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		(F		nt to NJAC				0 16	FOY	- (14	1-36	57	ş ²	
Date of Notification (1)				of Building aman Pro			(2)	EG		W G			F	- 308
Agencies Notified Type Notificatio	n			Address Box 371					2 N	2019				
DEP Amended Amendme				tate, Zip Clands, N		2		l dat	- 14 W			patrone		
⊠ DOH DCA Emergency Justification Cancellation	1)	9		of Contact ohn M. 7		April April 6	_	ASBES	IOS Tè	lephone N	umber	1000		
Name of English Minera Abatamant In Tall	- 51	101	FAC	CILITY INF	ORMAT	ION				i jadeliak				
Name of Facility Where Abatement Is Tak	ing Place	(3)					Тур	e of Facility				L	· Section	
Street Address 194 Route 35 South							×	School (K- Subchapte Other (i.e.	er 8 (Oth			ilding	s, hon	nes,
City (5) Middletown							Squ 300	etc.) are Feet 00	# 0	f Floors		Bldg.	Age	
County (6) Monmouth				Code (7)	n			ent Use (Pr		ing demoli				
Name of Monitoring Firm Hired by Building	Owner (8)	ASC	M No.				atement Co ironmenta						
Street Address			-1			Street A		ess Drive, PC	D Box	483				
City, State, Zip Code								Zip Code d, NJ 074	18					
Project Manager for Monitoring Firm			Telepho	one No.		Teleph 973-7				License 703	No.			
Start Date (10)			npletion	Date (11)		Name o	of OS	HA Monitor						
Occupancy Status During Abatement (Che	ck Only O	ne)				Street A	Addre	ess				- 500	-	
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe: weekend	Period of mal Facility	Abaten y Hours	nent			City, St	ate, Z	ip Code						-
Scope of Work (Check All That Apply)													0.000	
≥3 sf or ≥3 if ≥160 sf or ≥260 if		Renova Demolit				×	Mi	II Containm ni-Enclosur ovebag Pro n-Exempte	e cedure				ro.	
Location of	10.000	Locati			Doo	scription		T Exemple	u () and	11011-1110	DIGTIC	Abat	emen ype	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma Cus	ed Sole intenar todial S (12)	taff?	Asbes (i.e.	tos Conta thermal : surfac	aining Ma	ateria insula , or	ation,	(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
f	Yes	No	N/A	ļ							_			
front/rear basement			X	•	pipe	insulati	on		80) LF	x	-		
Name of Registered Waste Hauler		- 1	JDEP W	lanks	0	/and-								
Freehold Cartage		Ha	auler ID 1939	0.000	Oubic Y of Wast 10			GROW:		ed Landfil Indfill				
City, State Freehold, NJ					Disposa TBD	al Date		City, State Morrisvi						
Completed by Andrew Scott Higgins	Title Presi	dent/0	Owner		Sig	gnature	a)			Da 1	te 7 -//	17:		-

No check

MO# 20142484121

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A moon dad	Notification
Amended	Nonnication

07 ,	16 /	12				ng Owner/Operator	(2)	Wanggood garanteen are .			-	-5
Agencies Notified					n Moglia		到厚原	BINDE	Towns of	7		
⊠ EPA	Type Notificatio	on			et Address Maple Av	115		5 U V L		Edwin 100 mag mag.		
M DOLWD		C +			State, Zip		111			1		
☑ DHSS	Amendment		_			: 11	U dil	2 0 2012	$\{U\}$			
☐ DCA (NJAC 5:23-8)	Emergency justification)		ng		lington, N		- /		Beaco			
(10/10 0.20 0)	Cancellation					1	ASBESTO	Telephone N	umber			
					n Moglia		Napeard	En o mu				
Name of English Minara	01-1			F	ACILITY	INFORMATION			The state of the state of			
Name of Facility Where	Abatement is Tak	ing Plac	e (3)			AT .	Type of Facili	ty (4)				
Private home			C-87			4,000	School (K	-12)	**Tablesheltern			
Street Address							Subchapte	er 8 (Other than K- , private and comr	1 2)	L. mm		
0 Ascot Way							homes, et	c.)	nerciai	Duildi	ngs,	
City (5)							Square Feet		-	Bidg.	Ane	
ummit, NJ 07901	<u> </u>									9.	90	
County (6)				Cor	unty Code (7) (STATE USE ONLY)	Current Use (Prior if being dem	olished			
nion	8							omg cen	ononeu,	,		
Name of Monitoring Firm	Hired by Building	g Owner	(8)	ASCI	M No.	Name of Abatem	ent Contractor	(9)				
						Gr Tech LLC	+ Total actor	(0)				
Street Address						Street Address						
							1202					
City, State, Zip Code						576 Valley Rd #						
Project Manager for Moni	itorina Firm		Tel	ephone	a Nio	Wayne, NJ 0747	/0					
			161	chilotte	INO.	Telephone No.		License No.	1. 28-22-			
Start Date (10)	I Cos	oduled :	20			973-638-1777		01127				
07 /17 /	. 12 Scn				ate (11)	Name of OSHA M	lonitor			9		
	14	07	1- 1	4 1	12	l						
				/		Envirovision Co	nsultants. Inc.					
Occupancy Status During	Abatement (Che	ck only	one)			Envirovision Co Street Address	nsultants,Inc					
	d During Entire P	eck only Period of	one)	 ement		Street Address		± 34 Δ				
∏ Facility Closed/Vacate ☐ Abatement Performed	d During Entire P Outside of Norma	eck only Period of al Facilit	one) Abate	ement	scribe		Road, Bldg .#	‡ 34A				
☐ Facility Closed/Vacate ☐ Abatement Performed Time of Abatement:	ed During Entire P Outside of Norma AM	eck only Period of al Facilit	one) Abate	ement		Street Address 20-21 Wagaraw City, State, Zip Co	Road, Bldg .#	‡ 34A				
▼ Facility Closed/Vacate □ Abatement Performed Time of Abatement: □	ed During Entire P Outside of Norma AM	eck only Period of al Facilit	one) Abate	ement	scribe	Street Address 20-21 Wagaraw City, State, Zip Co Fair Lawn, NJ 0	Road, Bldg .# ode 7410		1412			
Facility Closed/Vacate Abatement Performed Time of Abatement: cope of Work (Check all 3 sf or >3 lf	ed During Entire P Outside of Norma AM	eck only Period of al Facilit PM/	one) Abate ty Hou PM	ement rs - De	scribe	Street Address 20-21 Wagaraw City, State, Zip Co Fair Lawn, NJ 0	Road, Bldg .# ode 7410 CAMINAT ainment with N	TON USING	Hep We	T , ,	wip Ar	e,
Facility Closed/Vacate Abatement Performed Time of Abatement: cope of Work (Check all 3 sf or >3 lf	ed During Entire P Outside of Norma AM	Period of all Facility	one) Abate	ement rs - De	scribe	Street Address 20-21 Wagaraw City, State, Zip Co Fair Lawn, NJ 00 Full Cont Mini-Encl	Road, Bldg .# ode 7410 CAMINAT ainment with No		H-CP	VA	AC.	2'
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⊠ EPA ☐ Initial ☐ DEP				520 Jacks	onville Road		JUL 707	012	Land		
DCA (NJAC 5:16)	nded ndment #1		Ci	ty, State, Zi	p Code				-	+	
Emer	gency (inclu	ding	1	Mt. Holly,	NJ 08060	L	SBESTOS CONTR	OL &	3	1	
(NJAC 5:23-8) justifi	cation)		Na	ame of Cont	act	14	Telephone		- nectorable		-
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Nome of Early			I	FACILITY	INFORMATION 5	The state of the s		ar war to the			di.
Name of Facility Where Abatement	is Taking P	lace (3))			Type of Facili					_
Rancocas Valley Regional F Street Address	ligh Scho	ol				School (K-					
520 Jacksonville Road				1777		Subchapte	er 8 (Other than	K-12)			
City (5)						Other (i.e., homes, et	private & comr	nercial b	uildin	gs,	
Mt. Holly		11 12 12 12 12 1				Square Feet	# of Floors		Bldg	Δαο	_
County (6)						60,000	2		40		
Burlington	55-	4 1	Co	ounty Code	(7)(STATE USE ONLY)	Current Use (I	Prior if being de	molished			
Name of Monitoring Firm Hired by B						High Scho	ool		-7:		
Westchester Environmental	uilding Own	er (8)	ASC	M No.	Name of Abateme	ent Contractor (9)				
Street Address					Diamond Hu	ntbach Const	ruction Corp	oration	K		
307 N. Walnut Street					Street Address						
City. State, Zip Code					500 East Luz						
West Chester, Pa 19380					City, State, Zip Co					-	-
Project Manager for Monitoring Firm			1 1		Philadelphia,	PA 19124					
Matt Abraham			lephon	ie No. 31-7545	Telephone No.		License No).			
Start Date (10)	Scheduled				215-739-8166		00646				
07 /16 /12	07	/ 3	1011	12	Name of OSHA M SAME AS AB						
Abatement Performed Outside of	Mormal E	of Abate	1000	escribe	Street Address	4					
Abatement Performed Outside of Time of Abatement: 7:00AM-3:30 Cope of Work (Check all that apply) 3 sf or >3 if	tire Period Normal Fac DPM/	of Abate lity Hou PM	ırs - De	escribe M	City, State, Zip Cod	inment with Ne	gative Pressure	,			
□ Facility Closed/Vacated During En □ Abatement Performed Outside of I Time of Abatement: 7:00AM-3:30 □ Cope of Work (Check all that apply) □ >3 sf or >3 If	itire Period of Normal Fac	of Abate lity Hou PM Renovat	urs - De	escribe //	City, State, Zip Cod Full Conta Mini-Enclo Glovebag	inment with Ne					
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

