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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) Date of Notification (1) VERIZON JUL 2 3 2018 /18 Street Address Agencies Notified Type Notification 1 VERIZON WAY EPA Initial Notification City, State, Zip Code DEP LIGENSING Amended Notification BASKING RIDGE, NEW JERSEY 07920 DOL Cancellation DOH On Hold #1 Name of Contact Telephone Number **EMERGENCY NOTIFICATION** DCA CONNOR BURD 732-336-1205 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) VERIZON Subchapter 8 (Other than K-12) Other (ie. private & commcl. bldgs., homes, etc.) Street Address Square Feet # of Floors Bldg. Age 1196 EAST GRAND STREET 93,730 97 City (5) County (6) Current Use (Prior if being demolished) County Code (7) **ELIZABETH** UNION (STATE USE ONLY) COMMUNICATIONS Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) **ESIS** PAR ENVIRONMENTAL CORPORATION 17 Street Address Street Address 10 EXCHANGE PLACE 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code JERSEY CITY, NEW JERSEY 07302 SUFFERN, NEW YORK 10901 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number **BRIAN KINGSBURY** 201-388-0620 845-369-7500 1101 Expected State Date (10) Sched. Completion Date (11) Name of OSHA Monitor /18 12 / /18 QUEST ENVIRONMENTAL Month Day Year Month Day Year Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 1376 ROUTE 9 Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe: MONDAY - FRIDAY 7AM-3:30 PM City, State, Zip Code WAPPINGERS FALLS, NEW YORK 12590 Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Renovation Mini-Enclo. >3SF OR LF Glovebag Procedure >160 SF OR 260 LF Non-Friable Procedure (EXTERIOR) Location of Is Location Description of Asbestos-Abatement Type Asbestos-containing normally used Containing Material (ACM) Amount ENCAPSUL REMOVAL REPAIR ENCLOSUR Material (ACM) solely by (ie. Thermal systems (Specify TO BE ABATED Maint/Custodial insulation, surfacing, VAT, SF or LF) in Facility (13) Staff (12) or other miscellaneous) Yes No N/A NORTH ELEVATION CAULK 30 SF X EAST ELEVATION CAULK 9 SF X SOUTH ELEVATION X CAULK 25 SF X WEST ELEVATION X CAULK 10 SF X POWER BLDG. RISING WALL ACM PAINT 150 SF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Waste Name of Registered Landfill NEWARK CARTING Hauler ID No. 30 GRAND CENTRAL SANITARY 369 RAYMOND BLVD 913 City, State Disposal Date City, State NEWARK, NEW JERSEY 5/24/18-12/30/18 PLANFIELD TOWNSHIP, PA Completed by (Print or Type) Signature Date BENJAMIN SANCHEZ DIRECTOR OF OPERATIONS

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	e (3)					Type of Faci School						
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7 / 13 /18	Sched			Date (11)	/18	Name of OSH	A Monitor					
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Project Manager for Monitoring Firm	V JEKSE			Number			SUFFERN, NE	W YORK 1090						
JIM GUILARDI			-840-88				Telephone Nur 845-369-7500			Numb	er			
EXPECTED START DATE (10): (RESTART) 7 / 13 /18	Sched	d. Con	pletio	n Date (11)			Name of OSHA	Monitor 11	01					
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	NJDEP		C	Cubic Yards			Name of Registe	red Landfill						
69 RAYMON BLVD.	Hauler II	D No. 913		3	30	G	RAND CENTR	AL SANITARY L	AND	FILL	L			-
ity, State EWARK, NEW JERSEY 07105			0	Disposal Date	9		CityaState /	/						
ompleted by (Print or Type) Title		-	7	/13-9/13/201		P	LAINFIELD TO	WISHIP, PA		_			,	2
ENJAMIN SANCHEZ DIRECTOR OF OPE	RATION	S		Sig	gnature	1	$\prec x$	Date	-	1-	- /7	)	1/8	
						1	1/0				/		10	

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Date of Notification (1)		· ·			g Owner/Operator	(2)	K	-			- 197
6 / 14 /18				Street Address					1111		1 0000
Agencies Notified Type Notification				400 SOUTH ORA	NGE AVENUE	1	1 1		JUL		3 2018
EPA X Initial Notification DEP Amended Notification Cancellation				City, State, Zip C SOUTH ORANG	ode E, NEW JERSEY 0	7079		ASE	BEST	OSC	CONTRO
X DOH On Hold X DCA EMERGENCY NOTIF	ICATION			Name of Contact VICTORIA PIVO	/ARNICK	Telephone Nu 973-761-9000		de suma	L.	CEN	
			FA	CILITY INFORMATION	(2007)(000)(2007)(000)	010-101-3000	LAI.	3203			
Name of Facility Where Abatement is Taking Plac	e (3)				Type of Facili			707-22-7-1			
SETON HALL UNIVERSITY					School (F Subchap X Other (ie	(-12) ter 8 (Other than private & comm	K-12	) das h	omes	etc.)	
Street Address 100 SOUTH ORANGE AVENUE - CORRIGAN HALL	•				Square Feet 40,000	# of Floors	T Dic	ıys., ı		ldg. Ag	е
City (5) County (6) SOUTH ORANGE ESSEX				County Code (7) (STATE USE ONLY	Current Use (P	rior if being dem	olishe	ed)		40+	
Name of Monitoring Firm Hired by Building Owner	r (8)			ASCM No		ement Contract	or (9)				
ITI ENVIRONMENTAL INC. Street Address				3	PAR ENVIRON	MENTAL CORF					
1253 NORTH CHURCH STREET					Street Address 313 SPOOK R						
City, State, Zip Code					City, State, Zip	Code				-	
MOORESTOWN, NE Project Manager for Monitoring Firm	-w JERSE		N. 10	Number		W YORK 10901					
JIM GUILARDI			840-88		Telephone Nur 845-369-7500	nber Lice		Numb	er		
EXPECTED START DATE (10): (RESTART)	Sched	. Com	pletion	Date (11)	Name of OSHA	Monitor					
7 / 13 /18 Month Day Year	Me	onth	9 /	13/ /18 Day Yea	QUALITY ENV	IRONMENTAL S	SOLU	TIONS	S & TE	ECH.	
Occupancy Status During Abatement (Check only one Facility Closed/Vacated During Entire Peri Abatement Performed Outside of Normal F	e) od of Ahate	ement	assriba		Street Address 1376 ROUTE 9					0.50	
X Other - Describe: MONDAY -FRIDAY 74	M-12AM	113 - DE	escribe	•	City, State, Zip				-	-	
Scope of Work (Check all that apply)				V 5.11 Ca	ntainment	WAPPINGER	S FAL	LS, N	IY 125	590	
Demolition X	Renov	ation		Mini Er							
>3SF OR LF X >160 SF OR 260 LF					ag Procedure						
Location of	ls.	Location	on T	Description of	iable Procedure		_	-			
Asbestos-containing		nally u		Containing Mat		Amount	R	70		ment T	ype
Material (ACM)		olely b		(ie. Thermal		(Specify	E	REPAIR	NC.	NO.	
TO BE ABATED in Facility (13)		t/Custo		insulation, surfa		SF or LF)	REMOVAL	AR	ENCAPSUL	ENCLOSUR	
	Yes	No	N/A	or other misce	elianeous)		1		E	SUR	
2nd Floor Room 62			x	Floor Tile Mastic		775 SF			1		
2nd Floor Room 62			x	Ceiling Plaster		775 SF	1	+	_		
				3 , 100 (0)		77331		+	1		
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ame of Registered Waste Hauler	NUDEC	\A/- :		2. H. W	1						
EWARK CARTING INC. 69 RAYMON BLVD.	NJDEP Hauler I			Cubic Yards of Waste 30	Name of Registe GRAND CENTR	ered Landfill RAL SANITARY I	LAND	FILL			
ity, State EWARK, NEW JERSEY 07105				Disposal Date	City State	//-			1	0/	
ompleted by (Print or Type) Title				7/13-9/13/2018 Signature	PLAINFIELD TO	MNSHIP, PA	-/	,	11	//	
ENJAMIN SANCHEZ DIRECTOR OF O	PERATION	NS		Signature	1/1	Date	1	2/	14	1/10	/
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Ch 31L	19		(Pur	suant to NJ.A.	8:60-7 and 12:120-7		KI	<u> </u>	
Date of Notification (1)	-				Name of Building Owner	er/Operator (2	1 1	JUL 23	2018
July 19, 2018		1	-		Warren County T				Ì
Agencies Notified		Notification		:c: 1: -	Street Address	-	ASR	ESTOS CO	NTBOL &
X EPA				ification	1500 Route 57		AGD	LICENSIN	IG
DCA					City, State, Zip Code	7000	or commence of the second second	AND THE PERSON NAMED IN COLUMN TWO PARTY AND THE PERSON NAMED IN COLUMN TRANSPORT AND THE PERSON NAMED IN COLUMN TWO PARTY AND THE PERSON NAMED IN COLUMN TWO PARTY AND THE PERSON NAMED IN COLUMN TWO PA	many restriction with a restriction of the Billion
x DOL			cation)	(including	Washington, NJ (	)/882			
X DEP X DOH		□ Cance			Name of Contact C/O Mr. Pat McGuinne	ace		one Number	
X DOIT			,iiou	FACILITY IN	FORMATION		908.4	154.6316	
Name of Facility Where Abate	ement is T	aking Place (3)		TAGILITTIN	Type of Facility (4)				
Warren County Tech	nical S	chool			School (K-12)				
Street Address					Subchapter 8 (other th	an K-12)			
1500 Route 57					Other (i.e. private	& commercial	buildings, h	omes, etc.)	
City (5)	County (	'6\	Count		Sq. Feet: Unknown	# of Floo	ors: 2 Blo	dg. Age: 80	) years
Washington	Warre			y Code (7) Use Only)	Current Has (prior if hair	na dousellete	-15		
<b>3</b>		••			Current Use (prior if being	ng demolishe	3):		
Name of Monitoring Firm Hire	d by Bldg.	Owner (8)	ASCN	l No.	Name of Contractor (9)				
RK Occupational &	ž.								
Environmental Ana	alysis,I	nc.			GREENWOOD ABA	TEMENT O	ONSUL	TANTS, INC	٥.
Street Address					Street Address				
401 St. James Avenu	e								
City, State, Zip Code					511 MAIN STREET				
Phillipsburg, NJ 0886	35				City State, ZipCode Butler, NJ 07405				
Project Manager for Monitorin	g Firm	Telephone N	lumber		Telephone Number		License	Numbor	
Mr. Patrick McGuinne	ess	908.454.6			- otophone (variber		License	Number	
Scheduled Start Date (10)		Cabadalada			973-492-0477		00840		
July 30,2018		Scheduled C August 7		on Date (11)	Name of OSHA Monitor				
		100			EMSL inc.				
Occupancy Status During Al	patement	(Check only or	ne)		Street Address				
▼ Facility Closed/Vac	ated Duri	ng Entire Perio	d of Ab	atement	4050 Ct-14 D				
Abatement Performed Describe	Outside	of Normal Faci	lity Houi	'S -	1056 Stelton Road City, State, Zip Code				
Other - Describe: 7ar	n-7pm								
	5.5				Piscataway, NJ 08	854			
0 1111 1 101 1									
Source of Work (Check all that	t apply)								
≥ 3 sf or ≥ 3 lf					<b>1</b> 272			Negative Pre	ssure
				Demolition	ion		nclosure		
				Demoillon		Glovebag x Non-Exer		nd Non-Friabl	le Procedure
Location of Asbestos-Containing Material (ACM) in Facility (13)		ocation Normall		Description of Ast	estos Containing Material	Amou	nt Al	batement Type	e riocedule
Material (ACM) III Facility (13)		ely by Maint./Cu f? (12)	stodial	(ACM) (i.e. therm VAT, or other mise	al systems insulation, surfac	NO. 2007 AND ADDRESS OF THE PARTY OF THE PAR	fy SF	emove Renair	Encap Enclose
	YES		NA	Tring or dutor miles	0011.)	or LF)	1	omovo (topaii	Elicab Eliciose
Room # 124,125,131 8	š.	X		VAT & Masti	С	2,060	sf 🗵		
130									1 1
Name of Reg. Waste Hauler See Hauler Below # 1 & 2		NJDEP Wast		ID#	Cubic Yards of Waste:			Registered Lar	ndfill
See Haulel Below # 1 & 2		See Below			30 cyc	ds		vfill Landfill	
							G.R.O.V	V.S	
Hauler #1) Greenwood /	Ahatama	nt Consulta	nto In	a Dutlay N I O	7405	Diamond D.		1 000 000	
NJ DEP # 125	561 NY E	DEP#	iiio, III	o. – Dutier, NJ 0	7405	Disposal Date August 7		City, Stat Route 2,	
Hauler #2) Newark Cartin			04509, N	NJ DEP # 19551		August I	,2010	Bridgepor	rt, WVA
<u> </u>								304-842-2	2784
Completed by (Print or Type) Marin Graure	1 2	Title		_	Signature		<u>Date</u>		
maini Graufe		SENIOR PR	OJEC	1	Marin Graus	26	July 1	9,2018	

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Date of Notification (1) 07/18/2018				of Buildin		Operato	r (2	)		IUL	23	2018	3
Agencies Notified Type Notification	n			Address			_		ASR	COTO	0.00	A CTO	
X EPA X Initial Amended				RANKI ate, Zip C		RNPIK	E		ASB	LICI	ENSI	IG IG	) L. &
DOL Amendme	nt # y (including	_	WALI	DWICK	NJ.074	163							
DOH justification Cancellation	1)			of Contac		ΙΙΕΙΔ			Telephone No.				
				ILITY IN	21.000		_		201-444	- 000	JU		
Name of Facility Where Abatement is Tak PRIVATE	ing Place (3	)					T	ype of Facility (	a. •				
Street Address						_	E		8 (Other than K-	12)			
150 FRANKLIN TURNPIKE							×	Other (i.e. p etc.)	rivate & commerc	cial bu	ildings	s, hom	es,
City (5) WALDWICK NJ. 07463							100	quare Feet 64,000	# of Floors		Bldg. 65	Age	
County (6) BERGEN				Code (7)	77		1		or if being demolis		00		
Name of Monitoring Firm Hired by Building				VI No.	-	Name	of a	Abatement Con	N/A		-		
EMPIRE ENVIRONMENTAL LTD						NOF	RTF	HEAST EN	/IRONMENTA	L LL	C.		
Street Address 435 MAIN RD.						Street 1126		dress 1 ,ST					
City, State, Zip Code						City, S	State	e, Zip Code				-	
TOWACO NJ. 07082 Project Manager for Monitoring Firm			Telepho	no No				BERGEN I					
MICHAEL MOSIER				338 <b>-</b> 56	641	Teleph 201-		6 - 0642	License I 01300	No.			
Start Date (10) 07/27/2018	Schedule 08/13/2		npletion	Date (11)				OSHA Monitor	LING				
Occupancy Status During Abatement (Che				81		Street		ANALYTICA dress	L INC.				
Facility Closed/Vacated During Entire	Period of A	baten	nent					38 ST.					
Abatement Performed Outside of Nor Other – Describe:	mal Facility	Hours						e, Zip Code ORK NY.					
Scope of Work (Check All That Apply)				Unaning wa		1411	v 1	OIM NI.					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emoliti				×	Anna Janes	Mini-Enclosure Glovebag Proc				·e	
		ocati				-	-	and in produ	, Januarion Hai	1	Abat	ement	
Location of Asbestos-Containing Material (ACM)	Used	ormali I Solei ntenar	ly by	Asbes		scription aining M		rial (ACM)	Amount		13	/pe	
TO BE ABATED In Facility	Custo	dial S			thermal		s ins	sulation,	(Specify SF or LF)	Ren	Re	incap	Encl
(13)	-	(12)			other r	niscellan	eou	ıs)	J. 01 L1 /	Removal	Repair	Encapsulate	Enclosure
BUILDING # 4	Yes	No X	N/A	TDAN	SITE C	EH IN	~ (	2 14/411.0	0.500.05	1,,		e)	_
	-	^			PANEL			& WALLS	8,500 SF.	X	-		
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											-		
lame of Registered Waste Hauler			JDEP Wauler ID		Cubic of Was				egistered Landfil		1		
OVIC TRANSPORT		31. 3320	003531		40 C	ſΥ			entral Sanitar	y Lar	ndfill		
ity, State 0 RIVERDALE RD. RIVERDALE I	NJ. 07457	7			Dispos	al Date		City, State	n,Argyl Rd. P	on Ar	avl 1	DΔ	
completed by	Title					ignature	/	2 /	//	en Ar	gyi,	۸.	-
CARLOS ESQUIVEL	SAFE	TY N	MANAG	ER		5	1	January.	miles 0.	7/18/	2018		

