NOCK

NOC	Name of Building Owner/Operator (2)
Date of Notification (1)	Name of Building Owner, pp. 66
10171/10121/1151	00E 3 E018
Agencies Notified Type Notification	Street Address 1400 Park Avenue
[X]EPA []Initial	
Notification	City. State. Zip Code Cinden N.J. 07036
[X]DOL [X]Amended Notification	
[X]DOH []Cancellation	Name of Contact Ren Hines
(X)DCA	
	FACILITY INFORMATION Type of Facility (4)
Name of Facility Where Abatement is Ta	[]School (K-12) []Subchapter 8 (Other than K-12) []Subchapter 8 private & commer-
Phillips	Other (1.e., pomes, etc.)
Street Address	
Street Address 1400 Park	y (6) County Code (7) Outside Current Use (Prior if being demolished) Current Use (Prior if being demolished)
	Bil Retivery
C11001611	Contractor (9)
Name of Monitoring Firm Hired by Buil	110. States Contracting
Owner (8)	Street Address 2 400 Mgin St Extension Suition
Street Address /	2400 Mg11 ST SU1+10
Zin Code	City, State, 211 0000 NJ 08812
City, State, Zip Code	
Project Manager for Monitoring Firm	Telephone Number 732 525 0100 00 749
Scheduled State 221	1/101/1/151 1 1/1985 27 1/1001
Month / Day / Year Month / Occupancy Status During Abatement (C []Facility Closed/Vacated During	Entire Period 23 4
of Abatement []Abatement Performed Outside of	
Hours - Describe: Done /Ve	cmal Hours
Scope of Work (Check all that apply)	[]Full Containment with
r IDemolition	Renovation []Glovebag Frocedure []Non-Friat _e Procedure
[]>3 sf or >3 lf []>160 sf or >260 lf	Abatement Type
	Location R R N N N R R C C
Location of	Normally Asbestos-Containing (Specify M P P O
Asbestos-Containing	Solery (i.e., thermal systems VAT, LF)
TO BE ABATED in Facility	Custodial or other miles
(13)	Staff(12) Yes No N/A 150 X
7-Pipe Stills	x Tar taper
	1 2 - 2 - 2 3 X
Water Front Sub	Transit pipe
Water Front 300	Name of Registered Landrill
Name of Registered Waste Hauler	Hauler ID No. of Waste Advgreed Disposal
Horwith Truck	Disposal Date City, State
City, State Nor	th Hampton 7-10-15 Kersel Date
Po Box 7	PA Signature / / 7 7-/5
Completed By (Print or Type) Tit	Superintendent But have 1213
Kurt Ngle -	OPETIA TENGENI
ASB-41	
JUN 95	

NOCK

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

1310-4694 Check#

Date of Notification (1)						Owner / Operato					<u> </u>		
	6/30/15						Sewerage Cor	nmiss	ioners	1111				
	Type Notifica	ation	-		t Addı					002				
⊠ EPA □ DEP	☐ Initial			_		n Ave & Zip (
□ DOL		nded #3	- 1	100.00		∝ ∠ip (√ √ 071								
□ DOH		gency				ontact	00				Telenha	no N	umhi	er
DON DCA		ellation		\nth		Jillaot				- 1				
	Vario			000000000000000000000000000000000000000		TV IAID	ORMATION			1				
Name of Facility Whe	ere Ahateme	ent is Taking P	lace (3		CILII	1 1141	Type of Facil	ity (4)				_		
PVSC	ere Abaterre	siit is Taking I	iace (o	,			School (
Street Address									Other than K-	12)				
600 Wilson Avenu	ie								ate & commer	50	ngs, hom	es, e	etc.)	
							Square Feet		# of Floors	1	Bldg. Ag	Э		
City (5)		County (6)	Cou	unty (Code	(7)								
Newark		Essex					Current Use	(Prior i	f being demo	lished)				
							Plant							
Name of Monitoring R	Firm Hired b	y Building Owr	ner (8)		AS	CM No			t Contractor (9)				
AECOM							AbateTech							
Street Address	D 10 "	P00					Street Addres	SS						
30 Knightsbridge City, State & Zip Cod		e 520					PO Box 25 City, State &	7in Co	do					
Piscataway, NJ 08							Lumberton							
Project Manager for I		īrm	Telep	hone	Num	her	Telephone N			License N	Number			
Mark Connors	Monitoring i		732-5				609-265-21			Liconoci	0052	9		
Scheduled Start Date	e (10)	Scheduled Cor	THE RESERVE OF THE PARTY OF THE				Name of OSI	MARKET THE PARKET	nitor					
4/20/15			7/31/			()	EMSL Anal	ytical						
Occupancy Status Di	uring Abater	nent (Check o	ly one)	-		Street Addres	SS						
		During Entire P			ateme	ent	108 Haddo							
	erformed O	utside of Norma	al Hou	ırs —			City, State &							
Describe:	ated Davies	A b = 1 = = = = = t					Westmont,	NJ 08	3108					
Scope of Work (Chec														
Scope of Work (Cried	uk ali tilat ap	(Piy)						П	Full Containr	ment with N	Vegative	Pres	sure	
\ \ \ ≥3 sf or ≥3 lf			\boxtimes	Ren	ovati	on		Ħ	Mini-Enclosu		0			
≥160 sf ≥260	lf		Ħ	Den	nolitic	n			Glove Bag P	rocedures				
_			-					\boxtimes	Non-Exempt	ed and No	n-Friable	Pro	cedu	re
	cation of			ocat			Description		:0	Amount	Aba	tem	ent T	уре
	s-Containin	g	Norm				Asbestos-Con			(Specify				
	rial (ACM) E ABATED		Maint	olely l			Material (A (i.e., thermal s			SF or LF)	7		En	Ш
	Facility		Custo				insulation, surface				Remova	Repair	Encapsulate	Enclosure
	(13)			(12)			or other miscell				ova	≅.	sula	sur
			Yes	No	N/A								te	W
Effluent Pumping St	tation				П		Transite Pa	nels		1,150 SF				
Effluent Pumping St			X				Built Up Ro			4,277 SF				
Effluent Pumping St	tation						nterior Windo	w cau	ılk	225 LF				
Wet Weather Pumpi	ing Station						Built Up Ro	ofing		450 SF				
Wet Weather Pumpi	ing Station		\boxtimes			E	xterior Windo	w Car	ulk	120 LF				
								1				Ш	Ш	Ш
Name of Registered \	Waste Haule	er		979800		Waste D No.	Cubic Yards of Waste	Name	e of Registere	d Landfill				
AbateTech, Inc.	pateTech. Inc.						12	TRR	F Landfill					
City, State		***			187		Disposal Date	City,						
Lumberton, NJ							7/31/15		rtown, PA					
Completed By (Print of	or Type)			Titl	е		Signature 11	11	7		Date		1	100
Gwen Trumbetti				Ор	ps. C	oord.	XIM	N	14				6	50



Date of Notification (1)				Name	e of Buildin	ig Ow	ner/Operator (2)					_
6/3	0 /	15		100000000000000000000000000000000000000			Account of the control of the contro	b #1501-4865	Check #				
Agencies Notified Ty	ype Notificati	tion		Stree	t Address					JUL -		100	
⊠ EPA □] Initial			PO	Box 505	50							
	Amended			City	State, Zip (Code							
☑ DHSS	Amendmer				odbridge								
	Emergency justification		g	A CONTRACTOR	of Contac				Telephone Nu	mhor			
(NJAC 5:23-8)	Cancellation				n Crum				releptione ivu	HIDEI			
			-	FA	CILITY IN	VFOF	RMATION						
Name of Facility Where Aba	tement is Ta	aking Plac	e (3)					Type of Facility (4)				
Toll Plaza- Toll Collect								☐ School (K-12)					
Street Address								Subchapter 8			ornarra		
Intersection of 53 rd Av	ve & Avenu	ue E						Other (i.e., pr homes, etc.)	ivate and comm	ierciai b	ıllalni	Js,	
City (5)								Square Feet	# of Floors	В	dg. A	ge	
Bayonne													
County (6)				Cou	nty Code (7	7)(STA	TE USE ONLY)	Current Use (Price	or if being demo	lished)			
Middlesex						.,		Toll Plaza					
Name of Monitoring Firm Hir	ed by Buildir	ng Owner	(8)	ASCM	No.	Nar	me of Abateme	ent Contractor (9)					
USA Environmental						Δ	bateTech, I	nc.					
Street Address						Stre	eet Address						
344 West State Street						3	0 Maple Ave	e. PO Box 25					
City, State, Zip Code							, State, Zip Co						
Trenton, NJ 08618	Fi		1		NI		umberton, P	J 08048	T				
Project Manager for Monitori John Duggan	ng Firm		_	ephone 09-656	TO SEC.	0000	ephone No. 09-265-2107		License No. 00529				
Start Date (10)	T.S.C.	heduled (- 1		1	3973	me of OSHA M		00525				
4 / 20 /	-	7					MSL Analyt						
Occupancy Status During Ab			- 100				eet Address						
☐ Facility Closed/Vacated D				ment		200	00 Route 13	0 North					
☐ Abatement Performed Ou					scribe	1000	, State, Zip Co						
Time of Abatement:						1	innaminson						
Scope of Work (Check all tha	at apply)			18									\neg
≥3 sf or ≥3 lf		⊠ R	enova	ion			☐ Mini-Enc	ainment with Nega losure	ative Pressure				
≥160 sf or ≥260 lf			emoliti	on				Procedure	Ei-N-D				
				41			⊠ Non-Exe	mpted (*) and Non	-Friable Proced				
Location of			s Loca Norma				Description o			-	atem		ype
Asbestos-Containing Mat	erial (ACM)	Us	ed Sol	ely by	Asbe	stos (Containing Ma		Amount	Remova	Repair	Enc	Enc
TO BE ABATE	<u>D</u>	4	aintena	ance/ Staff?		e., the	rmal systems i	insulation,	(Specify	Vou	air	aps	Enclosure
IN Facility (13)		000	(12)				urfacing, VAT, ner miscellane		SF or LF)	<u>n</u>		Encapsulate	лге
()		Yes	No	N/A		011	ioi iiiloooiiaiio	003)				e	
Toll Plaza Utility					Windov	v Gla	zing		120 LF				
Toll Plaza Utility					Windov	v Ca	ulk		65 LF				
Name of Registered Waste H	lauler	300-00	1	JDEP I		Cub	ic Yards of	Name of Registe	ered Landfill				
Freehold Cartage			ŀ	lauler II 15939		Was		Advanced V	Vestern Berk	s Land	fill		
City, State							osal Date	City, State					
Freehold, NJ						7/	31/15	Birdsboro,	PA				
Completed By (Print or Type)	Т	Title					Signature,	1111		Date	2.0	1,,	
Gwendolyn Trumbetti		Operat	ions	Coord	inator		YIM	NVI		4	30	11)

ASB-41 MAY 11

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

NOCE

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

Date of Notification (1)				Name	e of Buildin	g Ov	vner/Operator (2)						
6 /30 / _	15			1,000	ustees of			Job #1408-480	13	-	1	617		
Agencies Notified Type Notific	ation			Stree	t Address									
☑ EPA ☐ Initial				Tru	istees of	Prin	nceton Unive	rsity E.A. Macl	Millan Bldg.					
☑ DOLWD ☑ Amended	200			City,	State, Zip (Code	1							
□ DHSS Amendm				Pri	nceton, l	UJ 0	8544							
□ DCA □ Emerger □ institution		Jaing		-	of Contac				Telephone N	umber		-		
☐ Cancella				Ro	bert Orte	go,	P.E.		1					
		*		FA	CILITY IN	IFO	RMATION							
Name of Facility Where Abatement is	Taking F	Place	(3)			C 0 S		Type of Facility	(4)					
Princeton University - Fireston	ne Libr	ary						School (K-12						
Street Address								Subchapter 8			huil	dina	0	
One Washington Road								homes, etc.)	ivate and com	nerciai	bull	unig	5,	
City (5)								Square Feet	# of Floors		Bid	g. Ag	ge	
Princeton								1,000,000	8		7	2		
County (6)				Cou	nty Code (7	7)(ST/	ATE USE ONLY)	Current Use (Pri	or if being dem	olished)			
Mercer								University L	ibrary					
Name of Monitoring Firm Hired by Build	ding Ow	ner (8)	ASCM	No.	Na	me of Abateme	ent Contractor (9)						
ATC Associates				000	98	1	AbateTech, I	nc.						
Street Address						Str	eet Address							
3 Terri Lane						3	30 Maple Ave	e. PO Box 25						
City, State, Zip Code						Cit	y, State, Zip Co	ode						
Burlington, NJ 08016						1	umberton, N	J 08048						
Project Manager for Monitoring Firm			Tel	ephone	No.	Те	lephone No.		License No.					
Michael R. Keehn			6	09-386	-8800	6	09-265-2107		00529					
Start Date (10)	Schedul	ed Co	mple	etion Da	ite (11)	Na	me of OSHA M	Ionitor						
12 / 24 / 14	8_	_ /	_ 3	1 /	15	E	EMSL Analyti	ical						
Occupancy Status During Abatement (Check o	nly-o	ne) -			Str	eet Address							
☐ Facility Closed/Vacated During Enti						2	200 Route 13	0 North						
Abatement Performed Outside of No						Cit	y, State, Zip Co	ode						
Time of Abatement:AM	PIVI/_		_PIVI		AM	(Cinnaminson	, NJ 08077						
Scope of Work (Check all that apply)							M Eull Cont	ainment with Neg	ativo Proceuro					
≥3 sf or ≥3 If	\boxtimes	Rer	novat	ion			☐ Mini-Enc		alive Flessule					
☐ ≥160 sf or ≥260 lf		Den	noliti	on			☐ Glovebag		Fill D	rate second				
		la l		llan.	T	-	☐ Non-Exer	mpted (*) and Nor	n-Friable Proce					
Location of			Loca orma				Description o	£		1		_	nt Ty	/ре
Asbestos-Containing Material (ACM)	Used	Sol	ely by	Asbe	stos	Containing Ma		Amount	6	U	Repair	Enc	Enc
TO BE ABATED				ince/ Staff?	(i.e	., the	ermal systems i	nsulation,	(Specify	S S S S S S S S S S S S S S S S S S S		air	aps	Enclosure
IN Facility (13)		Ousid	(12)				surfacing, VAT, her miscellane		SF or LF)	2	2		Encapsulate	ure
4.57	Y	'es	No	N/A		0.	noi micconanci	,					(e)	
Work Area #1A Level 1	E				Pipe an	d Fi	tting Insulati	ion	60 LF	D				
] [
						77,77					1			
Work Area #1A Level 1		7	П							IF	7 1	T	П	П
Name of Registered Waste Hauler			N	JDEP V	Vaste	Cub	oic Yards of	Name of Regist	ered Landfill					
AbateTech, Inc.			1000	lauler II	No.	Wa	ste	G.R.O.W.S.						
City, State				18750	1	2 Dist	posal Date	City, State			-	-		
Lumberton, NJ						100000000000000000000000000000000000000	/31/15	Tullytown,	PA					
Completed By (Print or Type)	Title			ACT 100			Signature			Date (1		-
Gwendolyn Trumbetti	1,000,000	ratio	ns (Coordi	nator		()	MIL		10	30	112		
	- 1-0						V	VVV		1	68	11-	7	

ASB-41 MAY 11

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

2100 51 01 2200 11		Der	molition				Mini-Enclosur Glovebag Pro	е	rvegative	10330	ii e		
Scope of Work (Check / ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	All That Apply)	× Rei	novation			×	Full Containm	ent with	Negative P	raccii	ıro		
Abatement Perform	ng Abatement (Che cated During Entire ned Outside of Norr Subchapter 8 Occup	Period of Ab	atement		_	Street 91 Fi	oja Boceski Address ulton Street tate, Zip Code nton NJ 07005						
Project Manager for Mo Ralph Coppola Start Date (10)	nitoring Firm		(20 Comple	ephone No. 01) 438 483 etion Date (11)		(973 Name	none No.) 299 4455 of OSHA Monitor		License N 01081	0.			
City, State, Zip Code Lyndhurst NJ 0707	71					City, S Boor	state, Zip Code nton NJ 07005						
McCabe Environm Street Address 464 Valleybrook A			0	00118		Street	n Inc. Address ulton Street						
Passaic Name of Monitoring Firm		Owner (8)	(ST	ASCM No.	n	2,000	School of Abatement Co						
City (5) Wayne County (6)			Cor	unty Code (7)			Square Feet 100,000 Current Use (Pr	2	Floors	6	Bldg. , 30	Age	
Ryerson Elementa Street Address 30 McCleland Ave	ary School						School (K-Subchapte Other (i.e. etc.)	12) r 8 (Othe			ldings	, hom	ies,
Name of Facility Where		2		FACILITY INF		ION	Type of Facility	(4)					
DOL DOH	Amendmen Emergency justification Cancellation	(including	_ W	ayne NJ 07 me of Contact r. Kevin Joy	470			Tele	enhone Nui	mber	-117/23-3 3		
Agencies Notified EPA DEP	Type Notification Initial Amended		50	eet Address Nellis Driv y, State, Zip C									
Date of Notification (1) 07/05/2015				ayne Town	ship Sc	Operator chools	(2)		JUL		015		



Date of Notification (1) 07/05/2015					Building C Townsh			(2)		ď	Trans.	70	2015		
Agencies Notified	Type Notification		14 8	Street Ad 50 Nell	ddress lis Drive										
DEP DOL	Initial Amended Amendment		- 2		te, Zip Coo										
X DOH X DCA	Emergency (injustification) Cancellation	including			Contact vin Joy					Telenho	ne Mill	ber			
				FACIL	LITY INFO	RMATI	ION								
Name of Facility Where Albert P. Terhune E								× s	of Facility (4) School (K-12)		16.40				
Street Address 40 Geoffrey Way								T o	Subchapter 8 Other (i.e. priv etc.)				dings,	home	es,
City (5) Wayne								Squar 75,00	re Feet 00	# of Floo 2	ors	5 5	ldg. A 0	ge	
County (6) Passaic				County C	Code (7) USE ONLY)			Curre	nt Use (Prior ool	if being de	emolish	ed)			
Name of Monitoring Firm		Owner (8)		ASCM 0011			100000000000000000000000000000000000000	of Abat	tement Contra	actor (9)					
Street Address 464 Valleybrook Av	renue				5-X			Addres							
City, State, Zip Code Lyndhurst NJ 0707							City, S	State, Zi	p Code J 07005			12-40-25000			
Project Manager for Mor Ralph Coppola	nitoring Firm		11.2	Felephor (201) 4	ne No. 138 4839)	102-51-51-51-51-51-51-51-51-51-51-51-51-51-	none No			ense No).			
Start Date (10) 06/22/2015		Scheduled		pletion [Date (11)			of OSH	IA Monitor ceski						
Occupancy Status Durin	g Abatement (Chec	k Only One	:)				-	Addres						-	
Facility Closed/Vac	ated During Entire F	eriod of Al	atem	ent				ulton S							
Abatement Perform Other – Describe:			Hours			_			p Code IJ 07005						
Scope of Work (Check A	II That Apply)							7							
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		portugues .	enovat emoliti				×	Min Glo	Containmen i-Enclosure vebag Proce	dure					
		T						1 NOI	n-Exempted () and No	n-Friab	E PIO		ement	
€70799600 €704	80%. <u>-</u>	10000000	ocation or mall	430000		_		e					Ту		
Location Asbestos-Containing		Used	Solel	y by	Asbest		scription taining N		(ACM)	Amou	nt			m	
TO BE AB In Facil (13)	ATED lity	Custo	itenar idial S (12)			therma surfa	l systems icing, VA miscellar	s insula T, or		(Speci SF or L		Removal	Repair	Encapsulate	Enclosure
D-il Dbi-	- 1 1-2-	Yes	No	N/A	The			Inquile	tion	220 S	· -	<u> </u>		CD.	
Boiler Breechin Pipe Joint In		X				denteres of	system system			60 LI		x			
Pipe Joint II	ISUIATION	1^			11161	IIIai S	ystem	IIISula	11011	00 LI					
Name of Registered Was	ste Hauler		I N	JDEP W	aste	Cubic	Yards		Name of Re	egistered I	Landfill				
Jimmy Burne Trucki			H	auler ID 9551		of Wa			Minerva						
City, State Bronx, NY							sal Date 3/2015		City, State Waynesh	ourg, OH	1				
Completed by Slobodan Panic		Title Projec	t Ma	nager		3	Signature	5.7	Ini s	/	Da 07	te /05/2	2015		



