CV# 1093

Date of Notification (1)			Name of	Building C)wner/On	erator (2	2)	<u> </u>				_	n 5.	D IT	
07/12/16				Dexhier		0.000	76			E			1 /		
Agencies Notified Type No	otification		Street Ac	idress					lar /						
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	nended nendment #			te, Zip Cod am NJ (4		UUL	i.ee			
En	nergency (including stification)	-	Name of		,,,,,,				Tele	phone	Num	ber	· ^ 1 !=	201	2
	incellation		Anthor	ny Nicho	ols								Siris		
Name of Facility Where Abatemen	et is Taking Place (2	\	FACIL	LITY INFO	RMATIO		Type	of Facility (4)						
Eileen Dexhiemer	nt is Taking Place (5)				г		School (K-12							
Street Address							7 8	Subchapter 8	(Othe						
						[Other (i.e. pr etc.)	ivate 8	comn	nercia	l build	lings,	home	S,
City (5)	10001-1001-1001-1001-1001-1001-1001-10				20,000			e Feet	No. of the	Floors	3		ldg. A	ge	
Chatham NJ			0				2600		2		a a li a la		00		
County (6) Morris			County C	Jode (7) JSE ONLY)		_ '	Curre	nt Use (Prio	r it bei	ng aen	IOHSTR	ea)			
Name of Monitoring Firm Hired by	/ Building Owner (8)		ASCM	No.		Name o	f Aba	ement Cont	ractor	(9)		WINE CONTRACTOR			
Enviro-Pro UnLTD Corp.						SUNN	N En	terprise G	roup	LLC					
Street Address						Street A						000			
2721 Kings Highway #6L								easantvie	w Av	e., Su	lite 2	-329			
City, State, Zip Code Brooklyn, NY 11229						City, Sta Hacke		ck,NJ 076	601						
Project Manager for Monitoring Fi	rm		Telephor	ne No.		Telepho				Licen	ise No).			
Eugene			718-80	01-2231		973-9	28-6	900		012	29				
Start Date (10)		ed Cor	npletion [Date (11)				A Monitor	Corn						
7/28 Occupancy Status During Abatem	8/15	10)				Street A	W. 1	UnLTD (Jorp.						
10 M M M M M M M M M M M M M M M M M M M			aant					s Highwa	y #6L						
Facility Closed/Vacated Duri Abatement Performed Outside	de of Normal Facility	Hours	s S			City, Sta		1573							
Other – Describe:					_	Brook	klyn,	NY 11229	9						
Scope of Work (Check All That A	pply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demolii				×		l Containme i-Enclosure	nt with	Nega	tive P	ressu	re		
		Cition				×	Glo	vebag Proc n-Exempted	edure	d Non	Erioh	o Dro	andur.	0	
		, ,	•				IVO	-Exempled	() an	u Noii-	rnaui	1		ement	
Location of	10.7	Locat Vorma			Desc	cription (nf						Ту	ре	
Asbestos-Containing Material		d Sole intena			tos Conta	ining Ma	aterial			mount		П	00.00	En	П
TO BE ABATED In Facility	Cus	todial		(I.e.		ng, VAT	, or	ation,		Specify or LF		Remova	Repair	caps	Enclosure
(13)		(12)			other mi	iscellane	eous)					oval	ar ar	Encapsulate	sure
	Yes	No	N/A											(D	
Basement		Х				TSI				60		X			
Name of Registered Waste Haule		100	NJDEP W Hauler ID		Cubic Y of Wast			Name of F	200-5-200						
Sunn Enterprise Group, LL	.C	11 76	NJ-952					Tri-Stat	2751 640-460	nster	Ass	oc., I	nc.	1	
City, State					Disposa		ion	City, State Bronx, I		2474					
Hackensack, NJ 07601 Completed by	Title					omplet gnature		DIOTIX,	NI I	J414	Da	te			
Bogdan Markovski		Of Or	peration	าร		/		(·				18/2	016		

Nocr.		N		CATION	of ASBES to NJAC 8:	STOS AB.		IENT) E C			\mathbb{V}	E
Date of Notification (1) 7–18–16					Building Ow and Sch					ÌÌ JUI	2	1 2	2016	
Agencies Notified EPA	Type Notification			Street Add	dress Ramapo	Valle	ey F	load	- Hed				.010	
D DEP	Amended Amendment #_	1			e, Zip Code and, NJ	л 074	136			ASBEST LI	OS (JON' SING	TROL	. &
Ď DOH □ DCA	☐ Emergency (inc justification) ☐ Cancellation	ruaing	1	Name of C Rache	Contact el DeCa	arlo			Telo	ephone Numbe				
				FACIL	ITY INFO	RMATIO	N							
Name of Facility Where A	na sara na matana ana ang atawa sa ana ana ana ana ana ana ana ana ana	ce (3)						Type of Facility	(4)					
Valley Middle Street Address	e 5C1001							School (K-		than K-12)				
71 Oak Stree	t									commercial bi	uilding	s, hon	nes, etc	c.)
City (5)					72-2			Square Feet	# 01	Floors	BI	dg. As	re.	-
Oakland								50,000		1	5	Oyr	s.	
County (6) Bergen				County Co	ode (7) SE ONLY)		_	Current Use (Pr	ior if being	g demolished)				
Name of Monitoring Firm West Chester	and the managed beautiful and a second second		J.C.	ASCM	No.	N		of Abatement Cor Mouth Env	and the second second		'o	Tnc		
Street Address 307 North Wa						5	Street	Address			,	1410	•	
City, State, Zip Code	THE DEFECE							Haws Ave	enue			-		
West Chester	, PA 19380							ristown,	Dλ 10	2/01				
Project Manager for Moni	1		- 1	Telephon	e No.	7		one No.	IA I	License No.				-
Philip Cônte			(610-4	31-754	5	610)-239-9920)	00398				
Start Date (10) 7-28-16		Scheduled 8-9-		letion Da	te (11)	1	Name Pl	of OSHA Monito ymouth En	r viron	mental (20.,	Inc		
Occupancy Status During	Abatement (Check Onl	y One)				5		Address 3 Haws Av	onue					
	ated During Entire Period ad Outside of Normal F					(City, S	tate, Zip Code						
Other – Describe: _						_	No	rristown,	PA 1	9401				
Scope of Work (Check Al	l That Apply)													
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			enovat emoliti				0	Mini-EnclosGlovebag Pr	ure ocedure	Negative Pres		ura		
		Ic	Locati	on				- Hon E.temp	Tod 1 7 dire	Tron triable i	10000		ement	
Locatio	on of	1	Normall	v		Desc	ription	ı of				Ty	pe	
Asbestos-Containing			d Solel			os Contair	ning N	faterial (ACM)		Amount				_
TO BE AE		Cus	todial S	Staff	(i.e. therr		ns insi AT, oi	lation, surfacing.		(Specify F or LF)	Remova	Repair	ncap	inclo
(13)		(12)			other mi	iscella	neous)			oval	nair	Encapsulate	Enclosure
		Yes	No	N/A						912 (2)			e	
see attached	list	х		see a	attach	ned	list	see	attache	d				
Name of Registered Wast Newark Cartin		JDEP W lauler ID 17304	No.	Cubic Y of Waste	e	Name IE		red Landfill						
City, State Newark, NJ				×-	Disposa 8-9-	I Date			em , PA					
Completed by		Title	760004			Sig	gnatur			Da				
James M. Kell	ly	Vic	e-Pr	eside	ent			1			18-	16		

Oakland School District - Valley Middle School

Location of	Location used soley by	Description of Asbestos	Amount	Abatement Type
Asbestos (13)	Maintenance Custodial Staff (12)	Containing Materials	of Material	JUL 2 1 2016
by stage	NO	Roof Drain/Pipe Fittings	5LF	Removal
stage	YES	Roof Drain/Pipe Fittings	6LF	ASBEREmovaDNTRD
custodial	NO	Roof Drain/Pipe Fittings	10LF	- Removal
café	NO	Roof Drain/Pipe Fittings	4LF	Removal
café	NO	Roof Drain/Pipe Fittings	5LF	Removal
café	NO	Roof Drain/Pipe Fittings	5LF	Removal
kitchen	NO	Roof Drain/Pipe Fittings	4LF	Removal
library	NO	Roof Drain/Pipe Fittings	3LF	Removal
gym storage	NO	Roof Drain/Pipe Fittings	7LF	Removal
gym	NO	Roof Drain/Pipe Fittings	7LF	Removal
gym	NO	Roof Drain/Pipe Fittings	20LF	Removal
gym	NO	Roof Drain/Pipe Fittings	10LF	Removal
attic	YES	Roof Drain/Pipe Fittings	12LF	Removal
attic	YES	Roof Drain/Pipe Fittings	6LF	Removal
attic	YES	Roof Drain/Pipe Fittings	6LF	Removal
gym	NO	Roof Drain/Pipe Fittings	6LF	Removal
gym	NO	Roof Drain/Pipe Fittings	6LF	Removal

