NOCK

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

RECEIVED

Date of N 07/20/2	Notification (1) 2015					Building C d Towns				/	2015 J	IUL 2.	3 £	H	R: ;	7	
350	s Notified	Type Notification			Street Ac 260 Ea	idress ast Bay A	Avenu	ıe		4	11	1 1 1			J- ‡	T	
X EPA X DEF X DOI	P	Initial Amended Amendment		(City, Stat	e, Zip Coo awkin, N	de		8050		Ġ.	LICE	NS/	NG	HO		
× DO	201	justification) Cancellation			Name of Nicola	Contact Reid					Tele	phone i	Numb	er			
_					FACIL	ITY INFO	RMAT	ION									
		Abatement is Takin unity Center	g Place (3))						of Facility (4 School (K-1)							
Street Ad 775 Ea	^{ddress} ast Bay Aven	ue							×	Subchapter Other (i.e. p etc.)				build	ings,	home	ıs,
City (5) Staffor	rd									re Feet	# of 1	Floors		200	dg. A 950	ge	
County (County C	ode (7) ISE ONLY)				nt Use (Pric					on		
Name of	Monitorina Firm	Hired by Building	Owner (8)		ASCM	No.		Name		tement Con							
Enviro	Vision Consu	얼마나 없는데 하다면 하시는 것이 얼마나 하나 하나 하다.			0007			Incin		ntracting,							
Street Ac 20-21		ad, Building 35	E							n Avenue	e, Unit	365					
	te, Zip Code awn, New Jer	rsey 07410					700000	5.44		ip Code ew Jersey	0701	2					
Project N Fred L	Manager for Mor arson	itoring Firm			Telephor 973-63	ne No. 36-9145		5.0000000000000000000000000000000000000	none No 450-9			Licens 0103					
Start Dat	100 02		Schedule		pletion [Date (11)				HA Monitor ntracting,	Inc.						
Occupan	ncv Status Durin	g Abatement (Chec	k Only On	e)					Addres	858	<u> </u>						_
-		ated During Entire I			ont					on Avenu	e, Uni	t 365					
Aba		ed Outside of Norn						E 53		ip Code ew Jersey	0701	2			.,		
Scope of	f Work (Check A	II That Apply)															
	sf or ≥3 If 60 sf or ≥260 If		-	tenovat emoliti	100000000			×	Mir Glo	I Containme ni-Enclosure ovebag Prod n-Exempted	e cedure					9	
			le	Location	on										Abate	ment	
	Location	n of	N	iormall	У		De	escription	of						Ту	pe	
Asbe		Material (ACM) ATED ity	Mai	d Solel intenar odial S (12)	nce/		os Cor therma surfa	ntaining Nataining Nataining Nataining, VA	Material s insula T, or	ation,	(S	mount specify or LF)		Remova	Repair	Encapsulate	Enclosure
			Yes	No	N/A											te	· w
	Ground	Floor		X		Ext	terior	Siding	Shing	les	3,5	95 SF		X			15000
	Ground			X		Во		asket Ir				SF		X			
	Ground	Floor		X			9x9 \	/AT Flo	oring		11	5 SF		X			
Name of	Registered Was	ste Hauler		77/2	JDEP W		15/33/10/37/19	Yards		Name of	Registe	red Lan	ndfill				
Atlantic	Carting			10000	auler ID J 691	No.	of Wa	Y		IESI PA		lehem	Lan	dfill	Cor	٥.	
City, Sta Wayne	_{te} , New Jersey	07470					Dispo TBD	osal Date		City, State Bethleh		PA					
Complet	ed by		Title					Signatur	e (1			Date	2			
Milena	Zoric		Exec	utive	Directo	or		M	A	5	(07/	20/2	2015		

(K 7034

Date of Notification (1)		N	lame of	Building (Owner/C	Operator (2	2).		0				- (,)	
((COII)		1	775	droop	610	mor	WII		2	15 JUL	23	E Id	0	
Agencies Notified Type Notification		5	Street Ad		Lan	or. L	2		A			rii I	0: [3
EPA Initial Amended		C	ity, Stat	e, Zip Co	de		15	LOW/OWN INCOME.	1.1	9 11	93 L	71	'lan	i
DOL Amendment #		-	fai	ic H	ave	V^{V}	17 (277	04	₩ [.](UENS	HIG	ne.	Ĺ
DOH justification)	iciddiiig	N 98		Contact					Tele	phone Nu	ımber			
DCA Cancellation			Eric Pl	LITY INFO	DMAT	ON			1 ,			-		
Name of Facility Where Abatement is Taking	Place (3)		TAGIL	arr ner C	/KINATI		Type of	Facility (4	1)					
						[chool (K-1						
Street Address 28 Sulumore	10						C Ot	ibchapter her (i.e. p	8 (Otherivate 8	commerc	12) cial build	lings,	home	es,
City (5) —	OI I	. •					Square	/	# of	Floors	В	idg. A	ge	
tair Plaves							105	6	1	7		11	2_	
County (6)		(3	County C STATE U	code (7) ISE ONLY)			Current	Use (Pric		ng demolis	shed)			
Name of Monitoring Firm Hired by Building O	wner (8)	\dashv	ASCM	No.		Name o	of Abate	ment Con		(9)				
	50.7					Brick	Indust	tries Inc						
Street Address						Street A								
			-			100000000000000000000000000000000000000	Box 91							
City, State, Zip Code						City, Sta Brick,	400 (50	Jersey (08723					
Project Manager for Monitoring Firm		Т	elephor	ne No.		Telepho				License 01196	No.			
Start Date (10)	Scheduled	Comi	nletion ()ate (11)			899-74 of OSHA	Monitor		01130				
7(21)	7/7	31		outo (11)		7.4								
Occupancy Status During Abatement (Check	Only One)				Street A	Address							
Facility Closed/Vacated During Entire Pondatement Performed Outside of Normal			ent			City, Sta	ate 7in	Code				-		
Other – Describe:	ar r admity r	iours				Oity, Ott	ию, шр	Ouc						
Scope of Work (Check All That Apply)								10772 ALC 187						
≥3 sf or ≥3 lf		novati						Containme		Negative	Pressu	re		
≥160 sf or ≥260 lf	∑ De	molitio	on					Enclosure ebag Prod						
		7.00					Non-	Exempted	d (*) and	d Non-Fria	able Pro	0.000	10000	
	1561210	ocatio	355111										ement pe	
Location of Asbestos-Containing Material (ACM)	Used	Solely	y by	Asbes		escription of taining Ma		ACM)	А	mount			Е	
TO BE ABATED	Main Custo	tenan	5245541 UI	(i.e.	therma	I systems scing, VAT	insulati	on,		pecify or LF)	Ren	Re	ncap	Encl
In Facility (13)		(12)				miscellane			OI.	OI LI)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A										te	(D
			X	BO!	Jol.	stos	SIDA	me	40	DS9 f4	. X			
										(8)				
(4														
				2										
Name of Registered Waste Hauler		78750	JDEP W		Cubic of Wa	Yards		Name of			îll			
Brick Industries Inc.		33.95	602	. 40.	01 446	4		GROW	S Inc.					
City, State						sal Date	/	City, Stat	е					
Brick, New Jersey	1 =0				11	24119	1	PA		1 -	Data /	_		-
Completed by Eric Plackis	Title Presid	ent			1	Signature	6	IK)	L	Date	20	15	