Date of Notification (1) 07/05/2015					f Building (e Townsh			(2)	a			_			
	Type Notification			Street A 50 Nel	ddress llis Drive					JUL		D .			1
DEP DOL	☐ Initial ☐ Amended ☐ Amendment				ate, Zip Coo e NJ 074					8/1					
X DOH X DCA	Emergency (i justification) Cancellation	ncluding			Contact vin Joy					Tolonhan	. N	^-			
				2.00	LITY INFO	RMATI	ON					_			
Name of Facility Where A Theunis Dey Elemen		Place (3))					-	of Facility (4) School (K-12)						
Street Address 55 Webster Drive	=							H	Subchapter 8 Other (i.e. private.)			build	lings,	home	es,
City (5) Wayne									e Feet	# of Floors	S	B 6	idg. A 0	ge	
County (6) Passaic				County (Code (7) USE ONLY)			Currer	nt Use (Prior ool	if being den	nolishe	d)			
Name of Monitoring Firm McCabe Environmen		wner (8)	L	ASCN 0011				of Abat n Inc.	ement Contr	actor (9)					
Street Address 464 Valleybrook Ave	enue							Addres		144					
City, State, Zip Code Lyndhurst NJ 07071					*******			tate, Zi	p Code J 07005	ON I DATE OF THE PARTY.					
Project Manager for Monit Ralph Coppola	oring Firm			Telepho (201) 4	ne No. 138 4839)	2000	none No) 299 4		Licer 0108	ise No. 31				
Start Date (10) 07/01/2015		Schedule		npletion	Date (11)			of OSH	IA Monitor ceski						
Occupancy Status During	Abatement (Check	Only On	e)					Addres							
Facility Closed/Vacat	25	1980		ent			91 F	ulton S	Street						
Abatement Performe Other – Describe: Si	d Outside of Norm	al Facility				_		tate, Zip nton N	p Code J 07005						
Scope of Work (Check All	That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emolit	500000			×	Min Glo	Containmen i-Enclosure vebag Proce	dure					
		1						1 Nor	n-Exempted (*) and Non-	Friable	100	200	e ement	
		277.07	Locati ormal										Ту		
Location Asbestos-Containing N		Used	d Sole	ly by	Ashest	Des os-Cont	scription aining_N		(ACM)	Amount				m	
TO BE ABA In Facilit (13)	TED	Custo	ntenar odial S (12)	Staff?		thermal surfac		s insula T, or		(Specify SF or LF		Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A					,.	005.05					
Boiler Breeching Boiler Insul		X		ļ		mal Sy				225 SF		x			
			Ther	mal Sy		CONTRACTOR OF	luon	300 SF		х					
Chimney Access D	oor Package				Misc	ellane	ous		3 SF	-	X				
Name of Registered Wast	e Hauler		IN	JDEP W	/aste	Cubic '	Yards		Name of Re	egistered La	ndfill	9)	- 6		
Jimmy Burne Truckin		auler ID 19551	No.	of Was	ste		Minerva I	Enterprise							
City, State Bronx, NY						Dispos 07/13	al Date /2015		City, State Waynesb	ourg, OH					
Completed by Slobodan Panic		Title Proje	ct Ma	nager		S	ignature	F	mil	č	Date 07/0		015		

Ite of Notification

				(2)	J	JL	0 20	15	
			5						
uding	Name o	of Contact			Telephone	Numbe	Г		
			ION						
ace (3)	170	ILIT IN ORDA							
				Subchapter Other (i.e. p	8 (Other than	K-12) nercial b	uildings	s, hom	es,
				Square Feet	# of Floors		110000000000000000000000000000000000000		
ier (8)	ASC	M No.				ces. Inc	G.		
			Street A	Address					
			City, Sta	ate, Zip Code					
	Telepho	ne No.	Telepho	ne No.	Licens				
	mpletion	Date (11)	Name o	f OSHA Monitor					
					ental Servic	es, inc	<i>.</i> .		
d of Abater	nent		135 Ki	innelon Rd., S	uite 102				
acility Hour	S 				5				
			×	Mini-Enclosure Glovebag Proce	edure			re	
Is Locati	ion						247 U. L. 728	2010/10/07	
Normal	lly	Des	scription-o	f			Ty	/pe	
Maintena	nce/	Asbestos Cont (i.e. thermal surface	aining Ma systems i cing, VAT,	terial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsula	Enclosure
es No								e	
_	X		There is a second of		Unknown	X	-		
		Burnt C	out Struc	oture			+		-
	IDED W		V 1						
H	auler ID I	No. of Was		Variation of the section of		dfill			
		1,000,000							_
		Dispos	al Date	City, State					
		7/10/1		Morrisvill	e, PA				
	er (8) neduled Cool 0/15 nly One) d of Abater acility Hound Is Locat Normal Used Sole Maintena Custodial S (12) Yes No	Rona Street / 6 Cor City, St Mend Name of Philip FAC ace (3) County (STATE er (8) ASCI Telepho Independent acility Hours Renovation Demolition Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12) (es No N/A NJDEP W.	Ronald & Lila Ida Be Street Address 6 Corey Lane City, State, Zip Code Mendham, NJ 0794 Name of Contact Phillip Del Guidice FACILITY INFORMAT ace (3) County Code (7) (STATE USE ONLY) er (8) ASCM No. Telephone No. Inequiled Completion Date (11) 10/15 Inly One) Ind of Abatement acility Hours Renovation Demolition Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Asbestos Cont (i.e. thermal surfac other in NJDEP Waste Hauler ID No. NJDEP Waste Hauler ID No. Of Waste	Ronald & Lila Ida Bernstein Street Address 6 Corey Lane City, State, Zip Code Mendham, NJ 07945 Name of Contact Phillip Del Guidice FACILITY INFORMATION ace (3) County Code (7) (STATE USE ONLY) er (8) ASCM No. Name of Yannu Street A 135 K City, State, Zip Code Mendham, NJ 07945 Name of Contact Phillip Del Guidice FACILITY INFORMATION Street A 135 K City, State, Zip Code Yannu Street A 135 K City, State, Zip Code Yannu Street A 135 K City, State, Zip Code Yannu Street A 135 K City, State, Zip Code Yannu Street A 135 K City, State, Zip Code Yannu Street A 135 K City, State, Zip Code Yannu Street A 135 K City, State, Zip Code Yannu Street A 135 K City, State, Zip Code Yannu Street A 135 K City, State, Zip Code Yannu Street A 135 K City, State Kinnel Asbestos Containing Ma (i.e. thermal systems i surfacing, VAT, other miscellane Asbestos Containing Ma (i.e. thermal systems i surfacing, VAT, other miscellane NJDEP Waste Hauler ID No. NJDEP Waste Hauler ID No. NJDEP Waste Hauler ID No. Of Waste	Street Address 6 Corey Lane City, State, Zip Code Mendham, NJ 07945 Name of Contact Philip Del Guidice FACILITY INFORMATION ace (3) County Code (7) Square Feet 3,000 County Code (7) State Address 135 Kinnelon Rd., Schonled Kinnelon, NJ 07405 Telephone No. Telephone No. 908-218-0880 Telephone No. Street Address 135 Kinnelon Rd., S City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Street Address 135 Kinnelon Rd., S City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Street Address 135 Kinnelon Rd., S City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Street Address 135 Kinnelon Rd., S City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Street Address 135 Kinnelon Rd., S City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Street Address 135 Kinnelon Rd., S City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Street Address 135 Kinnelon Rd., S City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Street Address 135 Kinnelon Rd., S City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Street Address 135 Kinnelon Rd., S City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Street Address 135 Kinnelon Rd., S City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Street Address 135 Kinnelon Rd., S City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Street Address 135 Kinnelon Rd., S City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Street Address 135 Kinnelon Rd., S City, State, Zip Code Kinn	Ronald & Lila Ida Bernstein Street Address 6 Corey Lane City, State, Zip Code Mendham, NJ 07945 Name of Contact Philip Del Guidice FACILITY INFORMATION ace (3) Type of Facility (4) School (K-12) Subchapter 8 (Other than Other (i.e. private & commetch) etc.) Square Feet 3,000 Square Feet 4 of Floors 3,000 Current Use (Prior if being dem Burnt Out Abandoned St etc.) Street Address 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Telephone No. 908-218-0880 0122 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Street Address 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. 908-218-0880 0122 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. 908-218-0880 0122 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. 908-218-0880 0122 Street Address 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Street Address 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Street Address 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Street Address 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Street Address 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Street Address 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405	Ronald & Lila Ida Bernstein Street Address 6 Corey Lane City, State, Zip Code Mendham, NJ 07945 Name of Contact Philip Del Guidice FACILITY INFORMATION ace (3) Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) County Code (7) (STATE USE ONLY) Prainuzzi Environmental Services, Inc. Street Address 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Street Address 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Telephone No. Telephone No. Street Address 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Street Address 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Telephone No. Telephone No. Street Address 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Street Address 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Renovation Telephone No. Street Address 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Street Address 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Street Address 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Street Address 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. Street Address 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405	Ronald & Lila Ida Bernstein Street Address 6 Corey Lane City, State, Zip Code Mendham, NJ 07945 Name of Contact Philip Del Guidice FACILITY INFORMATION ace (3) County Code (7) Strate Zip Code Mendham, NJ 07945 Rame of Contact Philip Del Guidice FACILITY INFORMATION ace (3) County Code (7) Strate Use ONL') Burnt Out Abandoned Structure er (8) ASCM No. Name of Abatement Contractor (9) Yannuzzi Environmental Services, Inc. Street Address 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. 908-218-0880 01228 Debut Completion Date (11) Name of OSHA Monitor Yannuzzi Environmental Services, Inc. Street Address 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. 135 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. 136 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. 136 Kinnelon Rd., Suite 102 City, State, Zip Code Kinnelon, NJ 07405 Telephone No. 137 Manuer Rd., Suite 102 City, State, Zip Code Kinnelon Rd., Suite 102 Ci	Ronald & Lila Ida Bernstein Street Address 6 Corey Lane City, State, Zip Code Mendham, NJ 07945



Date of Notification (1) 7/1/15		100			Building C Bridgeto		perator	(2)			1	-	0.001			
Agencies Notified	Type Notification			Street Ac							1111		441			
☐ EPA	× Initial			181 Ea	st Com	merce	St.									
DEP	Amended				e, Zip Co											
▼ DOL	Amendment Emergency				ton, NJ	08302	-00			T = .						
DOH	justification) Cancellation	1070	21.2		Contact Mulford					lel	enhone l	Numbe	er			
☐ DCA	Cancellation	<u> </u>			LITY INFO		ON			_			-			
Name of Facility Where		g Place (3)		,,,,,,,				Тур	e of Facility (4)						
Old Bridgeton Park	Building		101 A						School (K-12							
Street Address	and							×	Subchapter 8 Other (i.e. pr				ouild	ings,	home	es,
20 Mayor Aitken Ro	Jau 		_						etc.) are Feet		Floors			dg. A		
City (5) Bridgeton								2,3		2.5				ug. A 50+	ye	
County (6)				County C	Code (7)				rent Use (Prior	r if bei	ng demo	lished	1)			
Cumberland			1	STATE L	ISE ONLY)		-	Old	Bridgeton	Park	Buildir	ng				
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCM	No.				atement Cont			1.				
									i Environme	ental	Service	es, ir	ıc.			
Street Address							Street 135 I		_{ess} elon Road,	Suite	e 102					
City, State, Zip Code							100000000000000000000000000000000000000		Zip Code							
ony, otato, zip oodo									, NJ 07405	,						
Project Manager for Mor	nitoring Firm			Telephor	ne No.		Teleph				Licens					
									0880		01228	3				
Start Date (10) 7/14/15		Scheduled 7/16/15	Con	pletion [Date (11)				SHA Monitor i Environme	ental	Service	es Ir	nc.			
Occupancy Status Durin	a Abatement (Cher						Street			Ji itai	001110	00, 11	10.			
Facility Closed/Vac				ont					te 206 Sout	h						
Abatement Perform	ned Outside of Norr	nal Facility H	ours	CIIL			City, S	State,	Zip Code					322402		
Other – Describe:						_	Hills	boro	ugh, NJ 08	844						
Scope of Work (Check A	III That Apply)						-	7								
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		-	nova				-	10.00	ull Containme lini-Enclosure	nt with	Negativ	re Pre	ssur	е		
E 100 SI 01 E 200 II		<u> </u>	rione	011			×	G	Slovebag Proce		d Non F	ماطمة	Dese		_	
		T					100	<u> </u>	lon-Exempted	(*) an	a ivon-Fi	паріе		533 67	ment	
			ocati mal	1000.00		- Do	a animatin m	. of						Ту		
Location Asbestos-Containing		Used Maint	Sole	y by		tos Con		Materi	ial (ACM)		mount				Ш	_
TO BE AB In Faci		Custo	dial S		(i.e.		system: cing, VA				Specify For LF)		Remova	Repair	псар	nclo
(13)			(12)				niscellar						oval	oair	Encapsulate	Enclosure
		Yes	No	N/A											le	
Building E	xterior			Х		Tran	site Si	ding		2,9	920 SF		Х			
Name of Registered Wa	ste Hauler		0.00	JDEP W			Yards		Name of F	Registe	ered Lan	dfill				
Yannuzzi Group, Ind			1 1 1 1 1 1 1 1 1	auler ID 7467	No.	of Wa			G.R.O.V	V.S.						
City, State	City, State						sal Date	1	City, State	:			-			
Kinnelon, NJ						7/16/			Morrisvi		Α					
Completed by		Title				3	Signature	е	a Ba	1		Date				
Anna Bastos		Admin	stra	tive As	ssistant		Uh	m	m /Da	20	2	7/1/	15			

Date of Notification (1)				1	lame o	f Building (Owner	/Operator (2	2)		1111		0.01	Ē.	
	2 /	15			Dune	ellen Boa	rd of	Education	1 / 5	Job #1507	-4929 Check	#7345	- 44	Ų.	
Agencies Notified	Type Notification	on		5	Street A	Address									
⊠ EPA	Initial				High	and Leh	igh S	treets							
□ DOLWD	☐ Amended			1	City, St	ate, Zip Co	de								
□ DHSS	Amendmen	and the second	-		Dune	ellen, NJ	0881	2							
☐ DCA	☐ Emergency		ng	1		of Contact					Telephone Nun	ber			
(NJAC 5:23-8)	justification Cancellation			1		n DeLuci	а			1					
					FAC	ILITY INF	ORM	IATION							
Name of Facility Where A	Abatement is Tal	king Plac	ce (3)						Туре	of Facility (4	1)				
Dunellen High Scho										hool (K-12)		0)			
Street Address									Su	bchapter 8 her (i.e. pri	(Other than K-1 vate and comme	4) ercial bu	ildino	S.	
411 1 st Street										mes, etc.)	70.0 0.110				
City (5)									Squar	e Feet	# of Floors	BI	dg. A	ge	
Dunellen									81,8	881	2		85		
County (6)					Count	y Code (7)	(STATE	USE ONLY)	Currer	nt Use (Prid	or if being demo	ished)			
Middlesex									Hig	h School			Д.		
Name of Monitoring Firm	Hired by Buildir	ng Owne	r (8)	A	SCM N	No.	Name	of Abateme	ent Con	tractor (9)					
Environmental Cor					0003	0	Ab	ateTech, li	nc.						
Street Address	median, ma.						Stree	t Address							
120 North Warren S	St						30	Maple Ave	e. PO E	Box 25					
City, State, Zip Code	J						City,	State, Zip Co	ode						
Trenton, NJ 08608							Lu	mberton, N	NJ 080)48					
Project Manager for Mon	nitoring Firm		Te	elep	hone h	No.	Telep	hone No.			License No.				
Dominick Dercole				60	9-462-	3218	609	9-265-2107	7		00529				
Start Date (10)	9553	heduled						e of OSHA N							
7 / 16 /	15		/ _	16	_ / _	15	EN	ISL Analyt	tical						
Occupancy Status Durin	g Abatement (C	heck onl	y one)					t Address							
☐ Facility Closed/Vacat	ed During Entire	Period	of Aba	ten	nent			0 Route 13		th					
Abatement Performer	d Outside of Nor AM	mal Fac PM/	ility Ho	M	s - Des	AM		State, Zip C nnaminsor		08077					
Scope of Work (Check a	ill that apply)														
			Renov	otio	an.			☐ Full Con	itainme closure	nt with Neg	ative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			Demo					⊠ Gloveha	a Proc	edure	= : B				
		50000						☐ Non-Exe	empted	(*) and No	n-Friable Proced				
			Is Lo						2			-		nent T	T
Location		1	Non Ised S			Acho		Description on ontaining Ma		(ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
Asbestos-Containing TO BE AB			Mainte			(i.e	., then	mal systems	insulat	tion,	(Specify	Non	air	aps	losi
IN Faci		С	ustodi		Staff?		su	rfacing, VAT	Γ, or	**	SF or LF)	<u>a</u>		ula	le le
(13)		Ye		(2) No	N/A		othe	er miscellane	eous)					е	
(3) Locations in Kito	hen			_		Pipe/Fit	ttina I	Insulation			9 LF				
(3) Locations in Kito	ilell														
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			L											1	T
]			16:	36 1 7	1.41	ma of D = =1	stored Landfill				
Name of Registered Wa	ste Hauler	2)		1	JDEP \ lauler II		Cubi	c Yards of te	1270-200-30		stered Landfill				
AbateTech, Inc.			- 25	1	18750		1				, Lanum			7.4.7.1	
City, State								osal Date		y, State ullytown	ΡΔ				
Lumberton, NJ							11	16/15	1	unytown		Deta	1	1	
Completed By (Print or	Type)	Title			_			Signature		1		Date	12	15	
Gwen Trumbetti	2	Ope	ratior	ıs (Coord	inator		N	W	/		1	1	1	1

ASB-41 MAY 11



∂&S Proj. #: 2015-226

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

Date of Notification			lame of B	uilding Owr	ner/Operator (2	2)			JU		1015			
Agencies Notified		ion L		TEN BR	OECK				0.0	le-				
Agencies Notined	Type Notificat Initial	ion S	treet Add	ress										
☐ DEP	Amended		1307 W	ALNUT A	AVENUE									
_	Amendment #:	0	ity, State,	Zip Code										
DOL DOL	Emergency		OCEA!	N, NJ 07	712									
☑ DOH	(including justification)	N.	ame of Co	ontact					Telepho	ne Numbe	er			_
☐ DCA	Cancellation	- 11	FRAN	K TEN BE	ROECK									
				FAC	ILITY INFORM	MATION	1							
Name of facility wi	here abatement i	s taking pla	ace (3)					T	Type of Facility					
FRANK TEN I	BROECK								=	ol (K - 12) hapter 8 (0		han K	-12)	
Street Address								٦	☑ Other	(Private/C	Comme			
1307 WALNU	TAVENDE									./Homes, e		R	dg. A	70
City (5)	TAVENOE	I Cour	nty (6)			I Cou	inty Code (7)	-	Square Feet	# 01 1100	ns	Ь	uy. A	ye
Only (O)		000.	, (0)				ite use only)		Current Use (F	Prior if beir	na dem	olish	ed)	
OCEAN		MO	NMOU"	ГН			***		Canoni coo (i		.9		/	
Name of Monitorin	ng Firm Hired by	Bldg. Owne	er (8)		ASCM No.	-	Name of Abateme	ent C	Contractor (9)					
							D & S RESTO	DRA	TION, INC.					
Street Address							Street Address							
							20 California	Av	e.					
City, State, Zip Coo	le						City, State, Zip Co	de						
							Paterson, NJ	075	503					
Project Manager fo	r Monitoring Firm	1	P	hone Numb	per		Telephone Number			License				
							973-345-802)1169			
Start Date (10)		Sched	. Comple	tion Date (1	1)		Name of OSHA M							
07/13/15		07/31	/15				D & S Restor	ratic	on, inc.					
Occupancy Status	During Abatemer				and the second second		20 California	Δνε	enue					
	d/vacated during	22		ement.			City, State, Zip Co	_	chuc			_		
Abatement per Describe:	erformed outside	of normal	facility ho	urs-			, , , , ,							
Other-Descri	be: NORMAL H	IOURS				_	Paterson, NJ	075	503					
Scope of Work (ch	and the second s							TF	ull Containment	w/negative	e press	ure		
\boxtimes >3 sf or >3 lf	\boxtimes	Renovatio	n				Ĭ		/lini-enclosure		62			
≥160 sf or ≥2		Demolition	1				<u> </u>		alovebag procedu					
		Is location	normally	used solel	vl			<u> </u>	Non-Exempted (*) and Non	-mable	R	E	
Location of asbestos-cor	ntaining	by mainte			1	ion of a	sbestos-containing	1	Amount		e	е	n	E n
material (acn		staff(12)			material		obootoo oomaniing	,	(Specify	SF or	m o	a	c a	c
abated in fac	шку (тэ)	Yes	No	N/A					LF)		v e	i	p	L
basement			X	7	PIPE INSU	ЛАТ	ION		100 L FT	-	ă	h		I
	The state of the s				1						市		Ī	愩
			-				THE RESIDENCE OF THE PARTY OF T							
								-						
Registered Waste F			P Hauler	ID#	Cubic Yards of	Waste	Name of Register	red I	Landfill					
D & S RESTOR	ATION, INC.	135	06		1 yd.		THE RESIDENCE OF THE PARTY OF T	N, I	RESOURCE R	ECOVE	RY		and the same of	management.
City, State PATERSON, N	II 07502			Disposal 07/14/1			City, State	/NT -	D.A.					
Completed by (Prin		Tial -		. 0//14/1	Signature		TULLYTOW	/ IN , .	rA	Data				
BOGDAN JOL		Title PRESID	ENT		Oignature					Date 06/30	/15			
ASB-41				n for asbest	os licensure ex	kempte	d activities.							