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Date of Notification (1)			Nama of	Ruilding C	wner/Operator	- (2)		11115	<u> </u>	لليد	W	IS
	16			57475	wher/Operator	(2)		13				
July 18, 201 Agencies Notified Type Not		l l	Restore Street A	100000000000000000000000000000000000000					1111	0 4	2040	
Agencies Notified Type Not	ilication								JUL	2 1	2016	1
EPA Initia	4	16		rk Avenu								
DEP Ame	ended endment # <u>2</u>			ite, Zip Cod				ASI	103	00	NTRO	01 8
	ergency (including	- 1			PA 19406				1. 1			
DOH justi	ification)		Name of	f Contact				Telephone	Number			
DCA Can	cellation	F	-	Manager								
Name of Facility Where Abatement	tis Taking Place (1	1)	FACI	LITY INFO	RMATION	Tue	o of Facility /4					
	is raking riace ()				Typ	e of Facility (4					
building						\perp	School (K-12		(10)			
Street Address								3 (Other than I ivate & comm		ildina	home	20
269 Sheperd Avenue						\times	etc.)	ivate & commi	erciai bu	numy.	5, 1101111	55,
City (5)						Squ	uare Feet	# of Floors		Bldg.	Age	
Bound Brook, NJ 08805												
County (6)			County (Cur	rent Use (Prior	if being dem	olished)			
Somerset			(STATE U	USE ONLY)	-			buildin	a			
Name of Monitoring Firm Hired by	Building Owner (8)		ASCM	I No.	Name	e of Al	batement Cont		<u> </u>		-	
AET			0021		The N	MAC	K Group, LL	C				
Street Address			0021		Stree		Charles and the state of the st					
907 Doolittle Drive							s HWY N, S	STE 200				
City, State, Zip Code							Zip Code	51E 2U9		-	9777997	
Bridgewater, NJ 08807					1							
Project Manager for Monitoring Firm	n		Telepho	no No		-	II, NJ 08034		- N-	11000		
	Н				Telep			Licens				
Eric Houseknecht Start Date (10)	1.0-1-4-1			18-1108	Not a control of		- 5000	00781				
	Schedul			Date (11)	657,005,000		SHA Monitor					
7/19/16			12/31/1	6		-	K Group, LL	.C.				
Occupancy Status During Abateme					Stree							
Facility Closed/Vacated Durin							s HWY N, S	STE 209				
Abatement Performed Outside Other - Describe:	e of Normal Facility	/ Hour	S		1		Zip Code					
					- Cherr	y Hil	I, NJ 08034					
Scope of Work (Check All That App	oly)					_						
≥3 sf or ≥3 lf		Renova	ation			X F	ull Containmer	nt with Negati	ve Press	ure		
≥160 sf or ≥260 lf	\boxtimes	Demoli	tion				/lini-Enclosure					
						X N	Blovebag Proce Non-Exempted (edure *) and Non-Fri:	able Proc	edure		
			AWARY.				ton Exempted (j dila itali-i ili	abic i roc	To a second	temen	t
		Locat Norma									уре	
Location of Asbestos-Containing Material (l I I I	d Sole		Achact	Descriptions Containing		ial (ACM)	Amount		T		
TO BE ABATED	Ma	intena			thermal system			(Specify	Z	_	Enc	Щ
In Facility	Cus	todial ((12)			surfacing, V	AT, or	•	SF or LF)	em	Rep	aps	clos
(13)		(/			other miscella	ineous	s)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A						-		6	
throughout		V	1		floor til	9		850 s/f	V	/		
tilloughout	throughout				11001 (11	Е		000 5/1		\	+	
	15					72 000						
	•		NJ DEP W		Cubic Yards							
Name of Registered Waste Hauler	Name of Registered Waste Hauler						Name of R	egistered Lan	dfill			
Newark Carting		1	Hauler ID 450		of Waste 8.5		Cumbarla	and County	/ IEQI	Roth	lohan	,
City, State			430	U.J	8.3 Disposal Date	2		ind County	/ IESI	Delli	enen	1
1 10 20 20 20 20 20 20 20 20 20 20 20 20 20	59024655000						City, State		- D4			
Newark, NJ	Till				12/31/1		Newburg	/ Bethleher				
Completed by	Title				Signatur	9//	10		Date			
Mike Cooper	Presid	lent			1	//			7/18/18	5		

NO 9	N				3:60 and 1			T programme,	FR	F	V n	7 [T	11
Date of Notification (1)			Name of	Building (Owner/Ope	erator (2	2)		1 13 6		11 12		-	111
July 05, 2016		R	Restore	Core				111	1				,	111
Agencies Notified Type Notification	on	122	Street Ad	1200000000				1;1	11, 11	JL 2	1 2	116	1	1
M		6	50 Clar	rk Aveni	ue				111 00	J L L	11 222		1	1
EPA Initial Amended				te, Zip Co					1			TOC	1 &	
DOL Amendme		1000			PA 194	106			ASBES	STOS	CON	G)L U	
	cy (including		Name of		1710	100			Telepho	1100	1001110	<u></u>		
DOH justification justification Cancellat		P	Project I	Manage	r			1	Τ					
		- 1			ORMATIO	N	_							-
Name of Facility Where Abatement is Ta	king Place (3)	.,,,,,,		51 tivii (110		Тур	e of Facility (4)					
building						1		School (K-12	2)					
Street Address							П	Subchapter		an K-12)			
269 Sheperd Avenue			12				X	Other (i.e. pr	rivate & cor	nmercia	l build	lings,	home	s,
City (5)							San	etc.) are Feet	# of Floo	ors	В	ldg. A	ae	-
							Jyu		511100	M. 19-0		-3-1	a.T.	
Bound Brook, NJ 08805 County (6)			County C	Code (7)			Cur	rent Use (Prio	r if being d	emolish	ed)			
Somerset				ISE ONLY)			Juil	5/11 000 (1 110			/			
Name of Monitoring Firm Hired by Buildin	na Owner (8)		ASCM	l No		Namo	of Ah	atement Cont	build	ullig				
	ig Owner (8)			INO.					35 60					
AET			0021			Street A		(Group, Ll	_C					
Street Address					1.00		200							
907 Doolittle Drive		0.7		1111055-775				s HWY N,	STE 209					
City, State, Zip Code					1.00			Zip Code						
Bridgewater, NJ 08807								, NJ 08034						
Project Manager for Monitoring Firm			Telephor			Telepho			6-300	ense No	ο.			
Eric Houseknecht		1.7	,	18-1108				- 5000	007	'81				
Start Date (10)	Schedul			Date (11)				SHA Monitor						
ON-HOLD - New Start date TDE			12/31/1	6				CGroup, Ll	_C.					
Occupancy Status During Abatement (C	heck Only Or	ne)				Street A								
Facility Closed/Vacated During Enti					-			s HWY N,	STE 209					
Abatement Performed Outside of N Other - Describe:	ormal Facility	/ Hours	3			City, St	ate,	Zip Code						
					_	Cherry	Hill	I, NJ 08034						94
Scope of Work (Check All That Apply)						_	_							
≥3 sf or ≥3 lf	□ F	Renova	ition			2	F	ull Containme	nt with Neg	gative P	ressur	e		
≥160 sf or ≥260 lf		Demolit	tion			-		lini-Enclosure llovebag Proc	a dura					
						>		on-Exempted		-Friable	Proce	dure		
			ranas			None							ement	ţ
	120	Locati Normal			5							T	/ре	
Location of Asbestos-Containing Material (ACM)	Use	ed Sole	ely by	Ashes	Desc stos Conta	cription		al (ACM)	Amou	nt				
TO BE ABATED	Ma	intena todial S	3007 17000	(i.e.	. thermal s	systems	inst	ulation,	(Spec	ify	Re	ਹ	nca	Enc
In Facility	Cus	(12)	Stall?			ing, VAT			SF or l	_F)	Remova	Repair	Encapsulate	Enclosure
(13)		1			other mi	iscenan	eous	')			val	air.	llat	ure
	Yes	No	N/A										CD	
throughout		X			flo	oor tile			850 s	s/f	X			
unougnout	/\				20									
Name of Registered Waste Hauler		1000	NJ DEP W		Cubic Y of Wast			Name of F	Registered	Landfill				
Newark Carting		lauler ID 450		oi vvasi	8.5		Cumbarl	and Cour	atv / 15	QI P	othl	ahom	1	
Newark Carting	City, State					8.3 al Date	- 10	City, State		ity / IE	-OI D	CUIII		
16-21-4-41-16-2-16-16-16-16-16-16-16-16-16-16-16-16-16-					No. of the Contract of the Con	2/31/16		Newburg		hom 1	ο Δ			
Newark, NJ Completed by	Title					gnature		1 vevvourg	/ Detille	Da				
L		dont				12.1	1	ر سے	ar)		/16			
Mike Cooper	Presid	JEIII					-	/		110	110			

