. 23220 Scope of Work (Check All That Apply) Saf Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Street Address Tull Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Abatement (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) For LF) Specify Spec	The Designation of the Contraction of the Contracti								Part of the Control o	A STAND OF COLUMN STANDS	or if bei	ng demo	olished	4)				
Street Address Street Address 235 Watchung Avenue					ASCN	1 No.						500000						
City, State, Zip Code		g and Science,	Inc.			· ·												
Eatontown, NJ 07724 Project Manager for Monitoring Firm Brian Nemetz Telephone No. 732-380-1700 Telephone No. 973-669-2900 01231 Start Date (10) June 13, 2016 Scheduled Completion Date (11) June 13, 2016 Cocupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State Zip Code Richmond, VA. 23220 Scope of Work (Check All That Apply) Scope of Work (Check All That Apply) Page 150 sf or ≥260 if Scope of Work (Check All That Apply) Scope of		West								0.00	nue							
Brian Nemetz 732-380-1700 973-669-2900 01231 Start Date (10) June 13, 2016 Scheduled Completion Date (11) June 13, 2016 Scheduled Completion Date (11) Sc	네 그 이번 하게 깨끗하는데 아름다면서 아름이 아름다면서 아내지만한 뒤를 보았다.	24									7052							
June 13, 2016		nitoring Firm							TO 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.									
Occupancy Status During Abatement (Check Only One) Street Address 2512 W Carry Street			1.7	Date (11)														
Scope of Work (Check All That Apply)					3			Serie or record			ories (Slobal	Inc.					
Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Richmond, VA. 23220	Occupancy Status Durin	g Abatement (Che	ck Only On	e)			le:				st.							
Scope of Work (Check All That Apply) Sas f or ≥3 lf	Abatement Perform	ned Outside of Non			City, State, Zip Code													
Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and N	Scope of Work (Check A	All That Apply)								•								
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A 1st and 2nd Floor Exterior X Pipe Insulation Yape Insulation Yape Insulation To Be Ashared X Pipe Insulation Yape Insulation To Be Ashared X Pipe Insulation Type Type Type Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Yes No N/A Pipe Insulation Type Ty			-						Mir Glo	ni-Enclosur ovebag Pro	e cedure					е		
Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A		50 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -	Is	Loca	tion													
1st and 2nd Floor X Pipe Insulation 1,729LF X Exterior X Vapor Barrier 4,000SF X Basement X Pipe Insulation 150LF X Room A3 X Glue Dobs 250SF X Name of Registered Waste Hauler Future Sanitation Inc. NJDEP Waste Hauler ID No. Name of Registered Landfill Tullytown Facility City, State Passaic, NJ 07055 Pipe Insulation 1,729LF X Vapor Barrier 4,000SF X Round A3 X Glue Dobs 250SF X Disposal Date City, State Tullytown, PA	Asbestos-Containing TO BE AB In Faci	Material (ACM) ATED lity	Use Mai	d Sol ntena odial	ely by ance/ Staff?		tos Cont thermal surfa	taining I system cing, VA	Material ns insula AT, or		(5	Specify		Removal			Enclosure	
Exterior X Vapor Barrier 4,000SF X Basement X Pipe Insulation 150LF X Room A3 X Glue Dobs 250SF X Name of Registered Waste Hauler Future Sanitation Inc. NJDEP Waste Hauler ID No. Name of Registered Landfill Tullytown Facility City, State Passaic, NJ 07055 Disposal Date City, State Tullytown, PA			Yes		N/A											Ф		
Basement X Pipe Insulation 150LF X Room A3 X Glue Dobs 250SF X Name of Registered Waste Hauler Future Sanitation Inc. NJDEP Waste Hauler ID No. Name of Registered Landfill Tullytown Facility City, State Passaic, NJ 07055 Disposal Date City, State Tullytown, PA	1st and 2n	d Floor						(c) (c) (c) (c)			1,	729LF		X				
Room A3 X Glue Dobs 250SF X Name of Registered Waste Hauler Future Sanitation Inc. NJDEP Waste Hauler ID No. Name of Registered Landfill Tullytown Facility City, State Passaic, NJ 07055 City State Cubic Yards of Waste Disposal Date City, State Tullytown, PA	Exter	ior		X										X				
Name of Registered Waste Hauler Future Sanitation Inc. NJDEP Waste Hauler ID No. City, State Passaic, NJ 07055 Name of Registered Landfill Tullytown Facility Cubic Yards of Waste Cubic Yards of Waste Cubic Yards of Waste Cubic Yards of Waste Tullytown Facility City, State Tullytown, PA	Basem	nent		X			Pipe	Insula	ation		1	50LF		X				
Future Sanitation Inc. Hauler ID No. of Waste Tullytown Facility City, State Passaic, NJ 07055 Hauler ID No. of Waste Tullytown Facility City, State Tullytown, PA	Room	X			GI	ue Do	bs			P. 25 5 5 7 7 1		X						
City, State Passaic, NJ 07055 Tullytown Facility Disposal Date City, State Tullytown, PA	Name of Registered Wa	100						Assessment of the	30		ndfill							
Passaic, NJ 07055 Tullytown, PA	Future Sanitation In		riadici ID	140.	0. ***	510		Tullyto	wn Fa	cility								
Completed by Barbara Reed Title President Signature July 1, 2016										Tullyto	wn, P	Α						
		dent	t		5	Signatur	la	cal	g/oec	2			2016	3				