C/LW60st

D&S Proj. #: 2015-227

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

								.1111	~			
Date of Notification (1)	Name of E	Building Own	er/Operator (2)							-110		
10 6 / 13 0 / 1 5		H. BECK										
Agencies Notified Type Notificat	ion Street Add	ress										
DEP Amended	221 RU	TGERS ST	TREET									
Amendment #:	City, State	, Zip Code										
☑ DOL ☐ Emergency	MAPL	EWOOD, I	NJ 07040									
DOH (including justification)	Name of C	ontact					Telephon	e Numbe	r	7 11	ATT AND DES	ORNICOMOS.
DCA Cancellation	ALAN	H. BECK					_ I					
		FAC	ILITY INFORM	ATION	l							
Name of facility where abatement is	s taking place (3)					T	ype of Facility (4) I (K - 12)	0			
ALAN H. BECK								apter 8 (0		oon V	10\	
Street Address						4		Private/C			-12)	
221 RUTGERS STREET							Bldgs./	Homes, e	etc.		dg. A	90
City (5)	County (6)			Cou	nty Code (7)	41°	Square reet	# 01 1100	15		uy. A	ge
z/ (~/	(o)				te use only)	-	Current Use (Pr	ior if heir	a dem	olish	ed)	
MAPLEWOOD	ESSEX								9		/	
Name of Monitoring Firm Hired by E	Bldg. Owner (8)		ASCM No.		Name of Abateme	ent Cor	ntractor (9)					
					D & S RESTO	RAT	ION, INC.					
Street Address				-	Street Address							
					20 California	Ave.						
City, State, Zip Code					City, State, Zip Co	de						
				_	Paterson, NJ		3					
Project Manager for Monitoring Firm	F	Phone Numb	er		Telephone Number			License		er		
					973-345-802		-		1169			
Start Date (10)	Sched. Comple	tion Date (11	1)		Name of OSHA M D & S Restor		T					
07/10/15	07/30/15				Street Address	ation,	IIIC.					
Occupancy Status During Abatemen	nt (Check only one)	-		_	20 California	Aveni	ne .					
Facility closed/vacated during Abatement performed outside					City, State, Zip Co							
Describe: NORMAL H	OURS			-	Paterson, NJ	07503	3					
Scope of Work (check all that apply					T decision, 143			/n a matili ra	nr	1150		
\boxtimes >3 sf or >3 lf	Renovation				L		Containment wi-enclosure	megalive	press	ure		
	Demolition				Ď	Glo	vebag procedur					
	Is location normally	upod calal	,			X Nor	n-Exempted (*)	and Non-	friable T R	proc		
Location of asbestos-containing	by maintenance/cu				-bt		Amount		е	e	E n	E
material (acm) to be	staff(12)		material (sbestos-containing		(Specify S	For	m	p	С	n
abated in facility (13)	Yes No	N/A					LF)		V	i	a p	L
basement		7	PIPE INSU	ΙΔΤΙ	ON		60 L FT		e	1		\vdash
GARAGE			BARE HEA				50 l ft			+		卄
BOILER/BRICKS			BOILER IN				90 SQ FT		붑	H		十
WAREHOUSE		1	VAT	010			270 SQ FT			H	H	H
							2.00211			H	H	H
Registered Waste Hauler	NJDEP Haule	r ID# C	ubic Yards of V	Vaste	Name of Register	red Lai	ndfill		.[
D & S RESTORATION, INC.	13506		3 YDS		TULLYTOW			COVE	RY			
City, State		Disposal D			City, State							
PATERSON, NJ 07503		07/13/1			TULLYTOW	N, PA	A					
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESIDENT		Signature					Date	115			
	Do not use this form	n for asbesto	s licensure exe	empte	d activities.			06/30/	13		-	

Cleck 14062

Date of Notification (1) 7/6/15				f Building (Pearce	Owner/C	Operator	(2)							-	
Agencies Notified Type Notifica	ion	3	Street A	ddress											
EPA Initial	4		City Sta	to Zin Co	do					_101_		1	015		
DEP Amende X DOL Amendm Emerger	nent #	_	oity, Sta	ite, Zip Co	oe										
DOH justificat Cancella		11		f Contact Pearch					Tele	nhono A	lumb	or			
			FACI	LITY INFO	RMAT	ION			-						
Name of Facility Where Abatement is T house	aking Place (3)							of Facility (4 School (K-12							
Street Address 265 Diamond Hill Road		*					×	Subchapter 8 Other (i.e. pr etc.)	(Othe			build	lings,	home	es,
City (5) Berkeley Heights								re Feet	# of	Floors		5:	ldg. A 9	ge	
County (6) Union				Code (7) USE ONLY)	V		Curre	nt Use (Prior	r if beir	ng demo	lished	i)			
Name of Monitoring Firm Hired by Build	ing Owner (8)		ASCN	No.				tement Cont onmental			_C				
Street Address			-				Addres Box 48	ss 33, 4 E Ga	ate Dr	rive					
City, State, Zip Code								ip Code NJ 07418	}						
Project Manager for Monitoring Firm			Telepho	ne No.			none N 764-2			License 703	No.				
Start Date (10) 7/9/15	Scheduled	l Com	pletion l	Date (11)		Name	of OSI	HA Monitor							
Occupancy Status During Abatement (C	Check Only One)				Street	Addres	SS							
Facility Closed/Vacated During En Abatement Performed Outside of N Other – Describe:						City, S	state, Z	ip Code							
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	and the same of th	novat				×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
	ls L	ocatio	on						. /				Abate	ement	
Location of	No	ormally	у			scription							Ту	pe	
Asbestos-Containing Material (ACM TO BE ABATED In Facility (13)	Main Custo	Solel tenan dial S (12)	ice/		thermal surfa	taining N systems cing, VA miscellar	s insula T, or		(S	mount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
basement	140			nino	insula	tion		6	0 LF		_		100		
basement			X		pipe	Ilisula	uon		0	U LF	>				
Name of Registered Waste Hauler		N	JDEP W	/aste	Cubic	Yards		Name of R	egiste	red Land	ffill		¥\		
Freehold Cartage		Ha	auler ID 939		of Wa		ds Name of Registered Landfill Western Berks Landfill								
City, State Freehold NJ	-			Dispo TBD	sal Date		City, State Birdsbor		\		-85-500				
Completed by A. Scott Higgins	Title Presid	ent			8	Signature	a				Date 7/6/	15			

			(Pu	ırsuant	to NJAC 8	8:60 and	12:120	0)	$ \wedge$	I	\L	14	()	آيل	3	
Date of Notification (1) 7/6/15				Name of Jason	Building (Chen	Owner/O	perator	(2)								
Agencies Notified	Type Notification			Street A	ddress Ioldings	Group	, LLC			- 4			e.			
EPA DEP X DOL	Initial Amended Amendment				te, Zip Co											
□ DOH DCA	Emergency (i justification) Cancellation	ncluding		Name of Jason	Contact Chen					Tel	ephone Nun	nber	-			
				FACI	LITY INFO	ORMATI	ON									
Name of Facility Where a	Abatement is Taking	Place (3)						Тур	e of Facility (School (K-1	2)		13				
Street Address 2771 Kennedy Bou	levard					11		×	Other (i.e. petc.)	orivate 8	er than K-12 & commercia	al build			es,	
City (5) Jersey City								210	are Feet 00	# 0	f Floors		ldg. A 3	ge		
County (6) Morris					Code (7) JSE ONLY)	W		Cur	rent Use (Pri	or if bei	ng demolish	ed)				
Name of Monitoring Firm	Hired by Building C	wner (8)		ASCN	1 No.				atement Cor ironmenta							
Street Address							Street PO E		ess 483, 4 E G	ate D	rive					
City, State, Zip Code									Zip Code d NJ 0741	8						
Project Manager for Mon	nitoring Firm		1	Telepho	ne No.		Telepi 973-		No. 2276		License No.	D.				
Start Date (10) 7/15/15		Schedule 7/22/15		pletion (Date (11)		Name	of OS	SHA Monitor	8						
Occupancy Status Durin	g Abatement (Check	Only On	e)				Street	Addr	ess	-						
	ated During Entire P led Outside of Norm						City, S	State,	Zip Code							
Scope of Work (Check A							PC PC	7	200							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emoliti					F N G	ULAP ≪ Cu ull Containme lini-Enclosure llovebag Prod	ent with e cedure						
								_ N	on-Exempted	a (*) an	d Non-Friab	le Pro	Cedur Abate		4	
1 11		777797	Location	60000									Ту			
Asbestos-Containing TO BE AB. In Facil (13)	Material (ACM) ATED lity	Used Mai	Solel ntenar odial S (12)	y by nce/		tos Cont thermal	system cing, VA	Materi s insu AT, or		(8	mount Specify or LF)	Remova	Repair	Encapsulate	Enclosure	
		Yes	No	N/A										ite	Ф	
basem	ent			X		pipe	insula	tion		24	45 LF	x				

Name of Registered Was Freehold Cartage	ste Hauler		Н	JDEP W auler ID 5939		Cubic of Was TBD			Careeron Co		ered Landfill ks Landfill					
City, State Freehold NJ	1000						al Date		City, Stat		Ą					
Completed by		Title				S	ignature	e 1			Da	Date				

President

A. Scott Higgins

7/6/15

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

		(Pi	ursuant	to NJAC	8:60 and	12:120))		ock		14	0	05	0
Date of Notification (1) 7/6/15				f Building omas Cl		perator	(2)				-	2015	-(
Agencies Notified Type Notification			Street A	ddress rd Avenu	Ie.									
EPA Initial Amended		-	City, Sta	ate, Zip Co	ode									
X DOL Amendment Emergency		-		ifield, NJ	J 07003	3								
➤ DOH justification) DCA Cancellation	12 9551		Jim	f Contact					Telenhor	na Niin	nhor			
NI	DI (FACI	ILITY INFO	ORMATIC	ON	-		0					
Name of Facility Where Abatement is Takir St. Thomas Church - Garage	ig Place (3)					-	of Facility (4 School (K-1)						
Street Address								Subchapter	8 (Other tha	in K-12	2)	dia	h	
60 Byrd Avenue							- 6	etc.)	rivate & com			180		es,
City (5) Bloomfield					48		1800		# of Floo		6	ildg. A	\ge	
County (6) Essex				Code (7) USE ONLY,)	_	Curre	nt Use (Pric	or if being de	emolish	ied)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASCN	И No.				tement Con onmental	tractor (9) Services	, LLC				
Street Address							Addres	ss 33, 4 E G	ate Drive		20 = 1			
City, State, Zip Code								p Code NJ 0741	8					
Project Manager for Monitoring Firm		T	Telepho	ne No.		Teleph	none No 764-2	o.		ense N	0.		- Cells	
Start Date (10) 7/17/15	Schedul 7/29/1		npletion	Date (11)		12000000		A Monitor		-				
Occupancy Status During Abatement (Chec		_				Street	Addres	SS						
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	Period of	Abatem	nent			City, S	tate, Zi	p Code						
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	CONTRACT OF STREET	Renova Demolit				×	Min Glo	i-Enclosure vebag Proc					e	
Location of		Locati Normal			Dos	orintian						Abate	ement pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma Cus	ed Sole intenar todial S (12)	nce/ Staff?		tos Conta thermal surfac	Description of os Containing Material (ACM) thermal systems insulation, surfacing, VAT, or other miscellaneous) Amount (Specify SF or LF			y	Removal	Repair	Encapsulate	Enclosure	
	Yes	No	N/A				0		1015				(D)	
garage	-		X		pipe	insula	tion		18 LF	•	Х			
Name of Registered Waste Hauler Freehold Cartage		. Н	JDEP W auler ID 5939		Cubic \ of Was				Registered L n Berks La					
City, State Freehold NJ		11			The state of	al Date		City, State						
Completed by A. Scott Higgins	Title Presi	ident			Mestalisto .	ignature	/5	1		Da 7/6	te 3/15			

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	0	100	6/	10	10	1 <
	1	W.	IL			V

Date of Notification (1)				f Building		r/Operator emy	(2)		<u> </u>						
Agencies Notified Type Notification			Street A	ddress airmont	Aver	iue		(JUL	0	2015				
DEP Amended Amendment				ate, Zip Co / City, N							10				
			Name o Sara	f Contact					Tel	enhone	Num	ner			
			FACI	LITY INFO	ORMA	TION						-	-		
Name of Facility Where Abatement is Takin St. Dominick's Academy	g Place (3)						Туре	e of Facility (4							
Street Address 375 Fairmont Avenue							×	School (K-12 Subchapter of Other (i.e. pr	8 (Oth				dings,	home	es,
City (5)								etc.) are Feet	# 0	f Floors		IB	ldg. A	ne	
Jersey City							100		2	1110013		100000	0	ige	
County (6) Hudson				Code (7) USE ONLY)	_		Curr	ent Use (Prio	r if bei	ing dem	olishe	d)			
Name of Monitoring Firm Hired by Building (Owner (8)		ASCN	ΛNo.				atement Cont ironmental			LC				
Street Address						Street PO E		ess -83, 4 E Ga	ate D	rive					
City, State, Zip Code	-					City, S	tate, 2	Zip Code d, NJ 0741							
Project Manager for Monitoring Firm		T	Telepho	ne No.		Teleph 973-	one N	10.		Licens	se No.	23			
Start Date (10)	Scheduled	Com	pletion	Date (11)				HA Monitor							
7 - 7 - (5 Occupancy Status During Abatement (Chec		1				Street	Addro	100				_			
Facility Closed/Vacated During Entire F			ent			Street	Addie	:55							
Abatement Performed Outside of Norm Other – Describe:	al Facility I	Hours				City, S	tate, Z	Zip Code							
Scope of Work (Check All That Apply)			***************************************												
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	personal Control of the Control of t	novat moliti				×	Glovebag Flocedule								
	T						1 No	n-Exempted	(*) an	d Non-F	riable		N-200		_
Location of	No	ocation rmall	у		г	Description	of							ment pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Custo	tenar	ice/		os Co therm sur	ntaining M	ion of					Encapsulate	Enclosure		
	Yes	No	N/A									_		ate	œ.
See attached listing			Х		se	e attach	ed					ζ			
							-		-						
Name of Registered Waste Hauler															
Freehold Cartage		Ha	JDEP W auler ID 1939			ic Yards /aste		Name of R Western							
City, State Freehold, NJ	201 AP 10 CONTROL						city, State Birdsboro, PA 19508								
Completed by	Title				TBD	Signature			-, , ,		Date				
A. Scott Higgins	Preside	ent					De	~	N.				6-	15	

DETAIL ASSOCIATES, INC.

ENVIRONMENTAL ENGINEERING CONSULTANTS

JUL 2 2015

July 6, 2015

ASBESTOS ABATEMENT PROJECT

St. Dominic's Academy 375 Fairmont Ave, Jersey City, New Jersey

LOCATION	TYPE OF ACM	FOOTAGE	SCOPE OF WORK
Basement- Storage Slop Sink Room	Pipe Insulation	Approximately 20 LF and removal of contaminated contents	Tent & Glovebag removal, Cleanup of floor debris – NJ and federal asbestos regulations
Basement Storage Area- Back Room	Pipe Insulation	Approximately 32 If and removal of contaminated contents	Tent & Glovebag removal, Cleanup of floor debris – NJ and federal asbestos regulations
Basement	Pipe	Approximately	Tent & Glovebag removal, Cleanup of floor debris – NJ and federal asbestos regulations
Boiler Room	Insulation	50 lf	
Basement	Pipe	Approximately	Tent & Glovebag removal, Cleanup of floor debris – NJ and federal asbestos regulations
Storage Area -Middle	Insulation	11 lf	
Basement	Pipe	Approximately	Tent & Glovebag removal,- NJ and federal asbestos regulations
Center Area	Insulation	12 LF	
Basement	Pipe	Approximately	Tent & Glovebag removal,- NJ and federal asbestos regulations
Men's Room	Insulation	6 If	

Basement Rooms North & South of Kitchen	Pipe Insulation	Approximately 30lf	Tent & Glovebag removal, – NJ and federal asbestos regulations
Basement Hallway front of Kitchen	Pipe Insulation	Approximately 4 If	Tent & Glovebag removal, – NJ and federal asbestos regulations

JUL 8 2015



Date of Notification (1) 07/06/2015			Name of Building Owner/Operator (2) McAllister Towing of Philadelphia Street Address															
Agencies Notified	Type Notification				Address th King S	Street								0.1000				
EPA DEP DOL	Initial Amended Amendment		_		ate, Zip Cod ester, NJ		30											
▼ DOH DCA	ighter the second partial desired partial desi				of Contact ge Doms		7.	O	Τ	elephone	Num	ber						
				FAC	ILITY INFO	RMAT												
Name of Facility Where Camden Docks	Abatement is Takin	g Place (3)					Sch	Facility (4) ool (K-12)									
Street Address 2500 Broadway									chapter 8 (O er (i.e. private)				dings,	home	es,			
City (5) Camden								Square F 2000		of Floors	0		ldg. A	ge				
County (6) Camden					Code (7) USE ONLY)		53.3	Current L Tug Bo	Jse (Prior if b at	eing dem	olish	ed)		-11				
Name of Monitoring Firm AET, Inc.	Hired by Building	Owner (8)		ASCN 107	M No.			of Abatem ervices,	ent Contract LLC.	or (9)								
Street Address 28 Pennel Road					10		Street A		In Highwa	v Suite	500							
City, State, Zip Code Media, PA 19603							City, Sta	ate, Zip C	ode	í .								
Project Manager for Mon Dave Turotsy	itoring Firm		- 1	Telepho	ne No. 91-0114		Telepho	· Communication		Licen 0116),						
Start Date (10) 06/29/2015	2	Schedule	d Con		Date (11)			f OSHA N										
Occupancy Status During	Abatement (Chec	325 1127 (31.2)					Street A				ilium in							
➤ Facility Closed/Vac		20	35	. ont			100000000000000000000000000000000000000		0 North									
Abatement Perform Other – Describe:	ed Outside of Norm	nal Facility	Hours	5	7/19	_		ate, Zip C minson,	ode NJ 08077									
Scope of Work (Check A	li That Apply)			,														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		process .	enova emolit				×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure										
		lo.	Lanati				-	IVOII-L2	kempted () e	ilid (VOIT)	Habi		1262	ement				
Location	of	N	Locati Iormal	ly		Do	scription	of					Ту	ре				
Asbestos-Containing TO BE AB/ In Facili (13)	d Sole ntenar odial S (12)	nce/ Staff?		os Con hermal surfa	taining Ma systems cing, VAT miscellane	aterial (AC insulation , or	١,	Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure					
Calla		Yes	No	N/A			TOL			24015		17						
Galley		X		T 1	TSI			210 LF		X								
Galley	S	-		X		(0)(700)(1)(1)	Insulat			250 SF		X						
Below D	eck 	+		X	D	uctwo	ork Insul	lation		550 SF	-	X						
Name of Registered Was	te Hauler		N	JDEP W	/aste	Cubic	Yards	Na	ame of Regis	tered Lai	ndfill							
ecoservices, LLC		auler ID 3-0127		of Wa 20	ste	G	rows (A V	/M Land	dfill)									
City, State Exton, PA			Disposal Date City, State TBD Morrisville, PA															
Completed by Joe White		Title Assist	ant F	Project	Manager			ull	1/2		Signature Date 07/06/2015							

Date of Notification (1) 7/1/15	·			Name of J&J Er	Building (Owner/O ental	perator		UL -8	SM S	: 28					1		
Agencies Notified EPA	Type Notification X Initial			Street Ad PO Bo	x 67		ji	53 <u>E</u>	81034	ς f∖ [.k3r	700-0						
DEP X DOL	Amended Amendment # Emergency (i				te, Zip Co alls, NJ		1	Ġ	LICEN	पासि है								
DOH DCA	justification) Cancellation	ricidaling	1088	Name of Jim Ur	Contact nger					Tele	ephone i	Numb						
				FACI	LITY INFO	RMATI	ON											
Name of Facility Where house Street Address	Abatement is Taking	Place (3)							of Facility (4 School (K-12)	41 14	(40)						
50 Ridge Avenue								×	Subchapter 8 Other (i.e. pri etc.)	ivate 8	comme					es,		
City (5) Passaic								Squar 2000	e Feet	# of 2	Floors		6:	ldg. A 2	ge			
County (6) Passaic	=	Si .			Code (7) JSE ONLY)			Curre	nt Use (Prior	if beir	ng demo	lishe	1)					
Name of Monitoring Firm	n Hired by Building C	wner (8)		ASCN	No.				ement Cont onmental			LC						
Street Address								Addres Box 48	s 33, 4 E Ga	ite Dr	rive							
City, State, Zip Code									p Code NJ 0741	8					0821-2			
Project Manager for Mor	nitoring Firm			Telephor	ne No.			none No 764-2			License 703	e No.				(9		
Start Date (10) 7/12/15		Scheduled 7/20/15	Com	pletion (Date (11)		Name	of OSH	IA Monitor	*								
Occupancy Status Durin	g Abatement (Check	Only One)				Street	Addres	S						-			
	ated During Entire P ned Outside of Norm																	
Scope of Work (Check A	II That Apply)		755						V. 13									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ш ттат друу)	-		ovation					Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
		le l	ocatio							, ,		T		100 at 110 100 to	ment			
Location	o of		rmall			Des	scription	of						Ту	ре			
Asbestos-Containing <u>TO BE AB.</u> In Facil	Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)					tos Cont thermal surfac	aining N	Material s insula T, or		(S	mount specify or LF)		Removal	Repair	Encapsulate	Enclosure		
living ro	Yes	No	N/A		nino	inquila	tion			115	-	_		_	-			
living ro			X		pipe	insula	tion) LF		¢						
Name of Registered Was	ste Hauler	1	N.	JDEP W	/aste	Cubic	Yards		Name of R	egiste	red Land	dfill						
Freehold Cartage				auler ID 5939	No.	of Was	200		Western	. J								
City, State Freehold NJ						Dispos TBD	al Date		City, State Birdsbor	o, PA	4							
Completed by A. Scott Higgins		Title Presid	ent/0	Owner		S	ignature	A				Date 7/1/						