(muchel previous) Check # 6588

Date of Notification (1	1) July 12, 2012			of Building	g Owner / Operator se & Co.	(2)		TICON T	F (2)	<u> </u>
Agencies Notified	Type Notification		Street	Address	mburg Turnpike	DE	GEIVE	The second secon		
□DEP □DOL □DOH	Initial Amended		City, S	State & Zip	Code	The state of the s	UL 2 D 2012	9		
DCA	Amendment #		10.000000000000000000000000000000000000	of Contac		AS	BESTOS CONTROL & T	elephor	ne Nu	ımber
			FA	CILITY	NFORMATION	991 V.S. (1.18)		in a september of	Eura.	
Name of Facility Whe JP Morgan Chase B	ere Abatement is Taking ank	Place (3)			Type of Fac					
Street Address 20 Paterson-Hambu	rg Turnpike		V		Other		& commercial building	gs, hor	ne, e	etc.)
City (5) Riverdale	W - 200	17***				00	of Floors BI 2 g demolished)	dg. Age	47	
County (6) Morris		County Cod			Bank					
Name of Monitoring F Arcadis US Inc. Street Address 35 Columbia Road	irm Hired by Building O	wner (8)		ASCM N	Synatech, I Street Addre	ess	ractor (9)			
City, State & Zip Code Branchburg, NJ 088	76		4		829 Radio I City, State & Little Egg I		087			
Project Manager for M William Mener Scheduled Start Date			8-526-10	00	Telephone Name of OS	16	License Nur	nber 0081	7	
July 23, 20 Occupancy Status Du	oring Abatement (Check	July only one)	24, 2012	2	Synatech, I Street Addre	nc.				
Abatement P Other – Desc	ed/Vacated During Entire Performed Outside of No cribe: Ipied During Abatement			nt	829 Radio F City, State 8 Little Egg F	x2000000	087			
Scope of Work (Check ≥3 sf or ≥ 50 lf ≥160 sf or ≥260	k all that apply)	=	Renovati Demolitic			Mini-Enclosu Glovebag Pr			re	
Asbestos-Contai	ation of ning Material (ACM) ABATED Facility	Solely b	on Norma y Mainter dial Staff	nance or	Descrip Asbestos-C Material (i.e., therma	Containing (ACM)	Amount (Specify SF or LF)	Aba	ateme	ent Type
	(13)	Yes	No	N/A	insulation, su or other miso	facing, VAT		Removal	Repair	Enclosure Encapsulate
Exterior, southside s				X	Grey o	aulk	25 LF	X		十
Exterior, southside, t				X	Grey o		27 LF] x		
Exterior, westside, d Exterior, westside, 2 ^r	rive-up teller window			X	Grey caul		6 LF	_ X		
		NUDED I		X	Grey o		28 LF	X		
Name of Registered Workships	vaste mauler	NJDEP V Hauler ID		Cubic Ya	rds of Waste		egistered Landfill			
City, State		1 21	423	Disposal	Date	Grows Lan	aiiii .			
ittle Egg Harbor, NJ	08087			July 24,		Morrisville,	PA			-
Completed By	Title			Signature			Date			
Diane Aloia	Executi	ve Adminis	trator	100	une color		July 12, 2012		100	

*					1111 10 140	AC 0.00 and 1	Ch	eck #	+6	50	PA	
Date of Notification ((1) July 12, 201:	2			of Building	Owner / Operator se & Co.	(2)		TIAN CANADA	editi(ga		10
Agencies Notified EPA DEP	Type Notifica	ation		Street	Address	mburg Turnpike	DEC	EIVE				
⊠DOH	Ame	nded ndment # _.	_	River	State & Zip dale, NJ 0	7457	A Comment of the Comm	2 0 2012				
DCA	Can	cellation			of Contact ano Albane		ASBES	STOS CONTROL &	lepho	ne N	umbe	er
				FA	CILITY	NFORMATION		Contract Alexander	mount	-		
Name of Facility Wh JP Morgan Chase I	ere Abatement Bank	is Taking	Place (3)			Type of Fac	THE RESERVE AND ADDRESS OF THE PARTY OF THE		-	فأبين	A FIRST CO	
Street Address 20 Paterson-Hambi	urg Turnpike				6	- National -		commercial building			etc.)	
City (5) Riverdale	w					6,00	1	2	g. Ag∈	47		
County (6) Morris	- 4	L	County Code	e (7)		***						
Name of Monitoring Arcadis US Inc. Street Address	Firm Hired by E	Building Ov	wner (8)		ASCM N	Synatech, I Street Addre	ess	or (9)				
35 Columbia Road City, State & Zip Coo Branchburg, NJ 08	876				7777419-1944	829 Radio I City, State 8 Little Egg F						
Project Manager for William Mener	_		90	lephone 8-526-10	00	Telephone N 609-296-69	Number	License Num	ber 0081	7		
Scheduled Start Dat April 27, 2		Schedule	d Completi Apri	on Date (I 28, 201:		Name of OS Synatech, I						
Ocsupancy Status D Facility Clos		iring Entire	only one) - e Period of	Abateme		Street Addre 829 Radio F	ess Road					- 2%
Other – Des	scribe: apied During A	batement	ililai nouis			City, State 8	Zip Code larbor, NJ 08087	7 8				
Scope of Work (Che	F.	·)		Renovation Demolition	n		Mini-Enclosure Glovebag Proce Non-Exempted	nt with Negative Press edure (*) and Non-Friable Pr		re		APPLICATION OF THE PROPERTY OF
Asbestos-Conta TO B	aining Material (E ABATED Facility	ACM)	Solely b	on Norma y Mainter dial Staff	nance or	Descrip Asbestos-C Material (i.e., therma	Containing (ACM)	Amount (Specify SF or LF)	Abi	atem	ent T	уре
	(13)		Yes	No	N/A	insulation, sur or other miso	facing, VA1		Removal	Repair	Encapsulate	Enclosure
Exterior, southside					×	Grey o	caulk	25 LF	X			_
Exterior, southside,					X	Grey o	aulk	27 LF	X			
Exterior, westside, Exterior, westside,		window			- X	Grey caul		6 LF	X			
Name of Registered			IN IDEA		Х	Grey o		28 LF	X			
Synatech, Inc.	vvaste nauter		NJDEP V Hauler ID	No.		rds of Waste	Name of Regis		M			3
City, State			27	429	1 Disposal	Date	Grows Landfil		277			
					Disposal	Date	City, State		V	21		
<u>-ittle Egg Harbor, N</u> Completed By	J 08087	Title			July 24, Signature		Morrisville, PA	Date	1.00			
Diane Aloia	10,000	Executiv	ve Adminis	trator		and all		July 12, 2012				



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

Check # n/a Date of Notification (1) Name of Building Owner/Operator (2) 7/13/12 Newton BOE Agencies Notified Type of Notification Street Address 57 Trinity Street [] EPA Initial [] DEP Notification City, State, Zip Code DOL Newton, NJ 07860 Amended DOH [X] Notification Name of Contact ASSEST ISTelephone Number Amend, #1 [X] DCA [] Cancellation Donna Snyder FACILITY INFORMATION Type of Facility (4)

[x] School (K-12)

[] Subchapter 8 (Other than K-12)

[] Other (i.e. private and commercial buildings, homes, etc.) Name of Facility Where Abatement is Taking Place (3) Merriam Avenue School Street Address 81 Merriam Ave. Souare Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 80000 ~50 (STATE USE ONLY) Current Use (Prior if being demolished) Newton Sussex School - educational Name of Monitoring Firm Hired by Building Owner ASCM No. Name of Abatement Contractor (9) RK Occup. & Envir. Analysis, Inc. 00090 Jupiter Environmental Services, Inc. Street Address Street Address 401 St. James Ave. 3 Lynn Court City, State, Zip Code City, State, Zip Code Phillipsburg, NJ 08865 Lincoln Park, NJ 07035 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Pat McGuinness 908-454-6316 973-709-0200 00852 Scheduled Start Date (10) Sched. Completion Date (11) Name of OSHA Monitor 7/23/12 7/31/12 J & S Environmental Laboratories, LLC Occupancy Status During Abatement (Check only one) Street Address [x] Facility Closed/Vacated During Entire Period of Abatement 2333 Route 22W Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe: Union, NJ 07083 Other - Describe: Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Mini - Enclosure [x] Renovation [] ≥3 sf or ≥3 If Glovebag Procedure [X] ≥160 sf or ≥260 lf [] Non - Friable Procedure Is Location Abatement Normally Used Description of Турз Location of Solely by Asbestos - Containing Amount R R Maintenance/Cus Asbestos - Containing Material (ACM) (Specify E E Ν N Material (ACM) todial Staff (12) (i.e., thermal systems SF or LF) M P C C TO BE ABATED insulation, surfacing, VAT, 0 A A L In Facility or other miscellaneous) V P 0 (13)Yes No N/A Α R S S U U Rooms 100 & 101 X 601 F TSI - elbow and roof drain insulation X 3000 SF Rooms 100 & 101 Χ Ceiling (tile and spray-on scrape) X Rooms 100 & 101 x VAT and mastic 1640 SF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. Of Waste Jupiter Environmental Services Minerva Landfill 04782 City, State Disposal Date City, State Lincoln Park, NJ 7/30/12 Waynesburg, OH Completed By (Print or Type) Title Signature Date Pane Repic 7/13/12 General Manager

State of New Jersey 1207-4523 NOTIFICATION OF ASBESTOS ABATEMENT Check #4320 (Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification (1)		Non	20.0	f Duilding	Ourset Constat	(0)	Total I	F (J 153	-11-1	W fi	3 P	one I	
7/17/12					Owner / Operate unications	or (2)		5 (0 5	II.	W E	3	0000	
Agencies Notified Type Notification				ddress	unications		TIM					- 11		
Ĭ EPA				eenwoo	d Ave.				·	1. 0	nio.	NAME OF TAXABLE PARTY.		
☐ DEP ☐ Initial		City,	Sta	ate & Zip	Code	-	144	1,7 12	-	-	50° 3 600	-		
☐ DOL ☐ Amended #		Jen	kin	town, P.	A 19046		SCHI STATE						1	
☐ DOH ☐ Emergency		Nam	ne o	f Contact			è	ASBI	ESTOS I		lepho	ne N	lumb	er
DCA Cancellation	4	Alex	k Ba	aylor			Carr Convention Contents		LICEN	131				
		F	ACI	LITY IN	ORMATION	2000	- 2	Secretary Sec	With the same	A4 · 75	e d'apreside de			
Name of Facility Where Abatement is Taking P	lace (3				Type of Faci	lity (4)	*	0.000			77/			N.
Verizon					School									
Street Address					☐ Subcha	pter 8 (Other than	N-12	2)					
10 Tansboro Road					Other (i.	.e. priva	ate & comr	merci	al buil	dings	, hom	es,	etc.)	
				E.	Square Feet		# of Floor	rs		Bld	g. Ag	е		
City (5) County (6)	Co	unty	Co	de (7)										
Berlin Camden					Current Use	(Prior it	f being de	molis	hed)					
					Offices									
Name of Monitoring Firm Hired by Building Own	ner (8)		1	ASCM No	. Name of Aba	atement	t Contracto	or (9)						
USA Environmental					AbateTech	-								
Street Address					Street Addre									
8436 Enterprise Avenue City, State & Zip Code					PO Box 25						1.500			
Philadelphia, PA 19153					City, State &									
Project Manager for Monitoring Firm	Talan	hon	o M	umber	Lumberton Telephone N		0040		icens	o Niur	mhor			
Mark Jenkins				0 ext. 11	609-265-21			ال	liceris		0052	9		
Scheduled Start Date (10) Scheduled Cor	-	-			Name of OS		nitor			-	0002			
7/30/12	8/3/			(/	EMSL Anal									
Occupancy Status During Abatement (Check or			and the second		Street Addre	SS								
Facility Closed/Vacated During Entire P			oate	ment	108 Haddo	n Ave.				-3.5				
Abatement Performed Outside of Norma	al Hou	ırs			City, State &							W		
Describe:					Westmont,	NJ 08	108							
Facility Occupied During Abatement														
Scope of Work (Check all that apply)							Full Conta	.i		h Nac	a etissa	Des		
≥3 sf or ≥3 lf		Re	nov	ation		-	Mini-Enclo			пиед	gative	Pie	ssure	;
≥160 sf ≥260 lf	A			ition			Glove Bag			00				
		00	11101	ition		the same of the sa	Non-Exen	-			riable	Pro	cedu	ıre
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Asbestos-Containing	Norm				Asbestos-Con	taining			specify		-			700
Material (ACM)		lely			Material (A			SF	or LF	=)	Removal		m	т
TO BE ABATED in Facility	Maint Custo				(i.e., thermal s insulation, surfa		T				Vou	Repair	cap	nclo
(13)		(12)		11 7	or other miscell						<u>n</u>	air	Encapsulate	Enclosure
	Yes	No		/A									i de	Ø
Basement Ventilating Equipment Room		П	+		Floor tile & I	Mastic		70	00 SF	:		П	П	
Basement Ventilating Equipment Room		Ħ	十片	=	Pipe Insula			-	3 LF			H	H	H
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Name of Registered Waste Hauler		N.	JDE	P Waste	Cubic Yards	Name	of Regist	ered	Landf	ill			السارا	
		Ha		r ID No.	of Waste	1								
AbateTech, Inc			_18	8750	8		Landfil	I						
City, State	12.1		()		Disposal Date	City, S		11						
Lumberton, NJ	i i	-			8/3/12	Tully	town, PA	1		95				
Completed By (Print or Type) Title					Signature) Date									
Gwen Trumbetti	Opps. Coord.			(/W	1				7	7/17/1	2			

