State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:80 and 12:120)

Date of Notification (1) 7/16/15
Name of Building Owner/Operator (2) Frank Muzzo

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

Street Address
- 1516 Boulevard
- Westfield, NJ 07090

Name of Facility Where Abatement is Taking Place (3)

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

Square Feet 1728
# of Floors 1
Bldg. Age 73

County Code (7)
- Union
(STATE USE ONLY)

Current Use (Prior if being demolished) HOME

Name of Monitoring Firm HIred by Building Owner (5) ASCM No. Name of Abatement Contractor (9)

Street Address
- P.O. Box 915

City, State, Zip Code
- Brick, New Jersey 08723

Telephone No.
- (732) 999-7499

License No. 01196

Project Manager for Monitoring Firm

Start Date (10) 7/17/15
Scheduled Completion Date (11) 7/10/15

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

Scope of Work (Check All That Apply)
- ≥3 sf or ≥3 l f
- ≥160 sf or ≥260 lf
- Renovation Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*) and Non-Flammable Procedure

Location of Asbestos-Containing Material (ACM)

Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)

Location of Asbestos-Containing Material (ACM)

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

Amount (Specify SF or LF)

Abatement Type

Removal
Repair
Encapsulate
Enclosure

Name of Registered Waste Hauler
- Brick Industries Inc.

NJDEP Waste Hauler ID No. 21602

Cubic Yards of Waste 6

Name of Registered Landfill
- GROWS Inc.

City, State, Zip Code
- Brick, NJ 08723

Disposal Date 7/11/15

Completed by
- Eric Plackis

Title
- President

Signature

Date 7/16/15

* Do not use this form for asbestos licensure exempted activities.
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:66 and 12:120)

Date of Notification (1)
07-03-15

Name of Building Owner/Operator (2)
Caravella Demolition

Name of Contact
Tom Bandelt

FACILITY INFORMATION

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

Street Address
169-161 Central Place

City (5)
Orange

County (6)
Essex

Name of Monitoring Firm Hired by Building Owner (8)
N/A

ASCM No.

Name of Abatement Contractor (9)
Delta Contracting LLC

Street Address
522 7th St.

City, State, Zip Code
Union City NJ 07087

Project Manager for Monitoring Firm

Telephone No.

Start Date (10)
07-15-15

Scheduled Completion Date (11)
07-17-15

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

Other – Describe:

Scope of Work (Check All That Apply)
- ≥3 sf or ≥3 if
- ≥160 sf or ≥260 if

Renovation
Demolition

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

Entire Property

X

Demolition Asbestos Debris

Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)

Yes
No
N/A

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

Amount (Specify SF or LF)

Abatement Type

Removal
Repair
Encapsulate
Enclose

Name of Registered Waste Hauler
Caravella Demolition Inc
NJDEP Waste Hauler ID No.
35685

Cubic Yards of Waste
60

Disposal Date
07-16-15

City, State
E. Hanover, NJ 07936

Name of Registered Landfill
IESI

City, State
Bethlehem, PA

Completed by
Jaime Delgado

Title
Proj. Manager.