Check#11857

Date of Notification (1)					Name	of Buildin	g Ow	ner/Operator (2)	1 WHOTE	TIE		/	
07/	02 /	15	_		PR	INCETON	I PL	ASMA PHYS	SICS LABOR	1160 FUL -8 A	₩ Q.	co.		
Agencies Notified EPA	Type Notifica	ation						TOR ROAD		SOFSTrain				
⊠ DOLWD	Amended	F 200 000			City,	State, Zip 0	Code			& LICENSI	NO R	OL.	1100	
☑ DOH ☑ DCA	Amendm		cluding	1	PR	INCETON	l, N.	08540		02113:1	NG			
(NJAC 5:23-8)	justificati	on)	Juanie		Name	of Contac	t			Telephone Nur	nber		-	
	☐ Cancellat	ion			AN	DY KONG	CA			1				
					FA	CILITY IN	IFOR	RMATION						
Name of Facility Where A									Type of Facility					
PRINCETON PLASI	MA PHYSIC	S LAI	BORA	OTA	RY				School (K-	12) r 8 (Other than K-1	2)			
Street Address 100 STELLARATOR	ROAD									private and comm		uildin	js,	
City (5)									Square Feet	# of Floors	В	ldg. A	ge	
PRINCETON									12,000	2		50		
County (6)					Cou	nty Code (7)(STA	TE USE ONLY)	Current Use (F	Prior if being demo	lished)			
MERCER									ELECTRIC	AL LAB				
Name of Monitoring Firm	- T.	ding O	wner ((8)	ASCM	No.	1 74		ent Contractor (
BRIGGS ASSOCIAT	ES						F	PLYNMOUTH	ENVIRONM	ENTAL				
Street Address							50000	eet Address						
3 CROSSWICKS ST	REET							23 HAWS A				194-2-		
City, State, Zip Code								y, State, Zip Co						
BORDENTOWN, NJ				1		N			N, PA 19401	7				
Project Manager for Moni DOUGLASS FERRY	A series of the series of			0.000.00	ephone 09-29 8		500000	ephone No. 10-239-9920		License No.			-	
Start Date (10)		Schodi	iled C		etion Da			me of OSHA N		00398				
07 / 20 /					1 /				ENVIRONMEN	ΙΤΔΙ				
Occupancy Status During				-				eet Address						
☐ Facility Closed/Vacate					ement		100000	23 HAWS A	VENIIE					
☐ Abatement Performed						scribe		, State, Zip Co						
Time of Abatement: _	AM	PM	1/	_PN	I	AM	- 133		N, PA 19401					
Scope of Work (Check all	that apply)								2 40 UU ASSA 1616					
≥3 sf or ≥3 lf			⊠ Re	nova	tion			☐ Mini-Enc		egative Pressure				
≥160 sf or ≥260 lf			☐ De	molit	ion			Glovebag	g Procedure					
			lo	Loca	tion	T		☐ Non-Exe	mpted (*) and N	on-Friable Proced	-			_
Location	of			Norm		15		Description of	ıf			atem		1
Asbestos-Containing I	Material (ACM	1)			lely by ance/			Containing Ma	terial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
TO BE ABA IN Facilit					Staff?	(i.e		rmal systems surfacing, VAT		(Specify SF or LF)	lova	a-	sde	osui
(13)	3	-		(12)			her miscellane		0. 0. 2.)	-		llate	œ.
0.7			Yes	No	N/A								10.50	
1ST FLOOR RF AREA	ROOM-	-8		\boxtimes		COPPE	R FI	LOOR ADHE	SIVE	2,600 SF				
Name of Registered Wast	e Hauler				NJDEP		100,700,700	oic Yards of	Name of Reg	istered Landfill				
SERVICE TRANSPO	RT				Hauler I A901	D No. #20990/	Wa 2		MINERVA	LANDFILL				
City, State					7.001			posal Date	City, State			1000		
58 PYLES LANE, NE	W CASTLE	, DE	1972	0			7	-30-15	WAYNES	BURG, OH				
Completed By (Print or Ty	rpe)	Title						Signature			Date			
RUSSELL KING		PΝ	Л					1	16		71	2113		

Ch	Jan.	44	991	5

						10 1 10		7-1 - 1							
Date of Notification (1)			Name of	Building (Associate	Owner / Operator (2 es LP)				-200				
Agencies Notified	July 2, 2015 Type Notification			Street Ad			2815 A K	0 FM 0 -							
Agencies Notified	1,700 1.00		- 1				يان و اوال	-8 LM 9:27							
EPA				307 Wes	st 117 th S	treet, Suite 1F	あら口にです.								
DEP				City Stat	te & Zip C	ode	211	ENTING							
⊠DOL	Initial	es			rk, NY 10		St 1.10	- TH-140							
⊠рон	Amended Amendm			New 10	IK, INI II	0020					- 12005				
DCA	Cancellat		-	Name of	Contact			Tele	phone	Numi	er				
				Daniel F	Reifer			7							
				FACI	LITY IN	IFORMATION									
Name of Facility Wh	nere Abatement is Ta	aking Pla	ce (3)			Type of Facilit	y (4)								
Garrett Apartments	S					School (I		12\							
Street Address						Subchap	ter 8 (Other than K	-12) maraial buildings	home	etc)				
130 Grand Avenue							.e., private & con	mercial buildings	. Age	, 010	.)	-			
						Square Feet	# of Floors	5		Years	3				
City (5)						28,000	Prior if being demo								
Englewood						Current ose (Thor is being deme				_				
County (6)			nty Code	(7)											
Bergen		0.734.000.00	ONLY_		ASCM N	o Name of Aha	tement Contractor (9)							
Name of Monitoring	Firm Hired by Build	ing Owne	si (Q)		AGOINI IN	Synatech, In	c.	Yesto							
Apex Companies, Street Address	LLC					Street Addres	ss								
197 Route 18 Sou	th					829 Radio R									
City, State & Zip Ci						City, State &	Zip Code								
East Brunswick, N	NJ 08816		T= 1	1 NI		Telephone N	arbor, NJ 08087	License Num	ber			*			
Project Manager fo			4 0000000	ephone N -763-473		609-296-691			00817						
Damiano Albanes Scheduled Start Da		heduled (Completio			Name of OSI									
July 15,	77.7	ileduled (Augus	t 15, 201	5	Synatech, In	c.					100			
Occupancy Status	During Abatement (Check on	ly one)			Street Addre									
Facility Cl	losed/ <u>Vacated</u> Durin	g Entire F	eriod of F	batemen	t	829 Radio R									
Abatemer	nt Performed Outside	e of Norm	al Hours			City, State &									
Other - D	escribe:					Little Egg H	arbor, NJ 08087								
Facility O	ccupied During Abat	ement							_		_				
Scope of Work (CI	heck all that apply)					_	•								
			_					with Negative Press	sure						
≥ 3 sf or ≥ 1 f				Renovatio			Mini-Enclosure								
>160 sf or 3				Demolitio	n	⊵	Glovebag Proced	ure		_					
						L) and Non-Friable P	rocedui	ateme	ant "	Type			
	Location of		Is Locati	on Norma	Illy Used	Descrip		Amount (Specify	AD	aterrio	21.11	Турс			
Asbestos-Co	ontaining Material (A	CM)	Solely b	y Mainten dial Staff	ance or	Asbestos-0 Materia		SF or LF)							
TC	N Facility		Custo	l Stati	(12)	(i.e., therm	al systems				m	_			
	(13)					insulation, su	rfacing, VAT		- Re	R	nca	E E			
	(10)					or other mis	cellaneous)		Removal	Repair	psu	los			
									val	=	Encapsulate	Enclosure			
			Yes	No	N/A						Œ	<u>Ļ</u>			
Boiler Room				Х		Pipe / Fittin	g Insulation	100 LF	_ X						
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			+				N. CD	ared Landfill		_					
Name of Register	red Waste Hauler		NJDEP Hauler II		Cubic '	Yards of Waste	Name of Regist								
Synatech, Inc.				7429	2		Grows Landfil								
City, State					Dispos	al Date	City, State								
1000 - The control of the							Morrisville, PA								
Little Egg Harbo	or, NJ 08087	T:41-			Signat	III		Date							
Completed By		Title			Joigi at	111	// /								
Diane Aloia		Exec. A	dministra	tor		vane alor		July 2, 2015							
		Contracting the same of the last													

Check # 8584

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

Frontyer

Date of Notification (1) 7/1/2015				Building O				_C	28	15 JUL -	و	a Le				
Agencies Notified	Type Notification			Street A	ddress							0	VI)	1: 3	3	
☐ EPA	Initial Amended				ple Aver	330000				Æ.5	51311	- 4				
DEP		.,	1	1000	te, Zip Co						& Lici	Z LIC	4111	MUI		
DOL	Amendment Emergency				town, N.	J 0796	0						119/3	8		
≥ DOH	justification)				Contact					Tele	ephone Nun	nber				
☐ DCA	Cancellation			Greg T		D11 4 T1	011									
Name of Facility Where	Abatement is Takin	g Place (3)		FACI	LITY INFO	RMAII	ON	Type	of Facility (4	.)						
Grey Healthcare		3							50.00	6						
Street Address									School (K-12 Subchapter		er than K-12	2)				
25 DeForest Aven	ue								Other (i.e. pr	ivate 8	& commercia	al buil	dings,	home	es,	
City (5)									etc.) re Feet	# 01	Floors	Тв	ldg. A	ae		
Summit								250		2		576	0			
County (6)	57				Code (7)	200		Сигте	ent Use (Prio	r if bei	ng demolish	ed)				
Morris				STATE U	JSE ONLY)	-	-	Offi	ce Buildin	g		15				
Name of Monitoring Firm				ASCN	No.				itement Con							
Environmental Hea	alth Investigation	ns, Inc.		N/A			East	Coas	st Haz Mat	Mat Removal, Inc.						
Street Address	122			75			Street			4						
655 West Shore T	rail								st Street	t .						
City, State, Zip Code									ip Code							
Sparta, NJ 07871									NJ 07504	e 						
Project Manager for Mor Bill Kerbel	nitoring Firm		Telepho			Teleph 973-3				License N 00507	٥.					
Start Date (10)			29-5649		17-10-00	5 / F	370,000		00507							
July11, 2015		Scheduled July 31,		500	Date (11)		1000		HA Monitor above							
Occupancy Status Durin	og Ahatement (Cher	1070														
			***	Street Address												
Facility Closed/Vac Abatement Perform	eated During Entire ned Outside of Norr	Period of Ab nal Facility I	atem lours	ent			City. S	tate. 7	ip Code							
Other - Describe:						_	Oity, O	1010, 2	p 0000							
Scope of Work (Check A	All That Apply)															
≥3 sf or ≥3 lf		× Re	nova	tion			×	Fu	II Containme	nt with	Negative P	egative Pressure				
≥160 sf or ≥260 lf		De	moliti	on			-	Mir	ni-Enclosure		· · · · · · · · · · · · · · · · · · ·					
									ovebag Proc n-Exempted		d Non-Friab	le Pro	cedur	e		
		le l	ocatio	on					T	() (- Holl I Hab		Tolers, Tries	ement		
Locatio	n of	0.00000	rmall			Do	scription	of					Ty	ре		
Asbestos-Containing	Material (ACM)	Used	Sole			os Cont	aining M	lateria		Α	mount			т	-	
TO BE AB In Faci		Custo			(i.e.		systems cing, VA		ation,		Specify	Rer	Re	nca	Enc	
(13)			(12)				niscellar			Sr	or LF)	Remova	Repair	Encapsulate	Enclosure	
		Yes	No	N/A				-				a	"	ate	Гe	
1et EL CW Co		100		X			T1. /5.4		-		200.05	77	-			
1st Fl S.W. Co	orner Section			^		FIOOR	Tile/M	astic		5,3	300 SF	X				
Name of Registered Wa	ste Hauler		7600	JDEP W		Cubic	Yards		Name of F	Registe	red Landfill					
East Coast Haz Mat Removal, Inc.					No.	of Was			G.R.O.V	V.S. 1	North Inc.					
City, State							0 sal Date		035000000000000000000000000000000000000			111				
Paterson, NJ 07504						7/15/		/	City, State Morrisvi		A					
Completed by Title							ignature		//	////	Da	te				
James E. Unger			tima	tor/Pro	oject Mgi		Ale		6 14	1		1/20	15			
			,	- //	100		1/1/	-			300					

State of New Jersey

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

				(Pur	suant t	0 N	JAC 8:60-7 and 12:				inter-	Chec	ck#	73	3 5
Date of Notification (1)	6/19/15			of Buildi mus E		ner/	Operator (2)		4	P 15 . 1111	0 -				
Agencies Notified [] EPA [] DEP	Type of Notifica [x] Initial Notification	1		Address Spring		еу	Road		Ĵ.	Socore Lice	TO AM S	: 3	l		
[X] DOL	[] Emergency [] Amended Notification	F	ara	tate, Zip mus, Î	NJ 07	765	52			≃ L/C[EMSING	TUL			
[] DCA	[] Cancellatio	1 22		of Conta en Cea	1000					Telephone Nu -	umber ^)0				
					FACII	LIT	Y INFORMATION								
Name of Facility When East Brook Midd Street Address		aking Pla	ce (3)				Ту	pe of Facility [x] Schoo [] Subchi [] Other (l (K-12) apter 8 (Othe i.e. private ar	r than K-12) nd commerc	ial bu	uildin	gs,	
190 Spring Valle	y Road								nomes	s, etc.)					
City (5) Paramus		County	5000				inty Code (7) ATE USE ONLY)	Ct.	quare Feet 0000 urrent Use (Pr	# of Flo		Bldg ~ 60		2	
Name of Monitoring Fir R K Occup. & Er			г	ASCM N	lo.		Name of Abatem	ent (lucational Contractor (9) iter Enviro		Services	Inc	3		Para de la companya d
Street Address 401 St. James A					Street Address	323	Changebi		e Road, Suite 100						
City, State, Zip Code Phillipsburg, NJ Project Manager for Mo		bon	. Nives be				Pin	e Brook, N	J 07058	1					
Jonathan Gilbert Scheduled Start Date (4-6316 Date (1	3		Telephone Numb	973	3-575-8700 tor)	Licens	e Nur		85	52		
7/13/15 Occupancy Status Duri	ing Abatement (C	7/3 heck only	1/15 one	5	70	-			S Enviror	mental La	aboratori	es,	LLC)	
[] Abatement Pe Descr	d/Vacated During rformed Outside of ibe: ribe: partially vaca	of Norma	riod I Fac	of Abate ility Hour	ment s –		City, State, Zip C	ode	3 Route 22 on, NJ 070						
Scope of Work (Check	all that apply)							2011							
[] Demolition [] ≥3 sf or ≥3 lf [x] ≥160 sf or ≥26	60 If			[X]	Ren	ova	tion		[] Mini [] Glov	Containment – Enclosure rebag Procec n – Friable Pr	dure	ive Pr	ressu	ire	
Location Asbestos – Co Material (A TO BE ABA	ontaining CM) ATED	Norr S Maint	olely enan	Used			Descri Asbestos - Materia (i.e., therm insulation, su	- Col al (Al nal s urfac	ntaining CM) systems sing, VAT,		Amoun (Specif SF or LF	y	Aba Typ R E M		E E N N C C A L
In Facili (13)	N/A			or other mis	scell	aneous)				V A L	I R	P O S S U U			
Gymnasium		Misc	D. —	floor mastic/vapo	or ba	arrier		7200 SF		X					
Name of Registered Wa Jupiter Environm	este Hauler ental Service	S Hau	ıler II	Waste D No.	100		oic Yards Waste		ame of Regis Ninerva La						
City, State Pine Brook, NJ			4782				20 posal Date 28/15		ity, State Vaynesbu	ra OH					
Completed By (Print or Pane Repic	Type)	Title Gene	eral	Mana	ger	. /	Signature)	1	ζ	Date 6/19	9/15			

CK 1534

m-					
4.	2.				
		20	13	7	

Date of Notification (1) 6-30-2015			Name of Building Owner/Operator (2) Thomas Nee Street Address: 13 Hamilton Avenue													
Agencies Notified	Type Notification			Street A	Americanii toversore						MI -8	File	٥.			
					milton A	venue			£.	k,			J. (2		
EPA DEP	Initial Amended		-		ate, Zip Co		-			<u> </u>	3/13/	1.00				
DOL	Amendment		_		y, NJ 07					Œ	LICENT	14/5	NU	Ĺ.		
▼ DOH	Emergency justification)	including	+		f Contact					Tel	ephone Nur	nhar				
DCA	Cancellation			Thoma	as Nee					1 10	opilone ivai	4				
				FACI	LITY INF	ORMATI	ON									
Name of Facility Where Residential	Abatement is Takin	g Place (3)						Туре	of Facility (4)						
									School (K-1	2)						
Street Address 13 Hamilton Avenu								П	Subchapter	8 (Oth	er than K-12	2)	700			
	e 							×	Other (i.e. petc.)	rivate	& commerci	al buil	dings	, hom	es,	
City (5) Kearny, NJ 07032								23 - 5 7 7 7	re Feet		f Floors	E	Bldg. A	Age		
								231	5 77	2			+0			
County (6) Hudson			- 1	County (Code (7) USE ONLY	1		Curre	ent Use (Prid	or if bei	ng demolish	ed)				
Name of Monitoring Firm	Hirod by Building	Dumas (0)					_									
Name of Monitoring Fift	i miled by Building (Jwner (8)		ASCN	A No.		Name	of Aba	tement Contractor (9) vironmental Services, LLC							
Street Address								Address								
								Address Virginia Avenue								
City, State, Zip Code							-		ip Code							
1									y, NJ 073	04						
Project Manager for Mor	nitoring Firm	T	Telepho	ne No			none N	• 0 00 44 (14.0%)		License N						
105 NO.						333-8			01174	J.						
Start Date (10)		Scheduled	Con	npletion	Date (11)		Name	of OSI	HA Monitor							
7-11-2015		7-11-20							above							
Occupancy Status Durin	g Abatement (Chec	k Only One)	Street Address												
Facility Closed/Vac	ated During Entire F	Period of Ab	aten	ement												
Abatement Perform Other – Describe:	ed Outside of Norm	al Facility F	lours	rs City, State, Zip Code												
						_										
Scope of Work (Check A	II That Apply)						1800	<u> </u>								
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		-	nova				-	Full Containment with Negative Pressure								
2 100 SI 01 E200 II		☐ De	molit	ion			×	Mini-Enclosure Glovebag Procedure								
									n-Exempted		d Non-Friab	e Pro	cedur	е		
			ocati											ement		
Location		No Used	rmal Sole				scription		ļ.				13	ре		
Asbestos-Containing TO BE AB		Main	tenai	nce/	Asbes	tos Cont thermal	aining N	laterial	(ACM)		mount	_		Щ	Е.	
In Facil		Custo	dial S (12)	Staff?	(1.0.		systems sing, VA		ation,		Specify or LF)	?em	Repair	icap	nclo	
(13)			(12)	_		other n	niscellar	neous)			1(5)	Remova	oair	Encapsulate	Enclosure	
		Yes	No	N/A								-		ite	е	
Basem	ent		X			Pipe	insula	tion		12	20 LF	х				
										**						
		-						-55,600								
Name of Death			_													
Name of Registered Was			1000000	JDEP Wauler ID		Cubic			Name of I	Registe	red Landfill					
Green Environmenta	al Services, LLC			34889		of Was	ie		G.R.O.\	.W.S. North landfill						
City, State							al Date		City, State	9						
Jersey City, NJ					7-13-2015 Morrisville, PA											
Completed by		Title				S	gnature		(Da	e				
Liliana Serrano Office Ma								(II)	Less	ers		30-20)15			

State of New Jersey

G1	N	OTI	FICA		OF ASI		S ABAT	EMENT					
Check#2233							and 5:16						
Date of Notification (1)				Name	of Building	Owner/C	Operator (2	2)	***	4-1-9			
07/03/	15	_		Mary .	Ann Sulli	van		281	B JUL -8				
Agencies Notified Type Noti	ification				Address					M 9: ;	2		
⊠ EPA ☑ Initial	0000000		4	95 No	rth Ridge	wood R	oad	4.54	ELICENS		-		
☑ DOLWD ☐ Amen	ded dment #				State, Zip C				ETHER	170	į.		
	gency (incli	udina		South	Orange, 1	NJ 0707	9		-10-11/2	4G	-		
(NJAC 5:23-8) justific	cation)	uunig	Ī		of Contac				Telephone N	umber			
_ Cance	ellation			Mary .	Ann Sulli	van				,3			
-					CILITY IN		TION						
Name of Facility Where Abatement	is Taking F	Place	(3)			- 7		Type of Facility	(4)				-
Private house								School (K-1					
Street Address									8 (Other than K-		محالدان		
95 North Ridgewood Road								homes, etc.	private and common	merciai bu	maing	S.	
City (5)			22/10 30					Square Feet	# of Floors	BI	dg. A	ge	
South Orange, NJ 07079													
County (6)				Coun	ty Code (7)	(STATE U	SE ONLY)	Current Use (P	rior if being dem	nolished)			
Essex													
Name of Monitoring Firm Hired by E	Building Ow	vner (8) /	ASCM	No.	Name o	of Abateme	ent Contractor (9)				
						Gr Tecl	h LLC						
Street Address						Street A	Address						
						576 Va	lley Rd#	283					
City, State, Zip Code							ate, Zip Co						
*						Wayne,	NJ 0747	0					
Project Manager for Monitoring Firm	n		Tele	phone	No.	Telepho	one No.		License No.				
						973-63	8-1777		01127				
Start Date (10)	Schedu					Name o	of OSHA M	Ionitor				******	
	07	/	16	_ / _	15	Envirov	vision Co	nsultants,Inc					
Occupancy Status During Abatement							Address						
☐ Facility Closed/Vacated During E						20-21 V	Wagaraw	Road, Bldg .#	35 E				
Abatement Performed Outside of Time of Abatement:AM-				s - Des		City, St	ate, Zip Co	ode					
					VINI	Fair La	wn, NJ 0	7410					
Scope of Work (Check all that apply	()					H		and decontami			sure		
>3 sf or >3 lf > 160 sf or >260 lf	5	₹ Rei	novatio	on			Mini-Encl	tainment with Ne losure					
≥ 160 sf or ≥260 if	Ĺ		molitio			H	Glovebag	g Procedure	Tent with Nega	tive Press	sure		
		1-	1 +		1		Non-Exe	mpted (*) and No	on-Friable Proce		1		
Location of			Locati Iormal			Do	scription o	,¢		Ab	atem	ent T	ype
Asbestos-Containing Material (A	ACM)		d Sole		Asbe			terial (ACM)	Amount	Re	Repair	Enc	Enc
TO BE ABATED			intena odial S		(i.e		l systems i		(Specify	Removal	pair	aps	Enclosure
IN Facility (13)		000	(12)	J. 1.1. 1.			cing, VAT, miscellane		SIF or LF)	<u>a</u>	1	Encapsulate	ure
-		Yes	No	N/A				,				0	
Basement			П	X	Ceiling	tilos 2'v	21		400 SF				П
Basomone					Cennig	illes -2 X		-2	400 31		1		
		ш	Ш								Ш	Ш	Ш
Name of Registered Waste Hauler			NJD	EP Waste	Hauler ID No.	Cubic Ya	ards of Wast	e Name of Regi	stered Landfill				
Gr Tech LLC			0	03378	35	TB	D	T.R.R.F. Inc					
City, State						Disposa		City, State					
Wayne, NJ 07470						TB		Tullytown, F	ΡΑ				
Completed By (Print or Type)	Title			-		1	gnature /	Tuny win, 1	**	Date			
E 50050 2500 50								1	1	A00000			

