CKH 5250

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

Date of Notification (1) 07/18/2014					Building Owner on Develope		(2)	and the contrastive					
Agencies Notified EPA	Type Notification		11303	Street Ad 320 Md	ddress orris Tpk			JUL 2	2 2 2014				
EPA DEP DOL	Amended Amendment				te, Zip Code Hills, NJ 340	13							255.00
X DOH DCA	Emergency (justification)	including	1000		Contact				Telephone	Number.	_1		
DCA	Cancellation		(100000000000000000000000000000000000000	an Matarese								_
Name of Facility Where	Abatement is Taking	g Place (3))	FACII	LITY INFORMA	HON	Тур	e of Facility (4)		+			
Former United Ref								School (K-12)				
Street Address 35 Koehl Ave					8		×	Subchapter 8 Other (i.e. pri etc.)			ildings,	home	s,
City (5) Union								are Feet 000	# of Floors 1		Bldg. <i>A</i> 50+	Age	
County (6) Union					Code (7) USE ONLY)			rent Use (Prior andoned	if being dem	olished)			
Name of Monitoring Firm	m Hired by Building	Owner (8)		ASCM	1 No.			eatement Control Enterprise					
Street Address						Street 106 0							
City, State, Zip Code					200000		Zip Code rook, NJ 08	812					
Project Manager for Mo	ct Manager for Monitoring Firm				ne No.	Teleph 877-9		No. -9516	Licens 0120				
Start Date (10) 07/28/14		Schedule 08/28/1		pletion	Date (11)			SHA Monitor Enterprise	Corp				
Occupancy Status Durin	ng Abatement (Ched	ck Only On	ie)		- 1133WW 10 10 10 10 20	Street		7.7.7.1.				# .TFC760	
Facility Closed/Var Abatement Perform Other – Describe:	cated During Entire med Outside of Norn	Period of A nal Facility	Abatem Hours	ent			tate,	Zip Code rook, NJ 08	812	+		_	
Scope of Work (Check						Gree	ט ווי	100K, 140 00	012				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	, al , mat , app.y)		Renova Demoliti			, x	_ N	ull Containme fini-Enclosure Glovebag Proce Ion-Exempted	edure			re A	Lett
		le	Locati	on				VOIT-Exempled	() and redir i	TIADIC I	Abat	emen	,, ,
Locatio	on of	1	Vormali	ly		Description	of			_	T	уре Т	
Asbestos-Containin <u>TO BE Al</u> In Fac (13	g Material (ACM) BATED cility	Ma	d Sole intenar todial S (12)	nce/	su	ontaining N nal system rfacing, VA er miscellar	s ins	ulation,	Amount (Specify SF or LF)	Kemoval	Repair	Encapsulate	Enclosure
		Yes	No	N/A		0114011.11	1-		40.05		-	-	
Warehouse (on t				X		2"x12" ti			40 SF	X	-	-	
	Warehouse					9"x9" VA	3466		850 SF	X	+		
Roo	Roof					Flashin	g		500 SF	X	+		
And the second control of the second control	lame of Registered Waste Hauler reehold Cartage Inc				No. of \	bic Yards Naste		Marian Maria	Registered La				
City, State	y, State					posal Date		City, State					
Freehold, NJ Completed by		Title		.)	IB	Signatur	/			Date			
Eli Brito		100000000000000000000000000000000000000	mana	ager		1	1	re	2	07/18	3/14		

ASB-41 JUN 95 NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Check #:5993

Friable Initial Notification Check #:5993

									2 <u>20</u>			-		
Date of Notification	on (1)	I	Name	of B	uild	ing (Owner/Operato	r (2)					
0 7 / 1		4	Mou	ntain	side	Scho	ool District			•		ليد		
Agencies Notified		The second second second	Stre	et Ac	dres	S			· ·	0 - 0011				
[]EPA		1	149	7 Wo	odac	cres D	Orive		JUL	2 2 2014	10.3	لِـــّـ		
(X) DEP	[X]Initia Notifi	cation	City	. St	ate,	Zip	Code					1		
	(]Amende		Mou	ıntair	side	NJ'C	07092				1.			_
[X] DOL	Notifi	cation		of					Teleph	one Number				
[X] DOH	[]Cance	llation	Dr	Nanc	v Lu	barsk	ov							_
[X]DCA			Di.				FORMATION							
Name of Facility W	No.	ent is Ta	king l				ORGETTON	Ty	pe of Facilit	y (4)		,		75%
Name of Facility W	inere Abacem	ent 15 1-							X School	tar A (Other	r tha	an K-	12)	
Deerfield School									P 1844 /	i a nrival	e &	CORR		
Street Address							1	Sa	cial bu	of Floors	Blag	g. Ag	je	
302 Central Avenue)					Carta	ty Code (7)		EO 000	2		50		_
City (5)		County	(6)			(STA	TE USE ONLY)	Cu	rrent Use (Pr	ior if bein	g der	mo11:		
Mountainside, NJ 0	7092	Union					Name of Abote	S	chool t Contractor	(9)				-
Name of Monitoring	g Firm Hired	by Build	ling	ASCM	No.	- 11								
CONTRACTOR CONTRACTOR	Inc			0057			Four Strong B	Build	lers, Inc.					
Ahera Consultants, Street Address	1110.						Street Addres	SS						
P.O. Box 385		A					180 Sargeant	Av	enue					_
City. State. Zip	Code													
Oceanville, NJ 082	31		M-1X		Mumb		Clifton, NJ 07	mbe	3-1935 r	Licens	se Nu	mper		
Oceanville, NJ 082	or Monitori	ng Firm	LeTebi	none.	ACTURES.	er				00807				
John Smoyer		Sched.Com	6096	552-1	833	III	973-614-037	Mo	nitor	0000	•			
Scheduled Start D							- 0	D:I.	doro Inc					
0 7 / 1 9 / Month / Day / Occupancy Status	Year	Month /	Day	1/1-3	ear		Four Strong E	SS	ders, inc.					
Occupancy Status (X) Facility Clo	During Abat	During E	ntire	Peri	iod		180 Sargean		/enue					
of Abatement	t Samued Out	side of N	lormal	Fac	11113	y	City, State.	Zi	p Code					
Hours - Desc	cribe:			. 202040		-	Cliffon NII O	701	3					
[]Other - Desc							Clifton, NJ 07				D			-
Scope of Work (C		rc abbrA)		Reno		on	CVIMit	m1 -F	Containment wi	ith Negative	Pre	SSUL	_	
[]Demol [X]>3 sf	or >3 If		(~)	Keno	A G C T .	J.,	rvici.	OVA	pag Procedure	ure				
[]Σ160	sf or >260	Lf									Abat	emer	t Ty	pe
				Is atio			Descript	ion	of		R		E	N
	ation of s-Containing	9	t	mall Jsed			Asbestos-Com Material	nta.	ining	Amount (Specify	E	R E	C	I
Mater	isl (ACM) E ABATED	- 81	by	olely Main	-		(i.e., therman moulation, su	1 5	vstems	SF or LF)	V	PA	P	5
	acility (13)		Cus	nance	al	11	or other mi	sce	llaneous)		A L	R	L	S
2	(15)		St:	aff()	N/A					2015	V	-		E
8 Bathrooms				X		Pipe	Insulation			80 LF		<u> </u>		\vdash
o Danie Office											-	-	_	+
7			1								_	-	-	+
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Name of Register	red Waste Ha	uler	N	JDEP	Wasi	Le No	Cubic Yards of Waste		Name of Regis	stered Landi	111			
				2609					G.R.O.W.S., I	nc.				
Four Strong Build	ders, Inc.			2000			Disposal Da	te	City. State					
- W	8)								Tullytown, PA	C .	Water Control		2012/09/20	
Clifton, NJ Completed By (P	rist or Tune	Title					Signat	ure	1		I	Date		
ALLES				mintre	nto-		135	1	11	ر	}-	7/18/	14	
Bilyana Kulakov	ska	Office	Admi	nistra	alOf									_

07-11-'14 10:46 FROM-Four Strong Builders 9736140107

T-330 P0002/0005 F-638

6431-NJ

NOTIFICATION OF ASSESTOS ASSESSMENT (Pursuant to NJAC 8:60-7 and 12:120-7)

Emergency Friable Notification Check #: 5988

Jate of Motification	- 77		PYLI	Tat	Bush	ding	Duher/	Operator	(2	5)		ī			-
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(X) DEP		l.	For	t Led	r. NJ	0702	4	7.0		1	-	7	1		
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[]DCA	[]Concol:	,stion	Ma	ria /	Jack	DeNi	ohilo						\perp		_
							POPURA	TON			VOONA	1	+		-
Name of Localpad A	here Abatemi	At is Te	eres.	P10=	e (3)			TY	WAVER	ABBBOA	ED.	1.		
For Lee School No.	4								Total Total	[]Other [1.0. 9ri 11dings.	ASES #	don etc	met-	_
1193 Anderson Ave	nue		785			1754The	VV Cor	G (7)	-	ED 000	2		50		_
City (S)		County	(0)			(STA	TE USI	E ONLY)		PERT USE (PE	ior if be	ille de	M\$11	snea	ř
Fort Lee, NJ 07024		Berger	1		No.	<u></u>	Rome	DE ABALON	S.	chaol	(9)		_		_
Name of Monitoring	ATZW MTLOQ	PA BATTE	ıng	ABO	1 200.	- 11	protect to the contract of the								
Westchester Enviro	nmental, LLC			000	127		FOUL	Strong Bu		era, Inc.		-			_
307 North Walnut S	troat						180 8	argeant /	Ave	nue					_
City, State. Zip	Zode "						Participant	State.							
West Chester, PA 1	9380	- W.S. Brein, 172	'eles	A STATE A	2013	50.E	Clifto	n, NJ 070	173 661	1935	Lie	ente N	iw se		_
部 春 。	DE MABILALTUR	0.00	310-4					314-0377			800	07			
Matt Abraham		hed . Co	leti	on D	are.	Approximation and	NAME OF	of OSNA	Hor	TIOF					
Occupancy Status	1 4 1 1 Test	O 71/1	117	1/11	TARE ONE	1	Four	Strong B	ullo	lers, Inc.					
(M) Facility Clo	pad/vacated	During El	nt Lro	Pes	1od	- 1	180 5	Sargeant	Av	enue					
gf Abstement Pe	rformed Outs					4	CIST	State.	Zı	Code					
Hours - Desc	Eips:					= 1	Clifto	n, NJ 070	013	·					
Scope of Work (Ch	SER ALL that	abbia)						[]Full	. C	entalement w	Leh Negati	ve Pro	12 6 41	.0	•
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Asbestos	-Containing		9	Dred Club			THE.	terial (1	Amount Speek 0; SP or	F 080	2	CAR	OF COUNTE
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Various Classroof			TX							raip & curt	28 each	$\bot X$		<u></u>	_
Various Classroom			X			Pipe	lusnja	tion tent/	A4 L8	ip & out	50 LF		-	-	
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NAME OF REGISSES	20 MURIE MON	195			r ID	No.	of Bi	TATUS ISTO							
Four Strong Build	ers, Inc.			260	9		DLAP	SEAL DAKE		G.R.O.W.S., II	nu			_	
CETY. MERCO	· ·	17					1			Tullytown, PA					
Clifton, NJ	Int or Type!	LILETS	-		_			Righter		77-			ote		
Nick Zivkovic	nanaritati sata atau i sii a - a - a - a - a - a - a - a - a - a	Preside	ent					ace	حع	2	4		7/11/	14	
AB-01									253					G.A	667

NO CK

ETS JOB # 4243/14							MENDN	
Date of Notification (1) 7/18/14		Name of THE PC	Building Ow ORT AUTHO	ner / Operator ORITY OF NE	(2) EW YC	RK & NEW	JERSE	7 22 PM 2 Pm
Agencies Notified Type Notification EPA		241 ERI	E STREET	, ROOM 236				. "s
□ DEP ☑ Initial Notifi ☑ DOL ☐ Amended Notifi		JERSE'	te & Zip Cod Y CITY, NJ					
DOH Cancellation	n	Name of MR. RA	Contact LPH CAME	PIONE				Telenhone Number
		FACI	LITY INFO	RMATION	352,110,1			
Name of Facility Where Abatement is	aking Place	(3)		Type of Facilit	y (4)			
ALASKA AIRLINES - TERMINAL TICKETING MACHINES	A - PASSE	NGER S	ELF	School (K				
Street Address	NIAL AIDD	ODT		Subchapt	er 8 (O	ther than K-1	2) cial buildin	ngs, homes, etc.
NEWARK LIBERTY INTERNATIO	NAL AIRPO	JRI		Other (i.e Square Feet		# of Floors		Bldg. Age
3 BREWSTER ROAD	ity (6)	County Cod	de (7)	1.2 MIL	1	2		50+
City (5) Cour NEWARK ESS	10,000,000	odiny oo	uc (/)	Current Use (I		being demolis	shed)	
Name of Monitoring Firm Hired by Buil CARDNO ATC	ding Owner (8)	ASCM No.	Name of Abat ETS CONTR)	
Street Address 104 E. 25TH STREET - 10 TH FLOO	 OR			Street Addres	S			
City, State & Zip Code NEW YORK 10010				City, State & Z BROOKLYN				
Project Manager for Monitoring Firm PATRICK SISK		lephone No 2-353-828		Telephone Nu 718-706-630			License N	Number 00511
	luled Comple 10/3	etion Date 6	(11)	Name of OSH TESTOR TE		itor		
Occupancy Status During Abatement (Facility Closed/Vacated During	Check only of Entire Perio	one) od of Abate	ement	Street Addres 10 59 JACK		AVENUE		
Abatement Performed Outside Describe: MONDAY - FRII	of Normal Fa	acility Hou	rs -	City, State & Z			01	
Other - Describe:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
Scope of Work (Check all that apply) ☐ Demolition ☐ Large Project ☐ Quantity is ≥ 3 SF or ≥ 3 LF A				∭ Mi □ GI	ni-Encl ovebag	ainment with osure Procedure	Negative	Pressure
Quantity is ≥ 160 SF or ≥ 260		la Lagation		Description	her:		Amount	Abatement Type
Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)	No Ma	Is Location ormally Us Solely by aintenance ustodial Sta (12)	e or (aff? ins	Asbestos-Coni Material (A0 (i.e., thermal sy sulation, surface r other miscella	taining CM) ystems ting, VA	Squa Lin	Specify are Feet o ear Feet)	(Specify: Removal,
GROUND FL TERMINAL A - PASSENGER SELF TICKETING MACHINES		NO		FIREPROO	FING		12 SF	MINI ENCLOSURE
Name of Registered Waste Hauler	NJ		te Hauler ID 1	Cu. Yds	. of Wa	ste Nam	e of Regis	stered Landfill NTERPRISES, INC.
TRI-STATE TRANSFER City, State 1199 RANDALL AVENUE, BRON	X, NY 1047		A-456	Disposa		City,	State MINER	VA ROAD,
, , , , , , , , , , , , , , , , , , , ,						/ WA	YNESBU	RG, OH 44688
Completed By (Print or Type) Richie Smith	Title Project E	xecutive		Signatui	re	AT,	//	Date 7/18/14

State of New Jersey

Check # 10310

Date of Notification (1)			1	Name of	Building Own	ner/Operator	(2)		171	+			-
Jul	y 18, 2014		P	rism Ca	apitol Part	ners, LLC							
Agencies Notified	Type Notification		5	Street Ad	dress		981	4 JUL 22	PM	3: 5	7		
⊠ EPA	☐ Initial		50	0 Grand	d Avenue		£91	7	4 14				
DEP	Amended		(City, Stat	e, Zip Code			ar i s	7-2,	88			
DOL	Amendment Emergency (- E	nglewo	od, NJ 07	631		2.7	-				
DOH	justification)	morading	1	Name of	Contact			Telepho	one Nun	nber			
☐ DCA	Cancellation		0	wner				_ A		,			
Alama of Facility VAII-	Ab at a series Table	- Diago (2)		FACIL	ITY INFOR	MATION	Type of Facility	(4)	-				-
Name of Facility Where	Abatement is Takin	g Place (3)						70.5					
Building							School (K-	·12) er 8 (Other th	an K-12	Ŋ.			
Street Address								private & co			lings,	home	s,
41 Slater							etc.)	1 # (5)		T 5	I-I- A		
City (5)							Square Feet	# of Flo	ors	B	ldg. A	ge	
Elmwood Park, NJ							0 (11) (5)						
County (6)				County C (STATE U	ode (1) SE ONLY) _		Current Use (Pr	110000000000000000000000000000000000000		iea)			
Bergen		(0)			257		-6.85-4		nown				
Name of Monitoring Fire	n Hired by Building	Owner (8)		ASCM	No.		of Abatement Co						
AET				0021			1ACK Group,	LLC.					
Street Address							Address	o== 000					
222 Church Road		10					Kings HWY N	, STE 209					
City, State, Zip Code						388	State, Zip Code						
Bridgewater, NJ 088					N		y Hill, NJ 0803		cense N		- CHINA		
	ct Manager for Monitoring Firm				ie No.	6.000.000.000	hone No.			0.			
Eric Houseknecht		0-11-1-	1.70	08-296	75 25 25 25 25	1	759 - MACK of OSHA Monito	1,016,03	781		-10		
Start Date (10)		Schedule				100000000000000000000000000000000000000							
8-5-1		1.0-1.0-		9-30-14			ACK Group, Address	LLC.	-				
Occupancy Status Duri						K100450000	1000 2200 AVENUE OV	OTE OOG					
Facility Closed/Va	cated During Entire	Period of A	batem	nent			Kings HWY N	I, STE 209					
Other - Describe:	ned Outside of Norn	nai Facility	nours	10 C			State, Zip Code	0.4					
Cooperations (Charle	All That Applie			15 8 11		Cherr	y Hill, NJ 080	34	-			-77	
Scope of Work (Check	All That Apply)						П						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova				Full Contains Mini-Enclosu		gative F	ressu	re		
			CITIOIIL	1011			Glovebag Pr	ocedure		we			
							Non-Exempte	ed (*) and Nor	n-Friable	Proce			
		10170	Locati	1800000								ement pe	
Location		154	lormal d Sole	0500 H		Descriptio					Τ,		П
Asbestos-Containin TO BE A			intena			Containing ermal system	Material (ACM)	Amo (Spe		70		En	m
In Fac		Cust	odial S	Staff?		surfacing, V	AT, or	SF or		em	Rep	caps	nclo
(13)		(12)		C	ther miscella	neous)			Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A						-		(D)	
Indi	d a	100	Ÿ	T Tank		transite pa	nole	2,950) c/f	X			
Insi		-	\leftrightarrow							$+ \bigcirc$	+		
_".	_#_				fl	loor tile & r	mastic	400	S/T	\triangle	-		
*	**												
Name of Registered Waste Hauler				J DEP W	0.00	Cubic Yards	Name o	of Registered	Landfill			-	
1				lauler ID		of Waste			, D	000	1110	,	0-
Newark Carting				450		33.5		erland Co.	BFI/	GRC	WS	IR	KF
City, State						Disposal Dat				_000	311 (c)	D 4	
Newark, NJ	HOSE DANIE COMME TO THE PROPERTY.					9-30-1	4 Newbu	irg / Imper			ılle,	PA_	
Completed by		Title	•100.0.000+0.•0			Signatu	1///		1	ate			
Mike Cooper		Presid	lent				-		1/1	18/14			