Signature

Date
07-03-15

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

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

**Date of Notification (1)**
July 6, 2015

**Name of Building Owner/Operator (2)**
Nick Racioppi

**Agencies Notified**
- [ ] EPA
- [ ] DEP
- [ ] DOL
- [ ] DOH
- [ ] DCA

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

**Street Address**
51 Canfield Road
Morristown, NJ 07960

**Name of Contact**
Nick Racioppi

**Telephone Number**

---

### FACILITY INFORMATION

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

**Street Address**
132 Island View Drive

**City**
Toms River Twp.

**County**
Ocean

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

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

**Square footage**
1000 sq ft

**# of Floors**
1

**Bldg. Age**
60

**Name of Abatement Contractor (9)**
Guardian Contracting, Inc.

**Street Address**
1889 Route 9, Unit 61
Toms River, New Jersey 08755-1271

**City, State, Zip Code**

**Telephone Number**
732-349-9932

**License Number**
00624

**Name of OSHA Monitor**
E.M.S.L. Analytical

**Street Address**
1056 Stelton Road
Piscataway, New Jersey 08854

**City, State, Zip Code**

---

**Name of Monitoring Firm Hired by Building Owner (8)**
N/A

**ASCM No.**

**Project Manager for Monitoring Firm**

**Telephone Number**

**Scheduled Start Date (10)**
7/7/15

**Scheduled Completion Date (11)**
7/9/15

**Occupancy Status During Abatement (Check only one)**
- [ ] Facility Closed/Vacated During Entire Period of Abatement
- [ ] Abatement Performed Outside of Normal Facility Hours
- [ ] Other – Describe

**Scope of Work (Check all that apply)**
- [ ] >3 sf or ≥3 if
- [ ] ≥160 sq ft or ≥250 if
- [ ] Renovation
- [ ] Demolition
- [ ] Full Containment with Negative Pressure
- [ ] Mini-Enclosure
- [ ] Glovebag Procedure
- [ ] Non-Exempted (*) and Non-Friable Procedure

---

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

**Is Location Normally used Solely by Maintenance/Custodial Staff**
(12)

YES NO N/A

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

**Amount (Specify SF or LF)**
900 sf

**Abatement Type**

---

**Name of Registered Waste Hauler**
Guardian Contracting, Inc.

**NIDEP Waste Hauler ID No.**
20223

**Cubic Yards of Waste**
3

**Name of Registered Landfill**
T.R.R.F.

**City, State**
Tullytown, Pennsylvania

**Disposal Date**
7/10/15

**Completed by (Print or Type)**
Nicholas Pernicola

**Title**
Project Manager

**Signature**

---

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

**State of New Jersey**

**NOTIFICATION OF ASBESTOS ABATEMENT**

(Pursuant to NJAC 8:60 and 5:16)

---

### Date of Notification

07 / 06 / 15

### Name of Building Owner/Operator

Valerie Bigott

### City / State / Zip Code

Wyckoff, NJ 07481

### Name of Contact

Valerie Bigott

### Telephone Number

201-741-3208

---

### Name of Facility Where Abatement is Taking Place

540 Oldwoods Road

### Square Feet

# of Floors

Bldg. Age

---

### Name of Monitoring Firm Hired by Building Owner

ASCM No.

Gr Tech LLC

### Street Address

576 Valley Rd #283

### City, State, Zip Code

Wayne, NJ 07470

### Telephone No.

973-638-1777

### License No.

01127

### Name of Abatement Contractor

Envirovision Consultants, Inc

### Street Address

20-21 Wagaraw Road, Bldg. # 35 E

### City, State, Zip Code

Fair Lawn, NJ 07440

---

### Occupancy Status During Abatement

Facility Closed/Vacated During Entire Period of Abatement

Abatement Performed Outside of Normal Facility Hours - Describe

Time of Abatement: AM AM AM AM

---

### Scope of Work

- >3 sf or >30 sf
- ≥ 160 sf or ≥260 sf

- Renovation
- Demolition

- Clean up and decontamination with negative pressure
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Tent with Negative Pressure
- Non-Exempted (*) and Non-Nailable Procedure

---

### Location of Asbestos-Containing Material (ACM)

**IN Facility**

<table>
<thead>
<tr>
<th>Location</th>
<th>ACM Used Solely by Maintenance/Custodial Staff?</th>
<th>Description of ACM (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
<th>Amount (Specify SIF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basement</td>
<td>☐</td>
<td>Transite pipe</td>
<td>5 LF</td>
<td>☐ ☐ ☐</td>
</tr>
<tr>
<td>First floor</td>
<td>☐</td>
<td>Transite pipe</td>
<td>15 LF</td>
<td>☐ ☐ ☐</td>
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</table>

