

Date of Notification (1) 07/12/2018				Name of Wayne	Building C Township	Owner/Co Public	perator (2) Schools		) E	Check	# 1132	No. of Contract of		
Agencies Notified	Type Notification		0.0	Street A 50 Nellis				J.	] 1 (	2018		The second second		
⊠ EPA ⊠ DEP ⊠ DOL	☐i Initial  ☑ Amended  Amendment #			City, Sta Wayne,	te, Zip Coo New Jer	de sey 07	470	ACOFO	*********		-	Court Programme		
⊠ DOH ⊠ DCA	<ul> <li>□ Emergency (inclination)</li> <li>□ Cancellation</li> </ul>	uding		Name of John M	Contact aso			1 100 100 100 100	Tele	phone Nun -317-2100	ber	hours (August)		
				FACI	LITY INFO	RMATI	ON							
Name of Facility When Schuyler Colfax Mic	e Abatement is Taking Idle School	Place (3)					Type of Faci	-1-40 man 2000						
Street Address 1500 Hamburg Turr	npike						☐ Subcha	pter 8 (Oth		<-12) ercial buildi	ngs, ho	mes,	etc.)	
City (5) Wayne, New Jersey	07470						Square Feet 99,999		# of 2	Floors	BI 50	dg. Ag	ge	
County (6) Passaic					Code (7) USE ONLY)		Current Use		eing dem e Schoo					
Name of Monitoring F AHERA Consultants	irm Hired by Building C s, Inc.	wner (8)		ASCN 0005			Name of Aba Lilich Corpo		ntractor	(9)				
Street Address P.O. Box 385				16			Street Addres 606 McBrid							
City, State, Zip Code Oceanville, New Je	rsey 08231						City, State, Z Woodland F		/ Jersey					
Project Manager for N John Smoyer	Ionitoring Firm			Telepho 609-65			Telephone N 973-225-84			License N 01104	0.			
Start Date (10) 06/27/2018		Schedule 07/20/20		npletion	Date (11)		Name of OSI Iris Environ			ies, LLC				
Occupancy Status Du	ring Abatement (Check	Only One	e)				Street Addres							
□ Abatement Perf	Vacated During Entire formed Outside of Norra: 7AM-11 PM UNOC	nal Facility	/ Hour		3pm		City, State, Z Union, No	ip Code	0					
Scope of Work (Check	k All That Apply)		- 4											-
□ ≥3 sf or ≥3 lf 図 ≥160 sf or ≥260 lf			enova emoliti				☐ Mi	ni-Enclosu ove Bag Pr	re ocedure	Negative F  / Limited C d Non-Friab	ontaini	ment :	&Ten	t
		0.07/30	Locati									Abate Ty	ment	
Asbestos-Contain TO BE /	tion of ing Material (ACM) ABATED acility 3)	Used Mair	ormal d Sole ntena odial s (12)	ly by		tos Con thermal surfa	scription of taining Materia systems insul- cing, VAT, or niscellaneous)	ation,	(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A									e	
Art Rooms & Guid	ance Area		Χ		Drop Co	eiling 7	Γile		3800	SF	X			
Art Rooms			X		12 X 12	VAT	<b>Mastic</b>		2250	SF	X			
Guidance Area			Χ		Sub Flo	or Pap	er & Mast		1614	SF	Х			
Name of Registered V  Lilich Corporation	Vaste Hauler		H	IJDEP V lauler ID 18724		of Wa		Tonas Maria	f Registe Landfill	ered Landfill				
City, State Woodland Park, Ne	w Jersey					Dispo 07/20	sal Date /2018	City, Sta Morris	ate ville, PA					
Completed by Adriana Olejarova		Title Pre	siden	ıt			Signature	( D	2		ate )7/12/	2018		
ASB-41 (R-06-08)							* Do not use	this form f	or asbes	tos licensur	e exen	npted	activi	ties.



Date of Notification (1) 06/11/2018	)		1	Name of Wayne	Building O Township	wner/O Public	perator (2) Schools	<u> </u>	W Byle	k# 113	2		
Agencies Notified	Type Notification		16.00	Street Ac				JUL 16	2010				
区 EPA 区 DEP 区 DOL	☐ Initial ☐ Amended Amendment #_☐ ☐ Emergency (inclinity justification)	uding	7	City, Stat Wayne,	te, Zip Cod New Jers Contact	e sey 074	170	ESTOS CC	1				
⊠ DCA	□ Cancellation				ITY INFOR	RMATIC	ON						
Name of Facility When Schuyler Colfax Mid	re Abatement is Taking ddle School	Place (3)		- AGII		XIIIA III	Type of Fac						
Street Address 1500 Hamburg Turi	npike						☐ Subcha	apter 8 (Othe	er than K-12) commercial buil	100			
City (5) Wayne, New Jersey	y 07470						Square Fee 99,999		# of Floors 2		ldg. A 0+	ge	
County (6) Passaic				County C	Code (7) ISE ONLY)	-	Current Use		ng demolished) School				
Name of Monitoring F AHERA Consultant	irm Hired by Building C s, Inc.	wner (8)		ASCN 0005			Name of Ab Lilich Corp	atement Cor oration	ntractor (9)				
Street Address P.O. Box 385							Street Addre						
City, State, Zip Code Oceanville, New Je	rsey 08231						City, State, 2 Woodland	Zip Code Park, New	Jersey				
Project Manager for N John Smoyer	Monitoring Firm			Telephor 609-652			Telephone N 973-225-8	No. 400	License 01104	No.			
Start Date (10) 06/27/2018		Scheduled 07/13/20		npletion l	Date (11)		Name of OS Iris Enviror	SHA Monitor nmental La	boratories, LLC				
Occupancy Status Du	iring Abatement (Check	Only One	<del>)</del>				Street Addre						
□ Abatement Per	Vacated During Entire formed Outside of Norre: 7AM-11 PM UNOC	nal Facility	Hour	ment s 7am-	3pm		City, State, Union, N	Zip Code					
Scope of Work (Chec	k All That Apply)								10				
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			enovat emoliti				ΠМ	Mini-Enclosur Blove Bag Pro	ent with Negative e ocedure / <i>Limited</i> d (*) and Non-Fri	Contain	ment	&Ten	t
		ls i	Locati	ion							Abat	ement	
Asbestos-Contain TO BE In F	tion of hing Material (ACM) ABATED acility 13)	Used Mair Custo	(12)	ely by nce/ Staff?		os Con therma surfa	scription of taining Materi I systems insucing, VAT, or miscellaneous	ulation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Art Rooms & Guid	dance Area	Yes	No X	N/A	Drop Ce	iling	Tile		3800 SF	X			
Art Rooms & Guit	Jance Area		X		12 X 12	255			2250 SF	X			
			X				er & Mast	•	1614 SF	X			
Guidance Area	Suidance Area					up		-					
Name of Registered	Name of Registered Waste Hauler Lilich Corporation					of Wa	Yards este 0	Name of Fairless	Registered Land	ifill			
City, State Woodland Park, No	ew Jersey			-		Dispo 07/13	sal,Date /2018	City, Sta Morrisv	te ille, PA				
Completed by Adriana Olejarova		Title Pre	siden	nt		1	Signature		10	Date 06/11	/2018	3	

CKIM)

Date of Notification (1 07/11/2018	)				of Building Isack Boa		Operator (2 ucation	2) Check No. 1171	11) L C	G	7 1	// //	5/
Agencies Notified	Type Notification				Address cond Stre	et			i i i	The same and the same	1 1	/ [[	7/
⊠ EPA ⊠ DEP ⊠ DOL	<ul><li>☑ Initial</li><li>☐ Amended</li><li>Amendment #</li></ul>				ate, Zip C sack, Nev		07601	,		1-6	2018		11
☑ DOH ☑ DCA	☐ Emergency (in justification) ☐ Cancellation	cluding			of Contact Blanchard			8	Telephone Num 201-646-0363	berON NSINO	TRO	L &	
				FAC	ILITY INF	ORMATI	ON			-	T	Share Same	
Name of Facility When Hackensack Middle So		g Place (3)						Facility (4)					
Street Address 360 Union Street							☐ Sub	ochapter 8 (Other t er (i.e. private & co		js, hom	ies, e	tc.)	
City (5) Hackensack, New Jen	sey 07601						Square 15,0		# of Floors 2	Bld 50+	g. Ag	е	
County (6) Bergen					Code (7) USE ON	LY) _	Current	Use (Prior if being Middle S			==11000	20110	
Name of Monitoring Fi The Whitman Compar		Owner (8)		ASCI	M No.			Abatement Contra rporation	actor (9)				
Street Address 7 Pleasant Hill Drive							Street Ac 606 McE	ddress Bride Ave					
City, State, Zip Code Cranbury, New Jersey	08572						City, Sta Woodlan	te, Zip Code nd Park, New Jerse	<b>э</b> у				
Project Manager for M Kevin Lovely	lonitoring Firm			Telepho 732-390			Telephor 973-225-		License No 01104	SI .			
Start Date (10) 07/23/2018		Schedule 08/13/201		pletion	Date (11)		ST 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10	OSHA Monitor onmental Laborate	ories, LLC				
Occupancy Status Du	ring Abatement (Chec	k Only One	e)				Street Ad						
□ Abatement Perform	acated During Entire F med Outside of Norma			ent			City, Sta	te, Zip Code	<u> </u>				
							Union, N	J 07083					
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf		0.70000	enovati emolitio	200.00				Full Containment Mini-Enclosure Glove Bag Proced Non-Exempted (*)	dure / Limited Cor	ntainme		Tent	
Locati	ion of		_ocatio			5			Amount (Specify	177000	bater		
Asbestos-Containi TO BE A In Fa (1:	ng Material (ACM) ABATED cility	Used Mair Custo	Solel ntenan odial S (12)	y by ice/ taff?		estos Co e. therma surf		laterial (ACM) insulation, T, or	SF of LF)	Removal	Repair	Encapsulate	Enclosure
Boiler Room (Special Servi	(000)	Yes	No	N/A	Dellestes	Jakian C	Fire	Database B. Marakas	200.55			8	_
	ces)	X					askets, Fire	Bricks & Mortar	800 SF	X			
Boiler Room		X			Breech Ins	sulation			100 SF	Х			
Boiler Room		Х			Pipe Insul	ation Inc f	iberglass &	Elbow & Joints	200 LF	Х			
Large Boiler Room		X			Boiler 1, 2	, End Cap	Insulation		800 SF	Χ			
Large Boiler Room		Х			Breech Ins	sulation			1000 SF	Χ			
Large Boiler Room		Х			Tank Insul	lation			1000 SF	Х			
Large Boiler Room	3	X	-51		Pipe Insul	ation Inclu	iding Elbow	s & Joints	500 LF	Χ			
Name of Registered W Lilich Corporation	/aste Hauler		Ha	JDEP Wauler ID 8724		Cubic of Was		Name of Re Fairless La	gistered Landfill				
City, State				J		Dispos	sal Date _	City, State			-		
Woodland Park, New Completed by	Jersey	Title				08/13/	2018 ( ignature	Morrisville, d	PA Date				
Adriana Olejarova		Presi	dent			3	Tike	100		: 11/201	8		



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	JUL		16	2018		U

Page Notification   Secret Address   S			(	Pursua	int to NJAC 8:60 an	a 12:1.	20)		i .	111 - 1 - 1 - 1 - 1	11	1 1	11	
Processor Notified   Progress Notified   Processor	Date of Notification (1)		Name o	f Building	Owner/Operator (2)				U	UL 15 2018	-	L.d.	/	
Appear beforded   Top a holdration   Storest address   ASPECIA CONTROL &	7/11/18		Ranco	cas Va	lley Regional School	ol Distr	ict	:	1				1	
DEP			Street A	ddress				1	L.,	10 - 47 - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1			The same	
DEP   SI   Amended   Since	⊠ EPA □ Initial		520 Ja	ckson	ville Road				ASBE		L &		1	
DOL	□ DEP ☒ Amended		City, Sta	te, Zip Co	de					LICENSING	mga shirana kamara s	in + Phone		
South	☑ DOL Amendment # 1		Mt. H	olly, NJ	08060								2000	
Second   Cancellation   FACILITY INFORMATION	☐ Emergency (include	ling	Name of	f Contact				Telepho	ne Numbe	er				
FACILITY INFORMATION   Tage of facility (Nore Abatement is Taking Place (1)   Rancocas Valley Regional High School   Street Address School (K-12)   Subchapter 8 (Other than K-12)   Subchapter 8 (O			Scott	Klein				609-8	54-0848	3				
Name of Facility Where Abatement Is Taking Place (3) Rancocas Valley Regional High School    Service Address   School (K-12)														
School (K-12)   Subchapter 8 (Other than K-12)   Subchapter 8 (O				FA	CILITY INFORMAT	the state of the s							-	
Subchapter 8 (Other than K-12)   Other (Fix. private & Commercial buildings, homes, etc.)						Type of								
Other (Le. private & Commercial buildings, homes, etc.)	Rancocas Valley Regional High School				2010-11-11-11-11-11-11-11-11-11-11-11-11-									
Square Feet   B of Floors   Bidg. Age   80+	Street Address						NATIONAL PROPERTY OF A STREET AND A STREET	STANCE CONTRACTOR				88.1		
Mt. Holly	520 Jacksonville Road						Other (i.e. p	rivate 8	Comme	ercial buildings, hor	nes, etc	c.)		
Mt. Holly	(it) (5)						Engt	# of Floo	rs	Rida Age	-	737		
County (6)   County (6)   County Code (7)   County Code (7)   SChool   County Code (7)   SChool   County Code (7)   SChool   Sc	127-12							1000		M.L. 1817 W				
School   S	TVICETION			County	Code (7)	-			lished)	100.		-	-	-
ASCM No.   Name of Abatement Centractor (9)	County (6)							+	H-11-340					
Street Address   Stree			-100									_		_
Street Address PO Box 365 City, State, Zip Code Berlin, NJ 08009 City, State, Zip Code Woodland Park, NJ 07424 City, State, Zip Code City, State Completed by City, State Completed by City, State Completed by Completed by City, State Completed by City, State Completed by Completed by City, State Completed by City, State Completed by Completed by City, State Completed by City, State Completed by City, State City, State Completed by City, State Completed by City, State City, State Completed by City, State C					Progression (1776)	Department of the								
PO Box 365    City, State, 7jp Code   City, State	Health & Safety Services, Inc.				0090	Unico	rn Contract	ing Co	rp.					
City, State, Zip Gode Berlin, NJ 08009  Telephone No. Berlin, NJ 08009  Telephone No. BS6-452-311  Start Date (10) GF0/27/18  City, State, Zip Code Woodland Park, NJ 07424  Woodland Park, NJ 07424  License No. 01331  License No. 01331  Telephone No. BS6-452-311  Start Date (10) GF0/27/18  City State (10) GF0/27/18  Start Date (10) GF0/27/18  City State GF0/27/18  City State GF0/27/18  City State GF0/27/18  City State GF0/27/18  Completed by GF0/27/18  City State GF0/	Street Address													
Berlin, NJ 08009	PO Box 365					32 W	illow Way						0.000	
Project Manager from Monitoring Firm  Telephone No.  \$56-452-311  973-333-9176  01331  Start Date (10)  \$6/27/18  \$7/20/18  Start Date (10)  \$6/27/18  Start Date (10)  \$6/27/18  Start Date (10)  \$6/27/18  Start Date (10)  \$7/20/18  Start Date (11)  \$7/20/18  Start Date (10)  \$7/20/18  Star	City, State, Zip Code					City, Sta	rte, Zip Code							
Start Date (10)	Berlin, NJ 08009				<u> </u>	Wood	dland Park, I	NJ 074	24				-	_
Start Date (10) 6/27/18  Scheduled Completion Date (11) 7/20/18  Street Address Envirovision Consultants, Inc.  Screet Address Street Address Street Address Street Address Cocupany Status During Abatement (Check Only One)  Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours  Other - Describe: _Sub-8 Occupied Abatement Scope of Work (Check All That Apply)  23 sf or ≥3 lf Senovation Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure  Non-Exempted (*) and Non-Fri	Project Manager from Monitoring Firm			Telepho	ne No.	Telepho	one No.			License No.				
Facility Closed/Vacated During Entire Period of Abatement   Street Address   Street Addr	Jim Proctor			856-4	52-311	973-3	33-9176			01331				
Street Address   Stre	Start Date (10)		Schedule	ed Comple	etion Date (11)	Name o	f OSHA Monitor							
Street Address   Street Address   Street Address   Street Address   20-21 Wagaraw Rd., Bldg. 35-E	6/27/18		7/20/3	18		Enviro	ovision Cons	sultant	s, Inc.					125
Abatement Performed Outside of Normal Facility Hours   City, State, Zip Code   Fair Lawn, NJ 07410		:)			144 142	Street A	ddress							21, 4200 100
Abatement Performed Outside of Normal Facility Hours   City, State, Zip Code   Fair Lawn, NJ 07410	☐ Facility Closed/Vacated During Entire	e Period of Ab	atemen	t		20-21	Wagaraw F	Rd., Bld	g. 35-E					
Some of Work (Check All That Apply)   ≥ 3 sf or ≥3 lf						City, Sta	ite, Zip Code							, married to a
Secope of Work (Check All That Apply)   ≥3 sf or ≥3 lf	(Call (C) - 1900				115500000000000000000000000000000000000	Fair L	awn, NJ 07	410						
Demolition	Scope of Work (Check All That Apply)													1100.00
Demolition   Mini-Enclosure   Glovebag Procedure   Non-Exempted (*) and Non-Friable Procedure   Abatement Type   Non-Exempted (*) and Non-Friable Procedure   Non-Exempted (*) and Non-Exempted (*)	□ >3 sf or >3 lf		X	Renova	ation	X	Full Contains	ment w	th Nega	tive Pressure				9
Glovebag Procedure  Non-Exempted (*) and Non-Friable Procedure  Normality Used Solely by Maintenance/ (13)  To BE ABATED In Facility (13)  Yes No N/A  Throughout Building Throughout Buil	10-10-10-10-10-10-10-10-10-10-10-10-10-1			Demol	ition		Mini-Enclosu	ıre						
Location of Asbestos-Containing Material (ACM)  Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)  Yes No N/A  Throughout Building  Througho	2100 37 67 2200 17						Glovebag Pro	ocedure	<u>:</u>					
Location of Asbestos-Containing Material (ACM)  Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)  Yes No N/A  Throughout Building  Througho							Non-Exempt	ed (*) a	nd Non-	Friable Procedure				
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)  Yes No N/A  Throughout Building Throughout Buil			s Location	n							A			ž.
Maintenance/ Custodial Staff? (12)  Yes No N/A  Throughout Building X  Throughout Building X  Throughout Building X  Ceiling Tile  Throughout Building X  Chalk boards & associated glue dots  Throughout Building X  Chalk boards & associated glue dots  Throughout Building X  Chalk boards & associated glue dots  Throughout Building X  Chalk boards & associated glue dots  Throughout Building X  Chalk boards & associated glue dots  Throughout Building X  Chalk boards & associated glue dots  Throughout Building X  Chalk boards & associated glue dots  Throughout Building X  Throughout Building X  Chalk boards & associated glue dots  Throughout Building X  Chalk boards & associated glue dots  Throughout Building X  Throughout Building X  Chalk boards & associated glue dots  Throughout Building X  Chalk boards & associated glue dots  Throughout Building X  Throughout Building X  Chalk boards & associated glue dots  Throughout Building X  Throughout Building X  Chalk boards & associated glue dots  Throughout Building X  Throughout Building X  Chalk boards & associated glue dots  Throughout Building X  Throughout Building X  Throughout Building X  Chalk boards & associated glue dots  Throughout Building X  Thr	Location of		Normally	,	Ì	Descr	iption of				H	Typ	oe T	
Custodial Staff? (12) surfacing, VAT, or other miscellaneous)  Throughout Building X VAT & Mastic 6,094 SF X Throughout Building X Ceiling Tile 8,500 SF X Throughout Building X Chalk boards & associated glue dots 7,110 Signature  Name of Registered Waste Hauler DNo. O035844 Disposal Date TBD Morrisville, PA  Title Signature  Custodial Staff? surfacing, VAT, or other miscellaneous)  SF or LF) R R R R R R R R R R R R R R R R R R R	Asbestos-Containing Material (ACM)	1								722				
Throughout Building X VAT & Mastic 6,094 SF X Throughout Building X Ceiling Tile 8,500 SF X Throughout Building X Chalk boards & associated glue dots 2,120 SF X X Throughout Building X Chalk boards & associated glue dots 2,120 SF X X X Throughout Building X Chalk boards & associated glue dots 2,120 SF X X X X Throughout Building X Chalk boards & associated glue dots 2,120 SF X X X X X X X X X X X X X X X X X X		1500			(i.e. ti			n,		10 900000000000000000000000000000000000			Enc	m
Throughout Building X VAT & Mastic 6,094 SF X Throughout Building X Ceiling Tile 8,500 SF X Throughout Building X Chalk boards & associated glue dots 2,120 SF X X Throughout Building X Chalk boards & associated glue dots 2,120 SF X X X Throughout Building X Chalk boards & associated glue dots 2,120 SF X X X X Throughout Building X Chalk boards & associated glue dots 2,120 SF X X X X X X X X X X X X X X X X X X	1.0									3, 0, 2, 1	Rem	P	apsu	nclo
Throughout Building X VAT & Mastic 6,094 SF X Throughout Building X Ceiling Tile 8,500 SF X Throughout Building X Chalk boards & associated glue dots 2,120 SF X X Throughout Building X Chalk boards & associated glue dots 2,120 SF X X X Throughout Building X Chalk boards & associated glue dots 2,120 SF X X X X Throughout Building X Chalk boards & associated glue dots 2,120 SF X X X X X X X X X X X X X X X X X X	(13)	Vas		N/A		outer iii.	, central country				BVOI	pair	late	sure
Throughout Building X Ceiling Tile 8,500 SF X Throughout Building X Chalk boards & associated glue dots 2,120 SF X X X Name of Registered Waste Hauler NJDEP Waste Hauler ID No. Cubic Yards of Waste Unicorn Contracting Corp. 0035844 20 Pairless Hills Landfill Fairless Hills Landfill City, State Woodland Park, New Jersey TBD Morrisville, PA  Title Signature Date 7/11/19	Throughout Building	1.03		11,77		VAT 8	Mastic			6.094 SF	-			
Throughout Building X Chalk boards & associated glue dots 2,120 SF X Name of Registered Waste Hauler NJDEP Waste Hauler ID No. Output Yards of Waste Unicorn Contracting Corp. O035844 20 Pairless Hills Landfill Fairless Hills Landfill City, State Woodland Park, New Jersey TBD Morrisville, PA  Completed by Title Signature Date Title						-	III COMMONS				_	1		
Name of Registered Waste Hauler Unicorn Contracting Corp. Unicorn Contracting Corp. O035844 Disposal Date Woodland Park, New Jersey Title  Name of Regustered Landfill Disposal Date Title  Signature  Date Title				-	Chalk hoa			ue dot	s		X			S1-2-7-1
Name of Registered Waste Hauler Unicorn Contracting Corp. Unicorn Cont	THIOUGHOUT BUILDING		^		Chair Doa		JJOCIULEO BI	30 000			_	$\dashv$		
Unicorn Contracting Corp.  O035844  20  Fairless Hills Landfill  City, State  Woodland Park, New Jersey  Title  Disposal Date TBD  Date  Title			wines		I 10 N -	Culti- V	ande of Waste			Name of Regustered				
City, State  Woodland Park, New Jersey  Completed by  Title  Disposal Date  TBD  City, State  Morrisville, PA  Date  Tall 118					iler ID No.	To the second	ards or waste			1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -				
Woodland Park, New Jersey  TBD  Morrisville, PA  Completed by  Title  Signature  7/11/19			00358	44		-	10.				.01111		_	
Completed by Title Signature Date	City, State						i Date	,						
7/11/10	Woodland Park, New Jersey						Signature			INIOTHSVIIIe, PA	T <sub>Det</sub> -			
Zhivko Nikolov   President   //11/18	Completed by						Digitature /		-		1	/10		
	Zhivko Nikolov	Presid	ent					\	/		1/11	110		