State of NJ Notification of Asbestos Abatement

(Pursuant to NJAC 8:60-7 and 12:120-7) 2012-121D B & G proj. #: Check # 5384 Sub 8 Date of Notification (1) Name of Building Owner/Operator (2) 10 17 1/1 17 1/1 12 Fair Lawn Board of Education Type Notification Agencies Notified Street Address ☐ EPA M Initial 37-01 Fair Lawn Avenue ☐ DEP ASBESTOS CONTROL & City, State, Zip Code LICENSING Amendment DOL. Fair Lawn, NJ 07410 Telephone Number Name of Contact DOH. Cancellation ☐ DCA Tom Senko FACILITY INFORMATION Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Subchapter 8 (Other than K-12) Transportation Building (Sub 8) Other (Private/Commercial Street Address Bldgs./Homes, etc. Bldg. Age # of Floors Square Feet 5-01 Bergen Avenue County (6) County Code (7) Current Use (Prior if being demolished) (State use only) School Transportation Building Bergen Fair Lawn Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Bldg. Owner (8) B & G Restoration, Inc. n/a Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 License Number Telephone Number Project Manager for Monitoring Firm Phone Number 0378 973-696-6869 Name of OSHA Monitor Sched. Completion Date (11) Scheduled Start Date (10) B & G Restoration, Inc. Street Address 7/27/2012/12 7/29/2012 Occupancy Status During Abatement (Check only one) 105 Ryerson Road Tacility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Lincoln Park, NJ 07035 Other-Describe: occupied Scope of Work (check all that apply) Full Containment w/negative pressure Glovebag procedure Demolition Renovation Non-friable procedure Mini-enclosure ≥160 sf or ≥260 lf >3 sf or >3 lf Is location normally used solely Location of e n by maintenance/custodial Amount asbestos-containing Description of asbestos-containing m C staff(12) (Specify SF or material to be material (ACM) 0 a LF) abated in facility (13) V Yes No N/A X 2 lf pipe insulation basement X 175 sf fiber board basement X 195 sf transite ceiling basement Name of Registered Landfill Cubic Yards of Waste NJDEP Hauler ID# Registered Waste Hauler Tullytown Resource & Recovery Center B & G Restoration, Inc. 19563 5 yds Disposal Date City, State City, State 7/30/12 Tullytown, PA Lincoln Park, NJ 07035 Signature Date Completed by (Print or Type) Title

Gordana Luna

Treasurer

Gordana Luna

7/17/12

Company of the second second second second	02 20						Fax:		Jul 13	2012 09:0	4am	P001	/001	
A TOP IN SAIS (LUTY A)					State	of NJ		*11	same and					
K-150			No	tific			Abatement							
D&S Proj. #: MS 12-254							and 12:120)			APPROVE	D	- T- m		
						12	and make the property of the		NJ Dombot		BF	Servi	ces	
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Date of Notification (1) 0 7 / 1 2 / 1 2			_				There Is to	E	WIS	(Signature)		A	1	
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Agencies Notified Type Notificat	ion	Street A	idress		***************************************		TILLY			1411	1			
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DOH (including justification)		Name of	Contact				ASBE	LICENS	UN Talephor	e Number				
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Name of facility where abatement t	s taking	place (3)						Ty	pe of Facility					
									School School	ol (K - 12)				
MICHAEL CARDONE									☐ Subct	apter 8 (O	ther t	han K	-12)	
Street Address			i,		VIII III III III III III III III III II					(Privato/C		crolal		
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WESTFIELD		UNION		AL APPENDING									C. Markers	
Name of Monitoring Firm Hired by	Bldg. O	wner (8)			ASCM No.		Name of Abateme	nt Cont	ractor (9)					
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PATERSON, NJ 07503			071				TULLYTOW	NI DA						
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D&S Proj. #: MS 12-254

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

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Date of Notification				Building Ov EL CAR		/Operator (2)					W					
Agencies Notified		tion	Street Add				-	11111				111	216 3		_	
☐ EPA ☐ DEP	Initial Amended		842 ST	ANDISH	ΙΑΊ	VENUE		Particular Control	JI.	1 20	2002		7			
	Amendment #		City, State	, Zip Code	9		10-16	1 1	32.20			11	1	t e		
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Name of facility w	here abatement	is taking pl	ace (3)						T	Type of I	acility (4	.)				
MICHAEL CA	RDONE										School				(40)	
Street Address									-		Subcha Other (F					
842 STANDIS	SH AVENUE										Bldgs./F	lomes,	etc.			۸
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Project Manager fo	r Monitoring Firm	1	F	hone Nun	nber		-	Telephone Numb				License	e Num	ber		
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Start Date (10)		Sche	d Comple	tion Date ((11)		-	Name of OSHA	Monito	or						
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07/18/12		07/2						Street Address								
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Date of Notification (1)	Na	ne of Bu late	g Owner/	Operator (2)		TO E	D 11 11 11 11 156	Signature)	1.30	4 Pm		
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			FACIL	ITY INFORM	ATION		Tee 15 15 16 16 16 16 16 16 16 16 16 16 16 16 16					
Name of facility where abatement is	taking plac	a (3)					Type of Facility (4)	(K - 12)				
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Occupancy Status During Abatemen			W.M.			20 California A	venue		or otherwise	V940007000	V-10-4-0-4-0-4-1-	
Facility closed/vacated during Abatement performed outside	entire perio	neteda to be	ent -		la	ity, State, Zip Code					- Control	
Describe: NORMALH	OURS			-		Paterson, NJ 0	7503	,				
Gcopo of Work (check all that apply	7)						Full Containment w	/negative	press	ure		
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abated in facility (13)	Yes	No	N/A						Ð.	1	p	
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PATERSON, NJ 07503			07/21/1			TULLYTOW	V, PA			:		
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BOGDAN JOLDZIC	PRESID		or gehad	os licensure e	hatamaye	activities		07/16	1.Z			
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D&S Proj. #: MS 12-258

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

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Date of Notification (1)	Name of	Building Owr	ner/Operator (2))		La U La La	Company of the Compan			
Agencies Notified Type Notifical	ANITA				Posteri		1000		The same of the sa	
EPA Initial	Street Au				44-00-00-00-00-00-00-00-00-00-00-00-00-0	LA JUL 20	LUIL	Land	and the same	4
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justification)	GEO!		DD.		Programme of			, summer	rezal. W	re [†]
Cancellation	1 GEOR	RGE EUWI								
Name of facility where abatement i	a taking place (2)	FAC	CILITY INFORM	IATION		Time of Facility (4				
Name of facility where abatement i	s taking place (3)					Type of Facility (4	(K - 12)			
ANITA BIER						☐ Subcha	pter 8 (Other	than k	(-12)	
Street Address						Other (F	Private/Comm lomes, etc.	ercial		
2493 ST. GEORGE AVENU	Е						of Floors	В	ldg. A	\ge
City (5)	County (6)				nty Code (7)					
RAHWAY	UNION			(Stat	e use only)	Current Use (Pri	or if being de	molish	ed)	
Name of Monitoring Firm Hired by			ASCM No.	Ч	Name of Abatement (Contractor (9)				
					D & S RESTORA	ATION, INC.				
Street Address			L		Street Address		1			
to the second se					20 California Av	re.		-		
City, State, Zip Code					City, State, Zip Code					
Project Manager for Monitoring Firm		Phone Numb	ner .		Paterson, NJ 07: Telephone Number	503	License Num	har		
. reject manager for monitoring r inn		THORIC INGINE	JC1		973-345-8020		00159			
Start Date (10)	Sched. Comple	etion Date (1	1)		Name of OSHA Monit	tor				
07/20/12	07/31/12		•		D & S Restoration	on, Inc.				
Occupancy Status During Abatemer					Street Address 20 California Av					
Facility closed/vacated during		tement.			City, State, Zip Code	ende				
Abatement performed outside Describe:		ours-								
Other-Describe: NORMAL H	OURS			=	Paterson, NJ 075	503				
Scope of Work (check all that apply	/)	SW WE-N				ull Containment w/r	negative pres	sure		
	Renovation					Mini-enclosure Blovebag procedure				
≥160 sf or ≥260 lf	Demolition			9		Non-Exempted (*) a	nd Non-friable	_	edure	
Location of asbestos-containing	Is location normal by maintenance/c					Amount	R	R	E n	E
material (acm) to be	staff(12)		material (bestos-containing	(Specify SF	or m	p a	c a	n c
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Registered Waste Hauler	NJDEP Haule	ID# IC	Subic Yards of V	Vaste 1	Name of Registered I	andfill				
D & S RESTORATION, INC.	13506		1 YD		TULLYTOWN, F		COVERY			
City, State		Disposal D 07/21/1			City, State	D.A.				
PATERSON, NJ 07503 Completed by (Print or Type)	Title	- 0//21/1	Signature		TULLYTOWN,	ra T	Date			
BOGDAN JOLDZIC	PRESIDENT				E-1	6.81 8.1	07/16/12			
ASB-41 *	Do not use this form	n for asbesto	os licensure exe	empted	activities.					