CK45

Date of Notice 7/17/15 Name of Building Owner / Operator (2) Type Notification Seals Eastern Co. Agencies Notified Street Address X **EPA Emergency Notification** 134 Pearls Street DEP Initial Notification City, State & Zip Code DOL X Amended Notification Red Bank, NJ 07701 DOH X Cancellation Name of Contact Telephone Nimb DCA Steve Link --- 011-0434 **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Vacant Shed Subchapter 8 (Other than K-12) X Other (i.e., private & commercial buildings, homes, etc. 134 Pearl Street # of Floors Square Feet Bldg. Age City (5) County (6) County Code (7) 70+ Red Bank Current Use (Prior if being demolished) Monmouth Commercial Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Global Abatement Services, LLC Environmental Tactics, Inc. Street Address Street Address 64 Broad Street 443 Schoolhouse Road City, State & Zip Code City, State & Zip Code Matawan, NJ 07747 Monroe Township, NJ 08831 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Tom Geiger 732-290-2217 732-605-9062 00714 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 7/28/15 Global Abatement Services, LLC 8/3/15 Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 443 Schoolhouse Road Abatement Performed Outside of Normal Facility Hours -City, State & Zip Code Describe: Area Isolated During Abatement Monroe Township, NJ 08831 Other - Describe: Scope of Work (Check all that apply) X Demolition Renovation Full Containment with Negative Pressure Large Project Mini-Enclosure Quantity is ≥ 3 SF or ≥ 3 LF ACM Glovebag Procedure Quantity is ≥ 160 SF or ≥ 260 LF ACM X Other: Non-Friable Location of Is Location Description of Amount Abatement Type Asbestos-Containing Asbestos-Containing (Specify: Removal, Normally Used (Specify Material (ACM) Solely by Material (ACM) Square Feet Repair, Encapsulation TO BE ABATED Maintenance or (i.e., thermal systems or or Enclosure) Linear Feet) in Facility Custodial Staff? insulation, surfacing, VAT or other miscellaneous) (13)(12)Roof N/A Roofing 750 SF Removal Name of Registered Waste Hauler NJDEP Waste Hauler ID # Name of Registered Landfill Cu. Yds. of Waste Freehold Cartage 18693 **GROWS** City, State Disposal Date City, State Freehold, NJ 8/5/15 Morrisville, PA Completed By (Print or Type) Signature Date Dominick Tringali 7/18/15 Project Manager Dominick Tringali

CK# 5717

Date of Notification (1)			Nam	e of Build	ing Øwner/Operator	(2)	EF15 11 11				
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Agency Notified	Type Notification		Stree	et Addres	RANDE ?	SRIVE	A. J.	3 km	5: _t	i a	
□ EPA	☑ Initial ☐ Amended		City.	State, Zi	Code	4-	\$ 1 13 E	Lagran			
DEP DOL	Amendment#			MAC	Code PNE.NO	5 0797	0	1/2/5		ć.	
T-25 E-1	☐ Emergency (includin	g	Nam	ne of Conf			Telephone Num	ber			
ZE/DOH	justification) D Cancellation				1EGLER				8		
□ DCA	Li Calicendeon										
			FA	CILITY	IFORMATION	Type of Facility	(4)		_		_
	Abatement is Taking Place	æ (3)		•		Type of Lacenty	(4)				
MS. 5	16ER	1.00				School (K-12	t) 3 (Other than K-12	۸ .			
Street Address		•			4	2 Other (i.e. pr	ivate & commercia	, al buildings			
25	RANDE DI	iu e				homes, etc.					
City (5)						Square Feet	# of Floors	Bidg. Ad			
· WAY	NE.			20		2500	2	1	0	75	TH
County (C)			Cot	mtv Code	(7) (STATE USE	Current Use (P	nor if being demol	shed)			
PASS	AIC			LY) ·		RES	1000 CE				
	m Hired by Building Owne	r I AS	CM No.		Name of Abates	nent Contractor (9)				
(8)	III there by Damand Own	. /	0200 140	·	1	moval In					
JA 73					Street Address						
Street Address				20		River St		*			
11					City, State, Zip	and the second second			-		
City, State, Zip Code							.J. 0760	1		-	
							License No.				
Project Manager for Mo	onitoring Firm	Telep	hone N	lo.	Telephone No.		00388				
					201-329- Name of OSHA		00300				_
Start Date (10)	Scheduled Co	1-		11)	Omega Er	vironmer	ıtal [.]				
7/31/15	1 01	1 -3			Street Address						_
Occupancy Status Dun	ing Abatement (Check onl	y one)			280 Huy	lar St					
☐ Facility Closed/Vaca	ted During Entire Period o	f Abatem	ent		City, State, Zip						_
☐ Abatement Performe ☐ Other – Describe: 7	ed Outside of Normal Faci PH S M	lity Hours			S. Hacke	ensack ,	N.J. 076	06			
Scope of Work (Check	all that apply)						Negative Pressu				
D≥3sfor≥3ff			-01	Renovatio		-Enclosure	1 Negative 1 1000ss				
□ ≥ 160 sf or ≥ 260 lf				Demolition	J2 Glo	vebag Procedure					
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826			cation		80 180			L		уре	
Loca	tion of		maliy Solely b		Description	of	44 000004400				
Asbestos-Contain	ing Material (ACM)	Mainte	enance	/ As	bestos Containing N		Amount (Specify	13	B -	, En	5
	ABATED agitiv		todial		i.e., thermal system surfacing, VA		SF or LF)	Kellioad	90	Encapsulate	Enclosure
	13)	1 100000	12)		other miscellar			i	=	1	onn
	•	V 1	U- I A	1/4						10	
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	t sens concentra Penns										1
Name of Registered W	laste Hauler			te Hauler			istered Landfill				
Best Remova	al Inc	ID No	- 171	09	Waste 1 1/2 e	Cumber	land Coun	ty La	nd	fi	11
	at THE		1/1	. 0)	1	,				_	_
City, State	1 37 7	0760	1		Disposal Date	City, State	wburgh , P	A.172	40)	
	nsack ,N.J.	0/60.	Ι .		8/4/15	T. ME	MD'OTE SIT 1				
Completed by	Tatle				Signature	1-12-0	a	Date 7/	2-	1,	-
J.Maioran	· · · · · · · · · · · · · · · · · · ·			(1000 <u>-145-e</u>)	V	1000)	1/	4	1-	,
ASB-41	* Do no	t use this	form fo	r asbesto	s licensure exempte	dactivities.					