NO OV		1		CATION		v Jersey ESTOS AB/ 3:60 and 12			M	G	Eli	V E	F	118	8
NO OC											C3 0			111	
Date of Notification (1)	14 2016					Owner/Oper	rator (2)				240	-111		
Agencies Notified	14, 2016 Type Notification		100	lestore Street Ad					 		2 1 2	016		4	
	Type Notification		200		rk Aveni									and the same of th	
EPA DEP	Initial Amondod		120		te, Zip Co	51/50			AS	SBEST	OS CONT	ROL	Q.	-	
DOL	Amended Amendment #		- 1				16				CENSING		_		
	Emergency (ir		_		Contact	PA 1940	0			Tel	ephoneNur	nher			
DOH DCA	justification) Cancellation		-	- 18 Y 18						101	ephoneivai	IIDCI			
L DOA	Caricellation		P		Manage	ORMATION				-		1			
Name of Facility Where A	batement is Taking	Place (3	3)	FACI	LITT HAT	JAMATION		Туре	of Facility (4)					
building							1		School (K-1	2)					
Street Address							\neg				er than K-12	2)			
269 Sheperd Avenue										rivate (& commerci	al build	lings,	home	es,
City (5)								_	etc.) re Feet	# 0	Floors	В	ldg. A	ae	
Bound Brook, NJ 088	105													3	
County (6)	.00			County C	Code (7)			Curre	nt Use (Pri	or if bei	ng demolish	ned)			
Somerset					ISE ONLY)		_		555 (building	,			
Name of Monitoring Firm	Hired by Building O	wner (8)		ASCM	No.	N	ame o	of Aba	tement Cor						
AET		(0)		0021		1 200			Group, L		(0)				
Street Address				0021			treet A		The state of the s	LU					
907 Doolittle Drive						1 12			HWY N,	STE	200				
City, State, Zip Code									ip Code	SIL	209				
	17					1				1					
	ewater, NJ 08807 cct Manager for Monitoring Firm						elepho		NJ 0803	4	License N	0			
Eric Houseknecht	Manager for Monitoring Firm				ne No.	900000					harren ween	0.			
Start Date (10)		Schadul			18-1108 Date (11)				5000 A Monitor		00781				
7/5/16		ochedu		10/5/16		9529			Group, L	10					
Occupancy Status During	Ahatement (Check	Only Or		10/5/10)		treet A			LU.		3 (4.7)			
				1/2					HWY N,	QTE	200				
Facility Closed/Vaca									ip Code	31L	209				
Other - Describe:			110010						NJ 0803	1					
Scope of Work (Check Al	That Apply)					Ci	ену	1 11111,		4					
		\Box		Photo:			\triangleright	a ₋ .			NT				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Contract to	Renova Demoliti				É	7 ' 4'	i Containm i-Enclosure		Negative F	ressui	e		
								Glo	vebag Pro	cedure					
							2	Nor	n-Exempted	(*) and	Non-Friable	Proce			
			Locati	200								2		ement /pe	Į.
Location			Normal ed Sole	*	No constant control	Descri						-	107		
Asbestos-Containing TO BE ABA	Control of the Contro	100000000000000000000000000000000000000	intenar	7.5		tos Contain thermal sy					mount Specify	71	200	Ē	ш
In Facili		Cus	todial S	Staff?	(1.6.	surfacing			20011,		or LF)	Remova	Repair	Encapsulate	Enclosure
(13)			(12)			other misc	cellane	eous)				3401	pair	sula	Sun
		Yes	No	N/A								<u>m</u>	,	te	Œ.
II.		res	V	N/A							FO - 15	V	_		
through	throughout					TIOO	r tile			8	50 s/f	\triangle		-	
Name of Registered Was	te Hauler		N	J DEP W	/aste	Cubic Ya	rds		Name of	Registe	ered Landfill				
	To most off		.9263	lauler ID		of Waste									
Newark Carting		450)9	8	3.5		Cumber	land (County / II	ESI B	ethle	ehem	1		
City, State				Disposal	Date		City, Stat	e .							
Newark, NJ					5/16		Newburg	g / Be	thlehem,	PA					
Completed by		Title				Sign	ature	1/1	10.		Da	ate			
Mike Cooper	·	Presid	dent			12	a-1/	1			6/1	4/16	(Emallo)		

State of New Jersey - Notification of Asbestos Abatement

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7) GAC Project # 060-16 Date of Notification (1) Name of Building Owner/Operator (2) RUTGERS, THE STATE UNIVERSITY OF NJ July 15, 2016 Agencies Notified Notification Type Street Address ENVIRONMENTAL HEALTH & SAFETY DEPT. ■Initial Notification **DEPA** ■ Amended Notification # 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS DCA City, State, Zip Code ■ Emergency (including X DOL PISCATAWAY, NJ 08854 justification) ■ DEP- No Longer REQUIRED Telephone Number Name of Contact **⊠**Cancelled X DOH MICHAEL SMITH, ENV. JUL 2 1 2016 **HEALTH & SAFETY** FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) ROBESON CAMPUS CENTER, BLDG# 7220 School (K-12) ASBESTOS CONTROL & LICENSING Subchapter 8 (other than K-12) Other (i.e. private & commercial buildings, homes, etc.) **NEWARK CAMPUS** Sq. Feet: N/A # of Floors: 4 Bldg. Age: 60+ years City (5) County (6) County Code (7) **ESSEX** NEWARK (State Use Only) Current Use (prior if being demolished): ACADEMIC Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) 0098 ATC GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 268 MAIN STREET City State, ZipCode City, State, Zip Code BUTLER, NJ 07405 BURLINGTON, NJ 08016 Project Manager for Monitoring Firm Telephone Number License Number Telephone Number BRIAN KEARNY 609-386-8800 00840 973-492-0477 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 07/15/16 07/18/16 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☑ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD □ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe XOther - Describe: Schedule: 5PM - 5AM (24 HOURS & WEEKENDS AS NEEDED) FAIRLAWN, NJ Scope of Work (Check all that apply) ■ Full Containment with Negative Pressure **⊠**Renovation ■ Mini-Enclosure $\square \ge 3$ sf or ≥ 3 If ☐ Glovebag Procedure / Wrap & Cut \ge 160 sf or \ge 260 lf Demolition Non-Exempted (*) and Non-Friable Procedure Description of Asbestos Containing Material Location of Asbestos-Containing Is Location Normally Used Amount Abatement Type (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Material (ACM) in Facility (13) Solely by Maint./Custodial Remove Repair Encap Enclose Staff? (12) VAT, or other miscell.) or LF) NA YES NO 236,237 X X VAT 1250 SF NJDEP Waste Hauler ID # Name of Registered Landfill Name of Reg. Waste Hauler 15 CY Cubic Yards of Waste: G.R.O.W.S. North Landfill See Hauler Below #1 & 2 See Below Disposal Date City, State Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 100 New Ford Mill NJDEP # 12561 07/18/2016 Rd. Morrisville, Pa Hauler #2) Newark Carting, Inc., Newark, NJ 04509 19067 NJ DEP # 4509 215-736-1700 Completed by (Print or Type) Date SENIOR PROJECT July 15, 2016 RAYMOND C. PEDALINO Raymand C. Pedalino

MANAGER

GAC Project # 060-16			(Pursu	ant to N.J.A.C.	8:60-7 and 12:120-7)		3				
Date of Notification (1)			12.00		Name of Building Owner/	Operator (PA		1111	0 1	2016	-111
July 5,	2016				RUTGERS, THE ST	FATE UNI	VERSI	TY OF	NJ	2016	
Agencies Notified □EPA □DCA □ DOL		Notification Initial N Amend Emerg	Notificat ed Noti ency (i	fication #	Street Address ENVIRONMENTAL 27 ROAD 1, BLDG City. State, Zip Code PISCATAWAY, NJ	HEALTH 4086, LIV	& SAF	ETY D	EPT	ITROL G	_ &
☑ DEP-No Longer REQUI ☑ DOH	RED	justific □Cancel			Name of Contact MICHAEL SMITH, E HEALTH & SAFETY	NV.	Telep	hone Nu	mber		
				FACILITY INF	ORMATION						
Name of Facility Where Abate ROBESON CAMPUS			7220		Type of Facility (4) School (K-12)	14 40)					
Street Address NEWARK CAMPUS					Subchapter 8 (other than Other (i.e. private & cor Sq. Feet: N/A #					ears	
City (5) NEWARK	County (6	SSEX		Code (7) Use Only)	Current Use (prior if being	g demolished	d): ACA	ADEMIC			
Name of Monitoring Firm Hired	d by Bldg.	Owner (8)	ASCM 0098		Name of Contractor (9)						
Street Address					Street Address	TEMENT C	ONSU	LTANT	S, INC		
3 TERRI LANE				268 MAIN STREET							
	08016			City State, ZipCode BUTLER, NJ 07405		т					
Project Manager for Monitoring BRIAN KEARNY	<u>g Firm</u>	Telephone 1 609-386		<u>Telephone Number</u> 973-492-0477		0084	se Numbe	<u> 31</u>			
Scheduled Start Date (10) 07/15/16		Scheduled 0 07/18/16		n Date (11)	Name of OSHA Monitor		1 0004				
Occupancy Status During Al	batement	(Check only o	ne)		ENVIROVISION, INC Street Address	S					
☑ Facility Closed/Vacated ☐ Abatement Performed Ou Describe	_			nt	20-21 WARGARAW City, State, Zip Code	ROAD					
Schedule: 5PM - 5AM (2	4 HOUR	S & WEEKE	NDS AS	S NEEDED)	FAIRLAWN, NJ						
Scope of Work (Check all that	apply)				_	IVOS WIDOMOD DI KI	40 M	PR: 82741 (7)	-0 /2000		
□≥ 3 sf or ≥ 3 lf 区 ≥ 160 sf or ≥				□ Renovation □ Demolition	-	Full Contain Mini-Enclos Glovebag F Non-Exemp	ure Procedur	re / Wrap	& Cut		ure
Location of Asbestos-Containi Material (ACM) in Facility (13)	Sole	ocation Norma ely by Maint./C ff? (12) S NO			pestos Containing Material al systems insulation, surfaci cell.)	ing, (Spec	ify SF	10.54	Repair I	od o	Enclose
236,237		X		VAT		1250) SF	X			
Name of Reg. Waste Hauler See Hauler Below #1 &	2	ID#	Cubic Yards of Waste:	15 CY		of Regist			ill		
Hauler #1) Greenwood Abate NJDEP # 12561 Hauler #2) Newark Carting, NJ DEP # 4509		35	Butler, 1	NJ 07405		Disposal D 07/18/20		1 F 1	Dity, Stat 100 New Rd. Morr 19067 215-736-	Ford Mrisville,	
Completed by (Print or Type) RAYMOND C. PEDAL	.INO	Title SENIOR P MANAGER		т	Signature Raymand C. Per	dalino	<u>Date</u>	July 5,	2016		