### Name of Registered Waste Hauler

Gr Tech LLC

### NDEP Waste Hauler ID No.

0033785

### Cubic Yards of Waste

TBD

### Name of Registered Landfill

T.R.R.F. Inc

### City, State

Tullytown, PA

### Disposal Date

TBD

### Signature

Nevic

### Completion Date

07/06/2015

---

*Do not use this form for asbestos licensure exempted activities.*
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:56 and 12:120)

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>Name of Building Owner/Operator (2)</th>
</tr>
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<tbody>
<tr>
<td>07/01/2015</td>
<td>Erin Young</td>
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<table>
<thead>
<tr>
<th>Agencies Notified</th>
<th>Type Notification</th>
<th>Street Address</th>
<th>City, State, Zip Code</th>
<th>Name of Contact</th>
<th>Telephone Number</th>
</tr>
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<tbody>
<tr>
<td>□ EPA</td>
<td>Initial</td>
<td>399 Monmouth Street</td>
<td>East Windsor 08520</td>
<td>Erin Young</td>
<td></td>
</tr>
<tr>
<td>□ DEP</td>
<td>Amended</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ DOL</td>
<td>Amendment #</td>
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<tr>
<td>□ DOH</td>
<td>Emergency (including justification)</td>
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<td></td>
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</tr>
<tr>
<td>□ DCA</td>
<td>Cancellation</td>
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</table>

<table>
<thead>
<tr>
<th>FACILITY INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Facility Where Abatement is Taking Place (3)</td>
</tr>
<tr>
<td>Street Address</td>
</tr>
<tr>
<td>City (5)</td>
</tr>
<tr>
<td>County (6)</td>
</tr>
<tr>
<td>Current Use (Prior if being demolished)</td>
</tr>
<tr>
<td>Square Feet</td>
</tr>
<tr>
<td># of Floors</td>
</tr>
<tr>
<td>Bldg. Age</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Name of Abatement Contractor (9)</th>
<th>Turningpoint Contracting Corp.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street Address</td>
<td>51 Berkeley Terrace</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Irvington NJ 07111</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Project Manager for Monitoring Firm</th>
<th>Telephone No.</th>
<th>License No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chinyelu Oraegbunam</td>
<td>201-483-9788</td>
<td>01238</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Start Date (10)</th>
<th>Scheduled Completion Date (11)</th>
</tr>
</thead>
<tbody>
<tr>
<td>07/17/2015</td>
<td>08/17/15</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Occupancy Status During Abatement (Check Only One)</th>
</tr>
</thead>
<tbody>
<tr>
<td>☒ Facility Closed/Vacated During Entire Period of Abatement</td>
</tr>
<tr>
<td>☒ Abatement Performed Outside of Normal Facility Hours</td>
</tr>
<tr>
<td>Other – Describe:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Scope of Work (Check All That Apply)</th>
</tr>
</thead>
<tbody>
<tr>
<td>☒ ±23 sf or ±3 if</td>
</tr>
<tr>
<td>☒ ±160 sf or ±260 if</td>
</tr>
<tr>
<td>☒ Renovation</td>
</tr>
<tr>
<td>☒ Demolition</td>
</tr>
<tr>
<td>☒ Full Containment with Negative Pressure</td>
</tr>
<tr>
<td>☒ Mini-Enclosure</td>
</tr>
<tr>
<td>☒ Glovesbag Procedure</td>
</tr>
<tr>
<td>☒ Non-Exempted (#1) and Non-Friable Procedure</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)</th>
<th>Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)</th>
<th>Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main Building</td>
<td>X</td>
<td>Built-up &amp; Bable Roofing</td>
<td>6000 SF</td>
<td>x</td>
</tr>
<tr>
<td>Main Building</td>
<td></td>
<td>Vinyl Asbestos Tile</td>
<td>1000 SF</td>
<td>x</td>
</tr>
<tr>
<td>Boiler Room Building</td>
<td></td>
<td>Roofing Flashing</td>
<td>300 SF</td>
<td>x</td>
</tr>
<tr>
<td>Back Building</td>
<td></td>
<td>Floor Covering</td>
<td>1000 SF</td>
<td>x</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Registered Waste Hauler</th>
<th>NJDEP Waste Hauler ID No.</th>
<th>Cubic Yards of Waste</th>
<th>Name of Registered Landfill</th>
</tr>
</thead>
<tbody>
<tr>
<td>Newark Carting Inc</td>
<td>4506</td>
<td>30</td>
<td>Tullytown Refacility</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City, State</th>
<th>Newark NJ 07102</th>
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</thead>
</table>