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: MS 12-257 Name of Building Owner/Operator (2) Date of Notification (1) 0 7 /1 6 /1 2 CAROL & PHILIP FRALEY Type Notification Agencies Notified Street Address Initial **EPA** 926 CASTLE POINT TERRACE Amended DEP City, State, Zip Code ASBESTOS CONTROL Amendment #: DOL LICENSING HOBOKEN, NJ 07030 Emergency (including DOH Name of Contact Telephone Number justification) DCA MARK SINGLETON Cancellation **FACILITY INFORMATION** Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) CAROL & PHILIP FRALEY Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. 926 CASTLE POINT TERRACE Square Feet # of Floors Bldg. Age County (6) City (5) County Code (7) (State use only) Current Use (Prior if being demolished) HOBOKEN HUDSON Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Abatement Contractor (9) D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Project Manager for Monitoring Firm Telephone Number Phone Number License Number 973-345-8020 00159 Name of OSHA Monitor Start Date (10) Sched. Completion Date (11) D & S Restoration, Inc. 08/08/12 08/30/12 Street Address Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Scope of Work (check all that apply) Full Containment w/negative pressure >3 sf or >3 If Mini-enclosure Glovebag procedure ≥160 sf or ≥260 lf Demolition Non-Exempted (*) and Non-friable procedure Is location normally used solely Location of E by maintenance/custodial e 0 n asbestos-containing Description of asbestos-containing Amount staff(12) m p C material (acm) to be (Specify SF or material (ACM) C 0 а abated in facility (13) LF) a Yes No N/A V 6 BASEMENT #1 PIPE INSULATION 177 L FT \boxtimes BASEMENT #2 PIPE INSULATION 227 L FT Registered Waste Hauler Cubic Yards of Waste NJDEP Hauler ID# Name of Registered Landfill D & S RESTORATION, INC. 13506 TULLYTOWN, RESOURCE RECOVERY 4 YDS

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

PRESIDENT

Title

City, State

PATERSON, NJ 07503

Completed by (Print or Type)

BOGDAN JOLDZIC

Disposal Date

08/10/12

Signature

City, State

TULLYTOWN, PA

Date

07/16/12



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

Date of Notification (1)		-			200 100 100 100 100 100 100 100 100 100	ding Owner/Operator N BAY COMM		
	7/13/20)12			AVALOI	VIDAL COMM	MECI	FINER
Agencies Notified		Notification	Туре		Street Addres	SS	10,59	
(X) EPA () DEP (X) DOL (X) DOH		(X) Initial N () Amende Amendr	d Notificati nent#	on _ ing justification)	City, State, Z			2 0 2012
() DCA		() Cancella		ing justinoation)	ISELIN, Name of Con	tact	Tel. Numbert	
					STEVEN WE	BER	1 4 - 1	ING
N		alsian Diago /	2)	FACILITY IN	Type of Facili	th. (1)		The state of the s
Name of Facility Where Ab Fox run apartments main			<u>5)</u>		() School (K	-12) er 8 (other than K-12)		2-20
Street Address					(X) Other (i.e.	private & commercia	bldgs., homes, etc.	
60 fox run drive						10,000		
City (5)	County (6)		County C (State Us		Bldg. Age Current Use (prior if being demolis	ed)MAITANEN	CE SHOP
plainsboro	Middlesex		4001411		Name of Cont	tt (O)		
Name of Monitoring Firm VERTEX, INC			ASCM N	<u>0.</u>		ironmental Systems		
Street Address 700 TURNER WAY, SUITI	E 105				Street Addres 550 East Uni	on Street	· ·	
City, State, Zip Code ASTON, PA 19014					City State, Zip West Cheste			
Project Manager for Monito DON HEIM	oring Firm	Telephone I 6105588902			Telephone Nu 610-701-9000		License Number 00508	<u>er</u>
Scheduled Start Date (10) 7/27/2012		Scheduled (7/30/2012	Completion	Date (11)	Name of OSH VERTEX, INC			
Occupancy Status During (X) Facility Closed/Vacated () Abatement Performed	d During Enti	re Period of A	batement		Street Addres 700 TURNER	SS WAY, SUITE 105		
Describe					City, State, Zi			
Other -					AOTOM,TA	10014		
Source of Work (Check all	that apply)							
() Demolition () Renov (x) Large Proj. (>160 SF of (x) Negative Pressure End	r >260 LF AC	M) () SM Pr	oj. (>25<16	60 SF or >10 <26 Glovebag Proced	60 LF ACM) (() Minor Proj. (<25 S	or <10 LF ACM)	
Location of Asbestos- Containing Material (ACM)	Is Loca	ation Normally	Used	Description of thermal system	ACM (i.e.	Amount (Specify S	or LF) Abaten	nent Type
Facility (13)	Staff? YES	(12) NO	NA	surfacing, VAT miscell.)	, or other	, x=	Rem.	Rep. Encap Enclose
Lower level maintanence shop			×	LINOLEUM		300 sf	x	
Name of Reg. Waste Haule	er	NJDEP Was 15939	ste Hauler I	ID#	Cubic Yards o	of Waste	Name of Reg. I	_andfill
FREEHOLD CARTAGE					1			ULLEYTOWN PA
City, State FREEHOLD NJ		×2 12 1			00	Disp. Da		ity, State
Completed by (Print or Typ	ne)	Title			Signature		Date	ULLEYTOWN PA
DEVIN BLOM		Estimator			D~ 1	Br	7/13/2012	

Mail to: NJDEP-DSHW-BRRTP 401 E. State St., PO 414 Trenton, NJ 08625-0414

Telephone 609-984-6620

C:\WORD\MYDOCS\ASBESTOS 9/18/00

Date of Notification (1)	2012			(Purs	uant to NJ	ASBESTOS AB, AC 8:60 and 1:	2:120)	ECE	// W	E	T	9
07/17/	-				BIOMET	Inc.	rator (2)		tind	-	-11	
Agencies Notified	Type Notific	cation	(Killion)		Street Addre	ess	= + H	FIR THE STATE OF			W.	11
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⊠ DOL	Amendm	ent#		_ [City, State, Z	ip Code	1	li constantina di salamana di			1	5/
DOH DCA	Emerger justification	icy (incl ion)	uding	100	Fair Lawn			ASBESTOS CO	WIROL	g,	F	-
□ bcx	L Cancella	tion		Jo	lame of Cor	_{uidara} (Owner	'e Dan)	Telephor	ne Numb	er		7
No						INFORMATION	s Kep.)			_		Mark!
Name of Facility Where A BIOMET Inc.	Abatement is	aking F	lace	(3)			Type of F	acility (4)				
Street Address			_				Schoo	l (K-12)				
20-01 Pollit Drive							Subch	apter 8 (Other tha	n K-1 2)			
City (5)							- Homes	(i.e., private & con i, etc.)	nmercial	build	ings,	
Fair Lawn, NJ							Square Fe 40,000	1	rs	Bid	g. Ag	е
County (6) Bergen				10	County Code	€ (7) (STATE		1		40		
Name of Monitoring Firm I	Jisad b. D			_ '	ISE ONLY)		Commerc	se (Prior if being o	remolish	ed)		
(8) J&S Environmen	tal Laborat	ing Owr	er	10 (132)	CM No.	Name of Aba	tement Contract	or (9)				_
Street Address		51 105	_	<u>N/.</u>	A	Valiant As	sociates, LI	_C				
2333 Rt 22 West						Street Addres						_
City, State, Zip Code Union, NJ 07083						145 Mill St City, State, Zip						
Project Manager for Monito						Paterson,	NJ 07501					-
Sherry Gelsomino	oring Firm			Telephor	ne No.	Telephone No.		License N	lo.			_
tart Date (10)	I Sc	hedulad			6-0073 Date (11)	973-553-5	The state of the s	01108				
07/27/2012	1 0	7/30/2	012		Date (11)	Name of OSHA						_
ccupancy Status During A	batement (C)	neck on	ly on	9)		Street Address	sociates, LL	3				
I Facility Closed/Vacated	During Entire	Dariad .		× .		145 Mill Str						
Abatement Performed Or Other - Describe:	utside of Norn	nal Faci	lity H	ours		City, State, Zip						
cope of Work (Check all th	at apply)					Paterson, N						
]>3 sf or >3 If	ac apply)											_
2160 sf or 2260 if		X F	enov	ation		N INTITUTE	lclosule	Negative Pressure	е			
		_ L '	Jemo	olition		Goveb	ag Procedure	10.000				
			Loca: lorma			II NON-E	xempted (*) an	d Non-Friable Pr				21102
Location of sbestos-Containing Mater	ial (AOM)	Use	d Sol	ely by		Description o				Abate Ty	emeni pe	t
TO BE ABATED	iai (ACIVI)		ntena ustod		Asbesto	os Containing Ma	terial (ACM)	Amount		T	Т	
IN Facility			staff?	>		thermal systems i surfacing, VAT	. or	(Specify SF or LF)	72	R	Encapsulate	1
(13)		-	(12)	т		other miscellaned	ous)	OI OI EF)	Removal	Repair	nsde	Ti di dodi d
(13)		Yes	No	N/A	(4)				\\ a	=	late	0
				X	ACM Flo	oor Tiles/Mast	ic	60 SF	17	-	\vdash	_
rage Room B			1	X	9" X 9" f	loor tile		296 SF	X	-		_
rage Room B n's and Women's Loci	ker Room				9" X 9" 4	loor tile		123 SF	X		-	_
rage Room B n's and Women's Lock rage Room A	cer Room	-		X	The same of the sa				_ X			
rage Room B n's and Women's Lock rage Room A lway				X	ACM Flo			160 SF	v	35 30		
rage Room B n's and Women's Lock rage Room A Ilway ne of Registered Waste, Ha				X JDEP V	ACM Flo	Cubic Yards	Name of Reg	160 SF	X			
rage Room B n's and Women's Lock rage Room A lway			H	X	ACM Flo	Cubic Yards of Waste 5 CY	Name of Reg	istered Landfill	_ X			
rage Room B n's and Women's Lock rage Room A llway ne of Registered Waste Ha vice Transport Group			H	X IJDEP V	ACM Flo	Cubic Yards of Waste CY Disposal Date	Minerva L	istered Landfill andfill	X			
rage Room B n's and Women's Lock rage Room A lway ne of Registered Waste Ha vice Transport Group State			H	X IJDEP V	ACM Flo	Cubic Yards of Waste 5 CY	Minerva L	istered Landfill andfill	_ X			