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

Date of Notification (1) July 1, 2016		Name of Building Owner/Operator (2) Kent Place School													
Agencies Notified Type Notification	- 11.55	Str	eet Add	dress											_
T EPA Initial 3 of	73			vood Ave	nue										
DEP X Amended	2	190000000		e, Zip Code	20										
X DOL Amendment #5				, NJ 0790)2				T-1-	N	l la				
DOH justification)	3	70.74-7.5		Contact emire						phone N 3-673-4					
DCA Cancellation				ITY INFORI	MATIC	N.			0,0						-
Name of Facility Where Abatement is Taking	Place (3)		FACIL	III INI OKI	MATIC	, ix		e of Facility (4)	1						
Kent Place School							×	School (K-12) Subchapter 8		rthan K	12\				
Street Address 42 Norwood Avenue							H	Other (i.e. privetc.)				build	ings,	nome	s,
City (5)							Squa	are Feet	# of	Floors		Bl	dg. Ag	je	
Summit, NJ 07902		,							2						
County (6) Union				ode (7) SE ONLY) _		_	Curr	ent Use (Prior ant	if beir	ng demol	lishe	1)			
Name of Monitoring Firm Hired by Building Ov		1	ASCM	No.				atement Contr							
Partner Engineering and Science, In	IC.							ruction Corp	porat	ion					
Street Address 611 Industrial Way West			Street Address 235 Watchung Avenue												
City, State, Zip Code								Zip Code	050	37)					
Eatontown, NJ 07724 Project Manager for Monitoring Firm		Te	lephon	e No		Teleph		ange, NJ 07	052	License	No.				
Brian Nemetz		5.50		0-1700		973-				01231					
1 TO	Scheduled C July 8, 20	(*)	letion D	ate (11)				SHA Monitor er Laborator	ies G	Slobal I	nc.				
Occupancy Status During Abatement (Check						Street				**************************************	estimeter.		- 12		
		ome	at					Cary Street							
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma	al Facility Ho	urs	ıı		Ì	City, S	State,	Zip Code							
Other – Describe:					-	Rich	mon	d, VA. 2322	20						
Scope of Work (Check All That Apply)							-								
≥3 sf or ≥3 lf	The second secon	vatio				-		ull Containmer	nt with	with Negative Pressure					
≥160 sf or ≥260 lf	x Dem	olition	n.				G	lovebag Proce	dure	48-04-0-0-0-0-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	An Visit II				
	T	2				L	_ N	on-Exempted	(*) an	d Non-Fr	iable		AVEN STORY	ment	
	Is Loc	cation nally										9	Ту		
Location of Asbestos-Containing Material (ACM)	Used S	olely	by	Ashestos		scription		ial (ACM)	Α	mount	Ī			ш	
TO BE ABATED	Mainte Custodi		77000 av		ermal	system	ns inst	ulation,	(5	Specify		Re	R	inca	Enc
In Facility (13)		2)	all !			cing, VA			SF	or LF)		Remova	Repair	Encapsulate	Enclosure
(15)	Yes N	lo	N/A	**	12			·				a		ate	ľe
Exterior 1st Floor Soffit		<			Pipe	Insula	ation		1	20LF		X			
Name of Registered Waste Hauler	100000	DEP Wuler ID	A STATE OF THE STA	Cubic of Was	Yards ste		Name of R			dfill					
Future Sanitation Inc.							Tullytow		CIIITY						
City, State Passaic, NJ 07055				Dispos	sal Date	е	City, State Tullytow		A						
Completed by	Title				S	ignatur	re /	7 1	1	\cap	Dat		Description		
Barbara Reed	Preside	nt			Particia Nova July 1, 2016										

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

CK29855

State of New Jersey

			4 (B.E-1941)
NOTIFICATION	OF	ASBESTOS	ABATEMENT
TIOTITIONS	~ ~	I AND AND A ON	

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

Date of Notification (1)					Name of I	Building O	wner/Opera	ator (2)		7 a	6	- 116-]][[
	July 1, 2016						Walter	s Re	sidential, ILC	A) JUL "	2-9.	916-) H	1
Agencies Notified [X] EPA [] DEP	[] Amen	Notification ded Notifi			Street Add	dress e, Zip Code			1 24	7	OS CO	NTRO	L&	
[X] DOL	The state of the s	dment #_ ency (incl	uding				Barneg	gat, 1	NJ 08005	AUGUL	-			- 1 (· ·
[x] DOH [] DCA		cation)			Name of (Victor) lel	ephone Number				A STATE OF THE PARTY OF THE PAR
				FACII	ITY IN	VFORM.	ATION	m	- CP:1:6-(4)					_
	sidence	Place (3)						Ly		School (k-12) Subchapter 8 (oth	er than	k-12)		
Street Address										Other (i.e., private homes, etc.)			ıl buildi	ngs,
City	*	County	(6)		County Co	de (7) JSE ONLY	2	Sqı	uare feet 1200 sf	# of Floors	Bldg.	Age 6	0	
Lacey	79	Ocean			, , , , , , , , , , , , , , , , , , ,	, OD 011D 1			rrent Use (Prior if b Residenc	e				
Name of Monitoring Firm)wner (8)		A	SCM No).	Name of	Abat	ement Contractor (9	O) Contracting,	Inc			
N/A Street Address	4						Street Ad		1889 Ro	ute 9, Unit 61	1110.			
City, State, Zip Code							City, Stat	8	Toms Ri	ver, New Jers		55-12	271	
Project Manager for Monit	toring Firm		Telephone N				Telephon 732-34	9-99	932	License N 00624	umber			
Scheduled Start Date (10) Scheduled Complete 7/15/16 7/18/16 Occupancy Status During Abatement (Check only one)					Date (11	1)	5270000			. Analytical				
[X] Fac [] Aba	Abatement (Check of ility Closed/Vacated atement Performed (aer – Describe	l During E					Street Ac		1056 Ste	elton Road vay, New Jerse	ev 088	54		
							[]		Full Containment v					
Scope of Work (Check all			r i	Renovati	0.19		[]		Mini-Enclosure Glovebag Procedur		Sure			
F 7 00000	sf or ≥3 lf 60 sf or ≥260 lf			Demoliti			[x]		Non-Exempted (*)		Procedu	re		
							70 50				Abat	ement	Гуре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) Is Location Normally used Solely by Maintenance/Custodi Staff (12) YES NO N/A				ed		Ash (i.e ins	Description of the control of the co	ntain ACM syster or or	ning f) ems ing,	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E
Exterior house			X		Asbes	stos sidir	ng			1250 sf	X	-		
											-	-	-	-
											-	-	-	
Name of Registered Waste	e Hauler ontracting, Inc.	N	JDEP Waste	e Hauler I 0223	D No.	Cubic Y	ards of Was	ste	Name of Register T.R.R.F.	ed Landfill			1	1
City, State	, New Jersey		20	Disposa 7/19/1			City, S Tully		n, Pennsylvania					
Completed by (Print or Ty Nicholas Fe	/pe)	Title Proje	ct Manage		Signat	ure	1./	1			Date 7/1	: /16		
*Do not use this f					for asb	estos lice	nsure exe	mpte	d activities.					