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



CK# 0743

Date of Notification (1) 7-18-2014						Building O Manage			(2)		581	1 111 2	9 5) [d]	3: 5	7
Agencies Notified		Nothication		1:	Street Ad						79 17	 	<u>/_ '</u>		<u> </u>	1
		initial Amended Amendment #		7	City, State	e, Zio Coo ton, NJ	le				7 4	9. 1 1				
₩ DOH	-	Emergency (li justification) Cancellation	ncluding	T	Vame of S John		-		-		Tele	phone Nun	ber			
<u> </u>	llend	Controller				ITY INFO	RMATI	ON			١					\dashv
Name of Facility Where Al Brandywyne East Al Street Address	pt. \$	31A	Place (3)							of Facility (4 School (K-12 Subchapter Other (I.e. In	2) 8 (Othe	er than K-12 commercia	i)	Sene?	home	
Brandywyne East C	OUrt									tc.)						۵,
City (5) Brielle, NJ										v Feet		Floats	5	dg. A	ge	
County (5) Monmouth	5				County C (STATE U	ode (7) ISE DNLY)	_		Apa	rtment Ur	nit	ng demolish	ed)		100.00	
Name of Monitoring Firm n/a	Hire	by Building C	Wher (8)		ASOM n/a	No.		2500		tement Con lanageme	3.0	(9) orporation	ř			
Street Address									Addres		•					
City, State, Zip Code n/a									and the second second second	p Code ark, NJ 07	035					
	ct Manager for Monitoring Firm				Telephor n/a	ne No.			hone No			License N 01193	Q.	•		•
Start Date (10) 7-19-2014			Schedule			Date (11)		1000000		A Monitor	ent Co	rporation	N			
Occupancy Status During	Aba	tement (Chec					_	200	Addres		J. 14 (J.	, portuoi	_	- marus		<u>.</u>
Facility Closed/Vaca Abatement Parlame Other – Describe: 9	ited [ed Or	Ouring Entire F	eriod of A	baten				City,	A CONTRACTOR	ane Ip Code ark, NJ 01	7036					WE .
Scope of Work (Check Al	II The	t Apply)		_				1					-		-	-
				emoli			,	- Bie	Mir	ii-Enclosure	edure	Negative F			e	
	S130			Locati								77		Abate	mon	
Location Asbestos-Containing TO BE ABA In Facili (13)	Man		Used Mail	1 Sole ntens	ly by		az Con therma surfa	scription deining l I system iding, V miscella	Vlaterial is insula AT, or		(mount Specify or LF)	Removel	Repair	Encapadale	Enclosurs
Throughout A	part	ment	×					VAT			5	32 SF	x			
•	_															
Name of Registered Was	tm W-	artle.w		T N	JDEP W	lacta	العاد بش	Yards		Name of	Pariet	ered Landfil				
	Loznica Managment Corporation					No.	of Wa	sata				Landfill				
City, State	lly, State Incoln Park, NJ 07035							sal Dat	9	City, Stat		A 19067				
Completed by			Title			1100		Signatu	re /	<u>.</u>		Di	ate	044		
E, Cirovic	_		Secr	atary					, 1	ari	N	1	-18-2	U14	_	

2814 JUL 22 PM 3: 53	}	NOT	PIFICATI	el wom to ende Tezega to mo 19:8 dalm of in	DO BEAT	EMENT		DO	<u> </u>	III	DA
Date of Notification (1) 07/17/14 CK# 3178 \$200 Agencies Notifies	i.		Name Lone Street	e of Building Own e Eagle Prope Address Baldwin Road	er/Operato	2 (2)		J. 64			1
Amenda	ent#	ng	Para	State, Zip Code lippany, New of Contact	Jersey 0	7054	_ <u> </u>	KIVE	? A	PP	<u> </u>
DCA Cancella	Hon.		Ron	DeBisse			Talanhor	E Numbe	-		
Name of Facility Where Absternant is Te	Kind Place	(3)	FA	CILITY INFORM	MOITA			-		_	
Street Address 118 Baldwin Road City (6)						Stc.)	7 52	i n K-12) merdal bi	uikling	ga. ho	Mes,
Parsippany, New Jersey 07054 County (6)	_1					Square Feet 5,000	# of Floor	8		. Aga	
Morris			County	Code (7)		Current Use (Pri		nolahad)	50÷		
Name of Monitoring Firm Hired by Buildin Environmental Design Inc.	S CVnsr(8)		M No.	Namo	of Abatement Cor					
Street Address 5434 King Avenue, Suite 101	-				Street	Corporation Address			_		
City. State, Zip Code Pennsauken, New Jarsey 08109					City, 8	VicBride Avenu					
Project Manager for Montioring Firm Tom Pruno			Teleph	one No. 16-9518	Teleph	one No.		7424 60 No.			
Start Date (10) 07/21/14	Schedu 07/28	ded Co		Date (11)	Name	25-8400 of OSHA Monitor	0110	14			
Occupancy Status During Abatament (Ch	nok Only C	114			1881	Environmental	Labs				
Facility Closed/Vacated During Emire Abatement Performed Outside of No Cities - Describe: 7AM Start		300 M	ment 's		2333	Address Route 22 Wes als, Zip Code	1				
Scope of Work (Check All That Apply)					Unlor	. New Jersey	07083				
23 of pra3 if 2150 of præ280 if		Renovi Demoi	stion flon		■	Full Containme Mini-Enclosure Glovebag Proce Non-Exampled	·				
Location of		Local Name	Ny .				C) and HOH-	TROPE PAG	Abal	eman	t
Asbestos-Conteining Material (ACM) 10 BE ABATED In Facility (13)	Me	ed Sole lintena tedis! (12)	Nos/ Staff?	(i.e. therms	escription of Italiang Ma Il systems Iolog, VAT Miscellane	iterial (ACM)	Amount (Specify SF or LF)	Remenal	Rapair	Encapsulate	Endosure
	Yes	No	N/A			245)		100	3.	Surfato	ame
Interior Space # 128		X		Double la	Yar VAT	& Mastic	2,800 SF	×	-	-	\vdash
Exterior Space # 128	-	X			ow Glaz		100 LF	- X	_	-	
Interior Space # 128	-	X		Sheetro	ck/comp	pound	3,120 SF				\vdash
Name of Registered Weste Hauter		IN	JDEP W	asta Louis		_ '				_	
ilich Corporation		H	auler 10 i 3724	No. of Wa	Yards ste		gistered Land. S Landfill	र्जा।			7
illy, State Voodland Park, New Jersey 07424	2				sal Data	City, State					\dashv
completed by atlana Kalenikova	Title Vice i	Presid	dent			RC / RC	Pennsyl	Date 07/17/1			\dashv

^{*} Do not use this form for asbestes ficensure exempted activities.

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

HAGE 10	F2		(Pu	rsuant t	o NJAC 8	:60 an	d 12:120))	Oth	20	WI	30)4	67		
Date of Notification (1) 7/18/14					Building C ha LLC	wner/	Operator	(2)	2814 JU	11 27	DW	2.5	9	1/_		
Agencies Notified T	ype Notification		1 5	Street Ac		Α		ad Flav			_ +-++		ů.			
X EPA	- C. C. (10.10) (10.10)				igle Roc		enue, zi	10 100	or		50.00	ar) [.			_
DEP DOL	Amended Amendment				nd, NJ		8				ENSI	KC.				
⊠ DOH □ DCA	Emergency (justification) Cancellation	including			Contact czepans	ki				Tolo	nhone l	Mumher				\neg
					ITY INFO		ION									
Name of Facility Where Aba	tement is Takin	g Place (3)					Туре	of Facility (4))						
Street Address							0.5500000000000000000000000000000000000		School (K-12 Subchapter 8		r than k	(-12)				
165 Eagle Rock Aven	ue					20.00		X C	other (i.e. pri					15233		s,
City (5) Roseland								Squar	e Feet	# of 2	Floors		BI0	dg. A	ge	
County (6) Essex					Code (7) ISE ONLY)	_		Currer	nt Use (Prior	if beir	ng demo	olished)				
Name of Monitoring Firm Hi	red by Building	Owner (8)		ASCM	l No.				ement Cont onmental			LC				
Street Address							100000000000000000000000000000000000000	Addres Box 48	s 3, 4 E Ga	ite Dr	ive					
City, State, Zip Code								State, Zi	p Code NJ 0741	Ω						
Project Manager for Monito	ring Firm			Telephor	ne No			none No		<u>.</u> Т	Licens	e No.	_			
1 Toject Manager for Monito	ing i iiii			сюрно	10 110.			583-8			703					
Start Date (10) 8/6/14		Schedule 9/6/14	ed Com	pletion [Date (11)		Name	of OSH	IA Monitor						C	
Occupancy Status During A	batement (Chec	k Only Or	ne)				Street	Addres	S	10	_					
Facility Closed/Vacate Abatement Performed Other – Describe:						_	City, S	State, Zi	p Code							
Scope of Work (Check All T	hat Apply)															
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			Renovat Demoliti					Min	Containme i-Enclosure vebag Proce		Negativ	ve Press	sure	Э		
i je digita								Nor	n-Exempted	(*) and	Non-F	riable P	roc	edure	9	
			Location										1	Abate Ty	ment	
Location of Asbestos-Containing M		100,000	Normall ed Solel	*	Aches	D 200	escription ntaining I	n of Material	(ACM)	Δ	mount					
TO BE ABAT In Facility (13)			intenar todial S (12)			therm surf	al system acing, V/ miscella	is insula AT, or		(S	pecify or LF)	Zenova		Repair	Encapsulate	Enclosure
		Yes	No	N/A											te	(D
roof				х		rc	of seal	ant		16	80 SF	х				
exterior				х			siding	45		32	00 SF	x				
basemen	t			х		pat	ch mate	erials		2	5 SF	х				
basemen	t			х		pip	e insula	ation		1	10 LF	x				
Name of Registered Waste	Name of Registered Waste Hauler						c Yards aste		Name of F		red Lar	ndfill		-	e El	
Freehold Cartage	No. 152-143					100000			GROWS					T.	2	
City, State Freehold, NJ						Disp TBD	osal Date)	9	City, State Morrisvi		A					
Completed by A. Scott Higgins		Title Pres	ident				Signatur	· M		_		Date 7/18/	14			

tAGE 2	of 2		(Pu	ırsuant t	to NJAC 8	3:60 and	12:120)) (100	1 1	30	34	7		
Date of Notification (1) 7/18/14	<u> </u>				Building (Owner/Op	erator	(2) 2014 JUL 2	2 P		-				
Agencies Notified	Type Notification			Street Ad 161 Ea		k Aven	ue, 2	nd Floor		JA 1 Å					
EPA DEP DOL	Initial Amended Amendment				te, Zip Co ınd, NJ			& LI	CEN.	ING	<u> </u>				
DOH DCA	Emergency (justification) Cancellation	including			Contact	ski			Tel	enhone N	diimha	-			
	1-			FACIL	LITY INFO	RMATIC	N			-					
Name of Facility When	e Abatement is Taking	g Place (3)			9		Type of Facility						i r	
Street Address 165 Eagle Rock A	venue							Subchapte Other (i.e. etc.)				uild	ings,	home	es,
City (5) Roseland								Square Feet	# 0	f Floors		BI 60	dg. A	ge	
County (6) Essex				County C	Code (7) JSE ONLY)			Current Use (Pri	or if bei	ng demo	lished)			
Name of Monitoring Fi	rm Hired by Building (Owner (8)		ASCM	No.			of Abatement Co Environmenta			LC				-
Street Address		-						Address Box 483, 4 E G	ate D	rive					
City, State, Zip Code								State, Zip Code wood, NJ 074	18						
Project Manager for M	ect Manager for Monitoring Firm				ne No.	T		none No. 583-8500		License	e No.				
Start Date (10) 8/6/14		Schedule 9/6/14	ed Com	pletion [Date (11)		Name	of OSHA Monitor							
Occupancy Status Dur	ing Abatement (Chec	k Only Or	ne)				Street	Address							
	acated During Entire F med Outside of Norm					_	City, S	State, Zip Code					•		
Scope of Work (Check ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	2.0 52		Renova Demoliti					Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure			Proc	edur		
Locati	on of	1	Locati	у		Des	cription	n of				- 89		ment pe	
Asbestos-Containin TO BE A In Fa (13	BATED	Ma Cus	id Sole intenar todial S (12)	nce/ staff?			system ing, VA		(mount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
Logfo room 9	hathroom	Yes	No	N/A X		lin	oleur		2	50 SF	-				
1	safe room & bathroom 2nd floor				lin			inter top		50 SF	x	-	_		
				X											
- <u> </u>															
Name of Registered Waste Hauler Freehold Cartage				JDEP W auler ID 5959		Cubic Y of Wast		Name of GROW	v.=0	ered Land	dfill				
City, State Freehold, NJ						Disposa TBD	al Date	City, Sta Morris		Α			0:		
Completed by A. Scott Higgins		Title Presi	dent			Si	gnatur		,		Date 7/18	/14	6.000 69		

State of New Jersey NOTIFICATION OF ASBESTOS A (Pursuant to NJAC 8:60 an

S ABATEMENT nd 12:120)	Check 1304	P
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			(Pu	ırsuant t	to NJAC 8	:60 and	1 12:120))	CL	est	11	300	1	P	# 'p	
Date of Notification (1 7/18/14)			Name of Rashid	Building C Khan	Owner/C	perator	(2)		20	14 JU	22) M	2 -	
Agencies Notified	Type Notification			Street Ad 21 Vist	ddress a Way								f	ii ,	ji 	Z
DEP DOL	Amended Amendment				te, Zip Coo field, NJ					***	& [1(2)	<u>.</u>	un IN()	Ti.
DOH DCA	Emergency (i justification) Cancellation	ncluding		Name of Sherri	Contact Natko					Tele	nhone !	Virimp3l				
Name of Facility Who	re Abatement is Taking	Place (3)		FACIL	LITY INFO	RMATI	ON	Tyr	oe of Facility (4	1)			_			_
reality vine	TO Abatement is Taking	11 1800 (0)							School (K-1:							
Street Address 21 Vista Way						***		×	Subchapter Other (i.e. p etc.)	8 (Othe			ıildi	ings,	home	es,
City (5) Springfield								Squ 23	uare Feet	# of 2	Floors		BI6	dg. A	ge	
County (6) Essex				County C	Code (7) JSE ONLY)			Cui	rrent Use (Pric	or if bein	g demo	olished)			2.	
Name of Monitoring F	irm Hired by Building C	wner (8)		ASCM	l No.				batement Con vironmental			LC			34	
Street Address							Street PO E		ress 483, 4 E G	ate Dr	ive					
City, State, Zip Code									, Zip Code od, NJ 074	18						
Project Manager for M	Monitoring Firm		T	Telephor	ne No.		Teleph 973-		No. -8500		Licens 703	e No.	100-0			-
Start Date (10) 7/31/14		Scheduled 9/30/14	d Com	pletion [Date (11)		Name	of O	SHA Monitor							
Occupancy Status Du	ring Abatement (Chec	c Only One	2)				Street	Add	ress						Try	
Abatement Perfo	/acated During Entire F ormed Outside of Norm e:					_	City, S	State	, Zip Code				_			
Scope of Work (Chec	k All That Apply)						1							-		
≥3 sf or ≥3 lf × ≥160 sf or ≥260	lf		enova emolit				>		Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	e cedure					a.	
		ls L	ocati	on		***************************************		Time (c)		. /	1.54			Abate	ment	i.
	tion of	0.4497	ormali I Sole	4			scription			×.			П	Ту		
TO BE	ing Material (ACM) ABATED acility 13)	Mair Custo	ntenar odial S (12)	nce/ Staff?		thermal surfa		s ins		(S	nount pecify or LF)	Zalloval	Domail	Repair	Encapsulate	Enclosure
Garage & med	chanical rooms	Yes	No	N/A X	ex	terior	pipe in	sula	ation	8	0 LF	x		-		H
												+				
Name of Registered \	Waste Hauler	1	1000	JDEP W		6100000	Yards		Name of	Registe	red Lan	dfill				
Freehold Cartage			799.0	lauler ID 5959	NO.	of Wa	ste		GROW	S						
City, State Freehold, NJ	2 10					Dispo TBD	sal Date		City, State Morrisv		4				78	1
Completed by A. Scott Higgins		Title Presid	dent			5	Signatur	e /	u-			Date 7/18/	14	-	- 3	

