& Emergency &

State of New Jersey

4 21. 20				ICATION	OF ASE	BESTOS A 8:60 and	BATE		r ck	6	200	ū			
Date of Notification (1)			, 			Owner/O				_			400		
7/6/17				All Ris	sk / (Op	perator)			Image E	(A)	P n s	W#	AL.	4126	us
Agencies Notified Typ	e Notification			Street A		DI I			110),4	16		V	5	111	
ĭ EPA □	Initial				Cennedy				115						
DEP DOL	Amended Amendment	#			ate, Zip Co	ode J 08083				JUI	102	017		111	
	Emergency (i		_		f Contact)		lad had		lephone Nur	12	1		
DOH DCA	justification) Cancellation				Viessina				1	16	iepnone Nur	nber	4		
						ORMATIC	ON		HO_	-	CENSING	2		-	
Name of Facility Where Abate		Place (3	3)		- 65			Тур	e of Facility (4)	-	1 11 1/1/1/1/1/	-	-		
Bridgeton Housing Aut	hority								School (K-12)						
Street Address									Subchapter 8	Oth	er than K-12	2)			
110 E Commerce St.								X	Other (i.e. privetc.)	ate	& commerci	ai buii	aings,	nom	es,
City (5)									are Feet	# 0	f Floors	E	Bldg. A	ge	
Bridgeton, NJ 08302									000+	10			35+		
County (6) Cumberland					Code (7) USE ONLY)		Curr	ent Use (Prior	bei	ing demolish	ed)			
Name of Monitoring Firm Hire	d by Building O	wner (8)		ASCN	I No.		Name	of Ab	atement Contr	ctor	(9)				
N/A							Perr	naco	Inc						
Street Address							Street	Addre	ess						
011 011							PO								
City, State, Zip Code									Zip Code						
Project Manager for Maniteria	- Finn			-					rlin NJ 0809	_					
Project Manager for Monitorin	g Firm			Telepho	ne No.		Teleph 856-		10. 9800		License No 00727	0.			
Start Date (10)		Schedule	ed Con	npletion l	Date (11)		Name	of OS	HA Monitor	_					
7/7/17		8/11/	117				Sam	е							
Occupancy Status During Aba	itement (Check	Only Or	ie)				Street	Addre	ess						
Facility Closed/Vacated I	During Entire Po	eriod of A	Abatem	nent					9.	4					
Abatement Performed On Other – Describe: Floor	utside of Norma s are closed off	I Facility	Hours	3			City, S	tate, 2	Zip Code						
Scope of Work (Check All Tha								_		_		-			
≥3 sf or ≥3 lf		_	lenova						ıll Containmen	with	Negative P	ressu	re		
≥160 sf or ≥260 If			emolit	ion			F	GI	ini-Enclosure ovebag Proced	ure					
							X	No	on-Exempted (an	d Non-Friabl	e Pro	cedur	9	
		1000	Locati	0.00									Abate		
Location of			lormal d Sole				cription					-	Ту	pe	
Asbestos-Containing Mate TO BE ABATED			intenar			tos Conta thermal s					mount	771		四	т
In Facility	•	Cust	odial S (12)	Staff?	(1.0.	surfaci			ation,		Specify or LF)	em	Repair	cap	nclo
(13)			(12)			other mi	scellan	eous)			8	Removal	air	Encapsulate	Enclosure
		Yes	No	N/A								-		te	æ
Floors 1 Through 6 & gr			х			Floor Ti	le & n	nasti	С		TBD	х			
7 work areas \$1400 Not	ification fee		х												
			_							ales e					
Name of Registered Waste Ha	uler		N	JDEP W	acto	Cubic Y	arde	-	Name of De	inte	rod code				
670/			6033	auler ID		of Wast			Name of Re			13/20			
American Disposal				2459		30			Cumberla	nd	County La	andfi	1		

Disposal Date

Signature

6/16/17

Title

President

Lumberton NJ

Anthony T Perna

Completed by

City, State

Date,

7/6/17

City, State

Millville N J 08096

Location of Description of Normally NCAPSU NCLOSU Asbestos-Containing Asbestos-Containing mount Used Material (ACM) Solely Material (ACM) (pecify EP M By Maintenance/ Custodial TO BE ABATED (i.e., thermal systems SF or OV Ā In Facility insulation, surfacing, VAT, LF) Staff (12) A (13)or other miscellaneous) Yes No N/A R E Basement X Pipe Insulation 9 IF

Name of Registered Waste Hauler AZTECH MANAGEMENT, INC.

NJDEP Waste Hauler ID No. 17040

Cubic Yards of Waste 1.0 Name of Register d Landfill Minerva Enterprise INC

City, State Montclair, NJ 07042 Disposal Date 07/ 17/17

Waynesburg, Ohio 44688

Completed By (Print or Type) Constantine Vivian

Title President Signature

City, State

Date 7/6/2017 NOTIFICATION OF ASBESTOS ABATEMENT

		(Pursu	ant to	NJAC	8:60-	7 and 12:120-7)			-			
Date of Notification	on (1)					Owner/Operator	(2)	P**	1 5	G		I W	
7/6/2017			Ch	rist:	ine	Bzdek			1), 19	(0)	15	U U	
Agencies Notified	Type Notificat	tion	Stree	t Addr	ess			117					
[]EPA	[X]Initial							100		JUL	10	201	7 1
[]DEP	Notifica	tion	City,	State	, Zip	Code		80.0	1				
[X]DOL	[]Amended	. 1	Be.	llev	ille	NJ,07109		1	100	BESTO	00	ONITE	01.8
[X] DOH	Notifica	tion	Mama	of Con	book		Teleph	NT				SING	IUL a
	[]EMERGENCY	1				Bzdek	гетерп	one M	mer	L 1.44			****
[]DCA	[]Cancellat	ion	CIL	L 13 C.	1116	DZGGK	.						
	. ,		1	FACI	LITY :	INFORMATION			-				
Name of Facility Wh	nere Abatement i	s Taki	ng Pla	ace (3)			Type of Fac:	ility	(4)		-		
Christine Bzo	dek						[]School	L (K-1	(2)				
G1 1 2 2 2							[]Subcha			ner th	an F	(-12)	
Street Address							[X]Other buildings		-		COI	merci	al
							Square Feet		of Flo		614	~ 7~	
City (5)	ļc	ounty	(6)		Cou	inty Code (7)	1282	"	1		6	g. Age 7	-
Belleville	E	Essex	2		(SI	ATE USE ONLY)	Current Use	(Pric	: if h	eing			d)
Name of Monitoring	Firm hired by B	uildin	g AS	CM No.		Name of Abate	ment Contract	or (9	·				
Owner (8) N/A						AZTECH M	IANAGEMEN	T, 1	nc.				
Street Address						Street Addres	s						
						86 Chris	stopher S	t.					
City, State, Zip Co	ode					City, State,	Zip Code		-				
						Montclai	r, NJ 07	042					
Project Manager for	Monitoring Fir	m Te	lephon	e Numb	er	Telephone Num	ber		-	Licen	se l	Tumber	
			/A			(973) 744				00:	371		
Scheduled Start Dat	e (10) Sched	. Comp	letion	Date	(11)	Name of OSHA	Monitor						
	2017 07		20	201		N/A							
	Year Mon	th :	Day	Year									
Occupancy Status Du	ring Abatement osed/Vacated Du					Street Addres	s						
of Abatemen		9 21		z er roa				- 13					
	erformed Outside cribe:«OffHours			Facilit	ΞĀ	City, State,	Zip Code						
	cribe: «Other Oc			ript»									
Scope of Work (Chec	k all that appl	v)				Ш			-		_		
							Containment v	with N	gativ	re Pre	ssui	e	
[X]>3 sf or []>160 sf	r ≥3 lf or >260 lf			ovation olition		시기 중심하면 화가를 하고 하였다.	Enclosure -bag Procedu	re					
		_					riable Proced						
Locatio	n of	I	Is Locatio	on		Description	n of			12	Abat	ement E	Type
Asbestos-Co		1	Vormal. Used			Asbestos-Con			Mouni	E	R	p N	N
Material		Dr. M	Solel	У .		Material			Specia	Ey	E	E	C
TO BE A			ainten ustodi			(i.e., thermal			SF or		O	P P S	0 5
In Faci (13)	(C. A. C.		aff (1		sulation, surf or other misce			LF)		A	P U	U
		Yes	No	N/A			•				L	L	RE
Basement				X	Pipe	e Insulati	on	20	LF	2	2		
	28												
Name of Registered	Waste Hauler	1	JDEP W		1000	bic Yards	Name of Reg	jister	ed Lar	dfill			
AZTECH MANAG	SEMENT, INC		auler 7040	ID No.	of	Waste 1.0	Minerv	a Er	ter	pris	e I	INC	
City, State					Di:	sposal Date	City, State	9					
Montclair, NJ	07042				- 1	7/20/2017			, Oh	nio	446	888	
2													
Completed By (Print			1			Signature	1 1/	1		Dat			
Dimitri G. Te	ALLOIS ACT	ninis	stra:	LOY		1 41/1. /	- 111	1		17/	6/20	117	

CKI	(00)				OS ABATEMENT and 12:120-7)			today ya wasan a wasan				
Date of Notification	1 (1)		Name of Bui	lding	Owner/Operator	-		1	引信	G	3	W	E
7/6/2017		- 11	Randy I	Defe	>			AMERICAN STATE	3	or was rained as	The State Control of the State Control		
Agencies Notified	Type Notifica	ation S	Street Addr	ess				200		111	1 0	2017	0.0
[]EPA	[X]Initial							1	ل إلما	UL	i U	2017	- 11
[]DEP	Notific	ation	City, State										
[X] DOL	[]Amended Notific	ation	Ridgewo	ood,1	NJ,07450				ASBES				2 JC
[X]DOH		1	Name of Con	tact			Telephone	e N	mber	LICE	MSI	41.4	
[]DCA	[]EMERGENC	Y	Randy I	Defe			1						
	[]Cancella	tion					<u> </u>						
Name of Facility Whe	ere Abatement	is Takin			NFORMATION	Type	of Facili	tv	(4)	-			
Randy Defeo	JEG IDG COMOITC		9 22400 (5)]School (857ii					
	110.00					11	동원생이 없었다면서 이 없었다.		8 (Other	thar	K-1	.2)	
Street Address									, privat		comme	rcia	L
						-			es, etc.		1 4 ~	3	
City (5)		County (6)	Cour	nty Code (7)	11 -	e Feet 982	#	2	5 5	94	Age	
Ridgewood		Berger		100000000000000000000000000000000000000	ATE USE ONLY)	-	302		2		94		
						Curre	nt Use (F	Pri	r if bei	ng de	moli	shed)
										_			
Name of Monitoring E	irm hired by	Building	ASCM No.		Name of Abate	ment C	ontràctor	(5)	-			
Owner (8) N/A				1	AZTECH M	IANAG	EMENT,	. :	nc.				
Street Address					Street Addres	s	L-ADCOM						
				1	86 Chris	stoph	er St.	•					
City, State, Zip Cod	le				City, State,							1	
					Montclai	ir, N	J 0704	12					
Project Manager for	Monitoring Fi		ephone Numb	er	Telephone Num				Li	cense	Nun	ber	
		N/	A	1	(973) 744	1-880	0		(003	71		
Scheduled Start Date			etion Date		Name of OSHA	Monito:	r						
		7 1		1	N/A								
Month Day Ye Occupancy Status Dur		nth Da (Check o			Street Addres	s					-		
[X] Facility Clos		iring Ent	ire Period	1									
of Abatement []Abatement Per		ie of Nor	mal Facilit	ty	City, State,	Zip Coo	de						-
	ribe: «OffHours		The state of the s		, , , , , ,								
[]other - Descr			Descript»										
Scope of Work (Check	all that app	ΤĀ)			[]Full	Contai	nment wit	h l	egative 1	Press	ure		
[X]>3 sf or		27.50]Renovation		[X]Mini-	Enclos	ure		_				
[] <u>></u> 160 sf c	or ≥260 II	L]Demolition	1	[7] m (7] p (1) (4) (4) (7) (7)		rocedure Procedur	e					
Tagabian		Lo	Is cation			-				Ab	atem	ent I	100 00
Location Asbestos-Con		No	rmally Used		Description Asbestos-Con		a		Amount	R	R	E	E
Material	(ACM)	S	olely		Material ((ACM)			Specify	E	E	CA	C
TO BE ABI	Manager and State of	Cus	intenance/ stodial		(i.e., thermal	S. 927.0	100000000000000000000000000000000000000		SF or	0	E P A	P S	0
(13)	cy	Yes	ff (12) No N/A		ulation, surf r other misce				LF)	A	I R	U	UR
Pagamant				D.:		2		10			-	-	E
Basement			X	Pip	e Insulat	lon		12) LF	X	-		
								-V-Y		-	-	-	
Name of Registered W	neto Unilar	br	OFD Wasts	10-2	ia Vanda	hr	of Desi	+-	2d 7 == 30				
AZTECH MANAG		C Hau	DEP Waste	1	ic Yards Waste 1.5				ed Landf:		TAT	C	
			040					444	.cerpr.		T-1/4		
City, State Montclair, NJ	07042			100	posal Date 7/18/17	1	, State	1 200	01-		160	0	
MULICULALE, NU	01042			0	1/10/11	wa	ynesot	TT.	, Ohio	ر ب	200	0	
Completed By (Print					Signature	1/	10		1	Date	<u> </u>		
Dimitri G. Ter	midis Ad	minist	trator		iVimi	to al	//(7/6/	2017		
										0.00			

CVIIO	1009					TOS ABATEMENT 7 and 12:120-7			Military programmy				
Date of Notification	(1)	(10200	Name	of Bui	lding	Owner/Operator			[]	E G	E	N N	/ E
7/6/2017			Da	ve T	ward	.ock				3 9	<u> </u>	n f.	/ <u>L</u>
Agencies Notified	Type Notifica	ation	Stree	t Addr	ess		1.00						
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[]DEP	Notific	ation	100000000000000000000000000000000000000	State					i i				
[X]DOL	[]Amended Notific	ation	Su	nmit	, NJ,	07901		4	AS	BESTO	SCO	TMC	ROL &
[X] DOH	[]EMERGENO			of Cor		_	Telepho	ne Nu	ber	<u>LC</u>	ENS.	ПG	
[]DCA	[]Cancella		Da	ve T	ward	.ock							
	[]Cancerra	CIOII	V	FAC	LITY	INFORMATION							
Name of Facility Whe	re Abatement	is Taki	ng Pla	2,000,000			Type of Faci	lity	4)				
Dave Twardock							[]School	(K-1	:)				
Street Address					-		[]Subcha [X]Other						
							buildings				J		•
City (E)		[at-	(6)				Square Feet	#	f Floo	rs Bl	dg.	Age	
City (5) Summit		County Union			1000000	inty Code (7) PATE USE ONLY)	4956	/Post s	2		87	7 31	-
							Current Use	(PIIO	. II be	ing der	MOTIS	inea)	
Name of Monitoring F	irm hired by	Buildin	g ASC	CM No.		Name of Abate	ment Contract	or (9					
Owner (8) N/A						AZTECH M	ANAGEMEN'	r, I	ic.				
Street Address	V.4					Street Address			-				
-			-90C + 11 (019-00-0			86 Chris	topher St	Ξ.					
City, State, Zip Cod	e					City, State,	Zip Code r, NJ 07(1/12					
Drainet Manager for	Monitonina Di	Im-	l amb am	a Manil				742			373		
Project Manager for	monitoring Fi	IIM I'e.	100 Page 100	e Numb	per	Telephone Numb			ľ	icense		per	
Scheduled Start Date	(10) Sche	d. Comp.	letion	Date	(11)	Name of OSHA 1							
07 15 20	017 07	_	L6	201		N/A							
Month Day Ye Occupancy Status Dur		A Commission of the Commission	Day	Year	2	Street Address							
[X] Facility Clos	sed/Vacated D					Screet Address	5						
of Abatement []Abatement Per		de of No	rmal :	Facili	ty	City, State, !	Zip Code						
Hours - Descr []other - Descr			-04	rint»			-						
Scope of Work (Check			2000			11			-	V		2002-3	
	D±0	125					Containment w	ith N	gative	Pressi	ire		
[X]≥3 sf or []≥160 sf o		62		ovation olition			Enclosure -bag Procedur	e					
	-		Is		T	[]Non-F	riable Proced	ure	-	125-			
Location			ocational.			Descriptio					teme	E	E
Asbestos-Con Material			Used Solel			Asbestos-Cont Material (1 000	mount pecify	RE	R	N C	C
TO BE ABA	TED			ance/		(i.e., thermal	systems	,	3F or	0	E P A	A P	O
In Facil (13)	ity	St	aff (12)	in	sulation, surfa or other miscel			LF)	V A	IR	S U	S U
	Heavy war of the Heavy I was the	Yes	No	N/A				1		L		L	R E
Basement				X	Pipe	e Insulati	on	20	LF	X			
	S												
Name of Registered W	asta Hanlar	bat	JDEP W	la a t a	Cir	bic Yards	Name of Reg	istor	d Tand	e: 11			
AZTECH MANAGE		C H	auler	ID No.	0.13337	Waste 1.0	Minerva				INC	3	
City, State]1	7040	,	Di	sposal Date	City, State						
Montclair, NJ	07042					07/17/2017	60 TO 20 CO	ourg	, Oh:	io 44	688	3	
Completed D. (D.:	- M	7 -				la:			7				
Completed By (Print Dimitri G. Ter		_{lle} Minis	trat	tor		Signature	1100	-7		Date 7/6/	2017		
						10×61/11/6	le 1 to 1	1		1,707.	-011		