Guardian Contracting, Inc. 1889 Route 9 Suite 61 Toms River, New Jersey 08755

	The state of the s	
4/4/	SECEIVED	
	Date Received	
TION		
1 27	ASBESTOS CONTROL & LICENSING	_

DEMOLITION / RENOVATION NOTIFICATION

	DEM	OLITION / REN	JVIII	01111	01111011-		ASBESTOS CONTROL LICENSING							
Operator P	Project #:		Post	mark:			tion.	werene in . Y	5					
[,	TYPE OF NOTIFICATI	ON (O - Original R - Revise	d C - Cance	elled):	0	II.	IS ASBESTOS PRESENT? (Yes/N	/o):	Y					
Ш.		TION (identify owner, removal			erator)									
	OWNER NA	525 AT 121 FOR 12	Residenti											
	Address:													
	City: E	Barnegat	State: 1	New Jers	ey	Zip:	08005							
	Contact:	Victor				Tel:								
	REMOVAL CONTRAC	CTOR: Guardi	an Contrac	ting, Inc	•		NJ License: 00624							
	Address:	1889 R	Loute 9, Ur	nit 61										
	City:	Toms River	State:	New Jers	ey	Zip:	08755							
	Contact:	Nichol	as Fernico	la		Tel:	732-349-9932							
	OTHER OPERATOR ((if different)			(4)		NJ License:							
	Address:													
	City:		State:			Zip:								
	Contact:					Tel:								
IV.	TYPE OF OPERATIO	N (D - Demo O - Ordered D	Demo R - R	Renovation	E - Emergency Rer	novation):	D							
V.		TION (Including building name												
	Building Name:	Residence												
	Address:	1708 Binnacle	Road											
	City: Lacey		State:	New Jer	rsey	Count	y: Ocean	Ocean						
	Site Location:	Exterior												
	Building Size:	1200 sf	# of Floors	s:	1	Age in	n Years: 60							
	Decemb Lines	Residence			Prior Use:	Resid								
VI.	PROCEDURE, INCL	UDING ANALYTICAL MET	HOD, IF API	PROPRIAT	E, USED TO DETE	CT THE P	RESENCE OF ASBESTOS MATERI	IAL:						
	IS MATERIAL ASSU	UMED TO BE ASBESTOS?	LIDNG:						friable					
VII.		MOUNT OF ASBESTOS INCL	JODING.		RACM		LOCATION	Not	s Materia To Be					
	 Regulated ACM to Category I ACM r 	o be removed not removed			To Be Removed		LOCATION		noved					
	Category II ACM not removed				Kemoved			Cat I	Cat II					
	Pipes (Linear feet):													
	Surface Area (Square	e feet): 1250 sf		Asbest	os siding		Exterior							
	RACM Off Facility (Component (Cubic feet):												
VIII.		SBESTOS REMOVAL (MM/	DD/YY)	Start:	7/15/	16	Complete: 7/1	8/16						

NOTIFICATION OF DEMOLITION AND RENOVATION (continued)

	Nicholas Fernicola / Project Manager (Printed Name/Title)	(Signature of Owner/Op	July 1, 2016 (Date)
xviii.	I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT.	7.1	Tub. 1 2016
	Nicholas Fernicola / Project Manager (Printed Name/Title)	(Signature of Owner/Op	July 1, 2016 (Date)
xvii.	I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISION THE DEMOLITION OR RENOVATION AND EVIDENCE THAT TO AVAILABLE FOR INSPECTION DURING NORMAL BUSINESS IN AVAILABLE FOR INSPECTION DURING NORMAL BUSINESS IN THE PROVISION OF THE	THE REQUIRED TRAINING HA	REEN ACCOMPLISHED BY THIS PERSON WILL BE
xvi.	DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVASBESTOS MATERIAL BECOMES CRUMBLED, PULVERIZED,	VENT THAT UNEXPECTED AS OR REDUCED TO POWDER	SBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE
	Explanation of how the event caused unsafe conditions or would cause	equipment damage or an unreaso	nable financial burden:
	Description of the Sudden, Unexpected Event:		
	Date and Hour of Emergency (MM/DD/YY):		
xv.	FOR EMERGENCY RENOVATIONS		
	Date of Order (MM/DD/YY):	Date Ordered to Begin (M	M/DD/YY):
	Authority:		
970 N.C.	Name:	Title:	
xiv.	IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLI	EASE IDENTIFY THE AGENCY	BELOW AND ATTACH COPY OF ORDER
	Telephone: 215-943-9732		1494
	City: Tullytown State:	Pennsylvania	Zip: 19007
xiii.	D. J. Janes Dand		
	Contact Person:		I and the second
	City: State:		Zip:
	Address:		
	Contact Person: Nicholas Fernicola WASTE TRANSPORTER #2 Name:		
	City: Toms River State: Contact Person: Nicholas Fernicola	THEW JUISEY	
	Address: 1889 Route 9, Unit 6	New Jersey	Zip: 08755
xii.	WASTE TRANSPORTER #1 Name: Guardian Contracting		The second secon
	removed by non-mable procedures. All waste will be placed in double 0 lilli. Dag.	s, scaled and raceled and placed and	ASBESTOS CONTROL & LICENSING
xi.	DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTAND RENOVATION SITE: Prior to removal, the work area around the building will be roped off with caution and the state of th	tane and warning signs. Plastic sheets	will be placed the ground b2016nd the asbests will be
			FIT PASSING CEASESTOS AT THE DEMOLITION
see cross			Service and the service and th
X	DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION W	ORK, AND METHOD(S) TO BE	3 USED

