

Date of Notification (1)	5/11/12			Name of Building Owner/Operator (2) Palmer Square Management, E.C. E.I.V.E.									
Agencies Notified	Type Notific	ation		Stree	t Address		amil Addo an area Midway statis	11=<1	briefle age				
EPA DEP	☐ Initial	d		City 5	State, Zip C		40 Nassau S	Treet III	==	9 %	2012	=	
DOL DOL	Amendm		-	Oity, c	State, Zip C	Pr	inceton, NJ	1 cm cm-1				_	
DOH DCA	justifica Cancella	tion)	•	Name	of Contac			Telephone Nun	he r	ודעמי	SUI 8	Ž.	
	Cariceila					Mike Casey			Lines	ī.	e sa whe	en inte	
Name of Facility When	e Ahatement is	Taking Place	e (3)	FAC	CILITY INF	20040	ALL COLOR						
Traine of Facility vines		Retail Sto							1				
Street Address				Subchapter 8 (Other than K-1							S.		
City (E)	44	Nassau S	treet				homes, etc Square Feet	c.) # of Floors	Тві	dg. A	ge		
City (5)		Princeto	n	Square reet #011 10013									
County (6)					nty Code (ed)							
	Mercer	D: 6			SE ONLY) Retail Stor							=	
Name of Monitoring Fit (8) TTI Fr	rm Hired by Bui ivironmenta			ASCM	INO.			mental Servic	, In	ıc.			
Street Address	IVIIOIIIICIIta	ii iiic.		-		Street Address		=					
12	53 North C	hurch Str	eet				PO				_		
City, State, Zip Code	loorestown	NII 0904	7			City, State, Zip C		vn, NJ 08501					
Project Manager for M		, NJ 0002	-	phone	No	Telephone No.	7 HICHO	License No.	=			_	
	Guilardi		1 300000		0-8800	[] - 레이크레이스 프랑이 전기 (1977년 1일 1977년 19	59-9688		493	3		_	
Start Date (10)		Scheduled (Comple	tion Da	ate (11)	Name of OSHA		TECO.					
6/21/12 7/13/12							<u>N</u>	MECS	-			_	
Occupancy Status Du Facility Closed/Vac				ment		Street Address	PO	Box 341					
☐ Abatement Perform	ned Outside of N	Normal Facili				City, State, Zip 0							
Other - Describe:		0PM			ks, NJ 08515	_			_				
Scope of Work (Check ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	call that apply)		enovat emolitio										
			Location				Abatement Type						
Location		Use	d Sole	y by		Description o				0000			
Asbestos-Containing TO BE AB IN Faci	ATED lity	′ c	ntenar ustodia Staff? (12)	al	Asbes (i.e.,	tos Containing Ma thermal systems surfacing, VAT other miscellane	insulation, , or	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure	
(13)		Yes	No.	N/A		otrici miscoliano	040)		_		late	ci.	
basement to	2nd Floor	-		×		pipe insula	ton	1000 LF	×				
New (Decides Wests Harles					Alests	Cubic Yards	Nome of Da	gistered Landfill					
					Waste No. 292	of Waste		S.R.R.F., Inc. 1	ndf	ill			
City, State						Disposal Date	City, State	Tullytown,	A		100.0		
Allentown, NJ Completed By Title					Signature		Date	7/6	/12				
Mahlon E. S	Mahlon E. Stevens Project Manager								7/6	12		_	

ASB-41 MAR 00 * Do not use this form for asbestos licensure exempted activities.

STEVENS	MIRONMENT
Servic	# 91/8971 2 INC
C. Heles	* 0400 d

			(Pursi	Jant to NJ	AC 8:60 and 5:1	6)	CHEC	41,76	di	-	A	
Date of Notification (1)	Correspondent and the second			Na	me of Build	ing Owner/Operat		NEG	3 1	M	E	1	
Agencies Notified	5/11/12			-			Square Man	agement, LI					
EPA	Type Notificati	on		Str	eet Addres	S	10 Nassau			0010	e e e		
□ DEP	Initial Amended			City	y, State, Zip	Codo	40 Nassau	Street JUL	9	2012	_	1	
DOL DOL	Amendmen			City	y, State, Zip		Princeton N	105/12				1	
⊠ DOH	☐ Emergency iustification		ing	Na	me of Conta		rinceton, N	- ADDF7	S, C0	NTROL NG	8	_	
☐ DCA	Cancellation			ING	ine or Conta	Mike Casey		Telephone I	PARI.	NC	- 0		
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Name of Facility Where	Abstement is Tal	ring Dla	00 (3)		ACILITY IN		-	contained the second	menonal so	ippetu i			
Tame or Lability Timere		tail St	0.000			ity (4) -12)							
Street Address		tan o	OIC	===		12)							
	32 Na	118221	Stree	t			Other (i.e.	er 8 (Other than , private & comm		2) ial buildings,			
City (5)	32110	*55uu	Direc				homes, e			DIJ. A		_	
, , -,	Pr	incet	n				Square Feet	# of Floors		Bldg. A	ge		
County (6)		meen	J11	I Co	unty Code	7) (STATE	(STATE Current Use (Prior if being der						
	Mercer			US	SE ONLY)	(I) (SIAIL	lished	1)					
Name of Monitoring Firm		Owne	r	ASCI	M No.	Name of Abate	Retail St	e		-	_		
(8)	MECS						es,	Inc					
Street Address				-		Street Address	vens Enviro	michiai SCI	,cs, .	IIIC.	_	_	
	PO Box 3	41				ooc. / iduless		Box 322					
City, State, Zip Code						City, State, Zip		DOX 322				=	
Cı	rosswicks, NJ	0851	5.			Oity, Otate, Zip		wn, NJ 0850					
Project Manager for Monitoring Firm Tel					e No.	Telephone No.		License No			335	=	
					98-4070		59-9688	License No	0049)3			
Start Date (10) Scheduled Comple						Name of OSHA	The state of the s		3043	,,,	_	=	
6/21/12 7/6/1								MECS					
Occupancy Status During Abatement (Check only one)						Street Address			==		-	=	
Facility Closed/Vacate	ed During Entire P	eriod o	f Abate	ement			PO	Box 341					
Abatement Performed	Outside of Norm	al Facil	ty Hou	ırs		City, State, Zip C			=		_	_	
Other - Describe: 7	AM - 3:30PN	1					·Crosswic	ks, NJ 0851					
cope of Work (Check a	II that apply)												
]≥3 sf or ≥3 lf		R R	enovat	ion		☐ Full Cor	ntainment with N	egative Pressure					
≥160 sf or ≥260 lf			emolitic			Gloveb:							
		1 1-				Non-Ex	empted (*) and N	on-Friable Proce	re			_	
			Location or ally		1		Abatement Type						
Location o			Solel		10.00		-	туре					
Asbestos-Containing M TO BE ABAT			ntenan ustodia			os Containing Mat thermal systems in		Amount	Z Z	D D	m	ŗ	
IN Facility							or	(Specify SF or LF)	Removal	Repair	Encapsulate		
(13)		(12)			other miscellaneo		va	~	Insc	-			
		Yes	No	N/A							ate	d	
basement to 2nd Floor						pipe insulate	on	1000 LF	×	-	+		
	sement to 2nd Floor					pipo moulati	011	1000 L1	^		+	_	
											+	-	
me of Registered Wast	e Hauler			וחבה	N/oaka 1	0.157							
Name of Registered Waste Hauler NJI					No.	Cubic Yards of Waste	Name of Reg	1					
Stevens Environmental Services, Inc.					.92	20 CU		R/R.F., Inc.	indf	ill			
City, State						Disposal Date	City State					=	
Allentown, NJ Completed By Title						7/6/12		Tullytown	<u>'A</u>				
	Title		sio at	N /		Signature	1	Date					
Mahlon E. Stevens Project					ager	- ////			5/11	/12			

ASB-41 MAR 00

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

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Date of Notification (1)	11/12			Nar	ne of Buildi	ng Owner/Operato Palmer	or (2) Square Man	agement, LL		<u> </u>	6	
Agencies Notified	Type Notification	on		Stre	et Address		40 Nassau S	J LI JUI	a	2012	r l	
EPA DEP	☐ Initial ☐ Amended				00 1 30		3	2012				
X DOL	Amendmen		_	City	, State, Zip		rinceton MI	08542ASBESTO	Our			
⊠ DOH	☐ Emergency justification)	19	Nan	ne of Conta		Inceton, NJ	4 1/3	HAG	30L 8		
☐ DCA	☐ Cancellation	í		I wan		Mike Casey		, Telephone N	, ieid	-		
	L	-		F.	ACILITY IN		-	4	=			
Name of Facility Where	Abatement is Tak	ing Plac	e (3)			ity (4)		(*			
	Ret	ail Sto	ore	************								
Street Address							School (K	er 8 (Other than K	2)			
	44 Na	ssau S	Stree	<u>t</u>		private & comme	al bu	ilding	s,			
City (5)						# of Floors	E	3ldg.	Age			
C	Pr	inceto	n									
County (6)	lercer				unty Code (E ONLY)	7) (STATE	Current Use (Prior if being dem	shed)		SW ==	
Name of Monitoring Firm		Owner		ASCN		None of About		Retail Sto	<u></u>			
	ironmental I			ASCI	A INO.		ment Contractor	mental Serv	10 T			
Street Address	iromnontal II	10.			10	es, I	nc.					
1253 North Church Street						Street Address	PO	Box 322				
City, State, Zip Code						City, State, Zip C		DON SEE	_		_	_
Moorestown, NJ 08057,								vn, NJ 08501				
					No.	Telephone No.		License No.				
Jim Guilardi (8					10-8800	(609) 2:	59-9688		049	3		
Start Date (10) Scheduled Comp					ate (11)	Name of OSHA						
6/21/12	_		7/6/	12			N	1ECS				_
Occupancy Status During						Street Address	DO.	D 241				
☐ Facility Closed/Vacate ☐ Abatement Performed	Outside of Norm	eriod of	Abate	ement				Box 341	_		_	
Other - Describe: 7			у поц	115		City, State, Zip C		1 NI 00515				
Scope of Work (Check all							Crosswic	ks, NJ 08515	-		_	
≥3 sf or ≥3 lf X ≥160 sf or ≥260 lf	тиа арруу	X Re □ De	novat molitic			☐ Mini-End ☐ Gioveba	ag Procedure	egative Pressure	9			
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Location of			ormally							Тур		- 1
Asbestos - Containing Ma		Used Main	tenan		Asbesto	Description of as Containing Mate		Amount				
TO BE ABATED Custodia						hermal systems in	nsulation.	(Specify	Remova	Repair	Encapsulate	Enclosure
IN Facility Staff? (13) (12)						surfacing, VAT, other miscellaneo		SF or LF)	lova	¥-	apsu	US0
Yes No				N/A			%i				ilate	6
basement to 2nd Floor						nina inavitat	1000 1 5	15	\dashv	-	\dashv	
basement to 2nd Floor						pipe insulate	_1000 LF	×		_	_	
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AND 1 AND 10				auler ID	No.	Cubic Yards of Waste	Name of Regi		20-000			
Stevens Environmental Services, Inc.				182		_20 CU		R.R.F., Inc. 1	ndfi	.11		
ity, State	Allentown, N	II				Disposal Date	City,/State	T-11				
ompleted By	Title	13		100	<u> </u>	7/6/12/, (L \	Tullytown,	<u>A</u>			_
Mahlon E. Stevens Project M				Man	ager	Signature		Date	/20/	/12		
Mahlon E. Stevens Project 1					A	- 1 /			1201	14		