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

							/-		25					
Date of Notification (1)	July 20, 2015			N	Jame of	Building O	wner/Oper Mark (z) uto		57	7	57	
Agencies Notified [X] EPA		Notifica		S	treet Ad	dress	128 Vi	irgini	ia Avenue	. 23 AM 8:	13			
[] DEP [x] DOL	Amen	dment #	ification	C	City, Stat	e, Zip Code	Lavall	ette,	NJ 08735군 []	CENSING	(OL			
[x] DOH	justifi	cation)		N	Name of	Contact Mark (ephone Number				
[] DCA				E A CIT	TITY D	TODA	ATION							
Name of Facility Where Ab	patement is Taking	Place (3		FACIL	11 Y 11.	NFORM	ATION	Тур	pe of Facility (4)	School (k-12)				
									5 5	Subchapter 8 (oth	er than	k-12)		
Street Address	8 Virginia Aven	ue					8-			Other (i.e., private homes, etc.)			ıl buildi	ngs,
City		y (6)		ounty Co STATE U	ode (7) JSE ONLY	7)		uare feet 1500 sf	# of Floors 1	Bldg.	Age 6	0		
Lavallette		Ocea	ın					Cui	rrent Use (Prior if b Residence	T 933				
Name of Monitoring Firm		Owner (8	3)	A	SCM No	o.	Name of	Abate	ement Contractor (9		Inc.			
Street Address	1						Street Ad	ddress		ute 9, Unit 61				
City, State, Zip Code							City, Sta	te, Zip	p Code	ver, New Jerse	y 087	55-12	271	
Project Manager for Monit	ect Manager for Monitoring Firm Telephone eduled Start Date (10) Scheduled						Telephor 732-34		mber	License N 00624				
Scheduled Start Date (10) 7/21/15		Scheduled Cor 7/23/15	mpletion	Date (1	1)	Name of	OSH	A Monitor E.M.S.L	. Analytical		***			
Occupancy Status During			:)	f Abaten	nent		Street Ad	ddress		elton Road				
	er - Describe		of Normal Facil		S		City, Sta	ite, Zij		ay, New Jerse	y 088	54		
Scope of Work (Check all	that apply)		-				[]		Full Containment v	vith Negative Pres	sure			
[] >3:	sf or ≥3 lf		[] R	enovatio	n		[]		Mini-Enclosure Glovebag Procedur	e				
[x] ≥16	60 sf or ≥260 lf		[x] D	emolitio	n		[x]]	Non-Exempted (*)	and Non-Friable I	rocedu	re		
											Abat	ement'	Гуре	
		15	Is Location				Description				R	R	Е	E
Location			Normally used	ا ا			estos-Co Material (A			Amount (Specify SF	E	E	N C	N
Asbestos-Containing N TO BE ABA		Mair	Solely by ntenance/Custo	odial			, thermal			or LF)	M	P A	A	C
in facilit		141011	Staff	ou.u.			ılation, sı				0	I	P	0
(13)	5.		(12)				VAT,		1	/=	V	R	S	S
						oth	er miscell	laneo	ous)		A		L	R
		YES	S NO 1	N/A					VI		L		Е	Е
Exterior			X		Asbes	stos sidir	ıg			1400 sf	X			
Interior			X		Trans	site pipe				12 sf	X		_	
											-			_
										17 1611				
Name of Registered Waste	Hauler ontracting, Inc.		NJDEP Waste I 202) No.	Cubic Ya	ards of Was	ste	Name of Register T.R.R.F.	ed Landfill				
City, State	A-100 Sept.			Disposal			City, S							
Toms River Completed by (Print or Ty	, New Jersey	Title		7/24/1	5 Signati	ire 🔿	Tully	town	n, Pennsylvania		Date	:		
Nicholas Fer		59778	ect Manager	8	Jiginati	- Y lu	Chi	1:	tel			0/15		

Date of Notification (1)		Nai	me of Bu	ilding Owr	er/Operator of Philac	(2) lelphia		-JUL 2	6 101)			
July 22, 2015 Agencies Notified Type Notification	- 10-	Str	eet Addr		The same	7							
EPA Initial Amended Amendment #	3	Cit	y, State,	Zip Code ter, NJ C									
DOH Emergency (III justification)		Na	me of Co	ontact				Telephone N	umher		133		
DCA Cancellation	1111			TY INFOR	MATION								
Name of Facility Where Abatement is Taking Camden Docks Street Address	Place (3)					☐ S	of Facility (4) chool (K-12) subchapter 8 other (i.e. priv	(Other than K	-12) rcial buil	ding	ıs, ho	mes	,
2500 Broadway City (5)						Square 2000		# of Floors		Bldg 60+	. Age	1	
County (6)	200		ounty Co			122000000000000000000000000000000000000	nt Use (Prior	if being demo	lished)				
Camden Name of Monitoring Firm Hired by Building C	Owner (8)		ASCM N			1	ement Contr	ractor (9)					
AET, Inc. Street Address			101	+	Stre	et Addres	ss	way Suite 5	500				
28 Pennel Road City, State, Zip Code					City	State, Zi	p Code	way cano c					
Media, PA 19603 Project Manager for Monitoring Firm		Te	elephone	e No.	1311	on, PA phone No		Licens					
Dave Turotsy	0.1.4.4.4		10-891			1-872-8	884 A Monitor	01161	1				
Start Date (10) 7/27/15	Scheduled 7/31/15	Comp	Dietion D	ale (11)	EM	ISL							
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire			ent		1000	et Addres O Route	ss : 130 Nort	h					
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Work to recommend	nal Facility	ours		7/26/15		, State, Z nnamins	ip Code son, NJ 0	8077					
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovati				× Mi	ni-Enclosure	edure			dure	i	
		3 743			H	LI No	on-Exempted	(*) and Non-F	Tiable F		bate	ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Mai	Location ormally Solely ntenanodial Solely (12)	y y by nce/		Descriptions Containing the Containi	g Materia ems insul VAT, or	ation,	Amount (Specify SF or LF)	Nemova	Domain	Repair	e Encapsulate	Enclosure
	Yes	No	N/A		тс	1		210 LF	X	+	-		-
Galley			X		Tank Ins			250 SF		+			-
Galley			X	-	uctwork		nn.	650 SF	177	+			-
Below Dock			X		- UCLWOIK	Isulalic	211			1			
Name of Registered Waste Hauler ecoservices, LLC		Н	J IJDEP W lauler ID 3-0127	No.	Cubic Yard of Waste 20		Grows	Registered La (a WM Lan					
City, State Exton, PA					Disposal [TBD	Date	City, Star Morris	te /ille, PA	1 = 1				
Completed by Joe White	Title Assis	stant	Proiect	Manage	Sign	ature DQ V	Uhute	(J)	7/22	/15			