0421

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1) 07/16/2012	THE REAL PROPERTY.		N.	ame of Bui	lding Owner/Opera I Apartment & C	tor (2)	EGE	T W	F	T.	1
EPA DEP	pe Notification Initial Amended		St 1	treet Addre 655 US ty, State, Z	ess HWY 9		1111 -0 0				Section of the sectio
1 (4 - 10)	Amendment # Emergency (inclu justification)	ding	0	ld Bridge	e, NJ 08857			LUI	ć.	August Street	1
□ DCA □	Cancellation	. 12-23		ame of Cor rnadette			(Telephone)	lumbe	0	à	The same
Name of Facility Where Abate	ment is Taking Di	200 (2)		FACILITY	INFORMATION			Tagas irls	ene	Thousand	mosal
Apartments Bldg.	one to Taking Fi	ace (s,				Type of Fac				to and	
Street Address 27 Peach Lane					(1)	Subchap	ter 8 (Other than k	(-1 2) ercial b	uildin	gs,	
City (5) Old Bridge, County (6)						Square Fee 2000 SF			Bldg 60+	. Age	,
Middlesex			U	ounty Cod SE ONLY)	e (7) (STATE	Current Use Apartment	(Prior if being den	nolishe	d)		
Name of Monitoring Firm Hired (8) N/A	by Building Own	er	ASC	M No.		ment Contractor al Construct	r (9)				
Street Address					Street Address						
City, State, Zip Code			-	-	City, State, Zip	Code	MB Suite 218				
Project Manager for Monitoring	Firm	Te	lephon	e No.	Clifton, NJ Telephone No.	07012	License No.				
Start Date (10)	Sahadulad				973-389-00		00693				
07/26/2012	Scheduled 07/31/2	012)ate (11)	Name of OSHA DIA Genera	Monitor I Construction	on Inc				
Occupancy Status During Abat	ement (Check on	y one)			Street Address						
Facility Closed/Vacated Duri Abatement Performed Outside	ng Entire Period o de of Normal Faci	of Abat lity Hou	ement urs		1360 Clifton	, Avenue, P	MB Suite 218				
Other - Describe:					City, State, Zip C Clifton, NJ 0						
Scope of Work (Check all that a	apply)		-							_	
3 sf or >3 if 2160 sf or 2260 if		lenovat Demol			Mini-En Goveba	closure ag Procedure	Negative Pressure				
		Locatio			I I Non-E	xempted (*) and	Non-Friable Pro		Abate	ment	
Location of Asbestos-Containing Material	Use	d Sole	ly by		Description of				Ту		
TO BE ABATED IN Facility (13)		intenan sustodia staff? (12)		Asbes (i.e.	tos Containing Mat , thermal systems in surfacing, VAT, other miscellaneo	nsulation, or	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
Curred Cons	N/A					val	=	late	ire		
Crawl Space		X	Pipe/El	bow Insulation		200 LF	X				
								-	-		
Name of Registered Waste Haule	ar.		. IDEE					+-			
Service Transport Group			JDEP V Buler ID 20970		Cubic Yards of Waste 10	Minerva L	istered Landfill	-			
City, State New Castle, DE		==	22,10		Disposal Date	City, State					_
Completed By	Title			l	07/31/2012 Signature	Waynesbu	rg, OH 44688	-			_
Crutarth Jagad	President			3	11	d	07/16/	/2012			

[•] Do not use this form for asbestos licensure exempted activities.

2420

Date of Notification (1) 07/16/2012	2					ing Owner/Operato Apartment & Co			V	E	In	1
□ EPA 🖂	pe Notification	on			et Addres 55 US H		The state of the s	July o o	2010	- Checker	The second secon	Name of the last o
□ DEP □ DOL	Amended Amendmen Emergency		ng	10000000	, State, Zip I Bridge,	Code NJ 08857	The state of the s	of the lands to the same of th	5.47.77	-dwa		-
DOH DCA	justification Cancellation			100000000000000000000000000000000000000	ne of Conta nadette P	VIII		Telephone Nu	mber	**************************************		
				FA	CILITY IN	FORMATION		one see see see see see see see	Art - is some	. The second	THE REAL PROPERTY.	2
Name of Facility Where Abate Apartments Bldg.	ement is Tak	king Plac	e (3)				Type of Facili			9	- 11144G	one, est
Street Address 36 A-D Cottonwood Lar	ne						Subchapte	r 8 (Other than K- private & comme	1 2) cial bu	ilding	S,	
City (5) Old Bridge,							Square Feet 2000 SF	# of Floors	- 1	Bldg. 60+	Age	
County (6) Middlesex					unty Code E ONLY)	(7) (STATE	Current Use (I Apartments	Prior if being demo	lished)		
Name of Monitoring Firm Hire (8) N/A	d by Buildin	g Owner		ASCN	No.	Name of Abatem DIA Genera	nent Contractor (
Street Address						Street Address 1360 Clifton,						
City, State, Zip Code	* 1	-		-		City, State, Zip C	ode	ID Suite 210				
Project Manager for Monitorin	g Firm		Те	lephone	No.	Telephone No. 973-389-008		License No.				
Start Date (10)	Sch	eduled (etion D	ate (11)	Name of OSHA		_ 00693				
07/26/2012		7/31/20		0	210 (11)	DIA General		n. Inc.				
Occupancy Status During Aba						Street Address						
Facility Closed/Vacated Du Abatement Performed Outs						1360 Clifton,		/IB Suite 218				
Other - Describe:	side of Norm	iai Facili	ту но	urs		Cliffon N.I.O.						
Scope of Work (Check all tha	t apply)					Clifton, NJ 0	7012					
>3 sf or >3 lf >160 sf or >260 lf			enova emo	tion lition		Mini-End		egative Pressure				
		- le	Locati		Т	Non-Ex	empted (*) and	Non-Friable Prod				
		N	ormal	ly	l ks					Abate Ty	ment pe	t
Location of Asbestos-Containing Materia TO BE ABATED IN Facility (13)	Maii C	d Sole ntena ustodi staff? (12)	al		Description of itos Containing Mate , thermal systems in surfacing, VAT, other miscellaneo	erial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure	
Crawl Space		Yes	No	N/A	Dine/El	bow Insulation		200 1 E	-	-	-	-
	<u> </u>	-		X	TiperLi	bow msuration		200 LF	X	-		-
Name of Registered Waste Ha	uler		Τ,	NJDEP	Maeta	Cubic Yards	Nome of D	istered Landfill	1			
Service Transport Group				dauler II 20970		of Waste	100000000000000000000000000000000000000					
City, State			209/0		Disposal Date	Minerva L	andilli		-			
New Castle, DE					. 07/31/2012		rg, OH 44688					
Completed By	Tit	le				Signature		Date				-
Krutarth Jagad	n	esident				1 1 1	7 50 1		/2012			

2418

Date of Notification (1) 6/2012			Na G	ame of Buil	ding Owner/Opera Apartment & C	tor (2)	GEIV	E	II	111	作
Agencies Notified EPA DEP	Type Notifica Initial Amended	tion		St. 16	reet Addre 555 US I	ss HWY 9			con.	Action of the last	Contractor of the Contractor o	
DOL	Amendme Emergenc	nt # v (includ	ina		ty, State, Zi ld Bridge	p Code , NJ 08857	TU U		1/		7	
X DOH ☐ DCA	justification Cancellation	n)	g	Na	me of Con	tact	1	SBE STEEPhone	Numbe	-	1	_
				F	ACILITY I	NFORMATION		and the second s	Michaelica.	200		
Name of Facility When Apartments Bldg.	e Abatement is Ta	king Pla	ce (3)				Type of Fac		La Figure and A		** 87.5	2.00
Street Address 29 Peach Lane							Other (i.e	ter 8 (Other than I	<-1 2) ercial t	ouildir	108	
Old Bridge,							Square Fee 2000 SF	etc.)		55	. Age)
County (6) Middlesex				US	ounty Code SE ONLY)	(7) (STATE		(Prior if being der	nolishe			
Name of Monitoring Fir	m Hired by Buildin	g Owne		ASCI	M No.		ment Contractor	(9)				
Street Address						Street Address		on, mc.				
City, State, Zip Code						1360 Clifton City, State, Zip	Avenue, Pl	MB Suite 218				
Decision 1						Clifton, NJ	07012					
Project Manager for Mo	onitoring Firm		Tel	ephon	e No.	Telephone No. 973-389-00	189	License No.				
Start Date (10) 07/26/2012	Comple	etion D	ate (11)	Name of OSHA	Monitor							
Occupancy Status Durin	ng Abatement (Ch	7/31/20 eck only	one)			DIA Genera Street Address	Construction	on, Inc.				
X Facility Closed/Vaca Abatement Performe	ted During Entire F d Outside of Norm	Period of	Abate	ment		1360 Clifton	, Avenue, P	MB Suite 218				
Other - Describe:			., 1100			Clifton, NJ 0						
Scope of Work (Check a	all that apply)	****								_		
>3 sf or >3 lf >160 sf or >260 lf		⊠ R∈	enovati emoli	on tion		Goveba	closure ig Procedure	legative Pressure				
		1000000	ocatio			INOII-EX	cempted (*) and	Non-Friable Pro	100 May 200 May	Samuel Control	emen	t
Location Asbestos-Containing M	of laterial (ACM)	Used	Solely	by by	A - C	Description of					ре	
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Maintenar Custodia staff? (12)					(i.e.,	thermal systems in surfacing, VAT, other miscellaneo	nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
S-10		Yes	No	N/A				26	/al	=	late	re
rawl Space				X .	Pipe/Ell	oow Insulation		200 LF	X			
							2		-			
lame of Registered Was	te Hauler		I N.	IDEP V	Vaste - I	Cubic Yards	Name of D	stered Landfill		1		
Service Transport Gr	oup			uler ID 0970		of Waste	Minerva L					
ity, State New Castle, DE						Disposal Date 07/31/2012	City, State	g, OH 44688			_	
ompleted By rutarth Jagad	Title	sident				Signature	vi ayrıesbur	Date	-			
341		- Graciit					C/_	07/16	2012	-		_