P	A THE			CATION	OF ASB	ESTOS	ABATE		C	le	ich.	17	8	$\supset$	1
Date of Notification (1) 7/10/18					f Building Universi		Operato	(2)	EC		WI	E F	J		(
Agencies Notified	Type Notification		-	Street A		.,	- i	1005				7/			
× EPA	Initial			36 Ma	dison A	venue	Total Park		.111	1.0		Section Colonial			
DEP	× Amended		r	City, Sta	ate, Zip Co	ode		11 11	UUL	1 6	2018		1		
X DOL	Amendment			Madis	on, NJ	07940		1				1			
X DOH X DCA	Emergency (i justification)	ncluding		Name of	f Contact				ASBESTO	Let	ephone N	mber	1		
X DCA	Cancellation			Mark I	Meher		1		LiC	EN97	3-408-3	309	en and an		
Nome of English Where	A b = 4 = = - 4 != T = 1. ! = -	DI //	2)	FACI	LITY INFO	ORMAT	ION	-				Spiriter and a study	ande		
Name of Facility Where A Drew University	Abatement is Taking	Place (	3)					Туре	of Facility (4	1)					
Street Address									School (K-12			40)			
36 Madison Avenue									Subchapter Other (i.e. p				dinas.	home	es.
	<del></del>								etc.)				- 55		
City (5) Madison								100000000000000000000000000000000000000	re Feet	And Same	Floors	- 23	Bldg. A	ge	
County (6)	<del></del>			County (	Codo (7)			10,0		2			30		
Morris					USE ONLY)		_	Coll	ent Use (Prio ege	r ii bei	ng aemoli:	snea)			
Name of Monitoring Firm Health & Safety Se		wner (8)	)	ASCM 117	1 No.				tement Con ronmental			С			
Street Address							Street	Addres	SS						
PO Box 364 City, State, Zip Code									83, 4 E G	ate D	rive				
Berlin, NJ 08009									ip Code I, NJ 074	18					
Project Manager for Mon	itorina Firm		- 1	Telephor	ne No.			hone N	999		License	No			
Jim Proctor	2				39-2432		16.5950766	764-2			703				
Start Date (10) 7/20/18				npletion (	Date (11)		Name	of OSI	HA Monitor						
Occupancy Status During		7/22/1					Street	Addres	20						
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Scope of Work (Check A	II That Apply)														
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Freehold Cartage	37.30-153.71		Н	auler ID		of Wa			Western	Page 10					
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N (F 35 U.)				FAC	ILITY INFO	RMAT	TON			1,				AND STATEMENT		-
Name of Facility Where a Drew University	Abatement is Taking	Place	(3)					Туре	of Facility (4	)						
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Street Address								Addres		0617	ices,	LLU				
PO Box 364									3 33, 4 E Ga	te Di	rive					
City, State, Zip Code									p Code							
Berlin, NJ 08009									NJ 0741	8						
Project Manager for Mon	itoring Firm			Telepho	ne No.		Teleph	one No	).		Licen	se No				
Jim Proctor					39-2432		973-	764-2	276		703					
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Scope of Work (Check Al	II That Apply)										-			-		
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9870 A S S S S			11000	auler ID		of Was			Hame of Ke	gister	eu Lan	uilli				
City, State						Dispos	sal Date		City, State				-			
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	ype Notification		Sta	reet Add	19 GRE	こん	AUE		A CONTRACTOR OF THE PARTY OF TH	IUL.	10	201	8
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DOH L	<ul> <li>Emergency (including justification)</li> </ul>	Ring	Na	me of C	Contact		•		973 - 37				
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Name of Facility Where Abate	ement is Taking Place	(3)		FACIL	ITY INFORMA	ION	Type of Facil	ity (4)					
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Street Address			<u> </u>				Carpoha	nter 8 (0	ther than K-12) te & commercial b	nilding	s hon	nes, etc	2)
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County (6)	٥			ounty Co	ode (7) SE ONLY)				chool				
		- (9)	1	ASCM	No	Name	of Abatement						$\neg$
Name of Monitoring Firm His		1 (0)	- 1		012								
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City, State, Zip Code						City, St	tate, Zip Code						
ENGLEWOO	. Th, G	076	31			Hack	censacl	c, N.	J 07601				_
Project Manager for Monitori			To	elephone		Telepho	one No.		License No				
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Start Date (10)	.0	cheduled (	4		^				-				
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Facility Closed/Vacated  Abatement Performed C	During Entire Period Jutside of Normal Far	ility Hour	ment S				tate, Zip Code						
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Best Removal City, State	Inc			1710	) 9 Dist	osal Date		y, State	va Buter	<u>u</u>	35.	2,	1
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	e of Notification (1)					f Building				11:00		-		- Children	and the factor of	711	111
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M	DCA	Cancellation				Cataldo					97	3 457	252	26			
Nar	ne of Facility Where A	Abatement is Taking	Place (	3)	FAC	ILITY INFO	ORMA'	TION	Tun	e of Facility	(4)						
	fayette School	taking	. 1000 (	<i>J</i> ,					Process.		*						
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	(5)								Car	etc.)							
	natham								0.000	are Feet ,000	1	f Floors	5	- 1	ldg. A 0+	ge	
Cou	inty (6)			Т	County	Code (7)			D	rent Use (Pri		na dan	aaliah	1 -	UT		
	orris					USE ONLY	)			hool	or it bei	ng den	IOHSI	ea)			
Nan	ne of Monitoring Firm	Hired by Building O	wner (8)		ASCN	/ No		Name		patement Co.	ntractor	(0)					
RK	Cocupational&E	Environmental A	nalysis	,inc.	0009			The second secon		nstruction			ion I	nc			
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	, State, Zip Code						ON THE STATE	City, S	state.	Zip Code							-
Ph	illipsburg, NJ 088	365								NJ 07512							
	ject Manager for Mon	itoring Firm		T	Telepho	ne No.		Teleph	none	No.		Licen	se No	).			
Pa	t McGuinness				908 4	54 6316		973	256	7010		0066	66				
	rt Date (10)				pletion	Date (11)		Name	of OS	SHA Monitor							
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-	cupancy Status During	Abatement (Check	Only Or	ne)	U			Street									
×	Facility Closed/Vaca	ated During Entire P	eriod of	Abatem	ent			265	Rou	te 46 Ste.	3D						
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	ne of Registered Was				JDEP W			Yards		Name of	Registe	red La	ndfill				
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200	owa, NJ						07/1			Tullyton		1					ĺ
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Data of Notification (1) 07/09/18			Name o	of Building Ol Distric	Ovmer/Ope t of Chath	rator	(2)	-	, E	-		48	_	+	
Agencies Notified Type Notification  EPA Initial  DEP Amended	1			ddreas syersylle	Road	With the Louisian	$\uparrow$		and the state of t		M	1	5	E	ΓŴ
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Name of Facility Where Abatement is Taki	on Blace (1	***************************************	FAC	ILITY INFO	DRMATION		-	-	77-14-040	-			citare 1	× 5-11	
Lafayette School	HA LINGTH (C	a)						0f F8	cility (4)	)					ORTHO
Street Address 221 Lafayette Avenue	1 100 100 100 100 100 100 100 100 100 1	THE STREET, ST.		mem ensettemester	odrienijusem internacion		X	Sund	ol (K-12 hapter a (I.e. pri	(Othe	rthan K	12)	LICE		
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Name of Monitoring Firm Hired by Suilding RK Occupational&Environmental	Owner (8) Analysis	Inc.	ASCN 0009		N	lame Bako	of At	itunie	nt Centr	actor (	9) oration	n Inc			
Street Address 401 St. James Avenue	**************************************			***************************************	S	treet	Addi	28	Ste. 3	PPENOVE SHAPES		1, 1110.		-	
City, State, Zip Code Phillipsburg, NJ 08885	The second second		чттороши	the transmission in the registration.	6	lly, S	tale	3p 00	de	124		-			
Project Manager for Monitoring Firm Pat McGuinness	**************************************		Telepho 908 4	na No. 54 6316	171	eieph	lons.			100	License 00666			dancimi	
Start Date (10) 07/10/18	07/12/	15	npletion	Date (11)	N	ema	of C	FIA M			oration				
Occupancy Status During Abatement (Che			***********	on Commission and Commission of Commission o	30	trest.	Addi	38					***************************************		
Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other - Describe: TUE: 37% - 1154 WED	Tal Facility	Hours			C	lly. S	tate.	Ip To		D	EXPERT AND DESCRIPTIONS		-	******	_
Scope of Work (Check All That Apply)						00	WEL.	43 07	\$12	Charles and services and	-	manus parcarca que y			
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Asbestos-Containing Material (ACM) <u>IO BE ARATED</u> In Facility  (13)	Me	ntena odial ( (12)	nca/	Asbest (i.e.	tos Containi Ihermal sys surfacing other misc	items	inst T, o	allon,	A)	(Sp	ecify or LF)	Rentiva	Керай	Encapezado	Endouse
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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 7 / /18 Street Address Agencies Notified Type Notification 400 SOUTH ORANGE AVENUE EPA Initial Notification City, State, Zip Code DEP Amended Notification SOUTH ORANGE, NEW JERSEY 07079 DOL Cancellation DOH On Hold Name of Contact Telephone Number DCA **EMERGENCY NOTIFICATION** 973-761-9000 EXT. 5283 ENSING 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., homes, etc.) Street Address Square Feet # of Floors Bldg. Age 400 SOUTH ORANGE AVENUE - CORRIGAN HALL 40.000 3 40+ City (5) County (6) Current Use (Prior if being demolished) County Code (7) SOUTH ORANGE ESSEX (STATE USE ONLY) UNIVERSITY Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) TTI ENVIRONMENTAL INC. 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 JERSEY 08057 SUFFERN, NEW YORK 10901 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number JIM GUILARDI 856-840-8800 845-369-7500 1101 EXPECTED START DATE (10): (RESTART) Sched. Completion Date (11) Name of OSHA Monitor /18 Year 7/ 13 QUALITY ENVIRONMENTAL SOLUTIONS & TECH. 9/ 13/ /18 Day Month 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-12AM SATURDAY & SUNDAY 7AM-12AM City, State, Zip Code WAPPINGERS FALLS, NY 12590 Scope of Work (Check all that apply) Full Containment Demolition Mini Enclo >3SF OR LF

X >160 SF OR 260 LF  Location of Ashestos-containing					Friable Procedure						
Location of Asbestos-containing Material (ACM)	norr	Locationally under	ised	Containing M	of Asbestos- aterial (ACM)	Amount	RE	R	7	ment T	Гуре
TO BE ABATED in Facility (13)	Main	t/Cust taff (12	odial	(ie. Therma insulation, su or other mis	rfacing, VAT,	(Specify SF or LF)	REMOVAL	REPAIR	ENCAPSUL	ENCLOSUR	
	Yes	No	N/A						=	72	
2nd Floor Room 62			x	Floor Tile Mastic	DELETED SCOPE	775 SF			T		
2nd Floor Room 62			х	Ceiling Plaster		775 SF					
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		-	-								
Name of Registered Waste Hauler NEWARK CARTING INC.	NJDEP Hauler			Cubic Yards of Waste	Name of Regist	ered Landfill					
369 RAYMON BLVD.	The second second second	913			GRAND CENT	RAL SANITARY	LAND	HILL			
City, State NEWARK, NEW JERSEY 07105				Disposal Date 7/13-9/13/2018	City State PLANFIELD TO	OWNSHIP, PA		200			10
Completed by (Print or Type) Title				Cianatura	1 / 1111	15	_	-			1 11

BENJAMIN SANCHEZ

DIRECTOR OF OPERATIONS

nous			ICATION	OF ASI	ew Jersey BESTOS ABATE 3:60-7 and 12:12							3/6	2	27
Date of Notification (1)	·	(10	irauani t	Nan	ne of Building C ON HALL UNIV	)wner/C		(2)	of Property of	enturents.	-		20	77.75
6 / 14 /18					et Address				oracing.	臣	0	E	n n	11 1
Agencies Notified Type Notification		- 1-72		_	et Address SOUTH ORANO	>E A\/E	NIL IC	(C) And (C)	171	匠	1	L,	11 /	y E
					_	Section in the section	NUE		1)	1	N. S.			
DEP Amended Notification  X DOL Cancellation					State, Zip Code JTH ORANGE, N		RSEY 07	079		The same of the same of	1111	1	£ 91	110
X DOH On Hold				Nam	e of Contact			Telephone Nu	mher	1	UUI		V 13	HU
X DCA EMERGENCY NOTIFIC	CATION			VIC	TORIA PIVOVAR	RNICK		973-761-9000						
N			FAC	ILITY INF	ORMATION					-	arrange that the rest			1201
Name of Facility Where Abatement is Taking Place	(3)						of Facilit			AS	DESI	CEN	CINIC	TIVE
SETON HALL UNIVERSITY							School (K Subchapt	er 8 (Other than	K-12		**********		SING	
Street Address						X	are Feet	private & comm	icl. bid	lgs., h		etc.)		-
400 SOUTH ORANGE AVENUE - CORRIGAN HALL							0,000	3			Di	40+		
City (5) County (6)				Cour	nty Code (7)	Curre	nt Use (P	rior if being dem	olishe	d)				
SOUTH ORANGE ESSEX				(STATI	E USE ONLY)	UNIVE	ERSITY							
Name of Monitoring Firm Hired by Building Owner ( TTI ENVIRONMENTAL INC.	(8)				ASCM No.			ement Contract						
Street Address					3			MENTAL COR	PORA	TION				
1253 NORTH CHURCH STREET							Address	OCK ROAD						
City, State, Zip Code				_			State, Zip						_	
MOORESTOWN, NEV	W JERSE	Y 0805	7					W YORK 10901						
Project Manager for Monitoring Firm		Telep	hone No	ımber			none Nun		ense N	Numbe	er			
JIM GUILARDI			340-8800			845-36	69-7500	110	1					
EXPECTED START DATE (10): (RESTART)	Sched.			ate (11)	W.1565000		of OSHA							
7 / 13 /18 Month Day Year	Мо		/ 1:	711	/18	QUAL	ITY ENVI	RONMENTAL S	SOLU	TIONS	& TE	CH.		
Occupancy Status During Abatement (Check only one)	IVIO	nun		Day	Year	Stroot	Address			-	_			
Facility Closed/Vacated During Entire Period		ment					ROUTE 9							
Abatement Performed Outside of Normal Fa	cility Hou		scribe:			10701	(OOIL 3							
X Other - Describe: MONDAY -FRIDAY 7AN	Л-12AM					City, S	state, Zip	Code						
Scope of Work (Check all that apply)						1		WAPPINGER	S FAL	LS, N	IY 125	90		
Demolition X	Renova	stinn			X Full Conta									
>3SF OR LF	_IKEHOV2	111011			Mini Enclo Glovebag		LIFO							
X >160 SF OR 260 LF					Non-Friab									
Location of	ls l	Locatio	in		Description of As						Abater	ment T	vne	
Asbestos-containing	norn	nally us	sed		ontaining Materi			Amount	R				,,,,	
Material (ACM)		olely by	9		(ie. Thermal sy			(Specify	REMOVAL	REPAIR	NO.	S		
TO BE ABATED		t/Custo			sulation, surfacion			SF or LF)	18	1 R	P	0		
in Facility (13)	Yes	aff (12 No	N/A	,	or other miscella	ineous)			P		ENCAPSUL	ENCLOSUR		
2nd Floor Room 62	163	140			20 02				-	+-	1	~		
	-	-	x FI	oor Tile N	Mastic			775 SF	-	-				
2nd Floor Room 62			x C	eiling Pla	ster			775 SF						
18 July Lawrence Control of the Cont							-3			1				
									+-	+	-	-		
	-	-	$\vdash$						-	-		-		
	-	-												
									+	+				-
	+-	-	-						-	-				
	-													
	1								1	1	-			
	+	-							-	1	-			
Name of Registered Wasta Hauter	NIDES	10/4		L1. 17		1								
Name of Registered Waste Hauler NEWARK CARTING INC.	NJDEP Hauler I		Ci	ubic Yard	s of Waste 30	Name	of Registe	ered Landfill CAL SANITARY		-u ·				
369 RAYMON BLVD.	The state of the s	913		1	30	GRAN	D CENTR	AL SANITARY	LAND	FILL				
City, State	-		Di	sposal D	ate	City_S	tate //	//			1	1		-
NEWARK, NEW JERSEY 07105				13-9/13/2	2018	PLAIN	FIELD TO	NSHIP, PA		p	1.1	11		
Completed by (Print or Type) BENJAMIN SANCHEZ Title DIRECTOR OF OF	PERATION	NS.			Signature	1/	-X X	Date	1	7/	10	1/11	1/	
DITECTOR OF OF	-1011101	10		- 1	/	//	/10/		V	1 1	1 4	111	/	- 1



PAID			CATION	ate of Ne OF ASB to NJAC	ESTO	SABATE		Designation of the Control of the Co		E C	E	Comment	$\mathbb{V}$	E	īn
Date of Notification (1) 07/12/2018				f Building					M						
Agencies Notified Type Notification		_	Street A	lin Town	isnip	Public S	scnoc	- 11	Ш	JUI	_ 1	6	2018		14
The state of the s				Amwell	Road			9.5	al book s						Khataa
EPA Initial Amended		-	ACED STATES	ate, Zip Co	0.0000000000000000000000000000000000000			-		SBEST	100	400	ITD	11 0	
➤ DOL — Amendment #_				rset, NJ		3		9	A			4SIN		/L CI	
Emergency (in justification)	cluding	-	Carry Carry	f Contact					Tele	ephone	Num	ber	welloan		ymeus nychtus b
DOH justification)  Cancellation			Mr. Jo	nathan	Toth				2000	32) 873					
'			FACI	LITY INFO	ORMA	TION									
Name of Facility Where Abatement is Taking I Franklin Middle School	Place (	3)					Туре	of Facility	(4)						
Street Address							×	School (K- Subchapte		or than l	( 12)				
415 Francis Street								Other (i.e.					lings,	home	es,
City (5)							Sans	etc.) are Feet	# of	f Floors		TB	ldg. A	ae	
Somerset								000+	2	1 10010			0+	90	
County (6)				Code (7)	_		Curre	ent Use (Pri	ior if being	ng demo	olishe	ed)			
Middlesex			(STATE	USE ONLY			Sch	loor							
Name of Monitoring Firm Hired by Building Ow	/ner (8)	)	ASCN	ΛNo.		1		atement Co		(9)					
AHERA Consultants, Inc Street Address							and the last of th	Diagnostic	LLC						
P.O. BOX 385						Street 16 G		ild Ave							
City. State, Zip Code				12 17 11 11				Zip Code						7.000	
Oceanville, NJ 08231						525.5		dale, NJ	07403	3					
Project Manager for Monitoring Firm			Telepho			Teleph				Licens	e No				
Mr.Eric Clarkson			*	652-183	3			-3995		0118	1				
	chedul 18/15/		pletion	Date (11)		The State of the S		HA Monitor Diagnostic							
Occupancy Status During Abatement (Check C	120000000					Street			LLC						
Facility Closed/Vacated During Entire Pe	-		ent					ild Ave							
Abatement Performed Outside of Normal	Facility	Hours	ent			City, S	state, Z	ip Code							
Other – Describe: Occupied		Supplement				Bloo	ming	dale, NJ	07403	3					
Scope of Work (Check All That Apply)	15200000						_								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renovat Demoliti				×	Mi	II Containm ni-Enclosur ovebag Pro	е	Negativ	e Pr	essur	e		
	72 200							n-Exempte		d Non-F	riable			San San San	
		Location											Abate Ty	ment pe	
Location of Asbestos-Containing Material (ACM)		ed Solel		Ashes		escription ntaining N		I (ACM)	۸.	mount					
TO BE ABATED		iintenar todial S			therma	al systems	s insul		(S	Specify	ĺ	Re	R	Enca	Enc
In Facility (13)		(12)			surf	acing, VA miscellar	T, or neous)		SF	or LF)		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A					·				a	7	late	ıre
Boy's Locker Room Restroom (525)			Х	Ce	ramic	Wall Ti	le Mo	ortar	45	50 SF		Х			
Girl's Locker Room Restroom (529)			X	Ce	ramic	Wall Ti	le Mo	ortar	45	50 SF		Х			
2nd Floor Boy's Restroom (213)			X	Ce	ramic	Wall Ti	le Mo	ortar	32	25 SF		Х			
2 Floor Girl's Restroom (209)			X	Ce	ramic	Wall Ti	le Mo	ortar	37	75 SF		Х			
Name of Registered Waste Hauler		0.001	JDEP W		0.000	c Yards		Name of	Registe	red Lan	dfill				
Hazmat Diagnostic LLC / Newark Car	ting Ir	20	auler ID )35440	No. 0/4509	of W	)		G.R.O.	54-007 (157-00) C.	North /	Fai	rless	Lar	dfill	
City. State Bloomingdale, NJ / Newark, NJ					Disp TBD	osal Date )		City, Stat		PA					
Completed by	Title					Signature	10		<u> </u>	T	Date	9			
Tatiana Rotaru	Adm	inistra	tive As	ssistant			The	-			07/	12/2	2018		



Dete - (1)					1								
Date of Notification (1)  6 /	27 /	18				of Buildin tgers Uni	g Owner/Operator ( iversity	E (Gob	1805-23/18	Chk. #	5081		
Agencies Notified	Type Notifica	ation			Stree	t Address	1/2	31		111111			
⊠ EPA	☐ Initial				33	Knightsb	ridge Road	111					
⊠ DOLWD	Amended				City,	State, Zip (	Code	M 201 1	6 2018	凹			
☑ DHSS □ DCA	Amendme	_	•	ř	Pis	cataway,	NJ 08854	No.	2				
(NJAC 5:23-8)	justification		Juding		Name	of Contac	t	ASBESTOS	Telephone M	ımber [			
- 12°	☐ Cancellat	ion			Joa	an Stanto	on, PE	LICE	SIN848-445-2	419			
					FA	CILITY IN	IFORMATION						
Name of Facility Where A	batement is T	aking	Place	(3)				Type of Facility	(4)				
Building #3716 & 37	17 (ONE B	UILD	ING)					School (K-1					
Street Address									8 (Other than K- private and comm		ildina		
581 Taylor Road								homes, etc.		ilei Giai bi	munig	15,	
City (5)								Square Feet	# of Floors	BI	dg. A	ge	
Piscataway								1875	1		50		
County (6)	16)				Cou	nty Code (7	)(STATE USE ONLY)	Current Use (P	rior if being demo	olished)			
Middlesex								Vacant					
Name of Monitoring Firm I	Hired by Build	ling C	wner (	8)	ASCM	No.	Name of Abateme	ent Contractor (9	)				
Criterion Laboratori	es						Asbestos and	d Mold Service	es, Corp.				
Street Address							Street Address		H-				
400 Street Road							3859 Sylon B	oulevard					
City, State, Zip Code							City, State, Zip Co	ode					
Bensalem, PA 19020	)						Hainesport, N	1J 08036					
Project Manager for Monit	oring Firm			Tel	ephone	No.	Telephone No.		License No.				
Mike Panepresso				2	15-244	-1300	609-702-0400		00862				
Start Date (10)	PO10000				etion Da		Name of OSHA M	lonitor					
7/13/	18	8	3 /	6	<u> </u>	18	EMSL Analyt	ical, Inc.					
Occupancy Status During	Abatement (0	Check	only o	ne)			Street Address						
☐ Facility Closed/Vacated							200 U.S. Rou	te 130 North					
Abatement Performed							City, State, Zip Co	ode					
Time of Abatement:	AIVI	PIV		_PIV		AIVI	Cinnaminson	, NJ 08077					
Scope of Work (Check all	that apply)						П Б.:II Соли	-1					
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>			⊠ Re □ De				☐ Mini-Enc ☐ Glovebag		gative Pressure				
<u>⊠</u> <u>−</u> 100 31 01 <u>−</u> 200 11			□ ре	HOIL	OII		⊠ Non-Exe	mpted (*) and No	n-Friable Proced	dure			
			1	Loca						Ab	atem	ent T	уре
Location of		,		lorma	ally ely by		Description o			R	R	Щ	Ш
Asbestos-Containing N TO BE ABA		'	Ma	nten	ance/		stos Containing Ma ., thermal systems		Amount (Specify	Removal	Repair	ıcar	Clo
IN Facility	/		Cust	odial (12	Staff?	, , , ,	surfacing, VAT,	or	SF or LF)	val	_	Encapsulate	Enclosure
(13)			Yes	No	N/A	1	other miscellane	ous)				ate	
Exterior 3716						Transit	e Siding		1875 SF				
Exterior 3717						Transit	e Siding		1875 SF		П	П	П
			$\overline{\Box}$										
None of Decision 1144						<u></u>					Ш	Ш	Ш
Name of Registered Waste	e Hauler			1.53	NJDEP I Hauler II		Cubic Yards of Waste	Name of Regis					
Champion					32707		5	Grand Cer	ntral			uru.	
City, State							Disposal Date	City, State					
Hainesport, NJ							8/6/18	Penn Argy	le, PA				
Completed By (Print or Type	oe)	Title					Signature			Date	10.1		
Kimberly Trumbetti		Of	fice (	oor	dinato	r	LPXI 1			7-12	-18	1	
ACD 44							TV X			PC 10257	- 35 3		