ck 2845

Date of Notification (1)					Name	of Building	Own	er/Operator (2	2)					
7 /	20 /	15				duPont c			-/					
									1965	1131				
Agencies Notified EPA	Type Notificat	tion				Address	unde	o Bood		JUL -	-	1.00		
⊠ DOLWD	☐ Amended			1		Cheesed	76	e Koau						
□ DHSS	Amendme	nt #		- 1		tate, Zip C				-				
☐ DCA	☐ Emergend		luding			in, NJ 08				Talankana Numah				
(NJAC 5:23-8)	justificatio					of Contact				Telephone Numb	er			
	Cancellati	on			NICI	nol Reinh	ioia						150	
					FAC	ILITY IN	FOR	MATION						
Name of Facility Where		70	Place	(3)				-	Type of Facility (
DuPont Parlin Faci	ility - Bldg. 19	90							School (K-12) (Other than K-12)				
Street Address										ivate and commer		ilding	S,	
250 Cheesequake	Road				~~~~				homes, etc.)					
City (5)									Square Feet	# of Floors	Blo	dg. A	ge	
Parlin														
County (6)					Coun	ty Code (7)(STA	TE USE ONLY)	Current Use (Pri	or if being demolis	ned)			
Middlesex														
Name of Monitoring Firm	Hired by Build	ing O	wner (8)	ASCM	No.	Nan	ne of Abateme	ent Contractor (9)					
Cardno ATC							В	RISTOL EN	VIRONMENTA	_, INC.				
Street Address							Stre	et Address						
3 Terri Lane							1	123 BEAVE	R STREET					
City, State, Zip Code					City	, State, Zip Co	ode							
Burlington, NJ 080	16						В	RISTOL, PA	19007					
Project Manager for Mor	nitoring Firm	-		Tele	phone	No.	Tele	ephone No.		License No.				
John Lutz				60	9-386	-8800	2	15-788-6040	1	00509				
Start Date (10)	S	chedu	uled C	omple	tion Da	te (11)	Nan	ne of OSHA N	lonitor			63		
7 / 30 /	15	7	/	31	/ _	15	В	RISTOL EN	VIRONMENTA	L, INC.				
Occupancy Status Durin	g Abatement (C	Check	only c	ne)			Stre	et Address						
☐ Facility Closed/Vacat	ed During Entir	e Peri	iod of	Abate	ment		1	123 BEAVE	R STREET					
☐ Abatement Performe						cribe	City	, State, Zip Co	ode					
Time of Abatement:	7:00AM	_PM/ <u>3</u>	3:30PI	VI	AM		В	RISTOL, PA	19007					
Scope of Work (Check a	ill that apply)													
N - 2 - f 2 f	100 50		⊠ n-						tainment with Neg	gative Pressure				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Re De De De De Re Re					☐ Mini-End	g Procedure					
										n-Friable Procedu	e			
				Locat							Ab	atem	ent T	уре
Location		.		Norma d Sole				Description of		A	Re	Re	E.	E
Asbestos-Containing TO BE AB		,		intena				Containing Ma rmal systems		Amount (Specify	Removal	Repair	cap	Enclosure
IN Faci	lity		Cus	todial	Staff?		S	urfacing, VAT	, or	SF or LF)	val		Encapsulate	sure
(13)	e:	ł	Yes	(12) No	N/A		oth	ner miscellane	ous)				ate	
	on Live To Lan	-	_				Contractor.					-	_	-
Building 190 MEZZA	NINE		Ш			Pipe In	sulat	tion		65 LF			Ш	Ш
											П			
			=		-									
			Ш	Ц,			0.1	1. V. di . f	No. of Desir				ш	
Name of Registered Wa				5.4	JDEP \ lauler II		Was	oic Yards of	Name of Regis					
SERVICE TRANSP	OKT GROUP	, INC	••		20990		2		GROWS L	anatili				
City, State					11-17		- 22	posal Date	City, State					
NEW CASTLE, DE	19720						7.	/31/2015	Morrisville	, PA 19067				
Completed By (Print or 7	Гуре)	Title					-	Signature	//	Da	te	1		
Gino Pizzigoni		Es	stima	tor				Lik	TITOR)		7/2	0/1	5	