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

				t to NJAC 8:60 at				1) E C	2 E	3	W	E
Date of Notification (1)	***************************************		Name o	of Bullding Owner	10000			1	7-6-6	<i>y</i> E	2 U	U	
7/6/17				CHRS	BLU	USS (Ci						
Agencies Notified Type Notification	1		Street /	Address				1	I JI	JL 1	0	201	1
☐ EPA								(ent	ten.				
X DEP Amended		in the second	City, St	ate, Zip Code			_						
			1	11 L FOR		T. U	0	88	SBES	TOS	CO	MIH	OL
□ Emergency justification		9		of Contact	-		2	1	enhano-Ale	mher	11511	1	
DCA Cancellatio		ONE PER SE	C	HRIS B	LASS	SUC	g and	adeas.					
			-	ILITY INFORMAT			4	L					
Name of Facility Where Abatement is Taki	ng Place ((3)				Type	of Facility (4)					
KESIDENCE	. 8 <u>.</u>	,				II s	School (K-1	2)					
Street Address	_						Subchapter	8 (0)	er than K-1				
				2.			Other (i.e. p dc.)	nivate	& commerc	ial bui	ldings	, hom	ies,
City (5)							e Feet	1 #	FFloors		3ldg. /	\ae	
MILFORD							600	- A	2	- Chromaten	gr g	2000	
County (6)		T	County	Code (7)		Gurrer	of Use (Pri	2.	ng demolis	heri)	, ,		-
HUNTERDON		One or contraction	(STATE	USE ONLY)	-	1			WTAL				
Name of Monitoring Firm Hired by Building	Owner (8)	ASCN	á No	Namo	of Ahai	ement Cor			•			
and a second		50	-				ntractino		(9)				
Street Address					1	Addres		** ****					
							ь nd Ave	(2)					
City, State, Zip Code							200 200 000 000 000						-
ony, ontice, hip obtain						State, Zig	rk, NJ 0	7/20					
Project Manager for Monitoring Firm			# -1		*			1406				- "	
rioject manages for informering Path		PERMITTER	Telepho	ne No.	l elepi	hone No			License N	lo.			
Stat Data (60))262-5			00156				
Start Date (10)				Date (11)	4		A Monitor						
7/29/17		3/02	-//-	\	1			ntal 2	эrvices Ir	1C.			9 2
Occupancy Status During Abatement (Che	- 3	100				Address							
Facility Closed/Vacated During Entire	Period of	Abaten	nent				Street						
Abatement Performed Outside of Non Other - Describe:	nai Facility	y Hours	S		3	State, Zip				-			
-					Hack	censac	k, NJ 07	606					
Scope of Work (Check All That Apply)	1				0.000								
≥3 sf or ≥3 if	Z r	Renova	ition		E.	1/ Full	Containme	ent wit	Negative F	ressu	re		
≥160 sf or ≥260 lf		Demolit	lion			Mini-	-Enclosure						
					1		ebag Proc		I Non-Friab	da Pro	radur	0	
	1	. 1				3 5 5 5 5 5	- Constitution	1 2 200	114011111111	30++0	-	emeni	·
Location of	4.5	S Locati Normal		_			www.casys			-		pe	
Asbestos-Containing Material (ACM)		ed Sole		De Asbestos Con	scription		ACAN	,	nouni	-	I		
TO BE ABATED	1.20	iintenai todial S	C 47 T T T T T T T T T T T T T T T T T T	(i.e. thermal					pecify	D	-	Encapsulate	Ti.
In Facility (13)	Cus	(12)	otali?	surfa	cing, VA	T, or	and the same		or LF)	Remova	Repair	aps	Clos
(13)	The state of the s			other r	niscellar	reous)	- Parker			lave	air	ula	Enclosure
	Yes	No	N/A				overlagation of			ALCO PORTON	Maria Palar	6	19"
BASEMENT	D) (Telephone) (D)		1	PIPE	1010	NLA.	Tina	-	BOLF	1			-
	The state of the s		V	1115_	110	oven	17070		NUT	-	-	-	
			1				PAPA AMERICA			w.			
	the motivation of		delinen	il.			ed date que	±.0		hvrossore.	- Paragraph		
	Aspenden				Hickory Colors					- Children			
Name of Registered Waste Hauler		IN	JDEP W	aste Cubic	Yards		Name of F	Registr	red Landfill	1			
Newark Carting Inc.		14	auler ID			mpone pada transp					dfill		
		04	1509	Obsessings	I	September 1	Oraniu (-CHILL	I Sanitar	Lan	UIII		
City, State	7/-10/22-19-20/				al Date		City, State						
Newark, NJ 07105				7/	29/17	On	Pen Arg	yl, P	.08702				
Completed by	Title	200	And the same of th		ignature		1/		Da	4	, .		
Joseph Vocaturo	Vice	Presid	dent	The state of the s		1	VA	all	2	7/	6/1	7	
							W 1/2	01000	PG (0 1	E I		

	Form	

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Chob?	,			to NJAC 8:)] [3 (=	W	E
Date of Notification (1) 7/6/17				f Building On ew Realty			(2)				111	(4	10	OFM	.,
Agencies Notified Type Notification	n	188	Street A					1	1	i.	Ut	2	1-1-	<u>ZUI</u>	
EPA X Initial DEP Amended X DOL Amendme	nt#			ate, Zip Cod		1			100 4 100	AS	BEST		OC No		OL
Emergenc justification	y (including n)			f Contact					Tel	nhone	Mark Street and Company		4 30		
DCA Cancellation)[]			LITY INFOR	DRAAT	ION			4				1		-
Name of Facility Where Abatement is Tak	ing Place (3	3)	FACI	LITTINFOR	KIWIATI	ION	Type	of Facility (4)		·					
DETACHED GARAGE at 103 E		5,0						School (K-12)							
Street Address 103 E 23rd St							×	Subchapter 8 Other (i.e. pri etc.)				build	ings,	home	s,
City (5) Bayonne								re Feet	# 0	Floors	i.	Ble	dg. A	ge	
County (6)				Code (7)			Curre	nt Use (Prior	if be	ig dem	olished	1)			
Hudson Name of Monitoring Firm Hired by Buildin	g Owner (8)		ASCN					tement Contr							
Street Address						AAA	100000000000000000000000000000000000000	PROFES	SSIC	VALS					
						6 WH	HITE [DOVE CO	URT				100-23		
City, State, Zip Code								ip Code DD, NJ 08	701						
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 732-6				Licens 1200					
Start Date (10) 7/16/17	Schedul 7/24/1		npletion	Date (11)				A Monitor PROFES	SSIC	VALS					
Occupancy Status During Abatement (Ch						Street 6 WH		SS DOVE CO	UR1						
Facility Closed/Vacated During Entire Abatement Performed Outside of No Other – Describe:	e Period of a rmal Facility	Abatem y Hours	nent			City, S	tate, Zi	ip Code OD, NJ 08	-						
Scope of Work (Check All That Apply)						LAINE		<i>DB</i> , 140 00							
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf	***********	Renova Demolit				×	Mir	I Containmer ni-Enclosure ovebag Proce n-Exempted	dure						
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Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma Cus	ed Sole aintenar stodial S (12)	nce/	(i.e. tl	s Con herma surfa	escription taining M I systems acing, VA miscellan	laterial s insula T, or		(mount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
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INTERIOR						ing pan				5SF	2	<			
											1611				
Name of Registered Waste Hauler NEWARK CARTING		H	IJDEP V lauler ID 4509	No.	of Wa	: Yards iste		Name of R	egist	red Lar	IGIIII				
City, State NEWARK, NJ					Dispo 7/24/	sal Date 17		City, State BETHLE		1 PA		entre en			
Completed by JOSEPH PERLSTEIN	Title	NER				Signature)	1		-	Date				

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(JH 5732			ICATION	ate of Nev I OF ASBI to NJAC	ESTOS A	BATE		т	IDK	E	<u>C</u>			7 1	
	e of Notification (1) 5/17				f Building (ew Real			(2)				JÜL	1 (20	17	1
Age	encies Notified Type Notification EPA Initial			Street A PO Bo							L	STO	G C	ONI	ĥŌi	- 8:
×	DEP Amended Amendment				ate, Zip Co rood, NJ						41 d - 1 200 may 1 - 100		-112			
X	DOH justification) DCA Cancellation			Name of Yosef	f Contact					ΙTε	enhone	Mumh	or		7.00.000.000	
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	yonne		-						etc.) are Feet	# (Floors	;	В	dg. A	ge	
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	ne of Monitoring Firm Hired by Building	Owner (8)		ASCN	1 No.				atement Cor AD PROFE			3				
Stre	eet Address	<u></u>					Street 6 Wh		ess DOVE C	DUR.						
City	, State, Zip Code						2.5		Zip Code OOD, NJ 0	8701						
Pro	ject Manager for Monitoring Firm			Telepho	ne No.		Teleph 732-		No. 9078		Licen 1200	se No.				
	rt Date (10) 16/17	Schedul 7/24/1		mpletion I	Date (11)				SHA Monitor AD PROFE	SSIC	NALS	;				
Occ	cupancy Status During Abatement (Che	ck Only Or	ne)				Street			2110						
×	Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:						City, S	state,	Zip Code DOD, NJ 0						<u> </u>	
Sco	pe of Work (Check All That Apply)								03							
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		-										-				
	INTERIOR				7	Shov	ver ca	aulk			5 LF		K			
	ne of Registered Waste Hauler			NJDEP W		Cubic \			Name of	Regis	ered La	ndfill				
	WARK CARTING		20.00	4509		60 Disposa			IESI City, Stat	e e						
NE	WARK, NJ	Title				7/24/1			BETHL		/I PA	Date				
	SEPH PERLSTEIN	1WO	NER			"	J	364								

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Uh 10 100	1		ICATION	OF ASB to NJAC	ESTOS	ABATE		T special		111	. 4	n	ากรา		
Date of Notification (1) 7/6/17				f Building ISRAEI				The state of the s	for ken				EU I /		
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EPA X Initial DEP Amende DOL Amendm			100	ite, Zip Co AIC, NJ					P C To Live Strategy	T CONTROL TO THE	111 112		10-17-		
	ncy (including on)		Name of	Contact Schwai		-			Te	ephone	Numb	er			
_ Caricella	tion			LITY INFO	200-1	ON								<u> </u>	-0.00-0-0.00
Name of Facility Where Abatement is Ta 565 Broadway Passaic	aking Place (3	3)					Тур	e of Facility							
Street Address 565 Broadway							×	School (K- Subchapte Other (i.e.	er 8 (Oth			ouildi	ngs, h	ome	S.
City (5)							ш	etc.) are Feet		Floors			lg. Ag		EX.
Passaic			***										SS 853	~	
County (6) Passaic			County (Code (7) JSE ONLY,			Cun	rent Use (Pr	ior if be	ng demo	olished)			
Name of Monitoring Firm Hired by Buildi	ing Owner (8)		ASCN	1 No.		100000000000000000000000000000000000000		atement Co AD PROFI		Contract of the contract of th					
Street Address						Street 6 WH		ess DOVE C	OUR						
City, State, Zip Code						City, S	tate,	Zip Code OOD, NJ (-					
Project Manager for Monitoring Firm			Telephor	ne No.		Teleph	one	No.		Licens	e No.				
Start Date (10)	Schedule	ed Con	npletion I	Date (11)			9,559	9078 SHA Monitor	1	1200					_
7/16/17	7/31/17					860010000	VIII	D PROFI	ESSIC	NALS					
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Facility Closed/Vacated During Ent Abatement Performed Outside of N Other – Describe:					_	200		Zip Code DOD, NJ (08701						
Scope of Work (Check All That Apply)															-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	× F	Renova Demolit	tion ion			×	M	ull Containm lini-Enclosur lovebag Pro	re ocedure						
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DAIRY KITCHEN CLOSET					Pipe	Insula	tion			OLF	X				
BOILER ROOM					Pipe	Insula	tion		2	50LF	X				
Name of Posietored Wests Heule		l Ki	IDED V	lasta	Cubi-	Varda		Nome -	F Doniet	rod I an	4fil				
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City, State NEWARK, NJ					Dispos 7/31/	sal Date 17		City, Sta BETHL		I PA					
Completed by JOSEPH PERLSTEIN	Title	IER			S	ignature	1	1			Date				

Print Form

State of New Jersey

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Date of Notification (1) 06 /	30 / 17	,		1		ng Owner/Operator (EY SCHOOLS DE		Ū	HORITY	1 (2(117	in-
Agencies Notified	Type Notification			Stree	t Address			_	ACCOMO				
□ EPA				32	E FRON	T STREET			ASBESTO		ONI		_ is
⊠ DOLWD	Amended			City,	State, Zip	Code		-	Section Statement Control of the Con	And The		ALCOHOL:	
☐ DOH ☐ DCA	Amendment #		-	TR	ENTON N	NEW JERSEY 08	625						
(NJAC 5:23-8)	justification)	iciuuiii	y	Name	of Contac	ot .	T	Te	ephone Numb	er			
	☐ Cancellation			Dei	nise Petr	oglia							
				FA	CILITY IN	FORMATION	III III III II II II II II II II II II	_			-		
Name of Facility Where Al		7.5	22 - 53				Type of Facility (4	1)					
ALETTA CRICHTON	ELEMENTARY	SCH	OOL				School (K-12)	10					
Street Address	_						Subchapter 8			ial bu	ilding	15.	
1414 JUNCTION RO	AD						homes, etc.)			180412-10		<i>i</i> =1	
City (5)	/ IEDOEN 0004	_					Square Feet	#	of Floors	BI	dg. A	ge	
BROWN HILLS NEW	JERSEY 0801	5		10	1 0 1 /		19075	L	Ground FL				
County (6) BURLINGTON				Cour	ity Code (7)(STATE USE ONLY)	Current Use (Prior SCHOOL	r if	being demolish	ied)			
Name of Monitoring Firm I		Owner	(8)	ASCM	No.	Name of Abateme							
LOUIS BERGER U.S	S. INC.					TRICON ENT	ERPRISES						
Street Address	TH = 000					Street Address							
48 WALL STREET 16	5" FLOOR				171271	322 BEERS S							
City, State, Zip Code NEW YORK NEW YO	NDV.					City, State, Zip Co							
Project Manager for Monito			Tala		NI-		W JERSEY 077	-					
CRAIG NAPOLITANO				phone	-7900	Telephone No. 732-739-1200		L	cense No.				
Start Date (10)		Juled C			te (11)	Name of OSHA M		L	01095				
04/19/					17	N/A	onitor						
Occupancy Status During	Abatement (Check	conly o	one)			Street Address		_					
☐ Facility Closed/Vacated													1
Abatement Performed Countries of Abatement:					cribe AM	City, State, Zip Co	ode						
Scope of Work (Check all t	hat apply)						24 - 200 000	_					
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		-	novati			☐ Mini-Encl ☐ Glovebag							
		Is	Locat	on							atem	ent Ty	vpe
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Asbestos-Containing M TO BE ABAT			intena	, ,	Asbe (i.e.	stos Containing Mat ., thermal systems i	terial (ACM)		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
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(13)		Yes	(12) No	N1/A	-	other miscellaned	ous)					ate	CD
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Name of Registered Waste			3 (0.00)	JDEP V		Cubic Yards of Waste	Name of Registe						
Freehold, Cartage, In	c.		100000	S2265		40	Cumberland	C	ounty Landfi				
City, State		- Paris				Disposal Date	City, State						
Freehold, NJ						04/19/17	Newburgh, F	A					
Completed By (Print or Typ	e) Title					Signature 1		_	Date	1		1	