<table>
<thead>
<tr>
<th>Completed by</th>
<th>Title</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emeka</td>
<td>President</td>
<td>[Signature]</td>
<td>7/1/15</td>
</tr>
</tbody>
</table>

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

**Pursuant to NJAC 8:59-12.10**

<table>
<thead>
<tr>
<th>Date of Notification</th>
<th>July 05, 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Building Owner/Operator</td>
<td>Northstar Environmental Services</td>
</tr>
<tr>
<td>Street Address</td>
<td>36 Clermont Drive</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Clermont, NJ 08210</td>
</tr>
<tr>
<td>Name of Contact</td>
<td>Henry Katzow</td>
</tr>
<tr>
<td>Telephone Number</td>
<td>862-459-5626</td>
</tr>
</tbody>
</table>

**FACILITY INFORMATION**

<table>
<thead>
<tr>
<th>Building</th>
<th>Street Address</th>
<th>108 N. Vendome Avenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>City</td>
<td>Margate, NJ</td>
<td></td>
</tr>
<tr>
<td>County</td>
<td>Atlantic</td>
<td></td>
</tr>
<tr>
<td>Name of Monitoring Firm</td>
<td>AET</td>
<td></td>
</tr>
<tr>
<td>Address</td>
<td>222 Church Road</td>
<td></td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Bridgewater, NJ 08807</td>
<td></td>
</tr>
<tr>
<td>Project Manager for Monitoring Firm</td>
<td>Eric Houseknecht</td>
<td></td>
</tr>
<tr>
<td>Telephone No.</td>
<td>908-238-1132</td>
<td></td>
</tr>
</tbody>
</table>

**Type of Facility**

- School (K-12)
- Subchapter 6 (Other than K-12)
- Other (i.e., private & commercial buildings, homes, etc.)

<table>
<thead>
<tr>
<th>Current Use</th>
<th>Prior to being demolished</th>
</tr>
</thead>
<tbody>
<tr>
<td># of Floors</td>
<td>2</td>
</tr>
<tr>
<td>Bldg Age</td>
<td>70</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Location in Facility</th>
<th>NCACP Used by Maintenance/Custodial Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>slab</td>
<td>Yes</td>
</tr>
</tbody>
</table>

**Description of ACM**

- Heat transfer systems insulation, surfacing, VAT, or other miscellaneous

<table>
<thead>
<tr>
<th>Amount</th>
<th>210 sf/lf</th>
</tr>
</thead>
</table>

**Abatement Type**

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

**Name of Registered Waste Hauler**

<table>
<thead>
<tr>
<th>Name of Hauler</th>
<th>Newark Carting</th>
</tr>
</thead>
<tbody>
<tr>
<td>City, State</td>
<td>Newark, NJ</td>
</tr>
<tr>
<td>Title</td>
<td>President</td>
</tr>
</tbody>
</table>

**Cumberland Co / BFI / GROWS / TRRF**

| Disposal Date | 7/12/15 |
| City, State | Newburg / Imperial / Morrisville, PA |

*Do not use this form for asbestos licensed exempted activities.*
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:69 and 12:120)

Date of Notification (1) 7/2/2015

Name of Building Owner/Operator (2) Dentree Associates

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

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

Street Address 145 Central Park West
City, State, Zip Code New York, NY 10025

Name of Contact Operator

Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
Federal Pacific Electric Company (Royce Associates, Site)