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Date of Notification (1) 07/17/2018			Name (	of Building dence	Owner/0	Operator	(2)				Jl	jĻ	23	3 20	118
Agencies Notified Type Notification	on		Street	Address					1	A	SBE	STO	)S C	ONT	ROL
X EPA X Initial Amended Amendme	ent #			tate, Zip C all Park,		3824						LIC	ENS	ING	i de la companya de
		g	Name o	of Contact ne Seller					Tel	ephone	Numb	er			
	7.11			ILITY INF		ON								I I I I I I I I I I I I I I I I I I I	
Name of Facility Where Abatement is Tak Residence	king Place (	(3)					Тур	e of Facility (	50						
Street Address							×	School (K-1 Subchapter Other (i.e. p	8 (Othe			buile	dings	, hom	es,
City (5) Kendall Park								etc.) iare Feet		Floors		В	Bldg. A		
County (6) Middlesex				Code (7) USE ONLY	o			rent Use (Pric	1.2.	ng demo	olished				
Name of Monitoring Firm Hired by Building A. Seine Lighthouse Solutions	g Owner (8	)	ASCI	M No.				patement Con ank Service		(9)					
Street Address PO Box 354						Street 1256		ess erty Avenu	—— е						
City, State, Zip Code South Orange, NJ 07079						City, S	tate,	Zip Code NJ 07205							
Project Manager for Monitoring Firm Sarah Calandra			Telepho 201-3	one No. 49-2666		Teleph 844-4	one l	No.		Licens 01316					
Start Date (10) 07/26/2018	Schedul 08/09/			Date (11)				SHA Monitor Lighthouse	Solu						
Occupancy Status During Abatement (Che	eck Only O	ne)				Street	Addre	ess							
Facility Closed/Vacated During Entire Abatement Performed Outside of Not Other – Describe:	Period of rmal Facilit	Abater y Hour	ment s				tate,	Zip Code	7/					<u> </u>	
Scope of Work (Check All That Apply)						Sout	h Or	ange, NJ 0	7079						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli				×	M G	ull Containme lini-Enclosure lovebag Proc on-Exempted	edure					۵	
	1 20	s Locat Norma							( ) ( )	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Abate	ement pe	
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Use Ma	ed Sole aintena stodial S	ely by nce/	Asbes (i.e.	tos Conta thermal surfac	cription aining M systems ing, VA iscellan	lateria insu T, or		(S	mount pecify or LF)		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A							***		<u>a</u>	7	late	Ire
Basement		Х			Flo	oor Tile	9		1,58	86 SF	X				
Name of Registered Waste Hauler		1 1000	JDEP W		Cubic `			Name of R	legister	ed Land	dfill				
Newark Carting			lauler ID 4509	No.	of Was	te		Waste M	1anag	ement	t Lan	dfil	l		
City, State East Orange, NJ					Dispos	al Date		City, State		PA					
Completed by	Title	e Mar	nager		Si	gnature	Ŵ/	WW	,		Date	7/0	040		

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Date of Notification (1) 07/16/2018			Name of Resid	of Building lence	Owner/	Operato	r (2)				Jl	JL	Zú	201	j
Agencies Notified Type Notification  X EPA Initial	1		Street A	Address						A	SBE	STO	S CO ENSII	NTR NG	& JC
X EPA X Initial Amended Amendmen				ate, Zip Co ham Bor		7945									
X       DOH       ☐ Emergency justification         ☐ DCA       ☐ Cancellation	)	Ī		of Contact ie Ander	son Ev	ans			Tele	ephone	e Nur	nber			
Name of Facility Where Abatement is Takin	na Place /	2/	FAC	ILITY INFO	ORMAT	ION	T =		(1)						
Residence	ig Flace (c	2)					l lyk	oe of Facility							
Street Address							×	Subchapter Other (i.e. petc.)	8 (Othe				dings	, hom	es,
City (5) Mendham Boro							30000	uare Feet 558	# of	Floors	S		Bldg. A	Age	
County (6) Morris			County (STATE	Code (7) USE ONLY	)		Cur	rrent Use (Pri	or if bei	ng den	nolish	ied)			
Name of Monitoring Firm Hired by Building A. Seine Lighthouse Solutions	Owner (8)		ASCI	M No.				batement Cor ank Servic		(9)					
Street Address PO Box 354						Street 1256		ress erty Avenu	ıe						
City, State, Zip Code South Orange, NJ 07079								Zip Code NJ 07205							
Project Manager for Monitoring Firm Sarah Calandra			Telepho 201-34	ne No. 49-2666		Teleph 844-		No. -7465		Licen 0131		0.	22111111	1,500	
Start Date (10) 07/26/2018	Schedule 08/09/2		npletion	Date (11)				SHA Monitor Lighthous	e Solu						
Occupancy Status During Abatement (Chec	ck Only On	ne)				Street			0 0014	uono					
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	Period of A	Abaten	nent				tate,	Zip Code					-2		
Scope of Work (Check All That Apply)						Sout	h Oı	range, NJ	07079						
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>		tenova emolit				×	N G	full Containme fini-Enclosure Glovebag Prod Ion-Exempted	e cedure					۵	
Location of	2000	Locati Iormal			Do	scription					1100		Abate	ement pe	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Mai	d Sole intenar odial S (12)	nce/		tos Cont thermal surfac	aining N	Materi s insu T, or		(S	nount pecify or LF)		Remova	Repair	Encapsulate	Enclosure
December () ()	Yes	No	N/A	3				(1.44.))		(**)				ate	e.
Basement		X			Transit	e pipe	wra	ap	5	LF		X	_		
Name of Registered Waste Hauler		2.8	JDEP W		Cubic			Name of	Register	red La	ndfill				
Newark Carting		10022	lauler ID 4509	No.	of Was	ste		Waste I	Manag	emer	nt La	andfi	II		
City, State East Orange, NJ					Dispos	al Date	4	City, State Penn A		PA					
Completed by Alison Lamers	Title Office	e Mar	nager		S	ignature	10	Men			Dat 07		2018		

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ChileII			IOTIF (F	Ursuant	to NJĄĆ/	<b>ÉST</b> OS 8:60 an	ABATE 0 12:12	ot	d		) E C	E			
Date of Notification (1) 07-18-18	4				Building onstruct			(2)			JUL	23	3 20	18	
Agencies Notified	Type Notification			Street Ad					THE STATE OF THE S			And property	estateate	- Assistantina	
EPA	Initial				mon St	āls —					ASBEST	OS C		ROL	&
DEP DOL	Amended Amendmen		_		te, Zip Co k, NJ 07					L	-	IUEIVE	SHNG		is after these
DOH DCA	justification)  Cancellation	-		Name of	Contact Espino	sa					ephone Nu 73) 344-4				
	Ganochation				LITY INFO		ON			10					
Name of Facility Where A Main Slaughter Hou								Ту	pe of Facility (4						
Street Address 1707 South Washin								r	School (K-12 Subchapter Other (i.e. pi	g (Oth			dings,	home	es,
City (5)			-1					Sq	etc.) uare Feet	#0	f Floors	В	ldg. A	ge	
Piscataway County (6)				County	Pada (7)			0	mant Han (Drin	- if had					
Middlesex				County C	Jode (7) ISE ONLY)			CL	rrent Use (Prio	r ir bei	ing demolis	iea)			
Name of Monitoring Firm Environmental Con		Owner (8)		ASCM	No.				batement Contontracting LI		(9)				
Street Address							Street	Add	Iress	-0.					
120 North Warren S City, State, Zip Code	St. 						522		St.						
Trenton, NJ 08608							Unio	n C	ity NJ 0708	7					
Project Manager for Mon Dominic Dercole	itoring Firm			Telephor (609) 4	ne No. 62-321	8	Teleph 201		No. 8-9603		License N 01206	lo.			
Start Date (10) 07-18-18		Schedule		mpletion [	Date (11)				SHA Monitor ontracting LI	C					
Occupancy Status During	g Abatement (Che					-	Street	Ado	Iress						
Facility Closed/Vaca Abatement Perform	ated During Entire	Period of A	Abate	ment			522								
Other – Describe:	ed Odiside of Nort	nai i aciity	11001						, Zip Code City NJ 0708	7					
Scope of Work (Check A	li That Apply)			in.				_							
≥3 sf or ≥3 if ≥160 sf or ≥260 if			lenov lemol					7	Full Containme Mini-Enclosure Glovebag Proc	edure					
		1							Non-Exempted	(*) an	d Non-Friat	le Pro		e ement	
Location	of	27.70	Loca lorma	70 70 PM		De	scription	o of					No. of the last of	ре	
Asbestos-Containing	Material (ACM)		d Sol	ely by		tos Con	taining N	/late	rial (ACM)		mount	_		ш	ш
TO BE AB			odial	Staff?	(i.e.		system cing, VA		sulation,		Specify F or LF)	Remova	Repair	icap	Enclosure
(13)		-	(12)				niscellar				1 100-1051	oval	air	Encapsulate	sure
Exteri	or	Yes	No X	N/A	roofii	na Mai	erial /	Del	oris Pile	7	50 SF	x			
Root			×	+			Roof S				00 SF	x			
Exteri			x	1 1			ement				00 SF	x			
								-				+	-		
Name of Registered Was	ste Hauler		-	NJDEP W	aste	Cubic	Yards		Name of F	Registe	ered Landfil	1_			
Delfa Contracting LL	.C			Hauler ID 356240		of Wa	ste 30		Tullytow	n Re	source R	ecov	ery F	acili	ty
City, State Union City, NJ							sal Date 23-18	)	City, State Tullytow		4				
Completed by		Title				8	Signature	е	d.		Da	ate	46		
Jaime Delgado		Proj.	Man	ager.		1	/	/	9		0	7-18-	18		

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Ch 23Ldo		NOTIF (F	ICATIO	State of N N OF ASI It to NJAC	BESTOS	ABATE	MEN 0)	Т			G			15
Date of Notification (1) 07/12/2018				of Building dence	g Owner/	Operato	r (2)			leon	JUL	23	201	8
Agencies Notified Type Notification			Street	Address					-	ASE	COTO	0.00	N. Introduction	nearenesse Co. L. O.
× EPA × Initial										ASE	ESTO LIC	S CO E <u>nsi</u>	NTRI Vig	JL &
X	t #			tate, Zip C wood N		1					440 p+ ~e~ 30 a+	Migranian,	retelen teleper	64 147 HS-4
Emergency	(including	,	_	of Contact					Tolo	phone N	lumbor			
□ DOH justification     □ DCA     □ Cancellation				y Heum					Tele	priorie	unibei			
			FAC	ILITY INF	ORMAT	ION								
Name of Facility Where Abatement is Takir Residence	ng Place (	3)					Тур	e of Facility (4	)					
Street Address								School (K-12						
Street Address							×	Subchapter 8 Other (i.e. pr				Idinas	hom	es
City (5)								etc.)	,				ā.	-7!
Englewood							5,8	are Feet	# of	Floors	- 1	3ldg. /	Age	
County (6)			County	Code (7)				rent Use (Prior	1000	a demol		114		
Bergen			(STATE	USE ONLY	n		Jul	.511, 556 (F1101	ii bell	A ACHIO	isrieu)			
Name of Monitoring Firm Hired by Building A. Seine Lighthouse Solutions	Owner (8	)	ASCI	M No.				patement Contract		(9)				
Street Address PO Box 354						Street 1256		ess erty Avenue		11-2				
City, State, Zip Code South Orange, NJ 07079								Zip Code NJ 07205						
Project Manager for Monitoring Firm Sarah Calandra			Telepho 201-3	one No. 49-2666	3	Teleph 844-		No. 7465		License 01316	No.			
Start Date (10) 07/23/2018	Schedul 08/06/		mpletion	Date (11)				SHA Monitor Lighthouse	Solut	ions				
Occupancy Status During Abatement (Chec	k Only O	ne)				Street								
Facility Closed/Vacated During Entire	Period of	Abaten	nent			PO E								
Abatement Performed Outside of Norm Other – Describe:	nal Facilit	y Hours	3			00000		Zip Code	7070					
Scope of Work (Check All That Apply)						Sout	n Or	ange, NJ 0	7079					
≥3 sf or ≥3 if ≥160 sf or ≥260 if		Renova Demolit			10	×	M G	ull Containmer lini-Enclosure lovebag Proce	dure					
	Τ.		Average in				J N	on-Exempted	*) and	Non-Fri	able Pro	70.00		
Location of		Locati Normal			-	u!4'							ement /pe	i
Asbestos-Containing Material (ACM)	Use	ed Sole	ly by	Asbes		scription taining N		al (ACM)	An	nount			ш	
TO BE ABATED In Facility		todial S			. thermal		s insu			ecify	Rer	R	nca	Enc
(13)		(12)				niscellar		)	31	or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A	1							<u> a</u>	1	ate	Ġ.
Basement		X			Pi	pe wra	р		22	0 LF	X			
	-													
Name of Registered Waste Hauler		I N	JDEP W	Vaste	Cubia	Yards		Non- of D	alet-	ad I 1				
Newark Carting		Н	auler ID		of Was			Name of Re				ш		
		04	4509					Waste M	anag	ement	Landi	IL		
City, State East Orange, NJ					Dispos	sal Date		City, State	ndo 5	٥٨				
Completed by	Title				1	1/1	-	Penn Arg	yie, i		2-1			
Alison Lamers	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	e Mar	nager		S	ignature	1	10100%			Date 17/19/	2010		