ASB-41 MAY 11

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

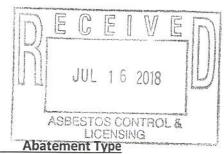
OK1004, 10305/10006

PAID

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

Date of Notification (1)					Nam	e of Buildir	na O	wner/Operator (	2)	maron. Si		-		TOTAL PROPERTY.
	12 /	18			R	utgers, 0304 103	The	State Uni	versity of N	MD) 192 H	806-5	338	<u></u>	heck
Agencies Notified	Type Notific	cation			Stre	et Address				Imi				Total Control
☑ EPA ☑ DOLWD	☐ Initial	á			RI	EHS, 27 R	oad	d 1, Bldg. 408	6 Livingston (	Campus JU	L 1	6 21	118	1
☑ DOLWD	Amende Amendn				City,	State, Zip	Cod	e					de de Septembro	-
□ DCA	☐ Emerger			a a	Pi	scataway	, N.	J 08854		f		~		
(NJAC 5:23-8)	justificat			3	Nam	e of Contac	ct			Telephone Nu	nber	INO	HOL	. či
	☐ Cancella	ation			Mi	chael F. S	Smi	th		848-445-25	50	SING		
			- 25/2		FA	CILITY IN	NFO	RMATION						
Name of Facility Where A	batement is	Taking	g Place	e (3)					Type of Facility	(4)		-		
Rutgers Livingston	Campus- I	Bldgs	s. 408	6, 40	87 & 4	155			☐ School (K-1					
Street Address										8 (Other than K-1 private and comm		uildin	76	
27 Road #1									homes, etc.		erciai L	ullali	ys,	
City (5)									Square Feet	# of Floors	E	Ildg. A	ge	
Piscataway, NJ County (6)					1000	ati Cada /	71/07	FATE LIGE ONLY	Company Harris	1-161-1-1	:			
Middlesex					Cou	nty Code (	(51	TATE USE ONLY)		rior if being demo	isnea)			
	11. 11. 5. 7	11 6		(0)	1000		1		Academic					
Name of Monitoring Firm TBD	Hired by Bull	aing C	Jwner	(8)	ASCN	I No.	1000	ame of Abateme		)				
Street Address							_	AbateTech, In	ic.			_		
Street Address								reet Address	DO D 25					
City State 7in Code								30 Maple Ave						
City, State, Zip Code							1	ty, State, Zip Co						
Drainet Manager for Menit	asiaa Fissa			17-1	1	N.	_	Lumberton, N	J 08048	T N				
Project Manager for Monit	oring Firm			rei	ephone	NO.		elephone No.		License No.				
Start Date (10)	10	Cahad	ulad C	amal	tion D	ate (11)		609-265-2107		00529				
7 / _25 /					9 /		100	ame of OSHA Mo EMSL Analytic						
					_ ′				uai					
Occupancy Status During	15 Karati in 12 Kari						3550000	reet Address						
☐ Facility Closed/Vacated ☐ Abatement Performed						ecribe		200 Route 130						
Time of Abatement:							51833	ty, State, Zip Coo						
							,	Cinnaminson,	NJ 08077					
Scope of Work (Check all	шат арріу)							☐ Full Conta	inment with Ned	gative Pressure				
☐ ≥3 sf or ≥3 lf			⊠ Re					Mini-Enclo	osure					
≥160 sf or ≥260 lf			☐ De	moliti	on			⊠ Glovebag             ⊠ Non-Exem	Procedure	n-Friable Procedu	ire			
			ls	Loca	tion	1		Z Hon Exon	,p.oa ( ) a.ia 110			atem	ont T	VDA
Location of	of		1	Norma	lly			Description of				_		-
Asbestos-Containing M		1)		d Sol	ely by			Containing Mate		Amount	Removal	Repair	ince	Enclosure
TO BE ABAT IN Facility					Staff?	(i.e.		ermal systems ir surfacing, VAT,		(Specify SF or LF)	ova	1	ısqı	nso
(13)				(12)		_		ther miscellaneo		0. 0. 2. /	-		Encapsulate	θ,
			Yes	No	N/A								.25	
See Attached	20.25.1100 1.111 2.4700.			$\boxtimes$		See Atta	ach	ed		See Attached				
Name of Registered Waste	Hauler			N	JDEP '	Waste	Cul	bic Yards of	Name of Regis	stered Landfill				
AbateTech, Inc.				F	lauler II 18750			iste IO	Fairless La	andfill				
City, State				-				posal Date	City, State					
Lumberton, NJ							8	3/29/18	Tullytown,	PA				
Completed By (Print or Typ	oe)	Title						Signature	ā	D	ate ,			
Gwendolyn Trumbet		O	perati	ons	Coord	inator		0	ust		7	12	18	

#### Scope of Work Cont.



Location of ACM	Used for Maint.	Description of ACM	Amount	Abatement Type
Building #4086	NO	Roof Flashing	125 SF	Removal
Building #4086	NO	Floor tile	6,884 SF	Removal
Building #4087	NO	Floor tile	7,732 SF	Removal
Building #4087	NO	Mastic	43 SF	Removal
Building #4087	NO	Furnace Gasket	5 LF	Removal
Building #4087	NO	Furnace Door Packing	2 SF	Removal
Building #4087	NO	Roof Flashing	125 SF	Removal
Building #4155	NO	Transite Ceiling Panels	1,400 SF	Removal

COCK

				(F	ursu	ant to NJ	IAC 8	3:60 and 5	5:16	5)	M		C	E	W	E	Po
Date of Notification (1)					Nan	ne of Buildi	ing Ov	vner/Operat	tor (2	2)			<b>(b)</b>		U	므	11
_ 7 / _	6 /	1	8							/ Job #1803	528	4 Che	ck#				
Agencies Notified	Type Notif	fication			Stre	et Address							JUL	16	201	3	116
⊠ EPA	☐ Initial				100000000000000000000000000000000000000	34 Millbur		enue				defendance					
⊠ DOLWD						State, Zip			-	-		ACR	ESTO	S CC	MITE	OI 8	
☑ DHSS ☐ DCA	Amend		- T		- 2000	illburn, N				- 1		MOD		ENSI		<i></i> L	
(NJAC 5:23-8)	☐ Emerge justifica		iciuair	ıg		ne of Conta				Lea Company	Te	elephor	ne Nu	mber		ALL PROPERTY OF	(Number of the
	☐ Cancell				Ca	arlos Edm	nund	0				973-3			t. 14	5	
					F/	ACILITY II	NFOF	RMATION									
Name of Facility Where Al	batement is	Takin	g Plac	e (3)			0,	tini ti i oit		Type of Facility	(4)						
Hartshorn ES									11.	School (K-1							
Street Address		00-1							-	☐ Subchapter	8 (0	ther tha	an K-1	2)			
400 Hartshorn Drive										Other (i.e., homes, etc	privat	te and d	comm	ercial b	uildin	gs,	
City (5)				V-00-12-1						Square Feet		of Flo	ors	B	Ildg. A	ae	
Short Hills, NJ 07078	3										1.				g. r	90	
County (6)					Cou	inty Code (7	7)(STA	TE USE ONLY	Y) (	Current Use (P	rior if	being	demol	ished)			
Essex										School							
Name of Monitoring Firm H	lired by Bui	ilding (	Owner	(8)	ASCN	No.	Nan	ne of Abate	emen	nt Contractor (9	)						
Whitman Companies	5			2000			Α	bateTech	, Inc	c.	f)						
Street Address							Stre	et Address	i	***							
7 Pleasant Hill Road							30	0 Maple A	ve.	PO Box 25							
City, State, Zip Code							City	, State, Zip	Cod	le							
Cranbury, NJ 08512							L	umberton	ı, NJ	08048							
Project Manager for Monito	ring Firm			Tele	phone	No.	Tele	phone No.			L	icense	No.				
Kevin Lovely				7	32-390	-5858	60	9-265-210	07			00529	9				
Start Date (10)						ate (11)	Nan	ne of OSHA	Mor	nitor							
6/27/					_ /	18	E	MSL Anal	ytic	al							
Occupancy Status During A							Stre	et Address	r-=112								
☐ Facility Closed/Vacated	During Enti	ire Per	iod of	Abate	ment		20	0 Route 1	130	North							
Abatement Performed O Time of Abatement:	outside of N	lormal	Facility	/ Hou	s - Des	scribe	City,	State, Zip	Code	e					9-00		
		PIV	w	PIVI-		AIVI	Ci	nnaminso	on, I	NJ 08077							
Scope of Work (Check all the	nat apply)												Resort Cont				
≥3 sf or ≥3 If			⊠ Re	novati	on			☐ Full Co		nment with Ne	gative	Press	ure				
			☐ De	molitio	n			Gloveb	ag F	Procedure							
			- 1-			T		⊠ Non-Ex	xemp	oted (*) and No	n-Fria	able Pr	ocedu	ire			
Location of				Locat lorma				Description	of					Ab	_	ent Ty	/pe
Asbestos-Containing Ma	terial (ACM	1)		d Sole		Asbes		ontaining M		rial (ACM)		Amou	nt	Rer	Repair	E	Enc
TO BE ABATE IN Facility	D			ntena odial		(i.e.		mal systems				(Speci		Remova	oair	aps	Enclosure
(13)			1970000	(12)				rfacing, VA				SF or L	.F)	<u>a</u>		Encapsulate	ıre
			Yes	No	N/A					*						e	
Bathroom 113A				$\boxtimes$		Floor til	e & N	/lastic			1011	25 SI	E		П	П	П
																	-
				(mines)	12.75											Ц	Ш
								NT (4-6-2-5-									
Name of Registered Waste H	Hauler			10000	JDEP V	(1) A		Yards of	1	Name of Regis	tered	Landfi	H				
AbateTech, Inc.				H	auler IC <b>18750</b>	3	Wast 40	е		G.R.O.W.S	. Lar	ndfill					
City, State					.0700			sal Date	(	City, State							
Lumberton, NJ							7/3	1/18		Tullytown,	PA						
Completed By (Print or Type	• • • • • • • • • • • • • • • • • • • •	Title						Signature	1	^	/		Da	ite i			$\neg$
Gwendolyn Trumbetti		Op	eratio	ons C	oordi	nator		20020	(	MM			1000	)/(	101	15	

CK42795
PAID

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT BY ASCM FIRM (Pursuant to N.J.A.C. 5:23-8.11(c)3.viii)

										<u>_</u>	<u>IC</u>	11 W 15	
Date of Notific	cation (1)		Nan	ne of B	uilding O	wner	/ Operator (2)		In	-			-111
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			F	ACILIT	Y INFO	RMA	ATION						
Name of Facili	ity Where Abatem	ent is Taking P	Place (3)			Tvp	e of Facility (4)						
The Founda	tion Collegiate	Academy- b	asement				School (K-12)						
Street Address						$\frac{1}{x}$	Subchapter 8 (	Other th	nan K-	12)			
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	er for Monitoring	Firm	Telephon	e Numl	ber	Tele	phone Number			License	Numb	per	
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(NJAC 5:23-8)	justification	n)	uuiiig	Ī	Name	of Contact				Tele	phone	Numbe	er			
	☐ Cancellation	on			Kar	en Bailey										
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Name of Monitoring Firm					ASCM	No.			ent Contractor (9)							
Management & Env	riro. Consult	ing S	ervic	es					onmental, LLC							
Street Address							(03)(20)(0)	et Address								
PO Box 341							-	23 Cutler Av								
City, State, Zip Code								, State, Zip Co								
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Project Manager for Mon	itoring Firm			0.000000	phone		1	phone No.			cense l					
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Time of Abatement: _	AIVI	PIVI	/	_PIVI-		AIVI	С	innaminson	i, NJ 08077							
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15.53								☐ Non-Exe	mpted (*) and No	n-Fria	able Pr	ocedure	T	V150	100.00	
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State of New Jersey 5153 Check No NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12-120) Name of Building Owner/Operator (2) Date of Notification (1) Valerie Amendolaro 16 July 11, 2018 2018 Street Address Agency Notified Type Notification ☑ Initial ☐ EPA ASSESTOS CONTROL & City, State, Zip Code Not required per State Reg. 10-2004 ☐ Amended LICENSING **⊠** DOL Amendment # Clifton, NJ 07013 ☐ Emergency (including Telephone Number Name of Contact M DOH justification) ☐ DCA □ Cancellation Valerie Amendolaro FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) Street Address ☑ Other (i.e. private & commercial buildings, homes, etc.) # of Floors Bldg. Age Square Feet City (5) 1.390 83 Clifton, NJ 07013 Current Use (Prlor if being demolished) County Code (7) (STATE USE County (6) ONLY) Residential **Pasaic** Name of Monitoring Firm Hired by Building Owner ASCM No. Name of Abatement Contractor (9) B&N&K Restoration Co., Inc. The Saban Engineering Group, Inc. Street Address Street Address 223 Randolph Avenue 201 Stuyvesant Avneu City, State, Zip Code City, State, Zip Code Clifton, NJ 07011 Lyndhurst, NJ 07071 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 00120 973-478-4681 212-372-0338 Stephen Pharai Name of OSHA Monitor Start Date (10) Scheduled Completion Date (11) McCabe Environmental Services, L.L.C. July 23, 2018 August 31, 2018 Street Address Occupancy Status During Abatement (Check only one) 464 Valley Brook Avenue ☐ Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code ☑ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: Lyndhurst, NJ 07071 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure □ Renovation  $\boxtimes \ge 3 \text{ sf or } \ge 3 \text{ lf}$ □ Demolition ☑ Glovebag Procedure □ ≥ 160 sf or ≥ 260 lf ☐ Non-Exempted (\*) and Non-Friable Procedure Abatement Is Location Туре Normally Description of Location of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Encapsulate Maintenance/ Enclosure Remova Repair (i.e., thermal systems insulation, (Specify TO BE ABATED Custodial SF or LF) surfacing, VAT, or IN Facility Staff? other miscellaneous) (13)(12)Yes 77 In ft Pipe Insulation Basement Name of Registered Landfill NJDEP Waste Hauler Cubic Yards of Name of Registered Waste Hauler Waste ID No. B&N&K Restoration Co., Inc., Minerva Enterprises, Inc. 12695 / 2A456 Tri-State Transfer Associates, Inc. Disposal Date City, State City, State

Completed by

G. Roger Woodman

Clifton, NJ 07011 / Bronx, NY

Title

Safety Officer

07/24/2018 -

07/21/2018

Signature

Waynesburg, OH

Date

7/11/2018



## TF 0360

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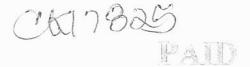
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DCA Cancellation			Munoz				888-469-2	900			
Name of Facility Where Abatement is Taking Place (3) 980-Stuyvesant Ave.  Street Address	)	FACIL	ITY INFO	RMATION	Ту		?) 3 (Other than K-				
980-Stuyvesant Ave.					V	etc.)	ivate & commerc				S.
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Name of Monitoring Firm Hired by Building Owner (8)		ASCM	No.			batement Cont Environmen					
Street Address				10 000,000	eet Add 39-Lat	ress ayette Stree	t				
City, State, Zip Code						, Zip Code , NJ 07105	and the second s				
Project Manager for Monitoring Firm	1	Telephon	ne No.		ephone 73-49	No. 1-0877	License 01240	No.			
Start Date (10)         Schedule           7-16-18         8-16-1		pletion D	Date (11)	Nar	me of C	SHA Monitor					
Occupancy Status During Abatement (Check Only On	ie)			Stre	eet Add	ress					
Facility Closed/Vacated During Entire Period of A Abatement Performed Outside of Normal Facility Other – Describe:	Abatem	ent		City	y, State	, Zip Code					
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Name of Registered Waste Hauler Newark Carting	Н	JDEP W auler ID 4509		Cubic Yard of Waste	ds		Registered Land ethlehem Lar			I	
City, State Po Box 5670, Newark, NJ 07105				Disposal D	ate	City, State 2335-A	pplebutter Ro	d. Beth	nlehe	m, P	'Α
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#### State of New Jersey

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JOSEPH PERLSTI	EIN 	OWN	IER												_

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Project Manager for Mor	nitoring Firm		Т	Telepho	ne No.			none No	NJ 074		License	No			
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Start Date (10) 7/21/18		Schedule 8/4/18		npletion	Date (11)		Name	of OSH	A Monitor						
Occupancy Status Durin	g Abatement (Chec	-1	la espera				Street	Address	S						
Facility Closed/Vac	ated During Entire I	Period of A	Abatem	nent											
Abatement Perform  X Other – Describe:	ed Outside of Norm basement	nal Facility	/ Hours				City, S	state, Zip	Code						
Scope of Work (Check A	II That Apply)														
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			Renova						Containme		Negative	Pressu	ıre		
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		lo lo	Lanati				L	1 Non-	-Exempted	(*) and	Non-Fri	able Pro	W. W. W. W.	e emen	
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Asbestos-Containing TO BE AB		Ma	d Sole intenar	rce/		tos Cont	aining N	Material ( s insulat			nount pecify	70		E	ш
In Facil (13)	ity	Cust	todial S (12)	Staff?	(	surfac	cing, VA	T, or	.5.7,		or LF)	Remova	Repair	Encapsulate	Enclosure
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City, State			15	5939		TBD	al Dat-		Western		Land	1111			
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A. Scott Higgins		Presi	dent					10	_			7/11/1	8		



	- AREA		NOTIF (P	ICATION ursuant	OF ASB to NJAC	ESTOS 8:60 an	ABATE d 12:120	MENT		10	34	(A)	12	4	
Date of Notification (1) 7/11/18					f Building offman	Owner/0	Operator	(2)	0),5	G				1	
Agencies Notified	Type Notification			Street A	ddress			1	M						
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DEP X DOL	Amended	11			ate, Zip Co		07000	700,000					1		
	Amendment Emergency (		-		ng Ridge	e, NJ I	07920	- Trous	Bagnara succes		Marine Commence		4		
DOH DCA	justification) Cancellation			A. Hot	f Contact			A. Carrier	Addi	Tel	ephone Nu	mber			
	Cancellation			330/16:14:35-17-0.M:18	LITY INFO	ORMAT	ION	Tax Control							
Name of Facility Where	Abatement is Taking	Place (3	3)			- 1 11117 11		Туре	of Facility (4	1)					
house									School (K-12						
Street Address								×	Subchapter Other (i.e. pretc.)				dings	home	es,
City (5)								Squa	are Feet	# 0	f Floors	E	lldg. A	Age	
Basking Ridge		===						210	0	2		16	35		
County (6) Somerset				County (	Code (7) USE ONLY		_	Curre	ent Use (Prio ISE	r if bei	ng demolis	hed)			
Name of Monitoring Firm	Hired by Building (	Owner (8)		ASCN	1 No.				atement Con ironmental			2			
Street Address							Street							20.00	
							POE	30x 4	83, 4 E G	ate D	rive				
City, State, Zip Code									Zip Code						
Project Manager for Mon	itaring Firm			T-1					d, NJ 074	18	·····				
1 roject Manager for Mon	intolling Fillin			Telepho	ne ivo.		Teleph 973-	764-2			License N 703	10.			
Start Date (10)				npletion I	Date (11)		Name	of OS	HA Monitor						
7/20/18		8/3/18		-											
Occupancy Status During							Street	Addre	ss						
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Scope of Work (Check A	Il That Apply)											7 7			
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	,,,,,	Promote and a second	Renova Demolit				×	Mi Gle	II Containme ni-Enclosure ovebag Proci n-Exempted	edure					
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Asbestos-Containing	Material (ACM)		d Sole intena			tos Cont	taining N	1ateria		А	mount			ш	_
TO BE ABA			todial S		(i.e.		systems		ation,		pecify or LF)	Ren	Re	ncap	Encl
(13)			(12)				niscellar			01	0. 2. /	Remova	Repair	Encapsulate	Enclosure
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Freehold Cartage			0.000	5939	140.	TBD	516		Western	Berl	ks Landfi	11			
City, State						Dispos	sal Date		City, State						-
Freehold, NJ						TBD			Birdsbo	o, PA	A				
Completed by A. Scott Higgins		Title Pres	ident			S	Signature		11-	-		ate /11/18	3		



Data of Natification (4)						11 15	16 15	1 000	THE K	236	В		
Date of Notification (1) 07-10-18				of Building Owner on Communic		(2)	Man of the control of		The same of the sa		Th Understanding		
Agencies Notified Type Notification  EPA Initial			1000000000	Address Iidden Ridge		Successive	JUL 1	6 2018	and	J	THE PARTY OF THE P		
DEP Amended Amendment				ate, Zip Code , TX 75038	WAS COLUMN TO THE PARTY OF THE	ASI	BESTOS	CONTROL					
□ DOH				of Contact e Messing		THE PERSON NAMED IN	LICE	(917) 9	ne Num	ber 56			
			FAC	ILITY INFORMAT	TION								
Name of Facility Where Abatement is Takir	ig Place (3	3)					of Facility ( School (K-1	2.15					
Street Address 138 Main Street							Subchapter Other (i.e. p	8 (Other that			ldings	, hom	ies,
City (5) Woodbridge							tc.) e Feet 00	# of Floo	rs		3ldg		
County (6) Middlesex				Code (7) USE ONLY)		Currer		or if being de	molishe	1 33			
Name of Monitoring Firm Hired by Building ESIS Health, Safety & Environmen		i	ASCN	Л No.		of Abat	ement Con	tractor (9) ental Corp				1	
Street Address P.O. Box 430					Street	Addres						=====	
City, State, Zip Code North Versailles, PA 15137	11				City, S	tate, Zip		)					
Project Manager for Monitoring Firm Christopher Pierce			Telepho	ne No. 192-3165	Teleph	one No	•		nse No.				
Start Date (10) 07-10-18	Schedule			Date (11)	Name		A Monitor	007	36				
Occupancy Status During Abatement (Chec		1973				overen and							
Facility Closed/Vacated During Entire F	Period of A	baten	nent		10-59		son Aver	nue					
Abatement Performed Outside of Norm Other – Describe:	iai Facility	Hours				tate, Zip Island	Code I City, N`	Y 11101					
Scope of Work (Check All That Apply)					-					7			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolit	1545A16		×	Mini- Glov	Enclosure ebag Proce					_	
	le	Locati	ion			14011	Lxempted	( ) and Non-	TTIADIE			ement	
Location of	N	lormal	ly	De	scription	of					Ту	ре	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Maii	d Sole ntenar odial S (12)	nce/ Staff?	Asbestos Con (i.e. thermal surfa	taining M	aterial ( insulati Γ, or		Amount (Specify SF or LF	)	Removal	Repair	Encapsulate	Enclosure
1st Floor: MDF Room	Yes	No	N/A X	VΔ	T/Mast	ic		2,050\$1				Ф	
2nd Floor: Switch Room							-	1008	_	x			
Name of Registered Waste Hauler		N	JDEP W	aste Cubic	Yards		Name of R	egistered La	ndfill				
Newark Carting, Inc.		Н	auler ID I 1509			- 1		entral Sar		.an	dfill		
City, State Newark, NJ 07105				Dispos TBD	sal Date		City, State Pen Argy	/I, PA 180	72				
Completed by Joseph Patrick	Title Projec	t Ma	nager	S	ignature	17	7		Date 07-1	0-1	8		