Street Address 207-215 Avenue L
City (5) Newark, NJ 07105
County (6) Essex County

County Code (7) [STATE USE ONLY] [ ]

Current Use (Prior to being demolished)
Depot Warehouse (Vacant Warehouse)

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

Square Feet 57000
# of Floors 1.5
Bldg. Age 95 years

Name of Monitoring Firm Hired by Building Owner (8)
ARCADIS US

Name of Abatement Contractor (9)
Abscope Environmental, Inc

Street Address 6723 Tow Path Road, Box 66
City, State, Zip Code Syracuse, NY 13214

Telephone No. 315-247-3244
License No. 01194

Project Manager for Monitoring Firm Richard Price

Telephone No. 410-796-7200
Name of OSHA Monitor EMSL Analytical, Inc

Start Date (10) 7/20/15
Scheduled Completion Date (11) 7/31/15

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

Scope of Work (Check All That Apply)
- [ ] ≥3 sf or ≥3 ft
- [ ] ≥180 sf or ≥260 lf
- [x] Renovation
- [x] Demolition
- [ ] Full Containment with Negative Pressure
- [ ] Mini-Enclosure
- [ ] Glovebag Procedure
- [ ] Non-Exempted (*) and Non-Friable Procedure

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

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED</th>
<th>Is Location Normally Used Solely by Maintenance/Custodial Staff?</th>
<th>Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, V.A.T, or other miscellaneous)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Roof</td>
<td>[x] Yes</td>
<td>Built up Roofing</td>
<td>350</td>
<td>Removal</td>
</tr>
<tr>
<td>Stack Siding</td>
<td>[x] Yes</td>
<td>Galbestos Metal Sheeting</td>
<td>9360</td>
<td>Descartel</td>
</tr>
</tbody>
</table>

Name of Registered Waste Hauler Services Transport Group

Name of Registered Landfill Minerva Enterprises

City, State New Castle, DE 19720

Disposal Date As needed
City, State Waynesburg, OH

Completed by Eddie Waskiewicz Title 7/2/15

Signature

* Do not use this form for asbestos licensure exempted activities.
STATE OF NEW JERSEY DEPARTMENT OF LABOR NOTIFICATION OF ABSENTOIS ABATEMENT

Date of Notification: 05/18/2015

Name of Building Owner/Operator: Nick Maki

Street Address: 57A 46th Street
City, State, Zip Code: Weehawken, NJ 07087

Name of Facility Where Abatement is Taking Place: Residential Property

Type of Facility: School (K-12)

Sq. Ft.: 5,000
# of Floors: 3
Bldg. Age: 60

Current Use (if being demolished):

Name of Contractor: Industrial Safety & Environmental Solutions, Inc.

Street Address: 3300 Hudson Avenue
City State Zip Code: Union City, NJ 07087

Project Manager for Monitoring Firm: N/A

Telephone Number: N/A

Scheduled Start Date: 05/18/2015
Scheduled Completion Date: 05/22/2015

Source of Work (Check all that apply):

- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glove-bag Procedure
- Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM)

<table>
<thead>
<tr>
<th>Location</th>
<th>Is Location Normally Used Solely by Maintenance or Custodial Staff?</th>
<th>Description of ACM (i.e., thermal systems insulation, surfacing, V.A.T., or other miscellaneous.)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basement</td>
<td>X</td>
<td>TSI Pipe and Duct Insulation</td>
<td>~ 275 L. FT.</td>
<td>Removal</td>
</tr>
<tr>
<td>Basement</td>
<td>X</td>
<td>Ceiling Surfacing</td>
<td>~750 SQ. FT.</td>
<td>Repair</td>
</tr>
<tr>
<td>1st Floor bedroom</td>
<td>X</td>
<td>9X9” floor tile</td>
<td>~130 SQ. FT.</td>
<td>Encapsulation</td>
</tr>
</tbody>
</table>