Date of Nationalism (1) 7-17-14	TYED		Name (A	7,	Owe E	(2)	A STATE OF THE STA			
	2 PM 3: 5		Street	Address	K KNOL	L ROA	D			
D DEP DAME	nded administ#	Tra .	Cay, S	State Zio	11T, N=	1831	8			
B DOH ISB) 46	19	No.	of Coptac	WE	<u> </u>	Telephone Number	11 _		,
1000			FAC		ORMATION					
Name of Facility Where Abstract	tis Taking Plac	æ (3)				Type of Facility	(4)	District of the second		
H. Kowé				<u>-</u>		2 School (K-1)	5 (Other than 16-12)			
13 OAK KNOW	I ROA	HO				Other (i.e., pr homes, etc.		95. Mg. Ag		
SUMMIT 1	NJ	079	Ol	¥		2300	2		YR.	۲.
UNION		-	Count	by Code (7 r)) (STATE USE	RESIL	in thing demands			
Name of Manifesing From Histod by	Building Ounce	f ASC	M No.			mont Contactor (9)	2814		-77
Street Address					Best E	lemoval I	nc to	# C	=	ان دا داد
City, State, Zip Code					450 S.	River St		11 7	=	
					Hacken	sack, N.	J. 07601	(S	
Project Manager for Monitolog Fit		Teleph	sae No.		Telephone No. 201-329-	7444 -	00388		三	2
Start Date (10)	Scheduled Co.	9-/			Name of OSHA		tal Inc		יני	1
7-28-14 Company States During Abatem	and the second second		9	-	Street Address		Lar Ing	H III	73	,
C. Facility Closed/Vacated During	Entire Period of	Abatemen	at		280 Huy		3			
BOM - Describe: 8AM	5PM	ly Hous					k, N.J 076	06		
Scope of Work (Chock all lintage) 12 2 3 cf or 2 3 if 12 2 160 cf or 2 250 if	9	`	Ren Den	notation notifien	Pilini ØGbv	Contributed with Enclosing Should Proceeding Encoded (Contri	Negative Processe			
31 E		Is Local	T1000000000000000000000000000000000000				R C		oles Typ	
Location of Ashesino-Containing Mahasini	(ACM)	Used Sele		Asbes	Description (tes Containing Mi	of Montal (ACM)	Amount		1	
TO BE ASATED		Custod Stall		E.C.	thornal systems surlaining, VAT	insulation, or	SF or LF)	lemo	Rono	Enclosure
(13)		(12)			dher statution	(CEE)	The second secon	2	A PARTIE	3 8
BASEMOUT/GARA		Yes No	N/A	THY	emal luse	NATION)	10 LF	X	+	H
154 74-160-17-2-32-0			1	7420			P.		土	口
		4				·	\$. #		+	+
Name of Registered Waste Hauler		NUCEPI	Maste M	laules	Cubic Yards of	Name of Regist	1.			4
Best Removal Inc		1710	9		1/4 40	Minerva	Enterprise	s		
Hackensack,	N.J. 0	7601			7-29-14	Waynesb				
RVELDRAN	Tab Estima	tor			R-Veldra	M		17-	1	4
ASB-41	* Do not u	se this for	n for asi	bestos lice	essure exempted:	activities.	3/	111		

NOTIFICATION OF ASSESTOS ABATEMENT (Pursuant to NJAC 8:50 and 12:120) CM 5/53

7-18-2014			Name Name	of Building Owned Operator	(2)	Of the same			
Agency Noticed Type	2 PM 3:5		Street / /	675 BERGE	N BOU	LEVARD			
D DEP DAM	ended		CSIM S	String Tip Code		15			
0.00	endment d expensy (natedly	9		RT LEE N	+ .0/0.	Telephone Number			
B DCA B C			7.	PATE			h:		8
			FAC	ELITY REFORMATION				_	
J PATE	estis Taking Plac	e (3)		•	Type of Facility		-		
Street Address				· · · · · · ·	School (K-12 Subshapter 8	(Other than K-12)			
1675 BERGE	N BOULE	EVAR	20		Ciber (i.e., pri incres, cic.)	• 1			
COV 60 .		•			Square Feet	# of Floors Bid	8-A9	YR	
FORT LEE	·		Cours	by Codo (7) (STATE USE	1900 Committies (Pr		1	116	_
BERGEN			ONE	ń :	RESIDE		. [3	
Name of Monitoring From Hired I	ly Building Ounes	ASCI	I No.		mot Contactor (S			1	
Street Address				Best R Street Address	emoval I	ne			
					River St	or Control	1	22	
City, State, Zip Code				Cay, Sam, Zp C Hacken	esek, N.	J. 07601 💯		PH	
Project Manager for Maniloting I	im	Telepho	ee No.	, Telephone No.		00388		دي	
Start Date (19)	Schoduled Con	aplation Da	nte (11)	201-329- Name of OSHAI	Months	*:	# #-	17.	1
7-29-14	The second liverage and the second	-14		Omega En	vironmen	tal Inc			
Occupancy Status During Abates				Street Address 280 Huy	ler St	2 cm			
D Pacify Closed Vacated During D Abatement Performed Cubids	of Normal Facility	Abalement / Hours	t	City, State, Zip C	ode	10.1			
Scope of Work (Check all that ap			<u> </u>			k, N.J. 076	10	_	
@23ster23f Ci2160ster2250f				constant — E Mini-	bog President	legalire Processe Não-Frieble Bracadase			
	-	ls Locati			. 1	Server Se	A	Typ	mont re
, Location of Achestos-Containing Materia	ni (ACNA	Normal Used Sale	iy by	Description of Ashactas Containing Miss	f Instal (ACN)	A			$\Box \Box$
TO BE ABATED		Çustadi	el el	(i.e., thermal systems i	ncutation.	Specify SF or IP	Remeva	Ropalr	Encioeuro
(13)		(12)		other miserizate	2005)		8	2	
		es No	NEA		`	12.5	Ш	1	Щ
BASEMENT		-	×	THERMAL INSUL	ATION	62 LF	Ä	+	+
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1	•					6.	1 !	I	口
Best Removal In		DNo.		anier Cubic Yards of Winste	Mane of Registe Minerva	Enterprises			
Hackensack	, N.J. 0	7601		7-30-14	Waynesbu	(年:	1		
RVELDRAN	Tabe Estima			RVelch	an	7-/	8-	20	14

			300 000			AC 8:60 and 5:1						
Date of Notification (1)		200	VI.	Nam	e of Buildi	ng Owner/Operator	(2)	114 JUL 22	FH	3.	48	
	18 / 1	4		Josep	ohine The	ormahlen		8				
Agencies Notified	Type Notification		-		et Address			5		1 14	11.	
☐ EPA ☑ DOLWD	Initial			305	West Bla	ckwell Street		<u>& LIČEN</u>		a ev	Ui.	
☑ DHSS	Amended -				State, Zip				117	7		
DCA	Emergency (Charles .	- na	Dove	er, NJ 078	301						
(NJAC 5:23-8)	justification)		'9		e of Conta			Telephone Nur	mber	-	-	******
	Cancellation			Josep	phine The	ormahlen		1	2002.000			
7			5979		77-74	NFORMATION						L-100
Name of Facility Where	batement is Takir	g Plac	e (3)				Type of Facilit	y (4)			_	
Private home						14:	School (K-					
Street Address	. 0 8						Subchapte	8 (Other than K-1	2)			
305 West Blackwell St City (5)	reet ·						homes, etc				2 0	
Dover, NJ 07801	12	12			81	- N	Square Feet	# of Floors	1	Bidg.	Age	
County (6)		-		Cou	inty Code (7) (STATE USE ONLY)	Current Lies /	Prior if being demol	liele a d'			
Morris					, (1	, ,	Julian Use (Thoi ii being demoi	iisnea)			
Name of Monitoring Firm	Hired by Building	Owner	(8)	ASCN	No.	Name of Abatem	ent Contractor (9)				
	Î	65				Gr Tech LLC		-7	13			
Street Address		7			., .	Street Address				17.5		
						576 Valley Rd	4783	23				
City, State, Zip Code						City, State, Zip C			÷	-		W (tar _)
						Wayne, NJ 074	70	7 2				
Project Manager for Moni	toring Firm		Teli	ephone	No.	Telephone No.		License No.	+			
Start Date (10)	Caba	4.1.4.6				973-638-1777		01127				
	14	07	/ _ 25		ate (11)	Name of OSHA N Envirovision Co						
Occupancy Status During	Abatement (Chec	k only	one)			Street Address		-	-	_		
∑ Facility Closed/Vacate ☐ Abatement Performed	d During Entire Pe	riod of	Abate	ment		20-21 Wagaraw	Road, Bldg .#	34A	14			
Time of Abatement:	AM- P	M/_	y Hou		AM	City, State, Zip Ci			T			_
Scope of Work (Check all	that analys					Fair Lawn, NJ 0						
56	шас арріу)					Clean up	o and decontami tainment with Ne	nation with negative	e pres	sure		7 -
>3 sf or >3 If	28		enovati				losure					
≥ 160 sf or ≥260 lf		∐ De	emolitic	n		Gloveba Non-Eve	g Procedure	Tent with Negative on-Friable Procedu	e Press	sure		
		T 11	Locat	ion	T	☐ Non-Exe	mpted () and N	on-Friable Procedu		1		
Location of	of		Norma	lty		Description of	of		-	1	ent T	T
Asbestos-Containing N TO BE ABA			ed Sole		Asbe	stos Containing Ma	terial (ACM)	Amount	Remova	Repair	Encapsulate	Eliciosdie
IN Facility		Cus	todial	Staff?	(1.6	 thermal systems in surfacing, VAT, 		(Specify SIF or LF)	No.	air	psu	000
(13)		-	(12)	т	-	other miscellane		0.1 0.1 2.1 /	B		late	a
Alaman Alaman		Yes	No	N/A			-					
asement				\boxtimes	Duct ins	ulation		20 SF	X			E
												T
- Control of the Cont						TW F	*		السار			+
			7		-				14	Ш		_
lame of Registered Waste	Maides	Ш_	بالل				- 10					
	: nauler		NJE	EP Waste	Hauler ID No.	Cubic Yards of Waste	Name of Regi	stered Landfill				
Tech LLC			0	03378	35	TBD	T.R.R.F. Inc		<u> </u>			
ity, State	-					Disposal Date	City. State	- 1 E		-		
ATT ARIES						TBD	Tullytown, P	A			0	
ayne, NJ 07470 ompleted By (Print or Tyr	pe) Title						ofe A					

м:			FF	AX NO	. :2622	991	Jul.	17 2014 10	:32AM	P	2	
	. 4	C.		,R								
Check#1951	Ţ. ·	NO	TIFI	CATIO	ON OF A	New Jersey SBESTOS ABA	TEMENT	gray and garage	137	ij K	2	
Control	.l 		{			JAC 8:60 and 5:1		. L.				
Date of Notification (1) 07 / 18	. , :	14			*	ing Owner/Operator	(2)	2914 JUL 22	PM	3:	47	
Agencies Notified Ty	pe Notificatio	n			ephine Lip							
□ EPA 🛛	Initial	8.		1	West 21		f-	0 110		1	JUL.	
☑ DOLWD □	Amended		e		, State, Zi			& LICE	N. H	ΨŲ		
	Amendment Emergency		ing		onne, NJ							
(NJAC 5:23-8)	justification)	S 1000	ing	Nan	ne of Cont	act		Telephone N	umher			~
	Cancellation		-	Jose	phine Lip	ari		1 - sispinone re	Jilizze.			
				F	ACILITY	INFORMATION				_		_
Name of Facility Where Abate	ement is Taki	ng Pla	ce (3)	-	***************************************		Type of Facili	ty (4)		-		
Private home			a ^{ji}			*	School (K	-12)			90	
Street Address			4 10 110 110			.,.	Subchapte	er 8 (Other than K- , private and comm	1 2)	a i i Thaift	000	
153 West 21 Street City (5)							homes, et	c.)	nercial i	וסווםנ	ngs,	
Bayonne, NJ 07002							Square Feet	# of Floors	T	3ldg.	Age	-
County (6)			-	Cou	untu Cada C) (STATE USE ONLY)						
Hudson			100	Col	uniy Code (7	(STATE USE ONLY)	Current Use (Prior if being demo	olished)			
Name of Monitoring Firm Hired	by Building	Owne	t (8)	IASCA	if No	Name of Abatem						
						Gr Tech LLC	ent Contractor (9)				
Street Address			-	I		Street Address			_			
						576 Valley Rd #	£283					
City, State, Zip Code				***************************************		City, State, Zip C						
					(C)	Wayne, NJ 0747						
Project Manager for Monitoring	Firm		Te	ephone	No.	Telephone No.		License No.				
						973-638-1777	£	01127				
Start Date (10)					ate (11)	Name of OSHA M	lonitor ·	10000				
				0_/		Envirovision Co	nsultants,Inc	N				
Occupancy Status During Abat Facility Closed/Vacated Dur	ement (Chec	k only	one)			Street Address		4				
Abatement Performed Outs	ide of Norma	Facil	it Abat Itv Hor	ement	scriba	20-21 Wagaraw	Road, Bldg #	34A				
Time of Abatement:	AMP	M/_	PM		_AM	City, State, Zip Co						**-
Scope of Work (Check all that a	anniv)					Fair Lawn, NJ 0						
Company of the compan		_				Full Cont	and decontam ainment with Ne	ination with negati egative Pressure	ve pres	sure	-	e de la composición dela composición de la composición de la composición dela composición dela composición dela composición de la composición de la composición dela com
≥ 160 sf ar > 260 lf	4	≥ R	enova emolit	non		Mini-Encl	osure					
				V 11		Non-Exer	mpted (*) and N	Tent with Negative on-Friable Proced	/e Press Ure	sure		
			s Loce]		atem	ent Ty	me
Location of Asbestos-Containing Materia	al (ACM)	- Us	Norma ed Sol		Acho	Description of	f 			_	T T	_
TO BE ABATED	•		ainten		(i.e	stos Containing Mat	eriai (ACM) hsulation.	Amount (Specify	Remova	Repair	Encapsulate	Enclosure
IN Facility (13)		Cu	(12)	Staff?		surfacing, VAT, other miscellaneo		SIF or LF)	ova	₩.	usd	Sur
		Yes	No	N/A		other miscenanec	ous)				ate	
Basement			1	×	Pipe inst	rlation	· · · · · · · · · · · · · · · · · · ·	12.7.5	ואו	-		
				-	2 spc ms	umation)		12 LF				Ц
			12									
		<u> </u>		10	ļ							
						14						ñ
Name of Registered Waste Hau	ler		NJ	DEP Waste	Hauler ID No.	Cubic Yards of Waste	Name of Regis	stered Landfill		17000		
Gr Tech LLC			(03378	35	TBD	T.R.R.F. Inc					
City, State						Disposal Date	City, State					
Wayne, NJ 07470					-	TBD	Tullytown, P.	A				
Completed By (Print or Type)	Title				(20)	Signature 2	1	0 . 0	ate			
N.Jevtic	Own	ier	(8			1/20	whe w	ena of 107	/18/20	14		

theck 4.9007

7-18-14	KAY W	TO KIN	Ty Co.	ent, resplica	
Agency Nothind Type Nothington	Street Addres	\$		year.	
D SPA - B initial D Amended	Po Box	o Code ·			
S DOL Assessment #	west	WOOD A	JJ: 0767	'5	
B DOH justification) B DCA Justification	Name of Cont	WKINC	Pa -	dealors Number	
		FORMATION		1	
KAYWEST REALTY C			Type of Facility (4) U School (K-12)		
435 BROHOWAY		:	Cher (i.e., private toxes, etc.)	& commercial built	1 95.
WESTWOOD			10,000 Z	of Floors Bits	1. YRS
BERGEN	County Code ONE.Y)	(7) (STATE USE	Current Use (Prior I	OFFICE!	APTS
Name of Manifesing From Hired by Building On	ner ASCM No.		neat Contactor (S)		
Street Address		Best R	emoval Inc	**	2274
	3.5		River St	[5e] -	
City, State, Zip Code		Hacken	sack, N.J.	07601	2
Project Manager for Manifesing Firm	Telephone No.	Telephone No.	Lie	sase Mad	
Start Date (10) Scheduled (Completion Date (11)	201-329-1 Name of OSHA	(A B)(E)(E)(E)	00388	
7-30-14 7-31	1-14	Omega Env	vironmental	Inc Pa	13
Occupancy Status During Abatement (Check or		Smet Address 280 Huy	ler St	# 2	Le?
Ci-Feelity Closed/Vacaind During Entire Period Ci-Abatement Performed Cutaids of Normal Fac	of Abatement ality Hours	City, State, Zip Co			II.
Scope of Work (Check all that apply)		South Ha	ackensack,	N.J. 0760)6
-023se23f	- Renovation	B Fed C	ontainment with Mega	live Prossure	
□ ≥ 160 st or ≥ 280 f	2 Demolition		bag Passadure		
·	Is Location .	U RUPE	momphed () and Non-		Abelement
. Location of	· Nonnally Used Salely by	Description of			Type
Ashectes-Containing Material (ACM) TO BE ARATED	Maintanance/ Asbe Costedial 6.0	stes Containing Mat thornal systems in	ocial (ACM)	Amount (Specify	2 2 0 E
(13)	- See2	surfacing, VAT.	or	SF or LF)	Encissure Incappulate Repair Removal
	Yes No NIA			18.	2 8 8
BASEMENT BOILER ROOM		MAL NUSULI	AT (Di)	70 LA	X
			7.10	47. 17.	
				Fig. 1	
Name of Registered Waste Hauter	I N POPONIC - L II -				
Best Removal Inc	NUCEP Waste Hauter ID No.	Waste	Name of Registered L	. F	The state of the s
Q), Sab	17109	1 1 8.	Minerva En	rethirses	
Hackensack, N.J.	07601	7-31-14	Waynesburg	考 ?	
RVELDRAN Estim	ator	R. Veldro	M	7-	18-14