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4	OTF	CATION Unaugnt Name o	TO NJAC B	s tos and	SATEMENT 112:120)	-		JL	JL_	2 3	20
		Dunelle	n Board	of Educ	ation		Gheck N	9. 117!	STOR	200	ONIT
				Streets			- transmissing the				
·					8812	D	OL - 10	DAY	/	-	7
cingiua						Te 73	2-DRR-3928		1		
- Financia		FACI	LITY INFO	RMATIC			The state of the s	7	$\preceq$		口
3 Macs (3)							71	_			
					School (F)  Subchapte  Other (Le	8 Divertinan	EBIAPP	ROV	ED	<del>10.)</del> .	
					Square Feet 60.000	2	of Floors				-,
		County (	Code (7) USE DNL Y)	_	Current Use (	rior if being der igh School	molished)				
Owner (6)							r (9)				
					806 McBride	FAE					
					City, State, Ziji Woodland P	K. Yow Jerse	)y		15		
					Telephone No. 973-225-840		License No D1104	i			
Schedule 07/26/20	d Con	npletion	Date (11)				ries, LLC				
		ent			2333 Route :	2 Vilest					
nt Facility i	Hours				Chy, State, Ziji Union, NJ 07	Corle 183			-	_	
					☐ Min ·	Inclosure Big Procedur	e / Limited Co	entalnen		Teni	
								A			
Use	d Sole Intens	ncer Staff?		tos Con nai syst	taining Material ems insulation, : VAT, or	urfacing,	ŠF of LF)	Remova	Repair		Endosure
Yes	Na	N/A								ie.	10
	×						50 SF	×			
	X		Pipe	Insulati	on/ Fitting (W.:	p & Cut)	170 LF	×	i		
	X						18 LF	X			
	Х		Asbestos	Pipe &	Elbows (O & N	Mrsp & Cure)	130 LF		×		
		JDEP W	0.0000000000000000000000000000000000000	of Was	ta	Name of Regis					
		18724									
		18724		Dispos 07/28	al Dete	City, State Viorpisolle, P	Α				
	Schedule (5)  Schedule (7/26/2)  K Only On eriod of All Facility in the Cust Mai Cust	Scheduled Corror (5)  Scheduled Corror/26/2018  K Only One) eriod of Abstemati Facility Hours  Is Locate Normal Used Sole Maintena Custodial (12) Yes Na X	Name of Dunelle Street A High are City. Ste Dunelle Cluding Name of Gene & FACI Place (3)  County (STATE (5) ASCM 0005  Scheduled Completion 07/26/2015  K Only One) eriod of Abatement at Facility Hours  El Renovation Demolition Demolity by Maintenance/ Custodial Staff? (12)  Yes No N/A  X	NOTE CATION OF ASSET Pursuant to NJAC (Pursuant to NJAC) Name of Building Dunellen Board (Street Address High and Leigh Street Address High No. (STATE USE ONLY)    County Code (7)	Note CATION OF ASSESTOR A Pursuant to NJAC 180 and Name of Building Owner/O Duniellen Board of Educ  Street Address High and Leigh Streets  City. State, Zip Code Dunellen, New Jersey O Dunellen, New Jersey O  Cluding  Name of Contact Gene Mosely  FACILITY INFORMATIO  Place (3)  County Code (7) (STATE USE DNLY)  Denner (6)  ASCM No. 00057  Telaphone No. 608-392-4200  Scheduled Completion Date (11) 07/26/2018  K Only One) Period of Abatement Int Facility Hours  El Renovation Demolition  Is Location Normally Used Solely by Maintenance/ Custodial Steff? (12)  Yes No. N/A  VAT & Mast  X Pipe Insulation  Pipe Insulation	NOTIFICATION OF ASSESTED ASATEMENT (Pursuant to NJAC side and 12:120)  Name of Building Owner/Operator (2)  Dunellen Board of Education  Street Address High and Leigh Streets  City. State. Zip Code Dunellen, New Jersey 08812  Name of Contact Gene Mosely  FACILITY INFORMATION  Type of Facility Subchaption Chart (Le Square Feet 60.000  County Code (7) (STATE USE DNLY)  Dwner (5)  ASCM No.  O0057  ASCM No.  O0057  Insert Address 806 McBride City, State, Zip Woodland P:  Telephone No 609-392-4200  Street Address 806 McBride City, State, Zip Woodland P:  Telephone No 609-392-4200  Street Address 806 McBride City, State, Zip Woodland P:  Telephone No 609-392-4200  Street Address 806 McBride City, State, Zip Woodland P:  Telephone No 609-392-4200  Street Address 807-325-846  City, State, Zip Union, NJ 0:  El Ranevation Demolition  La Location Normally Used Solely by Maintenance/ Custodial Staff? Custodial Staff? Custodial Staff? Custodial Staff? VAT. or other miscellaneout  X Pipe Insulation & Fitting (W.)  X Pipe Insulation & Fitting (W.)	NOTIFICATION OF ASSESS AS A	NOTIFICATION GP ASSESTED AS ATTEMENT Pursuant to NJAG 5:50 and 12:120)  Name of Suliding Owner/Operator (2)  Durishen Soard of Education  Street Address High and Leigh Streets  City. State. Zip Code Dunellen, New Jersey 08:12  Name of Contact Gene Mosely  FACILITY INFORMATION    Subshapit   Subshapit   Property   Property	NOTE CATION OF REPERTOR AS ASTERMENT Pursuant to NAGE See and 12:120)  Name of Building Owner/Operator (2)  Dunellen, New Jersey 08812  Name of Contact Gane Mosely  FACILITY INFORMATION  Place (3)  Place (3)  Talephone Number 732-983-328  Square Feet 80.000  County Code (7)  Street Address  High and Leigh Streets  County Code (7)  County Code (8)  Research Address  Square Feet 80.000  County Code (9)  County Code (10)  County Code (10)  County Code (10)  County Code (11)  County Code (12)  County Code (12)  County Code (12)  County Code (12)  County Code (1	NOTIFICATION OF RENESTOR ASSATEMENT Persuant to NAZO 6.60 and 12:120) Name of Building Owner/Operator (2) Durisling aboard of Education  Street Address High and Leigh Streets City, Steet, 2jo Code Dunellen, New Jersey 08812  Name of Contact Gene Mosely FACILITY INFORMATION  PACILITY INFORMATION  Subschaff is Defined Are 12:120 APPROVED  Cher (i.e. white & commercial buildings, herees, 4 80,000  County Code (7) STATE USE ONLY)  Present Use (i) for if being demoished) Street Address OO Moshide  County Code (7) STATE USE ONLY)  Present Use (i) for if being demoished) Street Address OO Moshide  City, State, 2ji 2d/s Woodland P: K. New Jersey  Telephone No 605-392-4200  Telephone No 605-392-4200  Telephone No 605-392-4200  Telephone No Colly State, 2ji 2d/s Woodland P: K. New Jersey  Telephone No Colly State, 2ji 2d/s Woodland P: K. New Jersey  Telephone No Colly State, 2ji 2d/s Woodland P: K. New Jersey  Telephone No Colly State, 2ji 2d/s Woodland P: K. New Jersey  Telephone No Colly State, 2ji 2d/s Woodland P: K. New Jersey  Telephone No Colly One)  Scheduled Completion Date (11) Name of OSRI Monitor Into Environmin Intel Laboratories, LLC  Conly One)  Scheduled Completion Date (11) Demoition  Demoition  Full: 2nth imment with Negative Pressure City, State, 2ji 2d/s Woodland P: K. New Jersey  Telephone No Colly One)  Scheduled Completion Date (11) Asset Address City, State, 2ji 2d/s Woodland P: K. New Jersey  Telephone No Colly One)  Scheduled Completion Date (11) Scheduled Completion Date (11) Name of OSRI Monitor Intel Environmin Intel Laboratories, LLC  Telephone No Colly One)  Scheduled Completion Date (11) Asset Address City, State, 2ji 2d/s Woodland P: K. New Jersey  Telephone No Colly One)  Scheduled Completion Date (11)  Asset Address Colly One)  Scheduled Completion Date (11) Name of OSRI Monitor Intel Environmin Intel Laboratories, LLC  Telephone No Colly One)  Scheduled Completion Date (11)  Asset Address Colly One)  Scheduled Completion Date (11)  Name of OSRI Monitor Colly One)  Scheduled Completion O	NOTIFICATION OF ABBET DE ABATEMENT Politrounit District Address Name of Bullding Owner/Operator (2)  Street Address High and Leigh Streets High and Leigh Streets  LICENS  Street Address High and Leigh Streets  LICENS  DOL - 10 DAY  DOL - 10 DAY  Talephone Number Talephone Number Talephone Number Studies of February  Street Address FACILITY INFORMATION  Type of Facility  Street Studies of February  County Code (7)  Strate Use Only One  County Code (7)  County Code (7)  Strate Use Only One  County Code (7)  County Code (

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		N	OTIF		ite of New OF ASBE		BATEMENT						Military as pro-
Date of Notification (1)				umuant	to NJAC 8 Building O	:60 and	12:120)		int had	JUL	2	3	201
07/16/2018					n Board o				Check No.	1175		-1	
Agencies Notified	Type Notification			Street Ad High an	dress d Leigh S	traets			10,6	SEST.	gs.	cdi	VIF
E DEP	⊠initiel □Amended		f		te, Zip Cod n, New Ji			-		3/	<u>den</u>	1810	G
	Amendment #_	uding	-		Contact	stack no			elephene Numb	A P	-	+	_
□ DCA	Justification)  Cancellation			Gene M				1112	32.968/332d		.] .a	-	
Name of Facility Where	Abstament is Taking F	Data (3)	_	FACI	LITY INFO	RMATIO	Type of Facilit	V7/*/ V			1.7		
Dunellen High School	ol .	ineo (o)					El School (K						
Street Address 411 1st Street	*	2					☐ Subchap	8 Other than	nK-12) mercial building	s, hom	es, et	c.)	
City (5) Dunellen, New Jerse	ey 08812						Square Feet 80,000	2	of Floors	504	, Ago	P	
County (8) Middlesex				County (	code (7) ISE ONLY)	_	Current Use (	rior if being de Igh School	emplished)				
Name of Monitoring Fit Environmental Conn		vner (8)		ASCN 0005			Name of Abati Lilich Corpor		or (B)				
Street Address 120 North Warren St	treet						Street Addres: 505 McBride	+ve					
City, State, Zip Code Trenton, New Jersey	08808						City, State, Zip Woodland Pa	Socie k. Yew Jers	ey		•		
Project Manager for Mo Dominick Dercole	unitoring Firm			Telephor 509-39	2-4200		Telephone No. 973-225-840		D1104				
Start Date (10) 07/19/2018	50	chedule 17/26/20	d Cor	mpletion I	Date (11)		Name of OSH		tories, LLC				
Occupancy Status Dun							Street Address	? Vilest					
☐ Facility Closed/Var ☐ Abelement Perform ☐ Other - Describe:	ned Outside of Normal					r	City, State, Ziji Union, NJ 67						
Scope of Work (Check	All That Apply)										1000		
다 23로 or 23 lf 교 2160로 or 2260 lf			emoli enova				☐ Min'. ☐ Glov	Enclosure Bag Procedu	th Negative Pre	กในข่างก		Tent	
					Γ		X Non-	Xempted (*) 8	Amount		baten	hent	
Locati	on of	N	Local	lly		г	Description of		(Specify SF of LF)		Тур		
Asbestos-Containt TO BE A In Fat (13	ng Material (ACM) BATED citty	Mai	ntens	Staff?		mai syste	teining Materia: ems insulation, i VAT, or r miscelleneous	unterding.		Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A	]			_			L	曾	"
Rm 7 Chem Lab, Rm 7 Blok			X		VAT	& Mast	ic (Non Friable	Aethod)	50 SF	×			
Rapm			×	T	Pipe	insulati	on/ Fitting (Win	p & Cut)	170 LF	X			
A Loca	itions		×		Pipe	Insulatio	on & Fitting (Wi	ip & Cut)	18 LF	X			
Wood	ishap		×	T	Asbestos	Fipe &	Elbows (O & N	Vrap & Cure	130 LF		x		П
Name of Registered W	faste Hauter	لــــا		NJDEPY		Cubic		var no of Reg	stered Landfill				
Lilich Corporation				Hauler ID 18724	NO.	of Wes		ailess La	ndfill			2000	
City, State Woodland Park, New	w Jersey					07/26	1 1 1	An risville,	1				
Completed by Adriana Olejarova		Title Pre	sidə	nt		Ŝ	In a sur	5.0	Dat 07	7/18/2	018		
ASE-41 (R-06-08)							10						

<sup>\*</sup> Do not use tit i form for sebestos licensure exempted activities.

Ch117	$\varphi$		NOTE	CATION	Tate of New V OF ASBI	STOS	ABATEME	ENT	DE	CE		$\mathbb{V}$		M
Date of Notification (1) 07/18/2018				Name o Montcl	of Building ( air Board	Owner/C of Edu	Operator (2 cation	)	The state of	JUL 8	2 Ch2	6k#	1176	IJ
Agencies Notified  □ EPA  ☑ DEP	Type Notification  ☑ Initial ☐ Amended			City, Sta	ey Road	de			AS	BESTOS LIGE	S CON MSING	TRO	. &	Production of the last
☑ DOL ☑ DOH ☑ DCA	Amendment #  Emergency (in justification)  Cancellation	cluding	-	Name o	air, New J f Contact schmann	ersey (	07042			hone Nui 509-4044	mber			
Name of Facility When	re Abatement is Takir	o Place (3	1)	FAC	LITY INFO	RMATI		Facility (4)						
Northeast School		9 1 1400 (0	7					iool (K-12)						
Street Address 603 Grove Street							☐ Sub	ochapter 8 (Other (i.e. private			ngs, ho	mes,	etc.)	
City (5) Montclair							Square 30,000	Feet	# of F	Floors	10000000	dg. A )+	ge	
County (6) Essex					Code (7) USE ONLY)	41	Current	Use (Prior if be Sch		lished)				
Name of Monitoring Fi Detail Associates, In		Owner (8)		ASCN	/ No.			Abatement Co orporation	ontractor (9	9)				
Street Address 300 Grand Ave							Street Ad 606 McI	ddress Bride Ave						
City, State, Zip Code Englewood, NJ 076	31							te, Zip Code nd Park, Nev	v Jersey					
Project Manager for M Anthony Valentine	onitoring Firm			Telepho 201-56			Telephor 973-225			License N 01104	lo.			
Start Date (10) 07/30/2018		Schedule 08/06/2		mpletion	Date (11)			OSHA Monito ironmental La		es, LLC				
Occupancy Status Du							Street Ac 2333 Ro	ddress oute 22 West	t					
	acated During Entire ormed Outside of None:					_		te, Zip Code , NJ 07083						
Scope of Work (Check	( All That Apply)												-	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		107 PM	Renova Demolit					Full Contains Mini-Enclosu Glovebag Pro Non-Exempto	ire ocedure / L	imited Co	ontainn	nent&		
		Is	Locat	tion				TTOTT EXCITING	July 4 mg		_	Abate	ment	Ċ
Locat Asbestos-Containi TO BE A In Fa (1	ng Material (ACM) ABATED acility	Use Ma	Norma ed Sole intena todial (12)	ely by ince/ Staff?		os Cont thermal surfa	scription of taining Mat systems in cing, VAT, miscellaneo	terial (ACM) nsulation, or	(Spe	ount ecify or LF)	Removal	Repair	e Encapsulate	Enclosure
		Yes	No	N/A	1						_		ite	е
Tunnel		Х			Pipe Ins	ulation	n		200		X			
									-					
				-					-					
Name of Registered V	Vaste Hauler		1 2	NJDEP W Hauler ID		Cubic of Wa	Yards ste		f Registere	ed Landfil	ı			
Lilich Corporation City, State				18724			sal Date	City, Sta						
Woodland Park, Ne	w Jersey					08/06/	2018		/ille, PA <del>\_∩</del>		-1-			
Completed by Adriana Olejarova		Title Pre	esider	nt		0)	ignatune Ko	060			ate 07/18/2	2018		

Chin		1	NOTIE C+F	ICATION ursuan	t to NJAC	ESTOS 8:60 an	ABATEMENT d 12:120)							
Date of Notification (1 07/19/2018	)		- Learn		of Building outh Univ		Operator (2)			Check No.	1177			
Agencies Notified	Type Notification			Street A	Address edar Aver				1	heckNo	E		$\mathbb{V}$	E
□ EPA ⊠ DEP ⊠ DOL	<ul><li>☑ Initial</li><li>☐ Amended</li><li>Amendment #</li></ul>	<u> </u>			ate, Zip Co ong Brar		w Jersey 077	'64		ll Ju	L 2	3 2	018	A. In Statement Assessment
☑ DOH ☑ DCA	☐ Emergency (in justification) ☐ Cancellation	ncluding		Name of Timoth	of Contact				Tele	phone Num	ber	VIII WHEEL	Proof to gift come	
E DOA	Li Cancellation			//www.passassas	ILITY INF	ODMATI	ON		1.02	-57AS3424	TOS C	ONT	ROL	. &
Name of Facility When Monmouth University	e Abatement is Takir ty, Spruce Hall	ng Place (3	3)	170	izir i nei	ORMATI	Type of Fac		(Propagation)		100 001 110	-1130		State State of
Street Address 400 Cedar Street								(K-12) apter 8 (Other t .e. private & co			gs, hom	nes, e	etc.)	
City (5) West Long Branch,	New Jersey 07764						Square Fee 60,000	t	# of 2	Floors	Bld 50	g. Ag	ge	
County (6) Monmouth				County (STATE	Code (7) USE ONLY	)	Current Use R-2 Resider	e (Prior if being ntial-contains 2	demo	olished) elling units,	occupa	ints p	erma	anent
Name of Monitoring Fi AHERA Consultants	rm Hired by Building s, Inc.	Owner (8)		ASCI 0005			Name of Aba Lilich Corpo	atement Contra oration	ctor (	9)				
Street Address P.O. Box 385	100						Street Addre	75.750						
City, State, Zip Code Oceanville, New Jer	sey 08231						City, State, 2 Woodland	ip Code Park, New Je	rsey					
Project Manager for M John Smoyer	onitoring Firm			Telepho 609-65	ne No 52-1833		Telephone N 973-225-84			License No 01104	,			
Start Date (10) 08/04/2018		Schedule 08/07/20	ed Con	npletion	Date (11)		Name of OS Iris Environ	HA Monitor mental Labor	atori	es, LLC				
Occupancy Status Dur  Facility Closed/Va	ing Abatement (Chec cated During Entire F	- 5	85	ont			Street Addre 2333 Route							
☐ Abatement Perform☐ Other – Describe:	ned Outside of Norm	al Facility I	Hours				City, State, Z Union, NJ 0							
Scope of Work (Check	All That Apply)				3000 and an									
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf or ≥260 lf</li></ul>			enovat emoliti				☐ Min	Il Containment ni-Enclosure ove Bag Proce n-Exempted (*)	dure /	Limited Co	ntainm	ent 8	Tent	200
Locati	on of	7.4	Locati			D	escription of		A (S	mount Specify of LF)			nent e	
Asbestos-Containir <u>TO BE A</u> In Fac (13	ng Material (ACM) BATED cility	Mai	d Sole ntenar odial S (12)	nce/		estos Co e. therma surf	ntaining Mater al systems insu acing, VAT, or miscellaneous	ulation,	O.	or Li y	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A									te	CO
Mechanical Room		X			Textured	Ceiling 8	& Joint Compo	und		50 SF	Х			
												_		
Name of Registered W	aste Hauler		1000000	JDEP W		Cubic		Name of Reg	gister	ed Landfill				
Lilich Corporation				auler ID 18724	NO.	of Was 5	ste	Fairless La	andfil	I				
City, State Woodland Park, Nev	v Jersey					Dispos 08/07	al Date /2018	City, State Morrisville,	PA					
Completed by Adriana Olejarova		Title Pre	sident			S	ignature	1 (B)	_	Date 07	/19/20	18		

CK5321

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

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		and the state of the state of	Pinto Mine	-			31	1 5
	-	2018	3	2	1111		100	
-	The same of the sa	2018	J	2	JUL	,	أنبأ	1