Name of Reg. Waste Hauler: NJDEP Waste Hauler #2
Cubic Yards of Waste: 15

Name of Reg. Landfill: IESI BETHLEHEM LANDFILL
City, State: Bethlehem, PA 18015

City, State: 369 Raymond Blvd., Newark, NJ 07105
Disposal Date: 05/22/2015

Completed by: David Camacho
Print or Type: Project Supervisor
Signature: [Signature]
Date: 05/18/2015
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12-120)

Date of Notification (1)  
July 01, 2015

Name of Building Owner/Operator (2)  
NJ Dept. of Law & Public Safety, Juvenile Justice Commission

Agency Notified  
☐ EPA  
☐ DOH  
☐ DOL  
☐ DOH  
☐ DCA

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

Street Address  
1001 Spruce Street, Suite 202

City, State, Zip Code  
Trenton, NJ 08625

Name of Contact  
Mike Preisig

Facility Information

Name of Facility Where Abatement is Taking Place (3)  
NJ Training Home For Boys - Chapel

Street Address  
Gravel Hill & Spotswood Roads

City (5)  
Jamesburg

County (6)  
Middlesex

Name of Monitoring Firm Hired by Building Owner  
Environmental Connection, Inc.

ASCM No.  
0030

Name of Abatement Contractor (9)  
B&N&K Restoration Co., Inc.

Street Address  
120 North Warren Street

City, State, Zip Code  
Trenton, NJ 08608

Project Manager for Monitoring Firm  
Rolly Jones

Telephone No.  
609-392-4200

Start Date (10)  
July 13, 2015

Scheduled Completion Date (11)  
July 31, 2015

Occupy Status During Abatement (Check only one)  
☒ Facility Closed/Vacated During Entire Period of Abatement

☐ Other - Describe:

Scope of Work (Check all that apply)  
☒ Renovation

☐ Demolition

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

Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)  
☑ Yes

☒ No

☒ N/A

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

Amount (Specify SF or LF)  
100 sf

Abatement Type

Endorsement

Repair

Encapsulate

Endure

Removal

Endorsement

Endorsement

Endorsement

Name of Registered Waste Hauler  

NJDEP Waste Hauler ID No.  
12695 / 2A456

Cubic Yards of Waste  
1

Name of Registered Landfill  
Tri-State Transfer Associates, Inc.

City, State  
Clifton, NJ 07011 / Bronx, NY

Disposal Date  
07/15/2015 - 07/22/2015

City, State  
Waynesburg, OH

Completed by  
G. Roger Woodman

Title  
Waynesburg, OH

Signature  

Date  
7/1/2015

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

Date of Notification (1) 
June 18, 2015

Name of Building Owner/Operator (2) 
PA of NY & NJ, Newark Liberty International Airport

Address

Street Address
Building 125
City, State, Zip Code
Newark, NJ 07114

Name of Contact
Ralph Campione

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
Newark Liberty International Airport - WO No. 07

Street Address
CHIRP Storage Yard Adjacent to Parking Lot P07

City (5)
Newark

County (6)
Essex

County Code (7) (STATE USE ONLY)
N/A

Current Use (Prior if being demolished)
Storage Yard

Type of Facility (4)

☑ Other (i.e., private & commercial buildings, homes, etc.)

☑ Other than K-12

☑ Subchapter 8

☑ School (K-12)

Statewide Docket No.

Square Feet
N/A

# of Floors
N/A

Bldg. Age
N/A

Name of Monitoring Firm Hired by Building Owner
PA of NY & NJ

ASCM No.
N/A

Name of Abatement Contractor (9)
B&N&K Restoration Co., Inc.

Street Address
223 Randolph Avenue

City, State, Zip Code
Clifton, NJ 07011

Project Manager for Monitoring Firm
Ralph Campione

Telephone No.
973-624-5898

Telephone No.
973-478-4681

License No.
00120

Name of OSHA Monitor
McCabe Environmental Services, L.L.C.