ASB-41 JAN 13

MARTIN MCREA

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

SUPERVISOR

DOL Asbestos Notification asb-41-unprotected State of New Jersey

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

JUL 1 0 2017

Continuation Sheet

Name of Facility Where Abatement is Taking Place (3) Crichton Elementary School ASBESTOS CONTROL Is Location LICE Abatement Type Normally Used Location of Description of Solely by Encapsulate Removal 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 Main office X Heat Shield Insulation 5C SF X Copy Room \boxtimes VAT & MASTIC X 2() SF П Principal Office Heat Shield Insulation 50 SF X Nurses Office П П \boxtimes VAT & MASTIC X 46) SF Nurses Oficce Store П X VAT & MASTIC 80 SF \boxtimes Gym/All Purpose Room VAT & MASTIC \boxtimes 46 10 SF \boxtimes Gym Equiment Storage П X VAT & MASTIC 14)SF \boxtimes Electrical Storage Room VAT & MASTIC 16) SF X Stage/Fan Room X Wood Floor Adhesive 50) SF X Stage/Fan Room Landings П \boxtimes VAT & MASTIC 14) SF M Stage / Fan Room Vibration Damper Cloth X 15 | SF Room 17 Thru Room 34 X Heat Shield Insulation 90 | SF X П П Faculty Room \boxtimes Heat Shield Insulation 50 SF X Field Storage / Janitor Closet Heat Shield Insulation M 50 SF \boxtimes Field Storage / Janitor Closet П M Vibration Damper Cloth X 20 SF Boiler Room X Fire Door 65 SF X Room 16 П \boxtimes VAT & MASTIC 36 | SF X Book Storage Room П \boxtimes VAT & MASTIC 25 SF \boxtimes Janitor Closet Next to Room 2 П X VAT & MASTIC 6C SF \boxtimes Room 2 Closet X VAT & MASTIC \boxtimes 60 SF Room 4 Closet \boxtimes VAT & MASTIC 60 3F \boxtimes Room 5 Closet X VAT & MASTIC 60 3F \boxtimes Room 8 Closet \times VAT & MASTIC 60 3F \boxtimes Room 9 Closet Thru Room 15 Closet \boxtimes VAT & MASTIC 301 SF \boxtimes Interior Library \boxtimes П Ceiling Stucco, Gray 781 0 SF X Exterior Library \boxtimes Caulking to Columns, Gray 251 0 SF \boxtimes Roof H \boxtimes Cementitius Panels, White 801 SF X Heat Unit Ventilation Perimeter BLDG \boxtimes Pipe Insulation & Mudded Elbows 161 0 LF \boxtimes Badroom Pipe Behind Wall Pipe Insulation & Mudded Elbows 681 LF X Throughout School Above Ceiling X Pipe Insulation & Mudded Elbows 13: 0 LF \boxtimes Below Grade Inside Foundation Wall X 2 Inch Isulation Board 41(0 SF X Under Graund Pipe \boxtimes Transite Un now

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Date of Notification (1)					Name	of Building N HALL UNI	Owner/Operato	r (2)				1.	1	(9)	Lin	II /	1/ <u>L</u> L	, ,
7 / 5 /17						Address												
Agencies Notified Type Notifica	tion						IGE AVENUE							JUL	1 (20	17	1
EPA Initial N	otifica	tion											i		400	New Sulf		
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X DOH On Hole					Mana	of Contact					1		1022	110	ENN	NING	NUL	X
DCA EMERC		Y NO	TIFIC	ATION		OI CONTACT RIA PIVOVA	BNICK	Telepho	ne Nur	nber		**********	and the second		· ·			
						Y INFORMA		2										
Name of Facility Where Abatement is T	aking	Plac	e (3)		ACILII	TINFORMA	Type of Facil	ity (4)					_					
SETON HALL UNIVERSITY							School ((K-12) oter 8 (Othe	r than I	K-12)								
Street Address							X Other (ie	e. private &	commo	l. bldg	gs., ho	ies, e	tc.)					
400 SOUTH ORANGE AVENUE							Square Fee					Bldg	. Age					
City (5) County	(6)			1	County	Code (7)	N/A	N/				N	I/A					
SOUTH ORANGE ESSEX						ISE ONLY)	Current Use (I UNIVERSITY	Prior if bein	g demo	lished	1)							
Name of Monitoring Firm Hired by Build	iing C)wne	r (8)		T	ASCM No.	Name of Aba	tement Cor	ntracto	r (9)					-			
TTI Street Address						3	PAR ENVIRO	NMENTAL	CORP	ORAT	ION				- 1			
1253 NORTH CHURCH STREET							Street Address	s							\neg			
City, State, Zip Code			_				313 SPOOK F		D									
MOORESTOWN,	NEW.	JERS	EYB	08057			City, State, Zip SUFFERN, NE		10004				A A A A A A A A A A A A A A A A A A A					
Project Manager for Monitoring Firm				ne Numb	er		Telephone Nu			nse Nu	ımhar				_			
JEFF SEAMAN			6-869-				845-369-7500	ilibei	1101		ımber							
Expected State Date (10)	Sch	ned. (letion Da	ate (11)		Name of OSH	A Monitor	11101	_		-		-	_			
07/ 03/ 17 Month Day Year	l N	onth	8 /	30		/17	QUALITY ENV	IRONMEN	TAL SC	DLUTI	ONS	TECH	1 .					
Occupancy Status During Abatement (Che	ck on	v one	2)	Day		Year	Street Address						**					
X Facility Closed/Vacated During	Entire	Peri	od of	Abateme	nt		1376 ROUTE											
Abatement Performed Outside X Other - Describe: MONDA	of Nor	mal F	acility	Hours -	Describ	oe:												
X Other - Describe: MONDA	r - FR	IDAY		-3:30PM M -12 am			City, State, Zip			one state								
Scope of Work (Check all that apply)			41	IVI - IZ all	'	Teull Contr	I inment with Neg	WAPPIN	GERS	FALL	S, NY	2590						
Demolition X	Ren	ovati	on		X	Mini Enclo	iriment with Neg	ative Press	ure						1			
>3SF OR LF X >160 SF OR 260 LF						Glovebag	Procedure	(WRAP A	ND CL	IT)								
X >160 SF OR 260 LF Location of	Τ.				X		le Procedure	18.000000000000000000000000000000000000										
Asbestos-containing		Loca	ation used		Desc	cription of As	bestos-				At	iteme	nt Type	9				
Material (ACM)		solely			(ie	ining Materia Thermal sys	al (ACM)	Amou	nt	RE	REPA	m						
TO BE ABATED			stodia	1	insula	tion, surfacir	ig, VAT.	(Spec	F)	REMOVA	REPAIR	ENCLOS						
in Facility (13)		staff (4	or ot	her miscella	neous)			A	11 2	1 (-						
GROUND-DINING ROOM AREA	res	No	N/A						_		F	_ R						
EXTERIOR- DINING ROOM STORE FROM	_	-	X	VAT &	wa(T-6.5 - 1-6.5	570.09 T		11,300 SF	2	X		CC	OMPLE	TE				
CONTRACTOR OF CO			X	WINDO	W CAL	JLK		90 SF	;	×								
EXTERIOR -DINING ROOM STORE FROM	T	_	X	FIRE P	ROOFI	VG		150 SF		(co	OMPLE	TE	=2/3			
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Name of Registered Waste Hauler	NJDE	P Wa	aste	Cubic Ya	ards of \	Waste	Name of Registe	red Landfill				-			4			
NEWARK CARTING 369 RAYMOND BLVD.	Haule				80		GRAND CENTR	AL SANITA	RY LA	NDFII	.L				-			
City, State		913		Dia	D :		11											
NEWARK , NEW JERSEY			- 1	Disposal 5/22-8/30		1	PLAINFIELD TO	******			/		1					
Completed by (Print or Type) Title					Signa		CAINFIELD 10		'A Date	7	/	1	11-	7	_			
BENJAMIN SANCHEZ DIRE	CTOR	OF (OPER	ATIONS		1	X			_/	/	>/	1	7				

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

/		(F	ursu	ant to NJA	AC 8.60	-/ and	12.12	0-1)	21		I per	ries,		-			
				Name of	f Buildi	ng Owi INIVER	ner/O RSITY	perator (2	۷)			7)		(C)	E		W
ate of Notification (1)				Street A	Water Services						111	-1/1				****	****
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gencies Notified Type Notification				A STATE OF THE STA	ate, Zip				7					IIII	1 () 9	177
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DCA EMERGENC	Y NOT	IFICA7	LION	VICTOR									-	Life	1.11	1 8	1
		400		FACILIT	Y INFO	RMAII	Type	of Facility	v (4)								
Name of Facility Where Abatement is Taking	g Place	(3)					Турс	School (K	(-12)								
								Subchapt	ter 8	(Other than K-	12)			- 1			
SETON HALL UNIVERSITY							X			ate & commcl. # of Floors	bldgs.	, non	3lda	. Age			1
Street Address							Sq	uare Feet N/A		N/A				/A			
400 SOUTH ORANGE AVENUE			_		0.1-1	71	Curr		Prior	if being demoli	shed)			= 111			7
City (5) County (6)				(STATE	Code (UNI	VERSITY							entra esceria		4
SOUTH ORANGE ESSEX	Owne	r (8)	_	(SIAIL	ASCN		Nam	ne of Abat	teme	nt Contractor	(9)						
Name of Monitoring Firm Hired by Building	Owne	(0)			3					NTAL CORPO	RATIO	NC		-			-
TTI Street Address		- 1997	22	17			Stre	et Address SPOOK R	S	/ POAD							
1253 NORTH CHURCH STREET								, State, Zip									
Oil Ct-to Zin Code		OEV/D	0005	7			SUF	FERN, NE	EM,	YORK 10901							
MOORESTOWN, NE	W JER	SEYB	ne N	umber				ephone Nu			ise Nu	mber					
Project Manager for Monitoring Firm	100000	56-869						-369-7500		1101							-
JEFF SEAMAN				on Date (1	11)		Nar	ne of OSH	M AF	onitor DNMENTAL SC	NI LITI	ONS	TEC	СН			
Expected State Date (10) 07/ 03/ 17		8 /		30	/17	7 Year	QU.	ALITY EN	VIR	ONMENTAL S	JEUII	ONS	112	J. 1.			
Month Day Year	Mont			Day		Teal	Stre	eet Addres	ss		132 E						
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State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) Date of Notification (1) SETON HALL UNIVERSITY 6 13 /17 Street Address Agencies Notified Type Notification 400 SOUTH ORANGE AVENUE FPA Initial Notification City, State, Zip Code DEP Amended Notification SOUTH ORANGE, NEW JERSEY 07079 #3 DOL Cancellation DOH On Hold Name of Contact Telephone Number DCA **EMERGENCY NOTIFICATION** VICTORIA PIVOVARNICK FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) SETON HALL UNIVERSITY Subchapter 8 (Other than K-12) Other (ie. private & commcl. bldgs., hom s, etc.) Street Address # of Floors Square Feet 3lda, Age 400 SOUTH ORANGE AVENUE N/A N/A City (5) County Code (7) County (6) Current Use (Prior if being demolished) SOUTH ORANGE **ESSEX** (STATE USE ONLY) UNIVERSITY Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) TTI 3 PAR ENVIRONMENTAL CORPORATION Street Address Street Address 1253 NORTH CHURCH STREET 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code MOORESTOWN, NEW JERSEYB 08057 SUFFERN, NEW YORK 10901 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number JEFF SEAMAN 856-869-5182 845-369-7500 1101 Expected State Date (10) Sched. Completion Date (11) Name of OSHA Monitor 5/ 22 /17 8 / QUALITY ENVIRONMENTAL SOLUTIONS & TECH. Day Year Month Day Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1376 ROUTE 9 Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe: MONDAY - FRIDAY 7AM-3:30PM City, State, Zip Code WAPPINGERS FALLS, NY : 2590 Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Renovation Mini Enclo:, >3SF OR LF Glovebag Procedure (WRAP AND CUT) >160 SF OR 260 LF Non-Friable Procedure Location of Is Location Description of Asbestos-Abi tement Type Asbestos-containing normally used Containing Material (ACM) Amount EINCALOULE REMOVAL REPAIR ENCLOSU solely by Material (ACM) (ie. Thermal systems (Specify TO BE ABATED Maint/Custodial insulation, surfacing, VAT, SF or LF) in Facility (13) Staff (12) or other miscellaneous) Yes No N/A GROUND-DINING ROOM AREA X VAT & MASTIC ' 11,300 SF COMPLETE EXTERIOR- DINING ROOM STORE FRONT WINDOW CAULK 90 SF X EXTERIOR -DINING ROOM STORE FRONT FIRE PROOFING 150 SF COMPLETE **OVERHANG** Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Waste Name of Registered Landfill **NEWARK CARTING** Hauler ID No. GRAND CENTRAL SANITARY LANDFILL 80 369 RAYMOND BLVD. 913 City, State Disposal Date NEWARK, NEW JERSEY AINFIELD TOWNSHIP, PA 5/22-8/30/17 Completed by (Print or Type) Date BENJAMIN SANCHEZ DIRECTOR OF OPERATIONS

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SETON HALL UNIVERSITY						Subchap	ter 8 (Other than	n K-12	2)					
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Project Manager for Monitoring Firm	V			Number			W YORK 10901	_		_				
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State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) Date of Notification (1) SETON HALL UNIVERSITY /17 Street Address Agencies Notified Type Notification 400 SOUTH ORANGE AVENUE EPA City, State, Zip Code Initial Notification SOUTH ORANGE, NEW JERSEY 07079 DEP Amended Notification DOL Cancellation пон On Hold Name of Contact DCA **EMERGENCY NOTIFICATION** VICTORIA PIVOVARNICK FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) SETON HALL UNIVERSITY Subchapter 8 (Other than K-12) Other (ie. private & commcl. bldgs., hon as, etc.) Street Address Square Feet # of Floors Bldg. Age 400 SOUTH ORANGE AVENUE N/A City (5) County Code (7) County (6) Current Use (Prior if being demolished) SOUTH ORANGE (STATE USE ONLY) **ESSEX** UNIVERSITY Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) PAR ENVIRONMENTAL CORPORATION 3 Street Address Street Address 1253 NORTH CHURCH STREET 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code MOORESTOWN, NEW JERSEYB 08057 SUFFERN, NEW YORK 10901 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number JEFF SEAMAN 856-869-5182 845-369-7500 1101 Expected State Date (10) Sched. Completion Date (11) Name of OSHA Monitor 51 /17 8/ QUALITY ENVIRONMENTAL SOLUTIONS 8 TECH. 30 Month Day Year Year Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1376 ROUTE 9 Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe: MONDAY - FRIDAY 7AM-3:30PM City, State, Zip Code WAPPINGERS FALLS, NY 2590 Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Renovation Mini Enclo >3SF OR LF Glovebag Procedure (WRAP AND CUT) >160 SF OR 260 LF Non-Friable Procedure Is Location Description of Asbestos-Location of At itement Type Asbestos-containing normally used Containing Material (ACM) Amount ENCLOSURE REMOVAL REPAIR Material (ACM) solely by (ie. Thermal systems (Specify TO BE ABATED Maint/Custodial insulation, surfacing, VAT, SF or LF) in Facility (13) Staff (12) or other miscellaneous) Yes No N/A GROUND-DINING ROOM AREA X VAT & MASTIC 11,300 SF EXTERIOR- DINING ROOM STORE FRONT Х WINDOW CAULK 90 SF X EXTERIOR -DINING ROOM STORE FRONT FIRE PROOFING 150 SF **OVERHANG** Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Waste Name of Registered Landfill **NEWARK CARTING** Hauler ID No. GRAND CENTRAL SANITARY LANDFILL 80 369 RAYMOND BLVD 913

Disposal Date

Signature

5/22-8/30/17

DIRECTOR OF OPERATIONS

PLAINFIELD TOWNSHIP, PA

Date

City, State

NEWARK, NEW JERSEY

BENJAMIN SANCHEZ

Completed by (Print or Type)

