CK1201

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

12/		NO			ON		BES	TOS ABAT			匠 (C			V
Date of Notification (1) 07 /	11 /	18		- 1				ner/Operator (Property, LI	659	A COCK STREET OF THE STREET OF	J	IJL	13	3 2	018
Agencies Notified ☑ EPA ☑ DOLWD	Type Notifica ☑ Initial ☐ Amended			8	BO Ei	Address ighth Av ate, Zip C		e, Suite 160	2		SBES	TOS	507	7617	
☑ DOH ☐ DCA	Amendm		na			York, N		011				LICE	ENS	ING	
(NJAC 5:23-8)	justification Cancellate	on)		0.000		of Contact hew Dicl				Telephone N 212-966-6					
				F	FACI	ILITY IN	FOR	MATION				_			\dashv
Name of Facility Where A Commercial Street Address 1051 Edward Stree		Γaking Pla	ce (3)						Type of Facility ☐ School (K-12 ☐ Subchapter 8 ☐ Other (i.e., propose, etc.)) 3 (Other than K rivate and com	(-12) mercial	buile	dings	5,	
City (5) Linden								49	Square Feet	# of Floors		Bldg	g. Ag	е	
County (6) Union				C	ounty	Code (7)	(STA	TE USE ONLY)	Current Use (Pri	or if being dem	nolished	i)			\dashv
Name of Monitoring Firm	Hired by Build	ding Owne	r (8)	TASC	CM N		Man	no of Abotoms	ant Contractor (0)						_
Bio Terra Solutions		aling Owne	1 (0)	ASC	JIVI IVI	0.			ent Contractor (9) NAGEMENT L						
Street Address				<u>.</u>				et Address	NAGENIENT	LU		_			_
P.O. Box 1224								7 Outwater	ano						1
City, State, Zip Code							1000	, State, Zip Co				_	_	_	-
Union, NJ								arfield, NJ							
Project Manager for Mon	itoring Firm		11549	lepho		100 march	Tele	ephone No.		License No	•				\neg
Rick Estaquio				973-4			9	73-928-4888		1188					
Start Date (10)		Scheduled 08						ne of OSHA M LL PRO MA	onitor NAGEMENT LI	LC					
Occupancy Status During	Abatement (0	Check only	one)				Stre	et Address							-
☐ Facility Closed/Vacate	ed During Entir	re Period o	of Abat	temen	t		2	7 Outwater I	_ane						
Abatement Performed Time of Abatement: _	Outside of No AM	ormal Faci PM/	lity Ho	urs - [VI	Descr Al	ribe M		, State, Zip Co						-	\exists
Scope of Work (Check al	I that apply)			An and			- 6	arfield, NJ	07026						-
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf	***		Renova Demoli					☐ Mini-Enc							
			Is Loc									Abat	eme	nt Ty	ре
Location Asbestos-Containing TO BE ABA IN Facili (13)	Material (ACM	, 1	sed So Mainter ustodia (12	olely b nance al Staff 2)	i	Asbes (i.e.,	, the	Description of Containing Marmal systems in urfacing, VAT, ner miscellane	terial (ACM) nsulation, or	Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure
Hallway				50 CO		Residua	l Ma	astic		2,400 SF		Z I			\exists
										.,		3			뒴
												_			
												7	П	П	П
Name of Registered Was				NJDE	er ID	No.	Cub	ic Yards of	Name of Regis Minerva Ente	tered Landfill rprises / GRO			11/		ᅴ
City, State	7950 CT V = 11			SW-2	24310	0 / 32797		s Needed oosal Date	City, State	Ifill					_
Shirley, NY / Elizab							T	BD	Waynesbu	rg, OH / Mor	risville	e, P	A		
Completed By (Print or To Allen Monchik	ype)	Title Proje	ct Ma	nago	r			Signature	701- 1:1		Date				
ASP 41		. roje	or Inia	iiaye				Allen	Monchik		7/1	1/18	3		



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

				ICATIO	N OF ASE t to NJAC	BESTOS	ABATE		Т		E (C	E			
Date of Notification (1) July 12, 2018					of Building oldings,		Operator	r (2)			1	111	1 -	001	400000	design of the second
Agencies Notified	Type Notification			Street A	Address Frandywi		d.			nus back	J	UL_	13	2018		- Buna
EPA DEP DOL	Initial Amended Amendment		_	City, St	ate, Zip C	ode	333-311-23-	ı	e e e e e e e e e e e e e e e e e e e	£,	ASBE	STO	S CC ENSI	NTR()L.8	a.
DOH DCA	Emergency (justification) Cancellation	including	'	Name o	of Contact Haydt	0 000-01					lephone 0-657			and the same of th	NOT THE REAL PROPERTY.	dinone cy
				FAC	ILITY INF	ORMAT	ION									
Name of Facility Where A Former Chemical W	Abatement is Takin Vaste Managem	g Place (ent Site	3) e				7	Тур	e of Facility School (K-							
Street Address 100 Lister Avenue								×	Subchapte Other (i.e. etc.)					l ,egnit	nome	es,
City (5) Newark									are Feet 0,000	# 0	f Floors	3	100000	ildg. Ag 0+	je	
County (6) Essex				County (STATE	Code (7) USE ONLY)			rent Use (Pr							
Name of Monitoring Firm Accredited Environr	Hired by Building (mental Technolo	Owner (8) ogies)	ASCN	M No.				atement Co ces, LLC	ntractor	(9)					
Street Address 28 Pennell Road							Street	Addre		ad						
City, State, Zip Code Lima, PA 19063									Zip Code							
Project Manager for Mon Eric Sutherland	itoring Firm			Telepho 610-89	ne No. 91-0114	6	Teleph 484-8	none N	No.		Licens 0116		0.			
Start Date (10) July 30, 2018		Schedul			Date (11)		Name EMS		HA Monitor							
Occupancy Status During							Street		ess				-			
Facility Closed/Vaca Abatement Performe	ated During Entire P ed Outside of Norm	eriod of a	Abaten / Hours	nent					e 130 Nor Zip Code	rth	Un - 1 5000	Olemani i				
Other – Describe: _						_	Cinna	amin	ison, NJ							
Scope of Work (Check Al ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	l That Apply)		Renova Demolit				×	Mi Gi	ull Containm ini-Enclosur ovebag Pro on-Exempte	e cedure	Ü					
Location	of	100	Locati Normal	7.00		De	scription	of						Abater Typ		×
Asbestos-Containing TO BE ABA In Facilit (13)	Material (ACM) TED	Ma	d Sole intenar todial S (12)	nce/		tos Cont thermal surfa	scription taining M systems cing, VA niscellan	lateria insul T, or	ation,	(8	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
See attac	hed	Yes	No	N/A							-10				e	
Name of Registered Wast	e Hauler		N	JDEP W	aste	Cubic	Yards		Name of	Registe	red Lar	ndfill				
Waste Management	20 1 (44,000)		Н	auler ID	No.	of Was	ste		GROW				Hills	3		
City, State Newark, NJ						Dispos TBD	sal Date		City, Stat Morrisv		4					
Completed by Jack Bally		Title Sr. Pi	roject	Manag	ger	S	ignature Data		Balli	a Qu)	Dat Jul	7. h	, 2018	3	