CheK# 2385

Date of Notification (1)		1	Vame of	Building (Owner/O	perator (2)					* **) e *1	
7/18/14			TOI	لمنر	K	ane			2014	0-			
Agencies Notified Type Notification		5	Street Ac			. 0	1			1	DH	3.	62
CEPA Conitial			45	150	che	hK	C			100			٠.٢
DEP Amended		(City Stat	te, Zip Co	de		- 1-1	^~ /	5	1		1.5	n.
DOL Amendment #		- L		adst	ージへん	_, /	J 079	134	Ct. L.f.	EN	118	- ' ' '	7 tu
DOH justification)	loloding	1	()	Contact				Tel	enhane Nun	iber	39	-	
DCA Cancellation			27	CK				,	v			J	
C. W. M Abstract in Taking	Dines (2)		FACI	LITY INFO	ORMATI	ON	Type of Facility	(4)				-	-
Name of Facility Where Abatement is Taking													
Street Address	110	رق	,				School (K-		er than K-12	1			
1							Other (i.e.	private	& commercia	al build	ings,	home	es,
45 Branch RC							etc.)	1 4 -	f Classes	I DI	da A	~~	
City (5)							Square Feet	# 0	f Floors	0	dg. A	ye - /- -	
Olca State		17	County C	ode (7)			Current Use (Pr	ior if he	ina demolish	edl	70		
County (6)		1	STATE L	JSE ONLY)		Baro			22)			
Name of Monitoring Firm Hired by Building O	wner (8)		ASCN	i No.		Name o	of Abatement Co	ntractor	(9)				
Tame or morning . I'm a so s, salaring o	(-)					10 (1000) 1000 1000	nsulation Co.						
Street Address						Street A	Address						
						95 M	ontrose Road	d					
City, State, Zip Code						City, St	ate, Zip Code			1000		-	
						Colts	Neck, N.J. 0	7722					
Project Manager for Monitoring Firm		1	Telephor	ne No.		Telepho			License N	٥.			
						732-2	94-1757		00029				
TO THE PROPERTY OF THE PROPERT	Schedule			Date (11)		Name o	of OSHA Monitor						
7128/14	2110	/ 1 /	4			6/ 1	2 1						
Occupancy Status During Abatement (Check						Street A	Address						
Facility Closed/Vacated During Entire P	eriod of A	batem	ent			CH. CI	-1- 7:- 0-1-						
Abatement Performed Outside of Normal Other – Describe:	Jegg.	Hours				City, St	ate, Zip Code						
Scope of Work (Check All That Apply)	' ,												
	De s		ti man				Full Contains	sant with	. Nogative P	rocour			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovat emoliti			0.5		Full Containm Mini-Enclosur		i Negative F	ressur	Е		
7						K	Glovebag Pro			lo Dro	and un		
	Γ					₩	Non-Exempte	u () ai	u Non-Filab			ment	
Lagrica of		Location or mall			Do	coriotion	of)				pe	
Location of Asbestos-Containing Material (ACM)	2.555	Sole		Asbes		scription taining M	aterial (ACM)	1	Amount			m	
TO BE ABATED		ntenar odial S			thermal	systems	insulation,	(Specify	Re	Z	nca	Enc
In Facility (13)	0000	(12)				cing, VAT niscellane		S	F or LF)	Remova	Repair	Encapsulate	Enclosure
(10)	Yes	No	N/A				,			a	-	ate	9
	163	140	2		7			17.	and.	10			
Ban			V	tran	is te	PONE	1517	30	001/	X			
						Be	(n						
Name of Registered Waste Hauler			JDEP W		Cubic		Name of	Regist	ered Landfill				
Ace Insulation Co., Inc.			auler ID 2086	No.	of Was	ste S	Chrins						1
City, State	1 12			Disnot	sal Pate	City, Sta	ite					-	
Colts Neck, New Jersey		2 15	3/1	1	Eastor								
Completed by			1 7 1	ignature	1	-	Da	te /	. 7		-		
Bree McGuire	Secre	tary	Treasu	rer		130	REMI			1110	1/1	4	
	1						//			1	1		

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Drine	Form
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CK# 2386

(NA a)		(Pi	ursuant	to NJAC 8	:60 and 12:12	0)			DE	3° ; -	11	r ille a
Date of Notification (1)				f Building C	Owner/Operator	(2)	かっ	gn:			£	ļ.,
Agencies Notified Type Notification Type Notification Initial Amended Amendment Emergency	#	L		ddress 1 Gao ate, Zip Coo			ロフ	07640	7 0 3 E	22	?	13
DOH justification) Cancellation	(including			f Contact	" PWI	,	$N_{\mathcal{S}}$	Telephone N		1 .F F	2	¥2;
	-		FAC	LITY INFO	RMATION							
Name of Facility Where Abatement is Takin CZEL FOR THE STORY Street Address	g Place (3	3)				Туре	School (K-1		12)		8)	
1002 aean An	9					立		orivate & commer		dings,	home	es,
CITY (5)	<u>~</u>					Squ	are Feet	# of Floors	E	Bldg. A		0
Country (6)			County (STATE	Code (7) USE ONLY)		Curr	ent Use (Pri	or if being demoli	shed)	.,,		
Name of Monitoring Firm Hired by Building	Owner (8)		ASC	1 No.	1 10		atement Co.	ntractor (9)				
Street Address			'		Street			12				
City, State, Zip Code					City, S	State, 2	ose Road Zip Code ck, N.J. 07					
Project Manager for Monitoring Firm	-		Telepho	ne No.	Telepi	none N		License 00029	No.			
Start Date (10)	Schedule	ed Con	npletion	Date (11)			HA Monitor	00020				
Occupancy Status During Abatement (Chec	k Only Or	ne)	1 /		Street	Addre	ess					
Facility Closed/Vacated During Entire R Abatement Performed Outside of Norm Other – Describe:	nal Facility	Abatem	nent									
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Pemolit	ion			Full Containment with Negati Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-F						
Location of Asbestos-Containing Material (ACM)	Use	Locati Normal d Sole	ly ly by	Asbesto	Description os Containing N		al (ACM)	Amount	-		pe	
TO BE ABATED In Facility (13)	Cust	intenar todial S (12)	Staff?		hermal system surfacing, VA other miscellar	s insul T, or	(Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure	
	Yes	No	N/A		1			30 . H	4		0	
2+5) de		X		geny			27001	IX				
								-	-			-
Name of Registered Waste Hauler	l		JDEP W		Cubic Yards		Name of	Registered Landf	11			
Ace Insulation Co., Inc.	, it	3 5585	Hauler ID No. of Waste				Chrins			225		
City, State Colts Neck, New Jersey		Disposal Date City, State Easton, PA										
Completed by Bree McGuire	Signature etary Treasurer				y.	y Date 7/18/14						

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

Check# 10198

Date of Notification (1)	11/25 11/25		T		f Building					1	,	11		•		
7–18–14				Gene	sis He	alth	Care		0814	i. []	22	PH	3.	41		
Agencies Notified	Type Notification			Street A			QL		2011	U.C.	- 50	St. 33				
₫ EPA			_		East S		Stre	et			9	1		Đ).		
□ DEP	Amended Amendment		-	City, Sta Kenn	ate, Zip Co ett Sg	_{luare}	, PA	1934	8	3	16.1		13			
ĽX DOH □ DCA -	☐ Emergency (justification) ☐ Cancellation	including			f Contact y Mack	iewi	CZ			Tel	ephone	Numi	per			
				FACI	LITY INFO	DRMAT	TON			-						
Name of Facility Where								Type o	f Facility (4)						
Former Eastern	Shore Nurs	ing & R	eha	abili	tation	1			chool (K-12							
Street Address 1419 Route 9 n	orth							IX Of	ubchapter 8 ther (i.e. pri c.)				buil	dings	hom	es,
City (5) Cape May Court	House							Square 30,0		# o	f Floors		E	1dg. A	ge yrs	
County (6) Cape May					Code (7) USE ONLY)			Current	Use (Prior nt/nur	if bei	ng dem	olishe 1 e	d)			
Name of Monitoring Firm	Hired by Building (Owner (8)		ASCM	I No.		Name	of Abate	ment Contr	ractor	(9)			77		
TTI Environmen	tal						Plym	nouth	Enviro	nme	ntal	Co	, I	nc.		
Street Address						-	Street	Address								
1253 North Chu	rch Street						923	Haws	Avenue	3						
City, State, Zip Code								tate, Zip						00 1000		
Moorestown, NJ									m, PA	194	01					
Project Manager for Mor Michael Stocku				Telephoi 356–8	ne No. 40–880	0		one No. -239-9			Licens 003					
Start Date (10) 8/4/14		Scheduled 8/29/							Monitor Enviro	nme	ntal	Co.	, I	nc.		
Occupancy Status During	g Abatement (Chec	(Only One)						Address				1111-111				
☑ Facility Closed/Vac							923	Haws	Avenue							
 □ Abatement Perform □ Other – Describe: 		al Facility H	ours			20		tate, Zip		404	0.4					
							Norr	istow	m, PA	194)					
Scope of Work (Check A	ll That Apply)															
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			ovat noliti					 ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure 								
								Glove	ebag Proce				1			
							X Non-Exempted (*) and Non					riable		cedur Abate		-
		Is Lo	catio mall	1.1											pe	
Location Asbestos-Containing		Used S	Solel	y by	Ashest		scription taining M		ACM)	Δ	mount				_	
TO BE ABA		Mainte Custod		200000000000000000000000000000000000000		thermal	systems	insulation			pecify		Re	_Z	Enca	Ē
In Facil (13)	ty		12)				cing, VA miscellan			SF	or LF)		Remova	Repair	Encapsulate	Enclosure
(10)		Yes N	No	N/A		Other 1	moodian	cous)					/al	5	llate	лге
1st floor			X.	IN/A	floo	r til	le & r	nasti	c /	18,2	260 S	F :	X		37849	
1st floor			x		lino	leum					80 S	-	x			
		+-+	^									+				
							· · · · · · · · · · · · · · · · · · ·					-				
Name of Registered Was	te Hauler		332363	JDEP W			Cubic Yards Name of Registered Landfill									
Robinson Waste	Disposal	Hauler ID No. of Waste 60					CMCMUA Sanitary Landfill									
City, State					Disposal Date					The state of the s						
Voorhees Township,NJ				8/29/14												
Completed by James M. Kelly		Title	Signature													
CONTROL ITS INCITY	President					7–18–14										

(K1290)

Date of Notification (1) 7-10-2014				Name of Berger	f Building n Count	Owner/C y Tech	Operator (inical Sc	2) :hoo	ls Cooper	ative					
Agencies Notified	Type Notifica	ation		01.301.	44,000		room 1,			17 C C .	- 22	PH	<u> 3. '</u>	ि	
× EPA × DEP × DOL	Initial Amend Amend	ment #		City, Sta	ite, Zip Co ius, NJ (de			as i		F4 : 1	4.			
× DOH × DCA	Emerge justifica		}		f Contact as Jodic	e	10			Telepho	one Nu	mber)		
			-1	FACI	LITY INFO	DRMATI						770			
Name of Facility Where Bergen County Tec			3)				Total Control		of Facility (4 School (K-12	!)		27			
Street Address 200 Hackensack A	ve						Control Control	7	Subchapter & Other (i.e. pr etc.)				dings	hom	es,
City (5) Hackensack NJ 076	601	- 141.50							re Feet	# of Flo	ors	E	Bldg. A	Age	
County (6)				Counity (Code (7) USE ONLY,			Curre Scho	nt Use (Prior ool	if being d	emolis	hed)			
Name of Monitoring Firm TTI Environmental)	ASICN	No.				tement Cont prises LL						
Street Address 1253 N. Church Str	reet						Street A		erland Av	re	Т				
City, State, Zip Code Moorestown, NJ 08							City, Sta		p Code NJ 07502		_				
Project Manager for Mon Michael R Stocku				Telepihor			Telepho 973-9	ne No).	1	ense N	lo.			
Start Date (10) 7-23-2014		Schedu 7-30-2		npletion I					A Monitor						
	- Ab ata a - t /		102000 10				Street A	ddror					1-14/0		
Occupancy Status During Facility Closed/Vaca Abatement Perform Other – Describe:	ated During Er	ntire Period of	Abater	ement							+	- 1			
Scope of Work (Check A	Il That Apply)			-							+				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demoli				×	Min Glo	Containmer i-Enclosure vebag Proce	dure				e e	
								1401	Lxcmptco	() 0110 110	TT THE	1		ement	
14	-2		s Locat Normal			Dog	scription o	·f					Ту	ре	
Location Asbestos-Containing <u>TO BE AB</u> In Facil (13)	Material (ACM ATED	⁽¹⁾ Ma	ed Sole aintena stodial ((12)	nce/ Staff?	by Asbestos (i.e. there is			iterial insula , or		Amou (Speci SF or L	ify	Removal	Repair	Encapsulate	Enclosure
Main entrance g	jarage area	No	N/A	100	va	t/mastic	;		52st	F	x				
Storage Room g				x		va	t/mastic	;		55st		x			
											+				
Name of Registered Was	ste Hauler		N	JDEP W	aste	Cubic	Yards	rds Name of Registered Landfill							
DYV Enterprises LL0		1	Hauter ID No. of Waste 00341-40 12 yard					Waste M							
City, State Paterson NJ 07502	Disposal Date				City, State Tullytown	n NJ									
Completed by Dorian Carpio		ager	Signature (w	Date 7-9-2014						

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

NO CK

			(Pu	rsuant t	o NJAC 8	:60 and	12:120	")			3 fr =-	- ten			
Date of Notification (1) July 18, 2014			1 1	Name of Sal Ma	Building C	Owner/O	perator	(2)	Check # N/	A		7	1 1	3	
Agencies Notified Type No				Street Ad 216 Me	ldress echanic	Street			Check # N/	ZE 14	JL 2,	< PM	3	41	
DEP Am	ended endment i				e, Zip Coo /Iay Cou		e, NJ			10.5	11/6				
DOH just	ergency (i ification) ncellation	ncluding	1 '	Name of Sal Ma							phone N				
			-	FACIL	ITY INFO	RMATIC	NC								
Name of Facility Where Abatemen Mancuso Residence Street Address	t is Taking	Place (3)					Тур	School (K-12 Subchapter	2)	r than K-	12)			
216 Mechanic Street			3					×	Other (i.e. pretc.)	rivate &	commer	cial build	\$ \$ \frac{1}{2} \text{(\$1.50)}		es,
City (5) Cape May Courthouse								5,0	are Feet 00	# of 2	Floors	100	ldg. A 00	ge	
County (6) Cape May				County C STATE U	ode (7) ISE ONLY)			25000000	rent Use (Prio sidence	r if beir	ng demoli	shed)			
Name of Monitoring Firm Hired by Management & Enviro. Cor				ASCM	No.				atement Con nvironment		3				
Street Address P.O. Box 341				1			Street 623		ess er Avenue						
City, State, Zip Code Chesterfield, NJ 08515									Zip Code nade, NJ 08	3052					
Project Manager for Monitoring Fir	m								No. -0099	License 00842	ense No. 842				
Start Date (10) July 26, 2014		Schedule July 28	ed Con	Completion Date (11) Name					SHA Monitor						
Occupancy Status During Abateme	ent (Chec		<u> </u>				Street			-					
Facility Closed/Vacated Durin Abatement Performed Outsid	ng Entire F	eriod of	Abatem						te 130 Nort	h					
Other – Describe:									nson, NJ 0						
Scope of Work (Check All That Ap	ply)						-	parent .							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit	207000				N G	ull Containme fini-Enclosure flovebag Proc lon-Exempted	edure				e	
		ls	Locati	on									Abate	ement	
Location of			Normal ed Sole		· _		scription					-		ре	
Asbestos-Containing Material (TO BE ABATED) In Facility (13)	(ACM)	Ma Cus	intenar todial 5 (12)	nce/ Staff?		thermal surface		s insu AT, or		(8	mount specify or LF)	Removal	Repair	Encapsulate	Enclosure
D		Yes	No XXX	N/A		Dina	Insula	ation		2	0 LF	х			
Basement		-	^^^			ripe	IIISUI	alion			O LI				
Name of Registered Waste Hauler			l N	JDEP W	/aste	Cubic	Yards		Name of I	Registe	red Land	fill			
Freehold Cartage						of Was			A CONTRACTOR STATE				/ Landfill		
City, State Freehold, NJ 07728				Disposal Date City, State 7/28/2014 Birdsboro,						4					
Completed by Christina Lynch	erations Manager Signature Date 7/18/2014					014									



Date of Notification (1) 7/18/2014					Building O				TRANS	SPOR	TATIO	N				
Agencies Notified	Type Notification		+	Street Ad	idress			T.	30X 600	· · · · · ·	2201				1 !	
EPA DEP DOL	Initial Amended Amendment #		_	City, Stat	e, Zip Cod ON, NJ	de				JUL	2 2				-	
DOH DCA	justification) Cancellation	nordanig		Name of HAROL	Contact _D DIET	ER		19		Tele	ephone N	lumbe		1	1	
				FACIL	ITY INFO	RMATIO	N									
Name of Facility Where CSX MAINTENAN		Place (3)						S	f Facility (4 chool (K-1:	2)						
Street Address ROUTE 7 WITTPE	ENN BRIDGE, PA	RCEL 2	2R48	ВА				× o	ubchapter ther (i.e. p tc.)				uildi	ngs,	home	s,
City (5) KEARNY								Square	Feet	# of	Floors		Blo	dg. A	ge	
County (6) HUDSON				County C	Code (7) ISE ONLY)		_	Curren	it Use (Pric	or if bei	ng demo	lished)				
Name of Monitoring Fir	m Hired by Building C	Wner (8)		ASCM	No.				ement Con THERS			ING,	INC	Э.		
Street Address 3 TERRI LANE, S	UITE 4							Address	ERFOR	D BL\	/D.					
City, State, Zip Code BURLINGTON, N								state, Zip	Code NJ 0701	4						
Project Manager for Mo			Telephor	ne No. '9-8512		Teleph	none No		102	License						
Start Date (10) 7/31/2014			mpletion [Name	of OSH	A Monitor	VF							
Occupancy Status Duri	ing Abatament (Chac	8/15/20					-	SAME AS (9) ABOVE treet Address								
Facility Closed/Va	ncated During Entire F med Outside of Norm	eriod of A	bate	ment rs	101-14			State, Zip		0						
Scope of Work (Check									- 0						_	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enov emol					Min Glo	Containmoi-Enclosure vebag Prod -Exempted	e cedure	econgree					
		la.	Loca	tion						7				Abate	ement	t
Locati Asbestos-Containir <u>TO BE A</u> In Fa (1:	ng Material (ACM) <u>BATED</u> cility	Use Mai Cust	Norma d Sol intena todial (12)	ally ely by ance/ Staff?	Asbest (i.e.	Desc tos Conta thermal s surfaci other mi	ystem ng, VA	Material is insula AT, or	(ACM) tion,	(Amount Specify F or LF)		Removal	Repair	e Encapsulate	Enclosure
GAR	AGE	Yes	No	N/A	TRAN	ISITE C	EILIN	NG PA	NELS	3,2	200 SF	2	K			
EXTE		X			ROOF				7,2	200 SF	1	X	_			
EXTE			X		FLAS	HING C	N BL	OCK	WALL	2	20 SF	2	Χ			
Name of Registered W		6	NJDEP Waste Hauler ID No. 18743			Cubic Y of Wast 100 +/	te		Name of WM GF	:01			SA	NIT	ARY	LA1
City, State CLIFTON, NJ	D D			Disposa 8/1/5/2		9	City, Stat		LE, PA	1						
Completed by VIVECA RAMOS	JECT COORDINATOR					e W &	Date 7/18/2014									