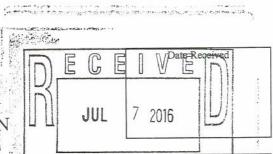
Ch 29849

State of New Jersey

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

Date of Notificati 1 (1) 7/1/2016		Name of Building		ator (2)	ECE			(a)	19			
[] DEP [] Amen [x] DOL [x] Emerging justification [x] Control [x] Emerging [x] DOH [x] Emerging [Notification Ided Notification Ided Notification Ident # Identify Ident	-	Street Address 104 Tarpon Drive Ortley Beach, NJ 08751 Name of Contact Sonny Teles BE Store CONTROL & Teles BE STORE									
c J		FACI	LITY INFORM	IATION	L		a e terrola	Life of states	-0-10-	and the same		
Name of Facility Where Abatement is Taking Residence	Place (3)	11101			Type of Facility (1)	School (k-12)	2 () 30-14					
Street Address					[x]	Subchapter 8 (oth Other (i.e., privat homes, etc.)	te & cor	nmerci	al build	ings,		
City	County (6)		County Code (7) (STATE USE ONL	Y)	Square feet 1500 sf	# of Floors	Bldg	. Age 6	0			
Ortley	Ocean			399	Current Use (Prior if Residen	[변경기 : [편집] [변경 : []]]]]]]]]]]]]]]]]						
Name of Monitoring Firm Hired by Building C	Owner (8)	-	ASCM No.	Name of	Abatement Contractor	(9)	T					
N/A Street Address				Street Ac	Idress	n Contracting,	inc.			_		
City, State, Zip Code				City Stat	1889 Rote, Zip Code	oute 9, Unit 61						
1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -					Toms R	iver, New Jers		55-12	271			
Project Manager for Monitoring Firm	Number		100000000000000000000000000000000000000	e Number 9-9932	License N 00624	umber						
Scheduled Start Date (10) 7/1/16	Completio	on Date (11)	Name of	OSHA Monitor E.M.S.I	L. Analytical							
Occupancy Status During Abatement (Check of X] Facility Closed/Vacated Abatement Performed Of Check of Check of X] Other – Describe	only one) I During Entire Perio	d of Abate		Street Ac	ldress 1056 St te, Zip Code	elton Road way, New Jerse	y 088.	54				
Scope of Work (Check all that apply)				[]	Full Containment	with Negative Pres	sure					
	r 1			[]	Mini-Enclosure							
[] >3 sf or ≥3 lf [X] ≥160 sf or ≥260 lf	[x]	Renovati Demoliti		[x]	Glovebag Procedu Non-Exempted (*	re) and Non-Friable l	Procedu	re				
					LOUIS TERRITOR S. T.	T	Abate	ement [Type			
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13)	n sed ustodial	(i.e	Description bestos-Cor Material (A ., thermal ulation, su VAT, of thermiscell	ntaining ACM) systems rfacing, or	Amount (Specify SF or LF)	R E M O V A	R E P A I R	E N C A P S U L E	E N C L O S U R E			
Exterior	X		Asbestos sidi	ng		1500 sf	X					
Name of Registered Waste Hauler	te Hauler I	ID No. Cubic Y	ards of Was	te Name of Registe	red Landfill							
Guardian Contracting, Inc.	0223	3		T.R.R.F.								
City, State Toms River, New Jersey		Disposa 7/7/16		City, St Tullyt	ate ową, Pennsylvania							
Completed by (Print or Type) Nicholas Fernicola	er	Signature		Je 1		Date 7/1/	2016					

DEMOLITION / RENOVATION NOTIFICATION



					L			3
Operato	Project #:	Pos	stmark:	Notificati	ion:	ASBESTOS CONTR LICENSING	OL &	
I.	TYPE OF NOTIFICATION (O - Original R - Revised	C - Cano	celled): O	1. : ** *		SBESTOS PRESENT? (Y		Y
Ш.	FACILITY INFORMATION (identify owner, removal of	ontractor a	nd other operator)	\	-7 33	THE PARTY OF THE P	The state of the s	
	OWNER NAME: V W V Construct	ion Inc						
	Address: 104 Tarpon Drive	9						
\	City: Ortley Beach	State:	New Jersey	Zip:	087	51		
	Contact: Sonny			Tel:	973	-390-2367		
	REMOVAL CONTRACTOR: Guardia	n Contra	cting, Inc.		NJ	License: 0062	4	
	Address: 1889 Ro	oute 9, U	nit 61					
	City: Toms River	State:	New Jersey	Zip:	087	55		
	Contact: Nichola	s Fernico	la	Tel:	732	-349-9932		
	OTHER OPERATOR (if different)				NJ	License:		
	Address:							
	City:	State:		Zip:				
	Contact:			Tel:				
IV.	TYPE OF OPERATION (D - Demo O - Ordered De	mo R-R	Renovation E - Emergency	Renovation):	D			
V.	FACILITY DESCRIPTION (Including building name,	number and	I floor or room number)					
	Building Name: Residence					1		
	Address: 15 Tunney Terra	ce						
	City: Ortley	State:	New Jersey	County:	Oce	ean		
	Site Location: Exterior							
	Building Size: 1500 sf	# of Floors	: 1	Age in Y	ears:	60		
	Present Use: Residence		Prior Use:	Resider	nce-ga	rage		
VI.	PROCEDURE, INCLUDING ANALYTICAL METHO	DD, IF APP	ROPRIATE, USED TO DET	TECT THE PRI	ESENC	E OF ASBESTOS MATE	ERIAL:	
	IS MATERIAL ASSUMED TO BE ASBESTOS?	onic. I					Non	friable
VII.	APPROXIMATE AMOUNT OF ASBESTOS INCLUI	DING:	7.01				Asbesto	s Material To Be
	Regulated ACM to be removed Category I ACM not removed		RACM To Be			LOCATION		noved
	Category II ACM not removed		Removed				Cat I	Cat II
	Pipes (Linear feet):							
	Surface Area (Square feet): 1500 sf		Asbestos siding		Е	xterior		
	RACM Off Facility Component (Cubic feet):							
VIII.	SCHEDULE DATES ASBESTOS REMOVAL (MM/DD	/YY)	Start: 7/1/	16	C	omplete: 7/	7/16	

NOTIFICATION OF DEMOLITION AND RENOVATION (continued)

x.	DESCRIPTION OF PLANNED DEMOLITION O	R RENOVATION WOR	K, AND METHOD(S) TO B	E USED	
	2		1000000		The second secon
xi.	DESCRIPTION OF WORK PRACTICES AND E. AND RENOVATION SITE: Prior to removal, the work area around the building will be removed by non-friable procedures. All waste will be place.				
	removed by non-friable procedures. All waste will be place	eed in double 6 mil. Bags, se	aled and labeled and placed in a lo	ocked container for disposar.	2016
xii.	WASTE TRANSPORTER #1 Name: Gua	rdian Contracting, I	nc.		STOS CONTROL &
	Address: 188	Route 9, Unit 61			LIOLINGING
	City: Toms River	State:	New Jersey	Zip:	00755
	Contact Person: Nicl	nolas Fernicola			· · · · · · · · · · · · · · · · · · ·
	WASTE TRANSPORTER #2 Name:				
	Address:				
	City:	State:		Zip:	
	Contact Person:				
xiii.	WASTE DISPOSAL SITE Name: T.R.	.R.F.			
	Location: Bor	dentown Road			
	City: Tullytown	State:	Pennsylvania	Zip:	19007
	Telephone: 215-943-9732		Permit #: 101	1494	
xiv.	IF DEMOLITION ORDERED BY A GOVERNM	ENT AGENCY, PLEAS	E IDENTIFY THE AGENCY	BELOW AND ATTAC	H COPY OF ORDER
	Name:		Title:		
	Authority:		T		
	Date of Order (MM/DD/YY):		Date Ordered to Begin (M	M/DD/YY):	
XV.	FOR EMERGENCY RENOVATIONS				
	Date and Hour of Emergency (MM/DD/YY):				
	Description of the Sudden, Unexpected Event:				
	Explanation of how the event caused unsafe condi-	tions or would cause equi	pment damage or an unreason	nable financial burden:	
xvi.	DESCRIPTION OF PROCEDURES TO BE FOL ASBESTOS MATERIAL BECOMES CRUMBLI			BESTOS IS FOUND OF	R PREVIOUSLY NONFRIABLE
xvii.	I CERTIFY THAT AN INDIVIDUAL TRAINED THE DEMOLITION OR RENOVATION AND E AVAILABLE FOR INSPECTION DURING NO	VIDENCE THAT THE	REQUIRED TRAINING HA	S BEEN ACCOMPLISH	ED BY THIS PERSON WILL BE
	Nicholas Fernicola / Project Manage (Printed Name/Title)	r	(Signature of Owner/Ope	erator)	July 1, 2016 (Date)
xviii.	I CERTIFY THAT THE ABOVE INFORMATIO		\	s 1	
	Nicholas Fernicola / Project Manage (Printed Name/Title)	<u> </u>	(Signature of Owner/Ope	erator)	July 1, 2016 (Date)