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

				ICATIO	N OF ASE t to NJAC	BESTOS	ABATE		NT		E	C	E		E	
Date of Notification (1) July 12, 2018					of Building oldings,		Operator	r (2))			1111	1 0	004		The same of the
Agencies Notified	Type Notification			Street A	Address Brandywi		d.	- ,53				JUL	13	2018		haras
EPA DEP DOL	Initial Amended Amendment	#		City, St	ate, Zip C	ode		1	TANA	į.	ASB	ESTO	OS CC	NTR(3 JC	1
DOH DCA	Emergency (justification) Cancellation		,	Name o	of Contact Haydt		0 1000					ne Nu	mber	- PHILIPPHIN	ANT TOTAL OR	Specialists v. 2.
L DOA	Caricellation				ILITY INF	OPMAT	ION	-		01	0-00	7-40	32		_	
Name of Facility Where A Former Chemical W	Abatement is Taking /aste Managem	Place (ent Sit	3) e	. 70		OTUMAT	ION	T	ype of Facility School (K-	(2 S)						
Street Address 100 Lister Avenue								×	Subchapte	r 8 (Oth				dings,	nome	∋s,
City (5) Newark									quare Feet 00,000	# 0	f Floo	ors	1543	Bldg. Ag	je	
County (6) Essex				County (STATE	Code (7) USE ONLY	,		P	urrent Use (Pr rior Chemic	ior if be	ing de	emolis TSDF	hed) Site			
Name of Monitoring Firm Accredited Environr)	ASC	M No.				Abatement Co vices, LLC	ntractor	(9)					
Street Address 28 Pennell Road							Street 303 I	10.00	dress National Ro	ad						
City, State, Zip Code Lima, PA 19063									e, Zip Code PA 19341							
Project Manager for Moni Eric Sutherland	toring Firm			Telepho 610-89	ne No. 91-0114	3	Teleph 484-8		e No. 2-8884		Lice 011	ense N	lo.			
Start Date (10) July 30, 2018		Schedul			Date (11)		Name EMS		OSHA Monitor	8						
Occupancy Status During	Abatement (Check	Only O	ne)				Street		100000							
Facility Closed/Vaca Abatement Performe	ted During Entire P ed Outside of Norma	eriod of al Facilit	Abaten y Hours	nent					ute 130 Nor e, Zip Code	th						
Other – Describe: _		1017 210000				_	2000		ninson, NJ							
Scope of Work (Check Al	That Apply)							_			21.00					
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		-	Renova Demolit				×××		Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure	J					
			Locati							. ()				Abater Typ	ment	
Location Asbestos-Containing		Use	Normal ed Sole	ly by	Achoe	De:	scription	of	erial (ACM)	^	moun		\vdash			
TO BE ABA In Facilit (13)	TED ` ´	1	intenar todial S (12)		(i.e.	thermal surface	systems cing, VA	s ins	sulation, or	(8	Specif or Li	y	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A									<u>a</u>		ate	Б
See attac	hed															
								_								
															-	
Name of Registered Wast	e Hauler		N	JDEP W	laste	Cubic	Yards		Name of	Registe	red L	andfill				_
Waste Management			Н	auler ID	No.	of Was	ste		GROW	S Nor				S		
City, State Newark, NJ			70			Dispos TBD	sal Date		City, Stat Morrisv		A					
Completed by Jack Bally		Title Sr. P	roject	Manag	ger	S	ignature		/2016	n 60	i)	Da Ju		, 201	3	

		Permit Fee Summary CWM Facility, 100 Lister, Newark					AS	SBES	TOS CC	ASBESTOS CONTROL &
Most Area	Is location normally solely by Maintenance/Custodial				Removal/Repair/Enca		TEM	Galifera Arrienta		A Commission of the Commission
E Trick order days		Description	Amount	Units	psulate/Enclose	by NESHAP	req'd		Fee	
ב וותכע תוווספתווות פובפ		titting insulatiion	1.5	±	REM	z	z	s	200.00	*
5 l	na	unused linoleum	20	sf	REM	z	z	s		
=	na	unused gaskets	1	sf	REM	z	z	3		
	na	roof flashing	350	sf	REM	z	z	15		
=	na	floor tile	150	sf	REM	z	z	\$		
اۃ	na	flashing	260	sf	REM	z	z	S		
	na	roof (3 layer)	210	sf	REM	z	z	. \$,	
	nà	roof (2 layer)	380	sf	REM	z	z	45		
	na	Flashing (silver painted)	1200	sf	REM	z	z			
	na	roof	10400	sf	REM	z	z			
	na	lab tops	145	sf	REM	z	z	1		
0	na	tile & mastic	1130	sf	REM	>	>	3	200.00	
	na	mastic	30	sf	REM	z	z	45	,	
	na	window caulk	10	sf	REM	z	z	Ś		
	na	flashing	225	sf	REM	z	z	S		
=	na	roof	2700	sf	REM	z	z	S		
N Tank Farm (Tank 600,601,602,& 604)	na	Tank covering on foam insulation	4500	sf	REM	z	z	\$,	
O Lab Area	na	mastic	30	sf	REM	z	z	s		
	na	tile & mastic	300	sf	REM	z	z	\$		
	na	Lab Hood liner (transite)	100	sf	REM	z	z	\$		
	na	Plaster	3900	sf	REM	>	>	5	200.00	
= =	na	wall mastic	300	sf	REM	z	z	3		
= = =	na	pipe insulation & pipe insulation debris	200	<u>+</u>	REM	z	z	5	,	
R&S Outdoor Reactor Tank Area	na	Tank Containment Basin Floor	1600	sf	REM	z	z	45		
Projected Total								\$	00.009	

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* facility notification fee of \$200.00 for all work areas below NESHAPS.

Fee previosuly Paid Net Due Now

- 600.009 \$ \$

PAID

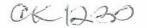
State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

	PALL	ŀ			N OF ASE t to NJAC							E	C			\mathbb{V}
Date of Notification (1) 7-11-18					of Building				T TRUS	Т			JUL	1	2 0	Ω1 0
Agencies Notified	Type Notification	1			Address E. JEFF	ERSO	N ST.						UUL	- 1	3 2	018
X DEP X DOL	Amended Amendmen		_		ate, Zip C KVILLE,							ASE	BEST L	OS (SIN	TROL
X DOH X DCA	Emergency justification Cancellation)	1		of Contact VOODIE					1000	ephone					
				FAC	ILITY INF	ORMATI	ON	Veneza e e e								
Name of Facility Where A TROY HILLS SC - Street Address		ng Place (3)					☐ Sc	Facility (4	2)		14.40				
1157-US 46								Ot etc		ivate 8	& comm	n-12 iercia) I build	dings,	hom	es,
City (5) PARSIPPANY								Square 5000	Feet	2	f Floors			ldg. A /-50	.ge	
County (6) MORRIS					Code (7) USE ONLY)	_	Current STOF	Use (Prior	r if bei	ng dem	olishe	ed)			
Name of Monitoring Firm VERTEX COMPAN		Owner (8)	ASC	M No.				ment Cont			SER	VICE	ES		
Street Address 700 TURNER WAY								Address FRALI	EY STRI	EET						
City, State, Zip Code ASTON, PA 19014								tate, Zip .ADELF	Code PHIA, PA	191	37					
Project Manager for Mon DON HEIM	itoring Firm			Telepho 610-78	ne No. 87 - 0402		Teleph	one No.		7 10701	Licens 0116					
Start Date (10) 7-16-18		Schedul 7-18-1		npletion	Date (11)		Name	of OSHA		FS						
Occupancy Status During							Street	Address								
Facility Closed/Vaca Abatement Performe Other – Describe: 0	ed Outside of Norn	Period of nal Facility	Abatem y Hours	nent	- 4		City, St	tate, Zip	R WAY					=17-12		
Scope of Work (Check Al	I That Apply)						AOT	OIN, I'A	13014						- 11-14	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit				×	Mini-E Glove	ontainmer Enclosure bag Proce	dure					<u>, </u>	
			Locati								onthonored (tray tax accounts)			Abate Ty	ment	
Location Asbestos-Containing TO BE ABA In Facilii (13)	Material (ACM)	Use Ma	ed Sole iintenar todial S (12)	ly by nce/	Asbes (i.e.	tos Conta thermal s	ystems ng, VA	aterial (A insulation	.CM) n,	(S	mount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
FRONT FA	CADE	165	INO	X		C	AULK			9	0LF	-	X			\dashv
Name of Registered Wast	e Hauler		N.	JDEP W	aste	Cubic Y	ards		lame of Re	egister	red Land	dfill				
SERVICE TRANSPO	RT GROUP		H	auler ID	No.	of Wast	е		MINERV	73						
City, State NEW CASTLE, DE						Disposa	I Date	11 5	City, State LIBSON,	ОН		2500				
Completed by JENNIFER NIVEN		Title DIR.	OF O	PERA	TIONS	Sig	nature					Date	1-18	3		
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