ASB-41 MAY 11

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

NOCK

Date of Notification (1) 7/17/15					Building C Bridgeto		perator	(2)			604		12		
Agencies Notified	Type Notification			Street Ad			-				11111 2	<u> </u>	JUJ		-
□ EPA	☐ Initial			181 Ea	st Comr	nerce	St.								
DEP	× Amended	0			e, Zip Coo										
X DOL	Amendment Emergency		_		on, NJ	08302				T ==1	NI.				
DOH	justification) Cancellation			Name of Robert	Contact Mulford					Tele	ephone Nu	mber -			
DCA	☐ Cancellation				ITY INFO		ON			1	×				
Name of Facility Where		g Place (3)		.,,,,,,,,				Туре	of Facility (4	1)					
Old Bridgeton Park	Building								School (K-1						
Street Address									Subchapter Other (i.e. p				linas.	home	es.
20 Mayor Aitken Ro									etc.)						
City (5) Bridgeton								2,30	re Feet 00	2.5	Floors		ldg. A 50+	ge	
County (6)				County C	ode (7)				ent Use (Prid						
Cumberland					SE ONLY)	-			Bridgeton						
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCM	No.				atement Con						
							Yanr	nuzzi	Environm	ental	Services	, Inc.			
Street Address								Addre		Cuit	102				
									elon Road	, Suite	3 102				
City, State, Zip Code									Zip Code NJ 0740	5					
Project Manager for Mor	nitoring Firm			Telephor	ne No.		35/3/11/2005	none N 218-0			License N 01228	No.			
Start Date (10)		Scheduled	Con	pletion [Date (11)				HA Monitor			- O#00160-00			
7/21/15		7/23/15							Environm	ental	Services	, Inc.			
Occupancy Status Durin								Addre	ess e 206 Sou	th					
Facility Closed/Vac Abatement Perform	ated During Entire	Period of Ab	atem	ent			Charles		Zip Code						
Other – Describe:	led Odiside of North	riai i doilty i	iouro		. E		15.000 TO 1		igh, NJ 08	3844					
Scope of Work (Check A	II That Apply)														
≥3 sf or ≥3 lf		Re	nova	tion				Fu	ıll Containme	ent with	Negative	Pressu	re		
× ≥160 sf or ≥260 lf		x De	molit	ion			-		ni-Enclosure ovebag Prod						
							5		on-Exempted		d Non-Fria	ble Pro	cedur	е	
			ocati											ement pe	t
Location		No Used	rmal Sole		2 2 3		scription		1/4010			-	Γ.,		П
Asbestos-Containing TO BE AB		Main	tenar	nce/	Asbest (i.e.	tos Cont	taining I system	Materia Is insul	al (ACM) lation,		mount Specify	R	77	Enc	四
In Faci	lity	Custo	dial 8 (12)	Staff?		surfa	cing, VA	T, or		SI	or LF)	Remova	Repair	Encapsulate	Enclosure
(13)			*	Τ		otner	niscena	neous)	'			val	=	ılate	ure
		Yes	No	N/A							200.05	-			
Building E	xterior			X		Iran	site Si	ding		2,9	920 SF	X			
												-			
Name of Registered Wa			1 100	JDEP Wauler ID		Cubic of Wa	Yards		1 1000 A 100 D 100 A		ered Landfi	II			
Yannuzzi Group, Ind	о.			7467		20			G.R.O.	W.S.					
City, State Kinnelon, NJ						Dispo 7/23/	sal Date	9	City, Stat Morrisv		A				
Completed by		Title				1 5	Signatur	е	11		100000	ate	and I for		7.5
Anna Bastos		Admin	istra	ative As	sistant		Un	MA	Bacter)	7	/17/1	5		



Date of Notification (1) 7/14/15					of Building of Bridge		Operato	r (2)							
Agencies Notified	Type Notification	1			Address	LOIT		-		_	JUL 2				
П ЕРА	Initial				ast Cor	nmerce	e St.				002 4	-	Jill		
DEP	× Amended	170.0000 .		The state of the s	ate, Zip C		200								
X DOL	Amendmer Emergency	-	- [eton, NJ	33.000	2								
DOH DCA	justification Cancellatio)			of Contact rt Mulfor					I Te	ephone N	umber			
	1-				ILITY INF		ION				-				
Name of Facility Where		ng Place (3	3)					Туре	of Facility (4	1)					
Old Bridgeton Park	Building								School (K-12			40)			
20 Mayor Aitken Re	oad								Subchapter Other (i.e. pr				ildings	, hom	ies,
City (5)								- (etc.) re Feet	T#0	f Floors		Bldg.	Age	
Bridgeton								2,30		2.5			50+	-	
County (6) Cumberland			T		Code (7)	n	S		nt Use (Prio						
Name of Monitoring Firm	a Himd by Duilding	Ourses (8)		50000000000000000000000000000000000000			LN		Bridgeton			3			
Name of Worldoning Film	ir Hired by building	Owner (8)		ASCI	VI No.				tement Cont Environme		**************************************	s, Inc			
Street Address		71-72-17-72-1						Addres			0.000	***			
City, State, Zip Code									lon Road,	Suite	e 102				
8 8 8									ip Code NJ 07405	j					
Project Manager for Mor	nitoring Firm			Telepho	ne No.		1 2	hone No 218-0			License 01228	No.	55000-91011		
Start Date (10) JOB ON HOLD		Schedule unknov		npletion	Date (11)		100000000000000000000000000000000000000		IA Monitor Environme	ental	Services	s, Inc.			
Occupancy Status Durin	g Abatement (Che	ck Only On	e)					Addres	77						
Facility Closed/Vac	ated During Entire	Period of A	baten	nent					206 Sout	h ——		234			
Abatement Perform Other – Describe:		mai Facility	Hours	5					p Code gh, NJ 088	844					
Scope of Work (Check A	Il That Apply)						1 111101	50100	911, 140 001	-					
≥3 sf or ≥3 lf		☐ R	enova	ition				Full	Containmer	nt with	Negative	Pressi	ıre		
≥160 sf or ≥260 lf		X D	emolit	ion			-	Min	i-Enclosure vebag Proce		-				
							×		-Exempted		d Non-Fria	ble Pro	cedu	re	
		1000	Locati Iormal											emen /pe	t
Location Asbestos-Containing		Used	d Sole	ly by	Asbes	De tos Cont	scription		(ACM)	А	mount		Τ	Ť	
TO BE ABA		39.0	ntenar odial S			thermal		s insula			pecify or LF)	Rer	R	inca	Enc
(13)	9		(12)				niscellar			OI	or Lr)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A							12	-		ate	œ
Building Ex	xterior			х		Tran	site Sid	ding		2,9	20 SF	X			
Name of Registered Was	to Hauler		LN	JDEP W	/	[O. b.:	VI-		N. (D.						
Yannuzzi Group, Inc			Н	auler ID 7467	777	of Was	ste		Name of Re G.R.O.W	33.	ied Landfil	ı			
City, State				-101			al Date		City, State						
Kinnelon, NJ						unkno			Morrisvill	e, PA	Ą				
Completed by		Title				S	ignature		1 1	_	10000	ate	_		
Anna Bastos		Admir	iistra	tive As	sistant	1/	/	. , ,	Panto	1	7/	14/1)		