Date of Notification (1)			Mam	o of Duildin	= O	(0)				
	12				g Owner/Operato phens Par		EGEI			
Agencies Notified Type Notified Type Notified Initial			Stree	t Address 97 Buc	kingham A	venue	,!!!! 9	112		
DEP Amende DCA (NJAC 5:16) Amendn DHSS Emerger	nent#	dina	City, Pe	State, Zip (erth Am	boy, NJ 08	8861				
DCA justificat Cancella	ion)		Name Fi	e of Contact r. Walte	er er		Prelenhone NV	원r &		
			FA	CILITY IN	FORMATION	-e.F.2407344034	or desired and a substitute of	Free State Contract on		
Name of Facility Where Abatement is			-							
Saint Stephens	Conve	ent to	Rec	tory						
Street Address 97 Buckinghar	n Ave	nue			8 (Other than K- private & commer .)	I buildings,				
City (5) Perth Amboy					# of Floors	Bldg. Age				
County (6)			LCau	-t. C-d- (WOTATE LINE OUT	7500 sf	3	100 + yrs		
Middlesex			Cou	nty Code (/)(STATE USE ONLY		rior if being demo	ned)		
Name of Monitoring Firm Hired by Buil	ding Own	er (8)	ASCM	No.	Name of Abate	nent Contractor (to Conven			
TTI Environmental Ir							estos Aba	ment Corp.		
Street Address 1253 North Church S	4			***	Street Address		•			
	ι.				17 Thor	et				
City, State, Zip Code	7				City, State, Zip		NII 07704			
Moorestown, NJ 0805 Project Manager for Monitoring Firm)/	1=				ng Branch,				
Mike Stocku		0.53650	lephone	NO. 10-8800	Telephone No. 732-222-	8372	License No.			
Start Date (10)	Schedule	d Compl	etion Da	te (11)	Name of OSHA		00040	V		
7/12/12	Schedule 7	1	31 /	12	n/a					
Occupancy Status During Abatement (Street Address			×		
▼ Facility Closed/Vacated During Enti	re Period	of Abate	ement							
Abatement Performed Outside of N Time of Abatement:AM	ormal Fac PM/	ility Hou	ırs - Des I	AM						
Scope of Work (Check all that apply)										
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf		Renova Demolit			☐ Mini-Er ☐ Gloveb	ntainment with Ne nclosure ag Procedure	egative Pressure			
		Is Loca	ation			complete () and iv	That have Froced	Abatement Type		
Location of		Norm Jsed So			Description					
Asbestos-Containing Material (ACN TO BE ABATED	''	Mainten	ance/		stos Containing N rmal systems inst		Amount (Specify	Enclosure Encapsulate Repair Removal		
IN Facility (13)	0	ustodial (12			VAT, or		SF or LF)	psur		
(13)	Ye				other miscellar	leous)		ate		
1st, 2nd & 3rd Floors				AC C	eiling & Wa	all Plaster	20 200 -	Ď o o o		
1st Floor,2nd and 3rd Fl	oors		×		Linoleum	all I lastel	20,200 s			
Basement					Linoidam		755 sf			
The state of the s		-		TSI			185 LF			
Name of Registered Waste Hauler			NJDEP V	Maste	Cubic Yards of	Non (D	1			
Finishing Touch Asbes	tos		Haule 2		Waste 30 C		stered Landfill VS Landfill	North		
City, State Oceanport, NJ 07757-				Disposal Date 8/3/12	City, State Morrisv	ille, PA	2			
Completed By (Print or Type)			Signature		e 10	c C ;				
Joseph P. Miller		Pre	siden	t	3	a res	: SHK	3/12		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1) O
Agencies Notified Type Notification Street Address ASSEST CONTROL & Notification Street Address ASSEST
Agencies Notified EPA
EPA
□ DCA
Amendment # Emergency (including justification) Cancellation
CA (NJAC 5:23-8) Emergency (including published and pu
Cancellation FACILITY INFORMATION Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12 Other (Le, private and comme homes, etc.) Subchapter 8 (Other than K-12 Other (Le, private and comme homes, etc.) Square Feet \$ of Floors Square Feet \$ of Floo
Street Address Subchapter 8 (Other than K-12 Subchapter
Name of Facility Where Abatement is Taking Place (3) Sireet Address Sireet Address City (6) County (6) Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) Name of Abatement Contractor (9) FA SERVICES CORP Street Address City, State, Zip Code You To De Manager for Monitoring Firm Telephone No. License No. Ol 74 Start Date (11) Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement Location of Abatement Location of Abatement Demonition Location of Abatement AM. PM — AM Scope of Work (Check all that apply) Location of Abatement Type Scope of Work (Check all that apply) Location of Abatement Type Normally Used Solely by Maintenance/ Cuts City State, Zip Code Mini-Enclosure Mini-Enclosure Mini-Enclosure Mini-Enclosure Normally Used Solely by Maintenance/ Cuts City State, Zip Code Mini-Enclosure Abatement Type Abatement T
Street Address School (K-12) Subchapter 8 (Other than K-12 Other (Le., private and comme homes, etc.) Subchapter 8 (Other than K-12 Other (Le., private and comme homes, etc.) Other (Le., private and comme homes) Other (Le., private and comme homes) Other (Le., private and c
Street Address City (5) County (6) County (7) County (7) County (8) Name of Monitoring Firm Hired by Building Owner (8) Street Address City, State, Zip Code City, State, Zip
County (6) County Code (7)(STATE USE ONLY) Current Use (Prior If being demoli)
City (5) County (6) County Code (7)(STATE USE ONLY) Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) Street Address City, State, Zip Code
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Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Rand
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Rand
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Street Address 2 O Z Angus and Building Owner (8) ASCM No. Street Address 2 O Z Angus and Building Owner (8) ASCM No. Street Address 2 O Z Angus and Building Owner (8) ASCM No. Street Address 2 O Z Angus and Building Owner (8) ASCM No. Street Address 2 O Z Angus and Building Owner (8) ASCM No. Street Address 4 2 City, State, Zip Code Gu Tenberg NJ 0, 293 Telephone No. 1 City, State, Zip Code Gu Tenberg NJ 0, 293 Telephone No. 1 City, State, Zip Code Gu Tenberg Name of OSHA Monitor EA SERVICES CORP Street Address St
Street Address 2 O Z Lengus and Relation City, State, Zip Code Ling of Possion, P.H. 1940 City, State, Zip Code Ling of Possion, P.H. 1940 City, State, Zip Code Ling of Possion, P.H. 1940 City, State, Zip Code Ling of Possion, P.H. 1940 City, State, Zip Code License No. License No. License No. 201 295 1700 01074 Start Date (11) Scheduled Completion Date (11) Name of OSHA Monitor EA SERVICES CORP Street Address Street Address Same as about City, State, Zip Code City, State, Zip Code City, State, Zip Code License No. 201 295 1700 City, State, Zip Code City, State, Zip Code Street Address Same as about City, State, Zip Code City, State, Zip Code Street Address Same as about City, State, Zip Code Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement AM PM PM- AM Scope of Work (Check all that apply) Asbestos-Containing Material (ACM) In Be ABATED In Facility (12) Asbestos Containing Material (ACM) (Specify SF or LF) Abatement Type Abatement Type Abatement Type Asbestos Containing Material (ACM) (Specify SF or LF) Street Address Same as about City, State, Zip Code City, State, Zip Code City, State, Zip Code Abatement Type Abatement Type Abatement Type Abatement Type Abatement Type Asbestos Containing Material (ACM) (i.e., thermal systems insulation, Specify SF or LF) Scope in Toda Containing Material (ACM) (i.e., thermal systems insulation, Specify SF or LF) Street Address Same as about Abatement Type Abatement T
Street Address 2 0 2 Kengus and Blod Act Street Address 426 69 M St. # 2 City, State, Zip Code
City, State, Zip Code City, State, Zip Code City, State, Zip Code City, State, Zip Code Gu Tenberg Froject Manager for Monitoring Firm Felephone No. Telephone No. Cocupancy Status During Abatement (Check only one) Facility Closed/Nacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: AM. PM/ PM- AM Scope of Work (Check all that apply) State Of State (Table Abatement) City, State, Zip Code Gu Tenberg NJ 0, 293 Telephone No. License No. 10074 Name of OSHA Monitor EA SERVICES CORP Street Address City, State, Zip Code City, State, Zip Code City, State, Zip Code Street Address Same as about City, State, Zip Code City, State, Zip Code Time of Abatement: AM. PM/ PM- AM Scope of Work (Check all that apply) Street Address City, State, Zip Code
City, State, Zip Code Code
Project Manager for Monitoring Firm Telephone No. Teleph
Project Manager for Monitoring Firm Telephone No. Telephone No. Compared
Start Date (1 ⁿ) Scheduled Completion Date (11) Name of OSHA Monitor
Start Date (1n) Scheduled Completion Date (11) Street Address Same as about City, State, Zip Code
Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: AM- PM PM- AM Scope of Work (Check all that apply) Scope of Work (Check all that apply) Street Address Same as about
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Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: AM- PM PM- AM Scope of Work (Check all that apply) Scope of
Time of Abatement: AM- PM PM- AM Scope of Work (Check all that apply) Renovation Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Normally Used Solely by Maintenance/ Custodial Staff? (12) Abatement Type Ab
Scope of Work (Check all that apply) Scope of Work (Check all that apply) Scope of Work (C
Solution
Demolition ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) (12) Other miscellaneous) Abatement Type
Non-Exempted (*) and Non-Friable Proceds Non-Exempted (*) and Non-Friable Proceds
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Is Location Normally Description of Asbestos Containing Material (ACM) Amount (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Abatement Type About Amount (Specify SF or LF)
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Used Solely by Maintenance/ Custodial Staff? (12) Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) Amount (Specify SF or LF)
IN Facility Custodial Staff? surfacing, VAT, or SF or LF)
IN Facility Custodial Staff? surfacing, VAT, or SF or LF)
(13) other miscellaneous)
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bosetient 00 Knortile+Mastic 700 St 0000
basement 00 Pipe insulation WOOLF 0000
Insertent to floor 1 0 0 Westigal in Wall + Preciousition 240 LF 0000
Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill
Service Transport Group Hauler 10 No Waste Bp Sanitary Land 11
City State Disposal Date
58. Pules Lane, New Caster, DE TRD Bulle Vernon P.A.
00 7 4 2 2 7 2 7 2 7 2 7 2 7 2 7 2 7 2 7 2
GINA SALVADOR OFFICE NANAGER Efred
ASB-41

Name of Facility Where Abatement is Tal	king Place (3)
Street Address	
125 Dunnel	1 Rd
City (5) Haplewood, L	J. 07040
County (6)	County Code (7)(STATE USE ON

*****	Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12)					Abatement		
Location of Asbestos-Containing Material (ACM) IO BE ABATED IN Facility (15)				Description of Astrestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellamours)	Amount (Specify SF or LF)	Removal	Repair	Encapsular
	Yes No		NA					8
1st floor to 2nd floor			図	Vertical in wall, pipe insoldior	240 LF	阿		
2nd Hool			K	Floor tile + Hostic	314 SF	D		
Ist Floor			¥	floor tile + Modic	8 SF	Ø		
occurrent north-test side			253	window Caulk	75F	D		
baserent			₩.	window alazingan window	TSE	M		īd
boiler roots			123	tank insulation	120SF	Ø	П	İ
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roof-Main			Ì	root vent floshing	DSF	K		
roof-Main			Q	roof cerent	HOSE	(X)		la
roof-northside			D	roof tor	25 SF	(XI		
coof west-side			[2]	roof tar	15 SF	Ø		ū
Entrance east side			应	firedoor insulation	15 SF	Ø		D
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Date of Notification (1)	2		_	of Building	Owner/Operator (2)				
Agencies Notified Type Notification	~			Address	- 11	treet	th JUL	9_20	12 12	
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☐ DCA ☐ Emergency (inc	luding			nbr		7	Telephone Nun	JIIIU		
(NJAC 5:23-8) justification)				of Contact	Micallia recent	eathFada' .				
				SOV:						
Name of Facility Where Abatement is Taking	Place	(3)	FAC	ALIII IIV	CRIMATION	Type of Facility	(4)	-		
TRINITAS HOSPITAL	•					School (K-12)			
Street Address 225 WILLIAMSON	কা	n e	ET				3 (Other than K-1 rivate and comme	al buildings,		
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County (6)			Coun	ty Code (7	or if being demol	ed)				
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City, State, Zip Code					278	27093				
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Project Manager for Monitoring Firm		reie	phone I	NO.	2012CL	1700	OIO.	1		
Start Date (10) / Sched	uled C	omple	tion Dat	te (11)	Name of OSHA	Monitor	1010		***	
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Occupancy Status During Abatement (Check	only o	ne)			Street Address					
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Time of Abatement: 7:00 AM-3:00 PM	M	PM-	5 - Des	AM	City, State, Zip C	ode				
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☐ >3 sf or >3 lf	₩ Re	novati	on		☐ Full Con	tainment with Ne closure	gative Pressure			
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Name of Monitoring Firm Hired by Building Ov	ASCN				tement Cor		20									
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City, State, Zip Code	070	- 1			y, State, Z											
Project Manager for Monitoring Firm	UIC	Telepho	ne No	. То	lephone N		G, NJ License	019)							
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* Do not use this form for asbestos licens > exempted activities.



State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

	(Pt	(Pursuant to NJAC 8:60 and 12:120)										MC gaygo	Contraction of the Contraction o				
Date of Notification (1)	******		Litt		PLC	WE	12	PA	A)	FR	到那里						
Agencies Notified EPA DEP DOL Amended Amendment # Emergency (in justification) Cancellation		- [City, Sta Ger Name of	ddress Rete, Zip Co Kley Contact Nd Ye	oos Her WPR	ght.	t	nvell NJ 9	79/2	JUL 2 enhone.N	2 3 2012 12						
Name of Facility Where Abatement is Taking	Place (3)		FACII	LITY INFO	ORMATI	ON	-	of Facility (5000		Bar Arabar	(ber		-			
Street Address	W.S.			V				School (K-1 Subchapter Other (i.e. p etc.)	8 (Othe) il buildings, homes,						
City (5)										Floors	Bldg. Age						
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Name of Monitoring Firm Hired by Building Or	wner (8)		ASCM No. Name of Abatement Contractor (9)							(9)							
Street Address			Street Address														
City, State, Zip Code					City, St	tate, Zi	p Code										
Project Manager for Monitoring Firm		Telepho	ne No.		Teleph	one No).		License	Э.							
Start Date (10)	d Con	npletion	Date (11)		Name	of OSH	IA Monitor			•							
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire Pe			Street Address ement														
Abatement Performed Outside of Norma Other – Describe:	I Facility	Hours	5			City, S	tate, Zi	p Code			,						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 if ≥160 sf or ≥260 if	-	enova	3-2200 PG - 1				Min Glo	Containm i-Enclosur vebag Pro n-Exempte	re cedure		ressur		e				
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City, State					Dispos	sal Date		City, Sta	te			20					
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Print Form

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) Agencies Notified Type Notification Street Address □ EPA ☐ Initial 1019 e cone DOLWD Amended City, State, Zip Code 团DHSS Amendment # Pal Mux ☐ Emergency (including DCA (NJAC 5:23-8) justification) Name of Contact Telephone Ni □ Cancellation **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Subchapter 8 (Other than K Street Address Other (i.e., private and comi cial buildings, Ve 1014 homes, etc.) City (5) Square Feet # of Floors Bldg. Age 1938 Wus County Code (7)(STATE USE ONLY) County (6) Current Use (Prior if being dem shed) racont -Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Health+= Street Address Street Address 318 City, State, Zip Code City, State, Zip Code Hammonton Project Manager for Monitoring Firm Telephone No. 1111 Proctor 1009-704-885 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 7/10/112 7 120 112 Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-_ Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure Mini-Enclosure
Glovebag Procedure
Non-Exempted (*) and Non-Friable Proce ≥3 sf or ≥3 lf
 ≥160 sf or ≥260 lf Renovation Demolition Is Location Abatement Type Normally Description of Location of Used Solely by Remova Encapsulate Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify **Custodial Staff?** IN Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A 1 Ø Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste-HOTIZOR Slows City, State City, State Disposal Date renton BD tide Completed By (Print or Type) Title Signature/ ite

Do not use this form for asbestos licensure exempted activities.