Date of Notification (1) 07/17/2018					f Building EX COL				AL SCHOOL	-		ı	IUL	2 3	20	18
Agencies Notified  EPA	Type Notification    Initial   Amended				CHUR		AD					ASE		S C	ONTI	ROL 8
DEP X DOL	Amendment				ate, Zip Co TA TOV		P, NJ (	078	71	les	N FC-S(R/In-Germann	American de Martinosto	Submitted (1 to 1)	http://www.schile.go	ent and other	even-mon
DOH DCA	Emergency justification) Cancellation	#1000000000000 <del>0</del> 00	- 1		f Contact w Italiar	10					lephon			21/		
					LITY INF		ON			] 37	0-000	5-07	JU X-	214		
Name of Facility Where SUSSEX COUNTY Street Address	Abatement is Takin TECHNICAL S	g Place (3) SCHOOL						Ty	pe of Facility (4 School (K-12	2)		16.46				
105 N CHURCH RO	OAD							Н	Subchapter 8 Other (i.e. pr etc.)					dings	, hom	es,
City (5) SPARTA TOWNSH	HP							Sq	uare Feet	2	f Floor	S	07,555	ildg. A	Age	
County (6) SUSSEX				STATE	Code (7) USE ONLY	)		S	rrent Use (Prio CHOOL			nolish	ned)			
Name of Monitoring Firm ENVIRONVISION	Hired by Building	Owner (8)		ASCN	/I No.		RICI	CO		ractor	(9)					
Street Address 20-21 WAGARAW	RD. BLDG. 35E	3					Street 46 H		ress ART PL							
City, State, Zip Code FAIR LAWN, NJ 07	M475-781								, Zip Code :LD, NJ 0702	26						
Project Manager for Mon				Telepho 973-63	ne No. 36-9145		Teleph 9736				Licer 0083	ise N	0.			
Start Date (10) 07/21/2018		Scheduled 08/06/20	18	pletion	Date (11)		Name RICI		SHA Monitor RP							
Occupancy Status During		F2 (S)					Street 46 H		ress ART PL							
Facility Closed/Vaca Abatement Perform Other – Describe:	ated During Entire I ed Outside of Norn	Period of Aba nal Facility H	atem ours	ent		_	City, S	tate	Zip Code ELD, NJ 0702	26						
Scope of Work (Check A	II That Apply)						Ortic	. 1	.LD, 145 07 02							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		processors.	novat				×	1 7	Full Containmer Mini-Enclosure Glovebag Proce Non-Exempted	dure					•	
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Location Asbestos-Containing		Nor Used S	mally Solely		Ashes		scription		ial (ACM)	^	maunt			l y	ре	
TO BE ABA In Facili (13)	ATED	-	ial St 12)	taff?		thermal surfac		s ins T, or	ulation,	(5	mount Specify or LF		Removal	Repair	Encapsulate	Enclosure
CEILING PL	FNUM	Yes 1	No	N/A	Sno	t Light	Casin	a G	askat	7	3 SF		V		(D	
		1.20			Орс	/ Light	Casiii	y C	asket		3 31		V	-		
Name of Registered Was	te Hauler		N.	IDEP W	aste	Cubic `	Yards		Name of R	eniste	red l a	ndfill				
RICICORP	-		На	uler ID I-668		of Was			G.R.O.W							
City, State GARFIELD, NJ						Dispos 08/01/	al Date /2018	//	City, State MORRIS	VILL	.E, P/	Α				
Completed by GORAN KONESKI		Title PM				Si	gnatur		Tur			Dat 07	e /17/2	018		

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CK 535	21	NOT	IFICATI (Pursua	ON OF A	New Jers SBESTOS C 8:60 a	ABATE	0)	VT	Contractor of E	) <u>E</u>	C	E		7 6
Date of Notification (1) 07/17/2018			Name	of Buildin	ng Owner	Operato	r (2) VIC	AL SCHOO				23	201	Я
Agencies Notified Type Noti	fication		Stree	Address			1101	12 00/100	L					
EPA X Initia Ame				N CHUI	RCH RC	DAD				ASB	2870	S CC	NTA	OLR
X DOL Ame	ndment #_ rgency (includir	ıa .	SPA	RTA TO	DWNSH	IP, NJ	078	71	breaking	AND THE PERSONS	LIU	ENPI	NG.	
DOH justif	cation) ellation	.5	1	of Conta	7.5					elephone N 73-383-6			1	
Name of Facility Where Abatement i	s Taking Place	(3)	FA	CILITY IN	IFORMAT	ION	-	· · ·			,,,,,	X 2 1		
SUSSEX COUNTY TECHNI	CAL SCHOO	)L					×	oe of Facility ( School (K-1						
Street Address 105 N CHURCH ROAD							Ħ	Subchapter Other (i.e. p	8 (Oth	ner than K-	-12)	uilding	c bor	200
City (5)							Sar	etc.)		of Floors	Ciai bi	Bldg.		iles,
SPARTA TOWNSHIP County (6)									2			50	Age	
SUSSEX			(STATE	Code (7	) -n		Cur	rent Use (Pric	r if be	ing demoli	ished)			
Name of Monitoring Firm Hired by Bo ENVIRONVISION	uilding Owner (8	3)	ASC	M No.		Name	of Al	patement Con	tractor	(9)				
Street Address	-					RICIO								
20-21 WAGARAW RD. BLDC City, State, Zip Code	35E							ART PL						
FAIR LAWN, NJ 07410								Zip Code _D, NJ 070:	26					
Project Manager for Monitoring Firm FREDERICK LARSON				one No.	5	Teleph 9736				License	No.			
Start Date (10) 07/21/2018			mpletion	Date (11				SHA Monitor		00838	-			
Occupancy Status During Abatement	(Check Only O					RICIO Street								
X Facility Closed/Vacated During B	Entire Period of	Ahate	ment			100000000000000000000000000000000000000		RT PL						
Abatement Performed Outside of Other – Describe:	f Normal Facilit	y Hour	rs .					Zip Code .D, NJ 0702	26					
Scope of Work (Check All That Apply						0, 11 (1		5, 140 0702	20					-
≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf		Renov Demoli				×	Mi	ull Containmer ini-Enclosure ovebag Proce	dure	(F)				
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Location of Asbestos-Containing Material (AC	M) Use	Norma ed Sole	ely by	Asbe	Des	scription o		I (ACM)	۸.	mount		Ty	/ре	
TO BE ABATED In Facility		todial	Staff?	(i.e	thermal	systems sing, VAT	insul	ation,	(S	pecify or LF)	Ren	Re	Encapsulate	Encl
(13)	Van	(12)	_	-		niscellane				0. 2. /	Removal	Repair	osulat	Enclosure
CEILING PLENUM	Yes YES	No	N/A	Sn	ot Light	Casino	Ga	sket	7'	3 SF	<del> </del>	-	e	
				ОР	ot Light	Casing	Ga	SKEL	73	) SF	V	-		
										-	+	-		
Name of Registered Waste Hauler		1.	IDEE:		16									
RICICORP		H	IJDEP W lauler ID		of Was			Name of Re G.R.O.W						
City, State GARFIELD, NJ		IN	J-668		Disposa		, /	City, State						_
Completed by	Title				08/01/ Sig	2018 gnature	1//	MORRIS	VILLI	E, PA	ite		2 447	
GORAN KONESKI	PM					All	Tu	w				2018		
ASB-41 (R-06-08)					1	So not	use t	his form for as	sbesto	s licensure	e exen	npted	activit	ies.

Emergency

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:50 and 12:120)

CK 6877

Date of Notification (1)			f Building Owne	r/Operator	(2)		r e	П	7\/7	C r
7/19/18 Agencies Notified Type Notification		Allrisk				IME	<u>E</u> <u>E</u>	<u>lj</u>	V	5
		Street A	<sub>aaress</sub> Iements Bric	ae Rd.						
EPA Initial DEP Amended	-		te, Zip Code	3		111111	<u> 101 - 5</u>	3 2	018	-
DOL Amendment # Emergency (including		Runne	emede NJ 08	8078		les box				bes
DOH justification)	ng -		Contact			Telephone 856-546	Number -	CON	TROI	2
DCA Cancellation		Tom	LITY INCORNA	TION		856-546	0018E	VSIN	3	
Name of Facility Where Abatement is Taking Place	(3)	FACI	LITY INFORMA	ATION	Type of Facility (4	4)			- Collegation	
Ethel Burke School	30(3)				School (K-1	C-550 4 GB				
Street Address					Subchapter	8 (Other than I		lalia a a	h	
112 S Black Horse Pike					etc.)	rivate & comm		(S)		es,
City (5) Bellmawr NJ 08031					Square Feet	# of Floors		Bldg. A	\ge	- 3
County (6)		County (	Codo (7)		1000+ Current Use (Price	2		35+		
Camden			USE ONLY)		Current Ose (File	ii being demi	olisnea)			
Name of Monitoring Firm Hired by Building Owner (	(8)	ASCN	1 No.	Name	of Abatement Con	tractor (9)				
N/A				Perr	naco Inc.					
Street Address		25			Address					
City Otate 71, Oct					Box 329					
City, State, Zip Code					State, Zip Code st Berlin NJ 080	91				
Project Manager for Monitoring Firm		Telephor	ne No.	2000000	none No. -753-9800	Licens				
Start Date (10) Sched	luled Cor	nnletion [	Date (11)		of OSHA Monitor		1			
7/20/18 7/24/	/18	iipicuoii i	Suic (11)	San						
Occupancy Status During Abatement (Check Only	One)			Street	Address					
Facility Closed/Vacated During Entire Period of Abatement Performed Outside of Normal Faci	of Abaten	nent								
Other – Describe:	illy Hour	S 		City, 8	State, Zip Code					
Scope of Work (Check All That Apply)								-		-
≥3 sf or ≥3 lf	Renova	ation			Full Containme	ent with Negation	e Pressi	ire		
≥3 sf or ≥3 lf  × ≥160 sf or ≥260 lf	Renova Demoli				Full Containme Mini-Enclosure	•	ve Pressi	ле		
				2		edure			e	
		tion		2	Mini-Enclosure Glovebag Proc	edure		ocedur Abat	ement	
≥160 sf or ≥260 lf	Is Locat	ion ily		Description	Mini-Enclosure Glovebag Prod Non-Exempted	edure l (*) and Non-F		ocedur Abat		
Location of Asbestos-Containing Material (ACM) TO BE ABATED	Is Locat Norma Ised Sole Vaintena	ion illy ely by nce/	Asbestos C	ontaining N	Mini-Enclosure Glovebag Prod Non-Exempted	edure I (*) and Non-F	riable Pro	Abate Ty	ement rpe	
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility  Location of Column 1  Column 2  Column 2  Column 3  Column 4  Column 3  Column 4  Column 4	Is Locat Norma	ion illy ely by nce/	Asbestos C (i.e. them su	ontaining Nata system racing, VA	Mini-Enclosure Glovebag Prod Non-Exempted of Material (ACM) s insulation,	edure l (*) and Non-F	riable Pro	Abate Ty	ement rpe	
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility  (13)	Is Locat Norma Ised Sole Vaintena ustodial (12)	ion lly sly by nce/ Staff?	Asbestos C (i.e. them su	ontaining N nal system	Mini-Enclosure Glovebag Prod Non-Exempted of Material (ACM) s insulation,	edure I (*) and Non-F  Amount (Specify		ocedur Abat	ement	Enclosure
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Yes	Is Locat Norma Ised Sole Vaintena ustodial (12)	ion illy ely by nce/ Staff?	Asbestos C (i.e. thern su othe	ontaining M nal system rfacing, VA er miscellar	Mini-Enclosure Glovebag Prod Non-Exempted of Material (ACM) s insulation, AT, or neous)	edure  (*) and Non-F  Amount (Specify SF or LF)	riable Pro	Abate Ty	ement rpe	
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Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)  Yes  Classroom 9 Closet	Is Locat Norma Ised Sole Vaintena ustodial (12)	ion Illy Illy by Ince/ Staff?	Asbestos C (i.e. therm su othe	ontaining Mal system rfacing, VA er miscellar	Mini-Enclosure Glovebag Prod Non-Exempted of Material (ACM) s insulation, NT, or neous)	edure  (*) and Non-F  Amount (Specify SF or LF)	Removal	Abate Ty	ement rpe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Yes  Classroom 9 Closet  3rd Floor landing & Office	Is Locat Norma Ised Sole Waintena ustodial (12)	ion illy ely by nce/ Staff? N/A X	Asbestos C (i.e. therm su othe	ontaining Mal system rfacing, VA r miscellar r Tile & M	Mini-Enclosure Glovebag Prod Non-Exempted  of Material (ACM) s insulation, aT, or neous)  Mastic mastic	Amount (Specify SF or LF)  70 SF 360 SF	Removal X	Abate Ty	ement rpe	
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)  Yes  Classroom 9 Closet  3rd Floor landing & Office  Name of Registered Waste Hauler	Is Locat Norma Ised Sole Waintena ustodial (12)	ion Illy Illy by Ince/ Staff?	Asbestos C (i.e. therm su other  Floo  Floo	ontaining Mal system rfacing, VA er miscellar	Mini-Enclosure Glovebag Prod Non-Exempted  of Material (ACM) s insulation, NT, or neous)  Mastic  mastic	Amount (Specify SF or LF)  70 SF 360 SF	Removal X	Abate Ty	ement rpe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Yes  Classroom 9 Closet  3rd Floor landing & Office  Name of Registered Waste Hauler United Roll Off	Is Locat Norma Ised Sole Vaintena ustodial (12) S No	ion lly sly by nce/ Staff?  N/A  X  X  JJDEP W	Asbestos C (i.e. therm su other  Floo  Floo	ontaining Mal system rfacing, VA r miscellar r Tile & M r Tile & I	Mini-Enclosure Glovebag Prod Non-Exempted  of Material (ACM) s insulation, aT, or neous)  Mastic mastic	Amount (Specify SF or LF)  70 SF 360 SF	Removal X	Abate Ty	ement rpe	
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)  Yes  Classroom 9 Closet  3rd Floor landing & Office  Name of Registered Waste Hauler United Roll Off  City, State	Is Locat Norma Ised Sole Vaintena ustodial (12) S No	ion ion illy sly by nce/ Staff?  N/A  X  JJDEP W Hauler ID	Asbestos C (i.e. therm su other su) Floo Floo  Floo  faste Cut No. of V 3 Dis	ontaining Mal system rfacing, VA r miscellar r Tile & M r Tile & r	Mini-Enclosure Glovebag Prod Non-Exempted  n of Material (ACM) s insulation, AT, or neous)  Mastic  mastic  Name of E G.R.O.	Amount (Specify SF or LF)  70 SF 360 SF  Registered Land	Removal X	Abate Ty	ement rpe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Yes  Classroom 9 Closet  3rd Floor landing & Office  Name of Registered Waste Hauler United Roll Off	Is Locat Norma Ised Sole Maintena ustodial (12)  S No	ion ion illy sly by nce/ Staff?  N/A  X  JJDEP W Hauler ID	Asbestos C (i.e. therm su other su) Floo Floo  Floo  faste Cut No. of V 3 Dis	ontaining Mal system rfacing, VA r miscellar r Tile & M r Tile & I	Mini-Enclosure Glovebag Prod Non-Exempted  of Material (ACM) s insulation, IT, or neous)  Mastic  mastic  Name of E G.R.O.  City, State Morrisv	Amount (Specify SF or LF)  70 SF 360 SF	Removal X	Abate Ty	ement rpe	