State of New Jersey - Notification of Asbestos Abatement

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		1		CATION	of New Jersey OF ASBESTOS A to NJAC 8:60 and	ABATE			で F C	185	81	108 108	286
Date of Notification (1) 07/15/2016					Building Owner/Cine Allen	perator	(2)		15 (0)		(1)		
Agencies Notified	Type Notification		71 2	Street Ac	ddress ony Drive				JUL	2 1	2016		凹
EPA DEP DOL	Initial Amended Amendment Emergency		_	City, Stat Summi	te, Zip Code it, NJ 07901				ASBESTO		1 -)L &	
DOH DCA	justification) Cancellation		1 1		Contact ine Allen			1-16	lephone Nu	mber			
				FACIL	LITY INFORMATI	ON				-			
Name of Facility Where House	Abatement is Takir	ng Place (3	3)				Type of Facil School	5					
Street Address 22 Colony Drive									ner than K-1 & commerc	ial buil			es,
City (5) Summit							Square Feet N/A	# 0 N/	of Floors A		Bldg. A I/A	ge	
County (6) Essex				County C STATE U	Code (7) JSE ONLY)		Current Use House	(Prior if be	ing demolis	hed)			
Name of Monitoring Firm N/A	n Hired by Building	Owner (8)		ASCM	l No.		of Abatement Abatement		r (9)				
Street Address						35500 F-355	Address Rosengren A	venue					
City, State, Zip Code						7.100.347.3	State, Zip Code						
Project Manager for Mo	nitoring Firm		T	Telephor	ne No.	37 STORY 10 STORY	hone No. 345-8685		License N	No.			
Start Date (10) 07/28/2016		Schedul 07/29/2		pletion [Date (11)	10000000	of OSHA Mon Abatement	77.7					
Occupancy Status Durir				70		2000	Address Rosengren A	venue					
Facility Closed/Vac Abatement Perform Other – Describe:	ned Outside of Nor					City, S	State, Zip Code						
	All That Apply					1010	wa, NJ 075	12					
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Locatio Asbestos-Containing TO BE AB In Fac (13)	g Material (ACM) BATED ility	Use Ma	ed Solel intenar todial S (12)	y by nce/	Asbestos Con (i.e. thermal surfa		Material (ACM) is insulation, AT, or	(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
har	ant.	Yes	No	N/A	ni	insula	tion		30 LF	x		te	
basem	ICIT		X		pipe	IIISUI	AUOII		- LI	^			

NJDEP Waste

Hauler ID No.

20996

Title

PM

Cubic Yards

Disposal Date

Signature

of Waste

TBD

TBD

Date

07/15/2016

Name of Registered Landfill

City, State

Tullytown, PA

Waste Management of PA

City, State

Totowa, NJ

Completed by

Ned Joksimovic

Name of Registered Waste Hauler

D&S Abatement, Inc.

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Date of Notification (1) July 18, 2016				Name of	Building ()wner/Oper Jeff Bl			Di Jii	591	2016	3	
[] DEP [] Amen [X] DOL [] Emerg [X] DOH [] justifie	Notificat ded Notif dment #_ gency (inc	rication			ddress te, Zip Cod Contact				ASBESTO LIC		NTRO	1	
			FACI	LITY I	NFORM	ATION							
Name of Facility Where Abatement is Taking I Residence Street Address	Place (3)						Ту	rpe of Facility (4) [] [] [X]	School (k-12) Subchapter 8 (oth Other (i.e., privat homes, etc.)			l buildi	ngs,
City	County	(6)		County C	ode (7) USE ONLY	Y)	Sq	quare feet 1000 sf	# of Floors	Bldg	Age 60)	
Brick	Ocean	ı					Сι		being demolished)				
Name of Monitoring Firm Hired by Building O	Owner (8)		A	ASCM N	lo.				(9) an Contracting,	Inc.			
Street Address						Street Ad	Al Orazona	1889 R	oute 9, Unit 61				
City, State, Zip Code				City, Stat	188	Toms F	iver, New Jerse		55-12	.71			
Project Manager for Monitoring Firm	Vumber			Telephon 732-34	9-9	932	License N 00624	umber					
Scheduled Start Date (10) 7/28/16		Scheduled 0 7/29/1		n Date (1	1)		95053		L. Analytical				
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										Abat	ement 7	уре	
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Guardian Contracting, Inc. City, State	0223 Dispose		3	City, St		T.R.R.F.							
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	-			for asb	estos lice	nsure exen	npte	d activities.		1			



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Date of Notification (1) 7/18/16				Building Ov Caskey					110) <u>F</u>	6	E		V	
Agencies Notified Type Notification		St	treet Add	iress						11 .		_			111
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All Control of the Address of the Address of the Taking I	Diago (2)	_	FACILI	TY INFOR	RMATIC	ON	Tyr	oe of Facility (4	1)				-		
Name of Facility Where Abatement is Taking F Michael Caskey Private Home	Place (3)						T y	School (K-12							
Street Address							×	Subchapter Other (i.e. pi	8 (Othe			ouildi	ngs, h	nomes	s,
Cib. (5)							Name of Street	etc.) uare Feet		Floors			ig. Ag		
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County (6) Ocean			ounty Co	ode (7) SE ONLY)				rrent Use (Pric arage	r if bei	ng demol	lished	i)			
Name of Monitoring Firm Hired by Building Ov N/A	vner (8)		ASCM	No.				batement Con Inc.	tractor	(9)					
Street Address						Street PO E									
City, State, Zip Code								, Zip Code erlin NJ 080	91						
Project Manager for Monitoring Firm		Т	elephone	e No.		Teleph 856-		No. 8-9800		License 00727					
	Scheduled 7/20/16	Comp	oletion D	ate (11)		Name		SHA Monitor							
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Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe:	eriod of Aba I Facility H	ateme ours	ent		_	City, S	State	, Zip Code							
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11/200/11/		Sta	ite of New	Jersey							
CK# 2964	NOT	IFICATION (Pursuant (OF ASBE to NJAC S	ESTOS A 8:69 and	12-120)) E C E	E I N	/ F	F	7
Date of Notification (1)			Building ((2)	31			7//	
7/16/16			9/10	10,	1	C	H JUI Z	2 1 201	6	111	\mathbb{H}
Agencies Notified Type Notification		Street Ad	ioress			-	002 2	- 201	U	IL	/
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Amendment #		1 25	bor	Park	(, N	Uls Dec	ASBESTOS	VSING	OL &		
Emergency (ir justification)	cluding	Name of	Contact	-			Telephone	Number			7
DCA Cancellation		1	D511				_			_	
Name of Facility Where Abatement is Taking	Place (3)	FACI	CITY INFO	KMAIK	JM .	Type of Facility	(4)				
1/9/10/11 /10 1/00	e-ty)	School (K-	12)				
Street Address	1		10		N. Carrie	Subchapter	8 (Other than K private & comme	(-12) ercial build	mas.	home	s.
					-	etc.)					
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Name of Monitoring Firm Hired by Building O	wner (8)	ASCA	A No.	-		of Abatement Co					
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Street Address				1		Address Iontrose Rd					
City, State, Zip Code					City, S	tate, Zip Code					
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Project Manager for Monitoring Firm		Telepho	ne No.		•	one No.	00029				
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Start Date (10)	811	1\0	Date (7.)		rianio	0. 00. 51. 11.07.11.01					
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Facility Closed/Vacated During Entire P Abatement Performed Outside of Normal	eriod of Aba	ntement		Ì	City, S	State, Zip Code					_
Other - Describe:	pm			- [,						
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			and the same of th			→ Non-Exempte	ed (*) and Non-F	hable Pro		e emeni	£
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TO BE ABATED In Facility		ial Staff? (2)	li.e.	surfac	cing, VA	757 (744.7)	(Specify SF or LF)	Removal	Repair	Encapsulato	Enclosure
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City, State Colt Neck, New Jersey				DISDOS	Date		wn, PA				
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CK# 2965