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

Hewic Wenad

07/03/2015

Owner

Jui 2 2015 09:04am

P001/00

הוות בוחרה בוחרה בוחת בוחת הווח

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT MO#22302807985 (Pursuant to NJAC 8:60 and 5:16) Emergency Notification Date of Notification (1) Name of Building Owner/Operator (2) APPROVED 07 0,2 1 15 Profile Properties Holdings LLC of Health & Senior Services Type Notification Agencies Notified Street Address ☐ EPA M Initial signature 38 Pine Avenue ₩ POLWD ☐ Amended City, State, Zip Code X DHSS Amendment # Emergency (including justification) Madison, NJ 07940 T DCA (NJAC 5:23-8) Name of Contact Telephone Number Cancellation Jack Geraghty FACILITY INFORMATION Name of Facility Where Abatement is Takino Place (3) Type of Facility (4) Private house School (K-12) Subchapter 8 (Other than K-1 2) Street Address Other (i.e., private and commorpial buildings, 38 Pine Avenue homes, etc.) City (5) Square Feet 类 of Floors Bldg. Age Madison, NJ 07940 County (6) County Gode (7) (STATE USE ONLY) | Current Use (Prior if being demolished) Marris Name of Monitoring Firm Hired by Building Owner (8). Nume of Abatement Contractor (9) Gr Tach LLC Street Address Street Address 576 Valley Rd #283 City, State, Zlp Code City, State, Zip Code Wayne, NJ 07470 Project Manager for Monitoring Firm Telephone No. Telephone No. Lipense No. 973-638-1777 01127 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 07 / 03 / 15 Envirovision Consultants, Inc. Occupancy Status During Abotement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Road, Bldg # 35E Abstement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: AM-PM Fair Lawn, NJ 07410 Scope of Work (Chack all that apply) Clean up and decontamination with negative pressure Full Containment with Negative Pressure >3 sf or >3 lf > 160 sf or >260 lf Renovation Mini-Enclosure Glovebag Procedure Tont with Negative Pressure
Non-Exempted (*) and Non-Friable Procedure Demolition is Location Abatement Typo Location of Normally Description of Used Salely by Asbestos-Containing Material (ACM) Repair Removal Encapsulate Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify SIF or LF) Custodial Staff? IN Paclifty surfacing, VAT, or (12)(13)other miscellaneous) Yes No NIA Attic-crawl space \boxtimes Duct insulation 20 LF X П Name of Registered Waste Hauler NUCEP Waste Hauler ID No. | Cubic Yards of Weste | Name of Registered Landfill Gr Tech LLC 0033785 TBD T.R.R.F. Inc City, State Disposal Date City, State Wayne, NJ 07470 TBD Tullytown, PA Completed By (Print or Type) Title Skinature Date N.Jovcic Lutec Wenda Owner 07/02/2015 ASB-41 * Do not use this form for asbestos licensure exempled activities. MAY 11

State of New Jersey NOTIFICATION ASBESTOS ABATEMENT

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

Date of Notification (1) 7/1/15				e of Buildin ria Cicale	ng Owner/Operator	(2)	1 JUL -8 8	H 9	: 51	4		
Agencies Notified Type Notification EPA Initial	1		-	et Address Barbara		A :	121152.0		ROI			
DEP Amended Amendment: Emergency (i		_		State, Zip				÷				
DOH justificaton)	noidum	y	Nam	ne of Con Cicalese	tact		Telephone Num					
			FA	CILITY IN	FORMATION				_	-		
Name of Facility Where Abatement is Takin Residence	ng Place	(3)				Type of Facility School (K-1	2)					
Street Address 210 Barbara Lane							8 (Other than K-1) private 8 commerci		dings	1		
City (s) Blackwood, NJ		G.				Square Feet 2100 SF	# of Floors	92	oldg. Oyrs			
County (6) Camden			Cou	inty Code(FONLY)	7) (STATE		rior if being demoli	_				
Name of Monitoring Firm Hired by Building (8) N/A	Owner		ASCM	No.	Name of Abaten AEi2, LLC	nent Contractor (9	9)					
Street Address					Street Address 300 S. Lenola	Road						
City, State, Zip Code					City, State, Zip Maple Shade,	p Code					_	
Project Manager for Monitoring Firm		Tele	ephone	No.	Telephone No. 609-481-212	License No.						
Start Date (10) Sche 7/11/15 7/18		omple	tion Da	ate (11)	Name of OSHA N AEi2, LLC							
Occupancy Status During Abatement (Che	ck only				Street Address							
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norma					300 Lenola F City, State, Zip C Maple Shade	ode						
Other - Describe: Scope of Work (Check all that apply)							legative Pressure					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Re	novati molitic	on n		Mini-En	closure ag Procedure	lon-Friable Procedi	ure				
	7.10.20000	ocation							Abate Typ			
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Used Mair Cu	Solei ntenan ustodia Staff? (12)	y by ce/	Asbest (i.e.,	Description of tos Containing Mat thermal systems i surfacing, VAT, other miscellaned	erial (ACM) nsulation, or	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 a	E n o l o s u r e	
Crawl Space	No	N/A X	Duct W	rap .		30 sf	X		t			
							1.2					
Name of Registered Waste Hauler		IN	JDEP \	Naste	Cubic Yards	Name of Regi	stered Landfill	_				
AEi2, LLC		Н	auler 10 1376	75-111-11	of Waste 2	TBD						
City, State			2010		Disposal Date TBD	City, State	/					
Maple Shade, NJ Completed By Title		Signature	TBD	Date				<u> </u>				
Wm. Minnick Pr	rogran	Mg			19/1/2	mmer	7/1/15					

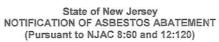
PK 3756

	Date of National (1) (2) Date of National (1)
-	Arrango Maria of Grand Orman Operator (2)
	Agencies Notified Type Notification Street Activess 1500 CO STRUCTION
_	1 SOS SPRINC DOLL OF
	DOM Cherry Hill NJ 00033
	Li Cansalation Ivaina of Contact
-	JIM P TERMINAN
	Name of Pacing Where Aba'ement is Taking Pace (3)
-	Street Actions
	City (5)
	Chenny (†11)
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A DOMESTICAL DESIGNATION OF THE PERSON OF TH	(8) ASOM No. Name of Atainment Contractor (9) Street Address
territ.	Street Address Street Address
275	12/3 600/
THEFT	City, State, Zip Code
SEC.	Project Meneger for Menitoring Firm Telephone No. Telephone No. Telephone No.
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distant	Scheduled Completion Date 1911 10
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	NE	(Pursuant to NJAC	8:60 and 12:1	20) . 2815 . 1111 _	^ ·
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Date of Notification (1)	7 2/15	THO HICK		ald her / Frage	1007001
Agency Notified	Type Noticelian	Sheet Address	Box 12	698 7. € LIC	EMS MORDE
DEPA .	G initial O Amended	City, State, Zip C	Code	07091	- 2618
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LIDOR		FACILITY INF	ORNATION .	Type of Facility (4)	
Name of Smither Witness	Abstament is Taking Place	2 (3)		1000 C	
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Street Address		2	_ (*	DO Other (Fe' buyste & com	mercial buildings,
	Ollwood TE	RK		Nomes, etc.) Square Feet # of Floor	s Bldg. Aga
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		County Code (7)(SIAIE OSE	HO	HE
11()	Noic		I stome of Ahate	ment Contractor (9)	
Name of Mordoring Fir	m Hised by Building Owner	ASCM No.	NOVAT	ECLO INC	
(8)			Street Address		
Street Address	i.		120.150	× 819 ×	
			City, State, Zo	Cords SOIDGE NO	08857
City, State, Zip Code	· <u>4 _</u>		Telephone No.	- I inonse	No.
Project Manager for the	orining Fam-	Telephone No.	1732 3	1001000	0806.
1 1		ompletton Data (11)	Name of OSH		
Start Date (10)	15 81	11117	Street Aridices		
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NOVALE	ch INC	1.0001	Disposal Da	e Caly. State	VA.
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Date of Notification (1) 7/3/15				Building C Resider		perator	(2)		2815 ,	JUL -8	3 00	7-	e F		
Agencies Notified Type Notification				Summit S		d		, ?	1157	37.19	41	9:	35		
X EPA X Initial Amended Amendment Emergency		_	Somer	te, Zip Cod ville, NJ		6				LICEA	STHO	(Ro	Ĺ.		
DOH justification) DCA Cancellation	**************************************		Maggi		DII. T	0.11			Tele	ephone N	y 3				
Name of Facility Where Abatement is Takin	n Place (3	2)	FACI	LITY INFO	RMATI	ON	Tyme	e of Facility (4	1)						
Beiran Residence Street Address 37 E Summit St	9 / 1000 (0							School (K-1: Subchapter Other (i.e. p	2) 8 (Othe			dings,	home	es.	
City (5)				1			Squa	etc.) are Feet	# of	Floors	E	Bldg. A			
Somerville County (6)			County (Code (7)			320 Curr		2 55+ se (Prior if being demolished)						
Somerset Name of Monitoring Firm Hired by Building	Numer (8)		(STATE L	JSE ONLY)	-	Name	residence e of Abatement Contractor (9)								
	owner (o)		AGGIV	1110.		Ace	e Insulation Co., Inc.								
Street Address						Street 95 M		ess ose Road							
City, State, Zip Code								Zip Code ck, N.J. 07	722						
Project Manager for Monitoring Firm			Telephone No. Telephone 732-294							License 00029	No.				
Start Date (10) 7/13/15	Schedule 7/17/1		Completion Date (11) Name of (SHA Monitor				-			
Occupancy Status During Abatement (Chec	k Only Or	ne)	Street Address												
Facility Closed/Vacated During Entire I Abatement Performed Outside of Nom Other – Describe: 7am-7pm									10 10	== 11 - 25 - 12					
Scope of Work (Check All That Apply)														-	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	_	Renova Demoliti				×	M G	ull Containme ini-Enclosure lovebag Proc on-Exempted	edure				0		
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Location of	1	Normal	ly		De	scription	of.					Ту	ре		
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	tos-Containing Material (ACM) TO BE ABATED In Facility Used Mair Custo					ontaining Material (ACM) al systems insulation, facing, VAT, or r miscellaneous)		lation,	(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure	
h	No	N/A		•					001.5			te	LU .		
basement		Х			insula				20Lf	X	1				
bedroom	bedroom					eiling til	le		8	30sf	X				
24 2 2															
Name of Registered Waste Hauler Ace Insulation Co., Inc.		Н	JDEP W auler ID 2086		Cubic of Was 3	Yards ste		Name of F	Registe	red Land	fill				
City, State Colts Neck, New Jersey		*1	- /5	Dispos 7/17/	sal Date 15		City, State								
Completed by Bree McGuire	Title Secr						1	Date 7/3/15							

CK#2687 Print Form

Date of Notification (1) 7/3/15			4 9			Owner/0	Operator	(2)		1875	Name of Building Owner/Operator (2) Doug Paris Street Address										
Agencies Notified	Type Notification		- 4 8						.1		·	-	J. (5	3							
× EPA	× Initial				Ocean A te, Zip Co	515-08 5 55					3709 - -10EM3	- 777	0								
× DEP × DOL	Amended Amendment #			5.700.00	Lake, N						-10cAS	18G	HUL								
■ DOH	Emergency (in justification)	ncluding			Contact						ephone Nu	mber									
DCA	Cancellation			Doug							-	Э									
Name of Eacility Whore	Abatamant is Taking	Place (2)		FACI	LITY INFO	DRMAT	ION	Tym	o of English /	4)											
Name of Facility Where . Paris Residence	Abatement is Taking	Place (3)						Тур	e of Facility (0.5h											
Street Address								H	School (K-1 Subchapter		er than K-1	2)									
2011 Qean Ave								×	Other (i.e. p etc.)	rivate 8	& commerc	ial build	dings,	home	es,						
City (5)								Squ	are Feet	# of	Floors	В	ldg. A	ge							
Spring Lake								220		2		125	5+								
County (6) Monmouth					Code (7) USE ONLY				rent Use (Prid sidence	or if bei	ng demolis	hed)									
Name of Monitoring Firm	Hired by Building C	wner (8)		ASCN	1 No.		0 100		atement Cor lation Co.,		(9)										
Street Address							Street	Addr													
City, State, Zip Code									Zip Code	10 100 											
							0.000		ck, N.J. 07	722											
Project Manager for Mor	nitoring Firm			Telepho	ne No.		Teleph 732-		No. -1757		License N 00029	lo.									
Start Date (10)		Scheduled	Com	pletion l	Date (11)	8.200	Name	of OS	SHA Monitor												
7/14/15		7/17/15	,				01	0.1.1													
Occupancy Status Durin	g Abatement (Check ated During Entire P		4 D)	ent			Street	Addi	ess												
	ned Outside of Norma						City, S	state,	Zip Code												
Scope of Work (Check A	Il That Apply)																				
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			enovat emoliti				×	N	ull Containme	9	Negative I	Pressu	re								
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		10000	ocatio	5999					1				Abate Tv	ment pe	t						
Location Asbestos-Containing			ormall Solel		Ashas		escription		al-(ACM)	Δ	mount										
TO BE AB	ATED	Mair Custo	itenar			therma	l system	s inst	ılation,	(5	Specify	Re	R	Encapsulate	Enc						
In Faci (13)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(12)	370100			acing, VA miscellar			SF	or LF)	Removal	Repair	psul	Enclosure						
		Yes	No	N/A								<u>m</u>		ate	-G						
basem	ent			х		pipe	e insula	tion		2	200lf	X									
												X									
Name of Registered Wa	ste Hauler		N.	JDEP W	/aste	Cubic	Yards		Name of	Registe	red Landfil	1									
Ace Insulation Co.,	Inc.		100000	auler ID 2086	No.	of Wa			Chrins												
City, State Colts Neck, New Je	rsey					7/17	sal Date /15		City, State Easton												
Completed by Bree McGuire		Title Secre	tary	Treasu	ırer		Signature		N		100	ate /3/15									
ASB-41 (R-06-08)					* Do not use this form for asbestos licensure exempted activities.							ties.									

(Killy)	ı		CATION	ate of Nev I OF ASBI to NJAC	ESTOS	ABATE			90,7				**		
Date of Notification (1) July 2, 2015				f Building II Foods		perator	(2)	2813	JŲ_	.8 /					
Agencies Notified Type Notification			Street A	ddress elawann	a Aver	nue		455	27.0			<u></u>	-S		
EPA Initial DEP X Amended Amendment #	1			te, Zip Co					THE	Ŋ÷,	46	700	1.		
Emergency (in justification) DCA Cancellation	cluding			f Contact el Palaz:	zolo			ΙΤ _ε	Janhone N	Numbe	r	×			
				LITY INFO		ON									
Name of Facility Where Abatement is Taking Commercial Property Street Address	Place (3	3)						cility (4) I (K-12) apter 8 (Ot	her than K	(-12)					
6 West Belt Parkway							Other etc.)	(i.e. private	& comme					es,	
City (5) Wayne							Square Fee 330,000	2	of Floors		19	ldg. A 956	ge		
County (6) Passaic				Code (7) USE ONLY)			Current Use vacant	e (Prior if be	eing demo	lished)				
Name of Monitoring Firm Hired by Building On Atlantic Environmental Solutions Inc			ASCN	/I No.			of Abatemer Constructio		Contractor (9) Corporation						
Street Address 5 Marine View Plaza, Suite 303							Address Watchung	Avenue	renue						
City, State, Zip Code Hoboken, NJ 07030						State, Zip Coot t Orange,		!							
Project Manager for Monitoring Firm Art Rastelli	- 1	Telephor	ne No. 76-9400			none No. 669-2900		License 01231							
	Schedule July 7,		pletion	Date (11)		100000000000000000000000000000000000000	of OSHA Mo	ARRIGOU	Global I	nc.					
Occupancy Status During Abatement (Check	Only Or	ne)	Street Address 2512 W Cary Street					treet							
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe:					_	City, S	State, Zip Coo mond, VA	le							
Scope of Work (Check All That Apply)						1 (1011	mond, v/t	20220							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoliti				×	Mini-Enc Glovebag	ainment wit osure Procedure mpted (*) a	1				9		
		Locati			100		20					Abate	ment pe		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Solel intenar todial S (12)	y by nce/		tos Cont thermal surfac		Material (ACMs insulation, T, or	. (Amount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure	
	Yes	No	N/A										e		
Receiving Area	X			E	Elbows	3		4EA	X	-					
									+	-					
Name of Registered Waste Hauler Be Construction Corporation		H	NJDEP Waste Cubic Yards Name of Registere Hauler ID No. O035767 Tullytown Faci												
City, State West Orange, NJ 07052		100	35767		Dispos	al Date	City	State ytown, P							
Completed by Barbara Reed		S	ignature		Wo orl		Date 07/02	2/2	015						

CK 9438114288

	(Pursuant to NJAC 8:60 and 12:120)																
Date of Notification (1) 6/30/15				Name of I	Building O	wner/O	perator	r (2)									
Agencies Notified					_{dress} ke Stree	t	2015 JUL -8 AM 9: 59										
× EPA × DEP × DOL	Initial Amended Amendment			e, Zip Cod t, NJ 07		ASDESTOS CONTROL & LICENSING											
× DOH □ DCA	justification) Cancellation			Name of Contact Ken Kroll						Tele C1	sprione realin	ber 2	Ĭ				
				FACIL	ITY INFO	RMATI	NC										
Name of Facility Where A House Street Address							Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12)										
784 Lake Street			20-20-20-20-20-20-20-20-20-20-20-20-20-2				Other (i.e. private & commercial build etc.)							48:500 KZ 11			
City (5) Newark		4							quare Feet /A	N/A		Bldg. Age N/A					
County (6) Essex				County C (STATE U	ode (7) SE ONLY)				urrent Use (Prid OUSE	or if bei	ng demolish	ed)					
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCM		Name of Abatement Contractor (9) D&S Abatement, Inc.											
Street Address			9					Street Address 11 Rosengren Avenue									
City, State, Zip Code	=						City, State, Zip Code Totowa, NJ 07512										
Project Manager for Monitoring Firm				Telephone No.			Telephone No. License No. 973-345-8685 #00675										
Start Date (10) 7/13/15	Con	Completion Date (11)			Name of OSHA Monitor. D&S Abatement, Inc.												
Occupancy Status Durin		11 6				reet Address 1 Rosengren Avenue											
Facility Closed/Vac Abatement Perform Other – Describe:		ours C			City, State, Zip Code Totowa, NJ 07512												
Scope of Work (Check A	JI That Apply)						1010	7110	, 140 07012								
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		ovation				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure											
	ocati	ion										tement					
Location of State Asbestos-Containing Material (ACM) TO BE ABATED				mally Solely by enance/ lial Staff? Asbestos (i.e. ther			Description of containing Material (ACM) and systems insulation, fracing, VAT, or crimiscellaneous)			Amount (Specify SF or LF)		Removal	Repair	e Encapsulate	Enclosure		
hasam	basement			N/A		nine	insula	atio	n		38 LF						
first floor			X		pipe insu						27 LF						
					pipe ir					may 1 class 1		X					
10																	
Name of Registered Wa	F	NJDEP Waste Cubic Y Hauler ID No. of Wast #20996 TBD			aste			f Registered Landfill Management of PA									
City, State Totowa, NJ					osal Date City, State Tulltown, PA												
Completed by Deanna Brkusanin	t Ma	Manager					enne K	Mr.	Da	te 30/1	5						
								~	U	, out							

CK 8189 65260

	N			o NJAC 8				1	3 mg .	011	121 500	-					
Date of Notification (1) 6/30/15		(Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Matthew Ricca Street Address Ariginal Parameters (2) Matthew Ricca Street Address															
Agencies Notified Type Not	1 0																
EPA Initia	1	219 Richard Road City, State, Zip Code Ridgewood, NJ 07450 ASSESTOS CUNTROL & LICENCING															
X DOL Ame	ended endment #			vood, NJ		& LICENTING											
Eme	ergency (including fication)		Name of					Telephone Number									
DCA Car		Matthew Ricca FACILITY INFORMATION															
Name of Facility Where Abatement	is Taking Place (3))	FACIL	LITY INFO	RMATIC	ON	Typ	oe of Facility (4	4)								
House								School (K-12)									
Street Address 219 Richard Road					Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes,												
City (5)						etc.) Square Feet # of Floors Bldg. Age											
Ridgewood							N/		\	N/A							
County (6) Bergen			County Code (7) (STATE USE ONLY)					Current Use (Prior if being demolished) House									
Name of Monitoring Firm Hired by N/A							Name of Abatement Contractor (9) D&S Abatement, Inc.										
Street Address					(C)(1)(1)(1)(1)	Street Address 11 Rosengren Avenue											
City, State, Zip Code		City,					City, State, Zip Code Totowa, NJ 07512										
Project Manager for Monitoring Fire		2.000					Telephone No. License No. 973-345-8685 #00675										
Start Date (10) 7/14/15	ed Con						Name of OSHA Monitor D&S Abatement, Inc.										
Occupancy Status During Abateme						t Address											
Facility Closed/Vacated Durin								enue									
Abatement Performed Outsid Other – Describe: Occupied	Hours	City, State, Zip Code Totowa, NJ 07512															
Scope of Work (Check All That Ap	ply)					-	_										
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Renova Demolit					Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure											
	1 6	cation											batement				
Location of	Vormal	lly		De	Description of					Туре							
Asbestos-Containing Material (<u>TO BE ABATED</u> In Facility (13)	d Sole intenar todial S (12)	nce/	thermal surfa	taining lasystem cing, Vaniscella	ns ins AT, c		Amount (Specify SF or LF)		Remova	Repair	Encapsulate	Enclosure					
	Yes	No	N/A										te	LU .			
basement	basement				pipe	insula	sulation			36 LF	X						
basement			floor				oor tile 720				X						
								<u> </u>									
Name of Registered Waste Hauler	0.00	[- 라마마마 ^						of Registered Landfill									
D&S Abatement, Inc.	2000	lauler ID 20996	of Wa	1 1/1/2010			e Management of PA										
City, State Totowa, NJ				Dispo TBD	sal Date	Date City, State Tulltown, PA											
Completed by Deanna Brkusanin	Title Proje	ect Ma	anager	W	\$	Signatur	9//	101110	0/1,	197.500	ate /30/1	5					