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

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Date of Notification (1) 6/28/17 & 7/5/17		- 1		Building Ov Excavatir	vner/Operator	(2)			***************************************				
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Name of Facility Where Abatement is Takir	ng Place (3)					Тур	e of Facility (4	1)		Aug Nathani	t Shart I t S		P-27988
vacant house							School (K-1)						
Street Address							Subchapter Other (i.e. p				dinas	home	S.
164 Gatzmer Avenue					continuos necessors	×	etc.)		2 0011111010		23		
City (5)						1 3 3	uare Feet	1	f Floors	100	lldg. A	ge	
Jamesburg							500	1	r <u>econstant and a</u>		75		
County (6) Middlesex	Spilicallia (Sala Secoli)		County (Code (7) ISE ONLY)		100	rent Use (Pric cant house		ng demolis	shed)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASCN	No.	Name	of Al	batement Con	tractc	(9)				
					ABS	S En	vironmenta	Ser	rices, LL	С			
Street Address					Stree	t Addı	ress					mare ble i it is	
					PO	Вох	483, 4 E G	ate [rive				
ity, State, Zip Code							Zip Code	Table 17 y Table 1880					
					Gler	nwoo	od, NJ 074	18					
roject Manager for Monitoring Firm	-	T.	Telephor	ne No.	Telep			dbrerso	License	No.			
					973	-764	-2276		703				
tart Date (10) 7/10/17	Scheduled 8/30/17	Com	pletion I	Date (11)	Name	of O	SHA Monitor						
Occupancy Status During Abatement (Che	ck Only One)			Stree	t Addi	ress	-	(AL 12 CHE 1 115	
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:					City, S	State,	Zip Code		S eason derrocco				
Scope of Work (Check All That Apply)		-								-			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emoliti					Full Containme Mini-Enclosure Glovebag Proc	e ceduri					
					E		Non-Exempted	1() a	IQ INOTI-FTIE	T SIGN		ement	
	1	.ocati										pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used	Sole ntenar	ly by nce/ Staff?	(i.e. th	Descriptions Containing nermal system surfacing, Voother miscella	Materns ins AT, or	ulation, r	Ę	smount Specify F or LF)	Removal	Repair	Encapsulate	
	Yes	No	N/A								-		
house			Х		window	/S			10	×	-		
					-	-				-			
			1050		6. ki. V. 3		I Ne f	Dani	prod I and	501			
lame of Registered Waste Hauler reehold Cartage		H	JDEP Wauler ID	No.	Cubic Yards of Waste TBD		Assess of		ks Land				
City, State Freehold, NJ					Disposal Date TBD	е	City, Stat Birdsbo		Α			- Jardini i	
Completed by	Title				Signatu	re	111			Date			
A. Scott Higgins	Presid	dent				,	14/	Consumer of the Consumer of th	-	7/5/17	7		

Ch 1024	N		CATION	ate of Nev I OF ASB to NJAC	ESTOS	ABATE		The matter control of the party of the state	1 0/4 107 1 7 3 1 7 3		C			\mathbb{V}	
Date of Notification (1) 06-29-17				Building				nitectural De	ij	gn	UL	1	0 2	017	-
Agencies Notified Type Notification		1	Street A	ddress dison A	ve.			i	-	ASBE	STO)S (MOC	TRO	1.8
EPA Initial Amended Amendment	ŧ	T		te, Zip Co		2			-				SIN		
Emergency (i justification) DCA Emergency (i justification) Cancellation		_	Name of	Contact Whitle					e	lephone N	diimh	or			
Second				LITY INFO	Denocember	ON									
Name of Facility Where Abatement is Taking Martin P. Thomas Charter School	Place (3)						-	of Facility (4) School (K-12)							
Street Address 308 9th Street							F :	Subchapter 8 (0 Other (i.e. priva				build	ings,	home	es,
City (5) Newark	-		***************************************					etc.) re Feet	0	f Floors	I KATATAN	BI	dg. A	ge	
County (6)			County C				Curre	nt Use (Prior if	e	ing demo	lished	<u>)</u>		V	-
Essex			(STATE L	JSE ONLY)											
Name of Monitoring Firm Hired by Building C N/A	wner (8)		ASCN	1 No.				tement Contract tracting LLC		(9)					
Street Address						Street 522 7		22	_						
City, State, Zip Code	The transmission of the tr	*						ip Code NJ 07087							
Project Manager for Monitoring Firm		T	Telephor	ne No.		Teleph 201 2	one N	0.		License 01206					
	Schedule		npletion [Date (11)		Name	of OSH	HA Monitor tracting LLC	_	01200					
Occupancy Status During Abatement (Check	586 S. U. S					Street			-						
Facility Closed/Vacated During Entire P	eriod of A	batem	nent			522 7	7th St								
Abatement Performed Outside of Normal Other – Describe: 7:00 am - 5:00 pm	al Facility	Hours						ip Code NJ 07087							
Scope of Work (Check All That Apply)						01110			-			-			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolit				-	Mir Glo	I Containment voi-Enclosure ovebag Procedun-Exempted (*)	е						
	lal	Locati	on				1 140	II-Exempled ()	11	IU IVOII-FI	lable			ment	
Location of	N	ormall	ly		Des	scription	of				-		Ту	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mair	Sole ntenar odial S (12)	nce/				s insula T, or		(Amount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A						_					io	
1st Floor		Х			Wa	II Plast	ter			2 SF	2	ζ			
2nd Floor		Х			Wa	II Plasi	ter			2 SF	2	K			
3rd Floor		Х			Wa	II Plast	ter			2 SF	2	<u>ζ</u>			
4th Floor		Χ				II Plast	ter			2 SF		ζ.			
Name of Registered Waste Hauler Delfa Contracting LLC		10000	JDEP W auler ID 3524(No.	Oubic of Was			Name of Reg Tullytown I				cove	ry F	acili	ty
City, State Union City, NJ					Dispos	al Date 7-17		City, State Tullytown,)	Α					
Completed by Jaime Delgado	Title Proj. I	Vana	ager.			ignature	1	A.		T	Date		7		

Print Form

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

CHIC # 2121

Date of Notification (1)			Name	of Bu	ildina	Owner / Operate	or (2)	- Partie			D 0	7 -	1 NAMES	
	6/30/2017			St. 55		trella		01 (2)	1		EGE	1 1			1
	Type Notifica	ation			t Addr				- 11	Ų:	The second section of the second section of	market market		7	111
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☐ DEP						& Zip (TJÜL T	0 20	17	- Inn	7
⊠ DOL	Amei						07866								
□ DOH		rgency		Name							SBES - IT	elenho	no N	umh	er
☐ DCA	☐ Cano	ellation		John	Cen	trella			1	1:1	CEGCO.				-
				FA	CILIT	YINF	ORMATION		La Table		weeks to the second		-	the Control of the Co	
Name of Facility Whe Residence	ere Abateme	ent is Taking Pl	ace (3)			Type of Faci				******				
Street Address									Other than		.12)				
											rcial building	s hom	A 6	tc)	
							Square Feet		# of Floo			dg. Ag	456		
City (5)		County (6)	ICo	ounty (Code	7)	3000		77 01 1 100	4	D.	ug. Ag	50÷		
Rockaway		Morris				. ,	Current Use		f being de	m :	lished)		307		-
,							Residentia		. Domig do		moriou)				
Name of Monitoring F	irm Hired b	v Building Own	er (8))	ASC	M No		AND DESCRIPTION OF THE PERSON	t Contract	01 /	(9)		Particular Services	denostrativo	_
		,	J. (J	,	1	,,,,,,,,	Alpha Envi								
Street Address							Street Addre			- :					
							2129 Route	33							
City, State & Zip Cod	е						City, State &								
							Hamilton, P		10						
Project Manager for N	Monitoring F	irm	Tele	phone	Numb	per	Telephone N				License Nu				
0-1-11-101-15-1	(10)		-	- AND THE STREET			609-847-29	NAME OF THE PARTY		-	1	0122	2		
Scheduled Start Date 7/9/2017		Scheduled Com 7/9/2017	pleti	on Dat	te (11)	1	Name of OSI		nitor						
Occupancy Status Du			I	-1	- Annual Control	-	EMSL Anal								
Facility Close	uning Abaten	nent (Check on During Entire Pe	ly on	e) of Ahs	otomo	nt	Street Addres								
		utside of Norma					107 Haddo		-	-					
Describe:	citorinica Ot	atorac or reorrie	110	uis –	ann	o opin	Westmont,								
Facility Occup	oied During	Abatement					AAGSHIIOIIL,	IAD OO	100						
Scope of Work (Chec															-
	٠								Full Conta	ai I	ment with Ne	gative	Pres	sure	
≥3 sf or ≥3 lf			\boxtimes	Ren	ovatio	n		\boxtimes	Mini-Encl	05	ıre				
≥160 sf ≥260	lf			Den	nolition	1			Glove Ba	g '	rocedures				
									Non-Exer	nı t	ed and Non-	Friable	Pro	cedur	e.
	ation of	I	Is	Locati	on		Description	Surgerial and	T		Amount		teme	and the second	
	s-Containing	9		nally L			Asbestos-Con				(Specify				
	ial (ACM) ABATED			olely b			Material (A				SF or LF)	20		Ē	ш
	Facility			odial S			(i.e., thermal s insulation, surface					Remova	Repair	Encapsulate	Enclsoure
	(13)		ouo.	(12)	Zum.		or other miscell					ova	air.	sula	our
			Yes	No	N/A				'					e	Ø
Crawlspace				\boxtimes			Pipe Insula	ation		1	If				
Name of Registered V	Vaste Haule	er		NJI	DEP V	Vaste	Cubic Yards	Name	of Regist	e e	ed Landfill				
				Hai	uler ID	No.	of Waste								
ALPHA ENVIRONN	MENTAL			000	03333	30	1	Grov	vs Landf						
City, State		700 - U	-				Disposal Date	City,	State			-			
Trenton, NJ							Various	Morr	isville, P	A					
Completed By (Print o	or Type)		- 10 mm - 1	Title			Signature			-		Date			
Rod Richardson					oject nage	r	Rod Rich	ards	'on			6/30	/201	17	

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

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	1	101	2120

Date of Notification	(1)		N	lame o	of Buil	ding	Owner / Operato	r (2)	1111	15 6	15		TE)	ni	-
1	6/28/2017		S	tart t	o Fin	ish l	Builders			-					
Agencies Notified	Type Notifica	ation	10.5		Addres				40.00	1717	4.0	0047			
⊠ EPA □ DEP	☑ Initia	,	-		x 850		\d_		in the second	JUL	10	2017	-	<i>-1</i>	
□ DOL	⊠ Initia	10. 900			tate & . msto v								i		
⊠ DOH		gency	-		of Con		40		+ A	BEST	<u>08.9</u>	elenho	ne N	umhe	or .
☐ DCA		ellation	100		Palcke						Z,	Olobilo			
				EAC	II ITV	INIC	ORMATION								
Name of Facility Wh	nere Abateme	ent is Taking Pla	ce (3)		11.11	1141	Type of Facil	ity (4)		-					
Residence		2111 10 1 211111g 1 14	00 (0)	***			School (
Street Address							Subchap	ter 8 (Other than	F-12)					
							The second secon		te & comn	_			-	tc.)	
		Y					Square Feet		# of Floor:	5	BI	dg. Ag			
City (5)		County (6)	Cou	inty Co	ode (7)	2000	· · ·		2			80+		
Cherry Hill		Burlington					Current Use	(Prior if	being der	n lished	1)				
Name of Monitoring	Firm Hired b	y Building Owne	r (8)		ASCI	/ No.	Name of Aba	tement	Contracto	r '9)		apid sharemaken	NAME AND ADDRESS OF	POWER STREET	-
		, 3				ere sellerer	Alpha Envi								
Street Address							Street Addres								
City Ctata 9 7in Ca	-l-						PO Box 829		1	_					
City, State & Zip Co	ae						City, State & Trenton, N.		ae						
Project Manager for	Monitoring F	irm T	eleph	none N	Numbe	er	Telephone No			Lice	nse Nu	ımber			
							609-847-29					0122	2		
Scheduled Start Dat		Scheduled Comp	letior	n Date	(11)		Name of OSF		nitor						
7/7/2017 Occupancy Status D	A STATE OF THE PARTY OF THE PAR	7/8/2017			Neckless and the		Street Addres								
		During Entire Pe			ement		107 Haddor								
		utside of Normal					City, State &			_					
Describe:							Westmont,								
	upied During									- Tag			ville.		
Scope of Work (Che	eck all that ap	pply)						П	Eull Conto	i mont	uith Na	antivo	Droo	ouro	
☐ ≥3 sf or ≥3 lf	F		M	Reno	vation			Programme 1	Full Conta Mini-Enclo		WILL INC	gauve	ries	Suie	
≥160 sf ≥260			Ħ		olition			-	Glove Bag		ures				
									Non-Exem			Friable	Pro	edur	9
Lo	cation of	T	Is L	ocatio	n T		Description	Statement .	THOIT EXCIT	Amo			teme		-
Asbest	os-Containin	g I	Norm:	ally Us	sed		Asbestos-Con	taining		(Spe	cify				-
	erial (ACM)			lely by			Material (A			SF or	LF)	70		Enc	m
	BE ABATED Facility			enance dial St		i	(i.e., thermal synsulation, surface					Remova	Repair	aps	clsc
	(13)			(12)			or other miscella					oval	air	Encapsulate	Enclsoure
)			N/A									Ф	
Exterior							Siding		1	0 10sf					
Name of Registered	Waste Haule	er L		NJD	EP W	aste	Cubic Yards	Name	of Regist	e ed Lar	ndfill		Garage and		
				Haul	ler ID	No.	of Waste								
ALPHA ENVIRON City, State	INICHIAL			UUU.	33330)	5 Disposal Date	City,	vs Landfi State	B1	-				
Trenton, NJ							various		isville, P	ā.					
Completed By (Print	or Type)			Title			Signature	WOIT	iovine, F			Date			-
Rod Richardson	. c jpc/			Proj			Rod Richardson					6/28	/20	17	
					nager									ದರಿಗೆ	

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

Chl#3234

Date of Notification (1)	21 /	17			E	e of Buildir	ng Owner/Operator	(2)	DEC			V	E
Agencies Notified T	ype Notific					et Address		100	P				
□ EPA □	☑ Initial	, ((0))			114		Road, Suite 3		JU JU	_ 1	0	2017	, []
	⊠ Amende		= 1= 1			State, Zip				50-00			- 1
☑ DHSS □ DCA □	Amendm Emerger				40.000	arlton, NJ		a property of	ASBES1	08	COL	VITR	01 &
(NJAC 5:23-8)	justificati	ion)	iuumi	3		e of Contac			lephone Numb				O= 0
	Cancella	tion			Jo	hn Angel	ucci	Page 1	The second secon	- Sugar An	NATION OF THE PARTY OF THE PART		
					FA	CILITY IN	NFORMATION			-			
Name of Facility Where Aba	atement is	Taking	Place	(3)				Type of Facility (4)		-			
Virtua - Berlin Campu	IS							☐ School (K-12)					
Street Address								☐ Subchapter 8 (C ☐ Other (i.e., priva	her than K-12)	ما اما	سالمان.		
100 Townsend Avenu	ie							homes, etc.)	e and commen	iai b	ullain	gs,	
City (5)				Koon -				Square Feet	of Floors	В	ldg. A	ge	-
Berlin													
County (6)					Cou	nty Code (7	7)(STATE USE ONLY)	Current Use (Prior i	being demolish	ned)			
Camden								Hospital					
Name of Monitoring Firm His		ding Ov	vner ((8)	ASCN	l No.	Name of Abateme						
Vertex Air Quality Ser	vices							VIRONMENTAL, I	IC.				
Street Address							Street Address			7.0			
700 Turner Way City, State, Zip Code							1123 BEAVE						
Aston, PA 19014							City, State, Zip Co						
Project Manager for Monitori	ina Eirm			Tal		N	BRISTOL, PA						
Don Heim	ing Filiti			1	ephone	NO. 3-8902	Telephone No.	100	icense No.				
Start Date (10)	T 0	Schodul	lod C	1		ate (11)	215-788-6040		00509				
_ 6 / 30 /						17	Name of OSHA M	VIRONMENTAL, I	10				
Occupancy Status During Ab								VIRONIVIENTAL, I	IC.				
☐ Facility Closed/Vacated □					ment		Street Address	OTDEET					
☐ Abatement Performed Ou	utside of No	ormal F	acility	Hou	rs - De	scribe	1123 BEAVER						
Time of Abatement: 7:00	0AM- <u>3:30</u> F	PM/	PI	Λ- <u></u>	AM		City, State, Zip Co BRISTOL, PA						
Scope of Work (Check all that	at apply)	-	-				BRISTOL, PA	19007					
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	ас арр., у	_	Rei Dei				☐ Mini-Enc ☐ Glovebag	Procedure					
			le	Loca	tion		☐ Non-Exe	mpted (*) and Non-Fi	able Procedure				
Location of			N	lorma	lly		Description o	f		_	atem		
Asbestos-Containing Mat)		d Solentena	ely by	Asbe	stos Containing Mai	terial (ACM)	Amount	Remova	Repair	Encapsulate	Enclosure
TO BE ABATEI IN Facility	D				Staff?	(i.e	., thermal systems i surfacing, VAT,	nsulation,	(Specify SF or LF)	SVOL	air	aps	losu
(13)		-		(12)	_	1	other miscellaned	ous)	SI OILI)	=		ulate	ē
4st E00 B			Yes	No	N/A							w	
1st ECO Room & connect	ted Cam	era		\boxtimes		Floor til	e and assoicate	d mastic	650 SF	\boxtimes			
Adjoining Room				\boxtimes		Double	Tile & Mastic		300 SF	区			
										П	П	П	
Name of Registered Waste H	lauler			I	JDEP 1	Vaste	Cubic Yards of	Name of Registere	Landfill				-
SERVICE TRANSPORT	r GROUP	, INC.			20990		Waste 20	Minerva Landi					
City, State							Disposal Date	City, State	-			SALET COLO	
NEW CASTLE, DE 1972	20						7/3/17	Waynesburg,)H				
Completed By (Print or Type)		Title	O				Signature	0 :	Date				
Gino Pizzigoni		Esti	imat	or			Plant	PimmizNM	· /OL -)-	5-	17	