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

CHBO		(Pursuant	to NJAC 8:69 and	1 12:120)) [2 E	C. F				7
Date of Notification (1) Agencles Notified Type Notification Initial Amended Amended Amendent # Emergency (ir justification) DOA DOA Cancellation	ncluding	Street Ad City, Sta	te, Zip Code	San (o CAIF	FACT Tolog	JUL 0 2	3u. 1 20)16		The second secon
Name of Facility Where Abatement is Taking OCC S and Propert Street Address City (5) County (6)	7		Code (7)	The second secon	School (K-Subchapter Other (i.e. petc.) Square Feet Current Use (Pri	12) r 8 (Other private & control # of F	Ploors	B (lings, idg. A	ge	S,
Name of Monitoring Firm Hired by Building O Street Address City, State, Zip Code	wner (8)	ASCN		Ace I Street / 95 Mc	of Abatement Co Insulation Co Address Ontrose Rd ate, Zip Code Neck, New J	intractor (a com a de la companya de la company
Occupancy Status During Abatement (Check		116		732 2 Name o		the same property	License No 00029	D.			gil ligen del passerer del manier
Facility Closed/Vacated During Entire Poly Abatement Performed Outside of Normal Other – Describe: → → → → Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	I Facility Ho			City, St	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure				2	The second secon
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Non Used S Mainte	_	Asbestos Con (i.e. thermal surfa		aterial (ACM) insulation, r, or	(Sp	nount secify or LF)	Removal	Abate Ty Repair	pe _	Enclosure
Name of Registered Waste Hauler		NJDEP W	Sheet Cubic	Yards		Register	bed Landfill	And the second s	The state of the s	And the system of the second s	this is the same of the same and the same of the same
Ace Insulation Co Inc City, State Colt Neck, New Jersey Completed by Bree McGuire	Title Secreta	Hauler ID 12086	No. of Wa		GROW City, Stat	/S	Dai	te	8/1	6	

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

CK# 365

CKH are		(Pu	usuant t	o NJAC	8:60 and	12:120)		7 (0)	E N N	1 6	T	\prod	
Date of Notification (1)] [Name of	Building (Owner/O	perator (2		= 6		0010	1	111	
7/18/16			TH	crst	ate	(00	mercia	21	1601 C	014	4	111	
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DOH justification) DCA Cancellation		- Percent	7	ehor	ah			-					
				ITY INFO				10					
Name of Facility Where Abatement is Takin	g Place (3	i)				1.	Type of Facility						
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Street Address	U					and the same of th	Other (i.e.)	private l	& commercia	d build	ngs.	home	es,
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Mt. (gorel						A CALLES	2000	All September 1	2	- amb)]	Tt	
County (6)			County C		3	1	Current Use (Pr						
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Name of Monitoring Firm Hired by Building	Owner (8)	1	ASCM	No.	3	1	of Abatement Co Ansulation Co		r (9)	V			
Ctract Address						Sireet A		are					
Street Address					1		ontrose Rd						
City, State, Zip Code						City, Sta	ile, Zip Code						
	7.0				Constitution	Colts	Neck, New J	ersey	07722				
Project Manager for Monitoring Firm		į 1	Telephon	e No.	100	Telepho			License N	9.			
							94 1757		00029				
Start Date (10)	Schedul	-1.	npletion L	Date (11)		Name o	of OSHA Monito	Γ					
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Scope of Work (Check All That Apply)								100					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		kenoval Jemoliti					Full Containm Mini-Enclosus		n Negative P	16227	e		
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Asbestos-Containing Material (ACM)		ed Sole			stos Con	taining Ma	aterial (ACM)		Amount	-	Transpar	- F	SES
TO BE ABATED In Facility		todial S		(i.e	surfa	cing, VAT			Specify F or LF)	Removal	Repair	caps	nolo
(13)		(12)			other n	niscellane	ous)	and the same of th		oval	air	Encepsulate	Enclosure
and representations of the second sec	Yes	No	N/A				(6)	W M CE CE		lacepook.		0	*
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Name of Registered Waste Hauler			UDEP W			Yards	Name o	f Regist	ered Landill	Ī			
Ace Insulation Co Inc		4	lauler ID 2086	NO.	of Wa	ste /	GROV	vs					
City, State					Dispos	sal Pate	City, Sta						
Colt Neck, New Jersey					18	5116	Tullyto	wn, P	A				
Completed by	Title		0.00110.00		S	ignature.	1		Da	神	1.		
Bree McGuire	Secr	etary	Treasu	rer	Popular	10	NY			7110	11	0	
ASB-41 (R-06-08)						* Do not	use this form fo	or asbes	tos licensur	е ехеп	pted	activi	ities.

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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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Date of Notification (1) 07/18/16				Building O					K			2 !	1	1 15	7
Agencies Notified Type Notification		3.	Street Ad	ddress IGSLANE) AVE	NUE S	SUITE	E 2		Jl	JL 2	2 1	20	16	14
EPA X Initial Amended Amendment:	#			te, Zip Cod ON, NJ 0					L	ASBES	STOS	CO	NTR	OL 8	
Emergency (in justification) DCA Emergency (in justification) Cancellation	ncluding	14.0		Contact HEIMC	WITZ			L		ephone (-
			FACIL	LITY INFO	RMATI	ON			-					-	
Name of Facility Where Abatement is Taking	Place (3)					Type	of Facility (4	4)						
Street Address	3000						×	School (K-1 Subchapter Other (i.e. p etc.)	8 (Othe			ouildi	ngs,	nome	s,
City (5) BAYONNE, NJ						Square Feet # of Floors					Blo	ig. A	ge		
County (6) HUDSON COUNTY			County ((STATE L	Code (7) JSE ONLY)				ent Use (Prid LTI FAMIL			lished	i)			
Name of Monitoring Firm Hired by Building (Owner (8)		ASCM	No.				atement Cor D PROFE							
Street Address						Street 6 WH		ss DOVE CO	DURT	2					
City, State, Zip Code								ip Code OD, NJ 0	8701			100			
Project Manager for Monitoring Firm			Telephor	ne No.		Teleph 732-6				Licens 1200	e No.				
Start Date (10) 08/01/16	Schedule 08/01/1		npletion l	Date (11)		Name of OSHA Monitor AAA LEAD PROFESSIONALS									
Occupancy Status During Abatement (Chec	50	200				Street Address 6 WHITE DOVE COURT									
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:					_	City, State, Zip Code LAKEWOOD, NJ 08701									
Scope of Work (Check All That Apply)						1840,1990							71.24		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ALTERNATION AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF T	Renova Demolit				×	Mi Gl	III Containme ni-Enclosure ovebag Procon-Exempted	e cedure					÷	
	(0.00)	Locati							7					ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normal d Sole intenar todial S (12)	ly by nce/		os Cont thermal surfa	scription taining N system cing, VA niscellar	//ateria s insul .T, or	_	(5	mount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A											ND .	
BASEMENT						TSI			11	00 LF		Σ			_
	-														
Name of Registered Waste Hauler NEWARK CARTING		H	JDEP W lauler ID 4509	500 Total Cont.	Cubic of Wa 5	Yards ste		Name of IESI	Registe	ered Lan	dfill				
City, State NEWARK, NJ	D					sal Date I/16	1	City, Stat BETHL		ЛРА					
Completed by JOSEPH PERLSTEIN	Title OWNER					Signature Date 07/18/16									

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) 07/15/2016 Mary Fischl Agencies Notified Street Address Type Notification **EPA** Initial ASBESTOS CONTROL & LICENSING City, State, Zip Code × DEP Amended Summit, NJ 07901 DOL Amendment # Emergency (including Name of Contact Telephone Number X DOH iustification) Mary Fischl DCA Cancellation FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) House School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, # of Floors Square Feet Bldg. Age City (5) N/A N/A N/A Summit County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) House Essex Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. D&S Abatement, Inc. N/A Street Address Street Address 11 Rosengren Avenue City, State, Zip Code City, State, Zip Code Totowa, NJ 07512 Telephone No. License No. Project Manager for Monitoring Firm Telephone No. 973-345-8685 01311 Name of OSHA Monitor Start Date (10) Scheduled Completion Date (11) 07/27/2016 07/28/2016 D&S Abatement, Inc. Occupancy Status During Abatement (Check Only One) Street Address 11 Rosengren Avenue Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: occupied Totowa, NJ 07512 Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Renovation Full Containment with Negative Pressure × Demolition Mini-Enclosure ≥160 sf or ≥260 lf Glovebag Procedure 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/ TO BE ABATED (i.e. thermal systems insulation, (Specify Enclosure Removal Repair Custodial Staff? surfacing, VAT, or SF or LF) In Facility (12)other miscellaneous) (13)N/A Yes No pipe insulation 69 LF x garage X NJDEP Waste Cubic Yards Name of Registered Landfill Name of Registered Waste Hauler Hauler ID No. of Waste Waste Management of PA D&S Abatement, Inc. TBD 20996 Disposal Date City, State City, State Tullytown, PA TBD Totowa, NJ Signature Date Completed by Title 07/15/2016 PM Ned Joksimovic