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Assendor Ciscolarella 2015 Jill -9	Date of Notification (1) 6/30/15			Name of Building Owner/Operator (2) Alesandro Ciacciarella															
Separation Canal Manager for Monitoring Firm Telephone No. Street Address Street Address Toology Toolo	No. of the second second		Street Address																
DCA	M. 122 Hardenson				478 North 13th Street														
DCA	DEP DOL	Amended Amendment							-	d d	LICEN	UN VN:	[HG	L					
Name of Facility Where Abstement is Taking Place (3)		justification)	justification) Name of Contact								Leiebuotie Milmoet								
House Street Address County Code (7) Subchapter 8 (Other than K-12) Subchapter 9 (Other than K-12) Subchapter 8 (Other t					FACI	LITY INFO	RMATI	ON	1										
Street Address 478 North 13th Street School (K-12) Subschapte 8 (Other than K-12) Subschapte		Abatement is Takir	ig Place (3)					Type of Facility	(4)									
A78 North 13th Street Square Feet																			
Square Feet	478 North 13th Stre		Other (i.e. private & commercial building																
Renovation Demoillion Sole of Work (Check All That Apply) Sale for \$250 if						Square Feet	1/				Age								
D&S Abatement, Inc.	(A) (S) (S) (S)	County (Code (7) USE ONLY)			Current Use (Prior if being demolished)													
Street Address 11 Rosengren Avenue City, State, Zip Code City, State, Zip Code Totowa, NJ 07512 Project Manager for Monitoring Firm Telephone No. Telephone No. 973-345-8685 #00675 Start Date (10) 7/17/15 Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe: Occuled Street Address 11 Rosengren Avenue Street Address 11 Rosengren Avenue City, State, Zip Code Totowa, NJ 07512 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Dasement X pipe insulation Dasement X pipe insulation Asbestos-Containing Material (ACM) In Facility (13) Yes No N/A Dasement X pipe insulation Asbestos Containing Material (ACM) (i.e. thermal systems insulation, Specify Spe		n Hired by Building	Owner (8)		ASCN	/ No.			e of Abatement Contractor (9)										
City, State, Zip Code City, State, Zip Code	Street Address							Street	Address										
Telephone No. 973-345-8685 License No. #00675	City, State, Zip Code				2//			City, S	State, Zip Code										
Start Date (10) 7/17/15 Scheduled Completion Date (11) 7/20/15 Dasa Abatement, Inc. Reposition Pacific Period of Abatement Abatement (Check Only One) Street Address 11 Rosengren Avenue City, State, Zip Code Totowa, NJ 07512 Scope of Work (Check All That Apply) 23 sf or 23 if Pacific Period of Abatement Period of Abatement Period of Abatement Pacific Period Pacific Period	Project Manager for Monitoring Firm					ne No.		Telephone No. License No.											
Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Totowa, NJ 07512 Scope of Work (Check All That Apply) 23 sf or ≥3 lf ≥160 sf or ≥260 lf Renovation						Date (11)		Name	e of OSHA Monitor										
Facility Closed/Vacated During Entire Period of Abatement Abatement Period of Abatement Abatement Period of Normal Facility Hours City, State, Zip Code Totowa, NJ 07512 Scope of Work (Check All That Apply) 23 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Abatement Period of Normal Facility Hours Location of Asbestos-Containing Material (ACM) ITO BE ABATED In Facility (13) Dasement Normally (12) Yes No N/A Dasement Normally To Be Abatement X pipe insulation Dasement X pipe insulation 258 LF X Normally Daseription of Abatement Type Abatemen	1720110								and the second of the second o										
Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Totowa, NJ 07512																			
Scope of Work (Check All That Apply) Scope of Work (Check All That Apply) Sign of ≥3 if Demolition	Abatement Performed Outside of Normal Facility Hou				3														
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Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Pes No N/A Dasement X pipe insulation Dasement X floor tile Dase Management of PA Name of Registered Waste Hauler Dase Abatement, Inc. Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A Per Dase Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) N/A pipe insulation 258 LF X floor tile Dase Management of PA Name of Registered Landfill Waste Management of PA Disposal Date Totowa, NJ Title Signature Date	⊇ ≥3 sf or ≥3 lf Renov							Z	Mini-Enclosure Glovebag Procedure										
Location of Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) TO BE ABATED Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Dasement X pipe insulation 258 LF X pipe insulation 3 process of Waste Hauler ID No. #20996 Name of Registered Waste Hauler D&S Abatement, Inc. Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Peg No N/A Amount (Specify SF or LF) Reg No N/A Find Dasement X pipe insulation 258 LF X pipe insulation 3 process of Waste TBD Name of Registered Landfill Waste Management of PA City, State Totowa, NJ Completed by Title Signature Date Tullytown, PA Date	In Law								1 Non-Exemple	u () ar	iu Non-Friad	700000000000000000000000000000000000000							
Maintenance/ Custodial Staff? In Facility (13) Yes No N/A Dasement X pipe insulation Same of Registered Waste Hauler D&S Abatement, Inc. Name of Registered Waste Hauler D&S Abatement, Inc. Maintenance/ Custodial Staff? (12) Maintenance/ Custodial Staff? (12) Name of Registered Landfill Waste Management of PA City, State Totowa, NJ To BE ABATED In Facility (13) Maintenance/ Custodial Staff? (12) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) For LF) Repair	Location of Norma						Des	cription	of										
basement X pipe insulation 258 LF X loor tile 900 SF X loor tile 900 S	Asbestos-Containing Material (ACM)				nce/									四	т				
basement X pipe insulation 258 LF X loor tile 900 SF X loor tile 900 S	In Facility Custodia				Staff?		surfac	ing, VA	T, or				Repa	caps	nclos				
Name of Registered Waste Hauler D&S Abatement, Inc. NJDEP Waste Hauler ID No. #20996 Title	(13)		Yes	No	N/A		otner m	ilscellan	leous)			val	air	ulate	sure				
Name of Registered Waste Hauler D&S Abatement, Inc. City, State Totowa, NJ Completed by Title NJDEP Waste Hauler ID No. #20996 Cubic Yards of Waste TBD Name of Registered Landfill Waste Management of PA City, State TBD City, State TBD Title Signature Date	basem	X			pipe	insula	tion	2	58 LF	X									
D&S Abatement, Inc. Hauler ID No. #20996 Of Waste TBD Waste Management of PA Disposal Date TBD Completed by Title Signature Date							flo	oor tile											
D&S Abatement, Inc. Hauler ID No. #20996 Of Waste TBD Waste Management of PA Disposal Date TBD Completed by Title Signature Date																			
D&S Abatement, Inc. Hauler ID No. #20996 Of Waste TBD Waste Management of PA City, State Totowa, NJ Completed by Title Signature Date																			
City, State Totowa, NJ Completed by Title #20996 TBD Waste Management of PA City, State Tullytown, PA Date	Lawrence of the second								Name of Registered Landfill										
Totowa, NJ Completed by Title Signature Date	bas Abatement, Inc.					1000000000													
Deeper Belgins in the second of the second o	Totowa, NJ							al Date	Control of the Contro										

	1			OF ASBE to NJAC 8					200	1]	4	1	50	9
Date of Notification (1) 7/1/15		0.02		f Building (James	Owner/C	perator	(2)	2815	. // [[-8 1		_	_		
Agencies Notified Type Notification EPA X Initial		100	Street A 20 Eliz	^{ddress} zabeth S	treet					- V - }, ,	ל ה	6	7		
DEP Amended DOL Amendment #				ite, Zip Co , NJ 078					9 Li(ENO!	#G	7/3	L		
Emergency (ir justification) DCA Cancellation	icluding	1.22		f Contact James					Tele	ephone N	lumbe	r			
			FACI	LITY INFO	RMATI	ON									
Name of Facility Where Abatement is Taking house	Place (3	3)						of Facility (School (K-1	2)		40)				
Street Address 20 Elizabeth Street							×	Subchapter Other (i.e. p etc.)				uild	ings,	home	es,
City (5) Dover							Squa 2200	re Feet O	# of 2	Floors		BI 65	dg. A	ge	
County (6) Morris	11			Code (7) USE ONLY)			Curre	ent Use (Pri	or if bei	ng demol	ished)			
Name of Monitoring Firm Hired by Building Or	wner (8)		ASCN	ΛNo.				atement Cor ronmenta			_C				
Street Address							Addre Box 4	ss 83, 4 E G	ate Dr	rive					
City, State, Zip Code								ip Code I, NJ 074	18						
Project Manager for Monitoring Firm			Telepho	ne No.		1,000,000,000	none N 764-2			License 703	No.				
022 (2.2.2.2.1) (0.2.2.0.1) (1.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2	Schedule 3/17/1		pletion	Date (11)		Name	of OSI	HA Monitor			153-52				
Occupancy Status During Abatement (Check	Only Or	ne)				Street	Addre	SS	- 27						
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe:						City, S	State, Z	ip Code							
Scope of Work (Check All That Apply)												_			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demoliti				×	Min	II Containm ni-Enclosure ovebag Pro- n-Exempte	e cedure					e.	
Location of		Locati			D-		in.							ment	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma Cus	d Sole intenar todial S (12)	ly by nce/ staff?	Asbest (i.e.	tos Cont thermal surfa	scription aining N system cing, VA niscellar	Materia s insula T, or		(8	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A											Ф	
basement			X		pipe	insula	tion		18	30 LF	×				
									*		+	1			-
Name of Registered Waste Hauler Freehold Cartage		Н	JDEP W		Cubic of Wa			Name of Wester							
City, State Freehold, NJ		113	5939		TBD Dispos	sal Date		City, Stat	e						-
Completed by A. Scott Higgins	Title Presi	dent				ignature			_	1	Date 7/1/1	5			

CK 20569

Name of Facility Where Absternment is Taking Place (3)												15	940	1 1-2		
September Chy, State, Zip Code Chy, Sta	Date of Notification (1) 7/2/2015							4			Peri	1978				
Telephone Number Chry State, Zip Code C	Agencies Notified	Type Notification						5952			- 6 //	UL -	3 K	4 9	5	è
DOL		× Initial			ex materials	2000 2000		UE			44:	,			- 0	f.
Start Date		Amendment										£ 1.05	No.		40£	
Name of Facility Where Abatement is Taking Place (3) SCHOOL #8 School (K-12) School (K-12) School (K-12) School (K-12) School (K-12) Subchapter 6 (Other than K-12) Subchapter 6 (Other than K-12) Other (i.e. private 8 commercial buildings, homes, size of K-12) Subchapter 6 (Other than K-12) Other (i.e. private 8 commercial buildings, homes, size of K-12) Subchapter 6 (Other than K-12) Other (i.e. private 8 commercial buildings, homes, size of K-12) Subchapter 6 (Other than K-12) Other (i.e. private 8 commercial buildings, homes, size of K-12) Subchapter 6 (Other than K-12) Other (i.e. private 8 commercial buildings, homes, size of K-12) Subchapter 6 (Other than K-12) Other I subchapter 6 (Other I	X DOH X DCA	justification)	including				RKINS							74		
Sched (K-12)					FACI	LITY INFO	ORMATI	ON								
School (K-12) Stroot (Authority Code (7) Stroot (7) S		Abatement is Takin	g Place (3	3)						of Facility (4)					
Other (i.e., private & commercial buildings, homes, etc.) Square Feet # of Floors Bidg, Age												ar than K-1	21			
County (6)		AD							i i	Other (i.e. pr				dings,	home	es,
PASSAIC									Squa	re Feet	# of	Floors	Е	ldg. A	ge	
AHERA CONSULTANTS, INC. Street Address Street Addre)		200000000000000000000000000000000000000				ned)			
Street Address			Owner (8)		ASCN	1 No.						The state of the s	G IN	C		
City, State, Zip Code	Street Address							Street	Addres	SS			-,			
Project Manager for Monitoring Firm DONNA D'ERRICO Start Date (10) 7/15/2015 Start Date (10) 7/15/2015 Scheduled Completion Date (11) 7/31/2015 Scheduled Completion Date (11) Scheduled Date (11) Scheduled Completion Date (11) Scheduled Date (11) Scheduled Completion Date (11) Scheduled Completion Date (11) Scheduled Date (11) Scheduled Completion Da	TATAL STREET,										INOL	•				
DONNA D'ERRICO 609-652-1833 973-956-8700 00494		08231						100000000000000000000000000000000000000			2					
7/15/2015 7/31/2015 SAME AS (9) ABOVE Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: UNOCCUPIED; MON – SAT, 6:00 AM - 2:30 PM Scope of Work (Check All That Apply) 23 sf or ≥3 if ≥160 sf or ≥260 if Second During Abatement with Negative Pressure Mini-Enclosure Second Mini-Enclosure Mini-Enclosure Mini-Enclosure Mini-Enclosure Second Mini-Enclosure Mini-Enclosure Mini-Enclosure Mini-Enclosure Second Mini-Enclosure Mini-Enclosure Mini-Enclosure Mini-Enclosure Mini-Enclosure Mini-Enclosure Second Mini-Enclosure Mini-Enclosure Mini-Enclosure Mini-Enclosure Mini-Enclosure Mini-Enclosure Mini-Enclosure Mini-Enclosure Second Mini-Enclosure Mini-Enclosure Mini-Enclosure Mini-Enclosure Mini-Enclosure Mini-Enclosure Mini-Enclosure Mini-Enclosure Second Mini-Enclosure Mi													lo.			
Street Address					mpletion I	Date (11)					 /E					
Abatement Performed Outside of Normal Facility Hours Other - Describe: UNOCCUPIED; MON - SAT, 6:00 AM - 2:30 PM Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Secope of Work (Check All That Apply)	Occupancy Status Durin	g Abatement (Chec	k Only Or	ne)						10,530						
Scope of Work (Check All That Apply) 3 sf or 23 lf	Abatement Perform	ed Outside of Norm	nal Facility	/ Hour	S			City, S	State, Z	ip Code						
Sality			N-SAI,	6:00 A	M - 2:30 F	PM .			32.							
Section Demolition Demoli	Scope of Work (Check A	II That Apply)							77							
Location of Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) In Facility (13) Yes No N/A BOILER ROOM X PLASTER CEILING BOILER RIBS BOILER ROPE Name of Registered Waste Hauler TWO BROTHERS CONTRACTING City, State TOTOWA, NJ Location of Normally Used Solely by Maintenancy / Custodial Staff? (12) Yes No N/A BOILER ROOM X PLASTER CEILING BOILER ROPE BOILER ROPE NAME of Registered Landfill WASTE MANAGEMENT G.R.O.W.S. Disposal Date T/31/2015 Date Abatement Type Aboutment Type Aboutment Type Amount (Specify Specify Specify Registerent Type Amount (Specify Specify Registerent Type Amount (Specify Specify Specify Registerent Type Amount (Specify Specify Specify Registerent Type Amount (Specify Specify Specify Registerent Type Aboutment Type Amount (Specify Specify Specify Registerent Type Amount (Specify Specify Specify Specify Registerent Type Amount (Specify Specify Registerent Type Amount (Specify Specify Registerent Type Registerent Type Registerent Type Registerent Type Registerent Type Registerent Type Registerent Type Registerent Type Re								×	Mir	ni-Enclosure ovebag Proce	edure					
Location of Asbestos-Containing Material (ACM) Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A BOILER ROOM X PLASTER CEILING BOILER ROPE Nome of Registered Waste Hauler TWO BROTHERS CONTRACTING Normally Used Solely by Maintenance/ Custodial Staff? (12) Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A PLASTER CEILING BOILER RIBS 120 SF X BOILER ROPE 100 LF X BRICK BRICK BRICK Name of Registered Landfill WASTE MANAGEMENT G.R.O.W.S. City, State TOTOWA, NJ Completed by Title Signature Date			l.						_ INO	n-Exempled	() and	non-Friat	le Pro			t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A BOILER ROOM X PLASTER CEILING BOILER RIBS BOILER ROPE BOILER ROPE Name of Registered Waste Hauler TWO BROTHERS CONTRACTING NAME of Registered Waste Hauler TWO BROTHERS CONTRACTING Name of Registered Waste Hauler TOTOWA, NJ Completed by Title Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) ABBOILER CEILING BOILER RIBS 120 SF X BRICK BRIC	Location	n of	1	Vorma	lly		De	scription	of.					Ty	pe	
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BOILER ROOM X PLASTER CEILING 900 SF X BOILER RIBS 120 SF X BOILER ROPE 100 LF X BRICK 80 SF X Name of Registered Waste Hauler TWO BROTHERS CONTRACTING City, State TOTOWA, NJ Completed by Title PLASTER CEILING 900 SF X BOILER ROPE 100 LF X Cubic Yards of Waste 60 Name of Registered Landfill WASTE MANAGEMENT G.R.O.W.S. City, State T/31/2015 MORRISVILLE, PA Completed by Title Signature Date	(13)		868		1 2000000		other r	niscellar	neous)				oval	air	ulate	sure
BOILER RIBS BOILER ROPE BOILER ROPE 100 LF X BRICK BR				No	N/A					_			_			
BOILER ROPE 100 LF x BRICK 80 SF x Name of Registered Waste Hauler TWO BROTHERS CONTRACTING City, State TOTOWA, NJ Completed by Title BOILER ROPE 100 LF x Cubic Yards of Waste Cubic Yards of Waste Of Was	BOILER	ROOM	X							3	50000	Control Control	Х			
Name of Registered Waste Hauler TWO BROTHERS CONTRACTING City, State TOTOWA, NJ Completed by Title RICK 80 SF X Cubic Yards of Waste Hauler ID No. 18743 Cubic Yards of Waste Obsposal Date TOBate Name of Registered Landfill WASTE MANAGEMENT G.R.O.W.S. City, State TOTOWA, NJ Signature Date											900		X			
Name of Registered Waste Hauler TWO BROTHERS CONTRACTING City, State TOTOWA, NJ Completed by NJDEP Waste Hauler ID No. 18743 Cubic Yards of Waste Hauler ID No. 18743 City Waste Hauler ID No. 18743 Disposal Date 7/31/2015 MORRISVILLE, PA Completed by Date					BOIL	ER R	OPE		10	00 LF	Х					
TWO BROTHERS CONTRACTING Hauler ID No. 18743 of Waste 60 WASTE MANAGEMENT G.R.O.W.S. Disposal Date 7/31/2015 MORRISVILLE, PA Completed by Title Signature Date																
City, State TOTOWA, NJ Completed by Title Disposal Date 7/31/2015 MORRISVILLE, PA Date			H	Hauler ID		of Wa			no.				R.C).W.	S.	
Completed by Title Signature Date	[18] [18] [18] [18] [18] [18] [18] [18]									100		LE, PA				
	Completed by		W. W. W. W. W. W.	JECT		SDINAT	(8	1	e waaa		\ \	Da		15		

CK 2007

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

RECEIVED

Date of Notification (1)				Vame o	f Building ()wner/	Operator	(2)	\circ	21	715 1111	0			
Agencies Notified	Type Notification		+	Street A	ddress _	VI,	QU	Y []			115 JUL	-8_	AH .	9: 2	9
T EPA	Initial				94 E	VRI	Rive	1	Part	rud	4157				-
DEP DOL	Amended Amendment #			City, Sta	ate, Zip Co	de	1//	Γ	083		à Li	EH	140	RU	L,
П рон	Emergency (ir justification)	cluding	-	Name o	f Contact	(1	0.3	0 1	- 5-	Tel	ephone Nu	mher			
DCA	Cancellation			Eric P	lackis										
				FACI	LITY INFO	RMAT	ION								
Name of Facility Where	Abatement is Taking	Place (3)						Туре	of Facility	(4)					
Street Address	areen	Dark	711	DY						r 8 (Oth	er than K-1 & commerc		dings,	home	es,
City (5)	; on	041							e Feet	# 0	Floors	В	Idg-A	ge 2	
County (6)	120				Code (7) USE ONLY)	_		Сиптел	nt Use (Pr	ior if bei	ng demolis	hed)			
Name of Monitoring Firm	Hired by Building O	wner (8)		ASCN	/I No.				tement Co		(9)				
Street Address							Street			J.					
							P.O.	Box 9	915				_== 000		
City, State, Zip Code									p Code / Jersey	08723					
Project Manager for Mon	itoring Firm			Γelepho	ne No.		Telepho (732)				License N 01196	No.			
Start Date (10)	15	Scheduled	Com	pletion	Date (11)		Name o	of OSH	IA Monitor				ii.		
Occupancy Status During	g Abatement (Check	Only One		117	2		Street /	Addres	s						
	ated During Entire Pe led Outside of Norma						City, St	ate, Zi _l	p Code						
Scope of Work (Check A	II That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	(пастрруу)		novat moliti				E S	Min Glo	i-Enclosur vebag Pro	e cedure	Negative			Α	
		le I	ocatio	nn.								T	Abate	ement	
Location	of	No	mall	y		De	escription	of					Ту	ре	
Asbestos-Containing	Material (ACM)	Used Main	Solel: tenan			os Con	taining M	aterial		1 200	mount	1 -		ᄪ	П
TO BE ABA		Custo	dial S (12)	taff?	(i.e.	surfa	I systems acing, VAT	r, or	uon,		pecify or LF)	Remova	Repair	caps	Enclosure
(13)			(12)			other	miscellan	eous)				oval	air	Encapsulate	sure
		Yes	No	N/A								1		Ф	
				D	Hoor	tile	e+N	105	h L	10	DSF	Q			
Name of Registered Was	te Hauler		57.03	JDEP W auler ID			Yards				red Landfil	l,			
Brick Industries Inc.			21	602			7		GROW						
City, State Brick, New Jersey						Dispo	sal Date	5	City, Stat	te					
Completed by		Title				3	Signature	0	1		D	ate 12	7 1	_	
Eric Plackis		Presid	ent					0	W			110	11	7	