CKH 2950

			0.5	Dulling (0	COLUMN TO THE PARTY OF THE PART					
Date of Notification (1)		1	Name of	Building Owner/	Operator	o the personal for	PE	0 00 0	T3 pose	7	1
Agencies Notified Type Notification		4000	Street As	dress	0.00		S U E		3/1	1	
CM EPA DE INSTITUTO		entregene	,,,,								
DEP Amended		Carried C	2.5	e, Zip Code	4	W W UL	JUL 7	2016		1	
DOL Amendment #_ Emergency (in	cludina	- _		Knurst,	Ne	WORK	7		-	1	-
DOH justification)		g western	Name of		bha	AS	BES	e Number	i		ĺ
DCA Cancellation		9	4	LITY INFORMAT			240			7	1
Name-of Facility Where Abatement is Taking I	Place (3))	FFE	Fax a companients	E 11-16, P-9-10	Type of Facility	(4)	arr to a source	55		1
Scarro: ~ Trasidon					Ĵ	School (K-	12)	690			
Street Address					president	Subchapte	r 8 (Other than private & comm	K-12)	dinas	howe	
					contraction	etc.)					J.
City (5)					diferrapi	Square Feet	# of Floors	i second	Bidg. <i>I</i>	ige	
U9KN55+					- topological desired and the second		1		021	-	
County (6)			County (Jode (1) JSE ONLY)		Current Use (Pr		nonsneu)			
Name of Monitoring Firm Hired by Building Or	mer (8)	- 3	ASCA	1 No.	l Name	of Abatement Co	intractor (9)				
right of months of the rate of the second	arran dash		The same		-	Insulation Co	* *				
Street Address			1		Street	Address					
						iontrose Rd					
City, State, Zip Code					8	tate, Zip Code		^			
				***	1	Neck, New J					
Project Manager for Monitoring Firm		P. C. WARRE	Telephor	ie Ma.		one No. 294 1757	1 000:	ise No. 20			
Start Date (10)	chedule	d Con	noletion	Date (11)		of OSHA Monito					
7/13/1/0	2/2		10	,	acorteo ve						
Occupancy Status During Abatement (Check	Only On	e)	-3-4	AND THE RESIDENCE OF THE PARTY AND THE PARTY	Street	Address					
Facility Closed/Vacated During Entire Pe	riod of A	baten	nent		W Matters					-1-51-57 (0.01)	
Abatement Performed Outside of Norma Other – Describe: + AM – +	Facility	Hours	3		City, S	State, Zip Code					
					G						
Scope of Work (Check All That Apply)	group,		920		g	3	VeV 1200 4000 1				
23 sf or ≥3 # 2160 sf or ≥260 #	Silventon 2	enova emolit				4 Full Contained A fini-Englosus	rest with Nega re	live Press	me		
W = 100 S of = 200 H	e-And				F	Glovebag Pro	ocedure	Esiable D	raaadi	ro	
						2 NON-Exemple	ed (*) and Non	-FIRMUTE F		temen	Į.
	4	Local Ionna			an maintine	n of	7	gi, alterid	1	ype	
Location of Asbestos-Containing Material (ACM)		d Sole intena		Asbestos Co		Material (ACM)	Amoun	the state	\$175.00A	257	Repare
TO BE ABATED In Facility		odial :			al system facing, VA	s insulation,	(Special) SF or LF		Repair	Cap	nele
(13)		(12)			miscellar			Nemoyal Nemoyal	pair	Encapsulate	Enclosure
	Yes	No	MA				60.00	1	# ISPANIE .	to	0
W: tupe			X	[lase	ti le		2001	1 K	-	A Check	
Main floo-	No. of Street		TV	lood gran		r+·la	200.17	3 13	1	N Company	
Sibe com			1	(green)	000	-4:10	100 N	4 13	1	- Company	
2. 1. 1.2341			12	(diea)	41008	7100	104	7 1	- 	1	
Name of Registered Waste Hauler		, p	JUDEP V	l Vaste I Cuh	ic Yards	1 Name o	I of Registered L	i andiki			1
		age a	lauler ID		faste 2	GRO		MARKET STATE OF THE STATE OF TH			
Ace Insulation Co Inc		11	2086		المام						
City, State Colt Neck, New Jersey				UISPI	osal Date		ite iwn, PA				
Completed by	Title				Signative	Y-1/-		Date	5		
Bree McGuire	Secre	etary	Treasu		p	MNL		7	STEELS OF STEELS	9	
								1	-1-1	f	

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:128) Date of Notification (1) Name of Building Owner/Operator (2) 11110 4nderstat (ommerica Agencies Notified Type Notification Street Address EPA Initial State, Zip Code DEP Amended DOL Amendment # Emergency (including Name of Contact DOH justification) DCA Cancellation mah **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Latersta School ? Street Address L & d buildings, pomes, Met. (i.e. private di City (5) Bidg. Age. 4020 County (6) County Code (7) Current Use (Prior II being demolished) (STATE USE ONLY) and Mame of Abatement Contractor (9) School Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Ace Insulation Co Inc. Street Address Street Address 95 Montrose Rd City, State, Zip Code City, State, Zio Code Colts Neck, New Jersey 07722 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 732 294 1757 00029 Start Date (#0) Scheduled Completion Date (11) Name of OSHA Monitor 111 190 Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours
Other - Describe: + M - + 0 M City, State, Zip Code tom Ø Other - Describe: Scope of Work (Check All That Apply) 23 st or 23 H Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 If Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Type Normally Lecation of Description of Used Salely by Asbestos-Containing Material (ACM) Asisastos Containing Material (ACM) Amount Maintenances Encapsulate TO BE ABATED (i.e. thermal systems insulation, Enclosure (Specify Custodial Staff? Remova In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No MA but abors Irons: to panels Name of Registered Waste Hauter NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste / Ace Insulation Co Inc. GROWS 12086 City, State Disposal Qate City, State Colt Neck, New Jersey 2011 Tullylown, PA Completed by Signature Date Bree McGuire Secretary Treasurer