State of New Jersey

Print Form

CK#25214

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

Date of Notification (1)	10/16			Name of Building Owner/Operator (2) Holy Family Catholic Church						1 2	016			
	19/16	-ti	_	Chanal	A aldress	H	oly F	amily Catho	ne Church					
Agencies Notified EPA	Type Notifica	ation		Street	Address			727 Rt 36	ASE	BESTO	100	01.17		
DEP	Initial Amended	i	-	City S	State, Zip C	ode		727 2000		1:0	170.	HVG		
⊠ DOL	Amendm		-	Oity, C	ridio, Elp o		Unio	n Beach, NJ	07735			(4)		
⊠ DOH	☐ Emergen justificat		1	Name	of Contac		O AMO		Telephone Num	ber			-	
☐ DCA	☐ Cancellat	ion				ather Dev	vlin							
			1	FΔC		ORMATION						-	_	
Name of Facility Where	Abatement is 1	Taking Place	(3)	1 //	NEIT IN	ONMATION	·	Type of Facility	(4)					
Name of Facility Where	Holy Fam			hurch	n			School (K-1						
Street Address	1101) 1 4111	11) 044110					-	☐ Subchapter	8 (Other than K-1				1	
	,	727 Rt. 3	6				1	Other (i.e., phomes, etc.)	, private & commercial buildings,					
City (5)								Square Feet	# of Floors	BI	dg. A	ge		
	Union l	Beach, n.	07	735				10000	2		6N	+/-		
County (6)				Cour		7) (STATE		Current Use (P	rior if being demol	shed)				
Mc	nmouth			USE	ONLY)					-				
Name of Monitoring Firm		ding Owner		ASCM	No.	Name of A		ent Contractor (
(8)	MECS		_				Stev	ens Environ	ironmental Services, Inc.					
Street Address						Street Add	dress							
	PO Box	341							30x 322					
City, State, Zip Code		NIT 0051	-			City, State	, Zip C		NIT 00501					
	rosswicks,	NJ 0851:						Allentow	n, NJ 08501				_	
Project Manager for Mo			1	phone		Telephone		9-9688	License Ne.	00493	2			
	eisgarber	Dala advita di C			8-4070	Name of C				1049.	,		_	
Start Date (10)	1	Scheduled C			te (11)	Name of C	JSHA II		rironmental					
8/1/16 Occupancy Status Durin	na Abatamant		9/2/1	.0		Street Add	droce	DD LIIV	Hommental				_	
Facility Closed/Vaca		W (2)		ment		Street Aut	uless	4 Berk	eley Place					
Abatement Performe						City, State	Zin C		· ·					
Other - Describe:						Oity, Otato	, LIP 0		Freehold, NJ 07728					
Scope of Work (Check								220000	Freehold, NJ 07728					
								tainment with Negative Pressure						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		IX Re	enovat emolitio	ion on			/lini-End	olosure og Procedure						
A				240/100					on-Friable Procedu	ıre				
			Locatio							A	bate Typ	ment		
Location		Used	omali Sole	y by		Descrip	otion of			_	1 91		-	
Asbestos-Containing			ntenar ustodia			tos Containi			Amount (Specify	_		E	т	
TO BE ABA		11.000	Staff?		(i.e.,	thermal sys			SF or LF)	Remova	Repair	Encapsulate	Enclosure	
(13)	•		(12)			other misc	ellaneo	ous)	5000 0000000000	ova	oair	sula	nusc	
		Yes	No	N/A						-		te	Ø	
Boiler R	.oom	×			Th	ermal Pip	oe Ins	sulation	120 lf	×				
Boiler R	oom	×				Boiler I	nsula	tion	150 sf	×				
Boiler R		×				Bree	ching	7	40 sf	×				
Bonor K	- Jan	- ~				2.00		-		+-		4		
Name of Registered Wa	aste Hauler		1	JDEP \	Vaste	Cubic Yar	ds	Name of Reg	istered Landfill					
Stevens Environ		vices Inc	. +	lauler ID		of Waste 10 Cl	ГТ		GROWS Las	ndfill				
City; State	incital Sci	, 1003, 1110	<u>- .</u>	184	292	Disposal D	City, State	J TO WIS La.				-		
Oity, Otale	Allentow	m NI					- 1) / late	Morrisville	РΑ				
Completed By	7 LIICIIIO W	Title				9/2/16 // / M				/ Morrisville, PA			-	
Mahlon E. St	evens	200	rojec	t Mar	nager	_//	Y.			7/19	9/16			

ASB-41 MAR 00

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

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Date of Notification (1)	10/15			Name of Building Owner/Operator (2)										
	19/16						Philip J Bov	vers //				_	_	
Agencies Notified	Type Notification			Street	Address		DO D 53	[4	1 41	JU	L 2	7	201	
EPA DEB	Initial		L				PO Box 75	0/ /					2016	
□ DEP ☑ DOL	Amended Amendment #			City, S	tate, Zip C				1	_				
	☐ Emergency (in		7			Tin	ton Falls, NJ		ASB				-	
DOH DCA	justification)			Name	of Contac			Telephon	e Number		JEN	SIN	3	
	Cancellation		-		San	nantha Bowe	rs	_					1	
				FAC	ILITY INF	ORMATION								
Name of Facility Where	Abatement is Takin	g Place	(3)	-			Type of Facility	y (4)					\dashv	
		dentia	0.00				School (K-1	7.00						
Street Address	2001						☐ Subchapter	8 (Other tha	an K-12)					
							Other (i.e.,	private & cor	mmercial	build	ings,			
City (5)							homes, etc	# of Flo	ors	Blo	ig. Ac	10	-	
Oity (5)	Red B	anle 1	NIT				3000	# 01110)	Dic	80-			
County (6)	Ked L	aiik,	INJ	Cour	tu Codo /) (STATE	Current Use (Prior if being demolished)							
	nmouth				ONLY)) (STATE	Current Ose (F	Tiol ii being	delliolisti	su)				
Name of Monitoring Firm		Juman	-,,	SCM	_	Name of Absta	ment Contractor (2)					=	
1.01		Jwner		ASCIVI I	NO.			1.5		T.,,	_			
DD E.	nvironmental		_ -				vens Environ	mental S	ervices	, In	c.		_	
Street Address	4 D 1 1 D1					Street Address		200						
	4 Berkeley Pl	ace						Box 322						
City, State, Zip Code	1 11 277 0	====				City, State, Zip		217.00	501					
	reehold, NJ 0	//28					Allentow	n, NJ 08	501					
Project Manager for Mon			200000000000000000000000000000000000000	hone I	3-5-5	Telephone No.		License						
Dave E	Bunocore		(732	2) 74()-8408	(609) 2	59-9688		00	493			_	
Start Date (10)	Sche	duled C	omplet	on Dat	e (11)	Name of OSHA		46	, pa					
8/1/16		8	8/5/16	5			DB Env	vironmen	tal				_	
Occupancy Status Durin	ng Abatement (Che	ck only	one)			Street Address								
☐ Facility Closed/Vacat	ted During Entire Pe	riod of	Abaten	nent			4 Berk	eley Plac	ce					
☐ Abatement Performe		I Facility	y Hours	3		City, State, Zip Code								
Other - Describe:	8am - 4 pm					Freehold, NJ 07728								
Scope of Work (Check a	all that apply)												=	
T	10.000000						ontainment with Ne	egative Pres	sure					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			novation				nclosure pag Procedure							
		Пъс	ar iolitioi				xempted (*) and N	on-Friable P	rocedure					
		ls L	ocation	n						Α	baten	nent		
			omally	.		_					Тур	е		
Location Asbestos-Containing I			Solely		Ashest	Description of os Containing Ma		Amour	nt			_		
TO BE ABA		Cu	ustodial			thermal systems		(Speci	ify	Z.		Encapsulate	四	
IN Facility	/	1007	Staff? (12)			surfacing, VAT		SF or L	.F)	Remova	Repair	aps	Enclosure	
(13)			(12)			other miscellane	eous)			val	4	Hai	Surg	
		Yes	No	N/A								(G)		
Crawl St	2200	x			Th	ermal Pipe Ir	ngulation	180	lf	×			\neg	
Clawio	Jaco	~				crimar r ipe ii	istitation	100	-	^	-	-	\dashv	
										_	_		-	
Name of Registered Wa	ste Hauler			JDEP V		Cubic Yards	Name of Reg	istered Land	dfill					
Stevens Environmental Services, Inc. Hauler ID No. 18292						of Waste 3 CU		GROW	S Land	fill				
						Disposal Date	City, State	/					=	
						8/5/16 Morrisville, PA								
					Signature//			Date	Λ			=		
	100000		nient	Man	ager	Signature	1/	1,		/19	/16			
Mahlon E. Stevens Project Manager						- ///				11)	10			

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 7:26-2.12) Name of Building Owner/Operator (2 Calpine New Jersey Generation LLC Street Address Notification Type 717 Texas Ave, Suite 1000 () Initial Notification (x) Amended Certification City, State, Zip Code JUL 2 1 2016 () Cancelled Houston, TX 77002-2743 Name of Contact Tel Number Paul Ostberg NTROL & FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) () School (K-12) () Subchapter 8 (other than K-12) (X) Other (i.e. private & commercial bldgs., homes, etc. Sq. Feet 97,850 # of Floors__8__ County Code (7) Bldg. Age 55 (State Use Only) Current Use (prior if being demolished) Power Plant Name of Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. 00073 Brandenburg Industrial Service Company Street Address 2217 Spillman Dr City State, Zip Code Bethlehem Pennsylvania 18015 Telephone Number License Number Telephone Number 00721 856-848-0800 610-691-1800 Name of OSHA Monitor Scheduled Completion Date (11) Brandenburg Industrial Service Company 03/03/17 Street Address Occupancy Status During Abatement (Check only one) (x) Facility Closed/Vacated During Entire Period of Abatement () Abatement Performed Outside of Normal Facility Hours -2217 Spillman Drive City, State, Zip Code Bethlehem, PA 18015 (x) Large Proj. (>160 SF or >260 LF ACM) () SM Proj. (>25<160 SF or >10 <260 LF ACM) () Minor Proj. (<25 SF or <10 LF ACM) (x) Full Containment with Negative Pressure (x) Mini-Enclosure (x) Glovebag Procedure Amount (Specify SF or LF) Abatement Type Is Location Normally Used Description of ACM (i.e. Solely by Maint./Custodial thermal systems insulation. surfacing, VAT, or other Encap Enclose miscell.) Rem. Rep. NO Insulation 80,000 sf