Print Form

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

RECLIFE

C/4-3692

Date of Notification (1) 07/02/15					of Buildin		ner/Operator	(2)	2815 .11	<i>H</i> 0						
Agencies Notified EPA DEP	Type Notification	1		100 miles 200	Address unicipal	Driv	/e		ASBFS	IL -8 4	M 3:	25			25-13-	
DEP × DOL	Amended Amendmen Emergency	nt #			tate, Zip (perton, N				# \$ 3 6 5 S & L	TOEK :	H3 H3	3L				
DOH DCA	justification Cancellatio)	9	Tom	of Contac Shover	5				Telephon	e Numi	DAT OA	. 14.			
Name of Facility Where	Abstement is Taki	na Blace	/2\	FAC	CILITY IN	FORI	MATION									
Former Municipal	Building	ng Flace	(3)					Тур	e of Facility (4))	×					
Street Address 34 Municipal Drive								X	School (K-12 Subchapter 8 Other (i.e. pri	(Other than	n K-12)	build	inac	hom		
City (5)								_	etc.)			Dullu	nys	, 11011	ies,	
Lumberton								Squ	are Feet	# of Floor	S	Ble	dg. A	Age		
County (6) Burlington					Code (7)			Cur	rent Use (Prior mer municip	if being der	molishe	<u> </u>		-102-00-0		1
Name of Monitoring Fire	m Hired by Building	Owner (8	3)	ASC	M No.		Name		atement Contr		y		_			
Pennoni Associate	es,Inc		93						rporation	actor (9)						
Street Address 515 Grove Street s	suite 1 B						Street 606 N		ess ride Ave							
City, State, Zip Code Haddon Heights, N	11.08035							Zip Code							-	
Project Manager for Mo			Telepho	one No		Wood		d Park, NJ 0								
Thomas Adams			856-5	47-0505		973-2			0110	nse No. 04						
Start Date (10) 07/15/2015	rt Date (10) Scheduled								SHA Monitor ronmental L	abaratari				V		1
Occupancy Status Durir	ng Abatement (Chec						Street			aboratori	es ———					
Facility Closed/Vac	cated During Entire I	Period of	Ahator	nent					ite 22 Wees	t						
Other – Describe:	ned Outside of Norn	nal Facilit	y Hour	S					Zip Code J 07083		-					
Scope of Work (Check A	All That Apply)					-										-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	e 3	Contract Con	Renova Demoli				×	Mi Gl	Ill Containment	lure						
		Is	Locat	ion				140	on-Exempted (*) and Non-i	-riable i			ment		+
Location		1	Vorma	lly			Description (nf					Тур			
Asbestos-Containing TO BE AB	ATED	Ma	d Sole	nce/	Asbes (i.e.	tos C	ontaining Ma nal systems	ateria	I (ACM)	Amount		_		Щ	ш	
In Facil (13)	,	Cus	todial ((12)	stan?		su	rfacing, VAT	, or	ation,	(Specify SF or LF)		Removal	Repair	cap	ndo	
		Yes	No	N/A		otne	er miscellane	eous)			1	leve	air	Encapsulate	Enclosure	
ground floor th	nroughout			х		tra	nsite pan	els		4,106 sf	x	+	+	-		
ground floor th				Х		joir	nt compou	ınd		16,400 s		+	+			
ground floor th				Х		flo	or tile/mas	stic		6,285 sf	x	\top	\forall			
ground f				X		pip	oe insulati	on		750 If	x	\top	+		_	
Name of Registered Was				JDEP W		257.5	oic Yards		Name of Reg		ndfill		_		-	0
Asbestos Transporta	ition Company			auler ID -24310	IVU.	n/a	Vaste		Minerva E	nterprise	S					-
City, State Shirley,NY						Disp n/a	oosal Date		City, State Waynesbu	ıra. OH						
Completed by Momo Glavatovic	·	Title vice p	resid	ent			Signature	6	M	3, 577	Date 07/02	/201	5			
		-						~	A 1A	- 1	3-1-1000		27.50		- 4	

Location of Asbestos-Containing Material (ACM)	Use	s Locati Normal ed Sole	ly ly by	Description of	-			emen ype	t
TO BE ABATED In Facility (13)	Cus	intenar todial S (12)	taff?	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			val	air	sulati	sure
ground floor			X	tank insulation				Ф	
ground floor interior					300 sf	x			
ground floor throughout			X	window inter.glazing	3,340 If	х			
			X	window inter/exter.caulk	5,670 sf	x	-	_	
ground floor			X	boiler breeching		^			
ground floor	1				30 sf	х			
ground floor throughout			X	boiler interior insulation	300 sf	×			
			X	boiler tank insulation	130 sf	-		-	_
ground floor throughout			X	mastic with grey/black tiles		X			
ground floor			· ·		5,310 sf	x			
			X	roofing field flashing	9,700 sf	x			_

7 1

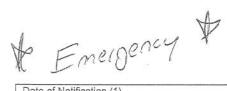
NO CK

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

Date of Notification (1)			Name	of Building	Owner/Operator (2	2)					
	15		Hac	kettstow	n Public School	s PB	15 JUL -8 A	K O.	31		
Agencies Notified Type Notifica	tion		Street	Address					9 8		
⊠ EPA ☐ Initial			315	Washing	gton Street	£ 5	E LICEMS	477 A. 73	~ ·		
☑ DOLWD ☑ Amended ☑ DHSS Amendment			City, S	tate, Zip C	ode		& LICEHS	120	UL		
☑ DHSS Amendme ☑ DCA ☐ Emergence		1	Hac	kettstow	n, NJ 07840		**************************************	- 2			
(NJAC 5:23-8) justification	n)	3	Name	of Contact	l .		Telephone Num	ber			
☐ Cancellat	ion		Mr.	John Bo	wker						
X X			FAC	CILITY IN	FORMATION	1					
Name of Facility Where Abatement is T		(3)				Type of Facility					
Hatchery Hill Elementary Scho	ol				·	School (K-12) 3 (Other than K-12	7			
Street Address							rivate and comme		ilding	IS,	
389 5th Avenue						homes, etc.)				1336	
City (5)						Square Feet	# of Floors		dg. A	ge	
Hackettstown						80,000 SF	1		40+		
County (6)			Coun	ity Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demoli	shed)			
Warren				-							
Name of Monitoring Firm Hired by Build	ling Owner	(8)	ASCM	507W	Name of Abateme						
Westchester Environmental			0027	7		az Mat Remov	al, Inc.				
Street Address					Street Address						
307 N. Wanut Street					494 E. 41 Str						
City, State, Zip Code					City, State, Zip C						
West Chester, PA 19380					Paterson, NJ	07504					
Project Manager for Monitoring Firm			phone		Telephone No.		License No.				
Paul F. McCaa			10-431		973-345-0022		00507				
Start Date (10) Start Date (10	Scheduled (07			te (11) 15	Name of OSHA N East Coast H	lonitor laz Mat Remov	al, Inc.				
Occupancy Status During Abatement (0					Street Address						
☐ Facility Closed/Vacated During Entire			ment		494 E. 41 Str	eet					
☐ Abatement Performed Outside of No				cribe	City, State, Zip C						-
Time of Abatement: 7:00AM-4:00F					Paterson, NJ						
Scope of Work (Check all that apply)											
☐ >3 sf or >3 lf	MR	enovat	ion			tainment with Neg	gative Pressure				
⊠ ≥160 sf or ≥260 lf		emoliti			☐ Gloveba	g Procedure					
					☐ Non-Exe	mpted (*) and No	n-Friable Procedu				
	U 633	s Loca Norma			Description			Ab	atem		T
Location of Asbestos-Containing Material (ACM) Us	ed Sol	ely by	Asbe	Description of stos Containing Ma		Amount	Rer	Repair	Encapsulate	Enclosure
TO BE ABATED	M	aintena stodial			., thermal systems	insulation,	(Specify	Removal	air	aps	losu
IN Facility (13)	00.	(12)	Otan:		surfacing, VAT other miscellane		SF or LF)	<u> </u>		ulat	Ire
()	Yes	No	N/A			,				Ф	
Halls & Rooms				Ceiling	Tiles		17,202 SF				
Library			\boxtimes	VAT/Ma	astic		1,978 SF	\boxtimes			
				3							
Name of Registered Waste Hauler		1	JDEP 1	Waste	Cubic Yards of	Name of Regis	stered Landfill				
Freehold Cartage		H	13206		Waste 100	GROWS, I	nc.				
City, State					Disposal Date	City, State					
Freehold, NJ 07728					07-17-2015	Morrisville	, PA 12506				
Completed By (Print or Type)	Title				Signature		D	ate		157	
Leslie Olszewski	Projec	t Man	ager		l WW	MIW.		07-8	71- l	5	

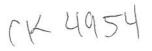
& Emergency &

Date of Notification (1) 6/30/15					Building Ov Sowan Pri				28	15.11	11 0	1.44	J		
Agencies Notified	Type Notification		200	Street Ad 415 Tw	dress rin Lakes	Blvd.			<u> </u>	5	''-8	4K 9	: 28		
EPA DEP DOL	Initial Amended Amendment #				e, Zip Code gg Harbo		08087			# & [TOEN	UNIT	ROL		
DOH DCA	Emergency (in justification) Cancellation	ncluding	3033	Name of Allie	Contact					Tele	phone Nu	imber			
				FACIL	ITY INFOR	RMATIC	ON								
Name of Facility Where Chris Cowan Privat		Place (3)			2				of Facility (4 School (K-12 Subchapter 8	?)	or than K	12)			
Street Address 415 Twin Lakes Blv	vd.				*			550	Other (i.e. pretc.)	ivate 8	commerc	cial build			2 S,
City (5) Little Egg Harbor N	IJ 08087							100	N	1	Floors	3	ldg. A	ge	
County (6) Ocean				County C	ode (7) ISE ONLY)			Curr	ent Use (Prio ne	r if bei	ng demolis	sheď)			
Name of Monitoring Firm	n Hired by Building C	wner (8)		ASCM	No.		Name Pern		atement Cont Inc.	ractor	(9)		•		
Street Address							Street PO E	Addre				(0			
City, State, Zip Code									Zip Code Iin NJ 0809	91					
Project Manager for Mo	nitoring Firm			Telephor	ne No.		Telept	none N			License 00727	No.			
Start Date (10)		Scheduled	d Com	pletion [Date (11)		The state of the s	of OS	SHA Monitor			11445523	100000		
7/1/15	as Abstamont (Chan		.,				Street		200						
	cated During Entire F ned Outside of Norm	eriod of Al	batem			۵			Zip Code						
Scope of Work (Check															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	он тнас друу		enova emolit					M G	ull Containme lini-Enclosure lovebag Prod on-Exempted	edure	75			re	
		la l	Locati	00					- LXGIII PAG	() = .			Aba	emen	ıt
Location	on of	N	ormal	ly	20.	De	scription	n of				_	T	уре	
Asbestos-Containin TO BE AB In Fac (13	g Material (ACM) BATED cility	Mair	d Sole ntenar odial S (12)	nce/		os Con hermal surfa		Materi ns insu AT, or		(5	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
Exterior Siding	under stucco			X		Exte	erior Si	iding		11	00 SF	x			1
Exterior ciding	under stades														
				1055	1000	0.11	Vest		N	Desi-1	arad I == -	611			
Name of Registered Wa United Containers	aste Hauler		1	IJDEP V lauler ID 2459	100000000000000000000000000000000000000	of Wa	Yards iste		G.R.O.	1000017to-100	ered Land	IIII			
City, State Elm NJ	70					Dispo 7/6/1	sal Dat	е	City, Stat Morrisv		A 19067	,			
Completed by Anthony T Perna		Title Presi	dent	Y			Signatu	re				Date 6/30/1	5		



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Date of Notification (1)					Building C Smith Pr			(2)		221	JUL -	2 :	M 0		
Agencies Notified	Type Notification		- 1	Street Ac							~~		7	24	
EPA DEB	☐ Initial			0.00	or Lake					AN	(E. J. 7)	·			
DEP X DOL	Amended Amendment				e, Zip Coo gg Harb		08087				& LIGE	N.	N.G	KUL	
× DOH	Emergency (iustification)	including		Name of	Contact						ephone Nu	nber			
DOH DCA	Cancellation			Julia							n 4+				
Name of Facility Where	Ahafement is Takin	n Place (3)		FACIL	LITY INFO	RMATI	ON	Tyn	e of Facility (4)					
Helen Smith Private		g 1 1800 (5)			207			1,75	School (K-12	5					
Street Address								Ħ	Subchapter 8	(Oth					
23 Mirror Lake								×	Other (i.e. pr etc.)	ivate 8	& commerc	ial buil	dings	home	es,
City (5)								125000	uare Feet	100000	Floors		Bldg. A	Age	
Little Egg Harbor N	J 08087		:					100	00+	1			85+		
County (6) Ocean				County C	Code (7) ISE ONLY)			177.55.55	rrent Use (Prio ome	r if bei	ng demolis	hed)			
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCM	No.				batement Cont	ractor	(9)				
N/A			200.27				Perr						•		
Street Address							Street PO I								
City, State, Zip Code							City, S	State,	Zip Code						
							Wes	t Be	rlin NJ 0809	91					
Project Manager for Mor	nitoring Firm			Telephor	ne No.		Telep 856-		No. -9800		License N 00727	No.			
Start Date (10)		Schedule	d,Cor	mpletion I	Date (11)		Name	of O	SHA Monitor			-			
7/1/15		7/7/	15				Sam	ne							
Occupancy Status Durin	ng Abatement (Che	k Only One	e)				Street	Add	ress						
Facility Closed/Vac Abatement Perform	cated During Entire ned Outside of Norr	Period of A	bater Hour	nent s			City, S	State,	, Zip Code						
Other - Describe:															
Scope of Work (Check A	All That Apply)														
≥3 sf or ≥3 lf			enova	1000000000					Full Containme		n Negative	Pressu	ıre		
≥160 sf or ≥260 lf		× D	emoli	tion					Mini-Enclosure Glovebag Proc						
									Non-Exempted			ble Pro	A MILE STATE		
343			Locat											emen ype	ī
Location			lorma d Sole	lly ely by	Asha-		scriptio		rial (ACM)	,	Amount		T	T	
Asbestos-Containing TO BE AB	BATED	Mai	ntena			therma	system	ns ins	sulation,	(-	Specify	Re	R	Enca	Enc
In Fac		Cust	(12)				cing, Vaniscella			S	F or LF)	Removal	Repair	Encapsulate	Enclosure
(13,	(Yes	No	N/A		00101						a	=	late	ле
Exterior	Siding			X		Exte	erior S	idino		12	200 SF	x			
		1		1		- XIL									
		-	_	+								-	-	1	1
												-	-	-	-
Name of Registered Wa	aste Hauler		-	NJDEP V	Vaste	Cubic	Yards		Name of	Regist	ered Landf	ill		1	
United Containers				Hauler ID		of Wa			G.R.O.\						
City, State Elm NJ						Dispo	sal Dat	е	City, State Morrisv		A 19067				
Completed by		Title					Signatu	re				ate	1		
Anthony T Perna		Presi	dent					~			/	/30	1/1	5	



Print Form

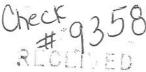
			NOTIF (P	ICATIO ursuan	N OF ASE t to NJAC	8:60 a	S ABATE and 12:12	MENT (0)	r	, 7	110		,			
Date of Notification (1) 7/2/15				Name of Broth	of Building er John	Owne	r/Operato ZZi	r (2)		2015	16 11	. , ,		- 100	ŧ	
Agencies Notified	Type Notification				Address South Ma	nnfio	ld Aug				101 -	8	FAC	9: 3	3	
EPA DEP DOL	Initial Amended			City, St	ate, Zip C	ode				M M H						
	Amendment : Emergency (-		ate NJ 0									110		
DOH DCA	justification) Cancellation			John	JI CUINACI					l le	lephone	Num	ber			
Name of Facility Where A	Abatement is Taking	Place (3)	FAC	ILITY INF	ORMA	TION	Tom	F 1174							
Brother John Capoz	zi	, , , , , , , , , , , , , , , , , , , ,	٥,		20			Тур	e of Facility School (K-	ASTOLIA						
Street Address 118 South Mansfield	d Ave	5						×	Subchapte Other (i.e. etc.)	er 8 (Oth	er than h & comme	<-12) ercia) I buil	dings	, hom	ies,
City (5) Margate NJ 08402								Squ 100	are Feet	# 0	f Floors			Bldg. /	Age	
County (6) Atlantic					Code (7) USE ONLY) <u> </u>		Curr	ent Use (Pr	ior if bei	ing demo	olishe	1			
Name of Monitoring Firm N/A	Hired by Building C	wner (8)	ASCI	M No.		Name	of Ab	atement Co	ntractor	(9)					
Street Address							Street	Addre	ess							
City, State, Zip Code	SECTION AND AND AND AND AND AND AND AND AND AN						- 1 - 2 - 2	Box 3	Zip Code							
Project Manager for Moni	roject Manager for Monitoring Firm								lin NJ 080	091			Let Let 1			
	roject Manager for Monitoring Firm							gone N 753-9			License 00727					
Start Date (10) 7/22/15		Schedul 8/7/15		npletion	Date (11)		Name Sam		HA Monitor							
Occupancy Status During	Abatement (Check	Only O	ne)				Street		SS							
Facility Closed/Vaca Abatement Performe Other – Describe: 01	ed Outside of Norma	al Facility	v Hours	nent			City, S	State, Z	Zip Code							
Scope of Work (Check All	That Apply)															
≥3 sf or ≥3 if ≥160 sf or ≥260 if		Property.	Renova Demolit				×	Mi	III Containm ni-Enclosur ovebag Pro on-Exempte	e cedure					e	
		20.5	Locati											Abate	ement	t
Location Asbestos-Containing N TO BE ABA In Facilit (13)	Material (ACM) TED	Use Ma	Normall ed Solel intenar todial S (12)	ly by nce/		tos Co therm surf	escription ntaining M al systems facing, VA miscellar	fateria s insul T, or		(S	mount specify or LF)		Remova	Repair	e Encapsulate	Enclosure
		Yes	No	N/A									_		ate	.e.
Baseme				Х	Во	iler &	Holing 7	Tank	TSI	10	00 SF		x			
Baseme	nt			Х		pip	e insula	tion		18	30 LF		x			
									»•		+					
Name of Registered Waste	e Hauler	N.	JDEP W	/aste	Cubi	c Yards	-	Name of	Registe	red Land	Ifill					
Transformation				auler ID 8952	No.	of W 20	aste		ACUA							
City, State Egg Harbor NJ	200					Disp 8/7/	osal Date 15		City, Stat 6700 D		Rd. EH	TN	IJ			
Completed by Anthony T Perna		Title Presi	dent				Signature	1				Date				



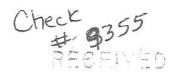
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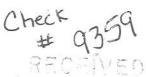
Date of Notification (1) 7/2/15					Building C							لمرية عدة				
Agencies Notified	Type Notification		1 1	Street Ad	ldress wn Ave				2815	JUL	-8 AF	9:	23			
EPA DEP DOL	Initial Amended Amendment				e, Zip Coo te NJ 08		***************************************		# 5 E	. 5 i	is it	ATR	0L			
DOH DCA	Emergency (i justification) Cancellation	ncluding	100	Name of Chad	Contact					Tele	ephone Nu	umber				
				FACIL	ITY INFO	RMATI	ON									
Name of Facility Where Judith Mrozek Priva		Place (3)		an d	t gi				of Facility (4) School (K-12)	II 12	4.00				
Street Address 12 Brown Ave		3.5						×	Subchapter 8 Other (i.e. pri etc.)	ivate 8	commer		lding	s, h	ome	s,
City (5) Lavallete NJ 08735								Squar 1000	e Feet +	# of	Floors		31dg. 35+	Age	е	
County (6) Ocean				County C	ode (7) ISE ONLY)		_	Curren	nt Use (Prior e	if bei	ng demoli	shed)				
Name of Monitoring Firm N/A	Hired by Building (Owner (8)		ASCM	No.			of Abat aco In	ement Cont	ractor	(9)					
Street Address	7 %							Addres					5-10-11			
City, State, Zip Code							110000000000000000000000000000000000000		p Code n NJ 0809	91						
Project Manager for Mor	roject Manager for Monitoring Firm							none No 753-9			License 00727	No.				
Start Date (10) 7/3/15		Scheduled	i Com	pletion [Date (11)		Name		IA Monitor							
Occupancy Status Durin	a Abatement (Chec	k Only One)					Addres	iS							
Facility Closed/Vac	ated During Entire F	Period of Al	atem		-	_	City, S	State, Zi	p Code							
Scope of Work (Check A	All That Apply)												-			
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			enova emoliti					Mir Glo	Containme i-Enclosure vebag Proce n-Exempted	edure				ure		
		I In I	ocati	on				110	LXCIIIptou	1741	4 14011 1 11				nent	
Locatio Asbestos-Containing TO BE AB	Material (ACM)	Used	ormali Sole ntenar	ly ly by		tos Con	escription taining I	Material			mount Specify		Τ	Тур		ш
In Fac	lity	Custo	(12)		(surfa	cing, VA	AT, or			F or LF)	Removal	Veball		Encapsulate	Enclosure
		Yes	No	N/A								_				
Exterior	Siding			X		Exte	erior Si	ding	-	16	32 SF	x	-	-		
,																
Name of Registered Wa	ste Hauler		N	IJDEP W	/aste	Cubic	Yards		Name of F	Regist	ered I and	fill				
United Containers			Н	lauler ID 2459		of Wa			G.R.O.V							
City, State Elm NJ						Dispo 7/8/1	sal Date 5	9	City, State Morrisvi		A 19607					
Completed by Anthony T Perna		Title Presid	dent				Signatur	9	7			Date 7/2/1	5			