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

State of New Jersey

		пот	Sta TFICATION (Pursuant		ESTOS	ABATEN		T Comment		CE		<u>V</u> [
Date of Notification (1) 07/01/2016		 		f Building Grove E				on		JUL	7 2	016		U
Agencies Notified	Type Notification			ompton .		9			AS	BESTOS	CON	ITRO	L &	
X DEP X DOL	Amended Amendment Emergency			ate, Zip Co Grove,		009		L		LICEN	ISIN	G		
DOH DCA	justification) Cancellation	moraomig	Name of Mario	f Contact Gaita						1ephone Nui 73-239-15			Marine.	
			FACI	LITY INFO	ORMATI	ON								
Name of Facility Where A North End school	Abatement is Takin	g Place (3)					Typ	e of Facility School (K	-12)					
Street Address 122 Stevens Avenu	е									ner than K-12 & commerci		dings,	home	38,
City (5) Cedar Grove							Squ	iare Feet	# 0	of Floors	E	Blog. A	ge	
County (6) Essex				Code (7) USE ONLY)				rent Use (P 100l	rior if be	ing demolis	ned)			
Name of Monitoring Firm Ahera Consultants	Hired by Building	Owner (8)	ASCN	ЛNo.				rporation	ontracto	r (9)				
Street Address POB 385		United the second second				Street 606 N		ess Iride Ave						
City, State, Zip Code Ocenaville, NJ 0823	31							Zip Code d Park, N	J 074:	24				
Project Manager for Mon John SMoyer	ltoring Firm		Telepho 609-65	ne No. 52-1833		Teleph 973-2		No. -8400		License N 01104	O.			
Start Date (10) 07/02/16		Scheduled 0 07/6/16	Completion	Date (11)				SHA Monito ironmenta		oratories,l.	LC			
Occupancy Status During	Abatement (Chec	k Only One)				Street					******			
Facility Closed/Vac Abatement Perform Other – Describe:						City, S	tate,	Zip Code	est ———				-	
	U Thank Assolution					Unioi	n, N	J 07083					y and a	
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throughout th	e school		×		pip	e fitting	gs	•	1	83 LF	×			
Name of Registered Was Lilich Corporation	ste Hauler		NJDEP W Hauler ID 18724		of Was			GROV		ered Landfill Indfill				
City, State					Dispos	al Date		City, Sta	ate					

Date

07-01-2016

Morrisville, PA

Signature

Print Form

Completed by

Momo Glavatovic

Woodland Park, New Jersey

Title

vice president

01010	N			OF ASBE o NJAC 8					[[]	E C			E	
Date of Notification (1) 06/30/16		7.4		Building Con Board						1111	_	202	C	
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Street Address								Subchapter						2020
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City (5)			VII.				Squa	are Feet	# of	Floors	В	ldg. A	ge	
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City, State, Zip Code						City, S	State, .	Zip Code						
Phillipsburg, NJ 08865						Toto	wa, l	NJ 07512						
Project Manager for Monitoring Firm			Telephor	ne No.		Telepi	none l	No.		License	No.			
Jon Gilbert			908 45	4 6316		973	256	7010		00666				
	Schedule	ed Con	npletion [Date (11)		Name	of OS	HA Monitor						
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➤ DOH justification)			Name of	Contact erapiglia	2				100000000000000000000000000000000000000	389 28				
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Street Address 401 St. James Avenue								s 46 Suite	3D					
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City, State, Zip Code Phillipsburg, NJ 08865								J 07512						
Project Manager for Monitoring Firm			Telephon	ne No.		Teleph				License	No.			
Jon Gilbert			908 45				256 70			00666				
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State of NJ
Notification of Asbestos Abatement
(Pursuant to NJAC 8:60-7 and 12:120-7)

B & G proj.#;	2015-10	13		(Pursua		8:60-7 and 12:1:	20-7)	Ob				
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Date of Notification (7.70	- 1	Name of	Building Ox	ner/Operator (2))	geniji	page to the same of the		1		
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DCA	Cano	ellation	Rosi	e Mennon	a			17 1				
					CILITY INFORM	AATION		7328	391-538 501-510	ENSIN		ČL
Name of facility who	re abatemer	u is taking	place (3)				_	Type of Facility				
Ocean County	Counthous	se (NON	-Sub 81				11	School School	ol (K-12)	Section 1	700	WW.50
Street Address									hapter 8 (C).
118 Washingto	n Street		10	- 12		•)	- 11	E Other	(Private/C	iommero do:	al l	
City (5)		1 00	unty (6)					Square Feet	# of Floo		일 수 및 . /	Age
		- 1				County Code (?) (State use only)		Current Use (Dalas M. b la			
Tom's River		- 1	Cean			(Non-Sub 8	Profit Dain	g cemon	shed)	
Name of Monitoring The Whitman			ner (8)		ASCM No.	Name of Ab	atement Co				-	
Street Address	Combaule	\$			110		estoratio	n, Inc.				
7 Pleasant Hill	Road					Street Addre	erson Ro	ad				
City, State, Zip Code	71000					City, State, Z						Name of the local division of the local divi
Cranbury, NJ	08512						Park, N.					
Project Manager for N	fanitoring Fir	m		Phone Num		Telephone N			Licenas	Number	-	
Kevin Lavely				732-390-5			96-6869		00	378		The same
Scheduled Start Date	(10)	1		abon Date (1	1)	Name of OS	ha Monito: Ostoratio:					
08/24/2015			/26/201E	3		Street Addre	58	1110				-
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Facility closed/v. Abstament serio Describe: Star	acamo dynn omed pylsid	e of norma g enure pe	rioo or apa I facility ho	irement, Juis		City, State, Z	p Code					The state of the s
Describe: <u>3181</u> Other-Describe:	T. Fri, 60.r	n. weeke	ind Work			- LincolnP	ark, NJ (7035				
Scope of Work (ches	-	lv)										1.1
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asbestus-contak material to be		stan(12)		atobiel	Description	n of asbestos-contai	ining	Amount		e e	n	E
abated in facility	(13)	Yes	No	N/A	material (A	(CIAI)		(Specify S	ir or	0 8	a	E L
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City, State Lincoln Park, NJ				Disposal Di		City, State	town, PA		COVERY C	enter	-	-
Completed by (Print or	Туре)	Title			Signature		THE RESERVE		Date		×	
Gordana Luna		Secreta	ry/Traas	uter		Goodena D	orna		06/23/	2016		