	PAI	D	NOTH	TICATIO	State of New Jers ON OF ASBESTO It to NJAC 8:60 a	SABATE	EMENT (0)		EC	E		<u> </u>	
Date of Notification (1) 07-09-18				Name PSE	of Building Owner	/Operato	r (2)		JUL	. 1 :	3 20	118	Service Control of the service of th
Agencies Notified	Type Notification				Address			1-14 162				.0) ban
EPA	× Initial				Hadley Rd.				ASBEST	250	ONIT	001	
DEP X DOL	Amended Amendment	#			tate, Zip Code n Plainfield NJ				Lic	DENS	SING	10/2	Ġţ.
⊠ DOH	Emergency				of Contact			To	lonhana Ni			- Constitution	(Sypnamus)
DCA	justification) Cancellation				Percarpio				lephone Nu)1-481-25				
Name of Facility Value				FAC	ILITY INFORMA	TION							
Name of Facility Where A PSEG North Ave	Abatement is Takin	g Place (3)				Type of Facility	(4)					
Street Address							School (K-			0)			
301-331 E North Av	'e						Other (i.e. etc.)	private	er than K-1 & commerc	al bui	ldings	, hom	ies,
City (5) Elizabeth							Square Feet N/A	# o	f Floors		Bldg. /	Age	
County (6) Union					Code (7) USE ONLY)		Current Use (Pr		ing demolis	1			
Name of Monitoring Firm	Hired by Building	Owner (8)	1		M No.		of Abatement Co	ntractor					
Street Address				N/A	: 		S Environment Address	tal Ser	vices, Inc).			
N/A City, State, Zip Code	***					-	Id Dock Rd						
N/A							state, Zip Code nank NY 1198	0					
Project Manager for Moni N/A	toring Firm			Telepho N/A	one No.	1 1000000000000000000000000000000000000	none No. 924-8111		License N 01136	lo.			
Start Date (10) 07-18-18		Schedule 9-23-18		npletion	Date (11)	1	of OSHA Monitor Environment		vices Inc	Al			
Occupancy Status During	Abatement (Check	Only Or	ne)				Address	ai 00i	71003, 1110	•			
Facility Closed/Vaca Abatement Performe	ted During Entire F	eriod of A	Abatem	nent			ld Dock Rd						
X Other – Describe: E	lectrical circuit cabir	net	Tiours			100000000000000000000000000000000000000	tate, Zip Code nank NY 1198	0					
Scope of Work (Check All	That Apply)						•						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		potential and the same of the	enova emolit			×	Full Containm Mini-Enclosur Glovebag Pro	e cedure					
		Is	Locati	on			Non-Exempte	u (*) and	Non-Friad	le Pro		e ement	
Location		l N	Iormall	у	De	scription	of				Ту	ре	
Asbestos-Containing I TO BE ABA			d Solei intenar		Asbestos Con (i.e. therma	taining M	aterial (ACM)	200000	mount	_		Щ	_
In Facilit		Cust	odial S (12)	taff?	surfa	cing, VA	T, or		pecify or LF)	Remova	Repair	сар	Enclosure
(13)		Yes	No	N/A	other	niscellan	eous)			oval	air	Encapsulate	sure
Control Ho	ouse	100	140	X	Tra	nsite flo	oor	10	00 sf	x			
Control Ho	use			х	Back	Lite pa	nels		0 sf	x			
Switching	yard			х		uct ban			0 LF	x			
Name of Registered Waste	a Haula -												
Waste Management	s riauler		Ha	JDEP W auler ID	No. of Wa	Yards ste			ed Landfill				
City, State			17	273	TBD	-1.5	Fairless		III				
Elizabeth, NJ 07201					TBD	sal Date	City, State Morrisv		19067				
Completed by Raymond Tutiven		Title			8	gnature	1 1 -+	-	Dat				
Taymond ruliven		Super	visor			Coym	d'Il	ila	/ 07	-09-	18		

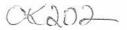


State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NIAC 2:50 and 5:45)

	PAU	U	NOT		MOITA		BES	TOS ABAT 60 and 5:10		间。	C	E		W	E
Date of Notification (1)				- 40	Name	of Buildin	g Ow	mer/Operator (2)						
		18			800	Centeni	nial I	Urban Renev	wal, LLC	A STATE OF THE STA	JUL	. 1	3	2018	
Agencies Notified	Type Notifica	ation			Stree	Address					14				\neg
⊠ EPA	☐ Initial				271	Main St	reet			l AS	BEST	as (COB	ITRO	TI A
☑ DOLWD	Amended Amendme				City,	State, Zip (Code			1	Li	CEN	SIN	G	/_ ()
□ DCA	⊠ Emergend	_			Gla	dstone,	NJ 0	7934		W. D. Colombian Characteristic Apopul	-	epople pro-	to be a reduced	Persignian (page)	
(NJAC 5:23-8)	justification		cidaling		Name	of Contac	t			Telephone N	umber				\dashv
	☐ Cancellati				Do	n Bryant				732-735-7					
	3.70							RMATION		102-100-1	401				
Name of Facility Where A	Abatement is T	aking	Place	(3)	33333				Type of Facility (4)			_		\dashv
Commercial									School (K-12)						
Street Address									☐ Subchapter 8	(Other than K	-12)				
800 Centennial Ave	nue								Other (i.e., pr	ivate and com	mercial	build	lings		
City (5)			-					-	homes, etc.)	# -£ F1		DIJ	Λ		_
Piscataway								-	Square Feet	# of Floors		Bldg	. Age	3	
County (6)				10	10			==			i				
					Cour	ity Code (7)(S1A	TE USE ONLY)	Current Use (Pri	or if being dem	olished	i)			
Middlesex															
Name of Monitoring Firm		ling C	wner (8)	ASCM	No.	Nar	me of Abateme	ent Contractor (9)						
Bio Terra Solutions							A	LL PRO MA	NAGEMENT LI	_C					
Street Address							Stre	eet Address							
P.O. Box 1224							2	7 Outwater I	Lane						
City, State, Zip Code							City	, State, Zip Co	ode						\neg
Union, NJ							G	Sarfield, NJ	07026						
Project Manager for Moni	itoring Firm			Tel	ephone	No.	Tel	ephone No.		License No.					\dashv
Rick Eustaquio				9	73-494	-3762	8.8	73-928-4888		1188	7/				
Start Date (10)	Is	ched	uled C	omple	etion Da	te (11)	Nar	me of OSHA M	lonitor	1		-/15455	-6303		\dashv
07 /12 /	18														
Occupancy Status During															
☐ Facility Closed/Vacate	ed During Entir	e Per	iod of	Abate	ment		2	7 Outwater I	Lane						
Abatement Performed	Outside of No	rmal	Facility	/ Hou	rs - Des	cribe	City	, State, Zip Co	ode						\neg
Time of Abatement: _	AM	PN	n/	_PM		AM	G	Sarfield, NJ	07026						
Scope of Work (Check all	I that apply)				77										
≥3 sf or ≥3 lf			☐ Re	novat	ion			☐ Mini-Enc	ainment with Neg losure	ative Pressure	l:				
☐ ≥160 sf or ≥260 lf			☑ De					☐ Glovebag	Procedure						
								Non-Exe □ Non	mpted (*) and Nor	n-Friable Proce	edure	1-310			
			1000	Loca								Abat	emei	nt Ty	ре
Location Asbestos-Containing		,			ely by	Acho	ctos	Description o Containing Ma		Amount	Γ	ZD.	R.	四	m
TO BE ABA		,	0.00000		ance/	(i.e	., the	ermal systems	insulation.	(Specify		Remova	Repair	car	당
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City, State							Dis	posal Date	City, State						
Elizabeth, NJ							T	BD	Morrisville	, PA					
Completed By (Print or Ty	ype)	Title	1		-		-	Signature			Date				\dashv
Allen Monchik		P	roject	Mar	ager				Monchik		7/1	1/18	3		

ASB-41 JAN 13

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



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Date of Notification (1) 07/07/2018							Operator	(2)	Metabolica de la constanta de	JI	JL 13	2010		The second secon	A COLUMN TO THE PERSON TO THE
Agencies Notified	Type Notification			Street A	Address						- 13	ZVIO		la f	-
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Street Address								Addres	s gren Aver	nue					
City, State, Zip Code									p Code J 07512						
Project Manager for Mon	itoring Firm			Telepho	ne No.		Teleph	one No	D.		License I	No.			
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State of New Jersey

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT MO#25131058233 (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 07 10 __ / ___ 18 John Kihs Type Notification Agencies Notified Street Address ☐ EPA X Initial **⊠** DOLWD ☐ Amended ASBESTOS CONTROL & City, State, Zip Code Amendment # X DHSS LICENSING Scotch Plains, NJ 07076 ☐ DCA ☐ Emergency (including) Name of Contact justification) (NJAC 5:23-8) Telephone Number Cancellation John Kihs **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Private house Subchapter 8 (Other than K-1 2) Street Address Other (i.e., private and commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Scotch Plains, NJ 07076 County (6) County Code (7) (STATE USE ONLY) | Current Use (Prior if being demolished) Union Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Gr Tech LLC Street Address Street Address 576 Valley Rd #283 City, State, Zip Code City, State, Zip Code Wayne, NJ 07470 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973-638-1777 01127 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 07 / 20 / 18 __07__ / _21__ / _18 Envirovision Consultants, Inc Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 20-21 Wagaraw Road, Bldg .# 35E Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: AM- PM/ Fair Lawn, NJ 07410 Scope of Work (Check all that apply) Clean up and decontamination with negative pressure Full Containment with Negative Pressure >3 sf or >3 lf = 160 sf or >260 lf X Renovation Mini-Enclosure Glovebag Procedure Tent with Negative Pressure Demolition Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Remova Repair Encapsulate Enclosure 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 SIF or LF) (12)(13)other miscellaneous) No Yes N/A X Crawl space X Duct insulation 12 LF Basement X Tape insulation 20 LF П Name of Registered Waste Hauler NJDEP Waste Hauler ID No. | Cubic Yards of Waste | Name of Registered Landfill Gr Tech LLC 0033785 TBD T.R.R.F. Inc City, State Disposal Date City, State Wayne, NJ 07470 TBD Tullytown, PA Completed By (Print or Type) Title Signature Date N.Jevtic Owner 07/10/18 ASB-41

NIDEF WHITE

Hauler ID No.