State of New Jersey

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

Check # 7542

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Date of Notification (1)	14.4	118 2500000		A 5 0 5 0 70		er/Op	erator (2)			. M. 14					
7/18/			77.5	Univer	Sity								_		2011
Agencies Notified [] EPA	Type of Notification [x] Initial			ddress Morris	Ave										
[] DEP [X] DOL	Notification [] Emergency	Cit	5.500	te, Zip C		3			JUL 22	2014	1				_
[X] DOH	[] Amended Notification	-		1/2	-										_
[] DCA	[] Canadiatio			Contact				9	Telephone	Numbe	er . 1				
	[] Cancellatio	50	ızan	ne Ku	•		•		2						
				F	FACIL	I YTL	NFORMATION							_	
Name of Facility Where Kean University -								Type of Facil	ity (4) ool (K-12) chapter 8 (Ot er (i.e. private	her tha	n K-12)	uildin	as		
Street Address								hor	nes, etc.)	and C	OTTIME GIALD	andin	95,		
1000 Morris Ave.								Square Feet	# of F	loors	Bldg	Age		-	
City (5)		County (6)				y Code (7)	30000	4	1 100 / 25 / 44 / 54 / 54	~ 60				
Union	1	Union			(STAT	TE USE ONLY)	Current Use Office/lab/cla	(Prior if being	demo	lished)				
Name of Monitoring Fire	m Hired by Build	ina Owner	T A	SCM No).	ТТ	Name of Abatem			-					
TTI Environment		ing Owner		003				lupiter Envi		I Ser	vices, Inc				
Street Address	<u> </u>					1 1	Street Address								
9 East Stow Roa	d						3	3 Lynn Cou	rt						
City, State, Zip Code				2000		1 [City, State, Zip C			0.5					
Marlton, NJ 0805						1		Lincoln Par	k, NJ 070	35					
Project Manager for Mo	onitoring Firm	0.0000000000		Number -8800			Telephone Numb	oer 973-709-02	200		License Nu)85	52	
Jim Gerardi Scheduled Start Date (10) Sche	ed. Compl	V-030000122-F	and the second second second	-	1 +	Name of OSHA		.00			- 00	,00		
7/28/14	Section Constitution		5/14		,			J & S Envir	onmental	Labo	oratories,	LLC)		
	d/Vacated During	Entire Pe	riod o			1.1	Street Address	2333 Route	22 West					ī	2
[] Abatement Per Descr	formed Outside	of Normal	Facilit	ty Hours	-		City, State, Zip C		DECEMBRACION NO						
The state of the s	ribe: partially vac	ated						Union, NJ (07083						
Scope of Work (Check	all that apply)		(a) (1) (b)	V-1853				70.2							
[] Demolition [] ≥3 sf or ≥3 lf [x] ≥160 sf or ≥26				[]	Reno	ovatio	on -	[X] [] (Full Containm Mini – Enclos Glovebag Pro Non – Friable	ure cedure	•	ress	ure		
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Asbestos - Co	ontaining	Maint	enanc	ce/Cus			Mater	ial (ACM)			(Specify	E	E	N	N
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(13)		Yes	No	N/A								A	R	S	S
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Name of Registered W Jupiter Environm		es Ha	DEP V uler II 04782				ic Yards Vaste 5	Minerva	egistered Lan Landfill	am					
City, State	2.8.0						osal Date	City, State	9 806/974						
Lincoln Park, NJ						8/1	5/14	Waynes	burg, OH						
Completed By (Print or Pane Repic	Type)	Title Gen	eral	Manag	ger		Signature	ر /	٠		7/18/1	4			
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And many substitute Gallette			- CUY	Ч.		NIRAM Since Address	INC					
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J Facility Closed/Ventral Day	Ann Enthant	Sarkar .			l	91 pu	יז אישמיז	n2	-,,-		-	
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Date of Notification (1) July 18, 2014						Owner/Op School I			¥							
Agencies Notified	Type Notification		-	Street A		00110011		iot .	· ·	-					4	
EPA DEP	Initial				lis Drive	9				11 2	2 2	014			íğ.	
DEP × DOL	Amended Amendment #		_		ite, Zip Co e, N.J. 0			1000			-				. 1000	
Ĭ DOH	Emergency (ir justification)	cluding	-	Name of	f Contact	· · · · · · · · · · · · · · · · · · ·		******		Tele	nhone	Numbe	r		7	
☐ DCA	Cancellation			John N						<u></u>		1	. 11		الم	
Name of Facility Where	Abatement is Taking	Place (3	3)	FACI	LITY INFO	ORMATIO	Ņ	Type o	f Facility (4))						
Wayne Valley High	n School								chool (K-12							
Street Address 551 Valley Road								i o	ubchapter 8 ther (i.e. pri				uild	ings,	hom	es,
City (5)								Square		# of	Floors		BI	dg. A	ge	-
Wayne	(4)							80,00		2			4()	30	
County (6) Passaic				County (Code (7) USE ONLY,)	_	School	it Use (Prior ol	r if beir	ng dem	olished)	1			
Name of Monitoring Fire Ramm Environment		wner (8)		ASCM					ement Contr Constructi					2		
Street Address								Address							_	
77 Nottingham Ro	ad								V, Suite	14					ii.	
City, State, Zip Code Fair Lawn, N.J. 07	410							State, Zip wa, N.	Code J. 0712							
Project Manager for Mo Roger Headrick	nitoring Firm			Telephoi 201-47	ne No. 75-9880		*	none No. 832-42			Licens 0115					
Start Date (10) 7/19/2014		Schedule 7/31/20			Date (11)		Name	of OSHA	A Monitor							
Occupancy Status Duri					1 2 3 1		Stroot	Address								
	cated During Entire Pe		-	ment			Direct	Addiess	•							
	med Outside of Norma						City, S	State, Zip	Code		· ·	***************************************				
Scope of Work (Check	All That Apply)									-						
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Asbestos-Containin TO BE AB		Mai	intena	ince/		tos Contai thermal sy				100000	nount	1	0	-	Enc	m
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Room	116		Х		[4]	transit	e par	nels		3	0 sf	3				
Room	130		Х			floor tile	& m	nastic		3	5 sf	2				
(A)																
						-			-	14	1					
Name of Registered Wa Academy Constru		4	7.4 855	NJDEP W Hauler ID		of Waste			Name of R Waste M	ocamoranico.			-0.5100			
City, State Totowa, New Jers						Disposal			City, State				-			
Completed by	Су	Title				7/30/2	2014 nature		Tullytown	n, PA		Date				
Frank Marino			f Оре	erations		Sig	. Iului C				-	7/18/	20	14		

Novel

Date of Notification		6					Owner / Operator	r (2)				9		
Agencies Notified	07-17-2014 Type Notific			Street			rsity Hospital							
	Type Ivolin	Zation					l Campus			111 2	0.0034			
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□ DOH		ergency	1	lame	of Co	ntact					Telepho	one N	umbe	er
☐ DCA	⊠ Can	cellation	8	Vir. R	alph	Miller	e .				1	• 13		
					ILIT	Y INF	ORMATION							
Name of Facility WI			lace (3)			Type of Facili							
Kennedy University	sity Hospii	aı					School (F		Other than K	10\				
2201 Chapel Hill	Compile						-	•	Other than K- ate & commer		ings hor	200 0	to \	
2201 Gliapei niii	Campus						Square Feet		# of Floors	ciai bullu	Bldg. Ag		ic.j	
City (5)		County (6)	Col	unty C	ode	(7)	250,000		2		blug. A	52		
Cherry Hill, NJ 08	RNN2	Camden		arrey C	ouc	(1)			f being demol	ished)	1	32		
Onony min, no o	0002	Jamaen	-1				Hospital		r being deiner	iorica				
Name of Monitoring	Firm Hired	by Building Ow	ner (8)		ASC	CM No.			t Contractor (9)				
Criterion Labora			(0)						ement Grou					
Street Address							Street Addres			•				
3370 Progress D	rive, Suite	e J					2115 Hamilt	ton A	ve, Suite 20	2				
City, State & Zip Co	de						City, State & 2	Zip Co	ode					
Bensalem, Pa. 1	9020						Trenton, NJ	J 0861	19					
Project Manager for		Firm	100000000000000000000000000000000000000	hone			Telephone No			License	Number			
Mr. Mike Panep			215-				609-977-615	59			011	B5		
Scheduled Start Da 06-26-20		Scheduled Co	mpletio)	Name of OSH		nitor Ital Laborate	ories Inc	c			20 7 = 1 1
Occupancy Status I	****						Street Addres		itai Laborat	Jiles III				
		Period of Abater		,			2333 Route		est					
	Performed of	of Normal Hours	: 7:30	am to	4:30	om	City, State &	Zip Co	ode					
Describe:							Union, NJ 0	7083						
The second secon		g Abatement												
Scope of Work (Che	eck all that a	ipply)						\square	Full Contains	nent with	Negative	Droc	curo	
☐ ≥3 sf or ≥3 l	f		M	Ren	ovatio	n		Ħ	Mini-Enclosu		rvegative	, 1 100	Sui Ç	
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20. 50. 50.	ocation of		0.00000	ocati			Description			Amount		ateme	ent T	ype
	tos-Containi	ng		nally L			Asbestos-Con			(Specify				
	erial (ACM) BE ABATED			olely b	-		Material (A((i.e., thermal s			SF or LF)) 2	70	nc	E
	n Facility		The state of the s	dial S		1	nsulation, surfac				Remova	Repair	aps	Enclsoure
	(13)			(12)			or other miscella				\ \lambda	=	Encapsulate	ure
			Yes	No	N/A								Ψ.	
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Name of Registered	Waste Hau	ıler		NJI	DEP V	Waste	Cubic Yards	Nam	e of Registere	d Landfil	 			
				Hai	uler II	D No.	of Waste		g					
Resource Manag	ement Gr	oup, LLC		003	35218	3	TBD		ws Landfill				-	
City, State Trenton, NJ 0861	19						Disposal Date TBD		State risville, PA					
Completed By (Prin	10.000			Title	е		Signature 1		77		Date	100N 11P		-
Mr. Brian Han					side	ent	6	1.4	1/200	,		17/2	014	
1004/1004/1004/1004/1004							1/1/1) []	141/44	/	0.000		recutification	
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County Code (7) (STATE USE ONLY)

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State of Now Je ICATION OF ASBEST Ursuant to NJAC 8:60	TARA 20	EMENT NJ		APPROVE Tealth & S		Scrvi	ces	News (March
Name of Building Own Keyport School D	er/Operato istrict	r (2)	71	(Signature) 8 I. 4		2 ~		
Street Address 370 Broad Street						1	<u> </u>	
City, State, Zip Code Keyport, New Jers	sey 0773	5 J	UL 2	2 2014				
Name of Contect Ed McManus				alephone N	umher			
FACILITY INFORM	ATION	7 7 10						-
		Other (i.e	(-12) ter 8 (Oti	ner than K- & commer	12) cial bu	ılldingi	s, hor	nes,
Second to 1 to 1		Square Feat 10,000	2	of Floors		Bldg. 55+	Age	
County Code (7) STATE USE ONLY)		Current Use (F School			shed)			
ASCM No.	Lillich	of Abatement C Corporation	ontracto	(9)				
		Address VIcBride Aver	านอ					
	City, S Wood	tate, Zip Code dland Park, N	J 0742	24				_
elephone No. 56-616-9519	Teleph 973-2	one No. 225-8400		License N	Yo.			\neg
pletion Date (11)		of OSHA Monito				-		\dashv
nt	Street	Address Route 22 We						
200	City, St	ate, Zip Code 1, New Jerse		3		_		\dashv
חס ה	×	Full Containn Mini-Enclosu Glovebag Pro Non-Exempte	nent with	Negative F			n	
by Ashestos Co	escription of			5	-	Abate	ement pe	
ff? (i.e. them	at systems at systems acing, VAT miscellane	Insulation,	(\$	nount pecify or LF)	Remova	Repair	Encapsula	Enclosur
AIZA		1000 CM			Na	1 = 1	ᇤ	2

Pennsauken, New Jersey 08109	į				City, State, Woodlan	Zip Code d Park, N	1.07424				
Project Manager for Monitoring Firm Tom Pruno			Telepho 856-6	one No. 16-9519	Telephone 973-225-	No.	Licens 0110				
Start Date (10) 07/19/14	07/21	/14	mpletion	Dale (11)	Name of OS	SHA Monitor		<u> </u>	_		
Occupancy Status During Abatement (Classification Facility Closed/Vacated During Entitle Abatement Performed Outside of N	D Ported of	Abete	ment		Street Addr 2333 Rot	ess ute 22 We					
Other - Describe: 12 PM Start Scope of Work (Check All That Apply)	- Constitution	.y 13001			City, State, Union, N	Zip Code ew Jersey	07083				
≥3 sf or ≥3 if ≥160 sf or ≥260 if		Renovi Demoli			FI M	ull Containm inl-Enclosure lovebag Prod	ent with Negativ				
Location of Asbestos-Containing Material (ACM)	Use	S Local Norma ed Sola	lly alv bv		Description of		4 7 and 140H-F	lable Pro	Abal		í
In Facility (13)	Me Me	intena todial ((12)	nce/ Staff?	(i.e. then	Containing Materia mai systems Insul urfacing, VAT, or er miscellaneous)	ation,	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Endosure
Bathrooms (6)	Yes	No X	N/A					val	=	alalu	ure
Data do Mio (o)		_^	X	, <u> </u>	Pipe Fittings		>6 LF	Х			
						-		-		_	
Name of Registered Waste Hauler		-				-		\dashv		-	
Lilich Corporation	:	H	JDEP Waller ID		blc Yards Vaste		Registered Land	en		1	
City, State Noodland Park, New Jersey 0742	4			Dis	posal Date 2/14	City, State					\dashv
Completed by Catiana Kaleníkova	Title Vice I	Presid	dent	112	Signature Tollon	Mornsvil		ania Date 07/18/1			-
ASB-41 (R-06-08)					* Do not use t	his form for a	asbestos licensu			cilviti	ies.

Date of Notification (1)

CK#3180

\$200

Amonded Amendment #

justification) Cancellation

Emergency (including

Type Notification

Initial

Name of Facility Where Abatement is Taking Place (3)

Name of Monitoring Firm Hired by Building Owner (8)

07/18/14

X

Agencies Notified

EPA

DEP

DOL

DQH

DCA

Street Address 335 Broad Street

City (5)

County (6)

Monmouth

Street Address

City, State, Zlp Code

Keyport Central School

Keyport, New Jersey 07735

Environmental Design Inc.