ASB-41

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Date of Notification (1) Name of Building Owner(Operator (2)	* *			CATION	tate of New Jerse N OF ASBESTOS to NJAC 8:60 and	ABATE		10188				Marine.	94L).
EPA DOP Initial Amended Amended Amended Amended Amended Amended Amended Newark NJ 07105 Name of Facility Where Abstement is Taking Place (3) FACILITY INFORMATION Name of Facility Where Abstement is Taking Place (3) FACILITY INFORMATION School (K-12) School (Date of Notification (1)	X		Name o	of Building Owner/0	Operato	r(2) 5	GET	1988 1	E	In		
City, State, Zip Code Amendment # Emergency (including Bob Witenburg Newark NJ 07105 Name of Facility Where Abatement is Taking Place (3) FACILITY INFORMATION Type of Facility (4) School (K-12) School (K-								JIII a	712	-		The second second second	
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EAI, Inc Street Address 50 Prescott Street Address 50 Prescott City, State, Zip Code Jersey City Project Manager for Monitoring Firm Robert Carvalho Scheduled Completion Date (11) July 20, 2012 Scheduled Completion Date (11) September 30, 2012 Scheduled Completion Date (11) Abatement Performed Outside of Normal Facility Hours Other - Describe: Saf or ≥3 if ≥160 sf or ≥260 if Asbestos-Containing Material (ACM) TO BE ABATED In Facility In 13) Telephone No. 201-393-0010 201-333-8855 0117 Telephone No. 201-333-8855 0117 No. Telephone No. 201-333-8855 0117 No. Scheduled Completion Date (11) September 30, 2012 Street Address 235 Virginia Ave City, State, Zip Code Jersey City NJ 07304 Street Address 235 Virginia Ave City, State, Zip Code Jersey City NJ 07304 Full Containment with Negati Mini-Enclosure Mini-Enclosure Mini-Enclosure Mini-Enclosure Mini-Enclosure Non-Exempted (*) and Non-F N	Essex					THE PROPERTY OF THE PROPERTY OF THE PARTY OF	r if being dem	shed)				
235 Virginia Ave City, State, Zip Code Jersey City	EAI,Inc	Owner (8)	237.5	M No.								
Jersey City Project Manager for Monitoring Firm Robert Carvalho Telephone No. 201-395-0010 201-333-8855 20117 Start Date (10) July 20, 2012 September 30, 2012 September 30, 2012 Street Address 235 Virginia Ave City, State, Zip Code Jersey City NJ 07304 Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Asbestos-Containing Material (ACM) In Facility (13) Is Location f Asbestos-Containing Material (ACM) In Facility (13) Telephone No. 201-333-8855 20117 Name of OSHA Monitor Green Enviro LLc Street Address 235 Virginia Ave City, State, Zip Code Jersey City NJ 07304 Street Address 235 Virginia Ave City, State, Zip Code Jersey City NJ 07304 Fressure Full Containment with Negati Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-F Value Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Multiple layers of Floor Tile 1500 SF x	50 Prescott			*		1 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3			Т				
Robert Carvalho 201-395-0010 201-333-8855 0117 Start Date (10) July 20, 2012 Scheduled Completion Date (11) September 30, 2012 Cocupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe: Scope of Work (Check All That Apply) 23 sf or ≥3 lf ≥160 sf or ≥260 lf Renovation Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Building- 84 Lister Ave Newark NJ X Multiple layers of Floor Tile Name of OSHA Monitor Green Enviro LLc Name of OSHA Monitor Green Enviro LLc Name of OSHA Monitor Green Enviro LLc Street Address 235 Virginia Ave City, State, Zip Code Jersey City NJ 07304 Pressure Pressure Abatement Type	200 700 (200 pm)												
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Scope of Work (Check All That Apply)									-				
Abatement Performed Outside of Normal Facility Hours Other – Describe: Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Pressure St. Cocation Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Building-84 Lister Ave Newark NJ X Interior/Exterior Window Putty 1300 LF X Multiple layers of Floor Tile 1500 SF X City, State, Zip Code Jerson Jersey City NJ 07304 Facility Nini-Enclosure Nini-Enclosure Nini-Enclosure Nini-Enclosure Non-Exempted (*) and Non-F Abatement Type Abatement Type Non-Exempted (*) and Non-F Non-Exempted (*) and Non-F Abatement Type Non-Exempted (*) and Non-F Abatement Type Non-Exempted (*) and Non-F Non-Exempted (*) and Non-F Abatement Type Non-Exempted (*) and Non-F Abatement Type Non-Exempted (*) and Non-F Non-Exempted (*) and Non-F Abatement Type Non-Exempted (*) and Non-F Non-Exempted (*) and Non-F Abatement Type Non-Exempted (*) and Non-F Non-Exempted (*) and Non-F Abatement Type Non-Exempted (*) and Non-F Non-Exempted (*) and Non-F Abatement Type Non-Exempted (*) and Non-F Non-Exempted (*) and Non-F Abatement Type Non-Exempted (*) and Non-F Non-Exempted (*) and Non-F Abatement Type Non-Exempted (*) and Non-F Non-Exempted (*) and Non-F Abatement Type Non-Exempted (*) and Non-F Non-Exempted (*) and Non-F Abatement Type Non-Exempted (*) and Non-F Non-Exempted (*) and Non-F Abatement Type Non-Exempted (*) and Non-F Non-Exempted (*) and Non-F Abatement Type Non-Exempted (*) and Non-F Non-Exempted (*) and Non-F Abatement Type Non-Exempted (*) and Non-F Non-Exempted (*) and Non-F Abatement Type Non-Exempted (*) and Non-F Non-Exempted (*) and Non-F Abatement Type Non-Exempted (*) and Non-F Non-Exempted (*) and Non-F Abatement Type Non-Exempted (*) and Non-F Non-Exempted (*) and Non-F	Occupancy Status During Abatement (Chec	k Only O	ne)			Street	Address		-		1000		
Abatement Performed Outside of Normal Facility Hours Other – Describe: Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Renovation Demolition Renovation Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-F Normally Used Solely by Maintenance/ Custodial Staff? (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Renovation Mini-Enclosure Glovebag Procedure Abatement Type Renovation Type Renovation Normally Used Solely by Maintenance/ Custodial Staff? (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Renovation Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-F Type Renovation Type Ren	Facility Closed/Vacated During Entire F	eriod of	Abatem	ent	31	235	Virginia Ave		21/00/2000				
≥3 sf or ≥3 lf	Other – Describe:	ıal Facilit	y Hours			37		14					
≥160 sf or ≥260 lf	Scope of Work (Check All That Apply)			1000									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A Building- 84 Lister Ave Newark NJ Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A Interior/Exterior Window Putty Multiple layers of Floor Tile Amount (Specify SF or LF) Type Abatement Type Abatement Type About Normally Used Solely by Maintenance/Custodial Staff? Republic Interior Secretarion Window Putty Amount (Specify SF or LF) Republic Interior Secretarion Window Putty Amount (Specify SF or LF) Republic Interior Secretarion Window Putty Amount (Specify SF or LF) Republic Interior Secretarion Window Putty Amount (Specify SF or LF) Republic Interior Secretarion Window Putty Amount (Specify SF or LF) Republic Interior Secretarion Window Putty Amount (Specify SF or LF) Republic Interior Secretarion Window Putty Amount (Specify SF or LF) Republic Interior Secretarion Window Putty Amount (Specify SF or LF) Republic Interior Secretarion Window Putty Multiple layers of Floor Tile		Name of the last o				×	Mini-Enclosure Glovebag Proce	edure					
Maintenance/ Custodial Staff? (12) Yes No N/A Building- 84 Lister Ave Newark NJ Maintenance/ Custodial Staff? (12) Maintenance/ Custodial Staff? (12) Yes No N/A Maintenance/ Custodial Staff? (12) Yes No N/A Interior/Exterior Window Putty Maintenance/ (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Assestos Containing Material (ACM) (Specify SF or LF) Page Value Mount (Specify SF or LF) Assestos Containing Material (ACM) (Specify SF or LF) Assestos Containing Material (ACM) (Specify SF or LF) Page Value Multiple layers of Floor Tile Mount (Specify SF or LF) Assestos Containing Material (ACM) (Specify SF or LF) Page Value Multiple layers of Floor Tile		1	Normall	у	Des	cription				77.5	bate	ment	
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Multiple layers of Floor Tile 1500 SF x	Duilding 041 inter A	Yes	No									ate	œ'
	building- 84 Lister Ave Newark NJ	-		X									
45.41 0-25 - 29 4 1									-	_	4		
1'x1' Ceiling tile w/glue 575 SF x		-			1'x1' Ceil	ing tile	w/glue	575 SF	Х	1			

		_ _	aitipio	layord or ric	of The	1000 01
			1'x1' (Ceiling tile w/	glue glue	575 SF
Name of Registered Waste Hauler Tri-state Transfer Associate		Hauler ID No of Maste				Registered Lar Enterprise
City, State Bronx NY			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	sposal Date 20/12	City, State Waynes	
Completed by Martin A Pedraza	Title Owner			Signature Mostin	A. Pe	Raza

ASB-41 (R-06-08)

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05/12

1	Normal	ly	Description of		Abatement Type			
Ma	intenar	nce/	Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Remov	Repa	Encapsu	Enclosi
Yes	No	N/A	100 000 000 000 000 000 000 000 000 000		<u>a</u>	=	late	ure
		x	Fire Door	2 Doors	×			
			Pipe Insulation	10 LF	×			
	Use Ma Cus	Normal Used Sole Maintenar Custodial S (12)	Yes No N/A	Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A No N/A Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A X Fire Door Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Amount (Specify SF or LF)	Normally Used Solely by Maintenance/ Custodial Staff? (12) Pes No N/A No N/A Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) SF or LF) On N/A Amount (Specify SF or LF) On N/A X Fire Door Z Doors	Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A No N/A Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Amount (Specify SF or LF) Other miscellaneous)	Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A No N/A Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Amount (Specify SF or LF) Type Type Type X Per Door A provided the p



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Date of Notification (1) 07/05/2012			Name of Building Owner/Operator (2) NJ Department of Treasury									E		1	1	
Agencies Notified	Type Notification			Street A	•	3.77			TUP!	, (U)	<u> </u>	=			Charles Spinster	12000
EPA DEP X DOL	Initial Amended Amendment			City, Sta	ate, Zip C	ode	ue		11111	JU	L	-20)12_	-	1	A STATE OF THE STA
Ĭ DOH DCA	Emergency (justification) Cancellation	including			f Contact DeAnge			ž.	1 -	ndig	lephone	NR	Neg-			1 10 10 10
Name of Facility Where	Abatement is Takin	a Place (5/	FACI	ILITY INF	ORMAT	ION	7	of Famility (4)	anal traffic	la de		AND DESCRIPTION OF	Astron as	
NJ DOT Fernwood	Facility	y riace (.	3)					Type of Facility (4)						10 to 50	wind state	1000
Street Address 1035 Parkway Ave	enue							×	School (K-1; Subchapter Other (i.e. pretc.)	8 (Oth		12 cia		dings	, hom	es,
City (5) Ewing									re Feet	1	of Floors			Bldg. /	\ge	
County (6) Mercer					Code (7) USE ONL	o			nt Use (Prio trical build		ing den	sh	ed)			
Name of Monitoring Fir USA Environment				ASCN	/I No.			ame of Abatement Contractor (9) Kielczewski Corporation						-		
Street Address 344 West State St	reet								ss nung Ave			Т				
City, State, Zip Code Trenton, NJ 08618							City, State, Zip Code West Orange NJ 07052					_				
Project Manager for Mo Bill Weisgarber	Project Manager for Monitoring Firm Bill Weisgarber						Telephone No. Licer 973-243-9872 011					No).			
Start Date (10) 07/02/2012							The state of the state of the state of		A Monitor	al		Т				
Occupancy Status Duri	ng Abatement (Chec	k Only Or	ne)				Street		950			-			-	
Facility Closed/Va	cated During Entire F	eriod of	Abaten													
Other – Describe:	ned Outside of Norm Facility operated duri	al Facility ng busine	Hours	irs					p Code NY 1174	1						
Scope of Work (Check A	ні і пат Арріу)	×	•			Full Containment				8 80						
≥ 25 si 0i ≥ 3 li ≥ 160 sf or ≥ 260 lf		-	Renova Demolit				Full Containment with Nega Mini-Enclosure Glovebag Procedure					at Pressure				
		T					×	No	n-Exempted	(*) ar	d Non-I	ıble	Pro	cedur		
Locatio	n of		Locati Normal	100000		-~								Abate Ty	emen pe	t
Asbestos-Containing	Material (ACM)	Use	d Sole	ly by		tos Cont	scription taining M	aterial		A	mount				m	
<u>TO BE AB</u> In Fac (13)	ility		todial S (12)		(i.e.	surfa	systems cing, VA niscellan	T, or	tion,		Specify F or LF)		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A									_		ate	e.
Storage	Storage Room x					VAT	and ma	astic		•	12sf		x			
Office/ Bre				VAT	and ma	astic		3	378sf		x					
Bathro	om	х				VAT	and ma	astic			28sf		x			
Exterior w		х				wind	dow car	ulk		2	,080lf		x			
Name of Registered Wa	ste Hauler			JDEP Wauler ID		Cubic of Was			Name of R			II				
Circle Rubbish	-			8816	. 10.				Tullytow		source	a	cility			
City, State Linden NJ		Title					City, State Morrisville PA			4						
Completed by Slawomir Kielczews	dent			Signature Kielcoenski				ate 7/05/2012								

					to NJAC				BI		F			- ES	7	•
Date of Notification (1) 07/05/2012					of Building R ACAD		Operator	(2)	IN.	5 🛡			1 15			
_	Type Notification			Street A	Address RK STR	EET				JU	L	2	012		圳	
DEP X DOL	Amended Amendment		_		ate, Zip C RSTOW		7825			ASBI	STOS C	TR	01 &	1		
☑ DOH ☑ DCA	Emergency justification) Cancellation	_			of Contact				L	Tel	ephone	G	ber		-	
Name of Facility Where A	hatament is Takin	a Disea (3)	FAC	ILITY INF	ORMAT	ION	3181077	·	J-						غر
BLAIR ACADEMY	batement is Takii	ig Flace (3)						Facility (hool (K-1							
Street Address 2 PARK STREET								Su Su	bchapter ner (i.e. p	8 (Oth		12) cia		dings,	home	es,
City (5) BLAIRSTOWN					1.150			Square		# 0	f Floors		В	ldg. A	ge	
County (6) WARREN COUNTY					Code (7) USE ONLY	n		Current Use (Prior if being der				she	ed)			
Name of Monitoring Firm I EnviroVision Consult		Owner (8))	ASC	M No.			ame of Abatement Contractor (9) ielczewski Corporation				-				
Street Address 20-21 WAGARAW R	OAD BLDG.3	4A					Street	Address Watchu				Т				
City, State, Zip Code FAIRLAWN NJ 0741	0	100			City, S	City, State, Zip Code West Orange NJ 07052				_						
Project Manager for Monito	T	Telepho 973-63	ne No. 36-9145	j	Telephone No. Lice 973-243-9872 011					No						
Start Date (10) 07/16/2012		ed Cor 2012	npletion	Date (11)			of OSHA Island		cal		-					
Occupancy Status During	Abatement (Chec	k Only O	ne)				Street	Address				-		-75-27		-
Facility Closed/Vacate Abatement Performed Other – Describe:	ed During Entire I d Outside of Norn	Period of an all Facility	Abaten / Hours	nent S			City, S	Colin Dr	Code			-				
Scope of Work (Check All	That Apply)			Holobrook NY 11741												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit				Full Containment with Nega Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-						essu	re cedur	e	
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Location of Asbestos-Containing M TO BE ABAT In Facility (13)	laterial (ACM) ED	Use Ma	Normal d Sole intenar todial S (12)	ly by nce/		tos Cont thermal surfac		laterial (A s insulatio T, or		(8	mount Specify or LF)		Remova	Repair	e Encapsulate	Enclosure
Sharp House Ba	No	N/A	floor ti	ile and	associ	ated ma	etic	Q	50 sf	4			te			
			11001 [iic and	a3300	aleu III	3300	0			x					
Name of Registered Waste	Hauler		N	JDEP W	aste	Cubic '	Yards	IN	lame of F	Registe	red Lar					
Circle Rubbish				Hauler ID No. of Waste					ullytow			a	cility			
City, State Linden NJ				Disposal Date				Oate City, State Morrisville PA				-				
Completed by Slawomir Kielczewski	dent	ent							ate		012					