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Project #		N	OTIFIC	ATION	OF ASBES	TOS ABAT	TEM	ENT	CE	Chi	egk #	435	9.7			
1 Toject II			(Pur	suant to	o NJAC 8:	60 and 12:	120)	5	<u> </u>	1		- 11	111			
Date of Notification (1)			N	ame of	Building Ov	wner/Opera	tor (	2)					1			
07/07/2018			W	ayne	BOE				1111 2	C 00	110	1000	111			
	Type Notification		S	treet Ad	ldress	184	lui j		OOL 1	6 20	118	l la	21			
□ EPA [	Initial				s Drive		a suda a						_			_
DEP	Amended		14		e, Zip Code	3000 A	in a	ASB	ESTOS	CONT	S IOF	-d	Attenda			
■ DOL	Amendment #				NJ 074	70	-	1:200mm	LICEN	SIMIC	phone.					
■ DOH	justification)	loidding	1.0		Contact											
DCA	Cancellation		Jo	ohn M	ACCOUNT ON THE PARTY OF T					(97	3)628	-883	/	_		
Name of Facility Where Al	natament is Taking	Diace (3)		FACIL	ITY INFO	RMATION		Type o	of Facility (	4)				, ,		_
	Datement is Taking	riace (0)					١.									
Wayne HS Street Address			-				$\dashv$	T S	ichool (K-1 iubchapter	8 (Othe	er than	K-12)				
551 Valley Rd							li		other (i.e.	orivate 8	comm	ercial	buildi	ngs, h	nome	s,
							+		tc.) e Feet	# of	Floors		Blo	ig. Ag	e	
City (5) Wayne, NJ																
County (6)					Code (7) ISE ONLY)			Currer	nt Use (Pri	or if bei	ng dem	olishe	d)			
Passaic County	Name of the Contract of the Co	wmar (0)	1,	ASCM	5 (8)		ame o	of Ahat	ement Co	ntractor	(9)				-	
Name of Monitoring Firm	Hired by Building O	wner (8)		ASCIV	I NO.				ration L		(0)					
RAMM						37.237.5		Addres		LU						-
Street Address						1			de Rd							
77 Nottingham Rd City, State, Zip Code				-		1 100		A Parint Control	p Code							_
Fair Lawn						10.00	50		NJ 078	69						
Project Manager for Monit	toring Firm		17	Telephor	ne No.			one No			Licen	se No				
Rodger Headrick			10	201)47	75-9880	97	3-93	33-25	550		0135	8				
Start Date (10)		Schedule			Date (11)				A Monitor							
07/19/2018	10	07/22/2	018			IRI	IS									
Occupancy Status During	Abatement (Check	Only On	e)			St	reet /	Addres	SS		-746	7.35			40	
Facility Closed/Vaca	ted During Entire P	eriod of A	Abatem	ent				RT 2							A)	
Abatement Performe Other – Describe:	ed Outside of Norm	al Facility	Hours			15000	200		p Code							
Scope of Work (Check All	That Apply)					- Jur	11011	, INJ	07083	-						
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≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		The same of the sa	emoliti					Mir	ni-Enclosu	re				7571		
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	- All March	1						1110	II Exempt	1					ment	
	_	3.5	Locati			Danasi	-6	o.f						Ту	ре	
Location Asbestos-Containing		Use	d Sole	ly by	Asbest	Descrip os Containi			(ACM)	A	Amount				ш	
TO BE ABA	ATED		intenar todial S		(i.e.	thermal sys	stems	sinsula	ation,		Specify F or LF		Ren	Re	ncal	ncl
In Facili	ty		(12)			surfacing other misc				3	r UI LI	,	Remova	Repair	Encapsulate	Enclosure
(,		Yes	No	N/A	1								<u> =</u>		ate	6
Room # 211			X		glue do	ots				9 SF			×			
Room # 114 1st Flo	or		×			ap & cut		HI-1874		30 LI			×			
Room # 211	1			Table t					80 S	F		×				
Name of Registered Was	ste Hauler			JDEP V		Cubic Yar			Name o	f Regist	ered La	andfill				
Nick Restoration LL	.C		- N 0	lauler ID 3782	No.	of Waste TBD			G.R.O	.W.S						
City, State	NJ 07869					Disposal	Date		City, Sta		٨					
	0.000	Title				TBD	nature	1	Tullyto	WII, P	7	Da	te			
Completed by		The state of	ident			Sign	atuit	IV	1 1		7 (	15.	07/2	018		
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Date of Notification (1)			1	Name (	of Building Owne	r/Operato	r (2)			1			
6/27/18			1		RMA	2 Rea	ic	ESTATE	, 1111	1	JL	16	2018
Agencies Notified Type	Notification			Street /	Address								4410
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DEP DOL	Amended	. 1			ate, Zip Code		_		1	ASBES	TOS	CON	TROL
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⊠ DOH	Justification)		-	Name o	of Contact					ne Numb			
DCA D	Cancellation			TIN		TUNDAT	0010		1 215-	233-	26	28	
Name of Facility Where Abater	ment is Taking	Place (3	3)	FAU	ILITY INFORMA	TION	Tune	of Facility	(4)				
OFFICE			-				.,,,,,			(*)			
Street Address		CHARLES CHARLES						School (K- Subchapte	12) r 8 (Other tha	n K-12)			
SO WES	T STATE	St	•				图	Other (i.e.	nuo di sisting	i kitram	เหมีย	ন্তঃ, গতা	NES,
City (5)	1 Olivin						Squa	etc.) ere Feet	# of Floo	rs	Bld	g. Age	
TRENTON								5600	14		1	-50	
County (6)	<del></del>				Code (7)		7 fage		ior if being de	molished		30	
MELCEL.				(STATE	USE ONLY)				MOLCIAL		•		
Name of Monitoring Firm Hired				1	M No.			atement Co	ntractor (9)		-		
DETAIL ASSOC	Lates 11	UC.		_ C	2100	A.M.	AC C	ontracting	g Inc.				
Street Address	A 1	_					Addre	56k					
300 GL City, State, Zip Code	and Ave	2						ind Ave					
ENGLEWOOD ,	.17 0	763	l					ip Code Park, NJ (	17422				
Project Manager for Monitoring	•		- T	Telepho	una Nin		hone N	Carl Lag College Colle		61			
ANTHONY VALE					569-6708		·262-5		001	nse No. 56		1	
Start Date (10)	100 I	Schedule	ed Cor		Date (11)			HA Monitor					
7/11/18		2/1	112		(,				ntal Servic	es Inc			
Occupancy Status During Abat	ement (Check	Only On	e)				Addre			•			
Facility Closed/Vacated D	uring Entire Pe	eriod of A	baten	nent		280	Huyle	r Street					
Abatement Performed Out Other – Describe:	tside of Norma	l Facility	Hours	3		City, S	State, Z	ip Code					
						Hack	kensa	ick, NJ 0	7606				
Scope of Work (Check All That	Apply)											area and a	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova				Ful	I Containm	ent with Nega	tive Pres	sure		
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						P			d (*) and Non-	-Friable F	roce	dure	
¥.			Locati		Contraction of the Contraction o			1		-	AŁ	ateme	nt
Location of Asbestos-Containing Materi	SI (ACM)		lormal d Sole			escription				-	_	Type	
TO BE ABATED	ici (ACIVI)	(V43)555.00	ntenar		Asbestos Co (i.e. therm				Amount (Specify	to the	.	_   5	ш
In Facility (13)		Cust	(12)	olan r		acing, VA		ł	SF or LF			Renair	Enclosure
(10)		- I		Τ	Outer	miscellan	leous)	ŽĮ.		, Ag	5	Encapsulate	sure
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13TH FLOOL				/	MASTIC/GU	UE RE	ESIDU	E	4500SF A	250 /			
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		$\rightarrow$								-	+	-	+
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	16311 624.			obleb'		40				<i>U U</i>			
City, State FARMING PACE	E N.	<b>T</b> .			3	osal Date		City, State	e LYTOWN	1 6	A		
Completed by		Title				Signature		706		4.			
Joseph Vocaturo		Vice I	Presi	dent		Signature	5 8	A		7/10	1.11	<b>,</b>	
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	-	Market		State of New .	Jersey		1			OE	OK #:	116	19
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Date of Notification (1)			Nam	e of Building Ov	vner/Open	ator	(2)	III			the star was a	-	Marketon College
6/27/18 Agencies Notified Type Notification					AL P		L ESTA	Tell	12	11 -		2-2-	
	363		Stree	t Address	^			14 1	<del>! - 6</del> 6	-	0	2018	
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X DEP Amended Amended Amended			CRY.	State, Zip Code	:		-	- and the same of	ASBES	TOS	CON	TDO	1 0
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DOH justificatio				men R	· (				ephone N			ORTHODOLINA C	THE PERSON
THE PARTY STATES AND ADDRESS OF THE PARTY STATES AND ADDRESS O				CILITY INFOR	IETLAN)	10	MIO	16	12-53	5-6	262	3	
Name of Facility Where Abatement is Tal		(3)		Control of the Control	WEST OF STREET	1 5	Type of Facili	tu IAX					
OFFICE BUILD	mala					- Interested	School (						
prider vodress	_	~				—grave	Subchap	ster 8 (Othe	ar than K-	121			
50 WEST STA	TE S	1				1	S Other (co	e origine s	PARTITIES S	NO LEE	HOETON	, for	RES
City (5)	+			7/24	<del></del>	-	Square Feet	l # ni	Floors		Bldg.	8.00	
TLENTON					3	MGA IS PE	2,0600	1 - 0:	14				- 4
County (6)			Count	y Code (7)		+	Current Use (	Prior If heir		-facet)	*5	U	_
MELCEL.			(STAT	E USE ONLY)		-		andici.		mana).			
Name of Monitoring Firm Hired by Bullding	Owner (	8)	ASC	CM No.	Man	ne c	of Abatement C	Contractor	101 101				
DETAIL ASSOCIATES	INC.			21000	A.	MA	C Contracti	na inc.	(O)				
Street Address		- 57750					Address					,	
300 GLAND A	ve			15	18	5 A	Aidland Ave						
City, State, Zip Code	4000	0 1			City,	, St	ate, Zip Code						
ENGLEWOOD, N.J	0763	51					nd Park, NJ	07432					
Project Manager for Monitoring Firm	4		10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -	one No.	Tels	-	me No.	1	License P	in			
ANTHONY VALENTINE	25		201-	569-6708	20	1-2	62-5841	- P	00156				
Start Date (10)	Schedu	iled Co	mpletion	Date (11)	Nam	ie o	f OSHA Monito				-		
7/11/18	8	6/18	}				a Environm		rvices I	30			
Occupancy Status During Abatement (Che						_	ddress		· · ·		-		_
Facility Closed/Vacated During Entire	Period of	Abate	ment		280	HC	uyler Street	:					ž.
Abatement Performed Outside of Non Other – Describe:	mai Facili	ty Hour	\$		City,	Sta	te. Zip Code		Olizona and	-			- 10/10
Scope of Work (Check All That Apply)					Ha	cke	ensack, NJ (	07606					
23 sf or ≥3 ff ≥160 sf or ≥260 ff		Renovi Demoli			Construction of the Constr		Full Contains Mini-Enclose Glovebag Pro	re ocedure					
	1	s Locat	ion			77782	Non-Exempte	ed (*) and	Non-Friab	le Pro			
Location of		Norma	liy	o et cipera		-	_	Michael			Abate	men pe	3
Asbestos-Containing Material (ACM)		ed Sole sintena		Asbestos C	Descriptio Containing	Mai	f terial (ACM)	1	ount				
TO BE ABATED In Facility		todial S		(i.e. then	nal system	ns h	nsulation,	2	ecify	77		E E	I
(13)	and district	(12)		j su	rfacing, V/ er miscella	AT,	ot.	SF o	rLF)	Remova	Repair	adex	iclo
	Yes	No	N/A		or moodile	3160	nusj			IBA	=	Encapsulate	Enclosure
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lame of Registered Waste Hauler					ereso-annesenvi ere						$\Box$		
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lewark Carting Inc.		1	4509	140. Of V	Veste 40			Central :		Lan	dfill		
ifty, State				Disr	osal Date		City, Stat		y				
lewark, NJ 07105				7/	INO GIVE			e gyl, PA (	าลุรกว				
completed by	Title			1.7	Signature			03-1, F. F. C	Date	<u> </u>			
oseph Vocaturo	Vice	Presid	ient		A	1	V			-/			

		FICATION	OF ASE	BESTOS	ABATE				E C	El	$\overline{\mathbb{V}}$	E	
		Name o Tenak	f Building	Owner/O	Operator Center,	(2) LLC	1 1 1	-	JUI	1.6	2018	No. of Contract of	
n		Street A	ddress				a Surfamento	1-4				- Company	Lance
nt #		City, Sta	ate, Zip C	ode	61			AS	SBESTO LIC	S CON ENSIN	TROI 3	- &	
y (including		Name o	f Contact		101	20		Те	lephone I	Number	-S296ings.jul.july.	Marin Personal Property and Pro	rise = *1. +1.
on				00111	-			20	)1-771-8	8609			
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	sent #	g Owner (8)  Scheduled Co 07/24/2018 eck Only One) e Period of Abatermal Facility Hour  Renov. Demoli  Is Local Normal Used Solution Custodial Custodial (12) Yes No X	NOTIFICATION (Pursuant  Name of Tenak  In Street A 190 M  City, State Hacker  Ey (including n) on FACI  King Place (3)  County (STATE County C	NOTIFICATION OF ASE (Pursuant to NJAC)  Name of Building Tenakill 190 ( Street Address 190 Moore St City, State, Zip C Hackensack, Name of Contact Jim Arrajj  FACILITY INF  King Place (3)  County Code (7) (STATE USE ONLY)  G Owner (8)  ASCM No.  Telephone No.  Scheduled Completion Date (11) 07/24/2018 eck Only One) e Period of Abatement rmal Facility Hours  Renovation Demolition  Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12)  Yes No N/A  X  NJDEP Waste Hauler ID No.	NOTIFICATION OF ASBESTOS (Pursuant to NJAC 8:60 an  Name of Building Owner/C Tenakill 190 Office Coon  Street Address 190 Moore Street City, State, Zip Code Hackensack, NJ 070 Name of Contact Jim Arrajj  FACILITY INFORMATI King Place (3)  County Code (7) (STATE USE ONLY)  g Owner (8)  ASCM No.  Telephone No.  Scheduled Completion Date (11) 07/24/2018 eck Only One) Period of Abatement rmal Facility Hours  Renovation Demolition  Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12)  Yes No N/A  X Pipe  NJDEP Waste Hauler ID No. of Was	Renovation   Pursuant to NJAC 8:60 and 12:120	NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:80 and 12:120)    Name of Building Owner/Operator (2) Tenakill 190 Office Center, LLC	NOTIFICATION OF ASBESTOS ÁBATEMENT (Pursuant to NJAC 8:60 and 12:120)    Name of Building Owner/Operator (2)	NOTIFICATION OF ASSESTOS ASATEMENT (Pursuant to NJAC 8:60 and 12:120)    Name of Building Owner/Operator (2)   Tenakill 190 Office Center, LLC   Street Address	NOTIFICATION OF ASSESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)    Name of Building Owner/Operator (2)   Tenakill 190 Office Center, LLC   JUL     On	NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)  Name of Building Owner/Operator (2) Tenakill 190 Office Center, LLC  In Street Address 190 Moore Street 1	NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)  Name of Building Owner/Operator (2) Tenakill 190 Office Center, LLC  Name of Building Owner/Operator (2) Tenakill 190 Office Center, LLC  On Street Address 190 Moore Street  City, State, Zip Code Hackensack, NJ 07061  Name of Contact Jirn Artrajj  FACILITY INFORMATION  Indirect Street Address  Square Feet # of Floors Bidg. N/A  N/A  County Code (7) (STATE USE ONLY)  Building  Gowner (8)  ASCM No.  Name of Abatement Contractor (9) D&S Abatement, Inc.  Street Address 11 Rosengren Avenue  City, State, Zip Code Totowa, NJ 07512  Telephone No. 973-345-8685  O1311  Name of OSHA Monitor DXS Abatement, Inc.  Street Address 11 Rosengren Avenue  City, State, Zip Code Totowa, NJ 07512  Telephone No. 973-345-8685  O1311  Scheduled Completion Date (11) O7/24/2018  Exc Nolly One)  Period of Abatement mal Facility Hours  Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Normally Used Solely by Maintenance/ Custodial Staff? (12)  Yes No N/A  N/A  Pipe Insulation Source (Radion) Normally Used Solely by Maintenance/ Custodial Staff? (12)  NAME of Registered Landfill Normally Used Solely by Maintenance/ Custodial Staff? (12)  Normally Used Solely by Maintenance/ Custodial Staff? (12)  NAME of Registered Landfill Normally Used Solely by Maintenance/ Custodial Staff? (12)  NAME of Registered Landfill Normally Used Solely by Maintenance/ Custodial Staff? (12)  NAME of Registered Landfill Normally Used Solely by Maintenance/ Custodial Staff? (12)  NAME of Registered Landfill Normally Used Solely by Maintenance/ Custodial Staff? (12)  Name of Registered Landfill Normally Name of Registered Landfill	NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:50 and 12:120)  Name of Building Owner/Operator (2) Tenakill 190 Office Center, LLC  Name of Composition Street Address 190 Moore Street City, State, Zip Code Hackensack, NJ 07061  Name of Contact Jim Arraij  FACILITY INFORMATION  Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Subchapter 9 (Other

Disposal Date TBD

Project Manager

Signature

City, State

Totowa, NJ

Completed by

Ned Joksimovic

Date

07/10/2018

City, State

Morrisville, NJ



PA	ID		ICATION	ate of Ne N OF ASB to NJAC	<b>ESTOS</b>	ABATE		ME	C	El	<u></u>	E		
Date of Notification (1) 07/10/2018				f Building nary Wa		Operator	(2)				0.010	got residence of P	And the second	Marin Land Marin M
Agencies Notified Type Noti	fication		Street A	ddress					JUI	_ + 0	2018	- Contract	Description of	
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DOH justif	rgency (including ication)			f Contact	.11				Tele	phone Nu	mber			
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Name of Facility Where Abatement	is Taking Place (3	3)	1 701	LITT HAT	JIMIAI	ION	Type of	f Facility (4)	,					
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Mountain Lakes							N/A		N/A	_		N/A		
County (6) Morris			(STATE	Code (7) USE ONLY			Current House	t Use (Prior	if beir	ng demolis	hed)			
Name of Monitoring Firm Hired by B	uilding Owner (8)		ASCN	/I No.				ment Contra		(9)				
Street Address						Street	Address	•						
City, State, Zip Code							osengr State, Zip	en Avenu	ie					
150 1 1 2000						Toto	wa, NJ							
Project Manager for Monitoring Firm			Telepho	ne No.			none No. 345-86	85		License N 01311	10.			
Start Date (10) 07/20/2018	Schedule 07/21/2		mpletion I	Date (11)			of OSHA Abater	Monitor ment, Inc.						
Occupancy Status During Abatemer						Street	Address		-					
Facility Closed/Vacated During Abatement Performed Outside Other – Describe: occupied	Entire Period of A of Normal Facility	Abater Hour	nent s			City, S	state, Zip		e					
Scope of Work (Check All That Appl	u)					Toto	wa, NJ	07512						
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Name of Registered Waste Hauler		IN	JDEP W	/aste	Cubic	Yards		Name of Re	aister	ed Landfil	_			
D&S Abatement, Inc.			lauler ID 0996		of Wa TBD	ste		Waste Ma	-					
City, State Totowa, NJ					Dispo TBD	sal Date		City, State Morrisville	e, NJ					
Completed by Ned Joksimovic	Title Proje	ct Ma	anager		5	Signature	7	A		1,55,130,0	ate 7/10/	2018		

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Date of Notification	n (1)	-		-		Owner/Operator		1131			elt, may your a	,
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				FACI	LITY :	INFORMATION						
Name of Facility Whe	ere Abatement i	s Taking	Plac	ce (3)			Type of Facil	ity (4)				
Philip Palnar	OZZO						[ ]School	(K-12)				
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Street Addres							[X]Other (	i.e., privat uildings, ho	e & c	etc )	-	
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city, state, aip coo	AG.						r, NJ 070	42				
Project Manager for	Monitoring Fir			Numb	er	Telephone Numb		T.	cense		per	
		N/Z	7			(973) 744	-8800		0037	1		
Scheduled Start Date	(10) Sched	. Comple	tion	Date	(11)	Name of OSHA 1	Monitor					
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	ear Mon			Year								
Occupancy Status Dur	ring Abatement	(Check c	nly o	one)		Street Address	3					
[X] Facility Clo of Abatemen		ing Ent	ire P	erioa								
[ ]Abatement Pe		of Nor	mal F	acilit	-Y	City, State, 2	Zip Code					
Hours - Desc	ribe: «OffHours	Descrip	t»									
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Scope of Work (Check	all that appl	y)				f 175-11	Contrinment wi	th Negative	Droce	ure		
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Agencies Notified Type Notification	<del>Piperson Construction</del>	1	il Address					TI	/		+	$\forall$
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PASSA: C			Hy Coda (7) TE USE OHLY	n	7	Aurenat	Pri	or If being demode	hod)			
Name of Monitoring Firm Fired by Building	Owner (S)	AS	CM No.				acting	fractor (8)				1.
Street Address						darán rominio	Ato.	27	MARKET			
City, State, Zip Code			,			te, Zip						
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City, these Newarth, N.J. 07105		Lexan	***************************************	Dienkeal 9	18		ity, Stat		-		-	
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### State of New Jersey

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	of Notification (1)	Q.A.J				f Building			(2)		JUL	162	018	1	圳
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Non	F	AL	D1 (1		FACI	LITY INFO	ORMA	TION							
23	e of Facility Where of Congress State Address	Abatement is Takir	ig Place (	5)					☐ So	f Facility (4)		K 10)			
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Nam	e of Monitoring Firm	Hired by Building	Owner (8)		ASCN	/ No.		1		ment Contr	actor (9) SIONALS	3			
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City,	State, Zip Code							- III - 400 (579,000)	tate, Zip EWOO	Code D, NJ 087	701				
Proje	ect Manager for Mon	itoring Firm		T	Telepho	ne No.			one No.		Licen 1200	se No.			
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	Abatement Perform Other – Describe:	ed Outside of Norn	nal Facility	Hours	ient			City, S	tate, Zip	AN MONTH OF THE					
Scop	e of Work (Check A	Il That Apply)				-				5, 110 007	-				
properties	≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	22.70		Renova Demolit				×	Mini- Glove	Enclosure ebag Proced				re	
			Is	Locati	on						7 4114 (1411)	, nauto .	Abat	ement	t
А	Location sbestos-Containing <u>TO BE AB</u> In Facil (13)	Material (ACM) ATED	Use Ma	Normal d Sole intenar todial S (12)	ly by nce/		os Cor therma surfa	escription ntaining M al systems acing, VA miscellar	laterial (/ s insulati T, or		Amount (Specify SF or LF)	Kemoval		e Encapsulate	Enclosure
	EXTER	OR	Yes	No	N/A	RC	OFIN	NG / FL/	ASHINI	G	500 SF			Ф	
	CATER					I.C	,OI II	10/11/	- OI IIIV		300 SF	X			
Name	e of Registered Was	te Hauler		l N	JDEP W	/aste	Cubi	c Yards		Name of Re	gistered La	ndfill			
NEW	ARK CARTING		.6	Н	auler ID 4509		of Wa			IESI	.g.0.0.00 La				
City, NEW	State /ARK, NJ				-little de la comp		Dispo 7/27	osal Date /18		City, State BETHLE	HEM PA				
	oleted by EPH PERLSTEI	N	Title OWN	IER				Signature				Date			





Date of Notification (1)					Name	of Buildin	g Owner/Operator (	5 P 5	WIFT	1	_		
	11 /	18	_			H Constr		2661			18	1	
Agencies Notified	Type Notific	ation			Stree	t Address		1111 4 6	0010	1		7.	
⊠ EPA					45	Stouts La	ane, Suite 1	JUL 16	2018	1			
⊠ DOLWD	Amended				City, S	State, Zip (	Code			100			
☑ DOH □ DCA	Amendm  Emergen		dudina		Мо	nmouth .	Junction, NJ 088	3520ESTOS CO	NTROL &	Ž.			
(NJAC 5:23-8)	justificati		auding	3		of Contac			Telephone Nun	ber			
	☐ Cancella	tion			Wa	seem Mo	hamad	<ul> <li>(ii) The control of the first of the control of the c</li></ul>	732-429-21				
					FA	CILITY IN	IFORMATION						
Name of Facility Where A	batement is 7	Γaking	Place	(3)				Type of Facility (	4)				
Residence								School (K-12	)				
Street Address									(Other than K-12 ivate and comme		uilding	js,	
City (5)								Square Feet	# of Floors	RI	dg. A	no.	
East Brunswick								3000 sf	2	1 200000	65	ge	
County (6)					Cour	nty Code (7	)(STATE USE ONLY)	Current Use (Pri			-		
Middlesex					Joan	ny 0000 (r	MOTHIE GOL ONET)	Residence	or it being derrion	sileu)			
Name of Monitoring Firm	Hired by Ruile	ding O	wner /	(8)	ASCM	No	Name of Abateme						
N/A	· · · · · · · · · · · · · · · · · · ·	anig O	Wilet (	(0)	AOOW	140.							
Street Address								ntracting, Inc.					
otroct/tadioss							Street Address	11.24.04					
City, State, Zip Code							1889 Route 9						
Oity, State, Zip Gode							City, State, Zip Co						
Project Manager for Monit	adaa Firm			T = 1				New Jersey 087					
Project Manager for Month	oring Firm			I ele	phone	No.	Telephone No.		License No.				
Ctart Data (40)				<u></u>			732-349-9932		00624				
Start Date (10)	20.515.01					te (11)	Name of OSHA M						
07 /26 /Occupancy Status During					_ / -	18	E.M.S.L. Anal	lytical					
□ Facility Closed/Vacated					ment								
☐ Abatement Performed						cribe	1056 Stelton						
Time of Abatement:	AM	PM	/	_PM-		AM	City, State, Zip Co						
Scope of Work (Check all	that apply)						100	New Jersey 088			_		
☐ ≥3 sf or >3 lf		ı	ПР	novati	00			ainment with Nega	ative Pressure				
≥160 sf or ≥260 lf			-	molitic			☐ Mini-Enc						
			170.05903 800.40	*1/03-2000-20	iPAP			mpted (*) and Non	-Friable Procedu	re			
				Locat						Ab	atem	ent T	уре
Location of Asbestos-Containing N		n		Norma d Sole		Acho	Description o			Z,	R	ш	ш
TO BE ABAT		'		intena			stos Containing Ma ., thermal systems i		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facility	У		Cust	odial (12)	Staff?		surfacing, VAT,	or	SF or LF)	val	7	usc	Sure
(13)		-	Yes	No.	N/A	1	other miscellane	ous)				ate	(D
exterior		-	169	0.000	100.0000					+			
exterior			ш			asbesto	s siding		3000 sf				
									(6.71)				
										П	П	П	П
Name of Registered Waste	e Hauler			N	JDEP V	Vaste	Cubic Yards of	Name of Regist	ered Landfill		_	_	_
Guardian Contractin	ıg, Inc.			Н	auler II 20223		Waste 3	T.R.R.F.					
City, State		2.001					Disposal Date	City, State					
Toms River, New Je	rsey						07/30/18	Tullytown, I	Pennsylvania				
Completed By (Print or Type	pe)	Title					Signature	1	/1	ate /	1		_
Nicholas Fernicola		Pro	oject	Mana	iger					7/	ii []	8	