CK 1251

Date of Notification (1) 7/17/15					Building O			(2)			JUL	23	1	15		
Agencies Notified	Type Notification		S	treet Ad	dress			- - en	nington Roa	ad .		5.01				
DEP DOL	Initial Amended Amendment #		C	ity, Stat	e, Zip Cod le, NJ 0	e			9						1	
☐ DOH	Emergency (in justification)	ncluding	1	lame of Vancy	Contact					Tele	ephone No	umbe				
☐ DCA	Cancellation		1,	-	000000000000000000000000000000000000000	DRATI	ON								_	
Name of Facility Where	Abatement is Taking	Place (3)		FACIL	ITY INFO	RIVIAII	ON	Ту	pe of Facility (4	1)						
Twin Pines Airport Street Address								×	School (K-1; Subchapter Other (i.e. p	8 (Oth	er than K- & commer	12) cial bu	uildi	ngs,	home	s,
248 Pennington-La	wrenceville Roa	.							etc.) uare Feet	12000-01-00	f Floors			dg. A		
Pennington								2,	300	2.5			50			
County (6) Mercer				County C STATE U	ode (7) SE ONLY)	2)		10000	irrent Use (Prid angar	r if bei	ing demoli	ished)				
Name of Monitoring Firm	n Hired by Building C	wner (8)		ASCM	No.				Abatement Con zi Environm			c In				
Street Address							Street			entai	Service	5, 111	·.			
Oliect Address							135	Kin	nelon Road	Suite	e 102					
City, State, Zip Code							Kinn	elo	, Zip Code n, NJ 07405							
Project Manager for Mor	nitoring Firm		1	elephor	ne No.		Teleph 908-		e No. 3-0880		License 01228	No.				
Start Date (10) 7/27/15		Scheduled 0 7/29/15	Com	pletion [Date (11)				SHA Monitor zi Environm	ental	Service	s, In	c.			
Occupancy Status Durin	ng Abatement (Check	(Only One)					Street		iress nelon Road	Quit	0 102	E = 4 = 1.01				
Facility Closed/Vac Abatement Perform Other – Describe:	cated During Entire F ned Outside of Norm	eriod of Aba al Facility Ho	item ours	ent			City, S	State	r, Zip Code n, NJ 07405		e 102					
Scope of Work (Check A	All That Apply)						Killi	1010	11, 143 07 400							======
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ш тист, фрту		ovat					1	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	e edure					8	
		1.1.										T		150 Y 173	ement	
Locatio	n of		mall	y		De	scription	n of				_		Ту	ре	
Asbestos-Containing TO BE AB In Faci (13)	g Material (ACM) BATED ility	Used S Mainte Custod	enan	ice/		os Con therma surfa	taining N	Mate ns in: AT, o		(Amount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
		Yes I	No	N/A						•	200 05	_				
Building (Hang	gar) Exterior		_	Х		Trar	nsite Si	idin	g	2,	920 SF	2	ζ .			
Name of Desired Williams	ata Unida-		I M	JDEP W	laete	Cubic	Yards		Name of	Regist	ered Land	ffili				
Name of Registered War Yannuzzi Group, Ind			H	auler ID 7467		of Wa	ste		G.R.O.	110910	o.ou Luilu					
City, State Kinnelon, NJ 07405			1	0.5-15			sal Date	В	City, Stat Morrisv		PA					
Completed by		Title				The state of the s	Signatur	re	1			Date				
Anna Bastos		Admini	stra	tive As	ssistant		Un		- Basti	in		7/17	/15			

Date of Notification (1)					Name	of Buildin	g Ow	ner/Operator (2)					
	17 /	15	_		Ne	w Jersey	Turi	npike Autho	rity	/ Job #1507-	2002 C	hk. #4	1013	Č =
Agencies Notified	Type Notifica	ation			Street	Address								
⊠ EPA					581	Main St	reet							
□ DOLWD	☐ Amended				City S	State, Zip (Code							-
□ DHSS	Amendme		757 77787			odbridge								
DCA	⊠ Emergen	cy (in	cluding	1	10000	of Contac	101	07035		T= () i				
(NJAC 5:23-8)	justification				201400040		333			Telephone No	umber			
	☐ Cancellat	lion				hraf Abd				-				
Name of Facility Where A	Ahatement is T	Takino	Place	(3)	FA	CILITY	NFOF	RMATION	Type of Facility	(A)				
NJSP - Troop D Bar		aking	1 1000	(0)										
Street Address	ITACKS					U26 2 10	_		School (K-1)	د) 8 (Other than K-	-12)			
										rivate and com		uilding	s,	
Garden State Parkv	vay MB 153.	.0 NE	3						homes, etc.)				
City (5)									Square Feet	# of Floors	В	ldg. A	ge	
Bloomfield									3000	2		60		
County (6)					Cour	nty Code (7	7)(STA	TE USE ONLY)	Current Use (P	rior if being dem	olished)			
Essex									Vacant					
Name of Monitoring Firm	Hired by Build	ding C	wner ((8)	ASCM	No.	Nar	me of Abateme	ent Contractor (9)				-
Horizon Environme							1		d Mold Service					
Street Address							Stre	eet Address						
PO Box 316				(6)			3	859 Sylon B	oulevard					2
City, State, Zip Code								, State, Zip Co						
Thorofare, NJ 0808	6						H	lainesport, M	NJ 08036					
Project Manager for Moni	itoring Firm			Te	ephone	No.	Tel	ephone No.		License No.	8			
Dave & Steve Flani	gan			8	56-848	-0800	6	09-702-0400		00862				
Start Date (10)	5	Sched	uled C	ompl	etion Da	ite (11)	Nar	me of OSHA N	lonitor			1		
7 / 20 /	15		7 /	_3	1_/	15	E	MSL Analyt	ical, Inc.					
Occupancy Status During	Abatement (Check	only o	ne)			Stre	eet Address	3.40					
□ Facility Closed/Vacate	ed During Entir	re Per	iod of	Abat	ement		2	00 U.S. Rou	te 130 North					
☐ Abatement Performed	Outside of No	ormal	Facility	y Hou	ırs - Des	scribe	City	, State, Zip Co	ode					-
Time of Abatement: _	AM	PN	/\/	_PN	1	AM	1 1	innaminson						
Scope of Work (Check all	that apply)	7-1-1												
≥3 sf or ≥3 lf			□Re	nova	tion			☐ Mini-Enc	tainment with Ne losure	gative Pressure				
≥160 sf or ≥260 lf			⊠ De					☐ Glovebag	g Procedure					
								Non-Exe	mpted (*) and No	on-Friable Proce	dure			
				Loca							Al	ateme	ent Ty	уре
Location		.		Norm	ally lely by			Description o			70	D	ш	Ш
Asbestos-Containing I TO BE ABA		1)			ance/			Containing Ma		Amount	em	Repair	nca	ncl
IN Facilit			Cust		Staff?	(1.6		rmal systems i surfacing, VAT,		(Specify SF or LF)	Removal	¥.	psı	Enclosure
(13)		-		(12	1	-		ner miscellane		0. 0. 2. /	-		Encapsulate	ē
			Yes	No	2,000,00									
Exterior						Tar Wa	terpi	roofing		2,300 SF				
													П	П
			П	П										
Name of Registered Was	te Hauler				NJDEP '	Waste	Cub	oic Yards of	Name of Regi	stered I andfill				ш
Freehold Cartage, I					Hauler II	D No.	Was	ste	GROWS L					
City, State					0226	0	Dist	posal Date	City, State					
Freehold, NJ							11111111111111	/31/5		, PA 19067				
Completed By (Print or Ty	(ne)	Title		-			1		1	,	Deti			
Kimberly A. Trumbe		10.000000		`nor	dinato	-		Signature	-		Date 1-11	7-15	_	
. ambony A. Humbe		0	iice (,001	umato			MA	V		1-1	11)		

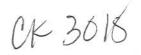
ASB-41 MAY 11 * Do not use this form for asbestos licensure exempted activities.