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Date of Notification (1)	- Cheer	1			PB N	UTCLIF MA	STE	wner/Operator	PROPERTY SER	VICE	S ŁŁC	, r=	P D C	
7 / 18 /2018				}	Street	t Address				- 13	6	E	$\mathbb{H}_{\mathbb{W}}$	E
Agencies Notified Type Notification	on					INGSLAND	ST	REET	114					
EPA	Notific		#4		NUTL	State, Zip C EY, NEW J	IERS			1	JUL	2 3	2018	more and the second sec
DCA EMERGE	NCY N	IOTIF	FICAT			of Contact			Telephone Num 973-235-3105	ACMORNIA CONTRACTOR		~~~		-
						FORMATIC			1070 200 0 100	ASB	ES 11	JS CO	ONTRO	IL &
Name of Facility Where Abatement is Ta	king P	lace	(3)					Type of Facilit	ty (4)				-	manon, eno
HACKENSACK MERIDAIAN BLDG. 102									(-12) er 8 (Other than I private & commo		ıs ho	mes.	etc.)	
Street Address 340 KINGSLAND STREET								Square Feet 125,000	# of Floors 5	T	Bld	g. Age 50		
City (5) County ( NUTLEY ESSEX	6)					y Code (7)		Current Use (P	rior if being demo	lished			ab.	
Name of Monitoring Firm Hired by Build OMEGA ENVIRONMENTALA	ing Ov	vner (	(8)	(5	TATE	ASCM No.			ement Contracto		ION		-	
Street Address						11		Street Address	INENTAL CORP	JKAI	ION		-	
280 HUYLER STREET								313 SPOOK R	24-100: 1940 h 30: 20 ft 10: 10: 10: 10: 10: 10: 10: 10: 10: 10:					
City, State, Zip Code S. HACKENSACK,	NEW.	FRSI	FY 07	606				City, State, Zip	Code W YORK 10901					
Project Manager for Monitoring Firm				Numb	er			Telephone Nun		ense N	lumbe	er		
ANTON REZIN			189-8					845-369-7500	110	11				
Expected State Date (10) 7 / 19 /18	Sche	d. Co 7		tion D				Name of OSHA						
Month Day Year	Mor		1	Da	29 V	/18 Yea	ar	OMEGA #1	0504					
Occupancy Status During Abatement (Che Facility Closed/Vacated During Abatement Performed Outside of	Entire F	erio	d of A	bateme	ent - Desc			Street Address 280 HUYLER S	TREET					
X Other - Describe: MONDAY					200	5,100.	1	City, State, Zip	Code					
Scope of Work (Check all that apply)  Demolition  X >3SF OR LF	Renov	vation	1		X	Mini-E	nclo	nment with Neg	HACKENSACK, ative Pressure	NJ 07	606			
>160 SF OR 260 LF								e Procedure						
Location of Asbestos-containing	100000000000000000000000000000000000000	ocati	Section 1			escription of ntaining Ma			Amount		batem			
Material (ACM) TO BE ABATED	Process 65	lely b				ie. Thermal			(Specify	REMO	REPAIR	ENCAPSUL	ENCL	
in Facility (13)	Maint	aff (12	1000 and 1000 and			ulation, surf other misc			SF or LF)	OVAL	2	PS	OSUR	
	Yes		N/A		O.	outer mise	Cilari	icous)		-			뮤	
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4TH FLOOR ROOM A403			×	PIPE I	NSUL	ATION			6 LF	X				
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		-								+-		-		
NEWARK CARTING INC.	Haule	rIDN	10.			YARDS	-	GRAND CENTE	RAL SANITARY L	ANDF	ILL			
369 RAYMON BLVD. City, State	913			) Dispos		ASTE : 2	1	Offy, State				1		
NEWARK, NEW JERSEY 07105				6/29-7			1	PLAINFIELD/TO	DWNSHIP, PA		1	+		
Completed by (Print or Type) Title BENJAMIN SANCHEZ DIRE	CTOP	OF	) DED	ATION	IS IS	IGNATURE	11	////			<del>.</del>		4	1
DIRE	.CTOR	Ur (	Jr ∉R	AHON	13 3	IGNATURE	//	15	DAT		///	1(/	111	/
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											1		16	)
								1				1		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) PB NUTCLIF MASTER LLC/PRISM PROPERTY SERVICESTLCA Date of Notification (1) 7 5 /2018 Street Address Agencies Notified Type Notification 340 KINGSLAND STREET Initial Notification EPA City, State, Zip Code 1111 DEP Amended Notification #3 NUTLEY, NEW JERSEY 07110 DOL Cancellation DOH On Hold Name of Contact Telephone Number DCA **EMERGENCY NOTIFICATION** ASBESTOS CON RICK MARGERISON 973-235-3105 TROL & **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) HACKENSACK MERIDAIAN BLDG. 102 Subchapter 8 (Other than K-12) Other (ie. private & commcl. bldgs., homes, etc.) Street Address Square Feet # of Floors Bldg. Age 340 KINGSLAND STREET 125.000 5 50 City (5) County Code (7) Current Use (Prior if being demolished) Pharm. Lab. County (6) NUTLEY ESSEX (STATE USE ONLY) COMMERCIAL Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. OMEGA ENVIRONMENTALA 17 PAR ENVIRONMENTAL CORPORATION Street Address Street Address 280 HUYLER STREET 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code S. HACKENSACK, NEW JERSEY 07606 SUFFERN, NEW YORK 10901 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number ANTON REZIN 201-489-8700 845-369-7500 1101 Expected State Date (10) Sched. Completion Date (11) Name of OSHA Monitor 7 / /18 7 / 29 /18 OMEGA #10504 Day Day Year Year Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 280 HUYLER STREET Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe: MONDAY-FRIDAY 7AM-3:30 PM City, State, Zip Code S. HACKENSACK, NJ 07606 Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Renovation Mini-Enclo. >3SF OR LF Glovebag Procedure >160 SF OR 260 LF Non-Friable Procedure Location of Is Location Description of Asbestos-Abatement Type Asbestos-containing normally used Containing Material (ACM) Amount REPAIR ENCAPSUL ENCLOSUR REMOVAL solely by Material (ACM) (ie. Thermal systems (Specify TO BE ABATED Maint/Custodial insulation, surfacing, VAT, SF or LF) Staff (12) or other miscellaneous) in Facility (13) Yes No N/A 4TH FLOOR ROOM C403 X PIPE INSULATION 6 LF Х 4TH FLOOR ROOM A403 PIPE INSULATION 6 LF NEWARK CARTING INC. Hauler ID No. CUBIC YARDS GRAND CENTRAL SANITARY LANDFILL 369 RAYMON BLVD. 913 OF WASTE: 2 Disposal Date City, State City, State NEWARK, NEW JERSEY 07105 6/29-7/29/18 OWNSHIP, PA PLAINFIELD Completed by (Print or Type) BENJAMIN SANCHEZ DIRECTOR OF OPERATIONS SIGNATURE

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) CK 3237H

				Name	of Building (	Owner	/Operator	(2)					┤ `
Date of Notification (	1)			PB NU	JTCLIF MAST	ER LL	.C/PRISM F	PROPERTY	SERVIC	ES LK	6 E	П	NA IF
7 /	3 /2018			Street	Address	2-15-1-2			11)	5 (	9 <u>5</u>	U	
Agencies Notified	Type Notification	on		340 K	INGSLAND ST	TREE	Γ		131				
EPA DEP		l Notificatio	n #2		State, Zip Code EY, NEW JER		7110			JU	IL 2	3 2	018
X DOL	Cancellat On Hold	ion		N									
DCA		NCY NOTI	IFICATION		of Contact MARGERISO	N		Telephone. 973-235-31		ASBES	TOS	CONT	ROL 8
Name of English Mha	Ab	1: BI	FACIL	ITY INF	ORMATION			Ĺ			LICEN	ISTIVE	
Name of Facility Whe		iking Place	(3)			Тур	e of Facilit School (K		nan K-1	2)			
						X	Other (ie.	private & cor	mmcl. b	ldas h	omes.	etc.)	
Street Address 340 KINGSLAND STR	ECT						uare Feet	# of Floo	ors		dg. Ag		1
City (5)		2/					125,000	5			50		
NUTLEY	County (I		(5		/ Code (7) USE ONLY)	COV	MERCIAL				arm. L	ab.	
Name of Monitoring F OMEGA ENVIRONME		ing Owner	(8)		ASCM No.			ment Contra					1
Street Address	NIALA				17		ENVIRON et Address	MENTAL CO	DRPOR	NOITA			-
280 HUYLER STREET								OCK ROAD					
City, State, Zip Code							State, Zip						1
Drainet Manager for Ma	S. HACKENSACK,					SUF	FERN, NEV	N YORK 109	901				
Project Manager for Mo	onitoring Firm	14 2	phone Num	ber		1000000	phone Num	iber	License	e Numb	er		1
Expected State Date (	10)		-489-8700 ompletion	D-4- /4	4)		369-7500		1101				
7 /	6 /18		ompletion	29	/18	OME	e of OSHA	Monitor 0504					
Month Day		Month	D	ay	Year	OWIL	.0/ #10	0304					
Occupancy Status Duri	ng Abatement (Che	ck only one	)				et Address						
Abatement F	ed/Vacated During I Performed Outside of	ntire Perio	od of Abater	nent	riba:	280 1	HUYLER S	TREET					
X Other - Desc			AM-3:30 PN		nibe.	City	State, Zip (	Code					
						Joney,	S.	HACKENSA	CK, NJ	07606			
Scope of Work (Check		l			Full Conta	inmer	nt with Nega	ative Pressur	re				
Demolition X >3SF OR LF	: <u>[X</u>	Renovatio	n	X	Mini-Enclo		al.						
>160 SF OR				F	Glovebag Non-Friab	le Pro	cedure						
Locatio	n of	Is Local	tion	De	scription of As					Abater	nont T	ivno	
Asbestos-co	~	normally	used		taining Materia			Amoun	t 🗔			-	
Material (		solely		(i	e. Thermal sys	stems		(Specify	t y E)	REPAIR	NO.	NC N	
TO BE A		Maint/Cus			lation, surfacir			SF or LF	=)   9	?   <del>_</del>	P	5	
in Facility	y (13)	Staff (1 Yes No		or	other miscella	neous	)		1	:	ENCAPSUL	ENCLOSUR	
4TH FLOOR ROOM C4	103	103 110		INSUL	ATION			615	- L	+	4	120	
4TH FLOOR ROOM A4								6 LF	X		+	-	
41111 EOOK ROOM A4	.03		X PIPE	INSUL	ATION			6 LF	X	-	-	-	
							-10			-	-	-	
									_	-	-	-	
									-	+	+	-	
NEWARK CARTING IN	C	Hauler ID	No	CLIBIC	YARDS	CDA	VID CENTS	AL SANITAF	27/1 27	2511			
369 RAYMON BLVD.		913			STE: 2	GRAI	ND CENTR	AL SANITAF	Y LAN	UFILL			
City, State				sal Dat	е	City,	State	1					1
NEWARK, NEW JERSE			6/29-	7/29/18		PLAI	WFIFIN 70	WNSHIP, PA	A				
Completed by (Print or BENJAMIN SANCHEZ		CTOP OF	OPERATIO	NIC TO	GNATURE	//	XX			_/	1		
- I OANOI IEZ	DIKE	O POR OF	OFERATIO	142 21	GNATURE	1-1	1/2	>	DATE	1/5	2/1	0	

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) Date of Notification (1) PB NUTCLIF MASTER LLC/PRISM PROPERT /2018 Street Address Agencies Notified Type Notification 340 KINGSLAND STREET EPA Initial Notification City, State, Zip Code DEP Amended Notification #1 NUTLEY, NEW JERSEY 07110 DOL Cancellation Telephone NumberSBESTOS CUNTI 973-235-8105 LICENSING DOH On Hold Name of Contact DL & DCA **EMERGENCY NOTIFICATION** RICK MARGERISON 973-235-3105 FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) HACKENSACK MERIDAIAN BLDG: 102 Subchapter 8 (Other than K-12) Other (ie. private & commcl. bldgs., homes, etc.) Street Address Square Feet # of Floors Bldg. Age 340 KINGSLAND STREET 125,000 5 50 City (5) County (6) Current Use (Prior if being demolished) Pharm. Lab. County Code (7) NUTLEY **ESSEX** (STATE USE ONLY) COMMERCIAL Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) OMEGA ENVIRONMENTALA PAR ENVIRONMENTAL CORPORATION 17 Street Address Street Address 280 HUYLER STREET 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code S. HACKENSACK, NEW JERSEY 07606 SUFFERN, NEW YORK 10901 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number ANTON REZIN 201-489-8700 845-369-7500 1101

Expected State	e Date (10)		Sche	ed. C	omple	etion Date (1	1)	Name of OSHA	A Monitor				
6 /	29	/18			1	29	/18	OMEGA #1	10504				
Month	Day	Year		onth		Day	Year	0.0000000000000000000000000000000000000					
Abat	lity Closed/Vatement Performer - Describe:	acated During E rmed Outside o MONDAY	Entire f Norn	Perio	d of A acility	batement Hours - Desc	cribe:		Code . HACKENSACK	NJ 07	7606		
Dem X >3Si	olition F OR LF	260 LF	]Reno	vatio	n	X	Mini-Enc Glovebag	tainment with Neg lo , g Procedure ble Procedure	gative Pressure				
N TC	Location of estos-contain faterial (ACM) BE ABATE Facility (13	1) ED	norn so Main	taff (1	used by todial	Con (i insu	scription of A taining Mater e. Thermal sy lation, surfac other miscell	rial (ACM) ystems ing, VAT,	Amount (Specify SF or LF)	REMOVAL	Baten	ent ENCAPSUL	e ENCLOSUR
4TH FLOOR RO	OOM C403				X	PIPE INSUL	ATION		6 LF	X		1	
4TH FLOOR RO	OOM A403				Х	PIPE INSUL	The second secon		6 LF	X			
NEWARK CAR 369 RAYMON E City, State	BLVD.		Haule 913	er ID	No.	OF WA Disposal Dat		City, State	 RAL SANITARY I	_ANDF	FILL		
NEWARK, NEW Completed by (I						6/29-7/29/18		PLAINFIELD T	OWNSHIP, PA		,		,
BENJAMIN SAN			CTO	R OF	OPER	RATIONS S	IGNATURE	311	DA	TE6	17	8/	10

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

CK#32298

Date of Notification	(1)				Na PE	ame of B NUT(	Building (	Owner. ER LL	Operator	(2) PROPERTY	SERVE SERVE	FSGI	JE .	7 W
6 /	18 /2018				-	reet Ad			VII. (1)   1-(	- 111	7			J
Agencies Notified	Type Notification	on					GSLAND S	TREET	-		7)			
EPA DEP X DOL X DOH	X Initial Not Amended Cancellat	ification		n	Ci NL	ty, Sta	te, Zip Cod , NEW JER	е			1	JUL	23	2018
DCA	On Hold EMERGE	NCY	NOTI		TION RI	CK MA	Contact RGERISO	Ν		Telephone I 973-235-31	Number 05	EST(	os do Selvet	NTRO NG
Name of Facility Wh	ere Ahatement is Ta	kina	Place	(3)	FACILITY	INFO	RMATION	I÷.		745				
HACKENSACK MER		ining .	1 1400	(5)				Туре	of Facilit School (K Subchapte		an K-12	)		
Street Address 340 KINGSLAND STR	REET								Other (ie. uare Feet	private & con # of Floo	nmcl. bl	dgs., h	dg. Ag	
City (5)	County (	5)		_	T Co	unty C	ode (7)		25,000	5		1) DI	50	
NUTLEY	ESSEX				(STA	TE US	E ONLY)		ent Use (Pr IMERCIAL	rior if being de	emolishe	ed) Ph	arm. L	ab.
Name of Monitoring	Firm Hired by Build	ing O	wner	(8)	-		SCM No.			ment Contra	actor (9)			
OMEGA ENVIRONME Street Address	ENTALA						17	PAR	<b>ENVIRON</b>	MENTAL CO	RPORA	TION		
280 HUYLER STREE	Т								et Address	OCK ROAD				
City, State, Zip Code									State, Zip					
	S. HACKENSACK,	NEW						SUFF	FERN, NE	N YORK 109	01			
Project Manager for M	Ionitoring Firm		Tele	phone	Number				hone Num		License	Numb	er	
ANTON REZIN	(40)	1		489-8				100000000000000000000000000000000000000	369-7500		1101			
Expected State Date 6 /	(10)	Sche		ompl	etion Date		14.0		e of OSHA					
Month Da	1000	Mo	onth '	1	Day	29	/18 Year	OME	GA #10	0504				
Occupancy Status Du Facility Clo Abatement X Other - Des Scope of Work (Check Demolition X >3SF OR L >160 SF O	sed/Vacated During I Performed Outside of Scribe: MONDAY  call that apply)  X	Entire f Norr	Perional Face AY 7.	d of A acility AM-3:	Hours - D	t Describ	_	City, ainmen	t with Nega dure			7606	(15	
Locati	on of	Is	Locat	ion		Descr	iption of As					Abata	mont T	
Asbestos- Material TO BE A in Facili	(ACM)	norr s Main	nally olely t/Cus taff (1	used by todial 2)		Contaii (ie. ' insulati	ning Materi Thermal system ion, surfacion per miscella	al (ACI) stems ng, VA	М) Т,	Amount (Specify SF or LF	REM	REPAIR	nent ENCAPSUL	ENCLOSUR
4TH FLOOR ROOM C	403			X	PIPE INS	SULAT	ION			6 LF	X			
4TH FLOOR ROOM A	403			Х	PIPE INS					6 LF	X			
NEWARK CARTING II 369 RAYMON BLVD. City, State NEWARK, NEW JERS		Haule 913	er ID	No.						AL SANITAR	7.	FILL		
Completed by (Print or	Type) Title						//	1	7		`	. /	1	
BENJAMIN SANCHEZ	DIRE	CTOF	ROF	OPER	RATIONS	SIGN	VATURE	10	30		DATE	1/1	8/19	