CAROO

President

Cubic Yerde

Disposal Date

of Waste

ASS-41 (F-05-06)

Completed by R. McDonald

City, State

Name of Registered Waste Heuler

Newark Certing, Inc.

Newerk, N.J. 07105

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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) 07/09/2018				Building C		Operator	(2)				<u> </u>		<u>U</u>	LJ I		A Company of the Comp
Agencies Notified Type Notification			Street A	ddress						1	JUL	1	3 2	118		IJ
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DOH justification) Cancellation		100		th C. Se	nior				'	CICP	110116	Nun	I DCI			
			FACII	LITY INFO	RMA	TION										
Name of Facility Where Abatement is Taking Private Residence	Place (3)					Тур	pe of Facility	(4)							
Street Address								School (K- Subchapte)ther	than	K-12	2)			
Street Address							×	Other (i.e.						lings,	home	s,
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Name of Monitoring Firm Hired by Building O N/A	wner (8)		ASCM	1 No.				batement Construction,			"					
Street Address						Street 63 L		lress ner Stockir	ng Pa	ath						
City, State, Zip Code								, Zip Code	=001							
								Park, NJ 0	/035							
Project Manager for Monitoring Firm			Telepho	ne No.		Telepi 862-		No. 1-9463		0.00	1130 1130	nse N 06	0.			
	Schedule 07/28/2		pletion I	Date (11)				SHA Moniton								
07/28/2018 Occupancy Status During Abatement (Check						Street			LLO							
Facility Closed/Vacated During Entire P			ent					her Stockir	ng Pa	ath						
Abatement Performed Outside of Normal Other – Describe:	al Facility	Hours			_			, Zip Code Park						,		
Scope of Work (Check All That Apply)																
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renovat Demoliti						Full Containn Mini-Enclosu Glovebag Pro	re ocedu	ire						
						L		Non-Exempte	ed (*)	and	Non-	Friab	le Pro		e ement	
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Location of Asbestos-Containing Material (ACM)	Use	d Solel	y by	Asbest	tos Co	escription ntaining I	Mate	rial (ACM)			ount				Ш	ш
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(13)		(12)				miscella						8	oval	air	sulat	sure
	Yes	No	N/A												e	
First Floor Kitchen			X		V	AT/Mas	stic			156	S SF	:	x		x	
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Name of Registered Waste Hauler		N	JDEP W	/aste	Cuh	ic Yards		Name o	f Reg	ister	ed La	andfil				
Nari Construction, LLC		1 2 200	auler ID		0.000	/aste		G.R.O					ā			
City, State Lincoln Park, NJ					Disp	osal Date	е	City, Sta Morris		PA						
Completed by	Title					Signatur	re	7,				100	ate			
Igor Jezdimirovic	P.Ma	anage	r			9450		1111	_			0.	7/09/	2018	1	

Do not use this form for asbestos licensure exempted activities.

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Date of Notification (1) State of New Jersey NOTIFICATION OF ASSESTOS ABATEMENT (Persuent to NAMC 560 and 12-20) J. J											
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1 /1 /1/	10							rs			/
			County	Code (7)		1/	1 /	molished)			
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.IAC 8:50 and 12:120)

			(F	ursuant	to NJAC 8	3:60 and 1	12:120	0)	100	M						A PARTIE AND A PAR
Date of Notification (1) 7/10/18					f Building C shield Sc			(2)	1000	The state of the s	J	JL :	3	201	8	1
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DEP × DOL	Amended Amendment		_		ate, Zip Coo vood, NJ					~~~~~~		LICE			watrismus	KONG PARTIES
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Street Address						5	Street	Addı								
City, State, Zip Code						0	City, S	tate,	Zip Code							
Project Manager for Mor	nitoring Firm		Telephor	ne No.	T	eleph	one	AN INCOME CONTRACTOR OF THE		Licens						
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City, State NEWARK, NJ					The state of the s	Disposal 7/27/18			City, Stat		1 PA					
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Print Form

CK3446B

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

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Date of Notification (1) 07 /	09 /	18			101220332	e of Buildir	70 TO 10 TO	wner/Operator ((2)		The second secon	JUE	54/3	1/2	SA18	>	
Agencies Notified EPA DOLWD	Type Notifice ☑ Initial ☐ Amended					et Address O Box 42				5-4	ASE	BEST	and despitioning the		~~~		beautof
☑ DOH	Amendm				1 6	State, Zip							CENS			- 04	
DCA	☐ Emergen		cluding	g g		200 CO		a, NJ 07717							Life and place (a)	نبيع نبغاز ترايانا	Newsphere
(NJAC 5:23-8)	justificati			-	10.000000	e of Conta					Telepho	one Nu	ımber				
	☐ Cancella	tion			Fr	ank Lurc	h				732-	740-9	814				
					F	ACILITY II	NFO	RMATION									
Name of Facility Where A	batement is 7	Γaking	Place	(3)					Type of Facilit)						
Residence									School (K-	12)	O						
Street Address									☐ Subchapte ☐ Other (i.e.,	r 8 (priv	Other ti	han K- I comn	·12) nercial	bui	ldina	s	
									homes, etc	c.)	ato ano		1010141	- Dui	iuiig	Ο,	
City (5)									Square Feet		# of FI	oors		Bld	g. Ag	ge	
Brick									1000		1			6	5		
County (6)					Co	inty Code (7)(ST	ATE USE ONLY)	Current Use (I	Prior	if being	g demo	olished	1)			
Ocean									Garage								
Name of Monitoring Firm	Hired by Build	ding O	wner	(8)	ASC	I No.	Na	ame of Abateme	ent Contractor (9)							
N/A							1	Guardian Co	ntracting, Inc	: .							
Street Address							St	reet Address									
							'	1889 Route 9), Unit 61								
City, State, Zip Code							Cit	ty, State, Zip Co	ode								
							'	Toms River,	New Jersey (875	55						
Project Manager for Monit	toring Firm			Te	ephone	No.	Te	lephone No.			Licens	se No.					
							7	732-349-9932	2		006	24					
Start Date (10)						ate (11)	Na	me of OSHA N	Monitor								
07 /19 /	18	_0	7_ /	_2	0 /	18	1	E.M.S.L. Ana	lytical								
Occupancy Status During							Str	reet Address									
☐ Facility Closed/Vacate	d During Entir	re Peri	iod of	Abat	ement		1	1056 Stelton									
Abatement Performed	Outside of No	ormal	Facility	y Hou	ırs - De	scribe	Cit	y, State, Zip Co	ode								
Time of Abatement:	AIVI	PIV	1/	_PIV	I	_AM	1	Piscataway, I	New Jersey 0	885	4						
Scope of Work (Check all	that apply)					1907 / /		_									
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			□ Re 図 De	nova molit				☐ Mini-Enc ☐ Glovebag	g Procedure	1975			·				
			lo	Loca	otion	1		⊠ Non-Exe	mpted (*) and N	Non-I	Friable	Proced			1201011100		621 SV (3450)
Location	of			Norm				Description of	of.				L.	Aba	teme		T
Asbestos-Containing N	Naterial (ACM)			lely by			Containing Ma	terial (ACM)		Amo	ount	1	Rer	Repair	Encapsulate	Enclosure
TO BE ABAT					ance/ Staff?	(i.e		ermal systems				ecify		Removal	ar.	aps	losu
(13)	,			(12)			surfacing, VAT, ther miscellane			5F 0	r LF)	1 5	<u>n</u>		ulat	Гe
			Yes	No	N/A					1						Ф	
exterior-garage						asbest	os s	iding			350) sf		3			
													Γ	7	П	П	П
										1			1	7	П		П
			П	П	$\forall \Box$					+				7	\exists		
Name of Registered Wast	e Hauler			Ŧ	NJDEP	Waste	Cu	bic Yards of	Name of Reg	iste	red Lan	dfill				_	
Guardian Contractin	ıg, Inc.				Hauler 2022		303053	aste	T.R.R.F.	,,,,,,,	ou Lui	O'III					
City, State					2022		_	posal Date	City, State								-
Toms River, New Je	rsey						1	7/20/18	Tullytowi	n, P	ennsv	Ivania	a				
Completed By (Print or Ty	pe)	Title			7		1-	Signature	1	A			Date /		1		
Nicholas Fernicola	7 (1 4 5))	9100	oject	Mar	nager				1	#		1	7/	9,	1	8	