UK 9

Date of Notification (1)			-	LN	nma of D. I		HITTE	m m	Lucid Comments		M	1 3
07/16	/2012			l o	ame of Buil Flenwood	lding Owner/Opera Apartment & (Country Club					
Agencies Notified EPA DEP	Type Notifica Initial	tion		S	treet Addre	ess		701-7-9-7	010			-
⊠ DOL	Amended Amendme Emergence	nt#_	_		ty, State, Zi	ip Code e, NJ 08857		ASBESTOS CONT	ROL &	fi:		-
DOH DCA	justificatio	n)	ing	11 10 10 10 10 10 10 10 10 10 10 10 10 1	ame of Con			LICENSIRE		was from the last	2010/07/201	ئے
	Cancellation	n			rnadette I		Lat months and the	Telephone	Number	-	en en en en	45%
Name of English When					FACILITY I	NFORMATION	-tec.			_	A11 (14 -)	
Name of Facility Where Apartments Bldg.	Abatement is Ta	king Pla	ce (3)				Type of Fac	cility (4)				
Street Address							School (K-12) eter 8 (Other than I	(10)			
31 Peach Lane							Other (i.e	e., private & comm	ercial b	uildin	gs,	
City (5) Old Bridge,							homes, Square Fee	etc.)			Age	Allicon
County (6)						7	2000 SF	2		60+		100
Middlesex				U	ounty Code SE ONLY)	€ (7) (STATE	Current Use Apartment	(Prior if being der s Bldg.	nolishe	d)		
Name of Monitoring Firm (8) N/A	Hired by Buildin	g Owner		ASC	M No.	Name of Abate	ment Contracto	r (9)		-	-	
Street Address						DIA Gener	al Construct	ion, Inc.				
								MB Suite 218				
City, State, Zip Code						City, State, Zip Clifton, NJ	Code	VID Suite 218				=
Project Manager for Mon	toring Firm		Te	ephon	e No.	Telephone No.	07012					
						973-389-00	089	License No.				
Start Date (10) 07/26/2012	art Date (10) Scheduled Comp					Name of OSHA						=
Occupancy Status During	Abatement (Ch	//31/20	12				l Construction	on, Inc.				
Facility Closed/Vacate	During Entire F	eriod of	Ahata	ment		Street Address	Avanua D	MD O II SAS				
Abatement Performed Other - Describe:	Outside of Norm	al Facilit	y Hou	rs		City, State, Zip (Code	MB Suite 218				
						Clifton, NJ C						
Scope of Work (Check all	that apply)					D Euli Ca						_
>3 sf or >3 lf ≥160 sf or ≥260 lf			novat emol			Goveba	closure ag Procedure	Negative Pressure				
		Is L	ocatio	n	Т	Non-E	xempted (*) and	Non-Friable Pro				
Location of		Used Used	rmally			D				Abate Ty		t
As bestos-Containing Mar		Main	tenan stodia	ce/	Asbest	Description of tos Containing Mat	erial (ACM)	Amount		Г		Г
IN Facility	<u> </u>	s	taff?	1	(I.e.,	thermal systems is surfacing, VAT,	nsulation, or	(Specify SF or LF)	Re	R	Enca	Enc
(13)			(12)		-	other miscellaned	ous) .	0, 0, 5,	Removal	Repair	Encapsulate	Enclosure
Yes No									<u>a</u>	-	ate	ē
awl Space					Pipe/Ell	oow Insulation		200 LF	X			-
						Taking Taking						
			-									-000
ame of Registered Waste	ne of Registered Waste Hauler				Vaste	Cubic Yards	I Name 75		-			
ervice Transport Grou	ervice Transport Group Ha 20					of Waste		istered Landfill				Conserved to
ity, State						Disposal Date	Minerva L	andfill				_
lew Castle, DE						07/31/2012	The second secon	rg, OH 44688				
ompleted By rutarth Jagad	ompleted By Title					Signature		Date				_
	n	sident				1 1	1	Date				

[•] Do not use this form for asbestos licensure exempted activities.

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

Date of Notification (1						Building Owner / Ope	rator (2)	F (a)	P ()	NA P	1	51
$\left \frac{6}{15} \right = \frac{15}{15}$	2012				Street Ad	chrysler jeep dodge		B 6	<u> </u>	WE	11	111
Agencies Notified	Type of No	otificati	on		314 route			protessussianis v	e ambas was the fire	In the second	The state of the s	diseased from the control of the con
☐ EPA		Initial				e, Zip Code	11111	1 - 1 -	0.0	2010	IIU	No.
DEP DOH	Ø	Amend		# 2	Name of		- (1) U	Telepho	ne Numb	AGA-	11	
DOL DOL				// justification	melisa m		CATHER STATE OF THE STATE OF TH	Trelephio	Tie Wallie		Į.	
		Cance	llation				0.00	1921	5,111,5 Inc.			
				F.	ACILITY IN	IFORMATION	Town spaces	action was a dec	LICENSIA			
Name of Facility Whe paramus chrysler jeep		ent is 1	aking	Place (3)		Type of Facility (4)	Vitoria	199				
paramus emysier jeep	aoage					School (K						
Street Address							er 8 (Other					
314 route 4 west							., private & omes, etc.)	cmmerci	al			
	County (6) bergen)		County Code	(7)	Square Feet 10,000	# Of Floor	S	Buildin	g A ge 20+	-	
						Current Use (Prior if	being dem	olished)	1			
Name of Monitoring F	iem Ulead	by DId	. 0	or (9)	IACCM NO	car dealer	Cantrastar	(0)				
gza	ırın Hirea	by Blag	g. Own	er (8)	ASCIVI NO	Name of Abatement	Contractor	(9)				
5						LVI Environmental Se	rvices Inc.					
Street Address					-	Street Address						
55 lane rd City, State, Zip Code						462 Getty Avenue						
fairfield ni 07004						City, State, Zip Code						
Project Mngr. For Mor	nitoring Fi	irm		Telephone Nu	mber							
ben sallemi				973 2487816		Clifton, NJ 07011						
Sheduled Start Date (10) / 12		Comp	letetion Date (1	1) 12	Telephone Number		License	Number			
 //	/		_/	/		973-772-3660			(0117		
Occupancy Status Du					Here was a second	Name of OSHA Moni						
		ted Dur	ing Ent	tire Period of		LVI Environmental Se	rvices Inc.					
Abatement Abatement		d Outsi	de of N	lormal Facility		Street Address						
Hours - Des				ionnai r donity		462 Getty Avenue					-	
Other - Des	scribe:					City, State, Zip Code						
Scope of Work (Check	k All That	Apply)				Clifton, NJ 07011						
☐ Demolition		1		Renovation		Full Containment wit	h Mogativo	Broceur				
→ Ssf or >3lf		_	1	Reliovation	H	Mini - Enclosure	iii wegative	riessuit	8			- 1
☐ ≥160 sf or ≥						Glovebag Procedure						
					V	Non-Exempted (*) an	d Non-Fria	ble Proce	edure			- 1
Location of		ls	S	l	Descript	ion of		Abateme	ent Type			
Asbestos Contai	ning		ation	As	bestos - C	ontaining		R		E	E	- 1
TO DE ABATE			nally	,,,	Material		Amount	E	R	N	N	- 1
TO BE ABATE in Facility	:₽	Us Sol			e., thermal	systems facing, VAT,	(Specify SF or LF)	. M O	E	C	C	- 1
(13)		by N				ellaneous)	Or Or Er /	v	A	P	0	
		tena						Α	1	s	s	
		Cust						L	R	U	U.	
		Staff YES N									R	-
roof level		V V	JIII	duct tar paper			200 sf	T)		1	+	\neg
roof level	4.77	7	TO	pitch pockets			4 sf	V				
											1	
Name of Registered W	lacta Havi			NJDEP Waste	Cubia	Name of Registered	andfill					
NEWARK CARTING	raste naur	er		Hauler ID No.	Yards	I.E.S.I.	Landini					
City, State		3		4509	of Waste Disposal	City. State						
NEWARK, NJ					Disposal	BETHLAHEM, PA 180	115					
Completed by (Print o	r Type)		5 1	Title		/ Signature	1100		- 1	Date		-
PAUL MAST	,			VICE PRESIDE	ENT	Con	UN	105			07/	/19/12

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

Check # 6810

Date of Notification (1) 7/17/12		1,777,000	ame o	Carried Marie Control of the	Owne	er/Operator (2)	IN E	r e i	NAET	7			
Agencies Notified [] EPA [] DEP	Type of N		1 Ci	6 Bra	ddress adford ate, Zip C	ode	1		W	2012		(4)		
[X] DOH		ended fication	E	diso	n, NJ ()882(0			-				
[] DCA					f Contact		Y	<u>Te</u>	lephone Nun	ber &	The second Control			
	[] Can	cellation	G	C: S	teven			and the second			unan)			
Name of Facility Whe Residence	ere Abateme	nt is Taki	ng Plac	ce (3)	1	FACILI	ITY INFORMATION	Type of Facility (4	K-12)	L. Control of the Con				
Street Address 16 Bradford Ro	oad				500			[X] Other (in homes,	etc.)		g. Age			_
City (5) Edison			ounty Middle				ounty Code (7) STATE USE ONLY)	2000 Current Use (Prioresidence	2 r if being der	50 molished)				_
	irm Hired by	/ Building	Owne	r A	SCM No	١.	J	nent Contractor (9) Jupiter Environ	mental Se	ervices, In	С			
Street Address							Street Address	B Lynn Court						
City, State, Zip Code							City, State, Zip C	_{oode} Lincoln Park, N	NJ 07035					
Project Manager for I	Monitoring F	irm -	Telep	hone	Number		Telephone Numb	per 973-709-0200		License N		085	52	
Scheduled Start Date	(10) /27/12	Sched. 8/4/		letion	Date (11)	Name of OSHA	^{Monitor} J & S Environr	nental La	boratories	, LLC	2		
Occupancy Status Document P	ed/Vacated erformed Ou	During Er	ntire Pe	eriod o			Street Address City, State, Zip C	2333 Route 22	? West					
Des [X] Other – Des	cribe: scribe: Partia	ally vacate	ed					Union, NJ 070	83					
Scope of Work (Chec [] Demolition [] ≥3 sf or ≥3 lf [x] ≥160 sf or ≥		oly)			[]	Renov	vation	[X] Mini [] Glov	Containment – Enclosure ebag Proced – Friable Pro		Press	ure		
[X] 210031012	200 11		Is	Locat	ion						0.000		ment	
Asbestos – (Material	Location of Asbestos – Containing Ma Material (ACM) to TO BE ABATED						Asbestos Materi (i.e., then insulation, s	ription of - Containing ial (ACM) mal systems surfacing, VAT, iscellaneous)		Amount (Specify SF or LF)	R E M O V	R E P A	N C A P	ENCLO
(13			Yes	No	N/A				-		A L	R		S U
Basement					х	VAT				650 SF	X		H	
Name of Registered V Jupiter Env. Sv	На	DEP V uler IE 04783	No.	(Cubic Yards Of Waste 1 Disposal Date	Name of Registe Minerva Lar								
City, State Lincoln Park, N	J						3/10/12	Waynesbur	g, OH					
Completed By (Print of Pane Repic			Title Gen	eral	Manag	ger	Signature	20	2	7/17/	12			
ASB-41 JUN 95							1					7		