State of NJ

Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

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Backet		Name of Building	Owner/Ope	rator (2)				F 1824	-		NA F			•
Date of Notification	(1)	County of Oc	cean		-	-		122	J E (SE	VE	<u>. IDII</u>	_	
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Agencies Notified	Type Notification	101 Hooper	Avenue						7) ,	UL 7	2016	إلاا		. E
EPA	▼ Initial	7.0	ode						Teleph	one Number	Name and Address of the Owner, where the Person of the Owner, where the Person of the Owner, where the Owner, which the Owner	7		-
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₩ DOL	☐ Amendment	Name of Contac	at						AZ32	691:538	ING			
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	tomant is taki	ng place (3)						_		IL /Driva	e/Commo	rcial		
Name of facility	where abatement is taki	ON-Sub 8)							В	ldgs./Home	55, 0.0	Bldg.	Âge	-
Ocean Col	unty Courthouse (NC	JN-002 17							Square Fe	et # of	Floors			
- Addres	S						2 - 12 (7)	-		Jse (Prior i	f heing der	nolished)		
118 Mash	nington Street				C	ounty	Code (7) use only)		Current	Jse (Prior I	Don's -			_
		County (6)			(3	State	30 - 77		Non-Si	(9)				
City (5)		Ocean				TIN	ame of A	batement	Contractor	(-)				
Tom's R	iver			ASCM	NO.	11	B&G	Restora	tion, Inc.					
Name of Mo	nitoring Firm Hired by Blo	19.		110		= 15	-	dress Ryerson						
The Wh	nitman Companies					11	-	- Cod	Δ.					
- Addr	ocs					- F	City, State	e, Zip Cod	, NJ 0703	35	License N	umber		
7 Plea	sant Hill Itous							Numbe	٢		License N 003	78		
City, State,	Zip Code oury, NJ 08512		Phone Nu	mber			1 (9/	31090-0	000					
	nager for Monitoring Firm	1	732-390	-5858				COCHA N	Ionitor	_				
Project Ma	inager to Motor		132 Date	(11)			B&	G Resto	ration, In	G	The state of the s			
Kevir	Lovely	Sched. Com		. (,		1	Otroot	Address						
	d Start Date (10)	06/26/20	16				105	Ryerso	II Road			3860		
06/2	4/2016	ent (Check only o	ne)					tate, Zip C						
Occupan	icy Status During Abatem cility closed/vacated during	ng entire period of	abatement	t. I		_	1 1 ir	colnPar	k, NJ 070	35				
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E AL	escribe: Start. FTI. Op					_	o.	atainmen'	t w/negative	pressure	☐ Glov	-friable p	roce	dure
	other-Describe: of Work (check all that a	pply)				L	J Full Co	nclosure			X Non	TRI	R	TE
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	>3 sf or >3 lf	Is location n	ance/custod	ial	Desc	ription rial (A	of aspes	stos-contai	-	ĹF)		v e	r	P
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	material to be abated in facility (13)	Yes	No	N/A		2 110	ctic		***********	1900	51		1	4
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	10.00				1			26 0	Registered L	andfill	o Deco	very Ce	ente	:[
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	Ctate	16 0		1	T Siar	ature		Purdam	a Luna			06/23/	201	
1	incoln Pain, in	ne) Title	т	curer	1			gounna						
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	Gordana Luna													

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Date of Notification (1) 07/01/2016					Building Ow Grove Boa			on		, W		Ш	V	
Agencies Notified	Type Notification		14 3	Street Ad 520 Pc	ddress ompton Av	enue			1	JUI		7	201	6
EPA X DEP X DOL	Amended Amendment				te, Zip Code Grove, NJ		5			BEST	08	001	VITE	201
DOH DCA	Emergency (justification) Cancellation	including		Name of Mario (Contact Gaita				Telephone I 973-239-	Numbe	CE	VSIN	IG.	
				FACII	LITY INFOR	MATION			L		-		-	
Name of Facility Where A	Abatement is Takin	g Place (3)		1701			Ty	pe of Facility (4) School (K-12)						
Street Address 116 Harper Place								Subchapter 8 Other (i.e. pri			uildir	ıgs, h	omes	5,
City (5) Cedar Grove	The state of the s						Sq	etc.) uare Feet	# of Floors		Bld	g. Ag	9	
County (6) Essex				County C	Code (7) USE ONLY)			rrent Use (Prior hool	if being demo	olished))		e ed place	
Name of Monitoring Firm Ahera Consultants	Hired by Building	Owner (8)		ASCM	1 No.	100 State 100 St		batement Controrporation	actor (9)					
Street Address POB 385						77,000	et Add	Iress Bride Ave						
City, State, Zip Code Ocenaville, NJ 0823	31							, Zip Code nd Park, NJ (07424					
Project Manager for Mon John SMoyer	itoring Firm	***********		Telephor	ne No. 52-1833		phone	No. 5-8400	Licens 01104					
Start Date (10) 07/02/16	10	Scheduled 07/6/16	d Com	pletion [Date (11)	WW. C. C.		SHA Monitor vironmental l	 _aboratorie	s,L.I.C	·			
Occupancy Status During	g Abatement (Chec	k Only One	2)				et Add				_		7.12	-
× Facility Closed/Vac	r ated During Entire I	Period of Al	patem	ent				oute 22 West						
Other - Describe:	1					- Ur	ion, t	NJ 07083						
Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	If Renovation							wrap/cu: Full Containmer Mini-Enclosure Glovebag Proce Non-Exempted	nt with Negative			dure		
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throughout th	ne school	100		×		pipe fitt	ings		115 LF	×	+			
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City, State Woodland Park, Nev	w Jersey	11337				Disposal Da		City, State Morrisvil				-135	N Total	
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NOTIFICATION OF ASBESTOS ABATEMENT MO#23456168515 (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 01 / 16 07 Alan Popadines Type Notification Street Address Agencies Notified X Initial ☐ EPA ☐ Amended X DOLWD JUI 2016 City, State, Zip Code Amendment # X DHSS Whippany, NJ 07981 Emergency (including □ DCA Name of Contact justification) (NJAC 5:23-8) SRESTOS CONTROL & Cancellation Alan Popadines ING FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Private house Subchapter 8 (Other than K-1 2) Street Address Other (i.e., private and commercial buildings. homes, etc.) # of Floors Bldg. Age Square Feet City (5) Whippany, NJ 07981 County Code (7) (STATE USE ONLY) | Current Use (Prior if being demolished) County (6) Morris Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 License No. Telephone No. Telephone No. Project Manager for Monitoring Firm 01127 973-638-1777 Scheduled Completion Date (11) Name of OSHA Monitor Start Date (10) 07 / 14 / 16 07 / 13 / 16 Envirovision Consultants, Inc Street Address Occupancy Status During Abatement (Check only one) X Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Road, Bldg .# 35E Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: AM- PM/ Fair Lawn, NJ 07410 Clean up and decontamination with negative pressure Scope of Work (Check all that apply) Full Containment with Negative Pressure Renovation ≥ >3 sf or >3 lf Mini-Enclosure Glovebag Procedure Tent with Negative Pressure Demolition] > 160 sf or >260 lf Non-Exempted (*) and Non-Friable Procedure Abatement Type Is Location Normally Description of Location of Repair Encapsulate Remova Used Solely by Amount Asbestos Containing Material (ACM) Asbestos-Containing Material (ACM) Maintenance/ (Specify TO BE ABATED (i.e., thermal systems insulation, Custodial Staff? surfacing, VAT, or SIF or LF) IN Facility (12)other miscellaneous) (13)Yes No N/A X 55 LF Pipe insulation Basement NUDEP Waste Hauler ID No. | Cubic Yards of Waste | Name of Registered Landfill Name of Registered Waste Hauler 0033785 TBD T.R.R.F. Inc Gr Tech LLC Disposal Date City, State City, State TBD Tullytown, PA Wayne, NJ 07470 Date Title Signature/ Completed By (Print or Type) Tente Wenad 07/01/2016 Owner N.Jevtic ASB-41