5434 Kings Avenue, Sulte 101 .

Date of Notification (1) 07/18/14 CK#3176 \$20	00			Building (, !	
Agencies Notified Type Notifi			Street Ad				•		JUL	2 2 2	2014		1 E	
	idment #		City, Sta	te, Zip Co yn, New	de	11238				1				
	gency (includi cation) ellation	ng		Contact ne Fulle	rton		4.1		Telen	hone Ni	ımher		·i	
<u> </u>			FACI	LITY INFO	RMAT	ION								
Name of Facility Where Abatement is Residence	s Taking Plac	(3)					Present .	Facility (4 nool (K-12						
Street Address 7 Bloomfield Way								ochapter (per (i.e. pr				dings,	home	es,
City (5) West Orange, New Jersey 07	7052						Square I 5,000		# of F	loors		ldg. <i>A</i> 5+	\ge	
County (6) Essex			County C	Code (7) JSE ONLY)			Current Home	Use (Prio	r if being	demoli	shed)			
Name of Monitoring Firm Hired by Bu	uilding Owner	(8)	ASCM	1 No.			of Abater Corpor		tractor (9))				
Street Address						Street	Address McBride		Δ					
City, State, Zip Code						City, S	State, Zip (odland P	Code						
Project Manager for Monitoring Firm			Telephor	ne No.		Telepi	hone No.		L	icense	No.		17	
Start Date (10) 07/28/14			mpletion [Date (11)		Name	of OSHA	Monitor						-
77.00 TO 100 TO		1/14				1	Environ	mental	Labs Ir	nc.				
Occupancy Status During Abatemen Facility Closed/Vacated During		- Ar-est - 10 M	ment			(7):30:37:37:37:37:37:37:37:37:37:37:37:37:37:	Address Route	22 Wes	t					
Facility Closed/Vacated During Abatement Performed Outside Other – Describe:	of Normal Fac	ility Hou	rs		_	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	State, Zip on, New		07083					
Scope of Work (Check All That Apply	/)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	×	Renov Demo			140	>	Mini-E Glove	ontainme Inclosure bag Proci	edure				re ·	
		Is Loca						- I	(/ 4/14)	1011 1 110		Abat	emen /pe	t
Location of Asbestos-Containing Material (A	200	Norma Used So				scription						1	ype	Т
TO BE ABATED In Facility (13)		Mainten Custodial (12	Staff?		therma surfa				(Spe	ount ecify or LF)	Removal	Repair	Encapsulate	Enclosure
Attic			X	V	ermici	ulite In	sulation	-	800	SF	x	-	-	-
1st Floor		×		-		TSI				LF	X	-	 	-
										-				
None of Delivery I Mark I for I														
Name of Registered Waste Hauler Lilich Corporation			NJDEP W Hauler ID 18724		of Wa	Yards iste		Name of F G.R.O.V			nii			
City, State Woodland Park, New Jersey (7424					sal Date	20	City, State Morrisvi		nnsvlva	ania			
Completed by	Tit	e				Signatur		7	//		Date	18315		
Tatiana Kalenikova	Vi	ce Pres	sident			10	- ///	ua/c	de		7/18/	14		<u> </u>

NO CK

Date of Notification (1)			-	Name	e of Buildin	g Owner/Operator (2)					-
	14			Pe	nnsauke	n Board of Educa	ation / Job#	1405-4769 Che	ck#			
Agencies Notified Type Notif					t Address							
☐ EPA ☐ Initial ☐ Amend	1	\		169	95 Hylton	Road						
\	iea iment # <u>*</u>	1		City,	State, Zip	Code						-
☑ DCA ☐ Emerg	_		a			n, NJ 08110						
(NJAC 5:23-8) justific			-	Name	e of Contac	ot .		Telephone Num	ber			
☐ Cance	llation			Jac	ck Killion					9		
Name of Facility Add.	··	- 51	(0)	FA	CILITY IN	NFORMATION						
Name of Facility Where Abatement i AE Burling Elementary Scho	to a common property of the	Place	(3)				Type of Facility					
Street Address		_	140000				☐ Subchapter 8	(Other than K-12				
3600 Harris Avenue								rivate and comme	rcial b	uildin	gs,	
City (5)							homes, etc.)		TB	Inla A		_
Pennsauken							Square Feet	# of Floors .	Р	ldg. A	ige	
County (6)				10	1.0.1.6	TVOTATE USE ON VA		<u> </u>			E9	
Camden				Cour	nty Code (7)(STATE USE ONLY)		or if being demolis	snea)			
			Т				School					
Name of Monitoring Firm Hired by Bi	uilding C)wner	(8)	ASCM	No.	Name of Abateme						
TTI Environmental, Inc.						AbateTech, In	nc.					
Street Address						Street Address						
1253 North Church Street					-	30 Maple Ave						
City, State, Zip Code						City, State, Zip Co						
Moorestown, NJ 08057			No.	-	-	Lumberton, N	IJ 08048					
Project Manager for Monitoring Firm			Tele	phone	No.	Telephone No.		License No.				
James A. Guilardi			60	9-314	-1683	609-265-2107		00529				
Start Date (10) /	100				ate (11) 14	Name of OSHA M EMSL Analyti						
Occupancy Status During Abatemen	t (Check	only	one)			Street Address				-		- 1
☐ Facility Closed/Vacated During Er	_			ment		200 Route 13	0 North					
☐ Abatement Performed Outside of	Normal	Facilit	y Hour	s - Des		City, State, Zip Co	TO THE REAL PROPERTY.					
Time of Abatement:AM	PN	Λ/	PM-		AM	Cinnaminson						
Scope of Work (Check all that apply)					-	Onmaninoon	, 140 00077					
1							ainment with Neg	ative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			novati			☐ Mini-Encl	osure					
△ ≥ 160 St of ≥260 If			molitic	n		☐ Glovebag	Procedure	n-Friable Procedu	re			
		Is	Locat	ion			inpica () and ito	1-1 Habie 1 Toccau		atem	ont T	·mo
Location of			Vorma			Description of				_	T	1
Asbestos-Containing Material (AC	CM)		d Sole intena			stos Containing Mat	terial (ACM)	Amount	Removal	Repair	nc	Enclosure
TO BE ABATED IN Facility			todial		(i.e	., thermal systems i		(Specify	lova	<u>a</u> .	aps	OSU
(13)			(12)			surfacing, VAT, other miscellaned		SF or LF)	1 20		Encapsulate	<u>-</u>
		Yes	No	N/A							е	
Boiler Room		\boxtimes			Boiler E	Breeching		140 SF	\boxtimes			
Boiler Room					Boiler I	nsulation		85 SF				
Boiler Room		\boxtimes			Boiler F	Ribbing Gasket N	laterial	100 LF				
	25								П	П	П	П
Name of Registered Waste Hauler			N	JDEP V		Cubic Yards of	Name of Regist	tered Landfill			_	
AbateTech, Inc.			Н	auler II	O No.	Waste	G.R.O.W.S.					
City, State		- 1000-11		18750)	30						
Lumberton, NJ						Disposal Date	City, State	DA				
Editioni, No						8/15/14	Tullytown,	ra				
0 1/ 15 /5 /												
Completed By (Print or Type)	Title					Signature	1 0 -	Da	ite	1,	, 1.	
Completed By (Print or Type) Jennifer Piraine SB-41			ons (oordi	inator	Signature	Les Dia	UN Da	ite ₁ 1	7/1	4	

Date of Notification (1)		4.00	Na	me of Build	ing Owner/Operator	(2)					
	14	_	1	erizon Co	ommunications	/ 30	ob #1407-4787	Che	ck #6	3408	į
Agencies Notified Type Notifi	ication		Str	eet Address	3						
			1	00 Green	wood Ave.						
☑ DOLWD ☐ Amende			City	, State, Zip	Code			-			
	ment #		- Q		n, PA 19046				20		
DCA Emerge		uding		me of Conta		Partie Company	Talashas N				
(NJAC 5:23-8) justifica							Telephone Nu				
Cancen	alion		-	lex Baylo			1	3			
Name of Facility Where Abatement is	Takina I	N=== (2		ACILITY	INFORMATION		10				
Verizon - Elizabeth CO	raking r	riace (3)			Type of Facility	. ,				
						School (K-12	2) 8 (Other than K-1	12)			
Street Address						Other (i.e., p	rivate and comm	ercial b	uildin	as.	
1196 E. Grand Street		705				homes, etc.))			J - ,	
City (5)						Square Feet	# of Floors	В	ldg. A	\ge	
Elizabeth											
County (6)			Co	ounty Code	(7)(STATE USE ONLY)	Current Use (Pr	ior if being demo	lished)			
UNION				5		Offices					
Name of Monitoring Firm Hired by Bu	ildina Ow	ner (8)	LASC	M No.	Name of Abateme						
TTI Environmental	namy Ov	1101 (0)	7,00	IVI IVO,							
Street Address					AbateTech, I	nc.					
Market and a second sec					Street Address						
1253 North Church Street					30 Maple Ave						
City, State, Zip Code					City, State, Zip Co	ode					
Moorestown, NJ 08057					Lumberton, N	J 08048					
Project Manager for Monitoring Firm		T	elephor	e No.	Telephone No.		License No.				
Harold Baldwin			856-84	40-8800	609-265-2107		00529				
Start Date (10)	Schedul	ed Com	pletion I	Date (11)	Name of OSHA M	lonitor					
07 /16 /14	07	_ / _	18 /	14	EMSL Analyt	ical					
Occupancy Status During Abatement					Street Address						
☐ Facility Closed/Vacated During Ent		107	0		200 Route 13	O Nowth					
☐ Abatement Performed Outside of N					(1) (2) (3) (3) (3) (3) (3) (3) (3)						
Time of Abatement:AM	PM/	F	PM-	AM	City, State, Zip Co						
					Cinnaminson	, NJ 08077					
Scope of Work (Check all that apply)					N= "0 .						
≥3 sf or ≥3 if	×	Renov	ation			ainment with Neg	gative Pressure				
≥160 sf or ≥260 lf		Demo			Glovebag						
		-5.				mpted (*) and No	n-Friable Proced	ure			
			cation		No.			Ab	atem	ent T	уре
Location of			mally Solely by		Description o			12560	1	_	-
Asbestos-Containing Material (ACN TO BE ABATED	VI)		enance/	/ 130	estos Containing Ma		Amount	Remova	Repair	Encapsulate	Enclosure
IN Facility		Custodi	al Staff?	, (1.	e., thermal systems i surfacing, VAT,		(Specify SF or LF)	ove	₩.	psu	nso
(13)		(1	2)		other miscellane		31 01 11)	=		ulat	G
	Y	'es N	lo N/A	A		100				Ф	
Penthouse				Duct Ir	nsulation		70 SF		П		П
The second of th							1001				-
	L								Ш	Ш	
		1	1 [
Name of Registered Waste Hauler			, , , , ,	^o Waste	Cubic Yards of	Nome of De 1	tanad 1 a - 150		П	Ш	
				ID No.	Waste	Name of Regist					
AbateTech, Inc.			187		10	G.R.O.W.S.	Landfill				
City, State					Disposal Date	City, State					
Lumberton, NJ					7/18/14	Tullytown,	PA				
Completed By (Print or Type)	Title				Signature	A A 1	l n	ate .			
Jennifer Piraine		ration	s Coor	dinator		1. Die.	**	.7/.	-	1,1	1
SB-41	_ ope	. acioni	2001	amator	MILL	per Ina	Me	1//	0/	14	,
AY 11	+ 5		thin for	m for oabse	tos licensure exemp	V			-		

Date of Notification (1) 07 / 1	7 / 1	4			e of Buildi SDA	ng Owner/Operator (1	#C400 DAG	>= 4	05.0	30	1
							6-4781 Check	#6490 PAC	GE 1 (JF 2		
	/pe Notification	1		A CHECOMOTO	t Address							
	Amended					ont Street	- House to					
☑ DHSS	Amendment	_ /			State, Zip							
	Emergency (includin	g	-	enton, N.			Trans				
(NJAC 5:23-8)	justification) Cancellation				ry Elliott			Telephone Num	iber			
			_		-	NFORMATION		<u> </u>				
Name of Facility Where Aba	tement is Taki	ng Plac	e (3)		CILITI	IN OKINATION	Type of Facility	(4)				
West NY PS#5		•					School (K-12	37.44				
Street Address				-			☐ Subchapter	Other than K-12				
5401 Hudson Avenue							homes, etc.)	rivate and comme	rcial	uildin	gs,	
City (5)		100		NV		100	Square Feet	# of Floors	E	3ldg. A	\ge	
West New York										-5	<u> </u>	
County (6)				Cour	nty Code ((7)(STATE USE ONLY)	Current Use (Pr	or if being demoli	shed)			
Hudson							School					
Name of Monitoring Firm Him	ed by Building	Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
Whitman Companies						AbateTech, I	nc.					
Street Address 7 Pleasant Hill Rd.						Street Address						
City, State, Zip Code		-				30 Maple Ave						
Cranbury, NJ 08512						City, State, Zip Co						
Project Manager for Monitori	na Firm		Tel	ephone	No	Lumberton, No.	13 08048	Trianna Na				
Kevin Lovely	19 1 1111		31975	32-390		609-265-2107		License No. 00529				
Start Date (10)			- 23	etion Da	(c) (c)	Name of OSHA M	onitor				-	
06 /30 /1				1_/	14	EMSL Analyti	ical					
Occupancy Status During Ab						Street Address				-		
☐ Facility Closed/Vacated D					220	200 Route 13						
Abatement Performed Ou Time of Abatement:	tside of Norma	l Facilit	y Hou PM	rs - Des -	cribe	City, State, Zip Co			179-10			
III AMERICAN INC.						Cinnaminson	, NJ 08077					
Scope of Work (Check all that	t apply)					M Full Cont	ainment with Neg	ativo Proceuro				
☐ ≥3 sf or ≥3 lf			novat			☐ Mini-Encl	osure	alive Plessule				
⊠ ≥160 sf or ≥260 lf		∐ De	moliti	on		☐ Glovebag		n-Friable Procedu	re.			
		Is	Loca	tion			Inpico () and Ivol	ri nable r tocedu	1	batem	ont T	Vne
Location of		1	Norma	lly		Description of	F		-		_	
Asbestos-Containing Mate TO BE ABATED		7,745,757	intena	ely by ance/		estos Containing Mat e., thermal systems i		Amount	em	Repair	nca	nclo
IN Facility	4	Cus		Staff?	(1.6	surfacing, VAT,		(Specify SF or LF)	Removal	=	Encapsulate	Enclosure
(13)		Yes	(12) No	N/A		other miscellaned	ous)	•			late	0
Back of Building		les	No	I I	Loose	& Flaking Paint (Clean un)	130 SF				
Light Wells				 		& Flaking Paint (5,520 SF	뉴	H		
Exterior					Stucco		olean apy	3,720 SF				닒
see page 2	38300-53			$\overline{\Box}$				0,120 0.		H		
Name of Registered Waste H	auler			JDEP V	Vaste	Cubic Yards of	Name of Regist	éred Landfill	\perp \sqcup		Ш	
AbateTech, Inc.			12753	lauler ID	No.	Waste	G.R.O.W.S.					- 1
City, State		-		18750		125 Disposal Date	City, State	A SWARCH RECEIPT THE THE				
Lumberton, NJ						8/1/14	Tullytown,	PA				
Completed By (Print or Type)	Title	9				Signature	1 1	Da	ite i			
Jennifer Piraine	-2000		ons (Coordi	nator	(VAAL	lu Priac			7	10	4
SB-41						7	V	14	11	1	1	1
IAY 11	*	Do not	use th	is form	for asbest	os licensure exempt	ed activities.					

MAY 11

Date of Notification (1)				Name	e of Buildir	ng Owner/Operator (2)(_		-	1	
	14	1		A 500 00 10 10 10 10 10 10 10 10 10 10 10 1	SDA		6-4781 Check	#6490	PAGE 2	OF	2		1
Agencies Notified Type Noti	fication			Stree	t Address					- 100			-/
☑ EPA ☐ Initial			\	32	East Fro	nt Street						_	/
☑ DOLWD ☐ Amend				City,	State, Zip	Code							
	dment #		/	1	enton, N								
DCA Emerg (NJAC 5:23-8) justific		agiuain	ıg		of Conta			Telephone	Number	5)			
Cance				Transactions.	ry Elliott								
				1		NFORMATION			-				
Name of Facility Where Abatement	s Takin	g Plac	e (3)				Type of Facility	(4)		-	-192		
West NY PS#5							School (K-12						
Street Address							☐ Subchapter to ☐ Other (i.e., p			Lbui	lding		
5401 Hudson Avenue							homes, etc.)		HIHEIGIA	Dui	lullig	15,	
City (5)							Square Feet	# of Floor	s	Bld	g. Ag	ge	
West New York							T3						
County (6)				Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being de	emolished	d)			
Hudson							School						
Name of Monitoring Firm Hired by B	uildina (Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)		-		-		
Whitman Companies			, , ,			AbateTech, I							
Street Address						Street Address					-		
7 Pleasant Hill Rd.						30 Maple Ave	PO Box 25						
City, State, Zip Code						City, State, Zip Co		<u> </u>	<u> </u>	-			
Cranbury, NJ 08512						Lumberton, N							
Project Manager for Monitoring Firm			Tol	ephone	No	Telephone No.	10 000-70	License N	lo.				
Kevin Lovely)-5858	609-265-2107		00529					
Start Date (10)	Cohor	dulad (ate (11)	Name of OSHA M		00525					
	A COLORADO				14_	EMSL Analyti							
Occupancy Status During Abatemen	t (Chec	k only	one)		7	Street Address							
☐ Facility Closed/Vacated During E	ntire Pe	riod of	Abate	ment		200 Route 13	0 North						
☐ Abatement Performed Outside of						City, State, Zip Co	ode		_		-		
Time of Abatement:AM	PI	M/	PM		_AM	Cinnaminson							
Scope of Work (Check all that apply)										-			
☐ ≥3 sf or >3 If		Мρ	enovat	ion			ainment with Neg	gative Pressu	ire				
⊠ ≥160 sf or ≥260 lf			emoliti				Procedure						
In the financial control of the cont						☐ Non-Exe	mpted (*) and No	n-Friable Pro	cedure				
			s Loca							Aba	teme	ent T	уре
Location of	D84\		Norma ed Sole		A - b -	Description o			. [P.	Re	Щ	Щ
Asbestos-Containing Material (A0 TO BE ABATED	JIVI)	Ma	aintena	ince/		estos Containing Ma e., thermal systems i		Amoun (Specif	t	Removal	Repair	Encapsulate	Enclosure
IN Facility		Cus	stodial (12)			surfacing, VAT,	or	SF or LF	É) j	Va	7	lusc	sure
(13)		V	1	T	+	other miscellane	ous)			ŀ		ate	
North Side Light Well		Yes	No 🖂	N/A	Anhani	tos Paint		COLE		7			
,			1		1			60 LF	-	A	님	ᆜ	
South Side Light Well					Marie et a	tos Paint		72 LF		3	Ц	$\overline{\Box}$	
Back Walls				$ \Box$	Asbest	tos Paint		34 LF					
Name of Registered Waste Hauler			1228	IJDEP I lauler II		Cubic Yards of Waste	Name of Regis						
AbateTech, Inc.				18750		125	G.R.O.W.S	. Landfill					
City, State			-			Disposal Date	City, State	***************************************					
Lumberton, NJ						8/1/14	Tullytown,	PA					
Completed By (Print or Type)	Title)				Signature	Λ Ω		Date			20	
Jennifer Piraine	1.1.00.0	500	ions (Coord	inator	VMAL	Ken Dina	100	17/1	П	11	4	
ASB-41						Along	Hor July	me	11/1	1	11	1	
MAY 11	*	Do not	use th	is form	for asbes	tos licensure exemp	ted activities.						