State of New Jersey

)#:	1206-1650
eck	#: 2738

Date of Notification (1) 6/08/12		Name	of Building	Owner / Opera		I P P P	The second secon
DOMESTICATION OF COMMENTS OF THE PARTY OF TH	lotification		t Address	ment Group		EGE	WED.
⊠ EPA			Wheaton	Avenue	115		
DEP	Initial	9,000	State & Zip			1111	2000
	Amended		ille, NJ 08		10 L	I] JUL	2012
DOH DCA	Emergency Cancellation	C	of Contact				Telephone Number
U U	Cariocilation		John Lop		i	ASBESTOS CI	1
Name of English When Al		FA	CILITY IN	FORMATION		LICENS]
Name of Facility Where Ab Millville Investment Gro	atement is Taking Pla	ace (3)			cility (4)		Michigan Commission .
Street Address	oup				(K-12)		· Andrews · · · manufacturing
1101 Wheaton Avenue					apter 8 (Other	commercial buil	ago homos etal
				Square Fee			ngs, homes, etc.) Bldg. Age
City (5)	County (6)	County (Code (7)	160,000	2	10013	50
Millville	Cumberland		, ,		e (Prior if being	demolished)	30
				Financial		,,	
Name of Monitoring Firm Hi	ired by Building Own	er (8)	ASCM No		patement Conti	ractor (9)	
Horizon Environmental Street Address	Group.			Asbestos	and Mold Se	ervices, Corp	
PO Box 316				Street Addr 3859 Sylo			
City, State & Zip Code				City, State 8			
Thorofare, NJ					rt, NJ 08036		
Project Manager for Monitor Dave Flanigan		Telephone		Telephone I		Licens	Number
Scheduled Start Date (10)	Scheduled Com	856-848-0		609-702-04			00862
6/12/12	6/13/12		le (11)	EMSL Ana	SHA Monitor		
Occupancy Status During A	batement (Check on	ly one)	200	Street Addre	ess		
Abstement Perform	ated During Entire Pe ed Outside of Norma	eriod of Aba	atement	107 Haddo			
Describe:	ed Outside of Norma	I Hours		City, State 8			
Isolated Area				vvestmont	, NJ 08108		
Scope of Work (Check all th	nat apply)						<u> </u>
	2//2 12/23	/			Full C	ontainment wit	Vegative Pressure
≥3 sf or ≥3 lf			ovation		1103103100 10	nclosure	
≥160 sf ≥260 lf		☐ Dem	nolition			& Cut Methodo	
Location of	of I	Is Locati	on	Description			n-Friable Procedure
Asbestos-Cont	aining	Normally L		Asbestos-Co		Amoun (Specifi	Abatement Type
Material (AC <u>TO BE ABA</u> T		Solely b		Material (A	ACM)	SF or LF	0.00000
in Facility		Maintenand Custodial S		(i.e., thermal insulation, surfa	systems		nclsour capsula Repair Remova
(13)		(12)		or other misce	llaneous)		Enclsoure Encapsulate Repair
		Yes No	N/A				- ē ē
Basement- Maintenance	e Area		☐ Duc	t Insulation	80	10 LF	
District 1982							
		님님	H-				
		님님					
		HH	- 1			-	
Name of Registered Waste	Hauler	NJ	DEP Waste	Cubic Yards	Name of Re	gistered Landf	
Horizon Diamond			ıler ID No.	of Waste		giotorea Editar	×
Horizon Disposal City, State			22612	5	GROWS		
Trenton, NJ				Disposal Date 6/13/12	City, State Morrisville	DA	
Completed By (Print or Type)	Title	9	Signature (INIOLLIZALIIG	, FA	Data
Kim Trumbetti	\$11)		min.				Date 6/08/12
	1000			TNUL			0/00/12

ck #:2744

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Date of Notification 6/26/12							Owner / Operator ke, LLC	(2)) E G E	IW	FI	7	1
Agencies Notified EPA	Type Notifica	ation			t Addr		nit 14						13.0
☐ DEP				City,	State 8	& Zip C	ode	IU L	JUL	2012	111	111	
□ DOL	Amei	nded	1	Tom	s Riv	er, NJ	08755	1	<i> </i>	2012		91	
□ DOH		rgency		Name	e of Co	ontact		1		Telepho	ne Nu	mbe	r
☐ DCA	☐ Cano	ellation		Ram	i E. G	effner	, M.D.	İ	ASBESTOS C				500
							ORMATION		LICEN	G		7	
Name of Facility Wh	nere Abateme	ent is Taking Pla	ce (CILII	TINE	Type of Facili	ty (A)	* 55.90 1.30 1.00 1.00 1.00 1.00 1.00 1.00 1.0	Resident of	Steer.		
Commercial Prop		one to raking rice	,,	٠,			School (F			11110000	VPA CARLO		j
Street Address								ter 8 (Other th	an K-12)				شد
1141 Mantua Pike	е .							2.5	mmercial buil	gs, hom	nes, et	c.)	
100 ATT-							Square Feet	# of Flo		3ldg. Ag			
City (5)		County (6)	Co	unty	Code	(7)	2800	1		35 year			
West Deptford		Gloucester				. ,		Prior if being	demolished)	o you.			
		Oloubout.					Vacant	Domig	aomonorio a)				
Name of Monitoring	Firm Hired b	y Building Owne	er (8)		ASC	CM No.	COLORS CONTRACTOR	tement Contra	ctor (9)	-		-	
Horizon Environi		,	(-)		, , ,		The state of the s	nd Mold Ser					
Street Address					-10-20-00-00	2000	Street Addres						
PO Box 316							3859 Sylon	Blvd.					
City, State & Zip Co							City, State & 2						
Thorofare, NJ 08							Hainesport,						
Project Manager for		115741.036	COOK BUILDING		Num	ber	Telephone Nu		Licens	Number			
Dave or Steve Fla			000000000		0800		609-702-040			0086	52		_
Scheduled Start Date 6/27/12		Scheduled Com 7/9/12	pietio	on Da	ite (11)	Name of OSH EMSL Analy						
Occupancy Status [Street Addres	SS					
[1] 13 [1] 15 [1] [2] [3] [3] [3] [4] [4] [4] [4] [4] [4] [4] [4] [4] [4		During Entire Pe			ateme	ent	107 Haddor						
State of the state	Performed O	utside of Norma	Ηοι	ırs			City, State & 2	17					
Describe:							Westmont,	NJ 08108					
Isolated Are	AND THE RESERVE OF THE PARTY OF												
Scope of Work (Che	eck all that ap	opiy)						⊠ Eull Co	ntainment wit	Vegative	Droot		
≥3 sf or ≥3 l	f		\boxtimes	Re	novatio	on		Assist I	Demo Contrac	r with de			
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Lo	cation of		ls	Loca	tion	1	Description		Amoun		ateme	X12070475	
	os-Containin	g			Used		Asbestos-Conf	taining	(Specify		Т	1	,,
	erial (ACM)			olely			Material (A		SF or LF	-		ᄪ	ш
	BE ABATED				nce or	1 .	(i.e., thermal sy			Rem	Re	cag	ncl
ır	n Facility (13)	- 1	Just	odiai (12)	Staff?	'	nsulation, surfactor or other miscella			Remova	Repair	Encapsulate	Enclsoure
	(10)		Yes	No	N/A		or other miscent	arieous)		<u>m</u>		ate	9
Ceiling			П	П			orn Ceiling		1,750 SF			\neg	\neg
Front ½ of Buildi	na		H	Ħ			stos Debris in	Pile	20 CF (appr) 🛛	H	H	H
	9		Ħ	H		7300	Stos Debris III	i iie	zo or (appr	7 🛱	H	H	屵
			Ħ	H						-	H	H	片
			Ħ	·H	D						H	H	님
			H	H	B						H	H	뉘
Name of Registered	Waste Haul	er		N.	-	Waste	Cubic Yards	Name of Rec	istered Landf				ш
Horizon Disposal					auler II 226	D No.	of Waste 10	GROWS	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
City, State			-				Disposal Date	City, State		-		-	
Trenton, NJ							7/9/12	Morrisville,	PA				
Completed By (Print	or Type)			Tit	le	_	Signature (Date			\dashv
Kim Trumbetti					dmir). \	111		_	6/26	/12		
				-			THE X			0120	1 Am		

NOTIFICATION OF ASBESTOS ABATEMENT C ck#: NA (Pursuant to N.J.A.C. 8:60 and 12:120) Date of Notification (1) Name of Building Owner / Operator (2) 6/5/12 Bob Novick Chevrolet, Inc. Agencies Notified Type Notification Street Address JIII 1 2012 M **EPA** 808 North Pearl Street DEP Initial City, State & Zip Code X Amended #1 ON HOLD DOL X Bridgeton, NJ 08302 NTROL & **ASBESTOS** DOH Emergency Name of Contact LICE Rélephone Number DCA Cancellation Mrs. Debby Novick **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) **Bob Novick Auto Mall** School (K-12) Street Address Subchapter 8 (Other than K-12) 808 North Pearl Street Other (i.e. private & commercial build gs, homes, etc.) Square Feet # of Floors ldg. Age City (5) County (6) County Code (7) 21,728 0+ Bridgeton Cumberland Current Use (Prior if being demolished) Auto Dealership Name of Monitoring Firm Hired by Building Owner (8) Name of Abatement Contractor (9) ASCM No. Horizon Environmental Asbestos and Mold Services, Corp. Street Address ON HOLD until Phase #2 PO Box 316 City, State & Zip Code Thorofare, NJ 08086 Hainesport, NJ 08036 Project Manager for Monitoring Firm Telephone Number Telephone Number License umber Dave or Steve Flanigan 856-848-0800 609-702-0400 00862 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 6/14/12 6/29/12 EMSL Analytical Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 107 Haddon Ave. Abatement Performed Outside of Normal Hours City, State & Zip Code Describe: Westmont, NJ 08108 Isolated Area Scope of Work (Check all that apply) Full Containment with egative Pressure ≥3 sf or ≥3 lf Renovation Mini-Enclosure ≥160 sf ≥260 If Demolition Glove Bag Procedure Non-Exempted and N -Friable Procedure Location of Is Location Description of Abatement Type Amount Asbestos-Containing Normally Used Asbestos-Containing (Specify Material (ACM) Solely by Material (ACM) SF or LF) Encapsular TO BE ABATED Maintenance or (i.e., thermal systems Remova Enclsoure Repair in Facility Custodial Staff? insulation, surfacing, VAT (13)(12)or other miscellaneous) Yes No N/A Roof Roofing, Flashing & Decking 440 SF Roof Deck **Transite Panels** 4 each \boxtimes X X X Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Horizon Disposal 22612 **GROWS** City, State Disposal Date City, State Trenton, NJ 6/29/12 Morrisville, PA Completed By (Print or Type) Title Signature Date Kim Trumbetti Admin. 6/15/12

State of New Jersey

Jo

#: 1202-1621

Jc #:1205-1649 C ck #:

Date of Notification (1)					The state of the s	タグラ 交換を設す	endrolf-18 +0°
6/1/12		Name of Building (Lourdes Medica	Owner / Opera	tor (2)	NEG		
Agencies Notified Type Notific	ation	Street Address	Center		11 5 5		
□ EPA		1600 Haddon Av	enue/	i i	M		
□ DEP □ Initia □ DOL □ Ame		City, State & Zip C	ode	- 1	H JUE	9 , 2012	
F7	nded #1 ON HOLD	Collingswood, N	NJ 08103	1 1	7 7 005	3,2012	
	rgency cellation	Name of Contact			L	Telephone Nu	mber
L - Si	enation	Mr. Scott Corley	, Guild Build	ders, Inc.	ASBEST	FURITE	
Name of Facility 18th		FACILITY INFO	DRMATION		Li	15/NG	
Name of Facility Where Abatemo Lourdes Medical Center	ent is Taking Place	(3)	Type of Fac			20. W	
Street Address			School				
218 Sunset Road			Subcha	pter 8 (Other t	han K-12)		
			Other (i		ommercial build	gs, homes, etc	c.)
City (5)	County (6)	ounty Code (7)	23,000	# 01 F1	oors	ldg. Age	
Willingboro	Burlington	,(.,		(Prior if being	demolished)	5 +-	
			Hospital	(i fior it being	demonstred)		
Name of Monitoring Firm Hired b	*	THE THE RIA	Nama of Ab	otomont Contr			
Horizon Environmental Street Address	ON HOLI	D. CHECK V	VILL BE	SENT W	HEN IT		
PO Box 316					ATTEN II		
City, State & Zip Code		IS TAKE	N OFF H	OLD			
Thorofare, NJ 08086			Hainesper	t, NJ 08036			
Project Manager for Monitoring F	irm Tele	phone Number	Telephone N		License	umber	
Dave or Steve Flanigan	856-	-848-0800	609-702-04		Licerise	00862	
Scheduled Start Date (10) 06/11/12	Scheduled Completi	on Date (11)	Name of OS				
Occupancy Status During Abaten	06/12/11		EMSL Ana				
Facility Closed/Vacated D	Juring Entire Period	e) of Ahatement	Street Addre				
Abatement Performed Ou	itside of Normal Hor	urs – Night Shift	107 Haddo City, State &			-	
Describe:	a sur allowed consider the following of the surface	g.i.c orinic	Westmont,				
Isolated Area			, roomone,	140 00 100			
Scope of Work (Check all that ap	ply)						
23 sf or ≥3 lf	N	D			ntainment with	gative Pressi	ure
≥160 sf ≥260 lf	H	Renovation Demolition			closure		
		Demontor			Bag Procedures	E: 11 B	
Location of	Is	Location	Descriptio	n of	Amount	Friable Proce	The state of the s
Asbestos-Containing	Norn	nally Used	Asbestos-Cor		(Specify	Abatemen	tType
Material (ACM) TO BE ABATED	Main	olely by tenance or	Material (A		SF or LF)		g
in Facility			(i.e., thermal s sulation, surfac	ystems cing VAT		Repair	cap
(13)		(12) o	r other miscell	aneous)		ovair	Enclsoure
Hyperbaric Chamber	Yes	No N/A					g g
Perparic Chamber		☐ Floor 1	Tile & Black	Mastic	180SF		
	H						
		 					
		HH				1=1=1=	
Name of Registered Waste Hauler		NJDEP Waste C	ubic Yards	Name of Regi	stered Landfill	11111	
Horizon Disposal		Hauler ID No. of	Waste		v.va Landiiii		
City, State		22612 4		GROWS			
Γrenton, NJ			sposal Date	City, State	DA		
Completed By (Print or Type)			gnature (Morrisville,	FA	-	
Joann Mullarkey		Admin.	A C			Date	
			to	_		6/1/12	