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT Q # 3229 (Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)	17		1	Vame of Bu	ilding Owner/Opera	tor (2)		G	E	1	
Agencies Notified ☐ EPA ☐ Initial ☐ DOLWD ☐ DHSS ☐ DCA (NJAC 5:23-8) ☐ Type Notifica ☐ Initial ☐ Amended Amended ☐ Emergence ☐ justification	ent # <u>1-(</u> cy (inclu	5/28/1: iding	Z C	ity, State, Z Mariton, ame of Con	w Road, Suite 3 ip Code NJ 08053		ASBE Telephone M	UL STOS	S CC	NT	
☐ Cancellati	on			John Ang	gelucci		i diopnone i	Chillippe	# 401	ACI	
				FACILITY	INFORMATION						-
Name of Facility Where Abatement is Ta	aking P	lace (3)			Type of Facility	14		10000		
Virtua - Berlin Campus						School (K-12	2)				
Street Address 100 Townsend Avenue						Subchapter Other (i.e., p	rivate and com	(-12) mercia	al buil	dings	3,
City (5) Berlin						Square Feet	# of Floors		Bldg	. Ag	е
County (6)			10	ounty Code	(7)(STATE USE ONL	0 0					
Camden				ounty Code	(1)(STATE USE ONL	confirmation and an interest the second	or f being dem	olishe	d)		
Name of Monitoring Firm Hired by Buildin	g Own	er (8)	ASC	M No.	Name of Aboto	Hospital ment Contractor (9)					
Vertex Air Quality Services						NVIRONMENTAL	шо				
Street Address					Street Address	RVIRONIVIENTAL	., NC.				
700 Turner Way						ER STREET					
City, State, Zip Code					City, State, Zip						
Aston, PA 19014					BRISTOL, P						
Project Manager for Monitoring Firm		Te	lephon	e No	Telephone No.	A 15007	T :				
Don Heim		1		8-8902	215-788-604	0	icense No.				
Start Date (10) Sch	eduled			Date (11)	Name of OSHA		00509				
6 /30 / _17				17		WONTON WIRONMENTAL,	1.10				
Occupancy Status During Abatement (Che						VIRONIVIEN I AL,	, II IC.				
Facility Closed/Vacated During Entire P	eriod o	f Ahate	ment		Street Address						
Abatement Performed Outside of Norma	al Facil	ity Hou	rs - De	scribe	1123 BEAVE		_				
Time of Abatement: 7:00AM-3:30PM/		PM	AN	1	City, State, Zip C				-		
cope of Work (Check all that apply)					BRISTOL, PA	19007					
] ≥3 sf or ≥3 if] ≥160 sf or ≥260 if		enovati			☐ Mini-End	tainment with Negat closure g Procedure mpted (*) and Non-F		ire			
		Locat					_		patem	ent 1	Γvr
Location of Asbestos-Containing Material (ACM)		Normal ed Sole		Asha	Description o				1	1	-
TO BE ABATED	Ma	intena	nce/	(i.e.	stos Containing Ma , thermal systems	terial (ACM)	Amount Specify	Removal	Repair	Encapsulate	1.00000
IN Facility (13)	Cus	todial S (12)	staff?		surfacing, VAT,	or	F or LF)	ova	=·	psu	
(10)	Yes	No	N/A	1	other miscellane	ous)				late	1
ECO Room & connected Camera				F1							
ıom				Floor tile	e and assoicate	d mastic	50 SF	\boxtimes			
	Ц										E
								П	П		Г
		П									_
ne of Registered Waste Hauler ERVICE TRANSPORT GROUP, INC		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	DEP V		Cubic Yards of Waste	Name of Registere					L
, State	:1) 	_ 2	0990		20	Minerva Landf	111	2.012-012			
EW CASTLE, DE 19720					Disposal Date	City, State					
11.15.61					7/3/17	Waynesburg, (Ol				
npleted By (Print or Type) Title no Pizzigoni Es	timato	nr.			Signature Line	/:	Date	/28	. /	7	

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

			NC	TIFIC	CATION	OF.	of New Jerse ASBESTOS NJAC 8:60 a	ABA	TEMEN	t t	PPR TI	oue on	Uni	30	t.	S
Date of Notification (1)							lding Owner/Op		.00	1 100	7 (21-1) i i		6,
6/	21	/	17		Virtu		5	00.0101	(2)	111	1) [C	E	7 7	V/ E	
Agencies Notified EPA	Type Not	tificatio	n		Street A	ddre	SS			1112	4		(53)	1	<u> </u>	4//
Ø DOLWD	☐ Amen	404			20 W	Sto	w Road, Suit	e 3		The second						.11 1
⊠ DHSS	Amen		#		City, Sta	te, Zi	ip Code			111	- (JÜL	10	20	17	111.7
DCA		ency (includir	ng			NJ 08053			· viterate sea						
(NJAC 5:23-8)	justific Cance				Name of						A COR Telenho	ne Nur	mber	NII.	1011	<u> </u>
		ilation			John					Trans.						
Name of Facility Where	Abatement is	Takin	a Place	2 /2)	FACIL	ITY	INFORMATIO	ЭN								
Virtua - Berlin Cam	pus	, rakin	y Flace	3 (3)					Type of F							
Street Address									School	ol (K-12)	N.I.					
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Project Manager for Monitoring Firm		Τ.	Telephor	ne No.			ne No.		License N	lo.	*		-
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DCA Cancellation			Geara	ld Harmy LITY INFO		ON			_			1	_		
Name of Facility Where Abatement is Taking Private House Street Address	Place (3)					T)	pe of Facility School (K- Subchapte	12)	he	or than K-1	2)			
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Glen Ridge County (6)				Code (7)	asi Saluhi Sa			urrent Use (Pr	ior if I	eir	ng demolish				
Essex Name of Monitoring Firm Hired by Building O	wner (8)	(ASCN	JSE ONLY)		Name	of A	Abatement Co	ntrac	or	(9)				
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City, State, Zip Code								46 West S	uite	14	V				
Project Manager for Monitoring Firm		- [7	Γelephor	ne No.			wa	, NJ 07405	i	Т	License N	0.			
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City, State Totowa, NJ				Dispos TBD			City, Sta Tullyto	wn,	2/4	λ					
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DCA Cancellation				lackis	DNAAT	TON			8.					
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Street Address , C					1			Subchapte	r 8 (C	ther than K-12 3 & commercia		dings,	home	s,
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County (6)				Code (7) JSE ONLY)			- 4	ent Use (Pr		eing demolish	ned)			
Name of Monitoring Firm Hired by Building C	Owner (8)		ASCN	No.		1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	of Aba	itement Co istries Inc	ntrac	or (9)				
Street Address					Marille A	Street	Addre	SS		-				
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City, State, Zip Code								ip Code w Jersey	087	23				
Project Manager for Monitoring Firm	<u> </u>	Te	elepho	ne No.		1	none N	lo. 7499		License N 01196	0.			
Start Date (10) 6 30 17	Scheduled	d Comp	letion	Date (11)		Name	of OS	HA Monitor						
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Name of Monitoring Firm Hired by Building (wner (8)		ASC	A No.	61		atement Co ustries In		or (9)			- C. C. C. C. C. C. C. C. C. C. C. C. C.		
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Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:					City, S	tate, Z	ip Code							
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Brick Industries Inc.		Ha	auler ID 602		Vaste ()	GROV			41111				
City, State Brick, New Jersey				Dis	posal Date	17	City, Sta	ite						
Completed by Eric Plackis	Title Presid	dent			Signature	Tr	16			Date 7	1	//-	7	

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

Date of Notification (1)		-		Nam	o of Buildin	20.00	.mas/One set	(0)	TE 1 7/7	F7 F	marin.		
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				FA	CILITY II	NFO	RMATION						
Name of Facility Where Abatement Residence	is Takin	g Place	e (3)					Type of Facility (4) ☐ School (K-12)					
Street Address		W-313						☐ Subchapter 8 (0	ther than K-12	2)			
								Other (i.e., priva	e and comme	rcial b	uilding	gs,	
City (5)								homes, etc.) Square Feet	t of Floors		lala A		
Beach Haven								1500 sf	f of Floors	В	ldg. A	ge	
County (6)				Cou	nty Code (7\/CT	ATE USE ONLY)			, n	65		
Ocean				000	my oode (1)(01)	ATE OSE ONET)	Current Use (Prior Residence	being demoil	snea)			
Name of Monitoring Firm Hired by I	Building (Jwner	(8)	ASCM	No	INI	mo of Abota						
Traine or mornioring t inn timed by t	Junuing (JWIICI	(0)	ASCIVI	INO.	11 20		ent Contractor (9)					
Street Address						-		ntracting, Inc.			- 11		
0.0007.000							reet Address	11. 24.04					
City, State, Zip Code							1889 Route 9		San Company				
Oity, State, 2ip Code							y, State, Zip C						
Project Manager for Monitoring Firm			T					New Jersey 0875	1				
Project Manager for Monitoring Firm	1		Tel	ephone	No.	1	lephone No.		.icense No.				
Start Date (10)	10.1		<u></u>		27.10	-	732-349-9932		00624				
					ate (11)		me of OSHA N						
				0_/	17	ŀ	E.M.S.L. Ana	lytical					
Occupancy Status During Abateme						Str	eet Address						
☐ Abstancet Deformed Outside	Entire Pe	riod of	Abate	ment	22	1	056 Stelton						
Abatement Performed Outside of Time of Abatement:AM	i Normai Pi	racilit M	y Hou PM	rs - Des -	Scribe	Cit	y, State, Zip Co	ode					
					ZIVI	F	Piscataway, I	New Jersey 0885					
Scope of Work (Check all that apply)						П= :: 6		7				
$\square \ge 3$ sf or ≥ 3 lf $\square \ge 160$ sf or ≥ 260 lf		_	enovat emoliti				☐ Mini-Enc ☐ Glovebag	ainment with Negati losure g Procedure mpted (*) and Non-F		re			
		Is	Loca	tion					The second secon		atem	ent T	vne
Location of			Norma	ally ely by			Description o	f			_		
Asbestos-Containing Material (A TO BE ABATED	CM)		intena		Asbe	stos	Containing Ma ermal systems	terial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
IN Facility		Cus		Staff?	(1.6		surfacing, VAT,		(Specify SF or LF)	ova	air.	psu	nso
(13)			(12)	1	4		her miscellane		0. 0. 2. /	-		ılate	ē
		Yes	No	N/A								(b	
exterior					asbesto	os s	iding		1400 sf				
									2.10	П	П	П	
Name of Registered Waste Hauler			N	JDEP V	Waste	Cul	oic Yards of	Name of Registere	d Landfill				
Guardian Contracting, Inc.			H	lauler II 20223		Wa	ste	T.R.R.F.					
City, State				LULLS		_	posal Date	City, State	_				
Toms River, New Jersey							7/19/17	Tullytown, Pe	ınsylvania				
Completed By (Print or Type)	Title						4	1	•				
Nicholas Fernicola	474,000	oject	Man	ager		10.55	Signature	1. It	Da	ite -	5/1-	7	

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

Date of Notification (1)				Nam	e of Buildin	g Owner/Operator	(2)	-				
//	17			77.000.000		nvironmental Sei		-3	210	76	5	
Agencies Notified Type Notifi	cation			Stree	t Address			m) 15 (PE	1	\//	CI
⊠ EPA ⊠ Initial				24	Germani	a Station Road,	Suite 3	n)		IJ	M	5
□ DOLWD □ Amende	0.00				State, Zip			Fry 1				- 1
□ DOH Amendr		-		- S	100	, NJ 08755	The state of the s		er at	0 6	0.1~	
DCA Emerge (NJAC 5:23-8) justifica		ding			of Contac				<u>JL 1</u>	0 2	U1/	11
Cancell					ris DeLu		and the state of t	elephone Nu	ımber			
	ation				0.50		1	/ 12-2-14		-	TRO	L &
Name of Facility Where Abatement is	Takina D	200 (21	FA	CILITYIN	FORMATION			LICEN	SINC	3	
Former Auto Dealership	raking F	ace (3)				Type of Facility (4)					
Street Address							School (K-12) Subchapter 8 (thor than V	10)			
3712 Route 9							Other (i.e., priv	te and comm	nercial b	uildin	as.	
							homes, etc.)			8	3-1	
City (5)							Square Feet	# of Floors	В	ldg. A	ge	
Freehold							20,000 sf	1		60		
County (6)				Cour	nty Code (7)(STATE USE ONLY)	Current Use (Prior	being demo	olished)			
Monmouth						SS 947	Former Deale	ship				
Name of Monitoring Firm Hired by Bui	lding Owr	er (8))	ASCM	No.	Name of Abateme						
Guardian Contracting, Inc.						1	ntracting, Inc.					
Street Address						Street Address		-	2.00			
1889 Rte. 9, Unit 61						1889 Route 9	Unit 61					
City, State, Zip Code						City, State, Zip Co						
Toms River, New Jersey 0875	5						New Jersey 0875	7.6				
Project Manager for Monitoring Firm		1	Tele	phone	No	Telephone No.	New Jersey 0075					
Nicholas Fernicola					-9932	732-349-9932	2	icense No.				
Start Date (10)	Schedule	d Con				Name of OSHA M		00624				
07 / _17 / _17	07					E.M.S.L. Anal						
Occupancy Status During Abatement		G				Street Address	yucai	-				
☐ Facility Closed/Vacated During Ent				nont		SATE AND RESERVED TO SERVED						
☐ Abatement Performed Outside of N	ormal Fac	cility F	Hour	s - Des	cribe	1056 Stelton						
Time of Abatement:AM	PM/		PM-		AM	City, State, Zip Co						
Scope of Work (Check all that apply)						Piscataway, N	lew Jersey 0885					
						□ Full Conta	ainment with Negati	e Pressure				
\supseteq 3 sf or \ge 3 lf \supseteq 2160 sf or \ge 260 lf		Reno					osure	o i roccaro				1
ZZ = 100 31 01 = 200 11	M	Demo	OIITIO	n		☐ Glovebag	i Procedure npted (*) and Non-F	iabla Desasa				
		Is Lo	ncati	on		△ Noil-Exel	ripled () and Non-F	lable Proced				
Location of			rmal			Description of		10	Ab	atem	ent T	уре
Asbestos-Containing Material (ACM		Jsed :			Asbes	stos Containing Mat		Amount	Re	Repair	En	E
TO BE ABATED IN Facility	40	Maint ustoc				, thermal systems in	nsulation,	(Specify	Remova	oair	cap	Enclosure
(13)			12)	Aun.		surfacing, VAT, other miscellaneo		SF or LF)	la la		Encapsulate	ure
	Ye	s	No	N/A		other miscellanee	ous)				ite	
west end building ceiling deck		0	3		fireproo	fing		8000 sf				
exterior	. [D	◁		asbesto	s siding		1500 sf		П		П
west end building	D	3		tar seala	ant		200 sf		П			
			7	П								
Name of Registered Waste Hauler				IDEP V	Vaste T	Cubic Yards of	Name of Registere	410-45"	\Box		Ш	
Guardian Contracting, Inc.			12000	uler ID		Waste	T.R.R.F.	Landill				
City, State	-		20223		30							
Toms River, New Jersey				Disposal Date	City, State							
				07/31/17	Tullytown, Pe	insylvania	4	1				
Completed By (Print or Type)	Title	District Control				Signature	/ / /	7 0	ate	1		
Nicholas Fernicola	Proje	ct M	ana	ger			you tak		115	11	7	
SB-41		-					1 1		1			