PAID

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

r Al		OTHECAT		lew Jersey SBESTOS ABATE	WENT I	NECE	1	W	E	F
	N			C 8:60 and 12:12				17	브	TALBUTTURE SET
Date of Notification (1)		Na		ing Owner/Operato		LEWE!	3 2	018		
	lotification	Str	eet Addres	s			^ ^	_		
D BPA X Initia					LARKSI	MMOMG	1 - 11 34	1.17511	1	_
	endment #	_ '	, State, Zip	Code GG HAR	NAO	LICEN	ISIN	8 2	70	particular
	ergency (including tification)		ne of Conta		OURC	Telephone Num		0 6	.10	
	cellation			tom		609-9		74	98	
			ACILITY IN	FORMATION						
Name of Facility Where Abatemer		(3)			Type of Facilit	PE 120,000				
Street Address	NCE				School (K-	12) r 8 (Other than K-1	2)			
Street Address					Other (i.e., homes, etc	private & commerc	ial buil	dings	5,	-
City (5)	7				Square Feet	# of Floors	В	ldg. A		
LINIW	000				1200	_ _7	1=	20	_	
County (6) ATC AWT	10		unty Code (E ONLY)	(7) (STATE		rior if being demoli	shed)			
Name of Monitoring Firm Hired by		ASCI	d No.	Name of Abatem						=
(8) N/A		_			MCO]	LNC.				_
Street Address				Street Address	S. Spri	ICE HUE				_
City, State, Zip Code				City, State, Zip C		DE NI.T	08	30	57	
Project Manager for Monitoring Fir	m	Telephone	e No.	Telephone No.	_	License No. 3				_
•				856-779		012	11			
Start Date (10)	Scheduled Co	mpletion D	ate (11)	Name of OSHA N	Anitor					
7-18-18 Occupancy Status During Abatem				Street Address	III P					_
☐ Facility Closed/Vacated During	Entire Period of A	batement						-		_
Abatement Performed Outside of	of Normal Facility	Hours		City, State, Zip Co	ode	2				
Other - Describe:										
Scope of Work (Check all that app	y)					egative Pressure				
>3 sf or ≥3 lf	☐ Ren	ovation odition		☐ Mini-Enc ☐ Gloveba	g Procedure					
∑≥160 sf or ≥260 lf				Non-Exe	mpted (*) and N	on-Friable Procedu	_	hata	ment	
		ication ma∦y					'	Typ		
Location of		Solely by enance/	Ashesi	Description of os Containing Mate	erial (ACM)	. Amount			ш	
Asbestos-Containing Material (AC TO BE ABATED	Cus	todial aff?		thermal systems in surfacing, VAT,	sulation.	(Specify SF or LF)	Ren	Repair	ncap	nck
IN Facility (13)	(C) (C)	2)		other miscellaneou	us)	0. 0. 2.	Removal	pair	Encapsulate	Enclosure
(10)	Yes	No N/A	1				-		te	
5.0.10		X	T	RAWSITI	L-	1500 SP	X			
SIDING		1	-	1-4.40 2 1 11						
		-								
	=	+								
Name of Registered Waşte Hauler		T NUDEP !		Cubic Yards	Name of Regi	stered Landfill				
KLEMCO INC		Hauter ID	84	of Waste	A	CUA				_
City, State				Disposal Date	City, State	1 1 5 1 7 1 1 2 1 2	-	W(_	
MAPLE SHADE		١		Signature	I PLEM	SANITUIZUI Date		-		=
Completed RV MICHAET KLEMM	Title	RUIS	DR	Mie	lon		8-	18	_	

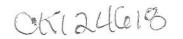
State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

	PAN		OTI					60 and 5:10		ME	G	5 [W	E	
Date of Notification (1)		Alaca Per			Name	of Building	Own	ner/Operator (2)		9		-	Addition of the State of the St	111
07 /	09 / _	18	-0			eph Dav			-/		1111	1 2	201	Q	- Annual Control
Agencies Notified	Type Notifica	ation			Street	Address					UUL	10		,	Decree
⊠ EPA	☑ Initial	ř								1				-	PACTOR
☑ DOLWD ☑ DOH	Amended Amendme				City, S	State, Zip C	ode			ASI	BESTO)S CC	NTR	OL	Ž,
□ DCA	☐ Emergen		ıdina		Per	nsauken	, NJ	08110			LIC	ENS	ING	Dan meter transfer	and the state of the
(NJAC 5:23-8)	justification		unig		Name	of Contact	t			Telephone	e Numb	per			
	☐ Cancellat	ion			Jos	eph Dav	y			4					
					FAC	CILITY IN	FOR	MATION							
Name of Facility Where A	batement is T	aking P	lace	(3)					Type of Facility	(4)					
Residence									School (K-12						
Street Address									☐ Subchapter ☐ Subchapter ☐ Other (i.e., p				ildina		
									homes, etc.)		Ommen	ciai bu	liding	*,	
City (5)									Square Feet	# of Floo	ors	Blo	dg. Ag	е	
Pennsauken									2,000	3		1	80		
County (6)					Cour	ty Code (7)(STAT	TE USE ONLY)	Current Use (Pr	ior if being o	demolis	hed)			
Camden									Residence						
Name of Monitoring Firm	Hired by Build	ding Ow	ner (8	3)	ASCM	No.	Nan	ne of Abateme	ent Contractor (9))					
Management & Env	iro. Consul	ting Se	ervic	es			S	hade Enviro	onmental, LLC						
Street Address							Stre	et Address							
PO Box 341							62	23 Cutler Av	/enue						
City, State, Zip Code							City	, State, Zip Co	ode	-13 HLC L-10 12 - 2 -					
Chesterfield, NJ 08	515						M	laple Shade	, NJ 08052						
Project Manager for Moni	toring Firm			Tele	phone	No.	Tele	ephone No.		License					
Bill Weisgarber				V-7/	09-298		85	56-755-0099)	00842	2				
Start Date (10)		Schedule		200			Nan	ne of OSHA M	lonitor						
07 /19 /	18	07	_ /	_23	3_ /	18	E	MSL Analyt	ical, Inc.						
Occupancy Status During	Abatement (0	Check o	nly o	ne)			Stre	et Address							
□ Facility Closed/Vacate							20	00 Route 13	0 North						
Abatement Performed							City	, State, Zip Co	ode						
Time of Abatement: _	AIVI	PIVI/_		_PIVI		AIVI	С	innaminsor	n, NJ 08077						
Scope of Work (Check all	that apply)						-								
≥3 sf or ≥3 lf		×	7 Rer	novat	ion				tainment with Ne	gative Press	ure				
□ ≥160 sf or ≥260 lf		Ē		noliti				☐ Gloveba	g Procedure						
1								☐ Non-Exe	mpted (*) and No	on-Friable Pr	rocedur	1			
			17. (5.00)	Loca lorma	500 E. C.							Ab	ateme	nt Ty	
Location Asbestos-Containing	87 Files and Francisco and an experience	1)			ely by	Asbe	stos (Description of Containing Ma		Amou	int	Rer	Repair	Enc	Enclosure
TO BE ABA	TED				ince/ Staff?		., the	rmal systems	insulation,	(Spec		Removal	air	aps	losi
IN Facilii (13)	ty		Cust	(12)				urfacing, VAT ner miscellane		SF or I	LF)	<u>n</u>		Encapsulate	тe
(13)		,	Yes	No	N/A		Ott	ici miscellane	ous)					9	
Basement				\boxtimes		Floor Ti	ile			120 5	SF				
		Г	7									\Box		П	П
		_L											Ш	Ш	Ш
						To be to the bound of the last									
Name of Registered Was	te Hauler			1.63	IJDEP \		7.15-47/	ic Yards of	Name of Regis	stered Landf	fill				
Freehold Cartage				1	lauler II 15939		Was		Fairless L	andfill					
City, State							Disp	osal Date	City, State				00-1-1-1-1		
Freehold, NJ							07	7/23/2018	Morrisville	e, PA					
Completed By (Print or Ty	ype)	Title						Signature	1		Da	te			
Christina Lynch		Vic	e Pre	eside	ent of (Operation	ns	1 mgh			7	19	11		