				*			<u> </u>				
Date of Notification (1) Tuly 3,	200	5	Name o	of Building Owner/	Operator (2)	+ Son	2115 JUT-8	AN	1 9:	22	
Agencies Notified Type Notification □ EPA Initial			Street A	Address P.O.	Box	-	5 56[5]6				
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☐ Emergency (in	ncluding	-	Name	of Contact	. 1	, ,	Telephone Ni-	ne L			
DOH justification)			1	1/.	į "						
☐ DCA ☐ Cancellation				RY VINC	<u>n</u>		. 00.	>_ ^	701	1)	
Name of Coults 185 and Abstract in Table	Dl /	2)	FAC	ILITY INFORMAT			/A)				
Name of Facility Where Abatement is Taking	uto.				13	pe of Facility School (K-	*				
Street Address 330 Reser	Volu	, <	toe	e+		Other (i.e.	r 8 (Other than K-1 private & commerc	2) ial buil	dings	, hom	es,
City (5)	VO(2000		100	etc.) quare Feet	# of Floors		Olda	^	
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County (6) Mercer				Code (7) USE ONLY)	Cı	A : ~	ior if being demolis				
Name of Monitoring Firm Hired by Building O	wner (8'		ASCI	d No. a	Name of	Abatement Co		age			
EPC Technolo	Sie	5	7,00,	MA	E	5T 29	chaple	ie	5	Ir	36
Street Address Ro. Box 33	37				Street Add	dress Box	337	3			
City, State, Zip Code	A/ T	7	19	533	City, State	e, Zip Code	711 40	Λ	04	2	2
Project Manager for Monifori lg Firm	ME		Telepho	ne No.	Telephone	No.	License N	lo.	0	30	2
Start Date (10)	Cabadul			758-3365 Date (11)		SHA Monitor		25	54	4	
7-13-15	7-	-	-15	_	1		hnologies	I	nc	3	
Occupancy Status During Abatement (Check	Only Or	ne)		9±9	Street Add	iress	7				
Facility Closed/Vacated During Entire Pe	eriod of	Ahatem	ent		Pic	, Box	337				
☐ . Abatement Performed Outside of Norma						, Zip Code					
☐ Other – Describe:	Series a series					Egypt	117	201	5 7	~	
Scope of Work (Check All That Apply)		V2000			1000	TAKE	NJ (10-	53	2	
Scope of Work (Check All That Apply)											
≥3 sf or ≥3 lf	□_ F	Renova	tion			Full Containm	ent with Negative F	ressu	re		
≥160 sf or ≥260 lf		Demoliti	ion			Mini-Enclosur					
₹						Glovebag Pro	cedure d (*) and Non-Friat	lo Dra			
						Non-Exemple	d () and Non-Friat	T			
	10000	Locati								ement /pe	
Location of		Normall		De	escription of			-	Τ,	1	
Asbestos-Containing Material (ACM)		ed Solel intenar		Asbestos Con			Amount			m	
TO BE ABATED		todial S			I systems ins		(Specify	Remova	20	ıca	Enclosure
In Facility		(12)		-10.8000.00	icing, VAT, o miscellaneou		SF or LF)	on	Repair	psu	los
(13)		30 00		Ou let i	miscenarieou	15)		va	=	Encapsulate	ure
0 0 0	Yes	No	N/A					<u> </u>		6	
BOOF ARea	X			01.	ishing		600 SF	X	-		
Under Stairs on 1st fl.		X		4.89"FI	00R T	iles	30 SF	X			
								-			
Name of Registered Waste Hauler		0.5035	JDEP W auler ID		Yards	Name of	Registered Landfill				
EPC Technologies			170	00	6	Wasi	e Manage	nen	40	e P	A
City, State New Equat	UT.				sal Date 31~15	City, Stat		A			
Completed by	Title				Signature	~ ()	Da Da				
Steve Schenker		side	ent		Steen	Sch		7-	3-	15	



		1					<u> </u>				-
Date of Notification (1) 7-3-1	5		D	4 3	ane (-onst	Ruchion	B	ĽČ	9: 8	2
Agencies Notified Type Notification		Stre	eet Add	376	South	A	UE 453E31	13	ر را :	HR	OL
□ EPA Initial □ Amended		City	, State	e, Zip Code	Dia		- & L	70			
DOL Amendment #		Nar	ne of (COTCD Contact	Plains	>	Telephone Num		10		-
DOH justification Cancellation		I	000	Villa.	ne_		10 0.71	1	1.	/_	
Name of Facility Where Abatement is Taking		:1		ITY INFORMATI		of Facility (4)	-5	-		
Single family	Dw	ellir	19			School (K-1 Subchapter	2) 8 (Other than K-12)	1	=		
Street Address 3	h :	Str	J Jee	+	X		private & commercia		ings,	home	s,
City (5) S 1 h D1 is	- 1	(I F	- /	7076	Squar	e Feet	# of Floors	BJ	dg. A	ge -	
County (6)	5 [ode (7)		nt Use (Pri	or if being demolished	ed)	20	, =	-
Union	(0)		ASCM	SE ONLY)	Name of Abar	ngk	family 1)W	64	ling	
Name of Monitoring Firm Hired by Building On	wner (8)	, /	ASCM	N/A	EPC	TEO	thoolog	ies	,	In	6
Street Address	37				Street Address	Box	337		W.		
City, State, Zip Code	NT		9	522	City, State, Zi	p Code	714 40	A	26	12	2
Project Manager for Monitoring Firm	MO	Tel	ephon	e No.	Telephone No	E 37	License No		0	4 4	
Steve Schenken				758-3365	609 758		5 00	2	7	7	
Start Date (10)	Scheduled 7- 2			NOTE AND DESCRIPTION OF THE PROPERTY OF THE PR	Name of OSI		hnologies	I	nc		
Occupancy Status During Abatement (Check			1		Street Addres	SS	~				
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma	eriod of Ab	atemen Hours	t		City, State, Z		337				
Other – Describe:					New &	Egypt	NJC	183	53	3_	
Scope of Work (Check All That Apply)					П Би	! Containm	ent with Negative P	racciii	-		
23 sf or ≥3 lf ≥160 sf or ≥260 lf	De Re	novation molition			☐ Mir	ni-Enclosur ovebag Pro	e	103341			
	,				≥ No	n-Exempte	d (*) and Non-Friab	e Pro			
	A	ocation		De	andation of		.5		Ту	ement pe	
Location of Asbestos-Containing Material (ACM)	Used	Solely b		Asbestos Con	scription of taining Materia I systems insula	g Material (ACM)		71		En	Б
TO BE ABATED In Facility	Custo	dial Sta (12)	00000	surfa	cing, VAT, or miscellaneous)		(Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
(13)	Yes		N/A	outer	miscenarieous)			/al	7	late	ıre
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Exterior Walls				Signific	July						
								-			
			-	Cybir	Yards	Name of	Registered Landfill	<u></u>			L
Name of Registered Waste Hauler			DEP W	No. of Wa			te Manager		4	c F	A
EPC Technologies City, State	>	11	700		osal Date	City, Sta	ite	1 A	• 0	- 1	4.5
New Egypt	NJ	A.			20-15 Signature	Mori	risville P	te	200.0		
Steve Schenker	Pres	side	1+		Signature	Sch	she so	7-	-3	-/	5



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	DOH justification) Cancellation	m	ike Bre	inan		777 /	ーフつ	う	20	7
	Name of Facility Where Abatement is Taking Place (3)	FAG	CILITY INFORMAT		of Facility (4)				
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	Street Addrese	(((()				8 (Other than h				
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	City (5) Howell NJ	07	73 <i>i</i>	Squa	re Feet	# of Floors	1	Bldg. A		
	County (6)	Count	/ Code (7)	Curre	nt Use (Pri	or if being demo	lished)	50) t	_
4	Monmouth		USE ONLY)	$- S_i$	105/6	family	Di	will	175	
2	Name of Monitoring Firm Hired by Building Owner (8)	ASC	CM No.	Name of Aba	tement Con				7	
3	Erc lechnologies		MA	EPC	- 15e	chaol	eie	5	In	16
_	Ro. Box 337			Street Addres	Box	337	9			
J	City, State, Zip Code	AC	533	City, State, Z	ip Code		TA	04	72	9
5	Project Manager for Monithring Firm	Toloph	ione No.	Telephone No	Egy	P Licens	70	0	13	2
_	Steve Separate		758-3365	609 758	- 4			39	4	
_	Start Date (10) Scheduled C			Name of OSH	-IA Monitor	-			-	
3	July 24, 2015 Aug	4, 2	2015			nnologie	is I	nc		
C	Occupancy Status During Abatement (Check Only Only)			Street Addres	Box	337				
2	Facility Closed/Vacated During Entire Period of Abat Abatement Performed Outside of Normal Facility Ho	ement urs		City, State, Zi		301				
7	Other – Describe:			New &	Egypt	TU	08.	53	3	
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	EPC Technologies City, State	1/0	Dispos	sal Date	City, State)		0 0	- 1	A
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	Steve Schenker President	den r		Messo !	- OCKE	ha	1-	2-1		

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1	Street Address	Prodice		MIN	Street Addres	166	hnolee	1169	,	Ln	6	
-	Ro. Box	337			P.O.	Box	337					
U	City, State, Zip Code	TM	09	533	City, State, Zip	Code	71h sa	n	26	1.3	3	
	Project Manager for Moeif ril g Firm	, 140	Telephor	ne No.	Telephone No	FJY	License N	lo.	0	4 4		
=	Steve Schen	Kea			609 758		5 0	04	M	7		
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5	Facility Closed/Vacated During B	Entire Period of Abate	ement			Box	337					
3	Other – Describe:	i Normal Facility not	ui5 "		New E		NJ C	285	53	3		
	Scope of Work (Check All That Apply))			h	018						
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							SF OI LF)	Removal	Repair	Encapsulate	Enclosure	
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	Steve Schenker		dent-		Signature	Soll	1	7-2	3-1	5		
	CLOS ACTEDITION	111001	301.					-			-	



Date of Notification (1)				Name	of Buildin	g Owner/Operator (2)									
	15	_		Jos	eph and	Ahuva Seidenfe	eld	2015 JUL -8	AM	9: %	0					
Agencies Notified Type Notifica	ation			Street	Address											
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☐ DCA ☐ Emergen		ıdina		Pas	saic, N.	J. 07055										
(NJAC 5:23-8) justificati		Juling		Name	of Contac	t .		Telephone Numb	per							
☐ Cancellat	tion			Jos	eph and	Ahuva Seidenfe	eld									
				FA	CILITY IN	FORMATION										
Name of Facility Where Abatement is 1	Taking P	Place ((3)				Type of Facility (1000								
Resident							School (K-12)		C.							
Street Address				☐ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercia												
96/100 Ridge Ave.							homes, etc.)									
City (5)							Square Feet	# of Floors	- 11	Bldg. Age						
Passaic, N.J. 07055				T =			6,300Sf	3 Floors		95 y	rs.					
County (6)				Cour	nty Code (7	7)(STATE USE ONLY)		or if being demolis	hed)							
US; Passica CO.			. 1	<u></u>			Resident									
Name of Monitoring Firm Hired by Build	ding Ow	mer (8	3)	ASCM		Name of Abateme										
Ally Services, CO				021-	0016		n Environmenta	al Service, LLC.	0							
Street Address 57 East Durham St.						Street Address										
						14 Read Driv										
City, State, Zip Code						City, State, Zip Co										
Philadelphia, PA 19119						Sicklerville, I	NJ 08081									
Project Manager for Monitoring Firm				phone		Telephone No.		License No.								
Andy Miller	2 a la a di . I	- 10-			-7538	856-318-1341	-	01158								
Start Date (10) Start Date (10	Schedule		200			Name of OSHA N										
				_ ′ -	15		Environment	al Services, LLC	٠.							
Occupancy Status During Abatement (Street Address										
 ☑ Facility Closed/Vacated During Entil ☑ Abatement Performed Outside of New York 					oribo	14 Read Driv										
Time of Abatement: 7AM-11:30PM	/	PM-	i ioui	AM	CIDE	City, State, Zip Co										
Scope of Work (Check all that apply)		N 23		-		Sicklerville, N	1J 08081									
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23 sf or ≥3 lf 2160 sf or >260 lf		Ren Den	ovatio nolitio			☐ Mini-Enc	losure Procedure									
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			ocat						Ab	atem	ent T	уре				
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TO BE ABATED		Mair	ntena	nce/		stos Containing Ma e., thermal systems		Amount (Specify	Removal	epa	nca	nclo				
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Name of Registered Waste Hauler			L N	JDEP \	Manta	Cubia Vanda of	None of Decision			Ш		Ш				
Graham-Tech Environmental S	ervice,	LLC		auler II	No.	Cubic Yards of Waste	Name of Regist G.R.O.W. N	orth Landfill &	Tuliv	towi	1					
City, State				00346	000	Disposal Date	City, State					-				
14 Read Drive Sicklerville, NJ 0	8081						1	ntown Rd. Mor	risvil	le,P/	A					
Completed By (Print or Type)	Title					Signature .		Da	te	~	-	_				
Vernice Graham	Pres	sider	nt			Mela	10, 5/1	114/1	0-	30	40)				

ASB-41 MAY 11

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

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Date of Notification (1) 06/30/2015					ner/Operator pard of Ed		n	3)6	1		-5	
Agencies Notified Type Notification	n et Add	iress inther Pa	ath			WANN	- 1 20					
EPA initial Amended Amendment,#	C	Bitate, Zip Code The rit Pleasant, NJ 08742										
Emergency (in pustification) DCA [ustification] Cancellation	rduding		a of C	Corso				Telephone N	,) m h	1	0	4
Name of Facility Where Abatement & Taking	Place (3)	FIR	//CIL	TY INFOR	MATION	Type	of Facility (4)			-	5-1	
Memorial Middle school	F1800 (3)			(p.			School (K-12				7	-
Street Address 808 Laura Herbart Drive						A S	Subchapter 8	(Other than K- vate & comme	.12) rcial build	ings, I	namer	Б.
Čity (5) Point Pleasant							re Feel	ë of Floors		dg, Ag	10	
County (6) Ocean		1	nly O	ode (7) SE ONLY)		scho	los	if being demol	ished)			
Name of Monitoring Firm Hired by Building C Environmental Design.Inc	(B) ranw(TO THE PERSON NAMED IN COLUMN TO THE	SCM	No.			tement Cont poration	ractor (9)				
Street Address 6434 King Avenue suite 101					606	St 13	de Ave					
City, State, Zip Code Pennsauken, NJ 08109					07424							
Project Manager for Monitoring Firm Dennis				6-4545	973	hone N -225-8	3400	D1104				
Start Date (10) 07-01-2015	Schedule 07-01-2	d Co	letion D	ate (11)	Name J&S	e of OS	HA Monitor onmental	Laboratories	3			
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Facility Closed/Vacated During Entire F Abstement Performed Outside of Norm Other - Describe: start 10 am	Period of A nai Fecility	Hour			City,	State, Z	ip Code 1 07083	•			1	
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Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	d Solei intenar todial S (12)	nce/ Staff?		Description of Description of Description of Description Material (ACM) thermal systems insulation, surfacing, VAT, or other miscellaneous)					Repair	Encapsulate	Enclosure
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Name of Registered Waste Hauler			JDEP W		Cubic Yards	3		Registered Lar				
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City, State Woodland Park, NJ	-	· ·						ille, PA	Date		_	
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\	City, State, Zip Code Westfield, NJ 07090								50			
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	STATE US	de (7)		well	ness centa	r	ahed)					
r (8)	ASCM No. Name of Abatement Contractor (9) Lilich Corporation											
	Street Address 506 McBride Ave									EMIZOR		
	City, State, Zip Code Woodland Park, NJ 07424											
1			973-225-8400 01104									
	Dempletion Date (11) Name of OSHA Monitor J&S Environmental Laboratories											
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	equiled Opn (9) Fr (8) Pr (8) Remova Demolii Normal Used Sone Custodial (12) Yes No	NOTIFICATION O (Pursuant to Name of B Westfield Street Add 220 Clar City, State Westfiel Name of C Clark La FACILI S(3) County Cr (STATE US FACILI ASCM Talephon 201-565 eduled Completion D (O3/15 Iy One) d of Abstement actifity Hours Removation Demolition Is Location Normally Used Solely by Maintenance/ Custodial Stati? (12) Yes No N/A N/A N/A N/A N/A N/A N/A N/A	NOTIFICATION OF ASBESTOS (Pursuant to NJAC 8:80 a) Name of Building Owner, Westfield Area Y Street Address 220 Clark Street City, State, Zip Code Westfield, NJ 07091 Name of Conlact Clark Lagemann FACILITY INFORMA (3) Talephone No. 201-589-4378 equiled Completion Date (11) (03/15 ASCM No. Talephone No. 201-589-4378 equiled Completion Date (11) (03/15 Removation Demolition Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A NJDEF Waste Habler ID No. 18724 Di Title	Pursuant to NJAC 8:50 and 12:120	NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 3:60 and 12:120) Name of Euilding Owner/Operator (2) Westfield Area Y Street Address 220 Clark Street City, State, Zip Code Westfield, NJ 07090 Name of Contact Clark Lagemann FACILITY INFORMATION (STATE USE ONLY) (STATE USE	NOTIFICATION OF ASSESTOR SABLEMENT (Pursuant to NJAC 3:80 and 12:120) Name of Building Owner/Operator (2) Westfield Area Y Street Address 220 Clark Street City, State, Zip Code Wastfield, NJ 07090 Name of Conlact Clark Lagemann FACILITY INFORMATION Type of Pacility (4) School (X-1 2) Subchapler 5 Other (i.e. private) Street Address Solo McBride Ave City, State, Zip Code Woodland Park, NJ (1) Collected Address Solo McBride Ave City, State, Zip Code Woodland Park, NJ (1) Talephone No. Talephone No. 201-559-4378 S73-225-8400 eduled Completion Cate (11) Vone) Street Address City, State, Zip Code Woodland Park, NJ (1) City, State, Zip Code Union, NJ 07083 Renovation Demolition Renovation Demolition Renovation Demolition Asbestos Contsining Maierial (ACM) (i.e. thermal systems insulation, surfacing, VAT., or cither miscellaneous) Yes No N/A X TSI NJDEF Waste NJDEF Waste Disposal Date City, State City,	NOTIFICATION OF ASSESTOS ABATEMENT (Pureusant to NJAC 5:50 and 12:120) Name of Building Owner/Operator (2) Westfield Area Y Street Address 220 Clark Street City, State, 2ip Code Wastfield, NJ 07090 Name of Contact Clark Lagemann FACILITY INFORMATION Stippe of Pacility (4) School (x-2) Subchapler 8 (Other than X-Other (i.e., private & comment (i.e., private & comme	NOTIFICATION OF ASBESTOR ASSATEMENT (Pursuant to NJAO 548 bits and 12120) Name of Building Owner/Operator (2) Westfield Area Y Siteet Address 220 Clark Street City, State, Zip Code Westfield, NJ 07090 Name of Contact Clark Lagemann III FACILITY INFORMATION 29 (3) III FACILITY INFORMATION Type of Papility (4) School (K-12) Subchapler 5 (Other than K-12) City Figure Feet School (K-12) Subchapler 5 (Other than K-12) City Figure Feet School (K-12) Subchapler 5 (Other than K-12) Wellness centar (8) III FACILITY INFORMATION Type of Papility (4) School (K-12) Subchapler 5 (Other than K-12) City Figure Feet School (K-12) Subchapler 5 (Other than K-12) City Figure Feet School (K-12) Subchapler 5 (Other than K-12) City Figure Feet School (K-12) Subchapler 5 (Other than K-12) City Figure Feet School (K-12) Subchapler 5 (Other than K-12) City Figure Feet School (K-12) Subchapler 5 (Other than K-12) City State, Zip Code Woodland Park, NJ 07424 Talephone No. 201-559-4378 Filephone No. 201-559-4378 Sireet Address 206 McBride Ave City, State, Zip Code Union, NJ 07083 Full Containment with Negative Pressure Insulation, School (1) Sireet Address 2333 Route 22 West City, State, Zip Code Union, NJ 07083 Full Containment with Negative Pressure Insulation, School (1) School (K-12) Full Containment with Negative Pressure Insulation, School (1) School (1) Asbestor Containing Maierial (ACM) (i.e. thermal systems Insulation, School (1) School (1) Asbestor Containing Maierial (ACM) (i.e. thermal systems Insulation, School (1) School (1) Normally Description of Maierial (ACM) (i.e. thermal systems Insulation, School (1) School (1)	State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pureuant to NJAG 9:80 and 12:130) Name of Building Dwner/Operator (2) Westfield Area Y Steet Address 220 Clark Street City, State, 20 code Westfield, NJ 07090 Name of Caniact Clark Lagemann FACILITY INFORMATION Type of Facility (4) Subchapler 8 (Cliner than K-12) Subchapler 9 (Cliner than	State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAG Siso and 12:120) Name of Building Owner/Operator (2) Westfield Area Y Stock Address 220 Clark Street City, State, 2D Code Westfield, NJ 07090 Name of Conlact Clark Lagermann Clark Lagermann Type of Pacility (-) School (K-12) Subchapler & (Cither than K-12) Subchapler & (Cith		