Date of Notification (1)		83		Name	of Buildir	ng Owner/Operator (2)	1				
	_ /	14		Ew	ing Tow	nship Board of E	ducation / Jol	o #1407-4785	5 Check	#649	93	
Agencies Notified Type I	Notificat	tion		Stree	t Address			en include.	-		i i i i i i i i i i i i i i i i i i i	-
☑ EPA ☑ Init	ial			220	Ewingv	rille Road						
	nended	10 38		City,	State, Zip	Code						
	nendme		-		ing, NJ (
	nergenc stification	y (includir	ig		of Contac			Telephone N	lumber			
	ncellatio			5.035/0.000	nnis Net	7-75		recononer	diliboi			
	noonatio	011						L				_
Name of Equility Where Abston	ont in Ta	eleine Dine	- (2)	FA	CILITY	NFORMATION	Ton a of Facility	(4)				
Name of Facility Where Abateme		aking Plac	e (3)		8		Type of Facility	* * * * * * * * * * * * * * * * * * * *				
Antheil Elementary School	DI I						School (K-12		(_12)			
Street Address							Other (i.e., p			uildina	IS.	
339 Ewingville Road							homes, etc.)					
City (5)							Square Feet	# of Floors	BI	dg. A	ge	
Ewing												
County (6)				Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being dem	nolished)			
Mercer						**	School		500 100 500 000 000 500 * 100			
Name of Monitoring Firm Hired b	v Buildi	ing Owner	(8)	ASCM	No	Name of Abateme	ent Contractor (9)					
Environmental Connection	Action Charles of	0.00	(0)	. 100111	110.	AbateTech, I						
Street Address	n, mo.				<u> </u>	Street Address	10.			201101112		
120 North Warren Street							DO Bass 25					
						30 Maple Ave	A SANTE CONTRACTOR OF THE SANTE					
City, State, Zip Code						City, State, Zip Co						
Trenton, NJ 08608						Lumberton, N	IJ 08048					
Project Manager for Monitoring F	irm		Tele	ephone	No.	Telephone No.		License No				
Jim Frisbee			6	09-392	2-4200	609-265-2107		00529				
Start Date (10)	Sc	cheduled (Comple	tion Da	ate (11)	Name of OSHA M	onitor	-				
08/04/14		80	/ _ 0	3_/	14	EMSL Analyt	ical					
Occupancy Status During Abater	nent (C	heck only	one)			Street Address			8			
☐ Facility Closed/Vacated Durin				ment	53	200 Route 13	0 North					
☐ Abatement Performed Outside					scribe	City, State, Zip Co						
Time of Abatement:Al												
Coope of Mark (Charles III III II	-1.					Cinnaminson	, NJ 08077					
Scope of Work (Check all that ap	ply)					☐ Full Cont	ainment with Neg	ative Pressure	,			
≥3 sf or ≥3 If		⊠R	enovat	ion		☐ Mini-Enc		jative Fressure	ŧ.			
≥160 sf or ≥260 If			emoliti	on		☐ Glovebaç						
						Non-Exe Non-Exe	mpted (*) and No	n-Friable Proce	edure			
34			s Loca Norma						Ab	ateme	ent T	ype
Location of Asbestos-Containing Material	(ACRA)	2.00	ed Sol		Anha	Description o		Amount	₽ R	Re	E	m
TO BE ABATED	(ACIVI)	M	aintena	ince/		estos Containing Ma e., thermal systems i		(Specify	Remova	Repair	car	Clo
IN Facility		Cus	stodial	Staff?		surfacing, VAT,	or	SF or LF)	Val	~	Encapsulate	Enclosure
(13)		1	(12)	T	-	other miscellane	ous)				ate	
		Yes	No	N/A								
Classroom #60			\boxtimes		Floor T	ile & Mastic		774 SF				
Classroom #60					Cove B	Base & Mastic		120 LF	\boxtimes			
Classroom #60			\boxtimes		Chalk/F	Pin Boards & Mas	stic	6 each	\boxtimes			
Classroom #60			\boxtimes		Sink w	ith Mastic		1	\boxtimes			
Name of Registered Waste Haule	er		1000	JDEP !		Cubic Yards of	Name of Regis	tered Landfill		3 - 0	7.0	
AbateTech, Inc.			F	18750 18750		Waste 10	G.R.O.W.S	Landfill				
City, State				10/50	,	Disposal Date	City, State					
Lumberton, NJ						08/08/14	Tullytown,	PA				
		Title					. any town,		Det-	10		
Completed By (Print or Type)		Title			• 0.000 • 0.000	Signature) A :	e .	Date	1		
Jennifer Piraine		Operat	ions	Joord	inator	Chris	ur rua	me	7/1	011	4	
SB-41					2 9)	,			•		
MAY 11		* Do no	t use th	us form	tor asbes	tos licensure exemp	ted activities.					

Date of Notification (1)					Name	of Buildin	g Owner/Operator (2)									
07/18		14	14 Ewing Township Board of Education / Job #1407-4785 Check #6														
Agencies Notified Typ	pe Notifi	ication			Street	Address	-					-					
	Initial				220	Ewingv	ille Road										
	Amende				City, S	State, Zip (Code		A STATE OF THE STA			7.					
	Amend				Ew	ing, NJ 0	8638										
	Emerge		Cludin	y	Name	of Contac	t		Telephone Nun	nber		7.000					
	Cancell				Der	nnis Nett	leton										
				T	FA	CILITY IN	IFORMATION						- 100				
Name of Facility Where Abate	ement is	Taking	Place	e (3)				Type of Facility	(4)								
Francis Lore Elementa	ry Sch	ool						School (K-12	2)								
Street Address								Subchapter 8	Other than K-1	2)	محالمان						
13 Westwood Drive						Other (i.e., private and commercial building homes, etc.)											
City (5)								Square Feet	# of Floors	Bl	dg. A	ge					
Ewing								**									
County (6)	-				Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pri	ior if being demol	ished)		_					
Mercer								School	——————————————————————————————————————								
Name of Monitoring Firm Hire	d by Bu	ilding (Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)									
Environmental Connec				. Arrodon			AbateTech, I										
Street Address							Street Address										
120 North Warren Stree	et						30 Maple Ave	e. PO Box 25									
City, State, Zip Code	-						City, State, Zip Co	ode									
Trenton, NJ 08608							Lumberton, NJ 08048										
Project Manager for Monitorin	ng Firm			Tele	phone	No.	Telephone No.		License No.								
Jim Frisbee	-			6	9-392	-4200	609-265-2107 00529										
Start Date (10)		Sched	luled C	Comple	tion Da	n Date (11) Name of OSHA Monitor											
08/_04_/_1	4	_ (08	08	3_ /	14	EMSL Analyt	ical									
Occupancy Status During Aba	atement	(Checl	k only	one)	68 8	2	Street Address				-						
☐ Facility Closed/Vacated Di					ment		200 Route 13	0 North									
☐ Abatement Performed Out	77					cribe	City, State, Zip Co			-							
Time of Abatement:	_AM	PI	VI/	PM		AM	Cinnaminson										
Scope of Work (Check all that	t apply)																
			N D					tainment with Neg	gative Pressure								
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 				enovat emolitic			☐ Mini-Enc	losure g Procedure									
				estromana Li			Non-Exempted (*) and Non-Friable Procedure										
			1 2	Loca						Ab	Abatement Typ						
Location of				Norma ed Sole			Description of		A	R	Re	ш	Ē				
Asbestos-Containing Mate TO BE ABATED		IVI)	0000000	intena			stos Containing Ma		Amount (Specify	Removal	Repair	icap	clos				
IN Facility	-		Cus	todial	Staff?	1	surfacing, VAT	or	SF or LF)	val	7	Encapsulate	Enclosure				
(13)			Vee	(12) No	N/A	-	other miscellane	ous)				ate	150				
Cl			Yes			Ch-II-//	Nin Danada and B	04:-	6 each								
Classroom #16							Pin Boards and N										
Classroom #17								/lastic	6 each		Ш	Ш	Ш				
Name of Registered Waste Ha	auler				JDEP V		Cubic Yards of	Name of Regis	tered Landfill								
AbateTech, Inc.	W01V678			10000	lauler II	O No.	Waste	G.R.O.W.S									
City, State					18750)	10 Disposal Date	City, State		51000			-				
Lumberton, NJ							08/08/14	Tullytown,	PA								
Completed By (Print or Type)		Title		-			Signature	1 0		ate ı							
Jennifer Piraine				ione	Coord	inator	1 ~ 1 A	don Dia.	E 1007 2		0	11.7					
- 1825-1811/1911/19 - NO. 180 - 1811/1911/1911/19		0	heidi	10115	Joord	mator	Phi	per rula	M	111	0	17					
SB-41 MAY 11		*	Do not	use th	is form	for asbesi	os licensure exemp	nted activities.		•							
NAME OF THE PARTY				0.5005752535	19/0 A110 THE R.	7457608 11 2507 150 150 150 150											

Date of Notification (1)				Nar	Name of Building Owner/Operator (2)										
07/	18 /	14		Ewing Township Board of Education / Job #1407-4785 Check #6494											
Agencies Notified	Type Notific	cation		Stre	eet Address			1	12.0	-					
⊠ EPA				2	20 Ewing	ville Road									
⊠ DOLWD	Amende			City	, State, Zip	Code					7				
☑ DHSS □ DCA	Amendr		ding	E	wing, NJ	08638									
(NJAC 5:23-8)	justificat		ung	Nar	ne of Conta	ict		Telephone Num	ber	-					
	☐ Cancella	0.000		D	ennis Net	ttleton									
					ACILITY I	NFORMATION									
Name of Facility Where A			ace (3))			Type of Facility	ity (4)							
Gilmore Fisher Mid	dle School						School (K-12			133					
Street Address							(Other than K-12) ivate and commercial buildings,								
1325 Lower Ferry R	oad						Trate and common								
City (5)					-		Square Feet	# of Floors	loors Bldg. Age						
Ewing															
County (6)				Co	unty Code	(7)(STATE USE ONLY)	Current Use (Pri	or if being demolis	shed)						
Mercer							School								
Name of Monitoring Firm	Hired by Buil	lding Own	er (8)	ASC	M No.	Name of Abateme	ent Contractor (9)	***********				7			
Environmental Con	nection, In	c.				AbateTech, I	nc.								
Street Address						Street Address									
120 North Warren S	treet					30 Maple Ave	e. PO Box 25								
City, State, Zip Code						City, State, Zip Co									
Trenton, NJ 08608						Lumberton, N	ton, NJ 08048								
Project Manager for Monit	toring Firm		T	elephor	e No.	Telephone No.	. License No.								
Jim Frisbee				609-39	92-4200	609-265-2107 00529									
Start Date (10)		Schedule	d Com	pletion (Date (11)	Name of OSHA M	lonitor	-	- 100						
07 /28 /	14	08	_ /	01_/	_14	EMSL Analyt	ical								
Occupancy Status During	Abatement ((Check on	ly one)	Street Address										
☐ Facility Closed/Vacate						200 Route 13	0 North								
Abatement Performed						City, State, Zip Co									
Time of Abatement:	AIVI	PIVI/_	P	'IVI	_AM	Cinnaminson	, NJ 08077	84							
Scope of Work (Check all	that apply)					□ Eull Cont	ainment with Neg	rative Pressure			1				
≥3 sf or ≥3 If		\boxtimes	Renov	ration		☐ Mini-Enc		alive Flessure							
≥160 sf or ≥260 lf			Demo	lition		☐ Glovebag		. Fishle December	2200 00						
			la la		-	☑ Non-Exe	mpted (*) and Not	n-Friable Procedu	7						
Location	of			cation nally		Description o	f			atem		1			
Asbestos-Containing N				olely by	Asb	estos Containing Ma	50 1940/ 50-045/5/7/68	Amount	Ren	Repair	Enc	Enc			
TO BE ABA	CONTRACTOR OF THE PARTY OF THE	7210		nance/ al Staff?	, (i.	e., thermal systems i		(Specify	Removal	air.	aps	Enclosure			
IN Facility (13)	У			2)		surfacing, VAT, other miscellane	e Tai 025	SF or LF)	<u>a</u>		Encapsulate	lie			
(XXXXX)		Ye	es N	lo N/	4						Ф				
Classroom #121 and #	#122				Floor	Γile and Mastic		1,632 SF							
Classroom #121 and #	#122				Chalk/	Pin Board Mastic		18 each							
Classroom #121 and #	#122				Cove E	Base Mastic		232 LF							
Name of Registered Waste	e Hauler			100000	Waste	Cubic Yards of	Name of Regis	Registered Landfill							
AbateTech, Inc.					ID No.	o. Waste G.R.O.W.S. Landfill									
City, State				18750 15 Disposal Date City, State											
Lumberton, NJ						08/01/14	Tullytown,	PA							
Completed By (Print or Ty	pe)	Title				Signature	1 1	Da	te	1					
Jennifer Piraine		0.0000000000000000000000000000000000000	ation	s Coor	dinator	MALL	Ken Yinni		1110	2/1	U				
A SR-41		- 601				Privoc	per tual	14	111	11					

ASB-41 MAY 11 * Do not use this form for asbestos licensure exempted activities.

Date of Notification (1)	200	Name of Building Owner/Operator (2)														
/	18 /	14			Ew	ing Tow	nship Board of E	ducation / Jol	#1407-4785	Check	#64	92				
Agencies Notified	Type Notific	cation			Stree	t Address			1	- 22						
10 To 10	Initial				220	Ewing\	ille Road									
(A.S.)	☐ Amende				City,	State, Zip	Code									
⊠ DHSS	Amendn	and the same of the		-	1 300	ing, NJ (
☐ DCA (NJAC 5:23-8)	☐ Emerge justificat		icluain	g		of Conta			Telephone Nun	nber	100					
L 25	☐ Cancella					nnis Net			Telephone Hamber							
					ΕΛ	CILITY	NFORMATION	T	L.,	_						
Name of Facility Where Ab	atement is	Taking	n Diac	a (3)	ГА	CILITI	NFORMATION	Type of Facility	(4)							
Ewing High School	atement is	raking	g Flac	e (3)				School (K-12	0.000							
Street Address					-	1. 2.00000000) 3 (Other than K-1)	2)						
900 Parkway Avenue								Other (i.e., p	Other (i.e., private and commercial buildings, homes, etc.)							
- Control of the cont									(5)							
City (5)								Square Feet	# of Floors	B	ldg. A	.ge				
Ewing																
County (6)					Cou	nty Code (7)(STATE USE ONLY)	Current Use (Prior if being demolished)								
Mercer								School								
Name of Monitoring Firm H			Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)	1							
Environmental Conn	ection, In	C.					AbateTech, I	nc.								
Street Address						104501	Street Address									
120 North Warren St	reet						30 Maple Ave	. PO Box 25								
City, State, Zip Code							City, State, Zip Co	ode								
Trenton, NJ 08608							Lumberton, N	J 08048								
Project Manager for Monito	ring Firm			Tele	phone	No.	Telephone No.	License No.								
Jim Frisbee				6	09-392	-4200	609-265-2107	7 00529								
Start Date (10)	- 1	Sched	uled (Comple	tion Da	ite (11)	Name of OSHA M	lonitor								
07/28/	1.0					14	EMSL Analyti	ical								
Occupancy Status During A			- 31 (64	- 10			Street Address									
☐ Facility Closed/Vacated					ment		200 Route 13	0 North								
☐ Abatement Performed C						cribe							_			
Time of Abatement:							City, State, Zip Co									
Scope of Work (Check all the	ant anni A						Cimaminson	, NJ 00077								
Scope of Work (Check all th	іат арріу)						☐ Full Cont	ainment with Neg	ative Pressure							
≥3 sf or ≥3 If				enovati			☐ Mini-Enc	losure	ative i ressure							
≥160 sf or ≥260 If			☐ De	emolitic	on		Glovebag		. E : 11 B							
		-	1.	. 1			⊠ Non-Exe	mpted (*) and No	n-Friable Procedu	_						
Location of			1000	s Locat Norma		1	D			Ab		ent T	ype			
Asbestos-Containing Ma		A)	Use	ed Sole	ely by	Asbe	Description o estos Containing Ma		Amount	Re	Repair	E	En			
TO BE ABATI				aintena todial			e., thermal systems i	nsulation,	(Specify	Removal	bair	aps	Enclosure			
IN Facility (13)			Cus	(12)	Stall?		surfacing, VAT, other miscellane		SF or LF)	<u>a</u>		Encapsulate	ure			
(13)			Yes	No	N/A		Other miscellane	ous)				e e				
Classroom A110					+	Elear T	ile & Mastic		644.65		1	\vdash				
			Ц_		빝				644 SF			Ш	닏			
Classroom A110	Classroom A110					Cove E	Base & Mastic		104 LF	\boxtimes						
-				-	-					+-						
Name of Registered Waste	Hauter		П			Nest	Out a Vand	Name (5)	land I dev			Ш	Ш			
	nauler			1303	JDEP \ auler II		Cubic Yards of Waste	Name of Regis								
AbateTech, Inc.					18750		10	G.R.O.W.S.	Langrili							
City, State							Disposal Date	City, State	2000							
Lumberton, NJ							08/01/14	Tullytown,	PA							
Completed By (Print or Type	e)	Title				1000	Signature	a n	Di	ate .	00/7.=7A		S			
Jennifer Piraine	~	01	perat	ions (Coordi	inator	Jenny	ber frais	(I-1	10	IU					
ASB-41							CENTO	the country	u	110	117					
MAY 11		* L	Do not	use th	is form	for asbes	tos licensure exemp	ted activities.								