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

T	PALL	9		(Pu	ırsuan	t to NJA	C 8:60 and 5:16	3)	n) <u>6</u> 6	<u>E</u>	TAI	느	A DESCRIPTION OF THE PERSON OF
Date of Notification (1)	<u> </u>				Name	of Building	Owner/Operator (2)				OLD FACTOR	
	09 /	18			Silv	er Lining	Properties, LLC			1 3	2018	- Land	L
Agencies Notified	Type Notifica	ation		-	Street	Address		1	1 41			_	
⊠ EPA					306	Salarno	Court	Parameter	İ			1 0	1
□ DOLWD	☐ Amended				City. S	State, Zip C	ode	-	ASBEST	OS CUI	VIHC G	IL CL	
⊠ DOH	Amendme						NJ 08062	1		ICCI (OII)		4000	and the state of
☐ DCA (NJAC 5:23-8)	☐ Emergene justification		ding			of Contact			Telephone N	umber			
(110/10/0.20/0)	☐ Cancellat	(125)			11-04-00-00-01-00-0	/ Gaiser	*		267-259-7				
				-			FORMATION						
Name of Facility Where A	Abatement is T	aking Pl	ace	(3)				Type of Facility	(4)				
Residence		_						School (K-1					
Street Address								☐ Subchapter	8 (Other than K		Nervom:		
								MOther (i.e., phomes, etc.	orivate and com	mercial bu	uilding	IS,	
City (5)								Square Feet	# of Floors	В	dg. A	ae	
Maple Shade								2,000	3	1	80	5-	
County (6)		-	- 000		Cour	ity Code (7	(STATE USE ONLY)	11907 - 50 20000	rior if being dem	olished)			_
Burlington								Residence					
Name of Monitoring Firm	Hired by Build	ding Own	ner (8	3)	ASCM	No.	Name of Abateme	ent Contractor (9)				
Management & Env				200				onmental, LLC					
Street Address							Street Address						
PO Box 341							623 Cutler Av	enue/					
City, State, Zip Code							City, State, Zip Co	ode					
Chesterfield, NJ 08	515						Maple Shade						
Project Manager for Moni	itoring Firm			Tele	phone	No.	Telephone No.		License No.			-	
Bill Weisgarber				60	9-298	-4070	856-755-0099		00842				
Start Date (10)	S	Schedule	d Co	mple	tion Da	te (11)	Name of OSHA M	lonitor					
07 / _20_ /	18	_07	_ /	_23	3_ /	18_	EMSL Analyt	ical, Inc.					
Occupancy Status During	Abatement (0	Check or	nly or	ne)			Street Address						
□ Facility Closed/Vacate	ed During Entir	e Period	of A	bate	ment		200 Route 13	0 North					
☐ Abatement Performed							City, State, Zip Co	ode	7000				
Time of Abatement: _	AM	PM/_	_	_PM-		AM	Cinnaminson	, NJ 08077					
Scope of Work (Check all	that apply)								1000 0000				
≥3 sf or ≥3 lf			Por	ovati	on			ainment with Ne	gative Pressure				
□ >160 sf or >260 lf				nolitic			☐ Mini-Enc						
) 7 - 1 -						mpted (*) and No	on-Friable Proce	edure			
				Locat						Ab	atem	ent T	уре
Location Asbestos-Containing		n 1		orma I Sole	ely by	Acho	Description o stos Containing Ma		Amount	Re	Re	En	En
TO BE ABA		,	Maii	ntena	nce/		, thermal systems		(Specify	Removal	Repair	cap	Enclosure
IN Facili	ty	(Custo	(12)	Staff?		surfacing, VAT,		SF or LF)	va va		Encapsulate	ure
(13)		-	es	No	N/A	+	other miscellane	ous)				ate	
Consideration			2	2,037.5	1 10 10 10 10 10 10 10 10 10 10 10 10 10	Durat Da			2015				
Crawlspace		_	1			Duct Pa	per		30 LF				
]									Ш	Ш
Name of Registered Was	te Hauler			N	JDEP V	Naste	Cubic Yards of	Name of Regi	stered Landfill				
Freehold Cartage				Н	15939	52 Texas (1.00)	Waste 1	Fairless L	andfill				
City, State					10338	,	Disposal Date	City, State					
Freehold, NJ							07/23/2018	Morrisville	e, PA				
Completed By (Print or Ty	vpe)	Title					Signature	1		Date			
Christina Lynch			Pre	side	ent of (Operation	1 / 1 .	9		7/9	h d		



DATE State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

	P	AID	N		CATION	OF ASBE	STOS	ABATEN		T (13.7)	E	C	E		7 [1
17.50	e of Notification (1) 3/18					Building Cuthority of			(2)				1.3	201	Q	ATTACHET TOWNS OF THE PARTY OF	
	ncies Notified	Type Notification		1.2	Street Ac 241 Eri	ldress e Street	, Roor	n 236		1-1-1-		UUL	1.	201	0		- Mariantan
×	DEP DOL	Initial Amended Amendment				e, Zip Coo City, NJ		0		1	ASE	ESTO LK	JS CO		IOL 8	in the second	hind menumphoo.
×	DOH DCA	Emergency justification) Cancellation			Name of Uday N	Contact	<u> </u>				000000	ephon ()1) 59					
						ITY INFO	RMATI	ON			,	,					_
Ma	ne of Facility Where Arine Operations et Address		g Place (3))					Тур	e of Facility (2)						
AP	M Terminals								×	Subchapter Other (i.e. p etc.)					ings,	home	5,
City	(5) zabeth								Squ	are Feet	# of 2	f Floor	S	Bl	dg. A	ge	
Cou Un	nty (6) ion				County C (STATE U	ode (7) SE ONLY)		_		rent Use (Pridices	or if bei	ng der	nolish	ed)			
	ne of Monitoring Firm M Associates	Hired by Building	Owner (8)		ASCM 00145					atement Con ave Inc.	tractor	(9)					
	et Address Tindall Road				1			Street 15 Sc		ress erset Place							
10000000	, State, Zip Code ddleton, NJ 0774	-8								Zip Code JJ 07012							
	ect Manager for Mon vin Burns	nitoring Firm			Telephon (732) 6	ne No. 71-6400		Teleph (973)		No. 0-0200		Licer 003	nse No).			
	t Date (10) 23/18		Schedule 9/28/18		pletion D	Date (11)		Name	of O	SHA Monitor							
	upancy Status Durin			-61	-			Street	Addı	ress							
×	Facility Closed/Vaca Abatement Perform Other – Describe:	ed Outside of Norn	Period of A nal Facility	batem Hours	ent	<i>87</i>	_	City, S	tate,	Zip Code			12				
Sco	pe of Work (Check A	II That Apply)													- 44		
×	≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emolit				×	, N	Full Containme Mini-Enclosure Blovebag Prod Non-Exempted	e edure					e	
			10000	Locati	COUNTY OF THE PARTY OF THE PART											ment	
	Location Asbestos-Containing <u>TO BE AB</u> In Facil	Material (ACM) ATED	Use Ma	lormal d Sole intenar odial S	ly by		os Cont thermal	scription taining N systems cing, VA	/later		(8	moun Specify F or LF	4	Remova			Encl
	(13)		Yes	(12) No	N/A			niscellar				31.7	,	ioval	Repair	Encapsulate	Enclosure
	second floor 8	& stairwell		200000	X		VAT	& ma	stic		6.	125 s	sf	x			
	1st & 2nd	floors			х	wi		sill cor				310 st		x			
	boiler ro	oom			х				- 1/2	acking	120 9	sf +1/	'2 cy	х			
	roof	f				roof	ing ma	aterial	& fla	ashing	4,	100 s	sf	х			
Nan	ne of Registered Wa	ste Hauler		1,0332	JDEP W	aste	Cubic	Yards		Name of				1			
100000000000000000000000000000000000000	ste Mangement			1000	lauler ID -901	NO.	of Wa	ste		Grows	North						
	, State vark, NJ						Dispo	sal Date	9	City, Stat Morrisv		PΑ					
	npleted by aron Hendee		Title Presi	dent		20,000 (20,00) (20,000 (20,00) (20,000 (20,00) (20,00) (20,00) (20,00) (20,00) (20,000 (20,00)	3	Signature	e	11/	_	01	Da	te 3/18			