CH32197

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

Date of Notification (1)				Name	of Buildin	g Owner/Operator (2	2)	7)				-111
07/08	5_ /	17			hard Rar	•	2)	LL JUL	1 (20	17	lance
Agencies Notified Ty	pe Notificatio	n		Street	Address	E.		1				
	Initial						4	ASBESTO				. 8
TOTAL CONTRACTOR OF THE PARTY O	Amended			City, S	state, Zip (Code			EN	MYC	raine	
⊠ DOH	Amendment			100.00		NJ 08753						
DCA (NJAC 5:23-8)	Emergency justification)				of Contac		T	lephone Numb	er			
	Cancellation			Ric	hard Rar	nirez	71.	iopriorio marrio				
				-		IFORMATION						
Name of Facility Where Abat	ement is Tak	ing Place	(3)	1 //	JILITI III	II OKIMATION	Type of Facility (4)					
Residence			(0)				☐ School (K-12)					
Street Address							☐ Subchapter 8 (0 ☐ Other (i.e., priva homes, etc.)		ial bu	ilding	s,	
City (5)							Square Feet	of Floors	Ble	dg. A	ie .	
Toms River							1500 sf	1	0.000	65		
County (6)				Cour	ty Code (7)(STATE USE ONLY)	Current Use (Prior	being demolish	ned)			_
Ocean					S 6	2 2	Residence					
Name of Monitoring Firm Hire	ed by Building	g Owner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
N/A							ntracting, Inc.					
Street Address						Street Address	g,					
						1889 Route 9	. Unit 61					
City, State, Zip Code						City, State, Zip Co	20	-	-			
50 0 0							New Jersey 0875	!				
Project Manager for Monitorin	ng Firm		Tel	ephone	No.	Telephone No.	1	icense No.		-		-+
				32.0		732-349-9932		00624				
Start Date (10)	Sch	eduled Co	ompl	etion Da	te (11)	Name of OSHA M				-7/3/2		\dashv
07/_17_/_1		07 /			30500 05	E.M.S.L. Anal						
Occupancy Status During Ab	atement (Che	eck only o	ne)			Street Address		12				
☐ Facility Closed/Vacated D		1.7	10000	ement		1056 Stelton						
☐ Abatement Performed Ou	tside of Norm	nal Facility	Hou	ırs - Des	cribe	City, State, Zip Co	nde	4				
Time of Abatement:	AM	PM/	_PN	l	AM		lew Jersey 0885	4				
Scope of Work (Check all tha	t apply)						ainment with Negati					
≥3 sf or ≥3 lf		Re				☐ Mini-Encl	osure	Flessule				
≥160 sf or ≥260 lf		□ Der	molit	ion		☐ Glovebag		iabla Dasas dura				
		le	Loca	tion		⊠ Non-Exe	mpted (*) and Non-F	able Procedure	1			
Location of			lorm			Description o	f		-	ateme		
Asbestos-Containing Mate				lely by	Asbe	stos Containing Ma		Amount	Rer	Repair	Enc	Enc
TO BE ABATED IN Facility	<u> </u>			ance/ Staff?	(i.e	, thermal systems i		(Specify	Removal	air	aps	Enclosure
(13)		0000	(12		90	surfacing, VAT, other miscellaned		SF or LF)	<u>a</u>		Encapsulate	ıre
* *		Yes	No	N/A							e	
exterior			\boxtimes		asbetos	s siding		1300 sf	\boxtimes			
								-	П	П	П	П
Name of Registered Waste H	auler			NJDEP V	Vaste	Cubic Yards of	Name of Register	d Landfill				-
Guardian Contracting,	Inc.			Hauler II		Waste	T.R.R.F.					
City, State				20223		3 Disposal Date	City, State					
Toms River, New Jerse	.V					07/21/17	Tullytown, Pe	nevlvania				
Completed By (Print or Type)		itla					Tanytown, Pe			-		
Nicholas Fernicola		itle Project	Mar	1200-		Signature	111	Dat	e	1 -		
ASR-41		roject	ivial	iayei			7-1/		10	11	T.	

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

Date of Notification (1)			Name	of Building	Owner/Operator (2)	2.	110	7 0	2.	
07/05/	17		Bil	I Barrett		241-0-4			100	FP	primary
Agencies Notified Type Notifica	ition		Stree	t Address		1	1561	5 1	-W	E	1
						d den		a war managas a di	Sent Transport at the Sent		
□ DOLWD □ Amended			City. S	State, Zip C	ode	111	1.				
		_			kes, NJ 07046	1	J JUL	10	2017	1	last
DCA Emergence		ing		of Contact		1-	1			1	
(NJAC 5:23-8) justificatio			(Constitution		5	1	lephone Numi	ber	- 675		
Cancellati	on			Barrett					, F.(S AC	
			FA	CILITY IN	FORMATION	The state of the s		****		in surficient agents	phrahma matthew
Name of Facility Where Abatement is T	aking Pla	ce (3)				Type of Facility (4)					
Residence		(A)				☐ School (K-12) ☐ Subchapter 8 (horthan V 10	`			
Street Address						Other (i.e., privalence)	e and commer) rcial bu	iilding	S,	
City (5)	il					Square Feet	of Floors	Blo	dg. Ag	ie .	
Manasquan					3	1500 sf	1		65		
County (6)			Com	nty Code (7)(STATE USE ONLY)	Current Use (Prior	heing demolis				_
Monmouth			000	, oodo (1	MOTHIE GOE GHET	Residence	being demons	nicuj			
Name of Monitoring Firm Hired by Build	ing Owne	er (8)	ASCM	No	Name of Abateme				-		-
Guardian Contracting, Inc.	ing Owne	,, (0)	AGGIVI	140.		ntracting, Inc.					
Street Address						ntracting, inc.			- A		_
					Street Address	11. 11.04					
1889 Route 9, Unit 61					1889 Route 9						
City, State, Zip Code					City, State, Zip Co						
Toms River, NJ 08755					The state of the s	New Jersey 0875					
Project Manager for Monitoring Firm			ephone		Telephone No.		.icense No.				
Nicholas Fernicola			32-349		732-349-9932		00624				
	cheduled				Name of OSHA M	Ionitor					
07 /17 /17	07	/ _2	0_/	17	E.M.S.L. Ana	lytical					
Occupancy Status During Abatement (C	Check onl	y one)			Street Address	10.74	-				
□ Facility Closed/Vacated During Entire					1056 Stelton						
☐ Abatement Performed Outside of No					City, State, Zip Co	ode	-				
Time of Abatement:AM	PM/	PM	l	_AM	Piscataway, I	New Jersey 0885	4				
Scope of Work (Check all that apply)				No.							
≥3 sf or ≥3 lf		Renova			☐ Mini-Enc		i e Pressure				
≥160 sf or ≥260 If	\boxtimes	Demoliti	on		☐ Gloveba	g Procedure mpted (*) and Non-	iable Procedu	ro			
		Is Loca	tion	T	⊠ No⊪-Exc	mpted () and Non-	lable Flocedu	1	atom	ant Ti	,no
Location of		Norma			Description of	.f			atem		
Asbestos-Containing Material (ACM)	1	sed So		Asbe	stos Containing Ma		Amount	Remova	Repair	Enc	Enclosure
TO BE ABATED		Mainten ustodial		(i.e	., thermal systems		(Specify	Von	air	aps	los
IN Facility (13)	O	(12			surfacing, VAT other miscellane		SF or LF)	<u>n</u>		Encapsulate	ure
(10)	Ye	s No	N/A		other misochane	ous)				te	
basement			\vdash_{\Box}	ashetos	s pipe insulation		110 If		П	П	П
		_	-	4000101	pipo modiation	'					
					1			Ш		Ш	Ц
								П		П	
Name of Registered Waste Hauler		1	NJDEP	Waste	Cubic Yards of	Name of Registe	r d Landfill		1-		
Guardian Contracting, Inc.			Hauler I	D No.	Waste	T.R.R.F.					
City, State			2022	3	2 Disposal Date	City, State					
Toms River, New Jersey					07/21/17	Tullytown, P	nnevlvania				
	T:#!-				C	Tallytown, P			- 1		
Completed By (Print or Type)	Title				Signature		Da	ate /	_ /		
Nicholas Fernicola	Proje	ct Mar	nager)	Teter		110	1/1	7	
ASB-41			his form	22 22		1		1	1		

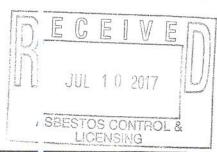
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

1	E	C			\mathbb{V}	E	M.
Y	,	JUL	1	0	2017		

Date of Notification	1 (1)		Name	of Buildin	ng Owner/Operator (2)		-	-	AS	BESTOS CO	MI	4()[Č	
6/30/17					Township Boar of	Educati	ion	- Services	,	LICENSI		. ~		
Agencies Notified	Type Notification		100000000000000000000000000000000000000	Address				4,4	The Park of the Pa	The state of the s			manus train	
⊠ EPA	☐ Initial		16 S	chool R	Road, P.O. Box 500)								
□ DEP			38	tate, Zip (7000		
⊠ DOL	Amendment # 1		Hibe	rnia, N.	J 07842									
	☐ Emergency (includin	g		of Contac				Telephon	Numbe	r .				
⊠ DOH	justification)		Doni	namari	e Palmiere									
□ DCA	☐ Cancelation													
Name of Facility Wh	ere Abatement is Taking Place (3)			F	ACILITY INFORMA							- Allino		
Catherine A. D						1022	of Facility (4)							
Street Address						×	School (K-1							
655 Mount Ho	ne Road						Subchapte	10						
033 Modificino	pe noad						Other (i.e.	private &	omme	rcial buildings, h	omes	etc.)	
City (5)						Squar	re Feet	# of Floor	-	Bldg. Age		-	_	
Wharton						61,5		2		46 yrs.				
County (6)				County	Code (7)		nt Use (Prior if b	eing demoli:	red)	140 yrs.				
Morris				(STATE	USE ONLY)	Scho			1.5					
Name of Monitoring	Firm Hired by Building Owner (8)				ASCM No.	Namo	of Abatement C							
Hillmann Consu	ulting, LLC				00023	1000000	orn Contrac	10.1.30.00.00.00.00.00.00						
Street Address	H. T. H.				100023		: Address	ung corp						
1600 route 22	East, Suite 107						Villow Way							
City, State, Zip Code	201, 00110 201								-					
Union, NJ 0708	23						tate, Zip Code	NII 0740						
Project Manager fo N				T-11-		100000000000000000000000000000000000000	dland Park,	NJ 0/42					_	
Craig Abrams	nomeoring rith			Telepho	588-7800		none No.			License No.				
Start Date (10)			[c.,				333-9176			01331			_	
June 22, 2017			1		letion Date (11)		of OSHA Monito							
	ring Abatement (Check Only One)		July 5	, 2017	in the same of the		rovision Con	sultants,	nc.					
	osed/Vacated During Entire Pe	riad of Ab	atomor				Address	n.l. nl.l.	25.5					
	it Performed Outside of Norm			IL		5000 000	1 Wagaraw I	Ra., Blag	35-E	-				
Other - De		ai Facility	Hours			and the	tate, Zip Code							
Scope of Work (Check						Fair	Lawn, NJ 07	410						
			1571		Yes			18.0						
≥ 25 51 01 ≥ 3			\boxtimes	Renova		×	Full Contain		Negat	ive Pressure				
2100 31 01	220011			Demol	ition		Mini-Enclose	50 S S S S S S S S S S S S S S S S S S S						
							Glovebag Pr							
							Non-Exempt	ted (*) an	Non-F	riable Procedure				
	Location of		Is Locatio Normally				2000 120						emen /pe	t
Asbestos	-Containing Material (ACM)	Us	ed Solely		Asbes		ription of ning Material (A	CM)		Amount		T	1	
	TO BE ABATED		aintenand		1: P-71/200000		ystems insulatio	1 67.05		(Specity		1	_	
	In Facility	Cu	stodial Sta (12)	aff?			ng, VAT, or			SF or LF)	B		incal	m
	(13)	Vos	1	NI/A		other mi	scellaneous)				Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A	****	CONTIN	LIATION CLU				val	air.	ate	лге
		-	_		TT-SEE (LONTIN	UATION SH	EEITTT			1			
		-									-	-		
- 1950 -		-									+	-		
ame of Registered W	Vasta Havilan				I	T						Ш		
				aste Haul	ler ID No.		ards of Waste			Name of Regustered				
Inicorn Contrac	ang corp.		00358	44		20+			-	Fairless Hills La	ndfill			_
ity, State	Now Jareau					Disposa	l Date			City, State				
Voodland Park,	ivem reiseA	1				TBD	Cianal C	1)		Morrisville, PA	_			
ompleted by		Title					Signature	1/ 1		111				
imo Golcev		Genera	al Mana	ager			///	11	4	,00		6/3	0/20	017
							LAA	101	-	/				

State of New Jersey Notification of Asbestos Abatement Continuation Sheet



			Over 18 Per		THE PERSON NAMED IN	*********	LILL	HOLE	70	
		Loca				Inches in the second			ement /pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	d Sole intena todial (12)	ely by ince/ Staff:	Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amc (Spe SF or	ify	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A							
Boiler Room	X			Pipe Fitting Insulation	140	_F	XX			
Boiler Room	Х			Boiler Breeching Insulation	300	3F	ХХ			
Boiler Room	X			Boiler Furnace Compartment Gaskets	336	.F	xx			
Boiler Room	Х			Boiler Furnace Door Insulation	12 8	F	XX			
Boiler Room	Х			Boiler Rib Gaskets	552	.F	XX			
	_									
							_	_		
		-	\dashv				-	-	-	-
	\dashv					-	-	_	_	-
	\dashv	-	-				-		-	_
	-		-			-	\dashv		-	-
	+	+	-			-	-	_	-	-
	+		\dashv			-	+	+	+	\dashv
	+		+			-	+	+	+	-
	+	+	+					-	+	-
	1	+	\dashv				1	+	+	-
						+	1	1		\exists
	-	-	-		THE RESERVE OF THE PARTY.	No. of Concession, Name of Street, or other	THE PERSON NAMED IN	THE OWNER OF TAXABLE PARTY.	AND DESCRIPTION	THE PERSON NAMED IN

CKSUISS Date of Notification (1)			CATION	ate of New OF ASB to NJAC PAL JOB f Building	ESTOS 8:60 an	ABATEN d 12:120)		A Commence of the party of the						
07/05/2017				ge SRC			(-)			L	JÜ	LI	0 2	017	-
Agencies Notified Type Notification			Street A	ddress ifth Aver	nue 18	th Floor			- Section 1	AGE	REST	TOS (ON	TDO	1 8.
X EPA Initial DEP X Amended X DOL Amendment #	ŧ 4		City, Sta	ate, Zip Co ork, NY	ode							ICEN			L. OL
Emergency (in justification) DCA Emergency (in justification) Cancellation	ncluding			f Contact					T	elepho	ne Nu	ımher	§2		_
			FACI	LITY INFO	ORMATI	ON							_		
Name of Facility Where Abatement is Taking Sears Store Unit#1434	Place (3	3)					lanes.	of Facility	-0000						
Street Address 50 Route 46							×	School (K- Subchapte Other (i.e.	r 8 ((dings,	home	es,
City (5) Wayne								etc.) are Feet 100		of Floo	ors	1777	lldg. <i>F</i>	\ge	
County (6) Passaic			County (Code (7) USE ONLY)			ent Use (Pri	or if	eing de	emolis	shed)			
Name of Monitoring Firm Hired by Building O Omega Environmental Services	wner (8)		ASCN 0012					atement Co							
Street Address 280 Huyler Street			00.1			Street A	Addre			-	2				
City, State, Zip Code South Hackensack, NJ 07606						City, St	ate, Z	Zip Code							
Project Manager for Monitoring Firm			Telepho	ne No		Telepho		•			ense N	No.			
Veronica Kero			100	39-8700		718-3				17 1000	8675				
	Schedule 12/16/2		npletion	Date (11)		Name o Martir		HA Monitor Rea							
Occupancy Status During Abatement (Check	Only Or	ne)				Street A		THE RESERVE AND							
Facility Closed/Vacated During Entire Po Abatement Performed Outside of Norma Other – Describe:						City, St	ate, Z	edy Blvd.	_						
Scope of Work (Check All That Apply)						вауо	nne,	NJ 0700							
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=	Is	Locat	ion				110	III EXCITIBIO	4//	ind Hor	i i iiui		Abate	ement	
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In Facility (13)	Cust	(12)		(surfa	cing, VAT	Γ, or			SF or L		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A											e	
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1st Floor Add 912SF		X				eproofin			_	,627 5	ALC:	X			
1st Floor Add 65LF Name of Registered Waste Hauler		X	JDEP W	laste	Pipe	Insulat	ion	Name of		200 LI		X			
ATC		+	lauler ID 4310		of Was	ste		Minerva							
City, State Shirley, NY 11967					Dispos 04/10	al Date /2017/	1	City, Stat Vayne		g, OH	446	888			
Completed by Ann A. Ali	Title Com	oliano	ce Adm	in	S	ignature	7	X .				ate 7/06/2	2017		

* Do not use this form for asb stos licensure exempted activities.