045462

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

Date of Notification (1)					e of Buildir	ng Owner/Operator (	(2) 1 5 6		117	11			
//				The second		ontracting, LLC		3	44	1	)_		
Agencies Notified Type Notification					Street Address JUL 1 C 2018								
⊠ EPA ⊠ Initial					313 Halyard Road								
☐ DOLWD ☐ Amended					City, State, Zip Code								
					Ortley Beach, NJ 08751 ASBESTOS CONT					5			
☐ DCA ☐ Emergency (including								FARING		1			
(NJAC 5:23-8) justification)  Cancellation				Property Character	e of Contac	533		Telephone Num		.0			
□ Ca			ank Disar			732-749-600	9						
Name of Facility Where Abateme	ent is Takin	n Place	(3)	FA	CILITY	NFORMATION	T	(4)					
Residence							Type of Facility (4)						
Street Address							☐ School (K-12) ☐ Subchapter 8 (Other than K-12)						
Street Address							Other (i.e., private and commercial buildings, homes, etc.)						
City (5)													
Bay Head							I San	0 0			ge		
County (6)					-h · O - d - f	7) /07475 1105 01" 10	3000 sf	2	- 1	65			
Monmouth					nty Code (	7)(STATE USE ONLY)	3						
							Residence						
				ASCM	No.		ent Contractor (9)						
N/A						Guardian Contracting, Inc.							
Street Address						Street Address							
						1889 Route 9, Unit 61							
City, State, Zip Code						City, State, Zip Code							
						Toms River, New Jersey 08755							
Project Manager for Monitoring Firm Telephone No.						Telephone No. License No.							
тыерпопе					. 10.	732-349-9932 00624							
Start Date (10) Scheduled Completion					to (11)	Name of OSHA M		00024					
07/23/18						E.M.S.L. Analytical							
Occupancy Status During Abatement (Check only one)						Street Address							
☐ Facility Closed/Vacated During Entire Period of Abater													
☐ Abatement Performed Outside of Normal Facility Hour					Describe								
Time of Abatement:AMPM/PM-					City, State, Zip Code  Piscataway, New Jersey 08854								
Scope of Work (Check all that ap	oly)					Piscataway, r	New Jersey 088	354					
	• • • • • • • • • • • • • • • • • • • •	25.00				☐ Full Cont	ainment with Nega	ative Pressure					
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf or ≥260 lf</li></ul>	novat		n Mini-Enclosure										
≥ ≥160 sf or ≥260 lf Demolition					☐ Glovebag Procedure ☑ Non-Exempted (*) and Non-Friable Procedure								
		Is	Loca	tion	T	M NOII-LXE	ripied ( ) and Nor	I-Friable Procedur					
Location of Norma Asbestos-Containing Material (ACM)  Used Sole						Description of			Ab	Abatement Type			
					Asbe		os Containing Material (ACM)  thermal systems insulation,  (Specify		Re	Re	E	ᄪ	
TO BE ABATED Maintena IN Facility Custodial						, thermal systems i			Removal	Repair	cap	clos	
IN Facility Custodial (12)						surfacing, VAT,		SF or LF)			Encapsulate	Enclosure	
(10)		Yes	No	N/A		other miscellaned	ous)				ate		
exterior-house			$\boxtimes$		asbesto	os siding		3870 sf					
exterior-garage					asbesto	os siding		650 sf			П		
						-			П	П	П		
									<del>-</del>				
N				JDEP 1		Cubic Yards of	Name of Regist	ered Landfill				ш	
Guardian Contracting, Inc.					D No.	Waste	Name of Registered Landfill T.R.R.F.						
City, State	S 84"1			20223	3	6							
Toms River, New Jersey						Disposal Date City, State							
						07/26/18	Tullytown, I	Pennsylvania					
Completed By (Print or Type) Title					Signature Date								
Nicholas Fernicola Project Mana				ager			1 1	/	1,	1/8	1		
ASB-41							121	1	111/	10			

ASB-41 JAN 13

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

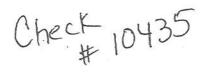


534483	PA	N.A.												
			NOT		IOITA		BES	Jersey STOS ABA 3:60 and 5:4	6)	0 00 F3	TOTAL TOTAL			
Date of Notification (1)					Name	of Buildin	a Ov	vner/Operator	LE CE	I W E	10			
		18			Dis	santis Co		cting, LLC	4)	34		3		
Agencies Notified  EPA	Type Notification					t Address 3 Halyard	Ro	ad	LI JUL 1	5 2018	비			
☑ DOLWD	Amended Amendm	(200).			City,	State, Zip 0	Code		LADEATON O	C. I De la companya				
□ DCA	☐ Emergen	-	ludino	1	Or	tley Beac	h, N	IJ 08751	ASBESTOS O LICENS	ONTROL&	CTL to You as			
(NJAC 5:23-8)	justificati	ion)			Name	of Contac	t		7	Telephone N	umber			
	☐ Cancellat	tion				ınk Disan				732-749-6	8009			
					FA	CILITY IN	1FO	RMATION						
Name of Facility Where	Abatement is 1	Taking	Place	(3)					Type of Facility (4					
Residence Street Address									School (K-12) Subchapter 8		12)			
Street Address									Other (i.e., pri	vate and com	mercial b	uildin	gs,	
City (5)									homes, etc.)	T # 2 = 1				
Lavallette									Square Feet 1200 sf	# of Floors	E	Bldg. A	Age	
County (6)					Cou	nty Code (7	7\/\$T/	ATE USE ONLY)	Current Use (Prio	7.511	aliah ad\	65		
Ocean					000	nty Code (/	)(01)	TIL USE ONLT)	Residence	ir ii being dem	olisnea)			
Name of Monitoring Firm	n Hired by Build	ding O	wner (	8)	ASCM	No.	Na	me of Abateme	ent Contractor (9)					
N/A	1.5								ntracting, Inc.					
Street Address								eet Address	g,e.					
							1	1889 Route 9	, Unit 61					
City, State, Zip Code							Cit	y, State, Zip Co	ode					
		10					1	Toms River,	New Jersey 087	55				
Project Manager for Mor	nitoring Firm			Tele	phone	No.	Tel	lephone No.		License No.	7	-		
							7	32-349-9932		00624				
Start Date (10)						ite (11)	Na	me of OSHA N	lonitor					
07 /23 /					<u> </u>	18	E	E.M.S.L. Ana	lytical					
Occupancy Status Durin							Str	eet Address						
☐ Facility Closed/Vacat							1	056 Stelton						
Abatement Performer Time of Abatement:	a Outside of No AM-	ormal F PM	acility	Hou!	rs - Des -	AM		y, State, Zip Co						
						7 1141	P	Piscataway, I	New Jersey 088	54				
Scope of Work (Check a  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ill that apply)		☐ Re ☑ De					☐ Mini-Enc ☐ Glovebag			dure			
				Locat								oaten	nent 7	Туре
Location Asbestos-Containing		n		lorma d Sole	lly ely by	Asha	ataa	Description o				_	1	
TO BE ABA	ATED	"	Mai	ntena	nce/			Containing Ma ermal systems		Amount (Specify	Removal	Repair	Encapsulate	Clos
IN Facil (13)	lity		Cust	(12)	Staff?	39	S	surfacing, VAT,	or	SF or LF)	\\\ \a_{\text{\tint{\text{\tin}\text{\tex{\tex	-	Sula	Enclosure
(10)			Yes	No	N/A	1	Oti	her miscellane	ous)				ate	
exterior						asbesto	os si	iding		1100 sf				
												In	П	
						-					_	+	1	-
												닏		
Name of Registered Was	ste Hauler				JDEP \	Masta	Cart	oio Varda -f	Non	az J.L. 1811				
Guardian Contracti				101 1535	lauler II 20223	No.	Wa:		Name of Register	ered Landfill				
City, State		-			LUZZ			posal Date	City, State					
Toms River, New J	ersey						0	7/26/18	Tullytown, F	ennsylvani	а			
Completed By (Print or T	ype)	Title					7-	Signature	1 1		Date	į	-1-11	
Nicholas Fernicola		Pro	ject	Man	ager				1 1		7/,	, //	C	
P 41								10	-11		1/1	1/1	0	

JAN 13

PAID

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



[ 5				(D. 11 0	6	)/01	FER		n n	n E	3 7
Date of Notification (1) 7-13-	10	l r		f Building Own	Righ	,	10/15	P.E.	4 1		- 1
Agencies Notified Type Notification	- 10	5	Street A	edress	rugi	2 4 2	111112		_		
□ EPA 🐹 Initial	7.		1		OX.	3635	11-11-11	L. jal	20	18	1
DEP Amended Amendment	i de la	(	City, Sta	ate, Zip Code		NIT	HIND	10	Q		Sub-market (d)
☐ Emergency (i		_	lame o	/Rent	200	100	Telephone	Number	ONTI	ROLZ	<u></u>
DOH justification)  Cancellation			Eq.	rual	Ria	hts		1999		29/	27
Name-of Facility Where Abatement is Taking	Diam (2)		FAC	LITY INFORM	ATION J		.(4)				
Name of Facility Where Abalement is Taking	riace (3)	-	10 II	ins		Type of Facility  School (K			S 15		
Street Address	7	4 V	ווייי	(1/1)		☐ Subchapt	er 8 (Other than I			٥	
				4		Other (i.e etc.)	. private & comme	ercial bu	ildings	, hom	es,
City (5)	7			ın	-	Square Feet	# of Floors		Bldg. /	10000	
1 Renton N	7		186	Code (7)		Current Hee /F		liabad)	80	7 (	
County (6) Mercer		6	STATE	USE ONLY)		Current Use (F	Prior if being demo	nisnea)			
Name of Monitoring Firm Hired by Building O	wner (8)		ASCN	/ No.	Name	of Abatement C					500000
EPC Technolo	sie:		*	NA		FPC Te	chnoli	gie	5	Ir	16
Street Address	23			•		Address	337	U			
City, State, Zip Code			-		City S	0. 601 State, Zip Code	111		-		_
New Equat	NJ		80	533		ew Equ	ist N	70	18	53	3
Project Manager for Movif ri g Firm	•	13	elepho			hone No.	Licens	e No.	20	L	08-2830000
Steve Schenken	Schedule			758-336	5 609	758~33 of OSHA Monito		<u>, O</u>	27	7	
Start Date (10) 7-23-18	Scriedule 7			18	\$100 cm (0.000 cm (0.000 cm)		"chnologie	· 7	-		
Occupancy Status During Abatement (Check	Only One		-		Street	Address	~		710		
Facility Closed/Vacated During Entire P			ent		E	20 Bo	x 337			i.	44
☐ Abatement Performed Outside of Norma	al Facility	Hours				State, Zip Code	117	08	<b>6</b> 7	~	7
Scope of Work (Check All That Apply)		-			1 10	-gypn	- 100	00	ے	כם	-
25 ≥3 sf or ≥3 lf	□ R	enovati	on			3 Full Contain	ment with Negativ	e Press	ure		
☐ ≥160 sf or ≥260 lf		emolitio	on		72	3 Mini-Enclosu	ıre			q	
(14)							ed (*) and Non-Fi	riable Pr			
		Locatio				95			00000	ement /pe	ŧ
Location of Asbestos-Containing Material (ACM)	1 0.37	ormally i Solely			Description	of Material (ACM)	Amount		T	-	Ė
TO BE ABATED		ntenano odial St		(i.e. then	mal system	s insulation,	(Specify	Rer	Re	nca	Encl
In Facility (13)		(12)			ırfacing, VA er miscella		SF or LF)	Remova	Repair	Encapsulate	Enclosure
200 3	Yes	No	,N/A					-		ate	6
CRay Space	X			Pine -	To su	lation	20 L	FX			
Charles free				TIPE			00=	1	1		
,	+										
Name of Registered Waste Hauler			DEP W		bic Yards	Name o	of Registered Lan	dfill		-	
EPC Technologies	:	Ha	uler ID	Marian burner	Waste	Was	ste Manag	emen	to	e f	A
2: 2: 1			, , 0		sposal Date	City, St	ate	18 42 1		-	
New Egypt Completed by	NJ	`\		by	7-27		nisville	PA			
Steve Schenker	Title	side	+	Ĺ	Signatur	Sal		Date 7	- 13	3-1	8
OFFICE SCHOOLING	LICE	210	111		1 VI	THE VOICE	LO PL				.===

CK 7308

ACD 44



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

D&S Proj. #: 18-142			(Pursu	ant to NJA	2 8:60	and 12:120)		Transfer, Transfer,	Dale of Barrier Street, Street	-			
									CE		W	EI	1
Date of Notification (1)	П	Name of Bu	ilding Own	er/Operator (2	)		_	I land I	or and an article of the second	1.1	13		111
0 7 /1 0 /1 7		abel daza		on operator (2	,				Const.	9 20	110	And Anti-Anti-Anti-Anti-Anti-Anti-Anti-Anti-	The second secon
Agencies Notified Type Notifica	tion	Street Addre	ess								40	16	1
_ IH,	- 11			Ī				1 4000	QTOO A	***			9
Amendment #	: 1	City, State, 2	Zip Code				-		LICENS		101	Sr.	1 2
□ DOL		long bra	nch, nj 0	7740				A - Street Stree	2101110	ING	Water Sport	SS-SANSAN, LOIS	-
DOH (including	l In	lame of Co		7740			-	Telephone	Number	-			
DCA justification			1127 320					Totophone	7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
Cancellation	n	abel daz							- 1				
Name of facility where the target	:- t-1.:t	(0)	FAC	ILITY INFORM	IOITAI	1	_	T=					
Name of facility where abatement	is taking pia	ace (3)						Type of Facility (4	(K - 12)				
abel daza							_	☐ Subcha	pter 8 (O	ther t	han K	-12)	
Street Address	- 77								Private/Co		rcial		
									Homes, et		BI	dg. Ag	ae
City (5)	Cour	nty (6)			Cou	inty Code (7)	-		. 011 1001			-9	37
lang branch	mo	nmauth			(Sta	te use only)		Current Use (Pri	or if being	dem	nolishe	ed)	
long branch Name of Monitoring Firm Hired by		nmouth er (8)		ASCM No.	Н	Name of Abatem	ent C	Contractor (9)					
		30050				D & S REST							
Street Address					=	Street Address							
						20 California	Av	e.					
City, State, Zip Code					-	City, State, Zip Co	-						-
						Paterson, NJ		503					
Project Manager for Monitoring Firm	1	I Ph	one Numb	er	_	Telephone Numb		703	License	Numb	er		
						973-345-80				169			
Start Date (10)	ISchool	I. Completio	n Doto /11	1	_	Name of OSHA	Monit	or	-				
Start Date (10)	Sched	i. Completic	on Date (1)	)		D & S Resto	ratio	on, Inc.					
07/16/18	07/31					Street Address							
Occupancy Status During Abateme		3.50				20 California	Ave	enue					
Facility closed/vacated during Abatement performed outside						City, State, Zip Co	ode						
Describe: NORMAL F	IOURS				_	Paterson, NJ	075	503					
Scope of Work (check all that appl	y)	-					Пғ	ull Containment w/	negative	press	ure		
$\boxtimes$ >3 sf or >3 lf	Renovatio	n					_	fini-enclosure		3			
☐ ≥160 sf or ≥260 lf	Demolition	1						Slovebag procedure					
		n normally i	used solely		-			lon-Exempted (*) a	and Non-f	riable R			
Location of asbestos-containing		enance/cust						Amount		е	R	E n	E
material (acm) to be	staff(12)			material (		sbestos-containing	9	(Specify SF	or	m o	р	С	n
abated in facility (13)	Yes	No	N/A		–			LF)		v	a i	р	L
basement				PIPE INSU	LATI	ON		30 1 ft		e	r		
basement				boiler insul				42 sq ft		X	H	H	片
				CONCI MISCI	ation		-	12 39 11			片	Η	片
					**************************************		5550			금	片	=	H
					-					井	片	片	片
Registered Waste Hauler	INIDE	EP Hauler I	D# 1 C	ubic Yards of V	Maste	Name of Registe	rod I	andfill		Ш	Ш	ш	Ш
D & S RESTORATION, INC.	135			yds.	14310			Landilli RESOURCE REG	COVER	Y			
City, State		4-00-01	Disposal D			City, State	, 1	INDE	- O I DIC	-			
PATERSON, NJ 07503			07/17/13			TULLYTON	VN, I	PA					
Completed by (Print or Type)	Title			Signature					Date				
BOGDAN JOLDZIC	PRESID	ENT							07/10/	2018	í		

State of NJ

			Notifi	cation of As	besto	s Abatement	h		Material States	Я-счения под		-
D&S Proj. #: 18-139	_P	AU	(Pursi	ant to NJA	C 8:60	0 and 12:120)	In E	C		V	E	M
							IKI		***********	tu transverénce	7	THE STATE OF THE S
Date of Notification (1)  0 7 / 0 9 / 1 7		Name of	Building Owr	ner/Operator (2	!)		Dynamic Co. Market Co.	JUL	6	2018	- Company	M
Agencies Notified   Type Notificat		hilary o	donnelly				bd lob			-010	-	taest
☐ EPA ☐ Initial		olieet Ad	uress				AS	BESTOS	CON	TRO	L.8.	angonya
DEP Amended Amendment #		city, State	e, Zip Code					LICE	MISM	3		-
DOL Emergency	-11			NJ 07043								
DOH (including justification)	l N	ame of 0					Telephor	ne Numbe	r			
DCA Cancellation	- 11	hilary	donnelly				,					
			FAC	ILITY INFORM	MOITAN	N	1					
Name of facility where abatement	s taking pla	ace (3)					Type of Facility					
hilary donnelly							1 =	ol (K - 12)			40)	
Street Address							Variable Control of the Control of t	apter 8 (C (Private/C			-12)	
							Bldgs.	/Homes, e	tc.		la Ac	
City (5)	Cour	nty (6)			Cou	inty Code (7)	Square Feet	# of Floo	s	DI	dg. Ag	je
						ate use only)	Current Use (P	rior if bein	g den	olishe	ed)	
Upper Montclair  Name of Monitoring Firm Hired by	esse Bldg Owne	and the same of th		ASCM No.	L,	Name of Abatement	Contractor (9)					
rame of monitoring ( min timed by	Diag. Owne	) (O)		ASCIVI NO.		D & S RESTOR						
Street Address					-	Street Address	ATION, INC.					
						20 California A						
City, State, Zip Code						City, State, Zip Code						
Project Manager for Monitoring Firm		Т	Phone Numb	per	-	Paterson, NJ 07 Telephone Number	7503	License	Numb	er		
,						973-345-8020			1169			
Start Date (10)	Sched	. Comple	etion Date (1	1)	-	Name of OSHA Mon		-10-				
07/19/18	08/31	/18				D & S Restorati	ion, Inc.					
Occupancy Status During Abatemer						20 California Av	venue					
Facility closed/vacated during Abatement performed outside						City, State, Zip Code						
Describe: NORMAL H					-	Paterson, NJ 07	7503					
Scope of Work (check all that apply							Full Containment v	v/negative	press	ure		
$\boxtimes$ >3 sf or >3 lf	Renovatio	n					Mini-enclosure					
≥160 sf or ≥260 lf	Demolition	1				Ä	Glovebag procedu Non-Exempted (*)		friable	proce	edure	
Location of	Is location by mainte		ly used solel	y					R	R	Е	Е
asbestos-containing material (acm) to be	staff(12)	1		Descripti material		sbestos-containing	Amount (Specify S	SF or	m o	p a	n C	n c
abated in facility (13)	Yes	No	N/A				LF)		V	i	a p	L
basement		X		PIPE INSU	JLATI	ION	105 l ft		e			
			-	1					ዙ	片	무	十
Registered Waste Hauler		P Haule	er ID# C	ubic Yards of	Waste	Name of Registered	Landfill				Ц	Ш_
D & S RESTORATION, INC. City, State		06	Disposal D	2 yds.		TULLYTOWN,	RESOURCE RE	ECOVER	Y			
PATERSON, NJ 07503			07/20/1			City, State TULLYTOWN.	, PA					
Completed by (Print or Type)	Title			Signature		1		Date				
BOGDAN JOLDZIC	PRESID	ENT		1				07/09	/2018		1120	

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:120) Date of Notification ( Name of Building Owner/Operator (2) 07/11/2018 Port Authority of New York & New Jersey/APM Terminals (Check No. 1173) Agencies Notified Type Notification 5080 McLester St ☐ EPA X Initial X DEP Amendment # City, State, Zip Code JUL 1 0 2018 X DOL Elizabeth, New Jersey 07201 Emergency (including justification) Name of Contact ☑ DOH Cancellation Telephone Number Slobodan Buljevic ☐ DCA 201-595-4874 CONTHOL & ASBESTO\$ FACILITY INFORMATION LICENSING Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) AQI Drivers Assistance Building at APM Terminal □ School (K-12) Street Address Subchapter 8 (Other than K-12) 5080 McLester St. ☑ Other (i.e. private & commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Elizabeth, New Jersey 07207 10.000 50+ County (6) County Code (7) Current Use (Prior if being demolished) Union (STATE USE ONLY) APM Terminal Drivers Assistance Bldg Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Brinkerhoff Lilich Corporation Street Address Street Address 1805 Atlantic Avenue 606 McBride Ave City, State, Zip Code City, State, Zip Code Manasquan, NJ 08736 Woodland Park, New Jersey Project Manager for Monitoring Firm Telephone No Telephone No. License No. Jason P. Hooper 732-223-2225 973-225-8400 01104 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 07/23/2018 08/07/2018 Iris Environmental Laboratories, LLC Occupancy Status During Abatement (Check Only One) Street Address 2333 Route 22 West Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code ☐ Other - Describe: Union, NJ 07083 Scope of Work (Check All That Apply) □ ≥3 sf or ≥3 lf П Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 if X Demolition Mini-Enclosure Glove Bag Procedure / Limited Containment &Tent X Non-Exempted (\*) and Non-Friable Procedure Amount Is Location Abatement (Specify Normally Type Location of Description of SF of LF) Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Maintenance/ Encapsulat TO BE ABATED (i.e. thermal systems insulation, Enclosure Removal Repair Custodial Staff? In Facility surfacing, VAT, or (12)(13)other miscellaneous) Yes No N/A Employee Break Room & Locker X 12x12 tan floor tile and associated 310 SF X Rm mastic **Drivers Reception Window Area** X 12x12 tan floor tile and associated 450 SF X mastic Old Bank Office Restroom X 12x12 tan floor tile and associated 90 SF X mastic Hallway along Restrooms & Utility X 12x12 tan floor tile and associated 72 SF X Rm mastic AQI Office X 12x12 brown floor tile and 330 SF X associated mastic Main Hallway X 12x12 brown floor tile and 120 SF X associated mastic

Supply Closet		Х			brown floor tile a ted mastic	ınd	24 SF	X		
Telephone Closet		Х			brown floor tile ar ted mastic	nd	24 SF	Х		
APM Manager's Office		X			brown floor tile ar ted mastic	nd	135 SF	Х		
Driver's Assistance Office		X		Committee Commit	brown floor tile ar ted mastic	nd	530 SF	Х		
Throughout building			Х	Black co	mposite window si	I	110 SF	Х		
Throughout building			Х	Interior	window caulking		23	X		
Throughout building			X	Exterior	window glazing		23	Х		
Main Roof Level;	X			Rolled r	oofing felt		2,880 SF	X		
Overhang Roof level	Х			Rolled re	oofing felt		60 SF	X		
Main Roof	X			Flashing	/sealant compound	-roofing	400 SF	X		
Overhang Roof level	X			Flashing	/sealant compound	-roofing	50 SF	X		1
Canopy Roof	X			Rolled ro	oofing felt		1,800 SF	Х		T
Canopy Roof	Х			Flashing	/sealant compound	-roofing	400 SF	Х		
Name of Registered Waste Hauler		2007	IJDEP 1		Cubic Yards	Name of F	Registered Landf	ill		
Asbestos Transportation Co/DBA AT	ГС		lauler II 18724		of Waste 60	Minerva E	nterprise, LLC			
City, State Yaphank, New York					Disposal Date 08/07/2018	City, State Waynest	ourg, Ohio			
Completed by Adriana Olejarova	Title Pr	esiden	ıt		Signature	10		oate 07/11/20	)18	
ASB-41 (R-06-08)	•				Do not use	this form for	asbestos licensu	ire exemp	ted act	ivities

page 2

PAID			are of Name	(mmm					Line	- N. S. S.		10000000
111-	NOT	IFICATIO		TOP ABATEN								
CH#006027				10 and 12:120			DOL - 10	DAY	/_		1	
Date of Notification (1) 07/10/2018				mer/Operator Plainsboro		cho	ol District	10/1	<u>'</u>			
Agendes Notified Type Notifiest	lon		ddress	7 1611 150015	7108/11/11	7-	JUL -3	1/11	-		H	
EPA Initial Amended			'Illage Roa			1.	BOT -	1.8	1		Ц	
EPA Initial Amender Amender Amender			Mindons	NJ 08550		L_		1				
Emerger	ncy (Including	100000000000000000000000000000000000000	Cardao!	140 0000	<u></u>	14.4	White net Prid	ABOUT				and the state of t
DOH justificati		1 200	homas E.	Daly			(609) 710-(	odb <sup>V</sup>	1-12		R	$\mathbb{N}$
Name of Facility Where Absternant is To	alilas Dinas (2)	FAC	ILITY INFOR	MATION	Type of Fe	The Co		141	_			<u> </u>
J.V.B. Wicoff Elementary School					Scho:		į.					
Street Address					Subo:	sebar.	8 (Other than K-1	2)		JUL	. 1	6 2018
510 Plainsboro Road					Other etc.)	l, e, p	tvate & commerci	(a) build	unge,	name	٠.	
City (6)					50.000+	1	0 of Floors	B	dg.A	STO	10/	CONTROL.
Piaineboro County (6)		County	Goda (7)		The second secon	(P:10	r If being demails	hed)	Ut	Lic	/E/V	BING
Middlesex		(STATE	USE ONLY		School							-
Name of Monttoring Firm Hired by Build	ing Owner (6)	ASC	M No.		of Absterna					355-19		
PARS Environmental Inc.					Mat Diagn	)9110	LLC				_	
500 Horizon Drive Suite 540					Address Senwild A:	8						
City, State, Zip Code				0.000	tate, Zip Ca							
Robbinsville, NJ 08891					mingdale	N,I						
Project Manager for Monitoring Firm Rafael Torres		100	one No. 890-7277		none No. 1) 928-391)		D1181	No.				
Start Dele (10)	Scheduled		The state of the s		of OSHA A		0.101			_		
07/13/2018	08/30/20			Hazı	mat Diag	ast ic	LLC	_	4			
Occupancy Status During Abatement (	Check Only One)				Address	-		ACE CHE		10,000		
Facility Closed/Vacated During En Abstement Performed Outside of Other - Describe					state. Zip C:			_	-	-		
Other - Describe					mingdalo		07403					
Scope of Work (Check All That Apply)												
≥\$ sf or ≥3 if × ≥ 160 sf or ≥280 if		noiten			Full Co:		ent with Nagative	Pressu	K.			
K 2 0 310 2200 1	Med 20	tion on		F	Glovet	2 P10		hin Des	madur	100		
			T	b	I MEN-E	THE	u ( ) mi u i sousi i je	Tale Fie		ment	1	
Legation of	No	ocation mally		Description	n of			-	T	(DB		1
Asbeetos-Containing Material (ACN	Main!	Solety by tenance/		os Conteining I	Vaterial (At:	A)	Amount (Specify	20	_	9	5	
In Facility		112) Staff? (12)	(1.0	surfacing, VA	10.74		SF or LF)	kmova	Repair	азвіктвейсти	nciosure	
(13)	Yes	No N/A	-	CALLER LLIB COME	ngous;			E.	-	liste	10	1
0.1.16	TOS	-		cod Flooring	- Maggie		4200 SF	×		-	-	1
School Gymnasium	-+-+	X	44	ווווסטוד טטט	A MIGGIN		720001	1	-	+		1
		_	+					-	-	1	-	1
		-	+					-	-	-	-	
Name of Registered Waste Hauler		NJDFP	Weste	Cubic Yards	18	me of	Registered Land	M)			1	1
Hazmat Diagnostic LLC/Newar	k Carting Inc.	Hauler	ID No.	of Wasts			.W.S.North / F		s Lai	ndfill		
City, State		UU334	40/04509	Disposel Dat		y, lite				_	2000	1
	ewark, NJ			TBD		2.5	ville, PA					
Completed by	Title	1-4	8 le 4 1	Signatu	To		,	Date 07/10	1204			
Tatlana Rotaru	Admir	nstrative	Assistant		pro-	7-		J17 (U.	1601			