State of New Jersey

50 93 NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

00,		UUW		(Pu	rsuan	t to NJA	C 8	:60 and 5:16	()	DER	BI	M	F	F
Date of Notification (1)				T	Name	of Building	Ow	ner/Operator (2	2)	1) 5 9	<u>[[]</u>	19	1	7
07 /	10 /	18			Cou	inty of U	nioi	n		131				minterials dispersions dispersions
Agencies Notified	Type Notifica	tion		-	Street	Address				HHI JUL	13	2018	-	1
⊠ EPA	⊠ Initial						ion	Building-Eliz	abethtown Pla	za				DCC- medical
□ DOLWD	☐ Amended			1		tate, Zip C					- 00		31 0	4
☐ DHSS	Amendme	A 1 - 5 1	_			abeth, N			-	ASBEST	OS CO CENSII	VG VG	ے ال	٠
DCA	☐ Emergend		ng	1	-	of Contact		20.	1	Telephone Num			NAME OF THE OWN	MARKET -
(NJAC 5:23-8)	justificatio Cancellati							Ryan Jones, 0	C.M.	609-276-738				
		7						RMATION						\neg
Name of Facility Where A	Abatement is Ta	aking Pla	ce (3	3)				1	Type of Facility ((4)				
Union County Cour		•		2 6 .0					☐ School (K-12					
Street Address			-							(Other than K-12				
2 Broad Street									homes, etc.)	ivate and comme	rcial bu	ilaing	5,	
City (5)									Square Feet	# of Floors	Bio	lg. Ag	e	
Elizabeth									55,000	5		30 +		
County (6)					Coun	ty Code (7)(STA	ATE USE ONLY)		or if being demoli				\neg
Union									Office Build	100	*			
Name of Monitoring Firm	Hired by Build	ing Owne	er (8)	T	ASCM	No.	Na	me of Abateme	nt Contractor (9)					
T and M Associates	S				0014	15			az Mat Remov	al, Inc.				
Street Address							Str	reet Address		37				
1455 Broad St., Su	ite 250						4	494 East 41st	Street					
City, State, Zip Code							Cit	ty, State, Zip Co	ode		12			
Bloomfield, NJ 070	03						F	Paterson, NJ	07504					
Project Manager for Mon	itoring Firm			Tele	phone	No.	Те	lephone No.		License No.				
Kevin Burns				90)8-347	-4396	(973-345-0022		00507				
Start Date (10)		cheduled					Na	ame of OSHA M	onitor					
07 / 23 /	18	07	. / _	22	_ / _	19	1	Same as abov	ve					
Occupancy Status During	g Abatement (C	Check on	y on	e)			Str	reet Address	3/10/10/10/10/10					
☐ Facility Closed/Vacate														
Abatement Performed of Abatement:						ribe Time	Cit	y, State, Zip Co	ode					
		1.pmriv			-\IVI		<u></u>							
Scope of Work (Check a	II that apply)							M Full Cont	ainment with Nec	iativa Praecura				
≥3 sf or ≥3 lf			Rend					☐ Mini-Encl	osure	auve i ressure				
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City, State					419		-	150 sposal Date	City, State					
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Agencies Notified	Type Notif	ication				r Alghand et Address				1	11 10	- 0046		A STATE OF THE PARTY OF THE PAR	
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(NJAC 5:23-8)		ency (≀ ation)	ncludir	ng		lewood, I)			UMENSI	NG			Operation.
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Street Address									School (K-	12) r 8 <i>(</i> Other	than K-1	2)			
									Other (i.e.,	private a	nd comme	ercial b	uildin	gs.	
City (5)									homes, etc	2.)				1505	estamor-
Maplewood, NJ 07040									Square Feet	# of	Floors	В	ldg. A	Age	
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Essex) 0000 (/	/ (01/112 (IGE ONET)	Current Use (I	Prior it be	ing demoi	ished)			
Name of Monitoring Firm	Hired by Bu	ilding	Owner	(8)	ASC	л No.	Name	of Ahatem	ent Contractor (0/		- 11		-	
							1	h LLC	one contractor (9)					
Street Address					1			Address							
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Project Manager for Moni								, NJ 0747	70						
roject Manager for Moni	itoring Firm			Te	lephone	e No.	Teleph	one No.		Lice	nse No.				
Start Date (10)		C-5-	-1.1.1.1.					8-1777		0112	27				
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Abatement Performed	Outside of N	line re Vormal	Facili	tv Hor	ement ire - De	scribe	20-21 \	Wagaraw	Road, Bldg .#	35E					
Time of Abatement:	AM	P	M/	PIV		_AM	2200 600	ate, Zip Co							1000
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City. State, Zip Code	Manage Street, Street,	-			185	Widland A	6				
Project Manager for Monitoring Firm				72 S-720 22 470	Midle	nd Park	U 07432				
Start Date (10)/	_	,00000 (10)		thána Na.	Telapho	ne Na 02-5841	Licens	s No.			 -
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State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

	1 1	机阻阻	þ	(Pur	suant to	NJAC 8:60 and	12:20	N.J.A.C.	7:26-2.12)		<u> </u>	PI	11/7	EL
Date of No 7/09/2018	otification (1):				ilding (Owner/Operator (2) ool				们追	G	<u> </u>	<u> </u>	5
Agencies	Type Notificat	ion	Stree	t Addr	ess:					11551				Total Annual Control
Notified	⊡-Initial		_	_	Control of the Contro	i Avenue Room 20	9				1111	13	2018	
□ÆPA	☐ Amended				Zip Coo	de:				A STATE OF THE STA	000	1 1 10		T-C-
□ DEP	Amendment#:				07108				m					
□ DOL	☐ Emergency (including		1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	e of Co					Telephone		BEST	OS CO	ONTR	OL&
⊈-ĎOH	justification)	IVIT. I	senjam	in Olag	adeyo			973-733-7	200	LI	CENS	ING	Owner State of the last
B ÓCA	☐ Cancellation	rs.												
						FACILITY INF								
Name of F	acility: Ameri	can Hist	ory Hig	h Scho	ool			of Facility	N. 5					
74 Montgo	omery Street							hool (K-12) bchapter 8 (Other than K-	-12)				
City/ (5)		County	(6):		Count	ty Code (7):				ercial buildings, h	nomes, e	etc.)		
Newark		Essex	X-2-2-0		07103		Sau	are Feet:		# of Floo	ors:			
										,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
								g. Age rent Use : S	School					
Name of N	Aonitoring Fire	n Hired	by Buil	ding C	wner:	ASCM No.:		122341	ement Contra	actor (9):				
WHITMA	AN					00110	Ane	v Develo	pment, Inc	,				
Street Add	lress:						-		358 Bro					
	nt Hill Road						300	et Address.	. 330 D10	auway				
City, State	, Zip Code:						City	, State, Zip	Code:					
	, NJ 08512						-	vark, NJ						
	anager for Mor	itoring l	Firm:			Telephone No.:	Tele	phone No.	:	License No.:				
Kevin Lo						732-644-5418	1) 350-0101		01215				
Start Date 7/23/18	(10):		heduled 24/18	l Comp	oletion I	Date (11):	127.00.707.0		A Monitor: al Laborato	ries				
Occupancy	Status During A	batement	(Check	only on	e)			et Address:						
	losed/vacated D							Not an account of the second	Street, Suit	e 203				
☐ Abatemer Describe:	nt Performed Out	tside of N	ormal F	acility l	lours			, State, Zip	Code: w York, 100	018				
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☐ Other Describe:														
Scope of W	ork (Check all th	nat apply)	:		2712								9755 225	
≥ 3 sf or	> 3 If			ľ	Renov	ration				ontainment with Enclosure	i Nega	tive Pr	essure	
$\square \ge 160 \text{ sf}$	$or \ge 260 \text{ lf}$			Ē	Demo	lition			☐ Glovet	pag Procedure	N F-		no oo da	
			Ic	Locat	ion				□ Non-Ex	empted (*) and	Non-Fr		temen	
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	Containing M	aterial		d Sole		Asbestos Cont	taining	Material	(ACM)		-	T		
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	OR CORR ET AREA	IDOR		X		WALL PLAST	ER			400 SF	*			*
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	YRNE TRUCH		**		19551			of Waste		MINERVA				SSOC,
										INC.				
City, State				Disp	osal Da	te:		City, Sta		600				
Bronx, NY Completed					Title:		Signa		ourg, OH 44	Date:				
	raeobunam			C. (C. C. C	President	Jigila	1.00	To a contract	07/09/20	018				

CK 33999

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to N.J.A.C. 8:60 and 12:12:0) F & MARKET 399