Print Form

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) PAL JOB# 17-1119 Date of Notification (1) Name of Building Owner/Operator (2)														G [] [/ E	1 1 1
	e of Notification (1) /22/2017					Name of		Owner/C	perator		and the same of th	Name of the last	J	UL	1 0	20	17	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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X	DOH DCA	Emergence justification	y (incl		_	The second of the second	Contact	10011				T	lephone	Num	ner			
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	ne of Facility Where a ars Store Unit#1		ing Pl	lace (3))					Тур	school (K-		***************************************					
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	ne of Monitoring Firm nega Environme		g Owr	ner (8)		ASCM 0012					patement Co							
	eet Address 0 Huyler Street								Street 11-0		ress ueens Plaz	za So	uth					
	, State, Zip Code outh Hackensack	, NJ 07606									Zip Code and City, N	IY 1	101					
	ject Manager for Mor	nitoring Firm				Telephor	ne No. 89-8700	14	Teleph	none			Licer	se No				
	rt Date (10) /05/2017			hedule 2/16/2		mpletion I	Date (11)			7	SHA Monitor							
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	npleted by n A. Ali			Title Comp	oliano	ce Adm	in	S	Signature	1	#			Date 06/		017	181	

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) 07 / 17 Borough of New Providence .1111 1 0 2017 Agencies Notified Type Notification Street Address **⊠** EPA ☐ Initial 360 Elkwood Avenue ASBESTOS CONTROL & **⊠** DOLWD ☐ Amended City, State, Zip Code **⊠** DOH Amendment # New Providence, NJ 07974 ☐ DCA Name of Contact Tel phone Number (NJAC 5:23-8) justification) ☐ Cancellation Margaret Koontz FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Commercial School (K-12) ☐ Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 43 Division Avenue homes, etc.) City (5) Square Feet # f Floors Bldg. Age **New Providence** County (6) County Code (7)(STATE USE ONLY) | Current Use (Prior if I sing demolished) Union Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) **Bio Terra Solutions** ALL PRO MANAGEMENT LLC Street Address Street Address P.O. Box 1224 27 Outwater Lane City, State, Zip Code City, State, Zip Code Union, NJ Garfield, NJ 07026 Project Manager for Monitoring Firm Telephone No. Telephone No. Li ense No. Rick Eustaquio 973-494-3762 973-928-4888 188 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 07 / 08 / 17 07 / 15 / 17 ALL PRO MANAGEMENT LLC Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 27 Outwater Lane Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-_ PM/ PM- AM Garfield, NJ 07026 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ≥3 sf or ≥3 lf ☐ Renovation Mini-Enclosure ≥160 sf or ≥260 lf □ Demolition ☐ Glovebag Procedure Non-Exempted (*) and Non-Friz ble Procedure Is Location Abatement Type Normally Location of Description 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 F or LF) (12)(13)other miscellaneous) Yes No N/A Throughout П X RACM X П П Name of Registered Waste Hauler NJDFP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste **Newark Carting** Blueridge Land fill 04509 As Needed City, State Disposal Date City, State Newark, NJ TBD Chamberburg, PA Completed By (Print or Type) Signature Date Allen Monchik Project Manager

D&S Proj. #: 17-180

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

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Agencies Notified Type Notifica	Street Address					1100.100			
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	F	ACILITY INFORM	ATION						
Name of facility where abatement	is taking place (3)			Type of					
harry young						I (K - 12)	h 1/	40)	
Street Address				1		apter 8 (Other t Private/Comme		12)	
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City (5)	County (6)		County Code (7)						
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summit Name of Monitoring Firm Hired by	UNION		Name of Abateme		(O)				
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City, State, Zip Code			City, State, Zip Co	de					
			Paterson, NJ						
Project Manager for Monitoring Firm	m Phone Nu	ımber	Telephone Number			License Numb			
			973-345-80			01169			
Start Date (10)	Sched. Completion Date	(11)	Name of OSHA M						
07/11/1717	07/00/17		D & S Restor	ration, Inc.					
07/11/1717 Occupancy Status During Abateme	07/28/17		Street Address						
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Facility closed/vacated during Abatement performed outside			City, State, Zip Co	ode					
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≥160 sf or ≥260 lf	Demolition			Glovebag		e and Non-friable	nroce	dure	
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abated in facility (13)	Yes No N/	A		LF)	V	i	р	L
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D & S RESTORATION, INC.	NJDEP Hauler ID# 13506	Cubic Yards of V	Vaste Name of Registe TULLYTOW		CEDE	COVERV			
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PATERSON, NJ 07503	07/1		TULLYTOW	N. PA					
Completed by (Print or Type)	Title	Signature		,		Date			
BOGDAN JOLDZIC	PRESIDENT					06/30/2017			
ASB-41	* Do not use this form for asb	estos licensure exe	empted activities.			L			-

State of NJ Notification of Asbestos Abatement

2017-87 (Pursuant to NJAC 8:60-7 and 12:120-7) B & G proj. #: Check # 8473 Date of Notification (1) Name of Building Owner/Operator (2) 0 7 / 0 7 / 1 7 | Peter Sondervan Agencies Notified Type Notification Street Address EPA Initial JIII ☐ DEP City, State, Zip Code Amendment X DOL Oakland, NJ 07436 elephone Number NSING X DOH Name of Contact Cancellation ☐ DCA Peter Sondervan **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Peter Sondervan Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. Bldg. Age # of Floors Square Feet County (6) City (5) County Code (7) (State use only) Currer: Use (Prior if being demolished) Oakland, NJ 07436 Bergen Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contracto (9) ASCM No. n/a B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number License Number Project Manager for Monitoring Firm Phone Number (973)696-6869 00378 Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) B & G Restoration, Inc. 07/19/2017 07/20/2017 Street Address

Occupancy Status During Abatem	nent (Check o	nly one)			105 Ryerson Roa	ad					
Facility closed/vacated during Abatement performed outsing Describe:					City, State, Zip Code						
Other-Describe:					Lincoln Park, NJ	0703					
Scope of Work (check all that ap	ply)				1.00						
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abated in facility (13)	Illatellal to be			material (AOM)		i		o v e	i	a p	L
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City, State			Disposal Da	ate 1/2017	City, State Tullytown P	A			1-10-00		

Signature

Gordana Luna

07/07/2017

Completed by (Print or Type)

Gordana Luna

Title

Secretary/Treasurer

State of NJ Notification of Asbestos Abatement

B & G proj. #: 2017-84

(Pursuant to NJAC 8:60-7 and 12:120-7)

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Date of Notification (1)			Name o	of Build	ina Ow	ner/Operator (2	2)	dun - inches de la secono dela secono de la secono dela secono de la secono dela secono dela secono dela secono dela secono de la secono dela secono de la secono de la secono dela secono de la secono de la secono de la secono de la secono dela secono de la secono de la secono de la secono dela seconomica dela secono dela secono dela secono dela secono dela sec	p.,						
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Street Address								Street Address 105 Ryerson R	lood						
City, State, Zip Code							_	City, State, Zip Code	luau	Recognitions	***************************************				-
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Project Manager for Monitor	ring Firm			Phone	Numi	per		Telephone Number			Licen	se Num	ber		
								(973)696-686				00378			
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07/18/2017		07/	19/201	7				Street Address	1011, 1110.	_		-			
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B & G Restoration, Inc City, State). 		19563	In:a-	00015	2		Tullytown F	Resourc	2 & Re	ecoven	y Cen	er		
Lincoln Park, NJ				Disp	osal D 07/1	ate 9/2017		City, State Tullytown, F	PA						
Completed by (Print or Type)						Signature		<u> </u>			Date				
Gordana Luna	Se	creta	ry/Trea	surer				Gordana Luna			07/0	7/201	7		

State of NJ Notification of Asbestos Abatement

2017-83 (Pursuant to NJAC 8:60-7 and 12:120-7) B & G proj. #: Check # 8471 Date of Notification (1) Name of Building Owner/Operator (2) 10 17 1/10 17 1/11 17 1 Gary Schmid Agencies Notified Type Notification Street Address ☐ EPA Initial DEP City, State, Zip Code X DOL Amendment Pompton Lakes, NJ 07444 X DOH Name of Contact elephone Number ASBESTOS CONTROL & Cancellation □ DCA Gary Schmid **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type o Facility (4) School (K - 12) Gary Schmid Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. Square Feet Bldg. Age # of Floors City (5) County (6) County Code (7) (State use only) Currer t Use (Prior if being demolished) Pompton Lakes, NJ 07444 Passaic resid intial Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contracto ASCM No. n/a B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 0703 5 Project Manager for Monitoring Firm Phone Number Telephone Number License Number (973)696-6869 00378 Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) B & G Restoration, Inc. 07/18/2017 07/19/2017 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Lincoln Park, NJ 07035 Other-Describe: Scope of Work (check all that apply) Demolition X Renovation Full Containment w/negative pres sure ✗ Glovebag procedure \times >3 sf or >3 if ≥160 sf or ≥260 lf Mini-enclosure Non-friable procedure Is location normally used solely Location of E Ε by maintenance/custodial asbestos-containing e A rount n Description of asbestos-containing staff(12) m n material to be p C (5 pecify SF or material (ACM) 0 abated in facility (13) a a Yes No N/A V р crawl space pipe insulation 10 X

Cubic Yards of Waste

1/2

Signature

Disposal Date

07/19/2017

Name of Registered Landfill

Tullytown, PA

Gordana Luna

Tullytown Resourc : & Recovery Center

Date

07/07/2017

Registered Waste Hauler

Lincoln Park, NJ

Gordana Luna

City, State

B & G Restoration, Inc.

Completed by (Print or Type)

NJDEP Hauler ID#

19563

Secretary/Treasurer

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

2017-82 B & G proj. #: Check # 8474 Date of Notification (1) Name of Building Owner/Operator (2) 10 17 1/10 17 1/11 17 1 Russell Adams Agencies Notified Type Notification Street Address ☐ EPA Initial DEP City, State, Zip Code JUL ZUII X DOL Amendment Randolph, NJ 07869 X DOH Name of Contact Telephones Number CONTROL & Cancellation LICENSING ☐ DCA Russell Adams **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type (Facility (4) School (K - 12) Russell Adams] Subchapter 8 (Other than K-12) Street Address [] Other (Private/Commercial Bldgs./Homes, etc. Squa : Feet # of Floors Bldg. Age City (5) County (6) County Code (7) (State use only) Curre it Use (Prior if being demolished) Randolph, NJ 07869 Morris Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contract r (9) ASCM No. n/a B & G Restoration, Inc Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 070 15 Project Manager for Monitoring Firm Phone Number Telephone Number License Number (973)696-6869 00378 Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) B & G Restoration, Inc 07/17/2017 07/18/2017 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Lincoln Park, NJ 0703 Other-Describe: Scope of Work (check all that apply) ☐ Demolition |X | Renovation ☐ Full Containment w/negative pre sure Glovebag procedure >3 sf or >3 If ≥160 sf or ≥260 lf X Mini-enclosure Non-friable procedure Is location normally used solely Location of E by maintenance/custodial E asbestos-containing e / mount n Description of asbestos-containing staff(12) n m material to be p C ipecify SF or material (ACM) C abated in facility (13) a a Yes No N/A p basement pipe (wrap & cut) X 1(4 lf Registered Waste Hauler NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill B & G Restoration, Inc. 19563 Tullytown Resource & Recovery Center City, State Disposal Date City, State Lincoln Park, NJ 07/18/2017 Tullytown, PA Completed by (Print or Type) Signature Ciordana Luna Gordana Luna Secretary/Treasurer 07/07/2017

State of NJ Notification of Asbestos Abatement Pursuant to NJAC 8:60-7 and 12:120-7

2017-81B (Pursuant to NJAC 8:60-7 and 12:120-7) B & G proj. #: *** Sub 8 *** Check # 8475 Date of Notification (1) Name of Building Owner/Operator (2) 10 17 1/10 17 1/11 17 1 Wood-Ridge Board of Education Agencies Notified Type Notification Street Address ☐ EPA 540 Windsor Road X Initial DEP City, State, Zip Code Amendment X DOL Wood-Ridge, NJ 07075 X DOH Name of Contact Felephone Numbers CONTROL Cancellation ☐ DCA Peter Catania **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type o Facility (4) School (K - 12) Wood-Ridge High School (Sub 8) Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. 258 Hackensack Street Squar Feet | # of Floors Bldg. Age City (5) County (6) County Code (7) (State use only) Curre t Use (Prior if being demolished) Wood-Ridge, NJ 07075 Bergen Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contract('(9) ASCM No. EnviroVision Consultants 0079 B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road 20-21 Wagaraw Road, Bldg. 35E City, State, Zip Code City, State, Zip Code Fair Lawn, NJ 07410 Lincoln Park, NJ 070: 5 Project Manager for Monitoring Firm Phone Number Telephone Number License Number (973)696-6869 00378 Willie Morales 973-949-3523 Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) B & G Restoration, Inc 07/21/2017 07/23/2017 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: LincolnPark, NJ 07035 Other-Describe: Scope of Work (check all that apply) ☐ Demolition X Renovation Full Containment w/negative pre sure Glovebag procedure X >3 sf or >3 If ≥160 sf or ≥260 lf Mini-enclosure Non-friable procedure Is location normally used solely Location of E by maintenance/custodial e е asbestos-containing n A nount Description of asbestos-containing n m staff(12) p C material to be (pecify SF or material (ACM) C 0 a a abated in facility (13) Yes No N/A D Rooms 207, 208, 209, 226, ceiling & wall plaster 38 sf X 228, hallway, Nurses ofc & bathroom Registered Waste Hauler Cubic Yards of Waste Name of Registered Landfill NJDEP Hauler ID# B & G Restoration, Inc. 19563 Tullytown Resource & Recovery Center Disposal Date City, State

07/24/2017

Secretary/Treasurer

Signature

Tullytown, PA

Gordana Luna

Date

07/07/2017

Lincoln Park, NJ

Gordana Luna

Completed by (Print or Type)

2017-81A B & G proj. #:

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

*** NON Sub 8 *** Check # 8468 Date of Notification (1) Name of Building Owner/Operator (2) 10 17 1/10 17 1/11 17 1 Wood-Ridge Board of Education Agencies Notified Type Notification Street Address ☐ EPA 540 Windsor Road X Initial DEP City, State, Zip Code X DOL Amendment Wood-Ridge, NJ 07075 X DOH Name of Contact Telephone Númber CONTHOL & Cancellation LICENSING ☐ DCA Peter Catania **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type (Facility (4) School (K - 12) Wood-Ridge High School (Non-sub 8)] Subchapter 8 (Other than K-12) Street Address [] Other (Private/Commercial Bldgs./Homes, etc. 258 Hackensack Street Squa : Feet | # of Floors Bldg. Age City (5) County (6) County Code (7) (State use only) Curre it Use (Prior if being demolished) Wood-Ridge, NJ 07075 Bergen Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Abatement Contract r (9) EnviroVision Consultants 0079 B & G Restoration, Inc Street Address Street Address 20-21 Wagaraw Road., Bldg. 35E 105 Ryerson Road City, State, Zip Code City, State, Zip Code Fair Lawn, NJ 07410 Lincoln Park, NJ 070 5 Project Manager for Monitoring Firm Phone Number Telephone Number License Number Willie Morales 973-949-3523 (973)696-6869 00378 Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) B & G Restoration, Inc 07/17/2017 07/19/2017 Street Address Occupancy Status During Abatement (Check only one) 105 Ryerson Road Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: LincolnPark, NJ 07035 Other-Describe: Scope of Work (check all that apply) Demolition X Renovation Full Containment w/negative pre sure Glovebag procedure >3 sf or >3 if ≥160 sf or ≥260 lf ✗ Mini-enclosure Non-friable procedure Is location normally used solely Location of by maintenance/custodial E asbestos-containing e e n A nount Description of asbestos-containing staff(12) n m material to be p C material (ACM) (pecify SF or C abated in facility (13) 0 a Yes No N/A V various locations ceiling & wall plaster X Registered Waste Hauler NJDEP Hauler ID# 19563 Cubic Yards of Waste Name of Registered Landfill B & G Restoration, Inc. Tullytown Resourc 3 & Recovery Center City, State Disposal Date Lincoln Park, NJ 07/20/2017 Tullytown, PA Completed by (Print or Type) Signature Gordana Luna Gordana Luna Secretary/Treasurer 07/07/2017