1397

Date of Notification (1) 07/10/12				Name Briel	of Buildin le Schoo	g Owner/operator	EGE	I W E		Company .			
1	e Notification	n			Address Jnion La	nne In		0 0010	A Thirties of Parties of States of S	- CANADADA			
DEP DEP	Amended Amendment		_		tate, Zip C	1 000	J JUL 2	U COIL	1	C C C C C C C C C C C C C C C C C C C			
□ DOH	Emergency (justification)	including		-	le, NJ 08 of Contac		ASBESTOS	Telephone N	umber	-	-		=
□ DCA □ □ C	Cancellation			Edwa	rd McMa		LICE	S		The same			_
		- 5:	(0)	FAC	ILITY INF	ORMATION	Type of Facility	(A)	Montanie-		e d		_
Name of Facility Where Abate Brielle Elementary School		ing Place	(3)			\$20.0	School (K-1)	2) 8 (Other than	K-1 2)				
Street Address 605 Union Lane							Other (i.e., p	orivate & comr	mercial	build	ings,		
City (5)							Square Feet	# of Floor	s	Blo	ig. A	ge	
Brielle										<u></u>			
County (6) Monmounth County				USE USE	nty Code (ONLY -	7) (STATE	Current Use (P		emolish	ied)			
Name of Monitoring Firm Hired (8) AHERA Consultants,		Owner		ASCM N	lo.	Name of Abatem Nick Restorat	nent Contractor (9	9)					
Street Address	THE					Street Address	ION DEC						_
PO Box 385				200		72 Brookside	Rd) VII.					
City, State, Zip Code						City, State, Zip C						2001 == (2)	
Oceanville, NJ 08231						Randolph, NJ	07869	License N	lo	_	_		
Project Manager for Monitorin John Smoyer	g Firm			ephone I 9-652-		Telephone No. 973 933-2550		001133					
Start Date (10)	Sche	eduled C				Name of OSHA							
07/13/2012	1	7/16/201				J&S Environn	nental						
Occupancy Status During Aba						Street Address 2333 Rt 22 W							
Facility Closed/Vacated Du	iring Entire F side of Norm	period of nal Facilit	Abate y Hou	rs		City, State, Zip C			-		_		
Other - Describe: 3.30pt						Union, NJ 070							
Scope of Work (Check all that ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	t apply)		novat molitic			Mini-En Gloveba	ntainment with Ne closure ag Procedure empted (*) and N						
			ocati							4-2-1	bate:		
Location of Asbestos -Containing Materi	al (ACM)		l Sole		Ashes	Description o tos Containing Mat		Amount					
TO BE ABATED IN Facility (13)	ar (violity	Cı	ustodi Staff? (12)	al		thermal systems i surfacing, VAT other miscellane	insulation, , or	(Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure
-	Yes							2615			_	_	
boy's& girl's restroom		_	X		TSI-			36 LF	_	X			_
boy's& girl's restroom	S	_	X		Fittir	igs		7		X		-	-
		-		-					-			_	
Name of Registered Waste H	auler			NJDEP \	Vaste	Cubic Yards	Name of Reg	l istered Landfi	11.	_			
Nick Restoration LLC	Nick Restoration LLC					of Waste	G.R.O.W.S				_		
City, State Randolph, NJ 07869						Disposal Date TBD	City, State Tullytown,	PA	6)				
Completed By Elvira Mrda		itle resident	t			Signature Co. 11	a Unice	. Di	ate 07/10	/201	2	1	

Date of Notification (1) 07/13/	12				of Buildir n Town:		vner/operator BOE	(2)	UEIV	E ,		The state of the s	
Agencies Notified	Type Notifica	ation			Address Perrville	Roa	ıd	Construction	UL 2 0 2012		IJ	Walter Property	
DEP DOL	Amended	ent #			State, Zip (10000			
	Emergen justificati	cy (includin	9		pton, NJ of Contac	_	327 :	ACI	Telephone Numbe	<u> </u>		-	_
⊠ DOH ⊠ DCA	Cancellat				Barkman			laramental and a second	Telephone Number		Solvinos]	
				FAC	CILITY INF	ORN	MATION	hetramorates es		Williams.	50		
Name of Facility Where Union Township Mi			(3)					Type of Facility School (K-1		a children	PLATE DEN	er sel	4
Street Address	date sensor							Subchapter	8 (Other than K-1 2 private & commercia) al build	linge		
165 Perrville Road								homes, etc.)				
City (5) Hampton, NJ 08827								Square Feet	# of Floors	BI	dg. A	ge	
County (6) Hunterdon County				Cour	nty Code ((7) (8	STATE	Current Use (P	rior If being demolis	hed)			_
Name of Monitoring Firm		ding Owner	T	ASCM N	lo.	1		ent Contractor (9	9)				
(8) AHERA Consult	tants, Inc		_			-	eet Address	on LLC				_	_
Street Address PO Box 385						535,500	2 Brookside	Rd					
City, State, Zip Code							y, State, Zip C						
Oceanville, NJ 0823	I Tale		N.		ndolph, NJ (lephone No.	07869	License No.	_					
Project Manager for Mon John Smoyer	0.025.03	ephone 9-652-			3 933-2550		001133						
Start Date (10)	13	Scheduled C	-			Na	me of OSHA N	Monitor					
0717/2012		07/19/20					S Environm	ental					
Occupancy Status Durin Facility Closed/Vacat				ment		55055	eet Address 33 Rt 22 W						
Abatement Performe							y, State, Zip C	ode					
Other - Describe: _						Ur	nion, NJ 070	83					
Scope of Work (Check a ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	all that apply)		enovati emolitio				Mini-End Gloveba	g Procedure	egative Pressure on-Friable Procedur	e		- 2012	
		1000	Location							^	bate Ty	ment be	
Location Asbestos -Containing I			d Solel ntenar		Asbes	tos C	Description of containing Mate	erial (ACM)	Amount				
TO BE ABA IN Facilit	TED	C	ustodia Staff?	al		, ther	mal systems in irfacing, VAT,	nsulation,	(Specify SF or LF)	Rer	Re	Encapsulate	Encl
(13)	7		(12)			oth	er miscellaneo	ous)	J. J. Z. ,	Removal	Repair	sulate	Enclosure
		Yes	No	N/A	e					_		Ф	L.
Boiler Room -pipe chase X					TSI wra	ap ar	nd cure		15 LF		X		
					121			_					
						_				-	_	-	
Name of Registered Wa	iste Hauler			NJDEP '	Naste	Cu	bic Yards	Name of Reg	istered Landfill	-			
Nick Restoration LLC					No. 32	9f1	Waste	G.R.O.W.S					
City, State Randolph, NJ 07869						3 12 12 12	sposal Date	City, State Tullytown,	PA				
Completed By	Randolph, NJ 07869 Completed By Title						Signature	1	Date			_	
Elvira Mrda	ompleted By Title						44	it let	C 07/13	3/201	2		

-NECK # 15 00

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

GAC Project # 060-12

Client Project #										~
Date of Notification (1) July 17, 2	012				Name of Building Owner/ RUTGERS, THE ST		/ERSITY	OF NJ		
Agencies Notified EPA DCA DOL		Notification ☑ Initial ↑ ☐ Amende ☐ Emerging justific	Notifica d Notif ency (i ation)	ication	Street Address ENVIRONMENTAL 27 ROAD 1, BLDG City, State, Zip Code PISCATAWAY, NJ	HEALTH &	& SAFET NGSTON	Y DEPT.		E
☑ DEP-No Longer REQUIRED ☑ DOH	,	□ Cancel	led	FACILITY INF	Name of Contact GREG LUPINSKI, E HEALTH & SAFETY		Telephon	e Number	0 2012	,
Name of Facility Where Abatemen BLAKE HALL, BLDG# 60		ng Place (3)	3.5	PAGILITIM	Type of Facility (4) School (K-12)	5			or W. Towenskiller	42002
Street Address COOK CAMPUS	W =				Subchapter 8 (other the Street: N/A #	an K-12) mmercial build of Floors: 2	ings, homes	ASBESTOS (etc.) LICEN ge: 60+ y	SING	di manadan
NEW BRUNSWICK		LESEX		Code (7) Use Only)	Current Use (prior if being	g demolished): ACADEI	MIC		127 12
Name of Monitoring Firm Hired by ATC ASSOCIATES	Bldg. O	wrier (8)	ASCM 0098	MANAGEMENT .	Name of Contractor (9) GREENWOOD ABA	TEMENT C	ONSULTA	ANTS, INC	Э.	
3 TERRI LANE					Street Address 268 MAIN STREET					
City, State, Zip Code BURLINGTON, NJ 0801					City State, ZipCode BUTLER, NJ 07405					
Project Manager for Monitoring Fir BRIAN KEARNY	<u>m</u>	Telephone N 609-386-	8800		<u>Telephone Number</u> 973-492-0477		License No 00840	<u>umber</u>		
Scheduled Start Date (10) 07/27/12		Scheduled C 08/01/12	ompletio	n Date (11)	Name of OSHA Monitor 1 ENVIROVISION, INC.	o				
Occupancy Status During Abate Facility Closed/Vacated During Abatement Performed Outside	g Entire	Period of Al	atemen	t	Street Address 20-21 WARGARAW	ROAD				
Describe ⊠Other – Describe: Shift Ho				M DAILY	City, State, Zip Code FAIRLAWN, NJ		48			
Scope of Work (Check all that app	ly)									
≥ 3 sf or ≥ 3 lf≥ 160 sf or ≥ 26	0			Renovation Demolition		Full Contain Mini-Enclo Glovebag F Non-Exemp	sure Procedure			ıre
Location of Asbestos-Containing Material (ACM) in Facility (13)		ation Normall by Maint./Cu (12) NO			pestos Containing Material al systems insulation, surfac cell.)	ing, (Speci or LF)	fy SF	atement Typ	7.	nclose
Room 244	X			VAT		3400	SF X			
Name of Reg. Waste Hauler See Hauler Below #1 & 2		See Below		<u> 1D #</u>	Cubic Yards of Waste:	25 CY	G.R.O.W	Registered La V.S. North	Landfill	1
Hauler #1) Greenwood Abatemen NJDEP # 12561 Hauler #2) Newark Carting, Inc., NJ DEP # 4509			Butler, 1	NJ 07405	N N	Disposal Da 08/1/12	<u>ite</u>		v Ford Mi risville, P	CON
Completed by (Print or Type) RAYMOND C. PEDALINO	S	<u>tle</u> ENIOR PF IANAGER		т	Signature	11/1	Date July	y 17, 201	2	

N Jevtic

1911.41

1527 1

Owner

" Do not us this feet for ashestos le us in exempled acres wes

07/16/2012

prace or new nersel

04/219

Date of Notification (1) 7/12/2012				Building 0 a De tor	Owner/Ope	erator (2)	110)-		E	W	E	n	7./
Agencies Notified Type Notification	1	11 65	Street Ac 50n Pa	ldress rker Str	eet		11111	JIII	2 N	2010			
DEP Amended DOL Amendmen			City, Stat Dover I	e, Zip Coo NJ	de	a s ^H	Town Lawrence			ZUIZ		4	
DOH justification Cancellatio)	33		Contact a De tor	rrice		L	ob∏el	ephone N	umber-			7
Name of Facility Where Abatement is Taki	ng Place (3)		FACIL	ITY INFO	RMATION		pe of Facility (4)	Santa - Caracana A	a to principal	- Constant	may I	1
Private Property							School (K-1					er.	
Street Address 50 Parker Ave Dover NJ						×	Subchapter Other (i.e. p				dings,	home	es,
City (5) Dover NJ						Sq	etc.) uare Feet	# 0	f Floors	В	ldg. A	ge	1000 (5)
County (6) Ocean County			County C STATE U	Code (7) ISE ONLY)	·	- Cu	rrent Use (Pri	or if be	ing demoli	shed)	*******		
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCM	No.			batement Cor ase Group		(9)				
Street Address n/a	**************************************					Street Add 567-52r	lress id street sui	ite #1	6				
City, State, Zip Code N/F.	1180000				1,000		, Zip Code ew York NJ	-					
Project Manager for Monitoring Firm N/A		111111111111111111111111111111111111111	elephor V/a	ne No.		Telephone 201-758		arter (w	License 001144				
Start Date (10) .7/24/2012	Scheduled 7/26/201		pletion [Date (11)		58 71	SHA Monitor vironmental		1				
Occupancy Status During Abatement (Che	eck Only One)			1/205	Street Add	ress oute 22 We	et.					
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe: 8 hours	Period of Ab mal Facility F	ateme Hours	ent		(City, State	, Zip Code IJ 07083				- 1-		
Scope of Work (Check All That Apply)			_			Union N	IJ 07083			4	- 20 .		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Constant Constant	novat moliti					Full Containm Mini-Enclosure Glovebag Pro- Non-Exempte	e cedure				e	
	ls L	ocatio	on									ement	:
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Main Custo	tenan	y by ce/		tos Contai thermal sy surfacir		or .	(Amount Specify F or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A							<u> </u>		ate	6
Basement			Х		pipe ir	nsulation	ı		50LF	x			
		1	IDEE:		T 0 11 11		I Alexandria	D	orod I 1	Ci)			
Name of Registered Waste Hauler DJM		Ha	JDEP W auler ID 1681		Oubic Yaste		Cumbe		ered Land				
City, State 109-113 Jacobus Ave					Disposa		City, Stat South I	Kearn	y NJ				
Completed by Edwin Precilla	Title Projec	t ma	nager		Sig	inature EX	~ /0	1		Date 7-12-2	012		7