State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-12						Marine Allenda
Client Project #				Name of Building Owner/Operat	on (2)5 (12 [5	INEDI
Date of Notification (1)	7			RUTGERS, THE STATE	UNIVERSITS	FNEM
July 5, 2012				Street Address	-21	
Agencies Notified	Notification	Type		ENVIRONMENTAL HEA	TH & SAFE	DEPT.
		otification		27 ROAD 1, BLDG 4086	MINGSTOL	
EPA)		led Notifica		27 RUAD 1, BEDG 4000	FIAIMOSTO	SAMUE I
X DCA		f Room ID		City, State, Zip Code PISCATAWAY, NJ 0885	4	4.
⊠ DOL			unoccupied		ATELEPHO	Number
DEP- No Longer REQUIRED	- Emerg	gency (inc	Tuding	Name of Contact MICHAEL SMITH, ENV.	Ind Cicpine	Jadinies C.
ĭ DOH	justific	cation)	- 1005			***************************************
	□ Cance	lled			A Standard Supermonages	weaterproperties to be .
			FACILITY INF	ORMATION	Distribution of the Constitution of the Consti	manager of the second s
Name of Facility Where Abatement is	Taking Place (3)			Type of Facility (4)		N. S.
OLD QUEENS, BLDG# 300	0			School (K-12)	0)	
Street Address	-		- (Subchapter 8 (other than K-1		ata)
COLLEGE AVENUE CAMP	us			Other (i.e. private & commerci	al buildings, nome	e: 200+ years
				Sq. Feet: N/A # of FI	blug.	<u>e.</u> 2001 years
City (5) County NEW BRUNSWICK MII	DDLESEX	County Co		Current Use (prior if being dem	olished): ACAD	IIC
CAL 15 San Disease by Pld	a Owner (8)	ASCM No	,	Name of Contractor (9)		
Name of Monitoring Firm Hired by Bld ATC ASSOCIATES	g. Owner (o)	0098	-			NITO INC
AIC ASSOCIATES				GREENWOOD ABATEMI	ENT CONSUL	NTS, INC.
Street Address				Street Address		
3 TERRI LANE				268 MAIN STREET		
						,
City, State, Zip Code				City State, ZipCode		
BURLINGTON, NJ 0801				BUTLER, NJ 07405	License	ımber
Project Manager for Monitoring Firm	Telephone			Telephone Number	License	iiiiboi
BRIAN KEARNY	609-38	6-8800		973-492-0477	00840	
Onto district Data (40)	Schodulad	Completion	Date (11)	Name of OSHA Monitor		
Scheduled Start Date (10)	07/16/12		Date (11)	1		
07/13/12	07710717	_		ENVIROVISION, INC.		14
Occupancy Status During Abateme	ent (Check only	one)	No.	Street Address		
Facility Closed/Vacated During	Entire Period of	f Abatement)	20-21 WARGARAW ROA	n.	
☐ Abatement Performed Outside o	f Normal Facilit	y Hours -		City, State, Zip Code	\ <u>D</u>	
Describe				City, State, Zip Code		
XOther - Describe:						
SUB 8 UNOCCUPPIED - FRI 5P	M – MON 5AI	M (24 Hrs a	as`)	FAIRLAWN, NJ		
Necessary)			/			
Scope of Work (Check all that apply)	0.03724			□ Full	Containment witl	egative Pressure
			Renovation		Enclosure	
∑ ≥ 3 sf or ≥ 3 lf			☐ Demolition	70 TEV	vebag Procedure	
□≥ 160 sf or ≥ 260			- Demonition		Exempted (*) an	Ion-Friable Procedure
Location of Asbestos-Containing	Is Location Norm	nally Used	Description of A	shestos Containing Material	Amount	atement Type
	Solely by Maint.		(ACM) (i.e. ther	mal systems insulation, surfacing,	(Specify SF	move Repair Encap Enclose
I widterial (riciti) ii coming (re)	Staff? (12)		VAT, or other m	iscell.)	or LF)	
	YES NO	NA				
Rooms 207& 207B	X		TSI-PIPE IN	ISULATION	30 LF	
1404		1				
News of Deal Works Handay	NIDEDW	Vaste Hauler	ID#	Cubic Yards of Waste: 10	CY Name	Registered Landfill
Name of Reg. Waste Hauler See Hauler Below #1 & 2	See Bel		<u>,,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,</u>		G.R.C	V.S. North Landfill
Hauler #1) Greenwood Abatement	Consultants, Inc	c Butler, N	J 07405		posal Date	City, State 100 New Ford Mill
NJDEP # 12561				07	/16/2012	Rd. Morrisville, Pa
Hauler #2) Newark Carting, Inc., N	Newark, NJ 0450	09				19067
NJ DEP # 4509				3		215-736-1700
Completed by (Driet or Towns)	Title			Signature	Date	
Completed by (Print or Type) RAYMOND C. PEDALINO	In Committee and Committee of the Commit	PROJEC	T	11	171	y 5, 2012
KATINOND C. PEDALINO	MANAG		•	16.	11-	
1	INIMIANO	-11				

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7) GAC Project # 060-12 Client Project # Name of Building Owner/Operator (2) Date of Notification (1) RUTGERS, THE STATE UNIVERS Y OF NU12 June 29, 2012 Agencies Notified Notification Type Street Address MInitial Notification ENVIRONMENTAL HEALTH & SA TY DEPT. O EPA 27 ROAD 1, BLDG 4086, LIVINGS NOCAMPUS ■Amended Notification DDEA ENSING ■ Emergency (including City, State, Zip Code IXI DOI PISCATAWAY, NJ 08854 iustification) DEP- No Longer REQUIRED one Number Name of Contact Tele □Cancelled X DOH MICHAEL SMITH, ENV. **HEALTH & SAFETY** FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) OLD QUEENS, BLDG# 3000 ☐ School (K-12) Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, h es, etc.) **COLLEGE AVENUE CAMPUS** Age: 200+ years # of Floors: 3 Bld Sq. Feet: N/A City (5) County (6) County Code (7) **NEW BRUNSWICK MIDDLESEX** (State Use Only) Current Use (prior if being demolished): AC)EMIC Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC ASSOCIATES 0098 TANTS, INC. GREENWOOD ABATEMENT CONSI Street Address Street Address 3 TERRI LANE **268 MAIN STREET** City State, ZipCode City, State, Zip Code **BUTLER, NJ 07405** BURLINGTON, NJ 08016 Number Project Manager for Monitoring Firm Telephone Number Telephone Number Lice **BRIAN KEARNY** 609-386-8800 800 973-492-0477 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 07/13/12 07/16/12 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD ■ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe Sther - Describe: FRI 5PM - MON 5AM (24 Hrs as Necessary) FAIRLAWN, NJ Scope of Work (Check all that apply) ☐ Full Containment v Negative Pressure Renovation ■ Mini-Enclosure $\boxtimes \ge 3 \text{ sf or } \ge 3 \text{ lf}$ Glovebag Proced ≥ 160 sf or ≥ 260 Demolition ■ Non-Exempted (*) 1 Non-Friable Procedure Description of Asbestos Containing Material Location of Asbestos-Containing Is Location Normally Used Amount Abatement Type (Specify SF Material (ACM) in Facility (13) Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, Remove Repair Encap Enclose Staff? (12) VAT, or other miscell.) or LF) YES NO NA Rooms 201 & 201B X X **TSI-PIPE INSULATION** 30 LF Name of Reg. Waste Hauler NJDEP Waste Hauler ID# 10 CY Nam of Registered Landfill Cubic Yards of Waste: .W.S. North Landfill G.R See Hauler Below #1 & 2 See Below Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State 100 New Ford Mill NJDEP # 12561 07/16/2012 Rd. Morrisville, Pa Hauler #2) Newark Carting, Inc., Newark, NJ 04509 19067 NJ DEP # 4509 215-736-1700 Completed by (Print or Type) Date Signature RAYMOND C. PEDALINO SENIOR PROJECT ıne 29, 2012 MANAGER

河 海绵等海山小连

MO#20142482681			(Pur	suant	to NJAC	8:60 and 5:16	All the thirt was	THE PROPERTY AND PERSONS ASSESSMENT		Waterio .	Andrew .		ل
Date of Notification (1)			- 1	Vame o	of Building	Owner/Operator (2	INEC	BIN	-	-	5		
07 /	03 / 12			T	A 11					1			
Agencies Notified	Type Notification				Addeo Address				h-week		H		-
EPA	☐ Initial						111 11 10	1 0 002	- 1				
☑ DOLWD	Amended				egory Av		1 PM PM 00	L 9 201	-	200	4		
☑ DHSS	Amendment #				tate, Zip Co		l						
DCA (NJAC 5:23-8)	Emergency (in justification)	cluding			Orange, N. of Contact	J 07052	ASBES	TOS CONTROL	ber		-		
	☐ Cancellation		1	Vancy	Addeo		- Santage			-	J		
				FAC	ILITY IN	FORMATION®		- Company of the Park	Ser.	X		A	
Name of Facility Where A	batement is Taking	Place	(3)				Type of Facility	(4)		/400m	6年2年1年	5	
Private home							School (K-12						
Street Address							Subchapter 8 Other (i.e., p	(Other than K-	?)	buil	dinas	200	
356 Gregory Avenue							homes, etc.)		,	Duit	umga	•	
City (5)						-	Square Feet	# of Floors		Bld	g. Ag	e	
West Orange, NJ 0705	2												
County (6)	- '			Count	y Code (7) (STATE USE ONLY)	Current Use (Pr	ior if being den	she	d)	21000		
Essex							* 2.4	es sent un americano de S T ORATSO VARO					
Name of Monitoring Firm	Hired by Building	Owner (8) 7	ASCMI	No.	Name of Abateme	ent Contractor (9)		_				
•						Gr Tech LLC							
Street Address		-				Street Address			-				
Street Address							1202						
City State 7in Code			_			576 Valley Rd # City, State, Zip C			-			-	-
City, State, Zip Code													
Davis at Manager for Man	itarina Firm		Tala	-6	Ma	Wayne, NJ 074	/0	License No	-			- 14 -	
Project Manager for Mon	itoring Firm		Tele	phone	NO.	Telephone No.							
			l			973-638-1777		01127	-			-70 11	
Start Date (10)07 /13 /	CAMPAGE 10 SECTIONS	duled C				Name of OSHA M Envirovision Co							
Occupancy Status Durin	g Abatement (Chec	k only c	ne)			Street Address							
						20-21 Wagaraw	Road, Bldg .#	34A			latera .		2-2-0
Abatement Performer Time of Abatement:	d Outside of Norma AM-	I Facility	y Hour PM	s - Des	scribe AM	City, State, Zip C	ode						
		100			7 (14)	Fair Lawn, NJ (07410						
Scope of Work (Check a	If that apply)					☐ Full Cor	ntainment with Ne	gative Pressur					
>3 sf or >3 lf > 160 sf or >260 lf		Re Re	novati	on		Mini-End	closure	3					
≥ 160 sf or ≥260 lf		☐ De	molitic	חמ		Gloveba	ig Procedure empted (*) and No	on-Friable Proc	ure				
		1.	. 1	ion	T		Simpled () and M	J.F. Habie Flot	1	AL	ı oto	ent T	vnc.
Location	of	11000	Locat Norma		İ	Description	of			-			r —
Asbestos-Containing	The Paris of the Control of the Cont	Use	d Sole	ly by	Asbe	stos Containing Ma		Amount		Removal	Repair	Encapsulate	Enclosure
TO BE AB		100000000000000000000000000000000000000	intena todial			., thermal systems	insulation,	(Specify		mo	pai	aps	los
IN Faci	ity	Cus	(12)	Stall?		surfacing, VAT other miscelland		SIF or LF		à		ula	ure
(13)		Vaa	T	NI/A	1	Other miscenant	eous)					िल	
		Yes	No	N/A					-	רעו			
Basement				X	Pipe inst	ulation		150 LF		X	Ш	Ш	Ш
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			П	In					100	П	П	П	П
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				Ш		T = 1.1 357 3 7	. [<u> </u>	150	Ц	Ш	Ш	
Name of Registered Wa	ste Hauler		NJ	JEP Wast	e Hauler ID No.	Cubic Yards of Was		istered Landfill					
Gr Tech LLC			0	03378	35	TBD	T.R.R.F. Inc						
City, State						Disposal Date	City, State						
Wayne, NJ 07470						TBD	Tullytown, F	PA					
Completed By (Print or	Type) Tit	le		700 700	100 1000	Signatur			Date	9			
							he Ven		17/0	3/20	112		
N.Jevtic ASB-41				1 // 2			110	2/20	112				
MAY 11		* Do no	i use t	his fori	m for asbes	tos licensure exem	pted activities.						

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

		(Pursu	ant to	NJAC 8:60 a	nd 12:120	(0)	Control of the Control		STEPPEN STEP	903711		esse or	\neg
Date of Notification (1) July 2, 2012			Na	me of Building (Owner/Oper Disanti	s Conti	acting,	Ec Ec	\mathbb{V}_{2}	6	M	4.	
[] DEP [] Amendo	Notification and Notification ment # ancy (inclu ation)	ation —— ding	Cit		Ortley Disantis	1	NJ 08751	Velephoriant Lik	2012 7,80L			and the same of th	
Name of Facility Where Abatement is Taking	Place (3)	FA	ACILI	TY INFORM	IATION	Type	of Facility (4		Kw Ma	ed render	er many	WENT C	
Residence							[] [x]	School (k Subchapt Other (i.e	(other			l buildin	ıgs,
Street Address 65 M Street			I Co	ounty Code (7)		Square		homes, et	-	Bldg.	Age		
City Seaside Park	County (6))	(S	TATE USE ONI	.Y)	1	500 sf	if being dem	hed)		60		
Name of Monitoring Firm Hired by Building	Owner (8)		AS	SCM No.	Name of	f Abatem	ent Contract		ing, I	nc.			
N/A Street Address					Street A			Route 9, U	t 61				
City, State, Zip Code		elephone Nun	nher			ate, Zip (Toms	River, Ne	Jerse nse Nu		55-12	71	_
Project Manager for Monitoring Firm		cheduled Con		Date (11)	732-3	49-993	Monitor	0	24		-		
Scheduled Start Date (10) 7/13/12 Occupancy Status During Abatement (Check	only one)	7/16/12			Street A	Address		S.L. Analy Stelton Re	al_				
[x] Facility Closed/Vacate [] Abatement Performed [] Other – Describe	d During I Outside of	Entire Period C	ity Hou	ement	City, S	tate, Zip	Code	ataway, Ne	Jerse	y 088	54		
Scope of Work (Check all that apply) [] >3 sf or ≥3 lf		L A	enovati		[[[x] M	lini-Enclosu lovebag Pro		ve Pres		ure		
[X] ≥160 sf or ≥260 lf		[] =								Aba	tement	Туре	_
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13)	is Location formally used Solely by enance/Custo Staff (12)		(i	Descript Asbestos-C Material i.e., thermore nsulation, VAT other misco	ontainir (ACM) al syster surfacin , or	ns .g,	Arr (Spea or	nt / SF	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E	
Exterior		X		Asbestos si	ding			1100	£	X	-	-	\vdash
						-							
		JJDEP Waste	Hauler	ID No. Cubic	Yards of V	Vaste	Name of Re	egistered Lan	1				
Name of Registered Waste Hauler Guardian Contracting, Inc		202	223	al Date	City	State	T.R.R.	F					
City, State Toms River, New Jersey Completed by (Print or Type)	Title	1	7/18/		Tul	lytown	Pennsylv	vania	-	Da 7/2	te 2/2012	2	
Nicholas Fernicola	Proje	ct Manager	is forn	n for asbestos	icensure e.	xemptea	activities.		-				