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Project Manager for Monitoring Firm	cheduled C		ephone		(7	732)899-749 ame of OSHA		0	1196				_
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City, State Brick, New Jersey	Title					ignature /	PA			ate	77	111	
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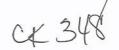
^{*} Do not use this form for asbestos licensure exempted activities.

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Date of Notification (1) 7/1/16				Building Cas Paladi				: IID	广				1000000	
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Douglas Paladino Private Home								School (K-1			-			
Street Address							×	Subchapter Other (i.e. p. etc.)				lings,	home	s,
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Name of Monitoring Firm Hired by Building Ow N/A	mer (8)		ASCM	No.			of Aba	atement Con	tractor	(9)				
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City, State, Zip Code						1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		Zip Code Iin NJ 080	91					
Project Manager for Monitoring Firm			elephor	ne No.		Teleph		lo.	-	License 1	No.	7-12-2-5	and Alberta	
	chedule 1/29/16		pletion [Date (11)		Name Sam		HA Monitor						
Occupancy Status During Abatement (Check	Only On	ie)				Street	Addre	ess			25811-51			
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Normal Other – Describe:	riod of A Facility	Abatem Hours	ent		_	City, S	State, 2	Zip Code	-			-		
Scope of Work (Check All That Apply)														
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Traine of the greater trades				/aste No.	Cubic of Wa 4	Yards ste		Name of G.R.O.	ACTIVATE OF THE RESIDENCE	ered Landf	ill '			
City, State Elm NJ					Dispo: 7/29/	sal Date	9	City, Stat Morrisv		A 19067				
Elm NJ Completed by Anthony T Perna President						Signatur	e) (Date 7/1/16			

Print Form

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

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		City, State,	140			\ 1	
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The of Facility Where At	Datement is Taking Place (3)		92		So	uare Feet n/a (a Turrent Use (Prior if being)	tomolished)
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Address						Private Dwelling	
Street Add.			unty Code (7)			(9)
(5)		COL	anty Code (7		T Name o	Abatement Contacting LLC	
City (5) Summit NJ 07901			ASCM No.		1 Ama	X 001.	
County (6)	Owner	(8)	A30		1	V 441622	
County	Hired by Building Own						
Union of Monitoring F	Firm Hired by Building Owner				City,	State, Zip Code	License No.
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Street Address	.+ St				- Tel	ephone No.	012
Street Address 1130 W Chesti	nul or		Telephone	No.	1 9	73-692-02-	
alata ZID					- N	73-692-0230 ame of OSHA Monitor Amax Contracting L	<u>LC</u>
City, State, Zip Co Union NJ 070	J83		- oletion [Date (11)	1 1	max Com	
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Project Manage Rick Eustaqu		27174140			\	City, State, Zip Code	-7424
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岗 ≥160	or ≥3 lf sf or ≥260 lf	$\overline{}$	Is Locatio	n	100	Containing - insulation	SF or LF)
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	Amax Contracting LLC City, State Woodland Park New Completed by Tome Maslarkov	Jersey 0	7424	e roject Ma	nager	Signature	100-7



(FICATION OF ASBESTOS ABATEMENT Pursuant to NJAC 8:60 and 12:120)					EC	E						
Date of Notification (1) 6/30/2016					Name of Building Owner/Operator (2) Anthony Gittens							- 00					
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	08 Fulton Ave S						4 Morley Dr										
City	y, State, Zip Code		-				ry, State, Zip Code /oodland Park										
		- 1-	Telephone No.			Telephone No. License No.											
Project Manager for Monitoring Firm Kayode Adefisoye					347-241-7673			973-692-6298 01266									
					Completion Date (11)				Name of OSHA Monitor								
07	7/11/2016	2016					nax Contracting LLC										
Occ	cupancy Status Durir	ne)	Street Add														
Facility Closed/Vacated During Entire Period of Aba					tement				Morley Dr								
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Amax Contracting LLC			H	Hauler ID No. of Waste 0036184 3 CY				GROWS									
City, State Woodland Park New Jersey 07424					Disposal Date 07/19/2016				//								
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			FACILI	ITY INFORMA	TION					111111111111111111111111111111111111111			
Name of Facility Whe	re Abatement	is Taki	ng Place (3)			Type of Facil	i ty (4)						
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Street Addres						cial buildings, homes, etc.)							
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Street Address				86	Chris	stopher St	•						
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City, State, Zip Coo	ie.					ir, NJ 070	42						
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Scheduled Start Date	o (10) Sch	ed Com	pletion Date ((11) Name	of OSHA	Monitor							
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of Abatemer []Abatement Pe	erformed Outs	ide of 1	Normal Facilit	y city,	State,	Zip Code							
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Constantine '		Presi	dent		1. 10	A tout	Viva	_ 7/1,	/2016				

State of New Jersey

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