Nock

REMEMBER - MAIL IN HARD COPY STATE OF NOW JOSSEY --- ANOTHPICATION OF ASSESTOR ABATEMENT (Principlet to HJAC 3:48 and 12:420) Home of Building Owner/Operator (2) Date of Hattacation (1) Suede premetions lic OT DO ROLL Stroot Address Apended Housed -allian 8114 Kennedy Blyd KINKIN EFA **ICUSE** City, State, Zhy Code DEP Amendod Union Oily, NJ 97087 Amandmont# DOL E Emergency (including Tojechena ?him? Nome of Contact **เมลได้เลยชื่อก**) DOM: Joe Bolowski Cancallation DCA Type of Floring FACILITY INFORMATION Taking Place (3) Did Warehouse School (K-12) DEL STREET Subchedier & (Other Stan K-12) Sweet Address Other (Le. private à continuordal butidings, nom-75, 551 40th Street Bidg. Aga # OF FRANT C2 (5) Union City Current Use (Prior K being demodshod) CONTRY Codo (T) County (6) Old Warehouse Hudson slame of Abotemont Comractor (9) House or Actrizoning Firm Hired by Building Councer (8) ASCM NO Atek Remediation Services Steppt Address 2725 Salmon Street Skroot Aridress City, State, Zip Code City, State, Zip Code Philadelphia, PA 19134 Lipanse No Takenhone No. Totaphone No Project Manager for Monttering Firm 01167 215 756 2282 Risena of OSHA Norman Schoduled Completion Date (11) 300 (PD) 07H82012 07-07/10/2012 Street Address Occupency Status During Abatement (Check Crisy One) Facility Closed/Vecated During Entire Parted of Abdament Abatement Porformed Outside of Norrall Facility House City, State, 2to Code Com- Depotte: Scope of Work (Check All That Apply) Full Comminment with Mogative Proseure Repoweller 23 of or 23 if Mini-Enciosure Domollion aidu of of \$200 U Glovebeg Promodure 573 Non-Exempted [1] and Horn-Frishin Procedure Abottoment Ty65 is Lacusion Hormody Dissorbition of Aphenios Containing Minimal (ACM) Location of Ucod Solely by Accepted and Encapation w Asbenico-Containing Motodol (ACM)

10 SE ABATEU Q.D. thermal systems insufation. surfacing, VAT. or HAMIN'S Maimenonco: (Specify PACKET. Custodial Staff? SE OF LE In Facility other miscollativous) (12) (13) You No MA 800 by × **Bullding Debis** × Throughout Hithra of Playstard Landill Cutic Yarris Name of Registered Waste Hauley of Wante Hautor ID No. Minerva Enionviess Weigle Trucking Company 800 \$142012 Disposal Dela City, State City, State 07/10/2012 Waynesburg, OH Linden, PA Date Signaturo Completed by 07/09/2012 Project Mismager Thomas Rock

Date of Notification (1) 7/13/2012	CHECK #226		Name of B Jackie K		ner/Operato	r (2)) E		VI	E.	n	100	
	e Notification		Street Add	lress nan Stre	et	Andreas de la constanta de la	<u> </u>		0040	Control of the last	ANTHRONY OF THE PERSONS ASSESSMENT OF THE PE	a property	
EPA X DEP DOL	Initial Amended Amendment #		City, State Maplew	, Zip Code ood, NJ		100		32 20	ZUIZ	or the second se			5
DOH DCA	Emergency (including justification) Cancellation		Name of C Jackie K			apalese.	ASI	Telephone	Numbe	r_l		Contract of the	
			FACILI	TY INFOR	MATION	No.	101 - 145	- Standarthali	- Hanne O area	de la de la compansión de	Albinor.	ell L	-
Name of Facility Where Abate Jackie Krohn Residence	ement is Taking Place (3 e	5)				S	chool (K-12)	(Other than	K-12)	450)
Street Address 19 Hoffman Street							tc.)	# of Floors			g. Age		•
City (5) Maplewood, NJ						1600		if being dem		50			
County (6) ESSEX			County Co	ode (7) SE ONLY)		Resid	dence						
Name of Monitoring Firm Hire	ed by Building Owner (8)	ASCM	No.	Nam EA	e of Abat Service	ement Contr es Corpora	ractor (9) ation					2
Street Address						et Addres 6 69th S							
City, State, Zip Code		112				State, Zi	p Code g, NJ 0709	93					
Project Manager for Monitori	ng Firm		Telephon	ne No.		phone No 1-295-1		Licen 0107	ise No. 74				
Start Date (10)			mpletion [Date (11)	Nan	ne of OSH	A Monitor es Corpor	ation		11			
7/27/2012	7/28/2	74				et Addres			_		2		
Occupancy Status During At						me as a							
Facility Closed/Vacated Abatement Performed Other – Describe: 7:00	During Entire Period of Outside of Normal Facili AM - 3:30 PM	ty Hou	ment rs		City	, State, Zi	ip Code						
Scope of Work (Check All T	102												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	×	Renov Demo				Mir	ni-Enclosure ovehag Proc					,	
				1		IAI NO	n-Exempled	() and Non	-F Habie		Abate		
12		Is Loca Norm			220 000	unioni in e					Ту	ре	
Asbestos-Containing Ma	Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility Us M Cu					tion of ig Materia ems insul VAT, or ellaneous)	ation,	Amoun (Specif SF or Lf	y	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A					4 LF	+	×			
Basement:Boiler/Lau	undry Room	×		Elk	oows, debi	ris clean	n-up	4 LF		X		-	- 10
								1 224				-	
			NJDEP V	Naste	Cubic Yard	ds	Name of	Registered L	andfill		L		
Name of Registered Waste Freehold Carting	ndulei		Hauler ID 15939		of Waste tbd		Waste	Managem					15 150-251 150
City, State PO BOX 5010					Disposal I tbd	Date	City, Stat	te own Landfi	_				
Completed by Gina Salvador	Titl Of		lanager		Signa		Blua .		7/	te 13/2	012		3

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

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

Date of Notification (1)			IN	ame of l	Building Owne	r/Operato	or (2)	11 100	HE (5 5	-	W	Es.	m	
/-19-12			Chad Doria									COLUMN TO SERVICE			
Agencies Notified	Type Notification	R	ckhill Dribe 101 2 0 2012 U												
□ EPA □ DEP	EPA St Initial City, State, Zip Code								duc			au ia		house	
DOL .	ston	NO	T - O	70	39	Made and a	-								
19≸. DOH	☐ Emergency (in justification)	cluding	N	lame of			3	y.	Telephon	e Num	ber in	WL (_	. 1	
D DCA	☐ Cancellation			CH		0,210	۵	Law support	L		· LIAN.	See L	- 4		
Name of Facility Where Abatement is Taking Place (3)								Type of Facility (4)							
Single Family Dwelling								☐ School (K-12)							
Street Address								apter 8 (i.e. priv	(Other that vate & com	n K-12) mercia	build	inas.	home	s.	
	Khill DR	لأناز					etc.) Square Fee		# of Floor			dg. A			
Livingston NJ 07039							Square ree	31	2	5		ربر (ن رن)	55		
County (6)		ounty C	ode (7)		Current Us		if being de	nolishe	ed)						
Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) Name							Dingle family Dwelling								
Name of Monitoring Firm	n Hired by Building Ov	vner (8)		ASCM	No A	Nam	e of Abatemer	T Contr.	actor (9)	10			•		
Street Address	-641				10	Stree	at Address	SE	11110	100	31	<u>L</u> a			
P.O. Box 337								OX	33	7					
							State, Zip Coo	de	١ ٦ ــ	M	- /	16	C'a	29	
	YAS NJ	0	8 6	elephon	a No		phone No.	941	T Lice	nse No	-	0	95	12	
Project Manager for	hen Ker		0	497	58-33	160	9758-	332	S		0	3	14		
Start Date (10)		Scheduled	Com	pletion D	Date (11)	Nam	e of OSHA Mo	onitor	9				-	_	
7-31-1				31-1	2			eet	mole	80	25				
Occupancy Status Durin						enth.	et Address	a H	235	1					
Facility Closed/Vac	cated During Entire Pe med Outside of Norma	eriod of Ab I Facility H	atem lours	ent		City,	State, Zip Coo			0.					
Other - Describe:	-		•			N	ew E		4 /	UJ	01	35	33	3	
Scope of Work (Check	All That Apply)		-		1		•	16							
25 ≥3 sf or ≥3 lf		10 mg/2	novat						t with Nega	ative Pr	essur	е		ļ	
Z 2100 31 01 £200 11							☐ Mini-Enclosure ☐ Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
							Non-Exe	-Friabl	Abatement Abatement						
ls N						Docarinti	on of				Туре				
Asbestos-Containing Material (ACM) Mair			Solel				Material (ACI		Amount (Specify SF or LF)				m l	m	
			dial S	(2000 E)		mal syste urfacing, \	ms insulation, /AT, or				Remova	Repair	ıcapı	Enclosure	
			(12)		oth	er miscell	neous)				oval	air	Encapsulate	sure	
		Yes	No	N/A									Ф		
13 floor	Anen		×		Floor	Ti	le		700	SF	x				
							-								
+			11 (7)			1					1				
					12										
Name of Registered W				JDEP W	TOTAL 0 100 TOTAL	ibic Yards Waste			egistered L		Eli i	residential de la constantial	- Francisco		
EPC Tec	eh.			700		. 14010	1 1	493	te A	Noa	9	en	169	7	
City, State	_				Di	sposal Da	ite Cit	y, State		11.	-				
NE NI		1	-,			8-1-		A	isvi	Da		T			
Completed by	henken	Title	-< <i>i</i>	leat		Signati	To Sa	l_	l	L'a		19	- 1	2	

Check # 8265