CR 1327

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Date of Notification							Owner / Operato	1913				7		1	
Agencies Notified	07/02/2012	-41			SA HIMBAN SANDARON SA	Carlot Book and the Control	& Hotel		8000		1040				
EPA	Type Notifica	ation	- 1		t Addr Boar		l.	I IN M	JUL	9	2012		9	110	
☐ DEP				CHICAGO CANADA	State 8		ALCOHOL WAS A STATE OF THE STAT				-		-	<u> </u>	
☑ DOL	Amer						J 08401	1 6	ASBEST	ros co	30L &	<u></u>			
□ DOH	☐ Emer	gency			of Co		0 00401			ICENSI	Tel	enho	ne N	umb	or
☐ DCA		ellation			LaVit			in the same	Manuagai es e	The second name of the second	production of	CPITC	ALC: IV	ullib	CI
				- A	OII IT	37 INIP	CONTATION	No.	· · · · · · · · · · · · · · · · · · ·		1				
Name of Facility Wh	nere Abateme	ant is Taking D	Diago (CILII	Y INF	Type of Facil	ih. (A)					4年-14期	Magazinia.	
Resorts Casino &		one is raking r	iace (٥)			School (
Street Address								oter 8 (Othe	r than K-	12)					
1133 Boardwalk							Other (i.				lings,	hom	ies e	etc.)	
							Square Feet		Floors		-	g. Ag	0.000	.,	
City (5)		County (6)	Co	ounty (Code (7)	1-1					9. 7.9	•		
Atlantic City, NJ	08401	Atlantic					Current Use	(Prior if beir	na demo	ished)		_			
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Name of Monitoring	Firm Hired b	y Building Ow	ner (8)		ASC	M No	. Name of Aba	tement Cor	ntractor (9)	-				
							Alpha Envi								
Street Address	W. W. W. W. W. W. W. W. W. W. W. W. W. W			- Xinto			Street Addres	SS							
							2129 Route								
City, State & Zip Co	de						City, State &		min Sto-Salis-Folio		Office Const				
D : 114	ject Manager for Monitoring Firm						Hamilton, N								
Project Manager for	oject Manager for Monitoring Firm					per	Telephone N			Licer	Nun				
Scheduled Start Dat	cheduled Start Date (10) Scheduled Comp						Name of OSI					0109	1.0	-	
07/12/201		07/13/2012	mpieu	on Da	ie (11)	1 0	EMSL Anal								
Occupancy Status D	Ouring Abater	ment (Check o	nly on	e)			Street Addres				10-00-00-00-00-00-00-00-00-00-00-00-00-0				
☐ Facility Clos	ed/Vacated [During Entire F	Period	of Ab	ateme	nt	107 Haddoi	n Ave.							
17.33 mmm 1 12.00 mm 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Performed Ou	utside of Norm	nal Ho	urs –	7am to	3pm	City, State &	Zip Code							
Describe:		1000					Westmont,	NJ 08108							
Land .	upied During														1405
Scope of Work (Che	eck all that ap	pply)							Cantainu		Nina		D		
≥3 sf or ≥3 lf	F		\square	Ror	ovatio	vn.		homomet	Containr -Enclosu		Neg	auve	Pres	sure	66
≥3 sf or ≥3 lf			H		nolitio				e Bag P		e				
			ш	20.		•			_				_		
Lo	cation of		le	Locat	ion	Γ	Description		-Exempt		OII-F				
	os-Containing	a		nally l			Asbestos-Con			Amou (Spec		ADa	ateme	enti	ype
	erial (ACM)		S	olely I	by		Material (A			SF or)	_		Щ	_
	SE ABATED			tenan			(i.e., thermal s					Ren	Re	cap	nc
ır	Facility (13)		Cust	odiai 3 (12)	Staff?		insulation, surfactor or other miscell					Removal	Repair	Encapsulate	Enclsoure
	(10)		Yes	No	N/A		Of Other Hisoen	aneousj				=		ate	6
Bakery				×	П	STATE OF THE	Pipe insula	ation	121	f	-	\boxtimes	П	П	П
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Name of Registered	Name of Registered Waste Hauler					Vaste	The state of the s	Name of F	Registere	d Lan	I				
AI DUA ENVIDON	ALPHA ENVIRONMENTAL) No. 30	of Waste	Crown	a = 46:11						
Brown and the first of the firs	City, State						Diament Data	Grows L			-				
Oity, Glate							Disposal Date	City, State	•						
Trenton, NJ							various	Morrisvil	le, PA						
Completed By (Print or Type)					е		Signature	- Construction of the Cons			1	ate		350	
Rod Richardson	15:50 S			Pr	oject		Rod Richardson						2/20	112	
COU IXICHAI USUH					nage	r									

			ursuant	to NJAC	8:60 and 12:12	o)	E (E	W	塩	100	P
Date of Notification (1) 07/02/12		4.			Owner/Operator rd of Education						OPTION OF STREET	Market Salar
Agencies Notified Type Notification	1		Street A	ddress	ıd		J	UL	2012	-	旦	
EPA Initial Amended		ŀ	City, Sta	ate, Zip C	ode				TDOI			+
DOL Amendmen Emergency		-		lair, NJ	07042			ESTOS O	TROL	ě		
X DOH justification X DCA)			f Contact	Saponara	المناسب المناسب		leohone	mber	(h.)	·	-
Z DCA Cancellatio					ORMATION	**No. Plantage and the con-	L	erieficado e villedos	ente fitale	SHARE STATES		A STATE OF
Name of Facility Where Abatement is Taki	ng Place (3	3)	1 Au	LITT IN	OKWATION	Type of Facility						
Central Heating Plant						School (K-					9	
Street Address 54 Orange Road						Subchapte Other (i.e. etc.)	r 8 (Ott private	& comm	2) ial bui	dings	, home	es,
City (5) Montclair						Square Feet 5,000 +	2	of Floors		3ldg. <i>F</i> 50+	\ge	
County (6) Essex				Code (7) USE ONLY)	Current Use (Pri School	or if be	ing demo	hed)			
Name of Monitoring Firm Hired by Building Detail Associates, Inc.	Owner (8)		ASCN 0001			of Abatement Co mid Contractin				SV-200		
Street Address						Address		·	-	-		-
300 Grand Avenue						Sargeant Aver	nue					
City, State, Zip Code Englewood, NJ 07631					Clifto	State, Zip Code on, NJ 07013						
Project Manager for Monitoring Firm Mr. Stephen J			Telepho 201-56	ne No. 69-6708		hone No. 689-6281		Licens 0109	lo.			
Start Date (10) 07/14/12	Schedul 08/08/		mpletion	Date (11)		of OSHA Monitor Environmenta		oratorie	.LC			
Occupancy Status During Abatement (Che	ck Only Or	ne)				Address						
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:					City, S	Route 22 We State, Zip Code	SI		-			
Scope of Work (Check All That Apply)					— Unio	on, NJ 07081						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli	MARKET CONTRACTOR		>	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure		Pressu		·e	
	100	Locat								Abat	ement	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Norma ed Sole intena todial (12)	ely by ince/ Staff?		Description stos Containing M thermal system surfacing, VA other miscellar	Material (ACM) s insulation, AT, or	(Amount Specify F or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A						10000		te	Ψ
Boiler Room	х			2 Boile	ers-Exterior c	over and the	2,	000 SF	X			
				mat	erials inside t	the panels			X			
Boiler Room	Х				Boiler Breed	ching	1,	000 SF	X			
Continued on the next page												
Name of Registered Waste Hauler		100	JDEP W		Cubic Yards	Name of	Regist	ered Lan		1		-
Pyramid Contracting Corp.		-0.00	lauler ID 2613	No.	of Waste	G.R.O.	W.S.,	Inc.				
City, State Clifton, New Jersey	***************************************			1-12-1-1990	Disposal Date 08/08/12/	City, Stat Morrisv		Perfinsyl	nia			
Completed by	Title	2000			Signature	A /	10	1	ite	22.4		
Dimo Golcev	Gene	eral N	langer		W	WY	_/		7/02/	12		
ASB-41 (R-06-08)					* Do no	ot use this form for	rasbes	stos licen	e exer	npted	activi	ties.

State of New Jersey Notification of Asbestos Abatement Continuation Sheet

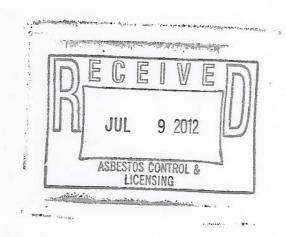


	ls	Locati	on		d d	77.0		ement pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used	ormal d Sole ntenar odial s (12)	ly by nce/	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A					_	L
Boiler Room	х			Pipe Insulation	100 LF	X			L
Pump Room	х			Pipe Insulation	30 LF	×			L
Sub-Pump Room	х			Elbows	2 LF	×			\vdash
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Date of Notification (1) 7/5/12	311				Building O				E G [E	n	7	
Agencies Notified	Type Notification			Street Ac					.1111	10 92 1				
EPA DEP DOL	Initial Amended Amendment	#			te, Zip Cod k NJ 07		1	744	JUL	9 20		U	1	
DOH DCA	Emergency (injustification) Cancellation	ncluding		Name of Tom M	Contact		į		ASBESTTE	lephone.N	iber		4.4	
L DCA	Cancellation				LITY INFO	DARATI	ON	· Add and the	14100		-		-	
Name of Facility Where Street Address	Abatement is Taking	Place (3)		PAGI	LITTINFO	KWATI	N N	Type of Faci School Subcha	lity (4) (K-12) pter 8 (Oth)			ν.
499 Belgrove Drive								Other (i etc.)	.e. private	& comme	il build	dings,	home	es,
City (5) Kearny			-2-11					Square Feet 5000	# 0	of Floors	В	ldg. A	.ge	
County (6) Hudson				County (Code (7) JSE ONLY)			Current Use	(Prior if be	ing demol	ed)			
Name of Monitoring Firm EnviroVision Const		Owner (8)		ASCM 0007			ABS	of Abatement Environme				ane e sem		
Street Address 20-21 Wagaraw Ro	pad						4 E C	Address Sate Drive,		483				
City, State, Zip Code Fair Lawn NJ 0741	10							tate, Zip Code wood, NJ						
Project Manager for Mor Fred Larson								one No. 764-2276		License 703	Э.			
Start Date (10) 7/16/12	art Date (10) Schedu						Name	of OSHA Mor	nitor					
Occupancy Status Durin	g Abatement (Chec	k Only One)				Street	Address						
	ated During Entire F ned Outside of Norm						City, S	tate, Zip Code	Э		-			
Scope of Work (Check A	All That Apply)													
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf		0.000	enova emolit					Mini-Enclo	inment wit osure Procedure opted (*) a		ressu		е	
10000		Is I	ocati	on			**						emen	t
Locatio	n of		ormal			De	escription	of				1)	ре	Г
Asbestos-Containing TO BE AB In Fact (13)	ATED lity	Custo	itena	nce/	Asbest (i.e.	therma surfa	taining M I systems acing, VA miscellar			Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
OFF ATT	SEE ATTACHED					CLIAI	NT TO	MCCABE			+	-		
SEE ATTA	+		-				SERVICE	9		+	-	-		
						E OF V		-		+	-			
		1-1						TOTAL			+	-		
Name of Registered Wa	ste Hauler		500	JDEP W	STATE OF THE PARTY	0.0000000000000000000000000000000000000	Yards	Nam	e of Regis	tered Lanc	1	1		
Freehold Cartage			3.75	lauler ID 5939	No.	of Wa			OWS N	_andfill				
City, State Freehold NJ						Dispo TBD	sal Date		State risville, F	PA				
Completed by Andrew Scott Higgin							Signature	h			te 5/12			
	170 7 0							w						

499 BELGROVE DRIVE, KEARNY HUDSON COUNTY

LOCATION	MATERIAL DESCRIPTION	ESTIMATED QUANTI
Basement	Rock mills boiler insulation	400 SF
Basement	Rock mills breeching insul	160 SF
Basement	HB smith boiler packing between sections	
Basement	Breeching insulation on arch- top boiler	6 SF
Basement	Packing on chimney access door	180 SF
Basement	Pipe joint insulation	20 LF
Basement	Paper pipe insulation	180 SF
Basement	White debris on floor	4 CY
Garages	Roofing tar & flashing	1000 SF



Check # 1425	NOT		TION	OF ASE	ew Jersey BESTOS ABAT C 8:60 and 5:16	111 11 110	CETV		n		
Date of Notification (1) / / / /	12			of Building	Owner/Operator (2)	JUL 9 201	Committee of the commit	U	Park and the Control of the Control	
Agencies Notified ☐ Type Notifica ☐ Initial ☐ DOLWD ☐ Amended			24 Hi	Address ghland Pla State, Zip C			SBESTOS CONTROL LICENSING	1		Total Control	
DHSS Amendme DCA Emergence (NJAC 5:23-8) Justification	cy (includin	g g	Maple	wood, N. of Contac	I 07040	- A Section of the se	Telephone Nun	Code .	অস্প্রান্তির চ	J 	
Cancellat	ion			Sammet			1	7.11 (7.11)			
Name of Facility Minary Abstract is T	alder Blee	- (0)	FA	CILITY IN	IFORMATION	[T [F					
Name of Facility Where Abatement is T Private home Street Address 24 Highland Place	aking Plac	e (3)					2) 8 (Other than K-1 : private and comme	al bu	ildinç	js,	
City (5)						Square Feet	# of Floors	Тві	dg. A	ae	
Maplewood, NJ 07040							4		3	J -	
County (6)		22.4	Coun	ty Code (7)	(STATE USE ONLY)	Current Use (F	rior if being demol	ed)			
Essex											
Name of Monitoring Firm Hired by Build	ding Owner	(8)	ASCM	No.	Name of Abatem	ent Contractor (9	9)				
					Gr Tech LLC						
Street Address					Street Address						
					576 Valley Rd #						
City, State, Zip Code					City, State, Zip C						
Project Manager for Monitoring Firm		Tole	nhana	No	Wayne, NJ 074	70	10				
Project Manager for Monitoring Pinn		Tele	phone	INO.	Telephone No. 973-638-1777		License No.				
Start Date (10)	Scheduled	Comple	tion Da	ite (11)	Name of OSHA	Monitor	01127	-			-
	07 Check only			12	Envirovision Co Street Address	onsultants,Inc		_		-	
□ Facility Closed/Vacated During Entit	re Period o	f Abate			20-21 Wagaraw	Road Blde #	34A				
Abatement Performed Outside of No Time of Abatement:AM	ormal Facil	ity Houi PM			City, State, Zip C		3 12 1	-			
	PIVI		-	_AM	Fair Lawn, NJ 0	7410					73
Scope of Work (Check all that apply) >3 sf or >3 If 160 sf or >260 If		enovati emolitic			☐ Mini-End ☐ Gloveba	closure g Procedure	egative Pressure				
		Is Locat	ion	T		inplod () and H	T Table Frocedt	Λh	otom	T	
Location of Asbestos-Containing Material (ACM <u>TO BE ABATED</u> IN Facility (13)	′ M	Norma sed Sole aintena stodial (12)	ely by nce/		Description of stos Containing Ma a, thermal systems surfacing, VAT other miscellane	iterial (ACM) insulation, , or	Amount (Specify SIF or LF)	Removal	Repair	ent Encapsulate	Enclosure
Dogomont	Yes	No 🗆	N/A	D: :	1.0			רסיו			
Basement	- -	-		Pipe inst			120 LF	X	Ш	Ш	Ш
Attic	ᆜᆜ	12	×	Vermicu	lite insulation		600 SF	X			
			Ш								
Name of Registered Waste Hauler		NJI	EP Waste	Hauler ID No.	Cubic Yards of Was	te Name of Reg	istered Landfill				
Gr Tech LLC		(03378	35	TBD	T.R.R.F. Inc			<u>- 811-2</u> =31		
City, State					Disposal Date	City, State					
Wayne, NJ 07470					TBD	Tullytown, F	PA .				
Completed By (Print or Type)	Title				Signature	De V.	0 1 0	1			
N.Jevtic	Owner				fle fle	whe N.	enad 07	5/20	12		