Date of Notification (1)			Nama	of Building Ow		- (0)		(	1	77 (	12	T	70
06/26/18				rsey City, L		r (2)		IF	7 [	C	E	1	V/ I
Agencies Notified Type Notification			100000000000000000000000000000000000000	Address					力	,		<u>U</u>	<u>U</u> [
EPA Initial DEP Amended Amendmen	t# 01		City, St	exington Avate, Zip Code York, NY 11						JUL	2 ;	3 20	18
■ Emergency justification	(includin	g		of Contact				Telep	hone-N	umber.			
DCA Cancellation				ric Albanese				973-	30₫₽	969T	OS C	ONT	ROL
Name of Facility Where Abatement is Takir	ng Place	(3)	FAC	ILITY INFORM	IATION	Tvr	e of Facility (4)	Entirological		incener - man	and deliver of any	- Landard State - Stat	Minimutatings
Residential		200					School (K-12	<b>5</b> 3					
Street Address						×	Subchapter 8 Other (i.e. pri etc.)	(Other	than K- commer	12) cial bui	ldings	, hom	es,
City (5) Jersey City						0.53000	uare Feet 000 +	# of F	loors	100	3ldg. /	Age	
County (6) Hudson				Code (7) USE ONLY)		Cur	rent Use (Prior	if being	demoli	shed)			
Name of Monitoring Firm Hired by Building	Owner (8	3)	ASCI	M No.			patement Contr tracting & E			I Con	sultir	a. Ir	nc.
Street Address					Street	Addr					*0%*C.7777	3,	
City, State, Zip Code							Zip Code NJ 07470						
Project Manager for Monitoring Firm			Telepho	ne No.	Teleph	none		La file Sa	icense 0408	No.			
Start Date (10) 07/06/18	Schedu 08/19/		mpletion	Date (11)	Name	of O	SHA Monitor tracting & E			l Cons	sultin	a In	· · ·
Occupancy Status During Abatement (Chec	k Only O	ne)			Street			11110111	ПОПТА		Julin	9, 111	<u>.                                    </u>
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other – Describe: Occupied	Period of nal Facilit	Abater y Hour	nent s		City, S	tate,	ute 23 Zip Code						
Scope of Work (Check All That Apply)					Wayı	ne, I	NJ 07470						
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	-	Renova Demoli			×	M G	ull Containmen lini-Enclosure lovebag Proce on-Exempted (	dure				ρ	
	Is	s Locat	ion					7 4114 1			Abate	ement	
Location of Asbestos-Containing Material (ACM)		Norma ed Sole			Description					-	Ту	pe	
TO BE ABATED In Facility (13)	aintena todial ( (12)	nce/ Staff?	(i.e. then	containing M mal systems orfacing, VA er miscellan	s insu T, or	lation,	Amo (Spe SF or	cify	Removal	Repair	Encapsulate	Enclosure	
Rooms 201 and 601	Yes	No	N/A									е	
			X		or Tile & N			3,250		X			
Room 501			X	Floo	or Tile & N	/last	C	1,800	) SF	X			
Name of Pogiators 4345-45-11													
Name of Registered Waste Hauler J.R. Contracting & Environmental C	onsul.,	Inc F	IJDEP W lauler ID 7819		bic Yards Vaste		Name of Re Grand Ce						
City, State Wayne, New Jersey		med		Dis	posal Date		City, State Pen Argy	I, Penr	nsylva	nia			
Completed by Jerry Bijelonic	ect Ma	anager		Signature	$\cap$	1		D	ate 7/17/	18			

			51200		acca de	d law	The same of the sa						L		111111
Ch1672		I	NOTE	estion ursuant	OF ASE	STOS :60 an	ABATE d-12:120	0)	₹T	0	EG	E		E	
Date of Notification (1) 07-18-18					Building stein Pr			(2)		Communication of the communica	JUL	23	201	8	
Agencies Notified	Type Notification			Street A	ddress ast Main	C+						congress 6400	HORACTON'S	CONTRACTOR OF THE PARTY OF THE	
EPA DEB	Initial		-		te, Zip Co						ASBEST	OS CO	NTF	OL&	
DEP DOL	Amended Amendment		_		alls, NJ		1			A.C. COMMENSOR	E. [1	JENO	ING	and the state of t	edas varanti-
DOH DCA	Emergency justification)				Contact Burkart					150,000	ephone Nu 73) 256-6				
	Cancellation	1			LITY INFO	PMAT	ION			(9	73) 230-0	044			
Name of Facility Where A			3)	1 AG	LIT INC	NINIA I	1014	Ту	pe of Facility (	4)					
Commercial Proper	ty Building # 37	·							School (K-1						
Street Address 20-21 Wagaraw Rd	•				VVVVVVVVVVVVVVVVVVVVVVVVVVVVVVVVVVVVVV			ť	Subchapter Other (i.e. p etc.)				dings,	home	es,
City (5) Fair Lawn								Sq	uare Feet	#0	f Floors	E	ildg. A	ige	
County (6) Bergen				County (	Code (7) JSE ONLY)			Cu	rrent Use (Prid	or if be	ing demolis	hed)			
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCN	l No.		1		batement Con		(9)				
Street Address							Street 522	Add	ress			*****			
City, State, Zip Code							City, S	tate	, Zip Code ity NJ 0708	7	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	An Harrison	11.31		
Project Manager for Moni	itoring Firm			Telephor	ne No.		Teleph	none	ACT BEAUTY OF THE CASE		License N	lo.			
Start Date (10)		Schedule	ed Cor	mpletion [	Date (11)		1		SHA Monitor		01200				
07-27-18		09-30-	10.000				1		ontracting L	LC					
Occupancy Status During				v			Street 522								
Facility Closed/Vaca Abatement Performe Other – Describe:	ed Outside of Norr	nal Facility	Hour	nent s			City, S	tate	, Zip Code ity NJ 0708	7					
Scope of Work (Check Al	That Apply)						01110	0	110 07 00						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		and a second	Renova Demoli				XXXXX		Full Containme Mini-Enclosure Glovebag Proc Non-Exempted	edure	873 1			e	
			Locat										Abate	ement pe	
Location Asbestos-Containing		Use	Norma d Sole	ely by	Ashes		scription		rial (ACM)	Δ	mount		·.,		
TO BE ABA In Facili	ATED		intena todial	ince/ Staff?		thermal	systems	s ins	ulation,	(5	Specify or LF)	Rer	R	nca	Enc
(13)	ty		(12)				niscellar			31	- OF LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A			2.0					-		ite	Ф
2nd Flo	or		Х			Pipe	Insula	tior	1	17	'80 LF	X			
		-					11100-200-150-200					-			
		-										+-			
Name of Registered Was	te Hauler		1.62	JDEP W			Yards	-	Name of I	Registe	ered Landfil				
Delfa Contracting LL	С		ŀ	Hauler ID 35240		of Wa			Tullytow	n Re	source R	ecov	ery F	acili	ty
City, State Union City, NJ						100 MARKETS STEEL	sal Date 24-18		City, State Tullytow		Ą				
Completed by Jaime Delgado		Title Proj.	Man	ager.		S	Signature	,	11		101	ate 7-18-	18		

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CK 348	JUI	NO	TIFIC (P	ATIO	N-OF AS	New Jersey BESTOS ABA AC\8:60 and 5:	TEMENT	DE	C	E_		<u> </u>
Date of Notification (1)				Nam	ne of Buildir	ng Owner/Operator	(2)		UL.	23	21	118
/	19 /	18				evelopment	, ,	134	5	$\sum_{j=1}^{n}$	۷ کا	110
Agencies Notified	Type Notificatio	n		Stree	et Address			ACDI	OTO	10.00	011T	DOL
☑ EPA ☑ DOLWD	<ul><li>☑ Initial</li><li>☐ Amended</li></ul>			31	5 Monmo	outh Avenue, Sui	ite 208	ASBE		ENS		
☑ DOH	Amendment	#		City,	State, Zip	Code		Lives - Annual School State School State School	Marinetti e minte	angelia provincia por	the second	aud Auresta
☐ DCA	☐ Emergency	(includi	ng	La	kewood,	NJ 08701						
(NJAC 5:23-8)	justification)				e of Contac	ct		Telephone Num	ber			
	☐ Cancellation			Ja	ck			732-664-398	2			
None of Facility 184				FA	CILITY IN	NFORMATION		•				
Name of Facility Where A	batement is Taki	ng Plac	e (3)				Type of Facility (	4)				
Residence							School (K-12)					
Street Address							☐ Subchapter 8 ☐ Other (i.e., pr homes, etc.)	(Other than K-12 ivate and commer	) rcial b	uildin	ıgs,	
City (5) Lakewood							Square Feet	# of Floors	В	ldg. A	Age	
County (6)							5200 sf	1		70		
Ocean				Cou	inty Code (7	7)(STATE USE ONLY)	1000	or if being demolis	hed)			
Name of Monitoring Firm I	Hired by Building	Ownor	/0\ T	ACCM	I M-	The same	Residence					
N/A	med by building	Owner	(0)	ASCM	I NO.	Name of Abateme						
Street Address		-					ntracting, Inc.					
The most offered above transfer at the second of the secon						Street Address 1889 Route 9	Unit C4					
City, State, Zip Code						City, State, Zip Co						
						The state of the s	New Jersey 087	EE				
Project Manager for Monit	oring Firm		Tele	phone	No.	Telephone No.	vew dersey do?	License No.				
						732-349-9932		00624				
Start Date (10)	Sche	duled (	Comple	tion Da	ate (11)	Name of OSHA M		00024				
//		- 10		3_ /	18	E.M.S.L. Anal	ytical					
Occupancy Status During	Abatement (Ched	ck only	one)			Street Address						
☐ Abatement Performed	During Entire Pe	eriod of	Abate	ment		1056 Stelton						
Abatement Performed ( Time of Abatement:	AM- P	n Facili M/	y Hour PM-		AM	City, State, Zip Co	de	(1)				
Scope of Work (Check all t		-				Piscataway, N	lew Jersey 088	54				
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf	пас арріу)		enovati emolitio			☐ Mini-Encl			9			
			Locat						_	atem	ent T	vne
Location of Asbestos-Containing M	t aterial (ACM)		Normal ed Sole		Ashaa	Description of				_	1	T
TO BE ABAT	ED	45 - 25000	intena		(i.e.	stos Containing Mat , thermal systems in	erial (ACM)	Amount (Specify	Removal	Repair	nca	nclo
IN Facility (13)		Cus	todial 8 (12)	otait?		surfacing, VAT,	or	SF or LF)	val	5	Encapsulate	Enclosure
V.3.57.		Yes	No	N/A	1	other miscellaneo	ous)				ate	T.
exterior					asbesto	s roof		5220 sf			П	
								V=20 01				분
												1

ASB-41 JAN 13

City, State

Name of Registered Waste Hauler

Toms River, New Jersey

Completed By (Print or Type)

Nicholas Fernicola

Guardian Contracting, Inc.

Cubic Yards of

Disposal Date

08/03/18

Signature

Waste

10

Name of Registered Landfill

Tullytown, Pennsylvania

Date

T.R.R.F.

City, State

**Project Manager** 

Title

NJDEP Waste

Hauler ID No.

20223

						developmen	253 660 1000	aus. T					-
Ch345	$\Omega$		NOT	IFIC	ATION	OF AS	ew Jersey BESTOS ABA C 8:60 and 5:1	EMENT	REG	E		$\mathbb{V}_{-}$	
Date of Notification (1)					Name	of Buildin	g Owner/Operator (	2)		2	7 21	018	-
	19 /	18			1		agement	2)	34	5	20	010	and the same of th
Agencies Notified	Type Notif	fication			Stree	t Address			ASBEST				. &
⊠ EPA	☐ Initial				411	Ashley .	Avenue		L	ICEN:	SING	) }	District Metho
☑ DOH	☐ Amend	led lment #			City,	State, Zip (	Code						
DCA	☐ Emerge				Lal	kewood, l	NJ 08701						
(NJAC 5:23-8)	justifica		Guant		Name	of Contac	t		Telephone Num	ber			
50	☐ Cancel	lation			Ab	е			732-719-633				
					FA	CILITY IN	IFORMATION						
Name of Facility Where A	batement is	s Taking	Place	(3)				Type of Facility (4	4)				
Residence								School (K-12)					
Street Address						-11		Subchapter 8 Other (i.e., pri	(Other than K-12 vate and commer	) cial bu	ıilding	gs,	
City (5)								Square Feet	# of Floors	BI	dg. A	ge	
Lakewood								1200 sf	1	1	70	,	
County (6)					Cour	nty Code (7	)(STATE USE ONLY)	Current Use (Price	or if being demolis	hed)			
Ocean								Residence					
Name of Monitoring Firm	Hired by Bu	uilding C	Owner (	8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
Guardian Contracti	ng, Inc.						Guardian Co	ntracting, Inc.					
Street Address							Street Address				-1100		
1889 Route 9, Unit 6	51						1889 Route 9	, Unit 61					
City, State, Zip Code							City, State, Zip Co	ode					
Toms River, New Je	ersey 0875	55					Toms River, I	New Jersey 087	55				
Project Manager for Moni	toring Firm			Tele	phone	No.	Telephone No.		License No.				
Nicholas Fernicola				7:	32-349	-9932	732-349-9932		00624				
Start Date (10)		Sched	uled C	omple	tion Da	te (11)	Name of OSHA M	onitor		***************************************	-		-
07 /30 /	18		8_ /	_ 02	2_/	18	E.M.S.L. Anal	ytical					
Occupancy Status During	Abatement	(Check	only o	ne)	A-672		Street Address						
☐ Facility Closed/Vacate	d During Er	ntire Per	riod of	Abate	ment		1056 Stelton						
Abatement Performed	Outside of	Normal	Facility	Hou	rs - Des	cribe	City, State, Zip Co	ode		- 12			
Time of Abatement:			///	_PIVI-		AM	Piscataway, N	New Jersey 088	54				
Scope of Work (Check all	that apply)							W 251 955 955					
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>			☐ Re				☐ Full Cont☐ Mini-Encl☐ Glovebag		tive Pressure				
								mpted (*) and Non-	-Friable Procedur	e			
			1	Locat						Ab	atem	ent T	уре
Location Asbestos-Containing N		18.01		lorma d Sole	lly ely by	0-1	Description o			Z	<sub>Z</sub>	ш	Ш
TO BE ABA		,ivi)	Ma	ntena	nce/		stos Containing Mai ., thermal systems i		Amount (Specify	Removal	Repair	าса	Clo
IN Facilit	у		Cust	odial (12)	Staff?		surfacing, VAT,	or	SF or LF)	val	=	Encapsulate	Enclosure
(13)			Yes	No	N/A	1	other miscellaned	ous)				ate	(0)
exterior						asbesto	s siding		1100 sf		П	П	П
interior				$\boxtimes$		asbesto	s floor tile		440 sf	-			
			_			uobooto			440 31	D.	]		
											Ш	Ш	Ш
Name of Registered Wast				1 200	JDEP V		Cubic Yards of	Name of Registe	ered Landfill				
Guardian Contractir	ıg, Inc.			H	auler II 20223	50 VI (100 HZ)	Waste 5	T.R.R.F.					
City, State							Disposal Date	City, State					
Toms River, New Je	rsey						08/02/18	Tullytown, F	Pennsylvania				

Completed By (Print or Type)

Nicholas Fernicola

Title

Project Manager

Signature

Tullytown, Pennsylvania

Date

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CK345	19		NOT	IFICA (Pu	TION	OF ASE	W Jersey BESTOS ABAT C 8:60 and 5:10	EMENT	DEGE N JUL 3		2010	8	Contraction of the Contraction o
Date of Notification (1)					Name	of Building	Owner/Operator (	2)	bed had				base
/	19 /	18	<u> </u>		Han	nilton To	wnship School	District	ASBESTOS	Sh	LAND!	OI 2	
Agencies Notified	Type Notif	ication			Street	Address				ENSIL			k
⊠ EPA ⊠ DOLWD	☐ Initial				90 F	ark Ave	nue		The Address of the Control of the Co	nur deurthist	and all the second	HINDHIODIN	e di ini
☑ DOH	Amend Amend	200			City, S	tate, Zip C	ode						
□ DCA		_				nilton, N.							
(NJAC 5:23-8)	justifica					of Contact			Telephone Number				
	☐ Cancel	lation			Joh	n Mirand	la		609-631-4100				
					FAC	ILITY IN	FORMATION						
Name of Facility Where A			Place	(3)				Type of Facility					
Alexander Element	ary Schoo	) I						School (K-12	?) 8 (Other than K-12)				
Street Address 20 Robert Drive								Other (i.e., p	rivate and commerc	ial bui	ilding	s,	
City (5)						ni-		homes, etc.) Square Feet	# of Floors	Dia	l= 1		
Hamilton								100,000 sf	2		ig. Aq <b>55</b>	je	
County (6)					Coun	tv Code (7	)(STATE USE ONLY)	<u> </u>	ior if being demolish				-
Mercer						., (-,	,,,	School	.or comig comonon	00)			
Name of Monitoring Firm	Hired by Bu	ilding C	Owner (	(8)	ASCM I	No.	Name of Abateme	ent Contractor (9)					
Karl Environmental	l Group						Guardian Co	ntracting, Inc.					
Street Address							Street Address						
20 Lauck Road							1889 Route 9	, Unit 61					
City, State, Zip Code							City, State, Zip Co	ode					
Mohnton, PA 19540					-111			New Jersey 08	755				
Project Manager for Mon	itoring Firm				phone I		Telephone No.		License No.				
Mike Krisher		Cabad	1		0-856-	(ACCESSION )	732-349-9932		00624				
Start Date (10)	18	900			tion Dat		Name of OSHA N E.M.S.L. Ana						
Occupancy Status During							Street Address						
☐ Facility Closed/Vacate							1056 Stelton						
Abatement Performed Time of Abatement: _							City, State, Zip Co						
							Piscataway, I	New Jersey 08	854				
Scope of Work (Check all  ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	i that apply)			novatio molitio			Mini-Enc     Glovebage     Glovebag	g Procedure	gative Pressure	è			
				Locati						Ab:	ateme	ent Ty	уре
Location		*A 4\		Normal d Sole		0-6-	Description of			R	R	m	m
Asbestos-Containing TO BE ABA		JIVI)	Ma	intena	nce/		stos Containing Ma ., thermal systems		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facili	ty		Cus	todial 8 (12)	starr?		surfacing, VAT other miscellane		SF or LF)	val	1.0	sula	ure
(13)			Yes	No	N/A		otrier miscellane	ous)				te	10000
Kindergarten 1, Nurs	e office &			$\boxtimes$		wran &	cut elbows		20 elbows		П	П	
hathroom									20 0.00110				1
					닏								닏
													IЦ

Toms River, New Jersey Completed By (Print or Type)

Nicholas Fernicola

Name of Registered Waste Hauler

Guardian Contracting, Inc.