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Date of Notification	(1) 5/23/18								Owner / O		or (2)	dant.		010		THE REAL PROPERTY.				-
Agencies Notified EPA	Type Notifica	ation		S	tree	et A	Addr		DISTRICT			Market Ma	132	018	160					
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☐ DCA	☐ Canc	ellation		D	rev	v١	/and	derze	e						908	-87	9-73	73		
Name of Facility W/	Al1			(0)		C	LIT	Y INF	ORMATI											
Name of Facility Wh Dickerson Eleme			lace	(3)					Type o			Non Sub	ochap	ter 8)						
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Chester		Morris							School		(Prior ii	being de	emolis	inea)						
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RJB Environmen	tal Inc											ental, li								
Street Address	y 82°								Street /											-
56 East Bridge St City, State & Zip Co	treet					_			1123 E								V-T-y-			_
Morrisville, PA 19									City, St Bristo											
Project Manager for		irm	Tel	eph	ione	e N	umb	er	Teleph					License	Num	ber				-
Rick Beach	_		91-				(215)7				- (00509								
Scheduled Start Dat 7/11/18	tior 12/		ite	(11)		Name o			nitor ental In											
Occupancy Status D	Ouring Abaten	nent (Check or							Street			entai iii	ic.				-//	Y-15-		-
Facility Clos	ed/Vacated D	During Entire P	erio	d o	f Ab	ate	eme	nt	1123 E			et								
		tside of Norm	al H	loui	s –				City, St	tate &	Zip Co	de								
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ino Pizzigoni						-	ect		Min	5 P	1000	1000	1	Me	7.	10	18			

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

Data of N. 115 - 11 - 10										11111	1	4 20 200						
Date of Notification (1) 5/23/18	Nam	ne of	Buildir	ng O	wner / Opera	ator (2)			JU	L 18	2018	3	110-					
Agencies Notified Type Noti			r Scho	OIL	District								}					
⊠ EPA	h Roa	d	ASBESTOS CONTROL &															
☐ DEP ☐ Ini		ode LICENSIAVS																
□ DOL □ An	0				T. P. C. WARRINGS		10 A . Mar.	2000 a										
□ DOH □ En	ct	Telephone Number																
☐ DCA ☐ Ca	Dre	w Va	anderz	zee			908-879-7373											
	RMATION					000-07	0-10	7.5										
Name of Facility Where Abate	Type of Fac	cility (A)																
Dickerson Elementary Sci			(Non Su	bchan	ter 8)													
Street Address								School (K-12) (Non Subchapter 8) Subchapter 8 (Other than K-12)										
250 State Route 24		Other (i.e. private & commercial buildings, homes, etc.)																
0: (5)							Square Fee	et	# of Flo			Bldg. Ac		,				
City (5) County (6) Morris			County Code (7)									-	3					
							Current Use		_									
None of Maritain Fig. 11						School												
Name of Monitoring Firm Hired RJB Environmental Inc	0.	Name of Abatement Contractor (9)																
Street Address				\perp			Bristol Environmental, Inc.											
56 East Bridge Street		Street Address 1123 Beaver Street																
City, State & Zip Code		City, State & Zip Code																
Morrisville, PA 19067		Bristol, PA 19007																
Project Manager for Monitoring	Firm				mber		Telephone Number License Number											
Rick Beach	921			(215)788-6			100	0509										
Scheduled Start Date (10) Scheduled Completion Date (11)							Name of OSHA Monitor											
Occupancy Status During Abate		Bristol Environmental Inc.																
Facility Closed/Vacated	- 1	Street Addre 1123 Beav		-4														
Abatement Performed (City, State &																	
Describe: 7am to 3pr		Bristol, PA 19007																
Facility Occupied Durin		Dilotoi, i A	. 15007															
Scope of Work (Check all that a	apply)		11-12-13															
≥3 sf or ≥3 lf		Full Containment with Negative Pressure																
≥160 sf ≥260 lf		nova					Mini-End											
∑ ≥160 st ≥260 lt Demolition									Glove B									
Location of	Isl	Locati	ion	1		Descriptio	n of	Non-Exe										
Asbestos-Containi	Norm			1	Α	sbestos-Cor				mount pecify	Aba	teme	ement Type					
Material (ACM)		olely b				Material (A		or LF)			ш							
TO BE ABATED in Facility	Maint Custo				(i.	e., thermal s		Rer	R	nca	Enc							
(13)	Cusic	(12)	Stan		Inst	ulation, surfacing, VAT other miscellaneous)					Removal	Repair	Encapsulate	Enclsoure				
6 5	Yes	No	N/A	A	O.	outor imacei	ianeous			<u>a</u>		late	re					
Boiler Room		\boxtimes		П	W	/rap	and Cut o	f 2 Boi	lers	25	0 SF							
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													H	H	H			
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lome of Denistry 110/										74=1			H	Ħ	Ħ			
Name of Registered Waste Hauler NJDEP Was								Name	of Regis	stered L	andfill							
\					ID NO.	1	Vaste Cu YD	Mino		JE:II								
City, State			203	990		-	posal Date		va Lan	atili								
New Castle, DE							/18	City, S Wayn	tate esburg	ОН								
completed By (Print or Type)		Title	9			nature		9	, 011		Date			_				
∃ino Pizzigoni		7100000	oject		-	Δ.) .	-	10	9.	7/6/1	8						
Manage						1	lino P	While	your	14	<i>y</i> -	17071	•					

NOOK

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

Date of Notification	/1)			1	and the second				lin		PE	1 1/1	KI	FS	55	15				
Date of Notification (1) 5/23/18					Name of Building Owner / Operator (2) Chester School District															
Agencies Notified Type Notification					Street Address															
	EPA /						50 North Road													
☐ DEP ☐ Initial						City, State & Zip Code														
□ Amended						Chester NI 07020														
					Name of Contact ASSESTUS CONTROL Talanhara M											Num	her			
☐ DCA ☐ Cancellation				Dr	ew	Var	nderze	ee	- magazini wa		ICENSIA	VG VG			79-7		DEI			
	FOR	MATION			The state of the s	m. [-												
Name of Facility Wi	here Abatem	ent is Taking I	Place	e (3)		JIL!	1 1 1181		Type of Fac	rility (4)										
Dickerson Elementary School									School (K-12) (Non Subchapter 8)											
Street Address									Subchapter 8 (Other than K-12)											
250 State Route 24									Other (i.e. private & commercial buildings, homes, etc.)											
					1	Square Feet # of Floors Bldg. Age														
City (5)	2 1-7			County Code (7)			(7)						2.49.7.90							
Chester								1	Current Use	(Prior i	or if being demolished)									
									School											
Name of Monitoring Firm Hired by Building Owner (8)						AS	CM No	0. 1	Name of Ab					-						
RJB Environmen	tal inc							E	Bristol Environmental, Inc.											
Street Address									Street Addre											
56 East Bridge Street									1123 Beaver Street											
City, State & Zip Code									City, State & Zip Code											
Morrisville, PA 19067						1	L		Bristol, PA 19007											
Project Manager for Monitoring Firm Telep Rick Beach 267.0							ber		Telephone Number License Number											
207-00							\		(215)788-6040 00509											
Scheduled Start Date (10) Scheduled Completion Date (11) 7/5/18 7/6/18									Name of OSHA Monitor Bristol Environmental Inc.											
Occupancy Status During Abatement (Check only one)									Street Address											
Facility Closed/Vacated During Entire Period of Abatement								100	1123 Beaver Street											
Abatement F	lours	_				City, State & Zip Code														
Describe: 7am to 3pm									Bristol, PA 19007											
☐ Facility Occupied During Abatement										. 10001										
Scope of Work (Che	ck all that ap	ply)												- 70-		-				
			K-2						Full Containment with Negative Press								<u> </u>			
				Renovation						Mini-End	nclosure									
Z 2100 SI 2200 II				Demolition								Bag Procedures								
Location of Is I					Location				D ::		Non-Exe	Exempted and Non-Friable Pro								
Asbestos-Containing Norm								Δο	Descriptio			Amount		Abatement Type						
Material (ACM) So					olely by				Asbestos-Containing Material (ACM)			(Specify SF or LF)				m				
TO BE ABATED Main					itenance or (i				.e., thermal systems			01 01 11)	'	Re	Z	nca	Ē			
in Facility Cus						aff?	i	insul	ulation, surfacing, VAT					Remova	Repair	aps	ciso			
(13) Yes						V/A		or o	other miscellaneous)					Va	Ę.	Encapsulate	Enclsoure			
							101		and Cut of 2 Boilers							O				
Bollet Koolil			X	1	-	<u> </u>	VVr	rap a	and Cut o	f 2 Boil	ers	250 SF								
			ዙ	+-	-	4														
			H	1-	4	4	_													
				+-	+	4														
			H	1		4														
Name of Registered Waste Hauler					NIDER Woots			O. 1	thic Varda News of David											
Tomo of Negistered Waste Hauler				NJDEP Waste Cu Hauler ID No. of				ubic Yards Name of Registered Landfill Waste												
Service Transport Inc.									Cu YD	Miner	valan	4611								
City, State									osal Date	The state of the s										
New Castle, DE					7/6															
Completed By (Print or Type)					Title Sign				inature D											
Gino Pizzigoni					Project #				O -											
<u> </u>					Manager			8	Dino Pumisoni / GR 5/23/18											

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