ASS-41 (R-06-08)



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

			¥						1 tune	<1				and the same
Date of Notification (1) July 13, 2018				of Building O					Mary selling mary and a selling	Althorna and a	JUL	16	201	R
Agencies Notified Type Notification				Address Interchang	ne 14	5 NB 1	Toll F	Plaza	1	The state of the s			ies O I	<i>J</i>
X EPA X Initial Amended Amendment	-#	F	City, Sta	ate, Zip Code	е				9	ASB	ESTO:	S CC	NTH	DL 8.
Emergency	(including	-		orange, No	070	17			T-1-	- A I	Total Contract of the Contract		4 V	and the same of th
DOH justification)  DCA Cancellation				Venger					100000000000000000000000000000000000000	phone N 75053				
Name of Facility Mileses Abelian action Tallia	DI (		FAC	ILITY INFOR	RMATI	ON			13.75					
Name of Facility Where Abatement is Takir GSP Interchange 145 NB Toll Plaz		3)					Тур	e of Facility (4 School (K-12	5					
Street Address GSP Interchange 145 NB Toll Plaz	za						×	Subchapter 8 Other (i.e. pr	(Other			ldings	, home	es,
City (5) East Orange							Squ N/A	etc.) lare Feet	# of I	Floors		3ldg. /	Age	
County (6) Essex				Code (7) USE ONLY)				rent Use (Prior	r if bein	g demoli	shed)			
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASC	M No.				atement Cont Harms Cons			, Inc.			
Street Address						Street	Addr				1			
City, State, Zip Code								Zip Code NJ 07731						
Project Manager for Monitoring Firm		1	Telepho	ne No.		Teleph	and the same	SOME OF STREET		License	No.			-
			**					2089		01055				
Start Date (10) July 24, 2018	Schedule August			Date (11)		Name	of OS	SHA Monitor						
Occupancy Status During Abatement (Chec	k Only Or	ne)				Street	Addr	ess						
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other – Describe: Bridge / Road Record	nal Facility	Hours			_	City, S	State,	Zip Code				W Es-a		
Scope of Work (Check All That Apply)														-
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demoliti				×	M G	ull Containmer lini-Enclosure lovebag Proce on-Exempted	dure	<del>-</del>				
	Is	Locati	on					on Excinpted	( ) and	14011-1 116	ZDIC 1 10	name of the late	ement	
Location of	1	Normall	у		Des	cription	of					Ty	ре	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Ma	d Solel intenar todial S (12)	nce/		ermal surfac	aining M systems sing, VA niscellan	s insu T, or	lation,	(Sp	ount ecify or LF)	Removal	Repair	Encapsulate	Enclosure
Toll Booth Counter Tops			X	AC	СМ С	ounter	r Tor	os	30	SF	X			
										<u> </u>				
											-			
Name of Registered Waste Hauler		210 000	JDEP W		Cubic \			Name of R	egistere	ed Landf	ill			
George Harms Construction Co., In	C.	1 1.000.0	auler ID 885	200	of Was IBD	te		Waste M	anage	ement				
City, State Howell, NJ		,			Dispos IBD	al Date		City, State Tullytowr	n, PA					
Completed by Sam Hahn	Title Proje	ct En	gineer		Si	gnature		MM	/		7/13	1201	<u>~</u>	



#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:50 and 12:120)

Check # 1116

Date of Notification (1)			Name of	Building Owner/GRAUDY	Operator R5A	(2) (E	STATE	PAI	erals &				$\mathbb{V}$
Agencies Notified Type Notification			Street A	O PARK					11-51	.11		£	2010
DEP Amended Amendment #		_	FLO	te, Zip Code RHAM PI	ARK	, N	507	932	7		_ ;	U	LU10
DOH justification) Cancellation			Ros	Contact FALCIO		•		Tele	phone Nun	HE S	TOS	CGN SIN	TRO G
Name of Facility Where Abatement is Taking	Place (3	3)	FACI	LITY INFORMAT	ION	Туре	of Facility (4	4)					
Street Address  JS DEFOREST AVE.	ios.					X	School (K-1) Subchapter Other (i.e. p	8 (Othe	r than K-12 commercia	) ii bullo	lings,	home	s,
City (5) SUMMIT						Squa	etc.) re Feet		Floors		idg. A		$\exists$
County (6)  (NOLOW				Code (7) USE ONLY)		Curre	nt Use (Pric	or if bein			0-0		
Name of Monitoring Firm Hired by Building Or	wner (8)		ASCN	No.		of Aba	itement Con	tractor	(9)				
Street Address					Street	Addre							
City, State, Zip Code							ip Code ark, N.J.						$\neg$
Project Manager for Monitoring Firm		T	Telepho	ne No.	Telepi	hone N 262-5	0.		License No 00156	).			
Start Date (19)	Schedul	ed Con	pletion I	Date (11)	and the second		HA Monitor	ntal Se	rvices In	c.			$\neg$
Occupancy Status During Abatement (Check	50 96 168	0.00				Addre	ss r Street				i.		
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other Describe:	riod of a	Abatem / Hours	ent	MATERIAL PROPERTY AND ADDRESS OF THE PARTY AND	City, S	State, Z	ip Code ick, N.J. 0	7606					
Scope of Work (Check All That Apply)													
≥3 sf or ≥3 if . ≥160 sf or ≥260 if	Processor.	Renova Demoliti	2010 2000			Min	II Containme ni-Enclosure ovebag Prod n-Exempted	edure					
		Locati				140	77-EXEMPLE	1 / din	INOIPI NED	6110	Abate	ement pe	
Location of Asbestos-Containing Material (ACM)	Use	Normal ed Sole	ly by	De Asbestos Con	escription		I (ACM)	Ar	mount				
TO BE ABATED In Facility (13)	Cus	intenai todial S (12)	Staff?		i system cing, V/ miscella	AT, or			pecify or LF)	Removal	Repair	Encapsulate	Enclosure
2 NA EL LOGANCIRCIE	Yes	No	N/A	VA	7			. 4	HOUSE	x			
			1,5										
Name of Registered Waste Hauler Newark Carting, Inc.		Н	JDEP W lauler ID 4509		Yards aste	7.3	1		red Landfill I Sanitar	/ Lar	dfill		
City, State Newark, N.J. 07105				Dispo	sal Date	ON	City, State Pen Arg		08072			,	
Completed by R. McDonald	Title Pres	sident			Signatur	M	Fueld	-	4	te /	2/	18	-

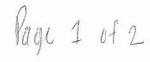


Print Form

	PAID	ı		ICATION	ate of New Jers I OF ASBESTOS to NJAC 8:60 a	ABATE		And an open glowed stage of the		heeks E ()	# 25 E	63	6-W	7 [E	
Date of Notification (1) 7/13/	/2018			Name of	f Building Owner		r (2) Palash		7	- 11	11 1	C	201	0	Annual control of the
Agencies Notified	Type Notification		-	Street A	ddress				111	UU	IL 1	6	201	<u>ŏ</u>	110
								-	- Contraction						Anna City and Anna Anna Anna Anna Anna Anna Anna
EPA DEP	Initial Amended			City, Sta	ate, Zip Code				b <sub>e</sub>	ASBES	TOS	CU	NIF	OLE	in in
X DOL	Amendmen					Roeblir	ng, NJ (	08554	-		LICE	<b>ISI</b>	NG		-
X DOH □ DCA	Emergency justification) Cancellation				f Contact Mary Bauer-	Re/Max	(		Tel	ephone I	Numb	er			
				FACI	LITY INFORMA	TION			_						- 0.1
Name of Facility Where	Abatement is Takir Residential	ng Place (3	3)					Facility (4)							
Street Address			-24111	<del></del>			☐ St	chool (K-12 ubchapter 8 ther (i.e. pri	(Oth			wild	inan	home	
							X Ot		vale (	x comme	erciai i	Juliu	ings,	ПОПТЕ	:5,
City (5)	pebling, NJ 08	554			/		Square 150		# 0	f Floors 2		0.000	dg. A 80+	_	
County (6)	lington				Code (7) USE ONLY)		Current	Use (Prior Res	if bei		olished	)			
Name of Monitoring Firm		Owner (8)		ASCN	No.	Name	of Abate	ment Conti	III SACTIST				-		
MEC	CS					Stev	ens En	vironmer			s, Ind	). 			
Street Address	Box 341						t Address Box 322								
City, State, Zip Code	wicks, NJ 085	15					State, Zip	Code NJ 08501							
Project Manager for Mon	itoring Firm		- 1	Telephoi	ne No.		hone No.	10 00001		License	e No.	_			
Bill Weisgarbe	r			732 29	90-2217	609	259-968	88		00493	3				
Start Date (10) 7/22/2018		Schedule		mpletion ( /2018	Date (11)	Name MEC	of OSHA	Monitor							
Occupancy Status During	g Abatement (Che	ck Only Or	ne)			Street	Address								
Facility Closed/Vaca							Box 341 State, Zip			5-2-5					
Other – Describe:								I, NJ 085	15						
Scope of Work (Check A	II That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		_	Renov			-	→ Mini-l	Containmer Enclosure ebag Proce			e Pre	ssur	е		
						>	Non-	Exempted		d Non-Fr	riable	Proc	edur	Э	
			Loca									,	Abate	ment	
Location Asbestos-Containing			Norma d Sole	ely by	Asbestos Cor	escription		A CMA	^	mount			. ,		
TO BE ABA	ATED		intena	nce/ Staff?	(i.e. therma	l system	s insulation		(8	Specify		R	מג	Encapsulate	Ē
In Facil (13)	ity	Cusi	(12)			acing, VA miscellar			SF	or LF)		Remova	Repair	apsı	Enclosure
(.0)		Yes	No	N/A	outer	moochai	neous)					/al	5	ılate	ure
Basement/Cra	awlspace		X		Duc	t Insula	ation			12 lf		Х			
											1				
												+			
Name of Registered Was	ste Hauler		1	NJDEP W	aste Cubi	Yards		Name of R	egiste	red Land	dfill				
Stevens Environmer			1 1 1 2 2 2	Hauler ID 18292	No. of W			Fairless			V 100 EE				
City, State				100000000000000000000000000000000000000	Dispo	sal Date		City, State	)						
Allentown, NJ 08501					10.50	/3/18	1 1	Morrisvill	é, P	A					
Completed by Mahlon E. Stevens		Title	Proje	ct Mana	ager	Signature		1 //			Date 7/	13/	18		



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



Date of Notification (1)					Name	e of Buildin	g Owner/Op	erator (	(2)					
7 /	10 /	18			5575597	and Up fo		- I'm		4000 2262	2	#EOE	2	
							Jaielli	([])		1806-2313	Chk.	#505	3	
Agencies Notified	Type Notific	ation				t Address		16	envisor mineral eggs ( ) or to to to to the desire of the	7	Annual Control			
☑ DOLWD					22	3 East Br	oadway							
☑ DHSS	Amendm	52 - w - w			City,	State, Zip (	Code		JUL 16	2018	7			
□ DCA	☐ Emerger			·	Sa	lem, NJ 0	8079	ing both		ALIE CALLED				
(NJAC 5:23-8)	justificati		olaalii	9	Name	e of Contac	t			Telephone Nu	mber			
	☐ Cancella	tion			Jo	dy Veler			ASBESTOS C	NO856-759-40	97			
					FA	CILITY IN	FORMATI	ON			entulare 6			
Name of Facility Where A	batement is	Taking	Place	(3)					Type of Facility	(4)				
Commercial Proper					dina				School (K-12					
Street Address									☐ Subchapter 8	8 (Other than K-1	2)			
225 East Broadway										rivate and comm	ercial b	uildin	gs,	
City (5)									homes, etc.) Square Feet	# of Floors		Ida A		
Salem									12509	# 01 F1001S	В	ldg. A	ge	
County (6)					Cour	nty Codo (7	)(STATE USE	ONILVA				60		
Salem					Cou	ity Code (/	NOTATE USE	ONLY)		ior if being demo	lished)			
Name of Monitoring Firm I	Hirad by Duil	dina O	Numar.	(0)	A C C A A	NI-			Vacant					
Criterion Laboratori		ding O	wner	(0)	ASCM	NO.	20 30		ent Contractor (9)					
Street Address	es								d Mold Service	s, Corp.				
400 Street Road							Street Add							
									oulevard					
City, State, Zip Code							City, State							
Bensalem, PA 19020									1J 08036					
Project Manager for Monit	oring Firm				ephone		Telephone			License No.				
Mike Panepresso				1	15-244		609-702	2-0400		00862				
Start Date (10)						ite (11)	Name of O	SHA M	lonitor	silv comment				
7/23/_					9_/.	18	EMSL A	Analyti	ical, Inc.					
Occupancy Status During							Street Add	ress						
☐ Facility Closed/Vacated							200 U.S	. Rout	te 130 North					
Abatement Performed	Outside of No	ormal l	Facility	y Hou	rs - Des	scribe	City, State,	Zip Co	ode					
Time of Abatement:		PIV	u	_PIVI		AIVI	Cinnam	inson	, NJ 08077					
Scope of Work (Check all t	that apply)						04212420				- 10			
≥3 sf or ≥3 lf			⊠ Re	novat	ion		× M	ini-Encl	Neg	ative Pressure	ncles	inva	1	
☐ ≥160 sf or ≥260 lf			☐ De				⊠G	lovebac	Procedure					
	v						⊠ No	on-Exer	mpted (*) and No	n-Friable Proced	ure			
				Loca							Ab	atem	ent T	уре
Location o Asbestos-Containing M		.		Norma	illy ely by			ption o			R	R	m	m
TO BE ABAT	iateriai (ACIVI ED	"		intena			stos Contain , thermal sy		terial (ACM)	Amount (Specify	Removal	Repair	nca	nclo
IN Facility			Cust		Staff?	(1.0	surfacing	, VAT,	or	SF or LF)	oval	=	Encapsulate	Enclosure
(13)		-		(12)	1	-	other misc	cellaneo	ous)	•			late	G,
			Yes	No	N/A								-	
SEE ATTACHED SCOR	PE				$\boxtimes$								$\boxtimes$	
					$\boxtimes$								П	
		-									ᆜᆜ			
												Ш	Ш	
Name of Registered Waste	Hauler			1000	JDEP \	2.0223	Cubic Yard	s of	Name of Regist	tered Landfill		1		
Waste Management				F	lauler II 17273		Waste 5		Grand Cen	tral				
City, State					11213	,	Disposal Da	ate	City, State					-
Lafayette, NJ							7/29/18	2020-53	Penn Argyl	ο ΡΔ				
Completed By (Print or Typ	ne)	Title					1	11107	, Jan Algyl	- William				
Kimberly A. Trumbet	100 P	F10070000	fice (	`00"	dinator		Signat	ule)	1	D	ate	16 .	d	
19B 41		01	1106 (	2001	annat Of			$\times 1$	V		11-	10-1	8	

Basement - Old Furnace

Remove fittings associated with corrugated pipe insulation - two (2) each

Remove corrugated pipe insulation - one (!) LF

Remove transite panel debris and other non acm debris - two (2) SF

Remove flue packing - two (2) SF

Remove packing material (Base of furnace) - two (2) SF

1st Floor

Remove tan floor tile - 4,500 SF 0

Remove window glazing from metal windows on rear wall - three (3) each (approximately 6 LF of window glazing per window)

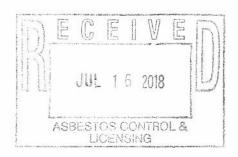
2<sup>nd</sup> Floor

Remove tan floor tile - 64 SF 0

Remove window glazing from metal windows on rear wall - three (3) each (approximately 6 LF of window glazing per window)

1st & 2nd Floor:

Completely remove the six (6) metal windows that have asbestos containing window glazing located along the back wall of the 1st & 2nd floor and dispose of them as asbestos containing waste





# 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)					
6 / 1 /	18	3		100000000000000000000000000000000000000		n Corporation	ACTION .	Job #1806-2310	C	hk. #	£ΝΔ	
						- corporation	Ties.	TRAF		D //		-
☑ EPA ☐ Initial					Address O Grand	view Parkway, S	uite 200			<u> </u>		
☑ DOLWD   ☑ Amend     ☑ DHSS   Amend	led Iment #	2		City, S	State, Zip (	Code		111				
□ DCA □ Emerg			,	Bir	mingham	ı, AL		U JUL 1	6 20	)18	Special services	UII
(NJAC 5:23-8) justific		ioidalii	3	Name	of Contac	t		Telephone Num	ber		i itaa	1000
☐ Cance	llation			Eliz	abeth Ma	ann	and to come	205-970-785	0	D.C.		- Address
				FA	CILITY IN	IFORMATION		LICEN	SING	HUL	Š.	-
Name of Facility Where Abatement	s Takin	g Place	(3)				Type of Facility	and the second of the second s		-		, , ,
HealthSouth - Residential							School (K-1					
Street Address							☐ Subchapter	8 (Other than K-12				
30 Oliver Street							homes, etc.	orivate and comme	rcial b	uildin	gs,	
City (5)							Square Feet	# of Floors	В	ldg. A	ge	
Toms River							2500	2	15	•	_	
County (6)				Cour	ty Code (7	)(STATE USE ONLY)	Current Use (P	rior if being demolis	shed)			
Ocean							Residentia	l				
Name of Monitoring Firm Hired by B	uilding (	Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9	)				
Horizon						Asbestos and	d Mold Servic	es, Corp.				
Street Address						Street Address	-1071	25 1840				
PO Box 316						3859 Sylon B	oulevard					
City, State, Zip Code						City, State, Zip Co	ode			9.400.3		
Thorofare, NJ 08086						Hainesport, N	IJ 08036					
Project Manager for Monitoring Firm			Tele	phone	No.	Telephone No.		License No.				
Dave or Steve Flanigan				56-848		609-702-0400		00862				
Start Date (10)	0.0000000000000000000000000000000000000			tion Da		Name of OSHA M	onitor					
6/11/18				/ _	18	EMSL Analyti	ical, Inc.					
Occupancy Status During Abatemen						Street Address						
☐ Facility Closed/Vacated During E						200 U.S. Rout						
Abatement Performed Outside of Time of Abatement:AM	Normal Pl	M/	y Hou PM	rs - Des 	cribe AM	City, State, Zip Co						
Scope of Work (Check all that apply)	į.					With the second	100					
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf		⊠ Re					osure Procedure	gative Pressure				
						Non-Exer	mpted (*) and N	on-Friable Procedu	re			
		100	Loca						Ab	atem	ent T	уре
Location of Asbestos-Containing Material (A)	(M)			ely by	Ashe	Description of stos Containing Ma		Amount	Re	Re	En	En
TO BE ABATED	,	100000000000000000000000000000000000000	intena			., thermal systems i	nsulation,	(Specify	Removal	Repair	сар	Enclosure
IN Facility (13)		Cus	(12)	Staff?		surfacing, VAT, other miscellaned		SF or LF)	<u>a</u>		Encapsulate	ure
		Yes	No	N/A		Other miscellane	ous)				ite	
Roof				$\boxtimes$	Shingle	s & Tar Paper		1500 SF				
Exterior					Asbesto	os Siding		2000 SF				
1st Floor Bathroom & bedroom					Texture	d Coating		200 SF				
Chimney & Attic				$\boxtimes$	Flashin	g & Joint Comp	ound	3 SF & 400 SF				
Name of Registered Waste Hauler				JDEP \	3513357	Cubic Yards of	Name of Regi	stered Landfill				
Waste Management			-	17273		Waste 5	Grand Ce	ntral				
City, State						Disposal Date	City, State					
Lafayette, NJ						7/11/18	Penn Argy	rle, PA				
Completed By (Print or Type)	Title	9				Signature		Da	te			
Kimberly Trumbetti	A	dmin.	Ÿ.			1 AX		alaren-	7	9-	18	

ASB-41 MAY 11



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

Date of Notification (1)			Name	e of Buildin	g Owner/Operatori	215	To the contract of the contrac	-			
	18				e Township	) E G.	#1806-2315	EIR	k]#N	A	
Agencies Notified Type Notific	ation		Stree	t Address	Hr	1)		7111	11		
☑ EPA ☐ Initial			22	98 Route	33	II JUI 1		-1111	II		
☑ DOLWD ☑ Amende	77		City,	State, Zip (	Code	1 001 j	<del>-b 2018 -</del>	HU	1		
☑ DHSS   Amendm     ☐ DCA   ☐ Emerger	_				e, NJ 08691	L			P II		
DCA Emerger (NJAC 5:23-8)		ing		e of Contac		ASBESTOS (	Telephone	tember			
☐ Cancella		H 1835			onstruction Offi	icial LICEN	609-552-	5563			
			FA	CILITY IN	FORMATION			- Continue			
Name of Facility Where Abatement is	Taking Pla	ce (3)				Type of Facility (	(4)				
Windsor School						School (K-12	)				
Street Address		75 S. C. C. C.				☐ Subchapter 8	(Other than k	<-12)	V0 - V20 /247		
16 School Drive						Other (i.e., pr homes, etc.)	ivate and com	nmercial	buildin	gs,	
City (5)						Square Feet	# of Floors		Bldg. A	\ge	
Windsor, NJ						5438	2				
County (6)			Cou	nty Code (7	()(STATE USE ONLY)	Current Use (Prid	or if being den	nolished	)		
Mercer						School					
Name of Monitoring Firm Hired by Buil	ding Owne	r (8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
Horizon Environmental					Asbestos and	d Mold Services	s, Corp.				
Street Address					Street Address				-507		
PO Box 316					3859 Sylon B	oulevard					
City, State, Zip Code					City, State, Zip Co						
Thorofare, NJ 08086					Hainesport, N						
Project Manager for Monitoring Firm		Tel	ephone	No.	Telephone No.		License No	1			
Steve Flanigan		11	56-848		609-702-0400		00862				
Start Date (10)	Scheduled	Comple	etion Da	ite (11)	Name of OSHA M	onitor	00002				
7 /16 /18			) /		EMSL Analyti	42403416					
Occupancy Status During Abatement (	Check only	one)			Street Address						
☐ Facility Closed/Vacated During Enti			ment		200 U.S. Rout	to 130 North					
☐ Abatement Performed Outside of N	ormal Faci	lity Hou	rs - Des	cribe	City, State, Zip Co			=2:::			
Time of Abatement:AM	PM/	PM		AM	Cinnaminson						
Scope of Work (Check all that apply)	7										
☐ ≥3 sf or >3 lf	ПЕ	Renovat	ion			ainment with Nega	ative Pressure	2			
⊠ ≥160 sf or ≥260 lf		emoliti			☐ Glovebag	Procedure					
		Marian III				mpted (*) and Non	-Friable Proce	edure			
1		Is Loca Norma			8 <u>0</u> 5 80 80		F-60 PC-10 Revenue 1-1-1-1	A	batem	ent T	уре
Location of Asbestos-Containing Material (ACM	n U	sed Sol		Acho	Description of stos Containing Mat		A =====+	7	7 72	m	m
TO BE ABATED	"   N	laintena	ince/	(i.e.	, thermal systems i	nsulation,	Amount (Specify	Kemova	Repair	ıcar	clo
IN Facility	Cu	stodial (12)	Staff?	*****	surfacing, VAT,	or	SF or LF)	Val	-   -	Encapsulate	Enclosure
(13)	Yes	T	N/A	1	other miscellaned	ous)				ate	(0)
Bathrooms, Rm 203 & Rm 202S			N/A	Sheet F	loorina		710 SF	×	1 -		
Rms 103,104,202,203					os Panels	-	200 SF				
Boiler Room				Breechi	ng Insulation		16 SF			1	
				Diccom	ing modiation		10 5F				
Name of Registered Waste Hauler		100	JDEP V	Naste	Cubic Yards of	Name of Booist	ared I andfill			Ш	Ш
Waste Management		10.00	lauler II	No.	Waste	Name of Registe Grand Cent					
City, State			17273		5 Disposal Date	City, State					
Lafayette, NJ					7/20/18	Penn Argyle	e, PA				
Completed By (Print or Type)	Title				Signature			Date		754	-
Kimberly A. Trumbetti	Office	Coord	linator	• 1	CKIL-	erence d		7	-9-	10	