Plant Boilers		×	Fire Brick		24,000	ST		X			
Main Plant		Х	Pipe Insulation	on	12,500	If		X			
Main Plant		X	Transite/Galb	pestos	29,265	sf		×	1		
Main Plant		X	VAT		53,000	sf		X			
Main Plant		X	Flashing/Tar	Paper	64,100	sf		×		1 50	
Main Plant		X	Caulk/Exp Jt		13,570	sf		×			
Pipe Rack		X	Pipe Insulation	on	9,520 1	f		X			
Conveyor		X	Galbestos		8,000 s	sf		X			
Misc Small Out Bldgs		X	Caulk/Exp Jt		33,000	sf		X			
Misc Small Out Bidgs		X	Transite/Galb	pestos	4,450 s	sf		X			
Misc Small Out Bldgs		X	Insulation		2,840 s	sf		X			
Name of Reg. Waste Hauler	NJDEP Wa	ste Haule	er ID#	Cubic Yards	of Waste		Name	of Reg	. Landfill		
Brandenburg Industrial Serv Co	21838			15,000 cy			Waste		gement - 7	Γullytown	
City, State						Disp. Date		10	City, Stat	<u>e</u>	
Bethlehem, PA						TBD			Bethleher	m, PA	

Date of Notification (1)

Calpine New Jersey Generation LLC

Horizon Environmental Group

Project Manager for Monitoring Firm

(x) Scheduled Demo Start 07/11/16

Source of Work (Check all that apply) (x) Demolition () Renovation

Scheduled Demo Completion 09/29/17

Staff? (12)

YES

County (6)

Salem

Agencies Notified

07/18/16

(X) EPA

() DEP

(X) DOL

(X) DOH

() DCA

City (5)

Pennsville

Street Address

PO Box 316

Steve Flanigan

07/25/16

City, State, Zip Code

Thorofare, NJ 08086

Scheduled Start Date (10)

Describe Demolition

Location of Asbestos-

Facility (13)

Plant Boilers

Containing Material (ACM) in

Street Address

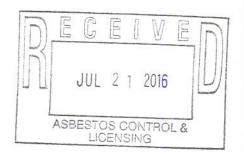
373 N. Broadway

Completed by (Print or Type)	Title			
Sompleted by (Fillit of Type)	<u>Title</u>	Signature	Date	
Jennifer Polzer	Contract Manager	AD Z	07/25/16	

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



State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1) 07/91/2016					3:60 and 12:1		r)							
07/91/2016			Name of	Building (Owner/Opera	tor ((2)		Im	EG	E		<u> </u>	
			Patricia	a and Ja	smine Hav								,,_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Agencies Notified Type Notification			Street A	ddress						JU	L 2	1 20	016	
EPA Initial Amended	20			te, Zip Co					12 2					
DOL Amendment Emergency (wood NJ Contact	07040				I Tal	ASBES lephone N	TOS	COM	ROL	8
DOH justification) DCA Cancellation		10.0			smine Hav	wks	3		1 101	ephone 14	JIII IUCK	14ING	1	
Name of Facility Where Abatement is Taking	Diace /3	1	FACII	LITY INFO	RMATION		Type	e of Facility	(4)			36.0		
N/A	g riace (S	')				- 1.	П	School (K-	5005					
Street Address							×	Subchapte Other (i.e. petc.)	r 8 (Oth			ildings	, home	∋ S,
City (5) Maplewood							Squ 175	are Feet	# 0	f Floors		Bldg. / 68	Age	
County (6) Essex				Code (7) JSE ONLY)		- 1		rent Use (Pri sidential	ior if be	ing demoli	shed)			
Name of Monitoring Firm Hired by Building (CPC Environmental	Owner (8)		ASCN	1 No.				atement Co oint Contr			ation			
Street Address 142 North 13th Street							Addre	ess ley Terrac	ce					
City, State, Zip Code Newark NJ 07107					10000000		tate, iton	Zip Code						
Project Manager for Monitoring Firm Chika Onwukaife			Telephor 973-68	ne No. 38-8056			one 1 372-	No. 2177		License 01238	No.			
Start Date (10) 07/30/2016	Schedule 08/10/2		pletion (Date (11)				SHA Monitor ronmenta		**				
Occupancy Status During Abatement (Chec			150		10000000		Addre	ess 25th Stree	at .					
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: Section where work	al Facility	Hours		ed	City	y, St	tate,	Zip Code k, NY 100						
Scope of Work (Check All That Apply)													-	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	STATE OF THE PARTY	Renova Demoliti				×	M G	ull Containm lini-Enclosur lovebag Pro	e cedure					
		Location	-			لسا		on-Exempte	d (*) an	ia Non-Fria	able Pr	Abat	emen ype	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	d Solel intenar todial S (12)	ly by nce/		Descript tos Containing thermal system surfacing, other misce	ng Ma ems VAT	ateria insu T, or	ilation,	(3	Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
Basement	100	X	1473		Pipe Inst	ulat	tion		3	30 LF	X			
Name of Registered Waste Hauler			JDEP W		Cubic Yard	ls		Name of	Registe	ered Landi	fill			
Newark Carting Inc.		100000	auler ID 506	NO.	of Waste 1			Tullyto		efacility				
City, State Newark NJ 07102					Disposal Da	1	Z	City, Sta Tully		PA				
Completed by Emeka Okeke	Title Presi	ident			Signat	ture	n	des	89		Date 07/91	/2016	3	

		4,			0.00 and			11-1/						711
Date of Notification (1) 07/20/16				of Building ate Palm	Owner/C nolive	perator	(2)		J	UL :	2 1	201	6	
Agencies Notified Type Notification EPA Initial	1			Address River Ro	ad									- I
DEP X Amended Amendmen	t# 1		100000000000000000000000000000000000000	ate, Zip C	ode NJ 088	54			ASBE	STOS LIGE			OL 8	,
□ Emergency justification □ DCA Cancellation)	9	Name o	of Contact				Te	elephone	e Num	ber			
			CONTRACTOR OF		ORMATI	ON		_					_	
Name of Facility Where Abatement is Takin Colgate Palmolive	ng Place ((3)					Type of Facility							
Street Address 909 River Road							School (K Subchapt Other (i.e.	er 8 (Ot				dings,	home	es,
City (5) Piscataway							etc.) Square Feet 800,000	# 3	of Floors	S	300	ildg. A	Age	
County (6) Middlesex				Code (7) USE ONLY	n		Current Use (P	rior if be						
Name of Monitoring Firm Hired by Building Accredited Environmental Techno	Owner (8)	ASCI	M No.			of Abatement Co ervices, LLC							
Street Address 28 N. Pennell Road	9)					Street	Address	7	0 :					
City, State, Zip Code Media, PA 19063						City, St	V. Lincoln Hi tate, Zip Code	gnway	, Suite	500	-			
Project Manager for Monitoring Firm Eric Houseknecht			Telepho			Teleph	n, PA 19341 one No.			se No.	<u>-</u>			
Start Date (10)				91-0114 Date (11)		2000000	372-8884 of OSHA Monito	r	0116	31				
7/25/16 Occupancy Status During Abatement (Chec	7/25/1					EMSI								
☐ Facility Closed (Vacated During Entire	Period of	Ahater	ment				Address Route 130 No	rth						
Abatement Performed Outside of Norr Other – Describe: Hours are 3 pm to	nal Facilit 12 am	y Hour	s				ate, Zip Code aminson, NJ	0807	7					
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demoli				×	Full Containn Mini-Enclosu Glovebag Pro Non-Exempte	re ocedure						
	Is	Locat	ion				Non-Exemple	T ai	Id NOII-I	Habie		12.11	ment	
Location of Asbestos-Containing Material (ACM)		Normal ed Sole			Des	cription	of			-	_	Ту	pe	
TO BE ABATED In Facility (13)	Ma	intena todial ((12)	nce/	Asbes (i.e.	thermal s surfac	aining Ma systems ing, VAT iscellane		(Amount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
Llallera	Yes	No	N/A				85				_		ate	ē
Hallway			X	 	Elbow	Insula	tion	1	10 LF	2	2			
Name of Registered Waste Hauler		N	JDEP W	aste	Cubic Y	'ards	Name of	Registe	ered I an	ndfill				
Freehold Cartage, Inc.	*.	H N	auler ID JDO54	No. 1261 6 4	of Wast	e	Veolia				ndfil	I		
City, State Freehold, NJ					Disposa TBD	al Date	City, Sta Kersey							
Completed by Jack Bally	Title Sr. P	roject	Manag	ger	Sig	nature	4 200	٨		Date 7/20	/16			
ASB-41 (R-06-08)	1					Bo not	use this form fo	ly o			a lasta	oted a	ctiviti	es.