Date of Notification (1)					Name o	f Building	Owne	r/Operator (2	2)						
	20 /	15			New	Jersey N	luse	um of Tran	sportation	/ Job #1507-20	000,15	Chk	(. #	4014	1
Agencies Notified	Type Notificatio	n			Street A	ddress									
⊠ EPA					4265	Atlantic	Ave	nue							
⊠ DOLWD	Amended	ш		T	City, Sta	ate, Zip Co	ode	1.54							
□ DHSS	Amendment Emergency	700 mm mm	ling		Wall	Townsh	ip, N	J							
DCA (NJAC 5:23-8)	justification)		mig		Name o	of Contact				Telephone Nur	mber				
,	☐ Cancellation	1			Jame	es Lubra	nt								
					FAC	ILITY INF	ORN	MATION		(4)					
Name of Facility Where A									Type of Facility						
New Jersey Museu	m of Transpor	rtatior	n/Rai	Iroa	d Loce	omotive			School (K-1	2) 8 (Other than K-1	12)				
Street Address 4265 Atlantic Aven	II.E									private and comm		uild	ings	1	
City (5)									Square Feet	# of Floors	E	ldg	. Age	9	
Wall									60 SF	NA		NA	A		
County (6)					Count	v Code (7)	(STATI	E USE ONLY)	Current Use (P	rior if being demo	olished)				
Monmouth						, , , ,	1		NA	955					
Name of Monitoring Firm	Hired by Buildin	na Own	er (8)		ASCM N	No.	Nam	e of Abateme	ent Contractor (9	9)					
Tiger Environment		3							d Mold Service						
Street Address							230000	et Address							
16 W Elizabeth Ave	e # 2						38	59 Sylon E	Boulevard						
City, State, Zip Code	* =:							State, Zip C						- 100	
Linden, NJ 07036								inesport, l							
Project Manager for Mor	nitoring Firm			Tele	phone N	No.	Tele	phone No.		License No.					
Kelly Walton	3				08) 862		60	9-702-0400)	00862					
Start Date (10)	Sc	hedule	d Cor		tion Dat		Nam	e of OSHA N	Monitor						
7 / 22 /	15	7	_ / _	23	_ / _	15	EN	ISL Analyt	tical, Inc.						
Occupancy Status Durin		neck or	nly on	e)			Stree	et Address							
□ Facility Closed/Vacat					ment		20	0 U.S. Rou	ite 130 North						
☐ Abatement Performe	d Outside of Nor	mal Fa	cility	Hour	s - Desc	cribe	City,	State, Zip C	ode					72	
Time of Abatement:	AM	_PM/_		PM-	<i>F</i>	ΑM	Ci	nnaminso	n, NJ 08077						
Scope of Work (Check a	all that apply)							□ FII Co.	stalings and with Al	antiva Prossura					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Ren					Mini-End		egative Pressure					
			, 50					☐ Non-Exe	empted (*) and N	Non-Friable Proce	dure				
			1 2 2 2 2 2	ocat							A	bat	teme	nt Ty	/pe
Location				Sole	illy ely by	Acho	etae C	Description	of aterial (ACM)	Amount	3		Re	En	En
Asbestos-Containing TO BE AB			Mair	ntena	ince/		., ther	mal systems	insulation,	(Specify	Nellova		Repair	Encapsulate	Enclosure
IN Faci	•	- 1		(12)	Staff?			urfacing, VAT		SF or LF)	2	-		sula	ure
(13)		Y	/es	No	N/A		OLII	er miscellane	eous)					te	
Railroad Locomotive	e #9	Tr	7	П		Block I	nsula	ition		60 SF	D	3			
			7												
			- +	$\frac{\Box}{\Box}$											
			5		+							7			
Name of Registered Wa	ste Hauler				NJDEP V	/ //aste	Cub	ic Yards of	Name of Re	gistered Landfill					
Freehold Cartage,				1.0	dauler II 02265	O No.	Was	ste	GROWS						
City, State					02200			osal Date	City, State						
Freehold, NJ							7/	24/15	Morrisvi	le, PA 19067					
Completed By (Print or	Type)	Title						Signature			Date,) ^	11=	_
Kimberly A. Trumi		Offi	ce C	oor	dinato	r		4XX	V/	_	Į,	0	10.	-15	Š.