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-12					Second	AND THE PERSON OF THE PERSON O	****	area,	me, and the magnetic	e consequence of	mini with
Client Project #					i i	Clara subprants		Chip prosen	SECTION CONTRACT		
Date of Notification (1)	2				Name of Building Owner/ORUTGERS, THE ST	Operator (2)	A.F		RIGHT	FEED	7
July 5, 201 Agencies Notified		Votification	Tuno			AILUNI	VERSE	77	NJE	m	-
□ EPA □ DCA	1	Notification ☑ Initial ☑Amende ☑ Emerg	Notifica ed Noti		Street Address ENVIRONMENTAL 27 ROAD 1, BLDG City, State, Zip Code	086, LIVI		DI CA	EPT.		
X DOL		justific		•	PISCATAWAY, NJ	08854				limetree!	
☑ DEP- No Longer REQUIRED ☑ DOH	1	☐ Cance	lled		Name of Contact GREG LUPINSKI, E	NV AS	Telent	n Nı	mher		
S. C. C. C. C. C. C. C. C. C. C. C. C. C.					HEALTH & SAFETY		LIVER	3	-	1	
	. USS			FACILITY INF		** *** Think the Committee of the Commit	Short rechange	tida Licas	Add and and		1
Name of Facility Where Abatement KIRKPATRICK CHAPEL,					Type of Facility (4) School (K-12)	Ever 1				ردوکیونویست	* 2:10 044740
Street Address COLLEGE AVENUE CAM	PUS			22	Subchapter 8 (other that Subchapter 8 (other t	nmercial build					
City (5) Cou	nty (6)		County	Code (7)	Sq. Feet: N/A #	of Floors: 1	Blag	<u>/</u> <u>3:</u>	100+	years	
		ESEX		Use Only)	Current Use (prior if being	demolished		DE IC	PLACE	OF	
Name of Monitoring Firm Hired by B	ldg. Ow	ner (8)	ASCM 0098		Name of Contractor (9)	(1-1				-	
			0000		GREENWOOD ABAT	EMENT C	ONSUL	IN T.	S, INC) .	
Street Address 3 TERRI LANE					Street Address						
O TERRIT EARL					268 MAIN STREET						
City, State, Zip Code BURLINGTON, NJ 08016	5				City State, ZipCode BUTLER, NJ 07405						
Project Manager for Monitoring Firm	I	elephone N	lumber		Telephone Number		License	e I nb	<u>er</u>		
BRIAN KEARNY		609-386	-8800		973-492-0477		00840				
Scheduled Start Date (10)			Completio	on Date (11)	Name of OSHA Monitor						
07/17/12		7/23/12			ENVIROVISION, INC						
Occupancy Status During Abatem	ent (Ch	eck only o	ne)		Street Address	*					
□ Facility Closed/Vacated During □ Abatement Performed Outside	Entire F of Norm	Period of A nal Facility	batemer Hours -	nt	20-21 WARGARAW F	ROAD					
Describe Other – Describe: Shift Hou	re · 3 · (nn DM _	5.00 A	B.6	City, State, Zip Code						
EXOTIE: - Describe. STITE FIOU	15. J.(JO FINI —	3.00 A	(IA)	FAIRLAWN, NJ						
Scope of Work (Check all that apply)							-			
						Full Contain	ment wit	h ga	tive Pre	ssure	
≥ 3 sf or ≥ 3 lf				Renovation		Mini-Enclos					
⊠ ≥ 160 sf or ≥ 260				Demoiition		Glovebag P					
Location of Asbestos-Containing	Is Locat	tion Normal	lv Used	Description of Ash	pestos Containing Material	Non-Exemp Amour			Friable ent Type		ure
Material (ACM) in Facility (13)	Solely b	y Maint./Cu		(ACM) (i.e. therm	al systems insulation, surfacir	ng, (Speci	fy SF			- (-2002
	Staff? (*YES	12) NO	NA	VAT, or other mis-	cell.)	or LF)		Ri ive	Repair	Encap E	nciose
Room 101		X		VAT		3800	SF	<u> </u>	T	Π	
	0.000										
Name of Dec West 11-1-	- [
Name of Reg. Waste Hauler See Hauler Below #1 & 2		JDEP Was ee Below		· ID#	Cubic Yards of Waste:	40 CY	Mame of G.R.O		tered La North		II
Hauler #1) Greenwood Abatement	Consult	ants, Inc. –	Butler, 1	NJ 07405	T	Disposal Da	<u>te</u>		City, Stat		
NJDEP # 12561 Hauler #2) Newark Carting, Inc., N NJ DEP # 4509	lewark,	NJ 04509	A			07/23/12		F 1	00 New Rd. Morr 9067 15-736-	isville,	
Completed by (Print or Type)	Title				Signature		Date				
RAYMOND C. PEDALINO		NIOR PE		T	12 //		~	u 5,	2012		*:
L	MA	NAGER			- Il	1/			_		



Date of Notification (1) 7/2/12		>			Building O t Author				7	E C	0	E 11		= = = =	n	PATRICIA CONTRACTOR OF THE PATRICIA CONTRACTOR O	
Agencies Notified	Type Notification Initial		2		ress St. Ro , Zip Cod					Jl	JL	9 /	21 :-				_
EPA DEP DOL	Amended Amendment #				city, NJ									1			- 1
	Emergency (in justification)	ncluding		ame of C					- lo	ASR	Tele	phone N	E er	PP-SER		1	
DOH DCA	Cancellation		R	alph C	ampion	е	1										
		D. (0)		FACILI	TY INFO	RMATIO	N .	Type of	f Eacili	by (4)	, disert	BA COR	<u> </u>				-i
Name of Facility Where A Newark Liberty Inte	rnational Airport	Place (3)						So	chool (K-12)	Othe	er than K	-1				اد مدر
Street Address Newark Liberty Inte	rnational Airport	:					l	× 0				comme		ıildir	ngs, h	ome	3,
City (5)								Square	Feet	- 1		Floors		Blo 50	lg. Ag	е	
Newark								24000	25		6	an domo	lis d)		т		_
County (6) Essex				ounty Co	ode (7) SE ONLY)			Passe				ng demo al	in u)				
Name of Monitoring Firm	Hired by Building ()wner (8)		ASCM	No.		Name o		-								\dashv
Port Authority of N	Y & NJ	Wilei (0)		7,00m								cting, I	r				
Street Address 241 Erie St. Room	236						Street <i>A</i> 36-16			ue							
City, State, Zip Code Jersey City, NJ 073	310						City, St Astori					22.7					
Project Manager for Mon				elephon	e No. 1-6352		Telepho 718-7					License 01159	30				
Start Date (10)		Scheduled (12/31/12	Com	pletion D	ate (11)		Name o				ntal						
7/16/12 Occupancy Status Durin	og Abatement (Chec						Street /						-		-		
	cated During Entire F		teme	ent			36-15	5A 23r	d Str	eet		200					
Abatement Perform Other – Describe:	ned Outside of Norm	nal Facility H	ours			_ [City, St Long	ate, Zip Islan			111	105					
Scope of Work (Check	All That Apply)	9/444-9					177	1									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			novat				×	Min Glo	i-Enclo vebag	sure Proced	dure	n Negativ		esur	e edur	a	
			_					1 1401	I-LACII	ipieu () ai	id Holl I	Ï	_	Abate	and our over	
			catio rmall			Des	cription	of					L		Ту	ре	
Asbestos-Containin TO BE At In Fac	Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)					tos Conta	aining M systems sing, VA	laterial s insula T, or			(Amount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
T	no 16 Stoinwoll	Yes	No	N/A X		Fire	proofi	na		_	2	95SF	×				
Terminal A col. II	Terminal A col. line 16 Stairwell					1110	proon	iig		+			=				
	Normand Designated Wants Hauter					T 0 : : :	V1-		LNe	2.05	ogici	arad I c					
Name of Registered W			JDEP W auler ID		Oubic of Was			1000	ytowr		ered Lar						
ABC Construction	والمحجوج بالأرجاس	22	2280		20								_				
City, State Astoria, NY 11105						1/2/13		0		State ytowr		A 1900					
Completed by Alex Gregoriou	npleted by Title					S	ignatur		ru	ere	ev	2	2/	12			

Date of Notification (1) 07-03-2012 Page 1 of 2		E	wing To	ownship	ner/Operato School D	istrict	Che	gk#	1814	T		APE STREET	_	
Agencies Notified Type Notification X EPA X Initial		20		nningtor				= U	W			1		
DEP Amended Amendment #_				Zip Code IJ 0861			JUL	9	2012		劃	i		
Emergency (incl justification) DCA Emergency (incl justification) Cancellation	uding	1000	ame of C yan Bro	ontact oadwate	er	1 1	ASBESTO		nhone	mbe	er			
			FACILI	TY INFOR	MATION	1	110	EMCIM				-:	_	-
Name of Facility Where Abatement is Taking Pl Ryan Administration Building-Frank C	ace (3) 'Brien	Acad	emy		· ange	× Sc	Facility (4) hool (K-12) bchapter 8	1995 A		12)		: : ! !		
Street Address 1331 Lower Ferry Road						Oth	her (i.e. pri :.)	vate &			ouildir	g. Ag		
City (5) Ewing						Square 22,500)	2		ahoo	75			\perp
County (6) Mercer			ounty Co	de (7) E ONLY)		Acade				shed	1)			
Name of Monitoring Firm Hired by Building Ow Environmental Connection, Inc.	ner (8)		ASCM N	No.		ne of Abate ade Envi								
Street Address						et Address S. Lippin						50		
120 North Warren Street City, State, Zip Code					City	, State, Zip	Code			_				
Trenton, N.J 08608 Project Manager for Monitoring Firm	S HONINGE	Т	elephone	e No.	Tele	ephone No.		0002	Licer	No.				
Ryan Broadwater	abadulor	16	09-392 pletion D	2-4200		6-755-00 ne of OSH/			0084	_	-	-		\dashv
July 16, 2012	ug. 21	,2012			EN	/ISL		Transition of		_		¥		-
Occupancy Status During Abatement (Check					E (1781)	eet Address 7 Haddo								
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Normal Other – Describe:	Facility	Hours	ent		— City	, State, Zip estmont,	Code New Je	rsey	081					
Scope of Work (Check All That Apply)						proces								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	enovat emoliti				× Mini	Containme Enclosure vebag Prod	e edure			essur e Proc			
						IN NOT	-Exempted	1 () ai	iù ivoii	Idali		Abate	ment	
		Locati										Ту	oe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai Cust	d Sole ntenar odial S (12)	ly by nce/ Staff?	Asbest (i.e.	Descrip os Containir thermal syst surfacing other miso	ng Material tems insula , VAT, or	(ACM) tion,	(Amoun Specif F or L		Removal	Repair	Encapsulate	Enclosure
See page 2 for Additional ACM Multiple Offices	Yes	No	N/A XX	F	loor Tile a	and Masti	ic	2	446 5	-	х			
Boiler Room			XX		Breed				25 SF		х			
Boiler Room			XX		Fire I	Brick			30 SI		Х			
Boiler Room			XX		Fire	Door			1@		x			
Name of Registered Waste Hauler		IN	JDEP W	/aste	Cubic Yar	ds	Name of	Regis	tered I	dfill				
Freehold Cartage		F	lauler ID	No.	of Waste		Grows		lfill					
City, State Freehold, NJ					Disposal	Date	City, Sta Tullyto		PA					
Completed by William Lynch	Title Own	er			Sign	ature !UL	9.0	Lys	1	07	te '-03-	2012	2	

Date of Notification (1) 07-03-2012 Page 2 of 2			Nam	ne of Bu	liding Owne	er/Operato	F(2) P		-Corcustonia		**************************************		
Agencies Notified Type Notification			Stre	et Addre	wnship S	School D	istrice G	Check	481	n	1		
EPA X Initial Amended		City,	State, 2	nington F	Road	DI JUL	0 20	119-					
Emergence	v (includi	ng	. Ewi	ng, N.	08618		7	9 20	112	1000			
DOH justification Cancellation	n) n			e of Cor In Broa	ntact adwater	j	ASBESTO	S COLUTE	ephon	lumb	er		
Name of Facility Where Abatement is Tak	ing Place	(3)	FA	ACILITY	INFORMA	TION		ENS	Consultant.		,		
Ryan Administration Building-Franchistration B	nk O'Br	ien A	cadem	ny		****	Type of Facili	5.000	Nicolatala Micolatala	haren .			
1331 Lower Ferry Road							School (I	ter 8 (Othe	er than	·12)	MET SHAPE		
City (5) Ewing					-		Other (i.e etc.) Square Feet	e. private &		cial b			
County (6)			T C				22,500	2			75	. Age	į.
Mercer			(STAT	y Code E USE O	(7) NLY)		Current Use (F Academy	Prior if bein	g den	shed)	_		-
lame of Monitoring Firm Hired by Building Environmental Connection, Inc.	Owner (8)	ASC	CM No.		Name of Shad	of Abatement Co e Environme	Contractor (9)				
Street Address 120 North Warren Street						Street A							
ity, State, Zip Code Frenton, N.J 08608							ate, Zip Code	ive					
roject Manager for Monitoring Firm			Teleph	one No.		Maple	Shade, NJ	08052					
Ryan Broadwater			609-3	392-42	00	Telepho 856-7	ne No. 55-0099		Licens 0084;	lo.			
tart Date (10) uly 16, 2012	Schedu Aug. 2	led Co	mpletion	Date (1	11)	1	OSHA Monito		0084.				
ccupancy Status During Abatement (Check	Only O	ne)	12			EMSL	4						
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm	oried of		ment				addon Ave					10	
Other – Describe: cope of Work (Check All That Apply)	ar r aciiit	y rioui	S			City, Sta Westr	te, Zip Code Iont, New J	ersev 0	8108				
≥3 sf or ≥3 If	X F	Renova	ntion	4							-		
≥160 sf or ≥260 lf	= .)emoli				×	Full Containm Mini-Enclosur Glovebag Pro	e cedure	23	ressu	N.S.		
	ls	Locati	ion	T -		×	Non-Exempte	d (*) and N	on-Fri	e Pro	100 A 11 - 200 A 100 A		
Location of Asbestos-Containing Material (ACM)	N	lormal d Sole	lv		Des	cription of	ž o				100	emen pe	t
TO BE ABATED In Facility (13)	Mai	ntenar odial S (12)	nce/	Asbe (i.	estos Conta e. thermal s surfaci	ining Mate systems in ing, VAT.	or I	Amou (Spec SF or	cify	Removal	Re	Enca	Enc
ee page 1 for Additional ACM Interior and Exterior Windows	Yes	No	N/A		ouler m	scellaneo	15)			oval	Repair	Encapsulate	Enclosure
Throughout Exterior			XX		C	aulk		320 L	F	x		-	_
Break Room			XX		Clad	Panels		204 5		x		\dashv	_
siness Office and Board Room			XX			Mastic		6 SF		x	-	\dashv	
ne of Registered Waste Hauler		I NI	XX DEP Wa	V	Vood par		The second secon	TBD		x	1	+	_
ehold Cartage		Ha	uler ID N	iste lo.	Oubic Ya of Waste		Name of R Grows L	Registered I andfill	Landfi				
State Phold, NJ	(Seezantee)				Disposal	Date	City, State						
pleted by	Title				10:		Tullytow	n, PA					
am Lynch	Owner				Sigi	nature	J. Lu	nch	Da O7	13-20)12		