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Name of Notification (1)
EA McMillan Building EA McMillan Building
DEP Amended Amendment # Emergency (including Usaffication) Dead De
DOH
Name of Monitoring Firm Hired by Building Owner (8) Pennoni Associates, Inc. City, State, Zip Code Haddon Heights, NJ 08035 Scheduled Completion Date (11) Size Manager for Monitoring Firm Brian Clark Scheduled Completion Date (11) Size Mater (10) Scheduled Completion Date (11) Size Address Street Add
Street Address 185 Prospect Avenue Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes etc.) Other (i.e. private & commercial buildings, homes etc.) Square Feet
City (5) Princeton County (6) Mercer County (6) Mercer Name of Monitoring Firm Hired by Building Owner (8) Pennoni Associates, Inc. Street Address 515 Grove Street, Suite 1B City, State, Zip Code Haddon Heights, NJ 08035 Project Manager for Monitoring Firm Brian Clark Start Date (10) Scheduled Completion Date (11) Start Date (10) S/8/16 Cocupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other — Describe: Renovation Demolition Is Location Normally Proception of Square Feet # of Floors Square Feet # of Floors Bldg. Age 60 Current Use (Prior if being demolished) Residential Name of Abatement Contractor (9) ecoservices, LLC Street Address 407 West Lincoln Highway, Suite 500 City, State, Zip Code Exton, PA 19341 Telephone No. 484-872-8884 O1161 Name of OSHA Monitor EMSL City, State, Zip Code Cinnaminson, NJ Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other — Describe: Renovation Demolition Residential Name of Abatement with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Type
Princeton 3,150 3 60
Mercer (STATÉ USE ONLY) Residential Name of Monitoring Firm Hired by Building Owner (8) Pennoni Associates, Inc. ASCM No. Name of Abatement Contractor (9) ecoservices, LLC Street Address Street Address 407 West Lincoln Highway, Suite 500 City, State, Zip Code Haddon Heights, NJ 08035 City, State, Zip Code Exton, PA 19341 Project Manager for Monitoring Firm Brian Clark Telephone No. 856-547-0505 Telephone No. 484-872-8884 License No. 01161 Start Date (10) 8/8/16 Scheduled Completion Date (11) 8/19/16 Name of OSHA Monitor EMSL Occupancy Status During Abatement (Check Only One) Street Address 200 Route 130 North City, State, Zip Code Cinnaminson, NJ City, State, Zip Code Cinnaminson, NJ Scope of Work (Check All That Apply) Renovation Demolition Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Location Normally Normally Proceptation of States and Non-Friable Procedure
Pennoni Associates, Inc. Street Address 515 Grove Street, Suite 1B Street Address 407 West Lincoln Highway, Suite 500 City, State, Zip Code Haddon Heights, NJ 08035 Project Manager for Monitoring Firm Brian Clark Start Date (10) 8/8/16 Scheduled Completion Date (11) 8/8/16 Cocupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Start Date (10) 8/8/16 Cocupancy Status During Abatement (Check Only One) Street Address 200 Route 130 North City, State, Zip Code Cinnaminson, NJ Scope of Work (Check All That Apply) Saf or ≥3 If Saf or ≥3 If Saf or ≥260 If Start Date (10) Pemolition Scheduled Completion Date (11) Name of OSHA Monitor EMSL City, State, Zip Code Cinnaminson, NJ Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Type
515 Grove Street, Suite 1B City, State, Zip Code Haddon Heights, NJ 08035 Project Manager for Monitoring Firm Brian Clark Start Date (10) 8/8/16 Cocupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other − Describe: Scope of Work (Check All That Apply) Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Street Address 200 Route 130 North City, State, Zip Code Cinnaminson, NJ Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Norn-Exempted (*) and Non-Friable Procedure Abatement Type
Exton, PA 19341
Brian Clark Start Date (10) 8/8/16 Scheduled Completion Date (11) 8/8/16 Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other − Describe: Scope of Work (Check All That Apply) Scope of Work (Check All That Apply) Sa sf or ≥3 If Scope of Scope of Work (Check All That Apply)
8/8/16 Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other − Describe: Street Address 200 Route 130 North City, State, Zip Code Cinnaminson, NJ Scope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥3 sf or ≥3 If ≥160 sf or ≥260 If Renovation Demolition Street Address 200 Route 130 North City, State, Zip Code Cinnaminson, NJ Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Type
Occupancy Status During Abatement (Check Only One) X
Abatement Performed Outside of Normal Facility Hours Other – Describe: City, State, Zip Code Cinnaminson, NJ
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Renovation Demolition X Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Type
Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Type Type
Is Location Abatement Type Abatement
ocation of Normally Description of
Ashestes Containing Meterial (ACM) Used Solely by
Maintenance/ Custodial Staff? (13) Maintenance/ Custodial Staff? (12) Maintenance/ Custodial Staff? (12) Yes No N/A Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Amount (Specify SF or LF)
Basement - 1st Floor and 2nd Floor X Duct Wrap 500 SF X
Exterior X Exterior Window Siding Caulk 2,030 LF X
Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill
Waste Management of New Jersey Hauler ID No. of Waste 15 GROWS Landfill
City, State Trenton, NJ Disposal Date TBD City, State Morrisville, PA
Completed by Title Signature Date Joseph K. White Project Manager Cospt W. W. To 7/20/16

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) 07 20 16 First Energy Street Address Type of Notification 76 South Street Agencies Notified City, State, Zip Code **EPA** Initial 1 2016 JUL DEP Akron, Ohio 44308 Amended Telephone Number DOH Amendment Name of Contact 1 Emergency w/ justification DOL Jim Halsey ROL & Cancellation ADDEDICO LICENSING FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Street Address 80 PEMBERTON AVENUE Other (I.e., private & commercial 1 bldgs., homes, etc.) County (6) County Code (7) Square Feet # Of Floors **Building Age** City (5) OCEANPORT MONMOUTH Current Use (Prior if being demolished) Telephone Pole Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM NO Environmental Health Investigations NORTHSTAR CONTRACTING GROUP. INC. Street Address Street Address 655 West Shore Trail City, State, Zip Code 32 Williams Parkway City, State, Zip Code Sparta, NJ 07871 Project Mngr. For Monitoring Firm Telephone Number Dino Nappi 212-682-9271 East Hanover, NJ 07036 Sheduled Start Date (10) Sched, Completetion Date (11) Telephone Number License Number _08 08 02 16 973-884-8682 00860 Occupancy Status During Abatement (Check Only 1) Name of OSHA Monitor NORTHSTAR CONTRACTING GROUP, INC. Facility Closed/Vacated During Entire Period of Abatement Street Address Abatement Performed Outside of Normal Facility Hours - Describe: ___ tue-fri 8:30 am to 5;00 pm 32 Williams Parkway City, State, Zip Code V Other - Describe: East Hanover, NJ 07036 Scope of Work (Check All That Apply) Full Containment with Negative Pressure Demolition Renovation >3sf or >3lf Mini - Enclosure Glovebag Procedure ≥160 sf or ≥260 If 1 Non-Exempted (*) and Non-Friable Procedure Location of Is Description of Abatement Type Location Asbestos - Containing R Asbestos Containing E N Normally Material (ACM) Amount R C С Used (I.e., thermal systems (Specify M E TO BE ABATED L P insulation, surfacing, VAT, SF or LF) 0 in Facility Solely 0 or other miscellaneous) V A by Main-(13)S A S tenance/ U R 11 Custodial R Staff (12) YES NO N/A Exterior Telephone Pole Transite Conduit 30 LF Name of Registered Landfill Name of Registered Waste Hauler NJDEP Waste Cubic Hauler ID No. Yards I.E.S.I. NEWARK CARTING 4509 of Waste City, State Disposal City. State NEWARK, NJ Date BETHLEHEM, PA 18105 Completed by (Print or Type) Title Signature Date Steven Stiles Project Manager 07/20/16

ASB-41

Date of Notification (1)	****			Name	of Ruildin	a Chuin	er/Operato	- (5)		JUL	2	1 1	2016	
06/28/2016				Hai	ckensac	k I Ini	er/Operato	Medical Cen	60-					
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D DCA	☐ Cancellatio			1	Haber	•			Teleph	none Nun	aber			
					CILITY IN	FORM	ATION				-20/4			
Name of Facility Where	Abatement is Tak	ng Place	(3)			Corcion	411014	Type of Facility	(4)					
Conklin Building								☐ School (K	2200000					
Street Address								Subchapt	er 8 (Other t	han K-12)			
30 Prospect Aven	ue							Other (i.e.	i.e. private & commercial buildings, ho					nes,
City (5) Hackensack								Square Feet	# of Fl	oors	T	Bldg.	Age	
County (6)								68,657	7	20.750.050	1	1953	-	
and the second s				Count	y Code (7)			Current Use (P	rior if being	demolishe	ed)	4755		
Bergen					E USE ONL	7)		Health care	& Buine	SS				
Name of Monitoring Fire			3)	ASC	OM No		Name	of Abatement Co	ontractor (9)				-	
Omega Environm	ental Services					Links on the second	Deg	mor, Inc.						
280 Huyler Street								Address						
City, State, Zip Code							-	Canal Street						
So. Hackensack,	New Tersey	07606						tate, Zip Code			-		-	
Project Manager for Mon	iltoring Firm	07005		Tolonh	one No.		New	York, NY	10013					
Getser Fajardo			1		489-87	20	200	one No.	Lie	ense No		******		
Start Date (10)	***************************************	Schedu	led Co	(ZUI)	1 Date (11))()		431-0696	10	1150	~			
July 13, 2016		Tune	13 2		. 0010 (11)			of OSHA Monitor						
Occupancy Status Durin	g Abatement (Chec	k Only O	ne)	1017		-		SL Analytica	1, Inc.			-	-	
☐ Facility Closed/Vac	ated During Entire	Perind of	Ahata	mant			0.0000000000000000000000000000000000000							
Abatement Perform Other - Describe:	ed Quiside of Norm	nal Facilit	y Hour	-	111	Y =		West 38th Sti late, Zip Code	reet					
	4	JOHN	1 10	746	3/16 6	UOA	1.18	York, NY 10	010					
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City, State		04509					sal Date	Waste I	Managem	ent Gr	an	dcer	itral	
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