ASB-41 MAY 11

PAID	N	IOTIF (F	CATIO	tate of No N OF ASI t to NJAC	BESTOS	ABATE	MENT	E	P	尼		EI	7		
Date of Notification (1) 07/11/2018			Name o	of Building	g Owner/ ers	Operator	(2)		C	区	l V				
Agencies Notified Type Notification  EPA Initial				Address /ernon l	Road			and the same of th	JUL	1	6 2018	A PARTY NAMED IN COLUMN TO A PARTY NAMED IN COLU	IJ		
EPA DEP DOL Initial Amended Amendment Emergency (		_		ate, Zip C nville, P		5		AS	BEST	OS (	CONTRO	L&		Parameter of the Parame	
DOH justification)  Cancellation	including		Name of Steve	of Contact			L			9	SING ephone No 17-510-3	imber 276	and the second	ž	
Name of Facility Where Abatement is Taking	Place (2)		FAC	ILITY INF	ORMAT	ION	_	72				- 2000000			
Street Address	y riace (3)						×	School		) (Oth	er than K-		ldings	, hom	ies,
City (5) Paramus							Squa N/A	re Fe	et	# o N/	f Floors A		Bldg. N/A	Age	
County (6) Bergen				Code (7) USE ONL	n		Curre	ent Us IVATI	e (Prior E HOU	if bei	ng demolis	hed)			
Name of Monitoring Firm Hired by Building C N/A	wner (8)		ASCN	/l No.		Name EHV	of Aba	atemer ATEN	nt Contr IENT	actor	(9)				
Street Address						Street 89 F			STRE	ET					
City, State, Zip Code						City, S PATI			te J,075	14					
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 973-	one N 333-			1000-1116	License N 01274	No.			
Start Date (10) 07/21/2018	Scheduled 07/22/2	d Cor	npletion	Date (11)	ey ey	Name EHV			nitor IENT I	LLC					
Occupancy Status During Abatement (Check  Facility Closed/Vacated During Entire P Abatement Performed Outside of Normal	700	500	nent			Street 89 F			STRE	ET					
Abatement Performed Outside of Normal Other – Describe:	al Facility	Hours	5		_	City, S PATI			le J,075	24			0.00	57.55	
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 if ≥160 sf or ≥260 if	Management .	enova emolit				×	Mir	ni-Encl	osure Proced	dure	Negative			· A	
	98980	.ocati	2000						1	7	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	T	Abat	emen: /pe	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Main Custo	tenai	ly by nce/		tos Cont thermal surfac		laterial insula T, or		)	(S	mount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A									-		ite	0
BASEMENT		X				VAT				1	100	X			
							-								
Name of Registered Waste Hauler		IN	JDEP W	aste	Cubic	Varde		Nam	o of Po	aicto	red Landfill				
EHW ABATEMENT LLC		H	auler ID 03095		of Was				State						
City, State PATERSON,NJ		N.			Dispos TBD	al Date	1	City, Bro	State nx,NY	′					
Completed by Victor espíritu	Title projec	t ma	nager		S	gnature	W	W	9/		Da 0	te 7/11/2	2018		

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

		NO.					ESTOS ABA 8:60 and 5:1		·In	E (	0 6		$\overline{\mathbb{V}}$	E
Date of Notification (1)		250	-	Mar	no of Buildi	200	Owner/Operator (	(2)	11/11	THE OWNER OF THE OWNER	Windows.			
	18							Job #1804-529	6	JI	JL :	6	2018	}
Agencies Notified Type Notif	fication			Stre	et Address			***	1 1					
☑ EPA ☐ Initial				5	756 Hartfo	ord	& Pointville R	d.	at and a	AODE	2700	~~		N 11
☑ DOLWD ☑ Amend				City	, State, Zip	Cod	de		9	ASBES	LICE			AL Ca
	ment # <u>1</u>	-		Jo	oint Base	ME	L, NJ 08064		Lundaumentes		attraction of		-	and the state of
DCA Emerge (NJAC 5:23-8) iustifica		cludin	ıg		ne of Contac				Telepho	no Num	hor			
Cancel					II William			\		310-80				
							DRMATION		300-	10-00	00			
Name of Facility Where Abatement is	Taking	Place	e (3)	17	ACILITI II	41 (	JUNIATION	Type of Facility (4	4)					
Fort Dix Correctional			- (-/					School (K-12)						
Street Address								Subchapter 8		an K-12	2)			
5756 Hartford & Pointville Rd								Other (i.e., pri				uildin	gs,	
City (5)						_		homes, etc.)						
Joint Base MDL, NJ 08064								Square Feet	# of Flo	oors	В	ldg. A	\ge	
County (6)				Cor	inty Code (7	7)(S1	TATE USE ONLY)	Current Use (Prio	r if being	demoli	shed)			
Burlington								Military						
Name of Monitoring Firm Hired by Bui		wner	(8)	ASCN	No.	N	ame of Abateme	nt Contractor (9)						
Quality Environmental Conce	pts	19					AbateTech, In	ıc.						
Street Address						St	treet Address							
1053 Tuckahoe Road							30 Maple Ave.	. PO Box 25						
City, State, Zip Code						Ci	ty, State, Zip Co	de						
Williamstown, NJ 08094					_		Lumberton, N	J 08048						
Project Manager for Monitoring Firm	/		Tel	ephone	No.	Te	elephone No.		License	e No.	-			-
Ed Knorr			8	56-304	1-6402	1	609-265-2107		0052	29				
Start Date (10)	Schedul	led C	omple	etion Da	ate (11)	Na	ame of OSHA Mo	onitor						-
<u>6</u> / <u>21</u> / <u>18/</u>	7	_ /	_2	<u>)</u> /			EMSL Analytic							
Occupancy Status During Abatement (						St	reet Address			4.00 - III - II - A - 41 <del>- 1</del>				
Facility Closed/Vacated During Enti	ire Perio	d of A	Abate	ment		1	200 Route 130	North						
Abatement Performed Outside of N Time of Abatement: 6:30AM-2:30-	ormal F	acility	Hou	rs - Des	scribe	Cit	ty, State, Zip Coo	de			- 20			
			IVI	AIV	1	(	Cinnaminson,	NJ 08077						
Scope of Work (Check all that apply)	_	•						inment with Nega	tive Pres	sure				
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>	Party	Rer Der	0.00				☐ Mini-Enclo	sure Procedure						
		1 001	Homas	211				pted (*) and Non-	Friable P	rocedu	e			
			Locat								1	atem	ent T	/pe
Location of			orma	lly ely by			Description of				-			-
Asbestos-Containing Material (ACM TO BE ABATED	1)		ntena		Asbes	tos	Containing Mate ermal systems in	erial (ACM)	Amo		em	Repair	nce	ncl
IN Facility		Custo	100000000000000000000000000000000000000	Staff?	(1.6.		surfacing, VAT, o		(Spec		Removal	₹.	ısqı	Enclosure
(13)	_		(12)		1		her miscellaneo			/	-		Encapsulate	, 0
		/es	No	N/A						9				
Open Area			$\boxtimes$		Floor tile	e &	Mastic		8,000	SF				
		1				10.00				V-12 - 3/15		П	П	П
Name of Registered Waste Hauler				JDEP V	Vaste	Cul	oic Yards of	Name of Register	red Land	fill	1-			$\dashv$
AbateTech, Inc.			Н	auler ID 18750	C-1-271-2000	Wa		G.R.O.W.S. L		1401/				
City, State						Dis	posal Date	City, State						
Lumberton, NJ						7	/20/18	Tullytown, P.	Α					
Completed By (Print or Type)	Title						Signature			Da	te ,	,		
Gwendolyn Trumbetti	Ope	ratio	ons (	Coordi	nator		(m	X			7/	11/	18	

ASB-41 **MAY 11** 

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

							,	100	IF C	F	П	1/1/16
Date of Notification (1)	10-11			Nan	ne of Buildi	ng Owner/Operato	r (2)	111)]_	<u>L</u> (6	15		₩ <u>E</u>
7 / _	10 /	18		J	CP&L/Fire	stEnergy Compa	any / Job #1806	-5335				
Agencies Notified	Type Notifica	ation		Stre	et Address				JUI	-1	5 2	010
⊠ EPA	☐ Initial			Total Annual Service		Place- Building	Δ	11 11	001	- 1	0 2	018
Ø DOLWD				_	, State, Zip						-	
☑ DHSS	Amendme	_			)	, NJ 07960		A	ASBEST	OS C	TNO	ROL &
☐ DCA (NJAC 5:23-8)	☐ Emergeno justificatio		ng	-	ne of Conta			L	LI	CEN:	SING	
(1107/0 0.25-0)	☐ Cancellati	30000			ohn Greco			Telephone				1450-1410 W 900-101
								201-602	2-1499			
Name of Facility Where Al	notomont in T	alda - Dia	(0)	F/	ACILITY	NFORMATION						
JCP&L- Morristown	Datement is 18	aking Plac	e (3)				Type of Facility					
Street Address							School (K-12	(Other than	V 10\			
420000 20 1000000							Other (i.e., pr	rivate and co	mmercia	build	inas.	
7 Andrea LAne							homes, etc.)					
City (5)							Square Feet	# of Floor	s	Bldg.	Age	
Morristown, NJ												
County (6)				Cou	inty Code (	7)(STATE USE ONLY)	Current Use (Pri	or if being de	emolished	i)		
Morris							Substation					
Name of Monitoring Firm H		ng Owner	(8)	ASCN	1 No.	Name of Abatem	ent Contractor (9)					
1 Source Safety & He	ealth, Inc.					AbateTech,	Inc.					
Street Address						Street Address						
140 S. Village Ave. S	uite 130					30 Maple Av	e. PO Box 25					
City, State, Zip Code						City, State, Zip C					-	-
Exton, PA 19341						Lumberton,	NJ 08048					
Project Manager for Monito	ring Firm		Tel	ephone	No.	Telephone No.		License N	0.			_
Brian Hovendon			6	10-524	-5525	609-265-2107	7	00529				
Start Date (10)	Sc	heduled (	omple	etion Da	ate (11)	Name of OSHA N	Monitor	1 00000				
_7_/_12_/_		7				EMSL Analyt						
Occupancy Status During A	batement (Ch	eck-only	nne)			Street Address						
☐ Facility Closed/Vacated				ment		200 Route 13	O North					
☐ Abatement Performed O	utside of Norr	nal Facilit	v Hou	rs - Des	scribe	City, State, Zip Co	Percentagna de la composición del composición de la composición de					
Time of Abatement:	AM	_PM/1:30	PM	A	М							
Scope of Work (Check all th	at annly)	-	_			Cinnaminsor	1, NJ 08077					
	or apply)					☐ Full Cont	tainment with Nega	ative Pressur	'e			
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf or ≥260 lf</li></ul>			novati			☐ Mini-Enc	losure		T0.			
		∐ De	molitio	on		☐ Gloveba	g Procedure mpted (*) and Non-	Eriable Bros	andura			
		Is	Locat	ion		Ziton Exc	mpted ( ) and Noti	-i flable F100				-
Location of		1	Norma	lly		Description o	f				nent 1	1
Asbestos-Containing Ma			d Sole intena		Asbes	stos Containing Ma	terial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
TO BE ABATE IN Facility	<u>:D</u>	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	odial		(i.e.	, thermal systems i	insulation,	(Specify	, lov	air	aps	losi
(13)			(12)			surfacing, VAT, other miscellane		SF or LF	)   22		ula	are
		Yes	No	N/A							te	
Exterior Pole JC149MR	Т				Asbesto	s risers		16 LF	×	1		+
					71000010			10 11		-	1	14
				Ш						]   🗆		
											П	П
			П	П							1=	
Name of Registered Waste H	Hauler			JDEP V	Vaste T	Cubic Yards of	Name of Registe	red Landell				
AbateTech, Inc.			100000	auler ID		Waste	G.R.O.W.S. I					
City, State				18750		2		Landill				
Lumberton, NJ						Disposal Date	City, State	A028				
						7/20/18	Tullytown, P	A				
Completed By (Print or Type)	2	itle				Signature	Λ		Date	ı		0/
Gwen Trumbetti		Operati	ons C	oordi	nator		mlx		1	110	11	X

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### STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NIAC 8-60-7 AND 12-120-7

Date of N	Votification	/11	CO-PUTATION OF THE PERSON OF T	Principal Modulation	(FORSE			AND 12:12					
02	/_26	/ 18				SOUTH	AVE URB	Owner / O	perator (2)		1.7	17.12	7 M 2
	/	/	7				Address		THE PERSON				1 12 3016
Agencies		Type of				570 CO	MMERCE E	BLVD		1	T.		
	EPA DEP		Initia				ate, Zip Co				40	Contraction of	
	DOH			nded ndment	# 4		TADT, NJ 0	7072	- Control of the Cont				SCUNTROL
	DOL				w/ justification	DOMINI	f Contact			Telepho	one Nur	nber	
				cellation		Bomman	OK TOCCI			201-487	-5657		
			************			FACILITY	INFORMA	TION		1201-107	-0007		
1													
Mame of I	Facility Who	ere Abatei	ment is	Taking	Place (3)		Type of	Facility (4)					CONTRACTOR OF THE PARTY OF
400 300	III AVEIVUE							C-L1	17.40)				
Street Ad	dress						-	School (	rter 8 (Other	4h 1/ 40			
400 SOUT	TH AVENUE								e., private &				
								bldgs., h	omes, etc.)	o i i i i i i i i i i i i i i i i i i i			
City (5) GARWOO	ND	County (	5)		County Code	(7)	Square	Feet	# Of Floor	S	Build	Ing Age	
GARVIOC	00	UNION			1			0,000		2	_		
								Use (Prior	If being dem	olished)		40	) +
Name of I	Monitoring	Firm Hired	bv Bl	da. Owr	ner (8)	IASCM N		CIURING					
1000	-			-5	(0)	JACON IV	7						
EHI							NORTHS	TAR CONT	RACTING G	ROUP, INC	).		
Street Add		- A.					Street A					-	
	SHORE TE			-									
SPARTA.								ns Parkway					
	ngr. For Mo	nitorina F	irm		Telephone No	ımber	City, Sta	ie, zip cou	е				
WILLIAM H	KIERBIL				973-729-5649		East Han	over, NJ 07	936				
Sheduled	Start Date	(10)	Sche	d. Comp	letetion Date (	11)		ne Number		License	Number	r	
$\frac{-03}{}$	$\sqrt{\frac{12}{12}}$		-	06	<u> 30</u> /	18							
Occupanc	y Status Du	rina Ahaé	l	/Charle	( / ( ) / ( )			84-8682				00860	
	Facility Clo	osed/Vaca	ted Du	rina En	tire Period of			OSHA Mon	itor RACTING GF	OHD INC			
_	Abatement	t					Street Ac		I WOTING G	NOOP, INC			
	Abatement	Performe	d Outs	ide of N	lormal Facility								
V	Hours - De		7.00.4				Personal State of the Land of	ns Parkway	The second secon				
Ŋ.	Other - Des	scribe:	7:00 A	MV-3:30	PM			e, Zip Code					
Scope of V	Nork (Chec	k All That	Apply)		THE RESERVE AND ADDRESS OF THE PARTY OF	deletin decembra	JEast Hall	over, NJ 079	330			<b>GEOGRAPHICA</b>	
	,		, 4001)										
_	Demolition		[	고	Renovation	1	Full Cont	ainment wi	th Negative I	Pressure			
	≥3sf or ≥3l: ≥160 sf or 2						Mini - En						
Ľ.	2100 51 01	200 11				D D		Procedure	e nd Non-Friab	lo Dennado			
						Ľ.	NOTIFICACI	iipteu ( ) ai	ia Non-Friad	ie Procedi	ire		
	ocation of			ls		Descript	ion of			Abatemer	it Type		
Asbes	stos Contai	ning	Neroes:	ation	As		ontaining			R		E	ĮΕ
то	BE ABATE	n	n contracting	mally sed	,,	Material e., therma			Amount	E	R	N	N
	in Facility	<u>. L</u>		lely			i systems facing, VA	т	(Specify SF or LF)	M O	E P	C	C
	(13)			Wain-			ellaneous)		SF OI LF)	v	A	A	0
				ance/						A	î	s	s
			A 5000 DOM	todial						L	R	U	ľu
	TOTAL CONTRACTOR OF THE PARTY O			f (12)	AND DESCRIPTION OF THE PARTY OF							L	R
BASEMENT	T		ASSESSMENT OF THE PARTY OF THE	70 [A	PIPE & FITTIN			When the same of t	00015				
IST FLOOP					PIPE & FITTIN				600 LF 505 LF	7	Ц	1 4	
ND FLOOR					PIPE & FITTIN				540 LF	7	H	1 4	1 4 -
ST FLOOF			TIT		CEILING TILE				1,850 SF	7	-	1 4	1-4-
Name of Re	egistered W	aste Haul	e 🗆 🗆	] [	NJDEP Waste	네트네이크리아()		Registered					
NORTHSTA	AR CONTRA	ACTING GI	ROUP,	INC	Hauler ID No.	Yards	GROWS						A CONTRACTOR OF THE CONTRACTOR
City, State						of Waste Disposal	City. State						
AST HANG	OVER, NJ					Disposal	MORRISV						
													ALL STATES
ompleted	by (Print o	г Туре)			Title		The second second second	Signature				Date	
Steve Stiles					Project Mana								
SR-41			anner pos	ALCOHOLOGICA DE	Project Manage	l Historiaansteree	Wetwens company					L 05	5/16/18

Location of Asbestos Containing  TO BE ABATED in Facility  (13)	Is Locatio Normali Used Solely by Main tenance Custodia Staff (12	ly n- el al	Description of Asbestos - Containing Material (ACM) (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatem R E M O V A L	R E P A I R	E N C A P S U	E Z C L O S U
	YES NO	AW				+	L	IR.
2ND FLOOR			VAT	400 SF	(Z)	177	1-	1
1ST FLOOR		J	VAT& MASTIC	150 SF	7	1-	1 1	1 1
ROOF		T	ROOFING	750 SF				
ROOF		J	FLASHING	1,280 SF	1	1-1	1 #	╁╫
					T T	<del>T H</del>	1 1	1 1



#### STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT

Date	f Notification	TO SECURIO CONTRACTOR SON		e transport	NOTIFIC	CATION O UANT TO	NJAC 8:60-	OS ABATEN 7 AND 12:1	20-7	4		E C	[ <del>]</del> ,	N.W.
02	_ / _26_	/18	_			SOUT	of Building H AVE URE Address	Owner / O BAN RENEV	perator (2) /AL, LLC				16	2019
4	es Notified	Type of	Notification	7			OMMERCE	BLVD		1	- 21			
	EPA DEP		Initial			City, S	tate, Zip Co	ode		-		Charles and	n ormania	
]	DOH		Amende				STADT, NJ					GBEST	4.1.1.1.1	MIRO
]	DOL	1 0	Amendr		# w/justification	Name	of Contact			Teleph	none Nu	mber		The state of the s
			Cancella			DOM	NICK TUCC	ı		201 40	7 5057			
			TANDES MARTINES NELLAND	Marchin		FACILIT	Y INFORMA	ATION		1201-40	7-5657	S STATE PORTUGATION OF		TSA-MORENIA COMM
Name of	of Facility Wh TER STREET	ere Abate	ment is Tal	ting	Place (3)		Type of	Facility (4)						
Street A	ddaaa			-				School						
	taaress TER STREET							Subcha	pter 8 (Other	than K-1	2)			
Journal of the second	TERGITALET						V	Other (I.	e., private &	cmmerci	al			
City (5)		County (	5)		County Cod	le (7)	Square		# Of Floor			The Amberlands of		
GARWO	OOD	UNION				(, )		30,000	# Of Floor	2	Build	ling Age		
Til Jack									if being dem	olished)	-	A	0 +	
1	5 8 8 21 3						OFFICE	S/SHOPS		ononeuj		40	J T	
Name o	f Monitoring	Firm Hire	d by Bldg. (	Own	er (8)	ASCMI	NO							
EHI														
Street A	ddress						INORTH	STAR CON	RACTING G	ROUP, IN	IC.			
	ST SHORE TI	RAIL					Street A	ddress						
	ite, Zip Code						- 32 Willia	ms Parkway	,					
	NJ 07871							te, Zip Cod						
Project	Mngr. For Mo	nitoring F	irm		Telephone N		7		ñ					
	M KIERBIL d Start Date	(4.6)	72		973-729-5649			nover, NJ 07						
03	12	(10) / 18		mp	letetion Date		Telepho	ne Number		License	Numbe	r		
	// /	/	06	-/			- 073	884-8682						
Occupar	ncy Status Du	uring Abat	ement (Che	ck (	Only 1)			OSHA Mor	itor			00860		
	Facility Clo	sed/Vaca	ted During	Enti	ire Period of				RACTING GE	ROUP. IN	0			
	Abatement						Street Ad				-			
	Hours - De	Performe	d Outside	of N	ormal Facility	1		20.0						-
1			7:00 AM-3:	30 0	ON A			ns Parkway						
				301	191			te, Zip Code over, NJ 07						
Scope of	Work (Chec	k All That	Apply)	No bolisht.		DWDRIFE ELECTRICATION AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE P	and Treat	0,01,140 07	300			Description	THE CONTROL OF	
	Demolition		V		Renovation		Full Conf	tainmant w	th Negative I					THE CONTRACT
	≥3sf or_>3lf						Mini - En	closure	tri Negative i	Pressure				Militar
1	≥160 sf or ≥	260 If				$\overline{\checkmark}$	Glovebag	Procedure						10
						7	Non-Exer	mpted (*) ar	nd Non-Friab	le Proced	lure			and the same of th
	Location of		ls	7		Donorin	Man of							
Asb	estos Contai	ning	Location	,	А	Descrip sbestos - 0	containing			Abateme R	nt Type	-	1-	and the same
_	0.00		Normally	1		Material			Amount	E	R	E	E	9112511
1	O BE ABATE	므	Used				al systems		(Specify	M	E	C	C	
	in Facility (13)		Solely	-			rfacing, VA		SF or LF)	0	P	A	L	The state of
	(10)		by Main- tenance		or	other mise	cellaneous)	)		٧	A	P	0	No.
			Custodia							A	1	S	S	100
			Staff (12							L	R	U	U R	Sales and the sa
			TES PI	A							<del> </del>	+	12	- I
OFFICES,	SHOPS				PIPE & FITTIN	IG			3,570 LF	v		1	1	
FFICES					/AT/MASTIC				3,700 SF	-	T	十一片	1	
OOF					RANSITE				3,600 SF	<b>4</b>		1 6	_	5
ame of	Registered W	aste Haul		I IF	ROOFING	Cusic	Mama = C	2nnieta	86,390 SF	7				
ORTHST	AR CONTRA	CTING G	ROUP, INC		fauler ID No.		GROWS	Registered	andtill					
				_		of Waste	1							TOWNS
ity, State	NOVER, NJ	0000077777		-		Disposal	City. State							
AO I MAI	NOVER, NJ					Date	MORRISV	ILLE, PA						The state of the s
omplete	d by (Print or	Type)		T	itle	1		Signature				Data		
teve Stile	c											Date		TOOTICE
CD 44	egacompositions 2		ومراوات فيلك والمتعارف المالات	P	roject Manage	91	CLASSIFICATION AND RESIDENCE	l				02	2/26/18	8