Street Address
464 Valley Brook Avenue

City, State, Zip Code
Lyndhurst, NJ 07071-1998

Start Date (10)
July 27, 2015

Scheduled Completion Date (11)
August 31, 2015

Occupancy Status During Abatement (Check only one)
☒ Facility Closed/Vacated During Entire Period of Abatement
☒ Abatement Performed Outside of Normal Facility Hours
☐ Other - Describe:

Scope of Work (Check all that apply)
☐ Renovation
☒ Demolition
☐ Full Containment with Negative Pressure
☐ Mini-Enclosure
☐ Glovebag Procedure
☒ Non-Exempted (*) and Non-Friable Procedure

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

☐ Yes
☐ No
☐ N/A

Transite pipe
56 ft

Location Normally Used Solely by Maintenance/Custodial Staff?

Amount (Specify SF or LF)

Is Location

☐ Location

Abatement Type

Name of Registered Waste Hauler
Two Brothers Contracting, Inc.

NJDEP Waste Hauler ID No.
18743

Cubic Yards of Waste
6

Name of Registered Landfill
Grows North Landfill / Grand Central Landfill (Friable)

(Non-Friable)

Disposal Date
07/27/2015 - 08/31/2015

City, State
Morrisville, PA / Penn Argyl, PA

Completed by
G. Roger Woodman

Title
Project Manager

Signature

Date
7/1/2015

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

Date of Notification (1)
July 01, 2015

Name of Building Owner/Operator (2)
PA of NY & NJ, Port Newark Marine terminal

Agency Notified

- EPA
- DOH
- DOL
- DCA

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

Street Address
Goethals Bridge, 2777 Goethal Road, North

City, State, Zip Code
Staten Island, NY 10303-8413

Name of Contact
James Massett

Telephone Number
646-625-5600

Name of Facility Where Abatement is Taking Place (3)
Goethals Bridge - New Jersey side of bridge

Street Address
777 Goethal Road., North (Office Location)

City (5)
Staten Island, NY 10303-8413 / Perth Amboy NJ 08861

County (6)
Middlesex

County Code (7) (STATE USE ONLY)

Square Feet
440,758

# of Floors
1

Bldg. Age
87 +/-

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

Current Use (Prior if being demolished)
Bridge

Name of Monitoring Firm Hired by Building Owner (8)
PA of NY & NJ

ASCM No.
N/A

Name of Abatement Contractor (9)
B&N&K Restoration Co., Inc.

Street Address
223 Randolph Avenue

City, State, Zip Code
Clifton, NJ 07011

Telephone No.
201-595-4881

License No.
00120

Name of OSHA Monitor
McCabe Environmental Services, L.L.C.

Street Address
464 Valley Brook Avenue

City, State, Zip Code
Lyndhurst, NJ 07071-1998

Start Date (10)
July 20, 2015

Scheduled Completion Date (11)
October 31, 2015

Occupancy Status During Abatement (Check only one)
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours
- Other - Describe: Non friable exterior work

Scope of Work (Check all that apply)
- ≥ 3 sf or ≥ 3 ft
- ≥ 160 sf or ≥ 260 sf

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

IN Facility

(13)

Location Normally Used Solely by Maintenance/Custodial Staff?
(12)

Yes
No
N/A

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

Amount (Specify SF or LF)
1400 ft

Abatement Type
Removal

Full Containment with Negative Pressure
Mint-Enclosure
Glovebag Procedure
Non-Exempted [*] and Non-Friable Procedure

Name of Registered Waste Hauler
Two Brothers Contracting, Inc.

ID No.
12695

Cubic Yards of Waste
07/21/2015

Name of Registered Landfill
Grand Central Sanitary Landfill

Disposal Date
11/15/2015

City, State
Clifton, NJ 07014

Penn Argyl, PA

Completed by
G. Roger Woodman
Title
Project Manager

Signature
/ 

Date
7/1/2015

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