ASB-41 MAY 11

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

Date of Notification (1)				Name o	f Building	Owner/Operator (2						
7/	20 / 15	_		Patri	cia R. Di	sner	/ Job #1	507-2003	Chk. #4	015		
Agencies Notified	Type Notification			Street A	ddress							
□ EPA				1401	Springo	dale Road						
□ DOLWD	☐ Amended			City, Sta	ate, Zip Co	ode						
□ DHSS	Amendment #_			BR GIFT COLOR		NJ 08003						
	☐ Emergency (inc	cluding	-		f Contact			Telephone Num	ber			
(NJAC 5:23-8)	justification) Cancellation				Longo			relephone rvan				
	Cancellation					FORMATION				3		_
		D .	(0)	FAC	ILITY IN	FORMATION	Tune of Equility /	4)				_
Name of Facility Where Ab		Place ((3)				Type of Facility (
Residential Property	1						☐ School (K-12) ☐ Subchapter 8		2)			
Street Address							Other (i.e., pr	ivate and comme	rcial bui	dings	,	
208 Buckner							homes, etc.)					
City (5)							Square Feet	# of Floors	Bld	g. Age	3	
Haddon Township							1102	1	1	953		
County (6)				Count	y Code (7)	(STATE USE ONLY)	Current Use (Pri	or if being demoli	shed)			
Camden							Vacant					
Name of Monitoring Firm I	Hired by Building C	Owner (8	3) /	ASCM N	lo.	Name of Abateme	ent Contractor (9)					
Tiger Environmenta	지하하는 경기는 경기를 보았다면 하는 그래요! 						d Mold Service	s, Corp.				
Street Address						Street Address		<u>(40)</u> <u> </u>				
16 W Elizabeth Ave	# 2					3859 Sylon E	oulevard					
	# 4					City, State, Zip C						
City, State, Zip Code						Hainesport,						
Linden, NJ 07036					1		45 00030	License No.				
Project Manager for Monit	toring Firm		100000000000000000000000000000000000000	phone N		Telephone No.	v.	00862				
Kelly Walton				08) 862		609-702-0400		00002				_
Start Date (10)		duled Co				Name of OSHA						
7 /29 /	15	7/	30	_ / _	15	EMSL Analys	ical, inc.					
Occupancy Status During	Abatement (Chec	k only o	ne)			Street Address						
□ Facility Closed/Vacate	d During Entire Pe	riod of A	Abater	ment		200 U.S. Rou	te 130 North					
☐ Abatement Performed						City, State, Zip C	ode					
Time of Abatement:	AMP	M/	_PM-	/	AM	Cinnaminso	n, NJ 08077					
Scope of Work (Check all	that apply)											
A A	12.5152						tainment with Neg	gative Pressure				
\boxtimes \geq 3 sf or \geq 3 lf \square >160 sf or \geq 260 lf		⊠ Rei				☐ Mini-En	acut and of	intact amor	$a \mid$			
☐ ≥ 160 St of ≥260 II		П ре	HOILL	211		□ Non-Exe	empted (*) and No	n-Friable Proced	ure			
		ls	Locat	ion					Aba	ateme	ent Ty	уре
Location	of		Norma			Description	of		R	Z	П	Г
Asbestos-Containing I			d Sole intena			stos Containing M		Amount	em	Repair	nca	Linconia
TO BE ABA				Staff?	(1.6	e., thermal systems surfacing, VAT		(Specify SF or LF)	Removal	=	psu	Do.
IN Facilit	ty		(12)			other miscelland		Or Or Er y	-		Encapsulate	q
		Yes	No	N/A			10.				(D	
(13)		165		_	D 4	107		15 LF				
2000		l les		M	DUCT D	aper wrap		10 -				_
Crawlspace					Duct pa	aper Wrap		10 L1				1.1
200					Duct pa	aper wrap		10 21				-
2000			_	100 00	Duct pa	aper wrap	18	10 21				
200					Duct pa	aper wrap	48	10 21				
Crawlspace	ta Hauler						Name of Regi					
Crawlspace Name of Registered Was					Vaste	Cubic Yards of Waste	Name of Regi	stered Landfill				
Crawlspace Name of Registered Was Freehold Cartage, I				U U U UJDEP\	Waste	Cubic Yards of Waste 5	GROWS L	stered Landfill				
Name of Registered Was Freehold Cartage, I				IJDEP V	Waste	Cubic Yards of Waste 5	GROWS L	stered Landfill andfill				
Name of Registered Was Freehold Cartage, I				IJDEP V	Waste	Cubic Yards of Waste 5	GROWS L	stered Landfill				
Name of Registered Was Freehold Cartage, I	nc.			IJDEP V	Waste	Cubic Yards of Waste 5	GROWS L	stered Landfill andfill e, PA 19067	Date			
Name of Registered Was Freehold Cartage, Ic City, State Freehold, NJ	nc.			U U U U U U U U U U U U U U U U U U U	Waste O No.	Cubic Yards of Waste 5 Disposal Date	GROWS L	stered Landfill andfill e, PA 19067		0-16		[



Date of Notification (1)	Name of Building Owner/Operator (2) Tenafly School District																	
07/20/2015 Agencies Notified Type Notification			St	Street Address 500 Tenafly Road					122 28 238									
EPA DEP	DEP Amended				City, State, Zip Code Tenafly, NJ 07670					4		ò						
DOL DOH DCA	Emergency (in justification)	ncluding	N	Name of Contact Tom Lepore							Tele	phone Nur	mber					
DCA	Cancellation		1.		TY INFOR	MATIO	N	-							_			
Name of Facility Where		PAOILITI IN ORGANIZATIONS					pe of F	Facility (4)										
J.Spencer Smith E							School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes,											
Street Address							Oth etc.	ner (i.e. pri	vate &	commerci	ial build	lings	, hor	nes				
101 Downey Drive City (5)								Sq	uare l		# of	Floors		ldg.				
Tenafly, NJ 07670							35000 1 60yea						ars		\dashv			
County (6)	C	County Code (7) (STATE USE ONLY)				Current Use (Prior if being demolished) School												
Bergen Name of Monitoring Firm	\vdash	ASCM		ame of Abatement Contractor (9)														
Name of Monitoring Firm Finds by Daniering Co.								SMAC CORP.										
Street Address							Street Address 27 East 33rd Street											
City, State, Zip Code							City, State, Zip Code											
								Paterson, NJ 07514										
Project Manager for Monitoring Firm				Telephone No.				973-345-4055 01110										
Start Date (10)		Completion Date (11)				Name of OSHA Monitor EMSL Analytical, Inc.												
07/31/2015 08/07/2015 Occupancy Status During Abatement (Check Only One)										et Address								
	1056 Shelton Ave																	
Abatement Perform	Hours	ours				City, State, Zip Code Piscataway, NJ 08854												
Other - Describe:							Piso	cata	away	, NJ 088	354							
Scope of Work (Check	All That Apply)	[C] _					E		Eull (Containme	ent with	n Negative	Pressi	ıre				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novation molition				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure												
						Abatem												
Locati	Locati ormal	ly	De	Description of ontaining Material (AC							Type							
Aspestos-Containing Material (ACM)			d Sole ntenar					os Cont	ACM)	CM) Amount (Specify		70			En	Щ		
TO BE ABATED In Facility			Custodial Staff?				al systems insulation, facing, VAT, or				s	Remova	Veball	' -	Encapsulate	Enclosure		
(13)			(12) oth				miscellaneous)					val	=		ulate	ure		
20		Yes	No	N/A						-1-	4	C C~F+	×	+	+			
Roof			x			Transite Mater			lai-boards			16 SqFt		+	+	-		
													+	+	+	-		
				367									-	+	+	-		
Name of Registered Waste Hauler							Yards		Name of Registered Landfill									
SMAC CORP.				Hauler ID No. of 18590 2			Vaste			GROWS Landfill								
City, State Paterson, NJ 0751			10.000 (0.000)	10.00 (10.00 C) (10.00 C) (10.00 C)			City, Stat	ate sville, PA										
Completed by			000000000000000000000000000000000000000	Signature			Date											
Borce Gjorsoski	dent			Bar Gorano 07/20						/20	2015							

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