Title **Project Manager** 

Disposal Date 07/25/18

Cubic Yards of

Waste

Name of Registered Landfill T.R.R.F.

City, State

Tullytown, Pennsylvania Signature Date

NJDEP Waste

Hauler ID No.

20223

City, State

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0110 -					S	tate of N	ew Jersey		ME G				-
14715	nil		NOT				BESTOS ABAT						
01090	77			(Pt	ırsuar	It to NJA	C 8:60 and 5:1	5)		0 0	20.	0	
Date of Notification (1)	-				Name	of Building	g Owner/Operator (	2)	U LU JUL	20	20	0	- Ile
	19 /	18			Jac	obs Dem	nolition		2	u <	$C_{i}$	4	
Agencies Notified	Type Notifi	cation			Street	Address			ASBESTO	\$.00	MTF	OL 8	3
⊠ EPA	☐ Initial				PO	Box 9		Const	LIU	ENS	NG	white most	to Metal Tra
⊠ DOLWD	⊠ Amende				City, S	State, Zip C	Code					-	
☑ DOH □ DCA	Amendr	- 27			Mai	nasquan,	NJ 08736						
(NJAC 5:23-8)	☐ Emerge justifica		ciuainę	3		of Contact			Telephone Numb	er			
3	☐ Cancella				Lin	da			732-528-3800				
					FAG	CILITY IN	IFORMATION						
Name of Facility Where A	Abatement is	Taking	Place	(3)	,			Type of Facility (	(4)				
Shopping Center				. ,				School (K-12					
Street Address			_					☐ Subchapter 8	(Other than K-12)				
200 Mathistown Ro	ad							Other (i.e., pr homes, etc.)	rivate and commerc	cial bu	ilding	s,	
City (5)	700							Square Feet	# of Floors	Blo	dg. Ag	ne er	
Little Egg Harbor								30,000 sf	2		65	, ,	
County (6)					Cour	ty Code (7	)(STATE USE ONLY)		or if being demolish				
Ocean							///	Shopping C		iou			
Name of Monitoring Firm	Hired by Bu	ilding C	wner	(8)	ASCM	No.	Name of Abateme						7
Guardian Contracti	ng, Inc.			`			5500 5000 5000	ntracting, Inc.					
Street Address				-			Street Address			LATE AND			
1889 Route 9, Unit	61						1889 Route 9	. Unit 61					
City, State, Zip Code							City, State, Zip Co						
Toms River, NJ 087	55							New Jersey 08	755				
Project Manager for Moni	itoring Firm			Tele	phone	No.	Telephone No.		License No.				
Nicholas Fernicola				1000	32-349		732-349-9932	!	00624				
Start Date (10)		Sched	uled C	omple	tion Da	te (11)	Name of OSHA M	Ionitor					_
07 /20 /		122			_ /	S. 38 1500	E.M.S.L. Ana	lytical					
Occupancy Status During	Abatement	(Check	only	one)			Street Address						
☐ Facility Closed/Vacate					ment		1056 Stelton						
☐ Abatement Performed	Outside of N	Normal	Facilit	y Hour	s - Des	cribe	City, State, Zip Co	ode			-		_
Time of Abatement: _	AM	PN	1/	PM-		AM		New Jersey 088	354				
Scope of Work (Check all	I that apply)						,,						
≥3 sf or >3 If			⊠ n-	novati				ainment with Neg	ative Pressure				
□ ≥160 sf or ≥260 lf			Monada .	molitic			☐ Mini-Enc	osure g Procedure					
									n-Friable Procedure	9			
				Locat						Ab	ateme	ent Ty	уре
Location Asbestos-Containing I		8.0\		Norma ed Sole		0-1	Description of		9 3	Z.	Z.	Ш	Ш
TO BE ABA		ivi)	Ma	intena	nce/		stos Containing Ma ., thermal systems		Amount (Specify	Removal	Repair	ıcar	Clo
IN Facilit	ty		Cus	todial ( (12)	Staff?		surfacing, VAT	, or	SF or LF)	val	7	Encapsulate	Enclosure
(13)			Yes	No.	N/A		other miscellane	ous)				ate	10
interior			-						=0.15	57			
menor						aspesto	s pipe insulatio	n	50 If		Ш	Ш	Ш
Name of Registered Was	te Hauler			N	JDEP V	Vaste	Cubic Yards of	Name of Regist	tered Landfill				

City, State

Guardian Contracting, Inc.

Toms River, New Jersey

Completed By (Print or Type)

Nicholas Fernicola

Waste

3

Disposal Date

07/24/18

Signature

Hauler ID No.

20223

Title

Project Manager

Name of Registered Landfill

Tullytown, Pennsylvania

Date

T.R.R.F.

City, State

ASB-41 **JAN 13** 

3/16904	1	NOTIFI (P	CATION	ate of Ne I OF ASB to NJAC	ESTOS	ABATE	MENT			E (		2 3	20 20	nt F
Date of Notification (1) 7/19/18				f Building / Manag			(2)	1		<del></del>	<del>) L</del>			10-
Agencies Notified Type Notification  EPA Initial		- 1	Street A 411 As	ddress shley Av	/e				F	ASBES	STOS	S CC NSI	NTI	ROL
DEP Amended Amendment				ite, Zip Co		1					200-400-6		The Section Print	* EVEL TO SERVE
Emergency justification)  DCA  Cancellation		F		f Contact	-				Telephone					
			FACI	LITY INFO	ORMATI	ON								
Name of Facility Where Abatement is Takin	g Place (3	3)	Sinte-burn				Туре	of Facility (4						
Street Address							×	School (K-12 Subchapter 8 Other (i.e. pretc.)	(Other than	K-12) nercial	buildi	ngs,	home	es,
City (5) Lakewood							Squa 117	are Feet	# of Floors	\$	Blo	ig. A	ge	
County (6) Ocean			County (	Code (7) USE ONLY	)		Curr	ent Use (Prior	if being dem	nolishe	d)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	1 No.		102291 10		atement Cont D PROFES		3				7.00
Street Address						Street 6 WH		oss DOVE CO	URT					
City, State, Zip Code	11					City, S	State, 2	Zip Code OD, NJ 08						
Project Manager for Monitoring Firm		T	Telephor	ne No.		Teleph 732-	none N	lo.		ise No.		BARRA		
Start Date (10) 7/29/18	Schedule 8/1/18	ed Com	npletion (	Date (11)		Name	of OS	HA Monitor D PROFES		-77.				
Occupancy Status During Abatement (Chec		ie)				Street			SIONALS					
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other – Describe:	Period of A	Abatem	ent			6 WF City, S	HITE State, 2	DOVE CO Zip Code OD, NJ 08						
Scope of Work (Check All That Apply)   ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	The company	tenova emoliti					Fu Mi GI	ill Containmer ini-Enclosure ovebag Proce on-Exempted	nt with Negat				9	
Location of	i	Locati	у		De	scription	of				<i>P</i>	Abate Ty	ment pe	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Ma	d Solei intenar iodial S (12)	nce/	Asbes (i.e.	tos Cont thermal surfa	taining N	Materia s insul .T. or		Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure
INTERIOR	Yes	No	N/A			l = = + 4:1-			45005				ite	Ф
INTERIOR						loor tile	9		150SF	2	K		_	-
Name of Registered Waste Hauler			JDEP W			Yards		Name of R	egistered La	ndfill				
NEWARK CARTING			auler iD 1509	No.	of Wa			IESI						
City, State NEWARK, NJ	*				Dispo:	sal Date 8		City, State BETHLE	HEM PA					
Completed by JOSEPH PERLSTEIN	Title	IER			5	Signature	<del>)</del>	1		Date				

Ch 2420	٨	IOTIF (F	CATION Pursuant	ate of Ne N OF ASE to NJAC	BESTOS 8:60 an	ABATE d 12:120	0)"		DE	C I		V	
Date of Notification (1) 7-14-2018				f Building r Petzin		Operator	r (2)			JUL	23	2018	
Agencies Notified Type Notification		_	Street A		<u> </u>				ASE	BESTO	200	NITRO	3 17
EPA Initial Amended		-	City Sta	ate, Zip C	ode				AGI		ENSI		) L. Ct
X DOL Amendment :  Emergency (i		_		field, N.		)							
DOH justification)  Cancellation	ricidaling			f Contact Petzin					Telephone	Number			7777
				LITY INF	0	ON			L				
Name of Facility Where Abatement is Taking Residential	Place (3	)		1/2-0-1-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-			Ty	ype of Facility (4)					
Street Address								School (K-12) Subchapter 8 Other (i.e. privetc.)	(Other than		ilding	s, hom	ies,
City (5) Ridgefield, NJ 07450								quare Feet 586	# of Floors		Bldg.	Age +	
County (6)			County (	Code (7)	<u> </u>			urrent Use (Prior	if being dem	olished)			
Bergen  Name of Monitoring Firm Hired by Building O	wner (8)		ASCM			Name	of A	Abatement Contr	actor (Q)				
	(0)		7,000			Gree	n E	Environmenta	Services	LLC			
Street Address			- X- (X-0)			Street 235 \		dress ginia Avenue					
City, State, Zip Code						City, S	tate	e, Zip Code					
Project Manager for Monitoring Firm			T. 1. 1.				.25	City, NJ 0730					
			Telephor	ne No.		Teleph 201-3		e No. 3-8855	Licens 0117				
	Schedule 7-14-20		npletion [	Date (11)		100000000000000000000000000000000000000		OSHA Monitor is above					
Occupancy Status During Abatement (Check	Only One	∍)				Street	Add	dress					
Facility Closed/Vacated During Entire Pr Abatement Performed Outside of Norma Other – Describe:	eriod of A Il Facility	baten Hours	nent			City, S	tate	e, Zip Code					
Scope of Work (Check All That Apply)											1/2/12/2		
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	× Re	enova	tion ion			×		Full Containment Mini-Enclosure Glovebag Proced Non-Exempted (*	dure			ıre	
		_ocati							<i>y</i>	1	Aba	temen	t
Location of Asbestos-Containing Material (ACM)	Used	ormal I Sole	ly by	Ashes	Des	scription	of	rial (ACM)	Amount	-	T	уре	r
TO BE ABATED In Facility (13)	ntenar dial S (12)		(i.e.	thermal surfac	systems sing, VA niscellan	ins T, o	sulation, or	(Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure	
	Yes	No	N/A									ate	e
Basement		X			Pipe	insulat	tior	1	200 LF	X	-		
Name of Registered Waste Hauler		I N	JDEP W	aste	Cubic '	Yards		Name of Re	gistered I an	dfill			
Green Environmental Services		Н	auler ID 1	No.	of Was				S. North L				
City, State Jersey City, NJ						al Date	-	City, State Morrisville	ΡΔ	1			
ACCOUNT OF THE PROPERTY OF THE					1 4	-0.0		I MICHIES ALLIE	, , , , ,	//			

Check#3109		N			TION	tate of N I OP AS It to NJ	BESTO	SABAT	THMENT	ME	C [	E		<u> </u>	<u> </u>
Date of Notification (1)				1	Name	of Buildin	g Owner/	Operator (	2)	113					7
	18 /	18			John 1	Norcross					111	0 0	20.	10	
Agencies Notified	Type Notific	cation		-		Address				L L J	UL	20	20	10	11.
☐ EPA					01.00	71001000	I								
☑ DOLWD	Amende				City, S	State, Zip	Code			ASBE	STO	3 00	INTE	OL	8
DHSS	Amendm					dere, NJ (					LICE	ENS	ING	National	95-landrock
DCA (NJAC 5:23-8)	Emerger justificat		aing	ŀ		of Contac				Telephone N	lumbe	r		-	
	Cancella	(3)			John 1	Vorcross									
					1000	CILITY II	VEOPMA	TION							
Name of Facility Where	Abatement is	Taking P	ace (3	)	, 7	OIL) I I II	VI OKNIA	CIION	Type of Facility	(4)				-	
Private house		NET (1881)	(-	x ::					School (K-1)						
Street Address				-					Subchapter	8 (Other than K-					
									Other (i.e., ) homes, etc.	private and com	mercia	al bui	idings	<b>3</b> ,	
City (5)		<del></del>			-				Square Feet	# of Floors		TRIC	lg. Ag	-	
Belvidere, NJ 07823									oquare rees	# 0,7100,3		Dic	y ny	C	
County (6)				i de	Coun	ty Code (7)	(STATE U	SE ONLY)	Current Use (P	rior if being dem	nolishe	l ad)			
Warren						., (, )	(011112-01	02 01121)	00010111 000 (11	. Tot it being den	10113120	,,			
Name of Monitoring Firm	Hired by Bui	lding Owr	ner (8)	1	ASCM	No.	Name o	of Abateme	L ant Contractor (9	1		-			
							Gr Tec		00.11.4010: (0	,					
Street Address								Address				-7-			
								Iley Rd#	1702						
City, State, Zip Code				_			-	ate, Zip Ci	manuscript and the second						
								NJ 0747							
Project Manager for Mon	itoring Firm		1	Tale	phone	No.	Telepho			License No.	70-5-13-13-13-13-13-13-13-13-13-13-13-13-13-				$\neg \neg$
				18/18/			973-63			01127	,				
Start Date (10)		Schedule	ed Com	plet	ion Da	te (11)		of OSHA N	lonitor	01127		4000	-		
07 / _27 /			_ / _								3	,			
Occupancy Status During	g Abatement						Street A	-	nsultants, Inc						
□ Facility Closed/Vacat					nent		Control Control		Dood Dide #	250					
☐ Abatement Performed	d Outside of N	Normal Fa	cility H	our	s - Des	cribe .		ate, Zip Co	Road, Bldg .#	33E					
Time of Abatement: _	AM	PM/_		PM		AM	19000	wn, NJ 0							
Scope of Work (Check al	Il that apply)				-		T att La	-	and decontamin	nation with nega	ative p	ressi	ıre	-	
M >2 of or >2 If	0 0 0 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	5		92			口	Full Con	tainment with Ne				-,,-		
>3 sf or >3 lf > 160 sf or >260 lf		×	Reno Demo				X	Mini-Enc	losure g Procedure	Tent with Nega	ative P	ressi	ıre		
		-	, some	,,,,,,				Non-Exe	mpted (*) and No	on-Friable Proce	edure	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
			Is Lo									Aba	teme	nt Ty	/pe
Location Asbestos-Containing		M	Used S	rmal Sole		1		scription o				ZJ	R	ш	III
TO BE ABA	: [1] [1] [1] [1] [1] [1] [1] [1] [1] [1]		Maint	ena	nce/				terial (ACM) insulation.	Amount (Specify		Remova	Repair	Encapsulate	Enclosure
IN Facil	ity	1 8	Custod /	lial ( 12)	Staff?		surfa	cing, VAT	, or	SIF or LF)		avo	=	lusc	sure
(13)		-	T		1	+	other	miscellane	ous)					ate	
5		1	es I	No.	N/A	+					-				
Basement			J   L		X	Pipe ins	ulation			170 LF		$\boxtimes$			
			] [[												
		I	7 /		П							П	П	П	П
	Male-and de la constant	F	7   -	1		-			***************************************						
Name of Registered Was	ste Hauler		J   L	L Ni In	ED Mass	e Hauler ID No	Toubi- V-	rdo of 101	Alaman CD		Market To	Ш	Ш	Ш	Ц
	ore i laniel						1		Name of Regi						
Gr Tech LLC City, State				0	03378	35	TBI		T.R.R.F. Inc						
							Disposa	II Date	City, State						
Wayne, NJ 07470							TBI	)	Tullytown, P	Α					
Completed By (Print or T	ype)	Title					Sig	gnature	1		Date				
N.Jevtic		Owner						1	which were	1	07/18	3/18			
ASB-41 MAY 11		* /)	norn	co 16	is for	u for asbes	tov liegue	1/							