							(してする	11)	7		
Date of Notification (1)	02 /	40				g Owner/Operator (2		THE PARTY OF THE P	Penn			7	
		12		New	/ Jersey	Turnpike Author	FE	FIW	1	1	-,	\$0 21	
Agencies Notified ☑ EPA	Type Notific	ation		STATE OF THE STATE	Address Main St	reet				Proposition of the last of the		-	
☑ DEP☑ DCA (NJAC 5:16)	Amende Amendm				tate, Zip (JUL	9 2012		J			
☑ DHSS □ DCA		ncy (including				e, NJ 08863		Talanhana Nu	1		1		
(NJAC 5:23-8)	justificat Cancella	ation		100000000000000000000000000000000000000	of Contac I Pittari		ASBES	Telephone Nui	er				
				FAC	ILITY IN	FORMATION	L	chenouster deserts and a Technical	interiore.	attra er		4	9
Name of Facility Where	Abatement is	Taking Place	(3)				Type of Facility (4		n removaled		enert.	ار پانس	^
Bridge Structure 5	6.38					F.E.	School (K-12)	AND THE PERSON NAMED IN COLUMN TO TH					
Street Address							☐ Subchapter 8 ☐ Other (i.e., priv		I bui	dina			
Ward Avenue Brid	ge (over the	NJ Turnpi	ke)				homes, etc.)	rate & confine	I Dui	unig	ъ,		
City (5)							Square Feet	# of Floors	E	ldg.	Age	9	
Chesterfield							30,000			30-	t-		
County (6)				Coun	ty Code (7	7)(STATE USE ONLY)	Current Use (Prio	r if being demc	ned)		,		
Burlington							Roadway	5 504					
Name of Monitoring Fire	n Hired by Bui	ilding Owner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)						
Envirovision Cons	sultants, Inc			0368	1	Diamond Hur	ntbach Construe	ction Corpor	ion				
Street Address						Street Address			_	-		-	
20-21 Wagaraw Ro	oad, Bldg. 34	4A				500 East Luz	erne Street						
City, State, Zip Code				-		City, State, Zip Co	ode		-	- 200	1100000	400	
Fairlawn, NJ 0741	0					Philadelphia,	PA 19124						
Project Manager for Mo	nitoring Firm		Tel	ephone	No.	Telephone No.		License No.	-				
Guillermo M. Mora	3 11 30 3 3 3 4 5 5 1 3 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Decrease.	73-636		215-739-8166		00646					
Start Date (10)		Scheduled C	ompl	etion Da	te (11)	Name of OSHA M	Monitor		_				
	12	08 /		5 /		SAME AS AB	BOVE						
Occupancy Status Durin	ng Abatement	(Check only o	ne)			Street Address	Allen and a second		_				
☐ Facility Closed/Vaca				ement									
Abatement Performer Time of Abatement:	ed Outside of N	Normal Facility	у Ноц	ırs - Des	cribe	City, State, Zip Co	ode		-				
		PIVI/ <u>7.00</u>	PIVI-I	OUAW									
Scope of Work (Check	all that apply)	18				□ F.// Com	tainmant with None	ative Draegure					
☐ >3 sf or >3 lf		□Re	nova	ition		☐ Mini-End		alive Flessule					
≥160 sf or ≥260 lf		⊠ De	molit	ion		Gloveba	g Procedure	Edable Descri					
		I	Loca	ation	T	⊠ Non-Exe	empted (*) and Non	-Friable Proce	e	h = t =		nt Ty	
Locatio	n of	1	Norm	ally		Description of	of		-	1	_	111. 13	-
Asbestos-Containing	Material (AC			lely by ance/		estos Containing Ma	aterial (ACM)	Amount	70	1 3	Renair	E	Enclosure
TO BE AE		5-51696		I Staff?	(i.e., the	ermal systems insula VAT. or	ation, surfacing,	(Specify SF or LF)	Kemova	1 2	<u>₹</u> .	Encapsulate	Sols
(13)			(12	2)		other miscellane	eous)	Of Of Er /	<u>a</u>	9		ula	ure
		Yes	No	N/A								e e	
Under Bridge Struc	ture		\boxtimes		Transi	te Duct Pipe		2,400 LF	×] [
									TE	1 0	1		
	•				1000				TF	1	7	П	
Name of Registered Wa	ete Hauler		Ӵ	NJDEP V	Masta	Cubic Yards of	Name of Regist	ered I andfill	1	1 -	-1	ш	
Freehold Cartage,		Hauler II	D No.	Waste 40 cv	GROWS No								
City, State						Disposal Date	City, State						
Freehold, NJ						08/15/12	Morrisville,	PA					
Completed By (Print or	CORPORATION CONTRACTOR	Title				Signature	101.	10	te	2	-		
Charles F. Imbimb	00	Project	Ma	nager		1 16	4 8 11/2	1.)-1	1		

ASB-41 JUL 01

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



Date of Notification (1)	Name	of Buildir	ng Owner/Operator ((2)	D.D.	Section Section 1		-						
//	12		Pe	arson Be	eckham Realty		ECE	\mathbb{W}	5/1	7)				
Agencies Notified ☐ EPA ☐ Initial ☐ Amende	142	t Address 22 Buttor	2012											
☑ DHSS Amendm				State, Zip					- Impus	1				
☐ DCA ☐ Emerger	cy (includir	ng		A wareness and a second	IC 28054	1 / -	ASPESTOS CO	201	1	1				
(NJAC 5:23-8) justificati	273			of Contac			ASPESTOS CO Telephone N	iber &		- Carrie				
☐ Cancella	tion		Ma	tt Beckh	am	m ·								
			FA	CILITY II	NFORMATION	And the second section of	C. Confliction Co.	skinding.						
Name of Facility Where Abatement is	Taking Plac	e (3)				Type of Facility (4)	Fair Was Light and	- Aller Dalman	interiories,	5 74			
Former Residence						School (K-12)	(Oth 11: 14							
Street Address						☐ Subchapter 8 ☐ Other (i.e., pri								
20-24 High Street						homes, etc.)								
City (5)						Square Feet	# of Floors	Ble	dg. Age	Э				
Woodbury		ma Senten				4000	2 + bSM		÷/- 50					
County (6)			Cour	nty Code (7)(STATE USE ONLY)	Current Use (Price	or if being dem	shed)						
Goulcester						Vacant								
Name of Monitoring Firm Hired by Build	ding Owner	(8)	ASCM	No.	Name of Abateme									
EHS		-			USA Environ	mental Manage	ment, Inc.							
Street Address					Street Address									
9 South Main Street					8436 Enterpr	ise Avenue								
City, State, Zip Code		in the same of			City, State, Zip Co	ode								
Mullica Hill, NJ 08062					Philadelphia,	PA 19153								
Project Manager for Monitoring Firm	No.	Telephone No. License No												
Jack Carney		56-223	4000000000000	215-365-5810 1156										
Start Date (10) 5	Scheduled (ite (11) 12	Name of OSHA Monitor USA Environmental Management, Inc											
Occupancy Status During Abatement (20000				illelitai wanage	ment, inc							
☐ Facility Closed/Vacated During Entil			Street Address											
☐ Abatement Performed Outside of No	ormal Facili	tv Hou	rs - Des	cribe	8436 Enterprise Avenue City, State, Zip Code									
Time of Abatement: 7AM-3:30PM/	PM-	,	AM		Philadelphia,									
Scope of Work (Check all that apply)								_						
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☑ Non-Exempted (*) and Non-Friable Proce re												
	7.25	s Loca						Ab	atemen	nt Tv	pe			
Location of Norma Asbestos-Containing Material (ACM) Used Sole					Description of									
Asbestos-Containing Material (ACM) TO BE ABATED Used Sole Maintena					estos Containing Ma e., thermal systems		Amount (Specify	Remova	Repair	Encapsulate	Enclosure			
IN Facility Custodial				(surfacing, VAT,	, or	SF or LF)	oval	7	nso	Sun			
(13)	Yes	(12) No	N/A	1	other miscellane	ous)	200 NOCO-00			ate	O			
Exterior	l les		N/A	Caulk			312 LF			_	\exists			
Roof				Flashin	na .	2200 SF				=	님			
,				, idomi	'9		2200 31		П	井				
								+=		井				
Name of Registered Waste Hauler	JDEP /	Naste	Cubic Yards of	Name of Registe	ared Landfill		וטו							
USA Environmental Manageme	O No.	Waste	Minerva Lar											
City, State			32610)	Disposal Date						_			
Philadelphia, PA					7/31/2012	City, State Waynesburg	a. OH				-			
Completed By (Print or Type)	Signature			ite										
Dilip Kumar	Title Progra	m Ma	nager			1.100								
(1) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Program Manager William								7-3-12					

ASB-41 MAY 11

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

b #: 1202-1621 heck #: NA

Date of Notification (1) 6/5/12 Agencies Notified Type Notification EPA DEP Initial DOL Amended #2 ON H DOH Emergency DCA Cancellation	Name of Building C Bob Novick Che Street Address 808 North Pearl City, State & Zip C OLD Name of Contact Mrs. Debby Nov	Street ode 8302	<u>D</u>	epho		umbe	CO CT-1-regularity		
Name of Facility Where Abatement is Taking F Bob Novick Auto Mall Street Address 808 North Pearl Street City (5) County (6) Bridgeton Cumberlan Name of Monitoring Firm Hired by Building Ow Horizon Environmental	County Code (7)	Type of Facili School (I Subchap Other (i.e Square Feet 21,728 Current Use (Auto Deale Name of Aba	(C-12) ter 8 (Other the private & co # of Flog Prior if being (nome g. Age			This is a second of the second	
Street Address PO Box 316 City. State & Zip Code Thorofare, NJ 08086 Project Manager for Monitoring Firm Dave or Steve Flanigan Scheduled Start Date (10) 6/14/12 Occupancy Status During Abatement (Check of	Telephone Number 856-848-0800 mpletion Date (11)	Hainesport Telephone No 609-702-040 Name of OSH EMSL Analy	, NJ 08036 umber 00 HA Monitor ytical	Licer) Nun	nber 0086	2		
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Describe: Sope of Work (Check all that apply) ≥3 sf or ≥3 If ≥160 sf ≥260 If	Period of Abatement	107 Haddor City, State & Westmont,	Zip Code NJ 08108 Full Co Mini-Er Glove 8	ntainment v nclosure Bag Procedi tempted and	ıs	ative			
Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)	Is Location Normally Used Solely by Maintenance or Custodial Staff? (12) Yes No N/A	Description of Am Asbestos-Containing (Sr Material (ACM) SF (i.e., thermal systems sulation, surfacing, VAT or other miscellaneous)				Aba Removal			9207
Roof Roof Deck	Roofi Roofi Trans	ofing, Flashing & Decking 440 ansite Panels 4 ea							
Name of Registered Waste Hauler Horizon Disposal City, State Trenton, NJ Completed By (Print or Type) Kim Trumbetti	22612	Cubic Yards of Waste 6 Disposal Date 10/1/12 Signature	Name of Reg GROWS City, State Morrisville			Date 6/28	/12	41 2000	

Date of Notification (1) 7-6-12		Name of Building Owner/Operator (2) VNO Wayne Town Center LLC						7	5							
Agencies Notified Type Notification			Street Address						0.0.							
× EPA DEP	Initial Amended	250 Wayne Town Center, NJ State Route 23 City, State, Zip Code								FHC W	52 190 1					
DOL	Amendment #		1000		NJ, 07				1		0 3		TOS CONTROL			
DOH DCA	justification) Cancellation	icidaling	100		Contact	0			Te	lephor		nber	S CC	The second		
Прох	Cancellation		Eric Dinenberg FACILITY INFORMATION										E\$10	1		
Name of Facility Where Wayne Town Cent		Place (3)		Type of Facility (4)							n		ASBES		70	
Street Address		School (K-12) Subchapter 8 Orner N						ersha	7			100	1			
250 Wayne Town		Other (i.e. private & co									dings	hom	es,			
City (5)	Square Feet # of Flo						f Floor	Bldg. Age 45 years								
Wayne County (6)			-т	County Code (7)				220,000	2 or if be	ing de	lish		5 ye	ars		
Morris				County Code (7) (STATE USE ONLY)				Not in use				eu)				
Name of Monitoring Fire Certified Environm		wner (8)						f Abatement Cor ercy Group In	(9)							
Street Address	· · · · · · · · · · · · · · · · · · ·							ddress								
136 West 83rd Stre	eet, Suite 1						Burns Avenue									
City, State, Zip Code New York NY, 10024								ite, Zip Code igh NY 11793	3							
Project Manager for Monitoring Firm Greg Paulay								phone No. Lice 6-876-0020 010								
								ne of OSHA Monitor								
7-9-12 12-31-12 Occupancy Status During Abatement (Check Only One)					Gramercy Group Inc. Street Address											
Facility Closed/Vacated During Entire Period of Aba				3000				0 Burns Avenue								
Abatement Performed Outside of Normal Facility Ho Other – Describe: Vacant Retail Store				urs City, State, 2				ite, Zip Code ngh, NY 1179	3							
Scope of Work (Check	All That Apply)		MARKET SE							i e e e e e e e e e e e e e e e e e e e					e a thriagaeth arth in	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Demolition						Full Containment with Negation Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non								
	le l	ocati					Non-Exemple	J () ai	IU NOT	labi	emen	it				
Locatio	No	Is Location Normally Used Solely by				Description of					Type					
Asbestos-Containing TO BE AB	Main	tenar	ance/ (i.e. thermal system						Amoun Specif		R		Enc	m		
In Fac (13)	Custo	dial S (12)	staff?			ng, VAT,	, or	r SForL			Remova	Repair	Encapsulate	Enclosure		
(10)		Yes	No	N/A	other miscella			neous)				à	-	ate	Ire	
South East Corner of Store				Х	Unstable Spray on f			fireproofing 4,6		600 :		Х		Х		
3 locations through	ghout the store			Х	Unstable Spray on			Fireproofing 9 s		9 sf		Х		X		
Delaminated Fireproofing on Ductve				Х	Delaminated spray			on on ducts 3 sf		3 sf		Х				
Column Bases and Broken VAT				Х	Debris clean up ar								X	X		
Name of Registered Waste Hauler					DEP Waste											
Horwith Trucks Inc.				227 200				Minerva Enterpris								
City, State Northampton, PA 18	8067					Disposa 12-31-		City, Stat Wayne		ОН			-111			
Completed by Robert Lewin	ntal Co	oordinat		mature/	1			Dai 7-6	te 3-12							
L						IV.	000	120			100	-				