Date of Notification (1)					Name of Building Owner/Operator (2)											
07/1	8 /	14	Twp. of Union Board of Education / Job #1407-4788 Check #6491													
Agencies Notified T	ype Notific	ation			Street	Address										
	Initial				236	9 Morris	Avenue, PO Bo	x 3139								
	Amende				City, S	State, Zip	Code		-				//s===			
□ DHSS □	Amendm	-	. 1 12		Uni	on, NJ 0	7083-1939									
DCA (NJAC 5:23-8)	Emerger justificat		auding	3	Name	of Contac	ct		Telephone N	umber						
	Cancella	C. 1000			Tor	n Wiggii	ns									
					FA	CILITYII	NFORMATION		L			-				
Name of Facility Where Aba	tement is	Taking	Place	(3)			ti orani, triore	Type of Facility	(4)			_				
Burnet Middle School				(-)				School (K-12								
Street Address								☐ Subchapter 8	(Other than K	-12)						
1000 Caldwell Avenue								Other (i.e., pl homes, etc.)		mercial b	uilding	js,				
City (5)								Square Feet	# of Floors	TR	Ida A	ne en	_			
Union								Oquale 1 eet	# 011 10013	Bldg. Age						
					C	to Cada /	ZVOTATE LICE ONLY	Current Use /Dr	ior if boing dom	aliahad\			y-12-			
County (6)					Cour	ity Code (7)(STATE USE ONLY)	Current Use (Prior if being demolished) School								
Union				(8)	10014	N.I.							-			
Name of Monitoring Firm Hi		lding O	wner	(8)	ASCM		Name of Abateme									
Omega Environmenta	(i				0012	20	AbateTech, I	ı, Inc.								
Street Address							Street Address									
280 Huyler Street							30 Maple Ave									
City, State, Zip Code							City, State, Zip Co									
South Hackensack, N							Lumberton, N	J 08048	-							
Project Manager for Monitor	ing Firm		20 12 - 10.	Tele	phone	No.	Telephone No.									
Geiser Fajardo				20	01-489	-8700	609-265-2107		00529							
Start Date (10)		Sched	uled C	omple	tion Da	te (11)	Name of OSHA N	Ionitor								
08 /04 /	14	0	8_ /	08	<u> </u>	14	EMSL Analyt	ical								
Occupancy Status During Al	batement ((Check	only	one)			Street Address		12							
☐ Facility Closed/Vacated [During Ent	ire Per	iod of	Abate	ment		200 Route 13	0 North								
☐ Abatement Performed O							City, State, Zip Co	ode								
Time of Abatement:	AM	PN	1/	PM		AM	Cinnaminson									
Scope of Work (Check all th	at apply)		44-1-1-1	81-	-		4									
1 E	1, 3,						45 mm 10 mm	ainment with Neg	ative Pressure							
≥3 sf or ≥3 lf≥160 sf or >260 lf				enovat			☐ Mini-Enc									
△ ≥ 100 Si 0i ≥200 li				HIOHER	J11			mpted (*) and No	n-Friable Proce	edure						
THE STATE OF THE S			ls	Loca	tion				7	Al	atem	ent T	ype			
Location of				Norma	-		Description of				1		T.			
Asbestos-Containing Ma		Л)		ed Sole intena	-		estos Containing Ma		Amount	Removal	Repair	Encapsulate	Enclosure			
<u>TO BE ABATE</u> IN Facility	<u>.U</u>			todial	Staff?	(1.0	e., thermal systems surfacing, VAT		(Specify SF or LF)	oval	=-	nsd	Sur			
(13)				(12)			other miscellane					late	0			
	2		Yes	No	N/A											
Classroom 229				\boxtimes		Floort	ile and Mastic		700 SF							
Classroom 231			П			Floor f	ile and Mastic		700 SF		П	П	Г			
- 1466100H1 201					1	1 1001 1	una mastro		10001		1		-			
, = D							1000 8600 7500 8000 8000					Ш	L			
Name of Registered Waste I	Hauler			N	IJDEP \		Cubic Yards of	Name of Regis	tered Landfill		1					
AbateTech, Inc.				F	lauler II		Waste	G.R.O.W.S								
City, State					18750)	10 Disposal Date	City, State								
Lumberton, NJ							08/08/14	Tullytown,	PΔ							
NOT ALL TO SELECT THE PARTY OF		1						I difytown,	. ^	D.:						
Completed By (Print or Type)	Title					Signature	1 0.	•	Date	. 1.					
Jennifer Piraine		O	oerat	ions (Coord	inator	CRICKI	An Tua	ine	1/18	3/10					
SB-41		* -	00 204	use #	ic form	for achor	toe licensure avenu	U			L					
ASB-41 MAY 11		* L	o not	use th	nis form	for asbes	stos licensure exemp	oted activities.			ă.					

CK 1963904117

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:20/N.J.A.C. 7:26-2.12)

Date of No 07/16/201	otification (1):		Name	of Bui	lding Ow	ner/Operator (2) t Board of Education	n								
Agencies	Type Notifica	tion		Addres					-1.		ar k				
Notified	[Initial		31 Ha												
□ EPA	☐ Amended				ip Code:										
□ DEP	Amendment#:	500	Morris		NJ 0796	0		Telepho	na Num	hart					
□ DOL	☐ Emergency (including				itact: e A Kelly	,		Telepho	He Minn						
⊕ DOH ⊕ DCA	justification Cancellation		1V13. C.	misun	ARCII										
	A					FACILITY INFO	DRMA'	TION							
Name of F	acility Alexar	nder Ha	milton I	Elemen	tary Sch	ool	Type	of Facility (4):							
24 Mills S	Street							nool (K-12) ochapter 8 (Other than	K-12)						
City/ (5)		Count	y (6):			y Code (7):	ouildings, ho	homes, etc.)							
Morristov	vn	Morri	S		07960		Square Feet: # of Fl								
							Dida	Λ α α							
								g. Age ent Use : School							
Name of N	Monitoring Fir	m Hire	d by Bu	ilding	Owner:	ASCM No.:		e of Abatement Con	(9):						
ENVIRO	NMENTAL C	CONNE	CTION	, INC.		00030	Ane	x Development,							
Street Add	dress:					1		et Address:	Lii Ci						
	h Warren Str	reet													
							e					West.			
City, State	City, State, Zip Code:														
Trenton,	NJ 08608						Par	amus, NJ 07652							
	anager for Mo	onitoring	g Firm:			Telephone No.:	Tele	phone No.:	Lic	ense No.:					
Roland	C. Jones					609-392-4200	(973) 350-0101	012	15					
Start Date 07/28/14	:(10):	134	Schedule 07/15/1		npletion	Date (11):	100000000000000000000000000000000000000	ne of OSHA Monito ro Analytical Labora							
	Status During				one)		Stree	et Address:							
	Closed/vacated I					t		West 36 Street							
Describe:	nt Performed O	utside of	Normai	racing	nours			, State, Zip Code: York, NY, 10018							
☐ Other Describe:															
Scope of W	Vork (Check all	that appl	y):					□ Ful	l Contoir	nment with	Mogn	tiva Dr	accura	8	
□≥3 sf o □≥160 s	$r \ge 3 \text{ lf}$ f or $\ge 260 \text{ lf}$				□ Reno	vation olition		□ Mir	ni-Enclo vebag P	sure rocedure					
			To	Locat	ion			Ŀ-Non	-Exempt	ed (*) and l	Non-Fr		ement		
1	Location of			Vorma		De	escript	ion of					ре		
Asbestos-	Containing M	aterial		d Sole		Asbestos Con	taining al syste	Material (ACM) ems insulation,				1.	ш	-	
	(ACM)			intena ustodi		surfa	icing, '	VAT, or	I	Amount	Removal	R	nca	Enclosure	
	BE ABATED)		Staff		other	misce	llaneous)	(Specify	no	Repair	aps	los	
	IN Facility (13)			(12)					S	F or LF)	val	Η.	Encapsulat	ure	
			Yes	No	N/A		4	and the same of th	*	-	100	-			
Window	/S			X	-	Window Caulk	ing		182	2	*				
			<u> </u>									-			
						_					-	-			
27	D		1		NIDE	P Waste Hauler ID	No ·	Cubic Yards	NI.	me of Regi	otomad	londe	11.		
Name of TRI-STA	Registered Wa TE TRANSFE	aste Hai ER ASS	iler: OC., IN	IC.	NJDE	P Waste Hattlef ID	140,.	of Waste: 30	MI	NERVA			ii. ERPR	ISES	
City, Stat	a:		_	Dien	osal Date	a.·		City, State:	- AS	SOC, INC.	8				
Bronx, N				Disp	osai Dali	v.		Waynesburg, OH	44688						
Completed By: Title:					Signa	ature:		Date:	1.4						
Sylvester Oracgbunam President						_ <	_ New		07/16/20	114					

CZ# 2667

Date of Notification (1)		Name of Building Owner / Operator (2)										OUC-See					
7/18/14	-4:		Trenton Board of Education Street Address														
Agencies Notified Type Notific	ation	- 1					·44										
		-				pect S											
☐ DEP ☐ Initia			A 1171			Zip C											
		-				J 086	38	-			T-I		- N				
	rgency cellation	1				ntact t O. C	ollins		ner		rei	epho	ne N	umn	Αľ		
			F	AC	ILIT	Y INFO	ORMATION			_	-						
Name of Facility Where Abatem	ent is Taking P	lace (3	3)				Type of Facilit	ty (4)									
Woodrow Wilson ES		. AR	138				School (k	(-12) NC	ON SUB 8								
Street Address						277727	Subchapt	ter 8 (Oth	her than K-1	2)							
175 Girard Ave							Other (i.e	. private	& commerc	ial buildi	ings,	hom	es, e	tc.)			
							Square Feet	#	of Floors		Bldg	J. Age	е				
City (5)	County (6)	Co	unty	v Co	ode (7)	70,000		2		60+						
Trenton	Mercer		oz. vero.	11000000			Current Use (Prior if be	eina demolis	shed)	<u> </u>						
	11101001						School		oning dominant	J.1.0 u /							
Name of Monitoring Firm Hired b	or (8)		_	100	M No.	Name of Abat	omont C	ontractor (0)					-				
Environmental Connection	iei (0)			ASC	IVI INO.	Bristol Envi)								
Street Address			-			Street Addres	_										
120 North Warren Street						1123 Beave											
City, State & Zip Code					-		City, State & Z										
Trenton, NJ 08010							Bristol, PA										
Project Manager for Monitoring F	irm	Telep	ohor	ne N	lumb	er	Telephone Nu		License	Nun	ber						
Richard Beach		609-					(215)788-60		00509								
Scheduled Start Date (10)	Scheduled Cor	npletio	on D	ate	(11)		Name of OSHA Monitor										
7/28/14		8/28			. ,		Bristol Envi	ronmer	ntal Inc.								
Occupancy Status During Abate	ment (Check or	nly on	e)		_		Street Addres										
Facility Closed/Vacated				bat	eme	nt	1123 Beave	r Street									
Abatement Performed O	utside of Norm	al Ho	urs ·	- 7a	am to	3pm	City, State & Z	Zip Code									
Describe: 7 AM to 3:	30 PM					•	Bristol, PA										
Facility Occupied During	Abatement						Access to the part of the part										
Scope of Work (Check all that ap	oply)								/////////////////////////////////////								
0,000								_	ull Containm		Neg	ative	Pres	sure)		
≥3 sf or ≥3 lf		\boxtimes			vatio		n		ini-Enclosur								
≥160 sf ≥260 lf			D	emo	olition	1		2	love Bag Pro								
									on-Exempte								
Location of			Loc				Description	of				Aba	tem	ent T	ype		
Asbestos-Containin Material (ACM)	g	Norr	nally olely				Asbestos-Cont Material (AC	Specify				m					
TO BE ABATED		Main					(i.e., thermal sy	F or LF)		R	ZI	Encapsulat	En				
in Facility		Custo				i	nsulation, surfac			Remova	Repair	aps	Enclsoure				
(13)			(12	2)			or other miscella				1	vai	₩.	ulat	ure		
		Yes	No	0	N/A		,							O	10 1000		
Exterior Windows		П	X	1		٧	Vindow Caulk/	glazing	4	760 LF		\boxtimes	П	П	П		
		Ħ			Ħ								Ħ	T	n		
		П	Г	1	n							Ī	П	Ħ	n		
		Ħ	T	it	Ħ			10000				Ħ	Ħ	Ħ	Ħ		
		Ħ	F	it	Ħ							Ħ	Ħ	Ħ	Ħ		
	Ħ	F	1	Ħ							H	Ħ	Ħ	Ħ			
Name of Registered Waste Haul		IN	ULV	FP V	Vaste	Cubic Yards	Name o	f Registered	Landfill								
3	2.70		10.52				of Waste										
Bristol Environmental, Inc. 71870							120 cu yds	GROW	S Landfill								
City, State				200	W		Disposal Date	City, Sta						1000			
Bristol, PA							8/2/14		ville, PA								
Completed By (Print or Type)						Signature Date											
Gino Pizzigoni Project							H. D.	8 3	. 1:0		17	7/18	/14				
Mana						r	Bino Pry	jegox	17				s 8 5				

Page 1 of 1 Check #1302

Date of Notification (1) 7-17-2014					Building C		+		-									
Agencies Notified	Type Notification			Street Ac														
EPA DEP	Initial		180		emoine		ie			-39								
DEP DOL	Amended Amendment			City, Stat Fort Le	e, Zip Cod e, NJ	ae												
DOH DCA	Emergency justification) Cancellation		1	Name of Jack D	Contact eNichilo		70			Tel	ephone Nu	mber						
				FACIL	ITY INFO	RMATI	ON											
Name of Facility Where A Fort Lee School #4	Abatement is Takin	g Place (3)						×	of Facility (4) School (K-12)									
Street Address 1193 Anderson Ave								n	Subchapter 8 Other (i.e. privetc.)				lings,	home	es,			
City (5) FORT LEE				70.				Squa	re Feet 00 +	# o	f Floors		idg. A 0+	ge				
County (6) Bergen				County C	ode (7) ISE ONLY)			Curre	ent Use (Prior ool	if bei	ng demolis	hed)						
Name of Monitoring Firm Westchester Enviro		Owner (8)		ASCM	No.		1.0	of Aba Group	tement Contr , Inc	actor	(9)							
Street Address 307 North Walnut S							Street	Addre	<u> </u>									
City, State, Zip Code West Chester, PA 1				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			City, S	State, Z	ip Code dale, NJ 07				*					
Project Manager for Mor			100	Telephor	ne No.		Telepi	none N)710-	0.		License N	lo.						
Start Date (10)		Scheduled	d Con				Name	of OS	HA Monitor		01001							
7-18-2014 Occupancy Status Durin	a Abatamant (Cha	7-20-20						Addre		-				_				
(4.000)				ant.					ourg Tpke									
Facility Closed/Vac Abatement Perform Other – Describe:	ed Outside of Norr	nal Facility I	Hours	rs City, State, Zip Code														
Scope of Work (Check A	II That Apply)			Bloomingdale, NJ 0740														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emolit	valion					Full Containment with Negati Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-F									
		1	280					⊒ No	n-Exempted	(*) an	d Non-Fria	Die Pro	0.50 W/s	ement				
	1		ocati ormal										17.77	ре				
Location Asbestos-Containing TO BE AB In Facil (13)	Material (ACM) ATED	Used Mair Custo	Sole	ly by nce/		tos Con thermal surfa	scriptior taining N system cing, VA niscellar	Materia s insul AT, or		(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure			
Room	6	res	X	IN/A	Ben	ch & A	ir Cell	Insul	ation	1	20 SF	X						
		+								-		-						
Name of Registered Was	ste Hauler			IJDEP W			Yards		Name of R	egist	ered Landfi	11						
GL Group, Inc				lauler ID 033034		of Wa	The state of the s											
City, State Bloomingdale, NJ	00000					Dispo TBD	sal Date	•	City, State Morrisvill	le, P								
Completed by Elena Solakov		Title Presid	lent	nt Signature Ele					lesm Soli	Me		ate -17-20	014					

EDS14-226-3

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

Page 1 of 1 Check #1303

Date of Notification (1) 7-18-2014	Name of Building Owner/Operator (2) Ft. LEE SCHOOL DISTRICT															
Agencies Notified	Type Notifica	ition		Street A			1930-103				* * *.					
EPA DEP DOL	Initial Amende				te, Zip Co							,			100	
DOH DCA		ncy (including tion)		Name of	Contact OeNichile	 0				Tele	ephone	Num	ber			
N DOM	- Carlotti			FACI	LITY INF	ORMATI	ON			<u> </u>		-				-
Name of Facility Where Fort Lee School #		aking Place (3	3)						of Facility (4 School (K-12	3.6						
Street Address 1193 Anderson Av	/e							R	Subchapter Other (i.e. pretc.)	8 (Oth				lings,	home	es,
City (5) FORT LEE									re Feet	# o	Floors		7.63	ldg. <i>A</i> 0+	ge	
County (6) Bergen		*			Code (7) USE ONLY)		Curre	ent Use (Prio	r if bei	ng demo	olishe	ed)			
Name of Monitoring Fir Westchester Envir		ding Owner (8)		ASCN	No.		Committee of the contract of	of Aba Group	(9)	П						
Street Address 307 North Walnut Street								t Address Hamburg Tpke								
City, State, Zip Code West Chester, PA 19380					Special Control				tate, Zip Code mingdale, NJ 07403							
Project Manager for Mo		Telepho	ne No. 31-7545		Telepl	hone N)710-	0.		Licens 01084							
Start Date (10) 7-25-2014		Schedul 7-27-2		mpletion	Date (11)		Name	<u> </u>	HA Monitor							
Occupancy Status Duri	ng Abatement (Addres				-				
Facility Closed/Va Abatement Perfor Other – Describe:	cated During Er	ntire Period of	Abater						ourg Tpke							
Other – Describe:						_			dale, NJ 0	7403						
Scope of Work (Check	All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Managed .	Renov Demoli				Full Containment with Negative Pr Mini-Enclosure Glovebag Procedure									
		le le	Loca	tion				Non-Exempted (*) and Non-f							emen	t
Location	on of		Norma	lly		De	scription	otion of				á		Ту	ре	т
Asbestos-Containir TO BE A In Fac (13	ng Material (ACN BATED cility	Ma Cus	(12)	ance/ Staff?		Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)							Removal	Repair	Encapsulate	Enclosure
		Yes	No X	N/A												
Room 6					Ber	nch & A	ir Cell	Insul	ation	12	20 SF		X			
Name of Registered W	aste Hauler		1				waste GROW			0.00	ered Lan	dfill				
City, State Bloomingdale, NJ				Disposal Date TBD					Oate City, State Morrisville, PA							
Completed by Title Elena Solakov Preside											Dat 7-1	e 8-20)14			