Location of Asbestos Containing  TO BE ABATED in Facility (13)	Is Location Normally Used Solely by Maintenance/ Custodial Staff (12)	Description of Asbestos - Containing Material (ACM) (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatem R E M O V A L	R E P A I	ENCAPSU	EZCLOSUR
ROOF	YES NO N/A				+	1-	-
EXTERIOR		FLASHING	1,120 SF	V	1	1	1
ROOF		CAULK	305 LF	N	1 7	1 +	1-
TOOF		TAR	360 SF	V	1 -	1	1
	1000	J				in	1 1



note

STATE OF NEW JERSEY
NOTIFICATION OF ASBESTOS ABATEME

	Average Transport		(PURS	UANT TO N	JAC 8:60-	7 AND 12:1:	20-7			3 E	ł W
Date of Notification 02 / 26				Name	of Building	Owner / O	perator (2)			WANTED THE PARTY OF	NAME OF STREET
$\frac{-02}{26}$		•		SOUTH	AVE URE	AN RENEW	AL, LLC	III	1		
Agencies Notified	IType of N	Votification	_		Address				l di	11 16	2018
☑ EPA		Initial			MMERCE			11.	1 44	1. 1. 5	CVII
DEP		Amended			ate, Zip Co TADT, NJ				-		
☑ DOH	-	Amendmen	t# 1		of Contact				Francis	Huan to the	
☑ DOL		Emergency	w/ justification	DOMIN	ICK TUCC			relepi	hone Nun	nber	Josephi Waza
		Cancellatio	n					201-48	37-5657		ris Cal
				FACILITY	INFORMA	MOITA					
Name of Facility Wh 450-490 SOUTH AVE	ere Abaten	nent is Takin	g Place (3)		Type of	Facility (4)			-		
						School	(K-12)				
Street Address					-		oter 8 (Other	than K 1	21		
450-490 SOUTH AVE	ENUE					Other (I.	e., private &	cmmerci	د) اعا		
City (5)	15					bldgs., l	nomes, etc.)		<b></b>		
City (5) GARWOOD	County (6 UNION	) .	County Cod	e (7)	Square	Feet	# Of Floor		Buildi	ng Age	-
- 1111000	ONION					35,000	1	1			
							if being den	olished)		40	+
Name of Monitoring	Firm Hired	by Bldg. Ow	ner (8)	ASCM N		ACTURING		-			-
		,		/ NOOM N	7						
EHI					NORTH:	STAR CONT	RACTING G	ROUP. IN	IC.		
Street Address	DAII			- The same of the same	Street A	ddress		01 1111	<u> </u>		
655 WEST SHORE TO City, State, Zip Code	100 ST (100 Miles)				1	200					
SPARTA, NJ 07871					32 Willia	ms Parkway					
Project Mngr. For Mc	nitorina E	irm	Tolonham		City, Sta	te, Zip Cod	e			-	
WILLIAM KIERBIL	ziatoring F	icut	Telephone N 973-729-5649		Footile	mune Mile-	000				
Sheduled Start Date	(10)	Sched Com	pletetion Date			nover, NJ 07	936				
03 / 12	/18	06	30	/ 18	relebuo	ne Number		License	Number	A William	
///	/	/	//		973-	884-8682			i i	00000	
Occupancy Status Du	uring Abate	ment (Check	Only 1)			OSHA Mon	itor			00860	
☐  Facility Clo	osed/Vacat	ed During En	tire Period of				RACTING G	ROUP. IN	C.		
Abatement			20 03502 MANUAL		Street A	ddress		7 114		-	-
Abatement	t Performed	d Outside of I	Normal Facility								
Hours - De		7:00 AM-3:30	DM			ns Parkway					
Cultil - Des		1.00 AIVI-3:30	FIVI			te, Zip Code					
Scope of Work (Chec	k All That	Apply)		N. C.	⊒⊏ası ⊓an	over, NJ 079	<b>73</b> 0				
□ D		27.00 S285	22 ( - 1 mars 2000 100 + Valley 1000 + V								
☐ Demolition ☐ ≥3sf or >3h		V	Renovation	V	Full Conf	ainment wi	th Negative	Pressure			
					Mini - En	closure					
	20011			V		Procedure					
				(J	NON-EXO	ripted (*) ar	id Non-Friab	le Proced	lure		
Location of Asbestos Contai		ls		Descript				Abateme	ent Type		
Assestos Contai	ining	Location	A	sbestos - C				R		E	E
TO BE ABATE	D	Normally Used		Material			Amount	E	R	N	N
runtil	_	Solely		.e., thermal		т	(Specify	M	E	C	C
in Facility			l iiist	other misc	acing, VA	1,	SF or LF)	0	P	A	L
in Facility (13)		by Main-	(1)					V	A	P	o s
		by Main- tenance/	01	outer misc	elianeous			A	11	S	s u
		tenance/ Custodial	01	outer misc	elianeous			A	R	111	
		tenance/ Custodial Staff (12)	OI .	outer misc	enaneous			A L	R	U	R
(13)		tenance/ Custodial Staff (12)			elianeous			5	R	L	R
(13) DFFICES/SHOPS		tenance/ Custodial Staff (12)	PIPE & FITTIN		enaneous		2,020 LF	5	R		
OFFICES/SHOPS FOILER ROOM		tenance/ Custodial Staff (12)	PIPE & FITTIN		enaneous		3 EA	L		L	
OFFICES/SHOPS OILER ROOM OFFICES/SHOPS		tenance/ Custodial Staff (12)	PIPE & FITTIN FITTINGS VAT/MASTIC		elianeous		3 EA 3,000 SF	L 2			
OFFICES/SHOPS OILER ROOM OFFICES/SHOPS OFFICES		tenance/ Custodial Staff (12) SS C CA	PIPE & FITTIN FITTINGS VAT/MASTIC LINOLEUM	G			3 EA 3,000 SF 290 SF	L 2			
OFFICES/SHOPS OILER ROOM OFFICES/SHOPS OFFICES ame of Registered W	/aste Haule	tenance/ Custodial Staff (12)	PIPE & FITTIN FITTINGS VAT/MASTIC	G			3 EA 3,000 SF 290 SF	L I			
OFFICES/SHOPS OILER ROOM OFFICES/SHOPS OFFICES ame of Registered W ORTHSTAR CONTRA	/aste Haule	tenance/ Custodial Staff (12)	PIPE & FITTINGS VAT/MASTIC LINOLEUM NJDEP Waste	G	Name of F		3 EA 3,000 SF 290 SF	L I			
OFFICES/SHOPS OILER ROOM OFFICES/SHOPS	/aste Haule	tenance/ Custodial Staff (12)	PIPE & FITTINGS VAT/MASTIC LINOLEUM NJDEP Waste	Cubic Yards of Waste Disposal	Name of F GROWS	Registered (	3 EA 3,000 SF 290 SF	L I			
OFFICES/SHOPS OILER ROOM OFFICES/SHOPS OFFICES ame of Registered W ORTHSTAR CONTRA ity, State AST HANOVER, NJ	aste Haule	tenance/ Custodial Staff (12) SS P A	PIPE & FITTINGS VAT/MASTIC LINOLEUM NJDEP Waste Hauler ID No.	Cubic Yards of Waste Disposal	Name of F GROWS	Registered L	3 EA 3,000 SF 290 SF	L I			
OFFICES/SHOPS OILER ROOM OFFICES/SHOPS OFFICES ame of Registered W ORTHSTAR CONTRA	aste Haule	tenance/ Custodial Staff (12) SS P A	PIPE & FITTINGS VAT/MASTIC LINOLEUM NJDEP Waste	Cubic Yards of Waste Disposal	Name of F GROWS	Registered (	3 EA 3,000 SF 290 SF	L I			
OFFICES/SHOPS OILER ROOM OFFICES/SHOPS OFFICES ame of Registered W ORTHSTAR CONTRA	aste Haule	tenance/ Custodial Staff (12) SS P PA	PIPE & FITTINGS VAT/MASTIC LINOLEUM NJDEP Waste Hauler ID No.	Cubic Yards of Waste Disposal Date	Name of F GROWS	Registered L	3 EA 3,000 SF 290 SF	L I		Date	

Location of			ls		Description of		Abatem	ent Type		
Asbestos Containing  TO BE ABATED in Facility (13)		No So by ten		ly in- ce/ dial	Asbestos - Containing Material (ACM) (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U	E C L O S U R
2125	YE	S	NO	N/A				+	+	+-
SHOP			4		TRANSITE	1060 SF	[J]	1	-	
SHOP		П	1		GALBETOS	2,000 SF	[7]	1-4-	1 1	1 4
SHOP	TU		1		ELECTRICAL BOARD	10 SF	The same of the same of	14	1 4	
EXTERIOR			1		GLAZING	59 EA	V	1 4		
XTERIOR	TT		1	TT	CAULK		1			
ROOF	111	1	7	Ī	ROOFING	2,400 LF	1			
ROOF	1	-	7	Ħ	FLASHING/TAR	35,400 SF	V			
SARAGE/SHOP	1	-	7	-	5	500 SF	V			
HED	1-	-	-	౼	PIPE & FITTING	230 LF	V			
1120	44		4	4	FLASHING	50 SF	1			
	1 17	L	J	LJ			П			177



MOCK

STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NJAC 8:60-7 AND 12:120-7

Date of Notifica	tion (1)		(FUNSU			AND 12:12		1100	la la	113	15 11	W/	15
	EPA			Name o	f Building	Owner / Op AN RENEW	erator (2)		Normal Television		(see 14	170 (B.) (100	
/	_/			Street A		THE INCIDENT	IL, LLC	11:31					
Agencies Notific	_			570 CO	MMERCE E	BLVD			i	JUL	16	2018	3 11
0.000		1,10000000000			ate, Zip Co			1111					- 1
process.		median nama a salidara			ADT, NJ C	7072							Police
	_	Fmergency	#1_ w/ justification	Name of	f Contact			Teleph	one l				31.3C
		Cancellation	w justification	DOMINA	CK TUCCI			204 70	7.505	LiC	ENS.	NG	antino et aleman
	The second second		the state of the s	FACILITY	INFORMA	TION		201-48	/-565	/	165-57//0		
No. 67 W													
Name of Facility	Where Abate	ment is Taking	Place (3)		Type of	Facility (4)							
430-430 3001H	AVENUE				1 _	_							
Street Address					4 4	School (I							
450-490 SOUTH	AVENUE					Other // o	ter 8 (Other ., private &	than K-12	2)				
						bldas., h	omes, etc.)	cmmercia	31				
City (5)		(6)	County Code	(7)	Square		# Of Floor	s	Bu	ilding	a Age		
GARWOOD	UNION		N V		8	35,000		1	Du	manig	J Aye		
					Current	Use (Prior in	being dem	olished)	7		41	0 +	
Name of Monitor	ing Firm Ui	d by Pld= 0	(0)	Traces	MANUFA	ACTURING	1925	85			558	50.6	
or mornion	g . IIIII TIITE	u by blag. Owr	ier (8)	ASCM N	0	No.	110						
EHI					NORTH	STAD CONT	DACTING O	DOLLD	_				
Street Address					Street A	STAR CONT	VACTING G	KUUP, IN	Ú.				
					Tourect A	uuiess							
City, State, Zip C					32 Willia	ms Parkway							
SPARTA, NJ 078	71			0.00	City, Sta	te, Zip Code							
WILLIAM KIERBI	r Monitoring	Firm	Telephone Nu										
		Isohad Cama	973-729-5649			over, NJ 079	36						
//			31	/	Telepho	ne Number		License	Num	ber			
//	-/	/	/	18	973-8	384-8682				01	2000		
Occupancy Statu	s During Aba	tement (Check	Only 1)			OSHA Moni	tor			00	0860		
Facilit	y Closed/Vac	ated During Ent	tire Period of		NORTHS	TAR CONTE	RACTING GE	ROUP. INC	2				
					Street Ac				-				
☐ Abater	nent Periorm	ed Outside of N	lormal Facility										
		7:00 AM_3:30	DM			ns Parkway							
		7.00 AW-5.50	T IVI			te, Zip Code over, NJ 079							
Scope of Work (C	heck All Tha	t Apply)			Lastrian	Over, 143 075	30						15 No. 11 Miles
		Sec. 1970											
☐ Demoi	0-0-0-0-0		Renovation	<u></u>	Full Cont	tainment wit	h Negative I	Pressure					
	f or >260 lf					closure							
				N N		g Procedure mpted (*) an	d Non Print	I- D					
				ت	14011-LACI	iipteu ( ) aii	u Non-Friad	ie Proced	lure				
Locatio		ls		Descript	ion of			Abateme	nt Tv	me			
Asbestos Co	ntaining	Location	As	bestos - C				R	I		E	ĮΕ	
TO BE AE	ATED	Normally Used	,,	Material			Amount	E	R		N	N	
in Faci		Solely		e., thermal lation, surf		-	(Specify	M	E		С	C	
(13)		by Main-	ord	other misc	acing, va ellaneous	1,	SF or LF)	0	P		A	L	
		tenance/	0. 1	Juici illigo	chaneous,	' I		V A	IA.		P	0	
		Custodial						Ĺ	I R		S	S	
		<u>Staff (12)</u>						-	1.		L	R	
OFFICES/SHOPS		III S I D I I A	5155									-	
BOILER ROOM			PIPE & FITTING	G			2,020 LF	7					
OFFICES/SHOPS			FITTINGS				3 EA	7					
OFFICES		TINIT I	VAT/MASTIC LINOLEUM				3,000 SF	7					
Name of Register	ed Waste Hau	ile 🗆 🗀 🗇	NJDEP Waste	Cubic	Name of I	Registered L	290 SF	7					
NORTHSTAR COM	ITRACTING O	ROUP, INC		Yards	GROWS	.ogistereu L	anuilli						
				of Waste									
ity, State	N. I				City. State	9							
AST HANOVER,	NJ			Date	MORRISV	ILLE, PA							
ompleted by (Pri	nt or Type		Title				Λ	1					
picted by (PII	in or type)		Title			Signature	1				Date		
teve Stiles			Project Manage	r		7	1	1			///-		4.0
SB-41	- Combandado		- Jose manage			<u> </u>	7	,	-		0	)5/16/	18

TO BE ABATED in Facility (13)	b te Cı Si	Us Sol y N ena ust taff	mall sed lely flain nce codia f (12	ı- e/ al	Asbestos - Containing Material (ACM) (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U	ENCLOSUR
	YE	SN	IQ N	I/A				-	+	11
SHOP		1			TRANSITE	1060 SF	[J]			1
SHOP		1			GALBETOS	2,000 SF	N	1 7	1 7	<del>                                     </del>
SHOP		12		I	ELECTRICAL BOARD	10 SF	\(\bar{\pi}\)	1 7	+ +	1
EXTERIOR		1			GLAZING	59 EA	V	1 -	+ +	1
EXTERIOR		J			CAULK	2,400 LF		+ +	<del>                                     </del>	1
ROOF		V		J	ROOFING	35,400 SF	[J]	1	1 -	
ROOF		1			FLASHING/TAR	500 SF	7		1	
GARAGE/SHOP		J			PIPE & FITTING	230 LF		1	+ +	
SHED		J			FLASHING	50 SF	<u> </u>	1	1 -	
	I	T				30 SF	<b>V</b>	1 4	1-	<del>                                     </del>
	IT	T	T							



#### STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NJAC 8:60-7 AND 12:120-7

	(8) (5)		NOTIFIC/	ATION OF	ASBESTOS IAC 8:60-7	ABATEME	ENT		77 60	773 F	t community o	WEARING CONTRACTOR
Date of Notification	(1)		(FUN3U		f Building C				E W		W	
02_ /26_	/18			SOUTH	AVE URBAI	N RENEW	AL, LLC		(	Calabah in a A i chair		7
Agencies Notified	Type of I	Notification		Street A	aaress MMERCE BL	VD			JUL	16	Chris	
☑ EPA		Initial		_	ite, Zip Cod		****	117 111	u U L	1 V	1/16	1111
☐ DEP	V	Amended			ADT, NJ 07							Today by the
☑ DOH	_	Amendment		Name of	Contact			Telepho	ne Num	ber	revoi	e ·
☑ DOL			w/ justification	DOMINIC	CK TUCCI				LiC	ENSING	3	Cţ
		Cancellation	)			> = 00 H== -		201-487-	-5657		Owner product	ووالإينان بتلايدها بالمعالم
				FACILITY	INFORMAT	ION						925
Name of Facility Wh 400 SOUTH AVENU	ere Abater E	ment is Taking	Place (3)		Type of F	acility (4)						
Street Address						School (						
400 SOUTH AVENUE	=					Subchap	ter 8 (Other t	than K-12)				
						bldge h	e., private & o omes, etc.)	cmmercial				
City (5)	County (	6)	County Code	(7)	Square Fe		# Of Floors		Buildir	ag Ago		
GARWOOD	UNION				The state of the s	,000	7 01110013		Dulluli	ig Age		
					Current U	Ise (Prior i	f being demo	olished)	†	40	+	
N 639 6					MANUFAC	CTURING						
Name of Monitoring	Firm Hired	d by Bldg. Owr	ner (8)	ASCM N	0							
EHI				1	NODE			220				
Street Address							RACTING GF	ROUP, INC	<u>;</u> .			
655 WEST SHORE T	RAIL				Street Ad	aress						
City, State, Zip Code					32 William	is Parkway						
SPARTA, NJ 07871						e, Zip Code						
Project Mngr. For M	onitoring F	irm	Telephone No	umber	1	o, Lip ood	•					
WILLIAM KIERBIL			973-729-5649		East Hano	ver, NJ 07	936					
Sheduled Start Date	/		oletetion Date (	11)	Telephone	e Number		License I	Number			
03_//12	/18		/ <u>31</u> /	18								
Occupancy Status D	uring Abat	tomant (Chack	Only (1)			34-8682			(	00860		
☐ Facility CI	osed/Vaca	ted During En	tire Period of			OSHA Mon		OUD INO				
Abatemen		ited During En	the remod of		Street Add		RACTING GR	OUP, INC				
Abatemen	t Performe	ed Outside of N	Normal Facility		Ou cet Aut	41633						
Hours - De	escribe: _				32 William	s Parkway						
☑ Other - De	escribe: _	7:00 AM-3:30	PM		City, State							
Scope of Work (Che	ck All That	Apply)		CONTRACTOR ASSAULT	East Hano	ver, NJ 079	936					
												1
Demolition		~	Renovation	$\overline{\checkmark}$			th Negative F	ressure				
<ul><li>≥3sf or ≥3</li><li>≥160 sf or</li></ul>					Mini - Enc							
≥ 100 SI 01	2200 II				Glovebag							
				[4]	Non-Exem	ipted (*) ar	nd Non-Friab	le Procedi	ure			es.
Location of		ls		Descript	ion of			Abatemer	nt Type			
Asbestos Conta	ining	Location	As	sbestos - C				R		İΕ	E	
TO DE ADAT	- D	Normally		Material			Amount	E	R	N	N	
TO BE ABAT		Used		e., therma			(Specify	M	E	C	C	
(13)		Solely by Main-			facing, VAT	,	SF or LF)	0	Р	A	L	
(10)		tenance/	l or	outer misc	ellaneous)			V	A	P	0	
		Custodial	1					A	I	S	s	
		Staff (12)	1					L	R	U	U R	
		TS DO DA		-						+	-	-
BASEMENT			PIPE & FITTIN	G			600 LF	7		1	+	$\neg \neg$
IST FLOOR			PIPE & FITTIN				505 LF	7	H	1 7	+-	H
ND FLOOR			PIPE & FITTIN	G			540 LF	Ø.	ī	1 7	1	H
IST FLOOR	A/		CEILING TILE				1,850 SF	7		1 6	1	
Name of Registered N	waste Hau		NJDEP Waste		Name of Re	egistered	Landfill					
NORTHSTAR CONTR	ACTING G	KOUP, INC	Hauler ID No.		GROWS							
City, State				of Waste	Oit. Of t							
EAST HANOVER, NJ				Disposal Date	City. State	LLE DA						
				Date	MORRISVII	LLE, PA						
completed by (Print	or Type)		Title		1	Signature	A	Ä		Date		
M 81 W					ľ	orginature «	4	4	2020	Date		
Steve Stiles	H 1		Project Manage	er		(	XTX	T		0.5	5/16/1	8
SD 44				and the same of th	-	AND RESIDENCE PROPERTY.					1	-

Location of	ls	Description of		Abatement Type				
Asbestos Containing  TO BE ABATED in Facility (13)	Location Normally Used Solely by Maintenance/ Custodial Staff (12)	Asbestos - Containing Material (ACM) (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U	ENCLOSUR	
	YES NO N/A				-	-	1	
2ND FLOOR		VAT	400 SF	[J]		$+$ $\Box$		
1ST FLOOR		VAT& MASTIC	150 SF	N	H	+ =	1 7	
ROOF		ROOFING	750 SF	N	1 7	+ =	-	
ROOF		FLASHING	1,280 SF	N	1 1	1 1	1 7	
				H	1 1	1 7	1 1	
				T	1 7	1 1	1 1	



hock

#### STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NJAC 8:60-7 AND 12:120-7

Date of Notifica	ation (1) 26 / 18			Name o	of Building	Owner / Op AN RENEW	erator (2)		llo l		1 12 1	11
Agencies Notifi	od ITuno of	NI - AIGI 41 -		Street A	Address			1 - 1 1		0)4 102 102 101		1 1
	PA Jype of	Notification Initial	THE RESERVE OF THE PERSON NAMED IN	70 COMMERCE BLVD					e P			
	EP   B	Amended			ate, Zip Co TADT, NJ 0		1		CUL	10 (0)	io    1	+1
	он	Amendment	:#		f Contact	11012		Talanha				7
	DL	Emergency Cancellation	w/ justification		CK TUCCI		Í	7000000	one Num	S 15 1071	$\operatorname{oL}_{\mathcal{E}_i}^{I}$	
				FACILITY	INFORMA	TION		201-407	-305/	(PalSara)(S	nomen of the state	re-co
Name of Facility 50 CENTER STR	Where Abate	ement is Taking	Place (3)	_	Type of	Facility (4)						
Street Address						School (						
50 CENTER STR			Other (I.e	ter 8 (Other e., private & omes, etc.)	than K-12) cmmercial							
City (5)	County (	(6)	County Code	(7)	Square		# Of Floor	s	Buildi	ng Age	-	
GARWOOD	UNION					80,000		2		.9 / 190		
					Current Use (Prior if		f being demolished)		40 ÷			
Name of Monito	ring Firm Hire	d by Blda Owr	ner (8)	ASCM N		S/SHOPS						
	•	,ug. om	101 (0)	ASCIVI IV	9							
EHI					NORTHS	STAR CONT	RACTING GI	ROUP INC	:			
Street Address	DE TEAU				Street A			, , , , ,				
655 WEST SHOR					_							
SPARTA, NJ 078					32 Willia	ms Parkway						
Project Mngr. Fo		Firm	Telephone No	umbor	-City, Sta	te, Zip Code	2					
WILLIAM KIERBI	L		973-729-5649		Fast Han	over, NJ 079	356					
Sheduled Start [	Date (10)	Sched. Comp	oletetion Date (	11)		ne Number	750	License	Number			_
$\frac{03}{12}$				/18				License	vuiiibei			
Occupancy State	Is During Abo	tomant (Charle	/		THE RESERVE OF THE PERSON NAMED IN	384-8682				00860		
☐ Facilit	ty Closed/Vac	ated During En	Only 1) fire Period of			OSHA Mon		20115 1116				
Abate	ment		are remod or		Street Ac		RACTING GF	ROUP, INC	•			
☐ Abate	ment Perform	ed Outside of N	lormal Facility		Our cot Ac	101633						
	- Describe: _					ns Parkway						
☑ Other	- Describe: _	7:00 AM-3:30	<u>PM</u>		City, Stat	te, Zip Code						
Scope of Work (	Check All That	t Apply)			_East Han	over, NJ 079	36					
☐ Demo	lition	V	Renovation	V	Full Cont	ainment wit	h Nametica I					
≥3sf o	r <u>&gt;</u> 3lf		11011014411011	Ä	Mini - En	closure	h Negative I	Pressure				
≥160 s	of or ≥260 If			<b>V</b>		Procedure						
				1	Non-Exer	mpted (*) an	d Non-Friab	le Procedi	ıre			
Locatio	n of	l Is		D								
Asbestos Co		Location	Δο	Descript sbestos - C				Abatemer	nt Type			
	J	Normally	A-	Material			Amount	R E	R	E N	E	
TO BE A		Used	(1.	e., thermal	l systems		(Specify	M	E	C	N C	
in Fac	Co	Solely	insu	lation, sur	facing, VA	T,	SF or LF)	0	P	A	Ľ	
(13)	,	by Main- tenance/	or	other misc	ellaneous)			V	Α	P	0	
		Custodial						A	1	S	S	
		Staff (12)						L	R	U	u	
0551055	1	TES DO DA								-	R	_
OFFICES/SHOPS			PIPE & FITTIN	G			3,570 LF	V			1	-
OFFICES SHOP			VAT/MASTIC				3,700 SF	V		1 1	TH	-
ROOF		The same of the sa	TRANSITE				3,600 SF	V				
Name of Register	ed Waste Hau		ROOFING NJDEP Waste	Cubic	Mama -17		86,390 SF	ソ				
NORTHSTAR CO	NTRACTING G			Yards	GROWS	Registered L	andfill.					
		,		of Waste	SILOVVS							
City, State				Disposal	City. State	)						-
EAST HANOVER,	NJ			Date	MORRISV							
Completed by (Pr	int or Tunal		Title				A	1				
p.oted by (FI	int or Type)		Title			Signature	/1 /	1		Date		
Steve Stiles			Project Manage	r		4	一一	-		000	100140	
ASB-41								3		02	/26/18	

Location of Asbestos Containing  TO BE ABATED in Facility (13)	Is Location Normally Used Solely by Maintenance/ Custodial Staff (12)			Description of Asbestos - Containing Material (ACM) (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abateme R E M O V A L	R E P A	E N C A P S U	E N C L O S U
ROOF	YES	NO	N/A				-	+	R
EXTERIOR		1		FLASHING	1,120 SF	N		+	
			Ц	CAULK	305 LF	V	一市	1 7	1 7
ROOF	14	4	4	TAR	360 SF	7			