Ch 2115	Z	The second second	1), [5]	C	E		$\overline{\mathbb{V}}$									
Date of Notification (1)					Nam	e of Buildin	g Owner/Operator ((2)	XX 55 - 10 (N - 45 - 1	14		JUL	1	0 2	017	
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Agencies Notified	Type Notific	ation			Stree	t Address				-	ASBE	STO	90	ON	ייכויד) D
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☑ DOLWD	☐ Amended				City,	State, Zip (Code				- more to research and	Marie Carre	erom dumo	of the second second		-
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2	☐ Cancella				Ed	Oczkows	ski									
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Name of Facility Where A	Abatement is 7	Taking	Place	(3)			Orang trion	T	pe of Facility	(4)	-		77.2			_
Commercial				1.1					School (K-12	*****						
Street Address		-						$+\Box$	Subchapter 8	(Oth						
1840 Peter Cheesm	an Road								Other (i.e., p. homes, etc.)		ind comm	nercia	buil	ding	5,	
City (5)			-					Sc	quare Feet	()	Floors		Bld	g. Ag	e	
Blackwood									1	" '				9.7.8	_	
County (6)					Cou	ntv Code (7)(STATE USE ONLY)	CI	urrent Use (Pri	or if b	ing dem	olished	4)	ALL ST		-
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Name of Monitoring Firm	Hired by Build	dina O	wner (8)	ASCM	No	Name of Abateme									-
Bio Terra Solutions				-,		5995	ALL PRO MA			I C						
Street Address				-			Street Address		TOLINEIVI E							
P.O. Box 1224							27 Outwater	l at	ne							- 1
City, State, Zip Code		-					City, State, Zip Co									
Union, NJ																
Project Manager for Moni	itorina Firm			Tel	ephone	No	Garfield, NJ (0,0		Lie	ense No.					_
Rick Eustaquio					73-494		973-928-4888	R			188					
Start Date (10)	15	Schedi	iled Co			ate (11)	Name of OSHA M		itor		100			_		
07 / _17_ /				70.	7 /		ALL PRO MA			l C						
Occupancy Status During							Street Address	1117	OLINILITY L		0		_			
□ Facility Closed/Vacate	200				amont											- 1
☐ Abatement Performed	Outside of No	ormal	Facility	Hou	ırs - De	scribe	27 Outwater	37.00					50			
Time of Abatement: _	AM	PN	1/	_PN	1	_AM	City, State, Zip Co									
Scope of Work (Check all	I that apply)			-			Garfield, NJ	070	26							_
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(13)	37.0	-		(12		-	other miscellane						-		Encapsulate	G.
1st Floor			Yes	No	-											
						-	at Plaster Walls				92 SF	-		Ш		
1st Floor Cooridor						Top Co	at Plaster Walls	5		2	568 SF					
2 nd Floor						Top Co		92 SF								
3 rd Floor						Top Co	at Plaster Walls	5			92 SF		\boxtimes			
Name of Registered Was				- 10	NJDEP		Cubic Yards of	1	Name of Regis	tered	_andfill		-010			
ATC/ Century Wast	e LLC				Hauler I SW-243	D No. 10/ 32797	Waste As Needed	1	Minerva Enterp	orises/	IESI Beth	nlehem	ı Lar	ndfill		
City, State							Disposal Date	_	City, State		-				7	
Shirley, NY/ Elizabe	eth, NJ						TBD		Waynesbu	rg, C	1/ Beth	lehen	n, P	A r		
Completed By (Print or Ty	ype)	Title					Signature	1	,			Date	1	-1	7	-
Allen Monchik		Pr	roiect	Mai	nager		1 (0)	J.	11			7	11)	7/1	1	1

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Date of Notification (1)					Name	of Buildin	g Owner/Operator ((2)	1111	JUL	10	201	7	11
07/	07 /	17	_				Keansburg	-)				·		
Agencies Notified	Type Notific	ation	3-1-7/25		Street	Address			1	SBEST			OL	Ĉt
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					FA	CILITY IN	IFORMATION		¥					
Name of Facility Where A	batement is	Taking	Place	(3)				Type of Facilit	ty (4)					
Residential								School (K-			46)			
Street Address								☐ Subchapte ☐ Other (i.e., homes, etc.)	private			ilding	s,	
City (5)								Square Feet	-	Floors	RI	dg. A	ne er	
Keansburg								Oquale 1 col	"	1 10013		ug. A	ge	
County (6)			-		Cour	tv Code (7)(STATE USE ONLY)	Current Use (Prior if h	ing demo	olichod)	-		
Monmouth					000.	i, 0000 (i	(OTTILE GOL ONLY)	Schedule			Jilsi ieu)			
Name of Monitoring Firm	Hired by Build	dina O	wner ((8) T	ASCM	No	Name of Abateme			Olition				-
Bio Terra Solutions		- 3		-	0615		ALL PRO MA	12.7	885					
Street Address		-					Street Address	MACLINERY						-
P.O. Box 1224							27 Outwater	l ane						.
City, State, Zip Code				Hermelik.			City, State, Zip Co			-				-
Union, NJ							Garfield, NJ							
Project Manager for Monit	torina Firm			Tele	phone	No.	Telephone No.	71020	Lie	ense No.				-
Rick Eustaquio	.o.m.g r min			1	3-494		973-928-4888	В		188				
Start Date (10)	15	Sched	ıled C		tion Da		Name of OSHA M			100				\dashv
07/17/					/		ALL PRO MA		LLC					
Occupancy Status During			1000				Street Address			//				_
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Time of Abatement:	AM	PN	1/	_PM-		AM	City, State, Zip Co Garfield, NJ (- 1
Scope of Work (Check all	that apply)				*****		Garneid, No	77020						-
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Asbestos-Containing N TO BE ABA		1)		d Sole intena			stos Containing Ma			mount	Removal	Repair	inc.	Enclosure
IN Facilit				todial		(i.e	., thermal systems surfacing, VAT			Specify or LF)	SVOI	air	apsi	uso
(13)			Yes	(12) No	N/A		other miscellane			0. 2.)	-		Encapsulate	ē
Exterior Siding					×	Transite	e Siding Shingle	es	1	500 SF		П	П	
Roof						Roof Ta			1	35 SF				귀
2 nd Bedroom & Kitche	n .					VAT			+-					긤
Touroun a rationa						VAI			+	20 SF				
Name of Registered Wast	a Hauler		ш		JDEP \	Mosto	Cubia Varda of	Mama of Da				ш		ш
ATC/ Century Waste				H	auler II	No.	Cubic Yards of Waste	Name of Reg						
City, State				sv	V-24310/ 3	2797	As Needed	Minerva Ente	erprises/	ESI Beth	lehem La	ndfill		
Shirley, NY/ Elizabe	th, NJ						Disposal Date TBD	City, State Waynest	oura. O	1/ Bethl	ehem F	ΡΑ		
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Allen Monchik	F =/	DESCRIBE	oject	Man	ager		Signature	12-1-			Date	7/1		

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Date of Notification (1)	1				Name	of Buildin	g Owner/Operator (2)			1 1	UL	10	20	17
07 /	07 /	17					Keansburg	/-			1	-			
Agencies Notified	Type Notifica	ation		-	Street	Address				-	ASBES	TO	2.00	70177	3/31/0
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Name of Facility Where A	Abatement is T	aking	Place	(3)	17.	OILIT I III	i Oran Tiola	Type of	Facility (4)		-		_		-
Residential		0		1-7					ool (K-12)						
Street Address								☐ Sub	chapter 8 (Othe	than K-12)	4.55			
									er (i.e., priv nes, etc.)	ate :	nd commerc	cial bu	ilding	js,	
City (5)		-						Square		# 0	Floors	B	dg. A	ae	-
Keansburg														J -	
County (6)					Cour	ty Code (7)(STATE USE ONLY)	Current	Use (Prior	if be	ng demolish	ned)			-
Monmouth								100000000000000000000000000000000000000	dule for		and the second second second second				
Name of Monitoring Firm	Hired by Build	ding Ov	vner (8	8)	ASCM	No.	Name of Abateme	ent Contr	actor (9)						
Bio Terra Solutions					0615	995	ALL PRO MA	NAGEN	MENT LLC	0					
Street Address							Street Address				X 		/////////////////////////////////////		
P.O. Box 1224							27 Outwater	Lane							
City, State, Zip Code							City, State, Zip Co	ode							
Union, NJ							Garfield, NJ	07026							
Project Manager for Moni	toring Firm			1800	phone		Telephone No.				nse No.				
Rick Eustaquio				0.78	73-494		973-928-4888			1	188				
Start Date (10)07 /17 /				7.5	tion Da	100	Name of OSHA M		MENTILO						
Occupancy Status During		. 30					Street Address			_			1.50-		_
□ Facility Closed/Vacate					ment		27 Outwater	lane							
☐ Abatement Performed	Outside of No	ormal F	acility	Hour	s - Des	cribe	City, State, Zip Co				•		-	-	-
Time of Abatement: _	AM	PM		_PM-		AM	Garfield, NJ								
Scope of Work (Check all	that apply)										-				-
☐ >3 sf or >3 if			Rer	201104	00		Full Con		with Negat	ive I	ressure				
≥160 sf or ≥260 if			☑ Rei				☐ Mini-End ☐ Gloveba		ure						
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IN Facilit	.y		Oust	(12)	Otun:		surfacing, VAT other miscellane			S	or LF)	l'al		Encapsulate	ure
			Yes	No	N/A									te	
Roof above porch					\boxtimes	Rolled	Asphaltic roofin	g		1	80 SF				
Roof above porch						Roof Ta	ır				5 SF				
Exterior					\boxtimes	Transit	e Siding Shingle	s		1	50 SF	\boxtimes			
Name of Registered Was				1.00	JDEP !		Cubic Yards of	Name	of Registe	red	andfill	1			
ATC/ Century Wast	e LLC				lauler II SW-243	O No. 10/32797	Waste As Needed	Miner	va Enterpris	ses/	ESI Bethleh	em La	andfill	I	
City, State							Disposal Date	City, S							\neg
Shirley, NY/ Elizabe	th, NJ						TBD	Wa	ynesburg	, O	I/ Bethleh	em, I	PA,		
Completed By (Print or Ty	/pe)	Title					Signature	1	٨		Da	te/	1		
Allen Monchik		Pro	oiect	Man	ager		1 (9/10)	1		_	-	7/-	11	7	

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



Date of Notification (1)			-	Na	me (of Building	g Owner/Operator ((2)	FIRE	1 7	n (D C	
	/ _1	7					5.	of Design and Co	struction	E		\mathbb{W}	E,
Agencies Notified Type N ☐ EPA ☐ Initi	lotification al			and the same of		Address Elm Driv	40			1	Λ	004-	1
☑ DOLWD ☐ Am	ended					ate, Zip C			1 H 10	_ 1	U	2017	
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	ification)			19				1.1	lephone Numb	erm	ICHA.	10_	
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				F	AC	ILITY IN	FORMATION						
Name of Facility Where Abateme		g Place	e (3)					Type of Facility (4)					
Princeton University- Fine	Hall							School (K-12)					
Street Address Washington Road								Subchapter 8 (C Other (i.e., priva homes, etc.)	e and commerce	ial bu	uildin	gs,	
City (5)	-								of Floors	T DI	dg. A	20	
Princeton											ug. A	ige	
County (6) MERCER				Co	ounty	y Code (7)(STATE USE ONLY)	Current Use (Prior i	being demolish	ned)			
Name of Monitoring Firm Hired by	Building	Owner	(8)	ASC	MN	lo.	Name of Abateme	ent Contractor (9)					Market 1
ATC Group Services LLC	•							VIRONMENTAL, I	IC				
Street Address				1			Street Address	THOMEST TAL, I					
Bromley Corporate Center	-Three T	erri La	ane				1123 BEAVE	RSTREET					
City, State, Zip Code					-		City, State, Zip Co		C-	_			
Burlington, NJ 08016							BRISTOL, PA						
Project Manager for Monitoring Fi	rm		To	elephor	no Ni	0	Telephone No.	(13007	Inner No	***			
Michael Keehn	,			609-3		900-000-00	215-788-6040		icense No.				
Start Date (10)	Scher	duled C					Name of OSHA M		00509				
		7 /				(0.00)			IC				
			200	-1 '		17		VIRONMENTAL, I	IC.				
Occupancy Status During Abatem Facility Closed/Vacated During							Street Address						
□ Pacinty Closed/Vacated During □ Abatement Performed Outside	of Norma	Facilit	Abat	ement	0000	ribo	1123 BEAVER		<u> </u>				
Time of Abatement: 7:00AM-3	3:30PM/	P	y 110 M-	uis - D	M	ibe	City, State, Zip Co						
Scope of Work (Check all that app			_				BRISTOL, PA	19007	× <u></u>				
☐ ≥3 sf or >3 If	oly)	⊠ Re	nova	ation			☐ Full Cont	ainment with Negativ	Pressure				
⊠ ≥160 sf or ≥260 lf		☐ De	moli	tion			☐ Glovebag	Procedure mpted (*) and Non-Fi	able Procedure	;			
				ation					_	Ab	atem	ent T	ype
Location of			Norm	nally olely by	,		Description of			-	-		
Asbestos-Containing Material (TO BE ABATED	(ACM)			nance/		Asbes	stos Containing Mar , thermal systems i	terial (ACM)	Amount	Remova	Repair	Encapsulate	Enclosure
IN Facility		Cus		I Staff	?	(1.6.	surfacing, VAT,	or	(Specify SF or LF)	ova	₹.	psu	Sur
(13)			(12	<u> </u>	\perp		other miscellaned		,	_		late	(i)
Room 202,203,204,205A,302,	304A	Yes	No.	D N/.	-	Floor tile	Δ		350 SF				
304 and 303(44 SF per room)					Η.	1001 111			330 31				
		П							8		П	П	
Name of Registered Waste Hauler				NJDE	P W	aste	Cubic Yards of	Name of Registere	Landfill		Ш		
BRISTOL ENVIRONMENTA				Hauler 187	IDI		Waste	G.R.O.W.S. NO		ILL			
City, State					-		Disposal Date	City, State	-	-			
BRISTOL, PA 19007								MORRISVILLE	PA 19067				
Completed By (Print or Type)	Title	9		100			Signature		Date	9			
Brian Scafiro	Е	stimat	tor				Bring	Scolino 1	gr	7-	7 -	-1-	7

Ch 523	8			ICATIO	N OF ASE t to NJAC	BESTOS	ABATE		- Brownson) E C] [V 6	
Date of Notification (1)					of Building				the same	1 30	1				711
07/03/2017 Agencies Notified	Tuna Matification				Orange	Board	of Edu	ucatio	on		1	1 (20	17	
	Type Notification			***************************************	Address Eagle Ro	nck Ave	1								
EPA DEP	X Initial Amended		+		ate, Zip Ci		•			_	ASBEST	OSC	ONI	ROI	<u>_</u>
X DOL	Amendment a				Orange		052			***	L	CENS	HNG	1102	u
IX DOH	Emergency (i justification)	ncluding	H		of Contact					T	elenhone N	umber			
▼ DCA	Cancellation			Robe	rt Csigi										
Name of Facility Where Ab	atomont in Tabia	Diana /		FAC	ILITY INF	ORMAT	ION	-							
West Orange High S		Place (3	5)						of Facility (4						
Street Address	011001								School (K-12 Subchapter 8		her than K	12\			
51 Conforti Ave									Other (i.e. pr				ldings	, hom	es,
City (5)								Saus	etc.) are Feet	T	of Floors		3ldg. /	Age	
West Orange								200		:	01110013	100	50+	-ige	
County (6)					Code (7)				ent Use (Prior	if	eing demoli	shed)			
Essex	ti de Barro	(0)			USE ONLY		_		ıcational						
Name of Monitoring Firm H Ahera Consultants In		wner (8)		ASCN 0057			A CONTRACTOR OF THE PARTY OF		atement Cont Diagnostic I						
Street Address				1000				Addre					-		-
PO BOX 385							16 G	lenw	ild Ave						
City, State, Zip Code									ip Code	- VA-10			***************************************		
Oceanville, NJ 08231									dale, NJ 07	74(3				
Project Manager for Monitor John Smoyer	oring Firm			Telepho	ne No. 52 1833		Teleph				License	No.			
Start Date (10)		Schodule	nd Con		Date (11)			928 3	HA Monitor		01181				
07/21/2017		07/23/2		pielion	Date (11)	1			na Monitor Diagnostic L	1 (
Occupancy Status During A							Street								
X Facility Closed/Vacate	ed Durina Entire Pe	eriod of A	Abatem	nent			16 G	lenwi	ild Ave						
Abatement Performed	Outside of Norma	l Facility	Hours				City, S	tate, Z	ip Code			nisalishi.	11000	110,33	
Other – Describe:						_	Bloo	ming	dale, NJ 07	74(3				
Scope of Work (Check All 7	That Apply)						_	-							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	enova emolit				-		II Containmer	nt w	th Negative	Pressu	ire		
			CITIOIL	1011			×	Glo	ni-Enclosure ovebag Proce						
		T			Ι			J No	n-Exempted	(*)	nd Non-Fria	ble Pro			
4			Locati Iormall											ement /pe	
Location of Asbestos-Containing M		Use	d Solel	ly by	Ashes	Des tos Cont	scription aining M		L(ACM)		Amount		T		
TO BE ABAT	ED	11.1522.533	ntenar odial S			thermal	systems	s insula			Specify	Re	R	Enca	En
In Facility (13)		300000000	(12)				cing, VA				iF or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A								20		late	Ire
Mechanical Rm Close	et - Rm 1133		X		Н	lard fitt	ina ins	ulatio	on	_	21If	X			
										-					
					107				_						
Name of Registered Waste	E000000		13000	JDEP W auler ID		Cubic of Was			Name of Re	egi	ered Landfi	II	1		
Hazmat Diagnostic LL	С		10.00	35440		TBD	ite		GROWS						
City, State							al Date		City, State	100					
Bloomingdale, NJ						TBD			Morrisvil	e,F					
Completed by Tatiana Rotaru		Title Admi	nietro	tive Ac	ssistant	S	ignature ₍	D	11/1	-	1	ate 17/03/	2017		
. Guaria i total u		Aum	noud	uve As	ooiotalli		-	TC	rufte	R	7	1103/	201/		