		State	e of N	ew Je	rseyNotifi	cation of Asbestos	Abateme	nt	EP	IS I	7\//	R r
016 211	1				ID) /	/     m)	-	11)	EC	EL		
(1)	+ /			(Purs	uant to N.J.A.C	. 8:60-7 and 12:120-7)		K				
Data of Natification (1)					4 2	LN(B.iiii 6	10 1 10			2-3	2010	
Date of Notification (1) July 17, 2018						Name of Building Owner The Gantner Scho		4	JUL	23	2018	1
Agencies Notified		No	tification	Type		Street Address	101					-
					fication	99 Roosevelt Aver	nue		ASBEST	os cc	NTRO	L &
X EPA					ification	City, State, Zip Code				CENSI		
DCA		X	Emer	ency (	(including	Elmwood Park, N	J				11-51-628910	COLUMN SECURITION OF THE PERSON NAMED IN COLUMN SECURITION OF THE PERSON NAMED
x DOL X DEP			justific		. 0	Name of Contact		Tele	phone Nu	mber		
x DOH			Cance	lled		Vincent Benenati /Willi	am Morales		3.949.35			
					FACILITY IN	FORMATION						
Name of Facility Where Abate	ment is T	aking F	Place (3)			Type of Facility (4)						
The Gantner School						☐ School (K-12)						
Street Address		-				Subchapter 8 (other that						
99 Roosevelt Avenue	•					Other (i.e. private 8						
City (5)	County (	(6)		County	/ Code (7)	Sq. Feet: Unknown	# of Floor	s: 3 <u>E</u>	Ildg. Age	<u>:</u> 80	/ears	
Elmwood Park	Berge				Use Only)	Current Use (prior if bein	a demolished	4)-				
	Doigo					Current ose (prior il belli	ig derrionanet	.,.				
Name of Monitoring Firm Hire	d by Bldg.	. Owner	r (8)	ASCM	No.	Name of Contractor (9)	<del></del>					
<b>EnviroVision Cons</b>	ultants	s inc.	2	0007	79							
						GREENWOOD ABA	TEMENT C	ONSU	JLTANT	S, INC		
Street Address 20-21 Wagaraw Road	Dida	# 255	=			Street Address						
20-21 Wayaraw Noau	, blug	# 335	-			511 MAIN STREET						
City, State, Zip Code						City State, ZipCode						
Fairlawn, NJ 07410						Butler, NJ 07405						
Project Manager for Monitorin	g Firm		ephone N			Telephone Number		Licen	se Numbe	r		
Fred Larson		97	73-636-	9145		072 402 0477		000	40			
Scheduled Start Date (10)		Sch	neduled C	ompletio	n Date (11)	973-492-0477 Name of OSHA Monitor		0084	40			
July 17, 2018			ly 19, 2		117							
Execute the Record Company Com						EMSL inc.						
Occupancy Status During Al						Street Address						
Facility Closed/Vacate Abatement Performed						1056 Stelton Road						
Describe	Outside	OI NOI	mai raci	nty Hour	5 -	City, State, Zip Code						
Other - Describe:												
						Piscataway, NJ 08	854					
Source of Work (Check all tha	t apply)											
> 2 of or > 2 if	30				<b>□</b>	two.co	Full Contai		_	tive Pre	ssure	
≥ 3 sf or ≥ 3 lf □≥ 160 sf or > 2						ION		nclosur				
<u>== 100 31 01 = 2</u>	.00				Demoillion		Glovebag I x Non-Exer			n-Friahl	e Proce	dure
Location of Asbestos-Containi			n Normall			bestos Containing Material	Amou	nt	Abateme			duio
Material (ACM) in Facility (13)			Maint./Cu	stodial		nal systems insulation, surfac	(-1		Bomous	Donnie I	Encon E	nologo
	YE	iff? (12) ES	NO NO	NA	VAT, or other mis	cell.)	or LF)		Remove	керан і	IIICAD E	TICIOSE
Gymnasium			X		Transite		80sf		X			
	P				Transito		0031					
Name of Reg. Waste Hauler			DEP Wast		ID#	Cubic Yards of Waste:		Name	of Registe	ered Lar	ndfill	
See Hauler Below # 1 & 2	2	See	e Below				10	100000000000000000000000000000000000000	dowfill La	andfill		
								0.0000000000000000000000000000000000000	O.W.S	011		
Hauler #1) Greenwood A	hatomo	ont Co	onculto	nto Inc	Dutlor NII	7405	Disposal Da		rva Ent.	Ohio ity, Stat		
NJ DEP # 12				nis, mi	Dutier, NJ 0	7405	July 19,			oute 2,		
Hauler #2) Newark Cartin				4509. N	J DEP # 19551		outy 10,	_0.0	В	ridgepoi	t, WVA	
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Completed by (Print or Type)		Title	105.55		-	<u>Signature</u>		<u>Date</u>			1887	
Marin Graure		SEN	IOR PF	KOJEC	1	Maria Graus	2.0.	Jul	y 17, 20	118		

Date of Actionation (1)   July 17, 2018   Submitted and Type   Control of Actionation   Contr	From:GREENWOOD	ABATEMENT	197349	20135 07/	17/1018	10:00	#044 P.002/004
District Notification   Dist	Ch314	State of I	/ / A		a tour-chill	ent DOL	
Sepa   Dinitial Notification   District Charles	July 17, 2018	Natification	n Type	The Gantner Sch	i 20e ator (2 ( )]	T	1635000
Name of Facility (Manual Abdelament   Teking Piace (3)   School (K-12)   Sch	DCA × DOL × DEP	☑Amen ☑ Eme	ded Centification rgency (including ication) elled	99 Rocevelt Ave City State, Zip Code Elmwood Park, N Name of Contact Vincent Benenali (Wil	[ _ ]	- Telaphan	o Number
The Genther School  Sized Address  B Roosevelt Avenue  Chr. (s) Private (c) Private (c) Commercial buildings, homes, etc.)  Sized Address  B Roosevelt Avenue  Chr. (s) Private (c) Commercial buildings, homes, etc.)  Sized Address  Current Use (prior if bein   demolshed):  Chr. (s) Private (c) Commercial buildings, homes, etc.)  Sized Address  Current Use (prior if bein   demolshed):  Chr. (s) Private (c) Commercial buildings, homes, etc.)  Sized Address  Chr. (s) Private (c) Commercial buildings, homes, etc.)  Sized Address	Name of Eachty James Abole	mont in Taking Blace (6	FACILITY		4 0000		
County Code (7)   ISale Las DM   Current Use (prior if bein   demolshed):	The Centner School			School (K-12) USubchapter 8 (other th	4 1 KC 12)		
Elmwood Park  Bergeri  Selegia (Selegia Control (Selegia	an Kooteaels Washine			So Feet Linksows	Contracted	buildings, hon	nas, etc.)
EnviroVision Consultants inc.    GREENWOOD A BA   SIMEL Addises				1			Age: BO years
Envire Vision Consultants inc.    GREENWOOD A BA   SIMEL Addition   Simel	Name of Monitoring Firm Hires	by Bido, Owner (8)	ASCM No.	Name of Contractor (6)	-		
20-21 Wagaraw Road, Bidg # 35E  Chy. State. 2lo Code Fairlawin, N.J. 07410  Chy. State. 2lo Code Fracility Chy. State. 2lo Code Fracility Closed/vacated Combidition Date (11)  July 19, 2018  Scheduled Combidition Date (11)  July 19, 2018  Chy. State. 2lo Code Fracility Closed/vacated During Entire Period of Abatament Abatement Performed Outside of Normal Facility Houre - Describe Cihrer - Describe:  Chy. State. 2lo Code Placataway, N.J. 06  State. 2lo Code Placataway, N.J. 06 State. 2lo Code Placataway, N.J. 06 State. 2lo Code Placataway, N.J. 06 State. 2lo Code Fracility Closed/vacated During Entire Period of Abatament Abatement Performed Outside of Normal Facility Houre - Describe Cihr. State. 2lo Code Placataway, N.J. 06 State. 2lo Code Mini-Enclosure Giovabag Procedure Alon-Extempted (7) and Non-Friable	EnviroVision Consu	ltants inc.		GREENWOOD ABA	'EMENT C	ONSULTA	ints, inc.
Feillawn, NJ 07415  Fright Manager for Monitorical Firm Fred Larson  Schedulad Start Date (10) July 17, 2018  Cocupancy Status During Abatement (Check only one)  Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Quiside of Normal Facility Hours Describe Other - Describe:  Secretical Growth (Check se that south)  Schedulad Start Date (10) July 18, 2018  EMSL inc.  1056 Station Road City. Spile. Zio Code Placateway, NJ 06 384  Securce of Work (Check se that south)  2 3 of or 2 3 if Describe Other - Describe:  Securce of Work (Check se that south)  Securce of Work (Check se that south)  2 3 of or 2 3 if Describe Other - Describe:  Securce of Work (Check se that south)  Securce of Work (Check se that south)  2 3 of or 2 3 if Describe Other - Describe:  Securce of Work (Check se that south)  Securce of	20-21 Wagaraw Road	Bldg # 35E					
Pricet Manager for Monitoring Firm  Fred Lenson  973-836-8146  973-492-0477  Scheduled Blart Date (10)  July 19, 2018  Scheduled Date (11)  July 19, 2018  July					The state of the s		
Scheduled Start Date (10) July 17, 2018  Scheduled Campelation Date (11) July 18, 2018  Scheduled Campelation Date (11) July 18, 2018  EMSL. inc.  December Variable During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours- Describe Other - Describe:  Seurce of Work (Chack set that apply)  2 9 of or 2 3 if D2 160 of or 2 260  D2 Renovation Demostion Glovedag Procedure Hon-Extempted (*) and Non-Phable Procedure Abatement with Negative Pressure Mini-Enclosure Glovedag Procedure Hon-Extempted (*) and Non-Phable Procedure Abatement Type Water (12) YES NO NA  Transite  Gymnasium D3 Transite D4 Transite D5 Transite D606f D1 Name of Realistred Landfill G.R.O.W.S Minerva Ent. Onlo Disposal Date Non-Extent Date July 19, 2018 D3 Non-Extent Date July 19, 2018 D4 Non-Extent Date July 19, 2018 D5 Non-Extent Date July 19, 20	Project Managar for Monitorios	Firm   Telephone	Number		-	111	
Scheduled Cambellion   Date (11)   July 17, 2018   Scheduled Cambellion Date (11)   July 17, 2018   EMSL inc.	Frad Larson						1997
Signat Address   Facility Closed/Vacated During Entire Period of Abatament Abatement Performed Quitable of Normal Facility Hours - Describe   1056 Stellton Road   1056 Stellt		Scheduled July 19,	Completion Date (11) 2018	Name of OSHA Monitor		1 00840	-
Searce of Work (Check set inst apply)  ≥ 3 of or ≥ 3 if  D≥ 180 of or ≥ 260  Location of Aspestac-Containing Material (ACM) in Facility (13)  Sofely by Meint-Custodial Staff? (12) YES NO NA  Gymnasium  Ell Containment with Negative Preseure Mint-Enclosure Glovebag Procedure Hon-Exempted (*) and Non-Friable Procedure Hon-Exe	Facility Closed/Vacate Abelement Performed Describe	d During Entire Period	of Ahetemant	Simat Address 1056 Staiton Road City State, Zip Code			
Exercise See Hauler #1) Greenwood Absternant Consultants, Inc. — Butler, NJ 07405  Hauler #2) Newark Carring, Inc. — Newark, NJ 04509, NJ DEP # 19551    Demostion   Demostion   Demostion   Description of Aspestos Containing Material (ACM) (i.e. thermal systems insulation, surfex of Waster Hauler #2) Newark Carring, Inc. — Newark, NJ 04509, NJ DEP # 19551    Fill Containment with Negative Preseure   Mini-Enclosure   Giovebag Procedure   Hon-Exempted (*) and Non-Fhable Procedure   Hon-Exempted (*) and	- Anna Anna Anna Anna Anna Anna Anna Ann			PINCACRWRY, NJ 00	\$54ii		
Description of Asbestos-Containing Material (ACM) in Facility (13)  Location of Asbestos-Containing Material (ACM) in Facility (13)  Solely by Maint/Custodial (ACM) (i.e. thermal systems insulation, surfect (Specify SF Or LF)  Gymnasium  Francisc  Solely Maint/Custodial (ACM) (i.e. thermal systems insulation, surfect (Specify SF Or LF)  Francisc  Gymnasium  Francisc  Solely Maint/Custodial (ACM) (i.e. thermal systems insulation, surfect (Specify SF Or LF)  Francisc  Gymnasium  Francisc  Solely Maint (Specify SF Or LF)  Francisc  F	Source of Work (Check of that	ecoly)		A STATE OF THE STA	with measurement		
Material (ACM) in Facility (13)  Sofely by Meint/Custodial Staff? (12) YES NO NA  Transite  Sofely by Meint/Custodial Staff? (12) YES NO NA  Transite  Transite  Sofely Staff? (12) YES NO NA  Transite  Sofely Staff? (12) Name of Registrated Landfill G.R.O.W.S  Meadowfill Landfill G.R.O.W.S  Minerva Ent. Ohio  Discosal Date July 19, 2018  Sofely Staff? (12)  Remove Repair Ecosa Engles  Remove Repair Ecosa	D≥ 180 af or ≥ 26		Demostion		Mini-E Glovobeg i	nclosure Procedure	
Name of Rep. Waste Hauler See Hauler Below # 1 & 2  Name of Rep. Waste Hauler ID & Cubic Yards of Weste: See Hauler Below # 1 & 2  Name of Replace I Landill Meadowfill Landill G.R.O.W.S MineNa Ent. Ohlo  Dispersion of Meadowfill Landill G.R.O.W.S MineNa Ent. Ohlo Dispersion of Meadowfill Landill G.R.O.W.S MineNa Ent. Ohlo Dispersion of Meadowfill G.R.O.W.S MineNa Ent. Ohlo G.R.O.W.S MineNa	Malerial (ACM) in Facility (13)	Sofely by Maint./C Staff7 (12)	(I.e. then VAT, or other mi	mal systems insulation, surfec	ng, (Speci	nt Abe	tement Typs
See Hauler Below # 1 & 2  See Below  Meadowfill Landfill G.R.O.W.S  Mineryz Ent. Ohio  Mauler #1) Greenwood Abstement Consultants, Inc. – Butler, NJ 07405 NJ DEP # 12581 NY DEP #  Hauler #2) Newark Carring, Inc. – Newark, NJ 04509, NJ DEP # 19551  Geolden WA 304-842-2764	Gymnasium	080	Transite		8089	B	
Hauler #2) Newark Carring, Inc Newark, NJ 04509, NJ DEP # 19551  Cav. State	See Hauler Below # 1 & 2	See Belo	H		0	G.R.O.W.	III Landfill
Completed by District Williams	NJ DEP # 128	81 NY DEP#		07408		Nie.	City. State Route 2, Box 65 Bridgeport, VWA
	Completed by (Print or Type)	Tine		Signature	Edition because of	Data	
Marin Graure SENIOR PROJECT MANAGER  MANAGER  Marin Graure  July 17, 2018					16		, 2018

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	te of Notification (1)					f Building	Owner/0	Operator	(2)				111		23	20	18
	7/08/18				John B	Beattie			00-1000			1 4	JU	L .	20	LU	10
Ag	encies Notified	Type Notification			Street A	ddress								20012			
	EPA	× Initial										A	SBES	TO	S CC	NTI	ROL
	DEP	Amended			City, Sta	ate, Zip Co	ode						[	.ICI	ENSI	NG	SAME OF S
×	DOL	Amendmen		_	Morris	stown, N	J 0796	30	63								
×	DOH	Emergency iustification		ı	Name of	f Contact					Tel	ephone l	Numbe				
×	DCA	Cancellation	000		John B	3eattie											
					FACI	LITY INFO	ORMAT	ION		×							
Na	me of Facility Where Al	oatement is Takir	ng Place (3)	)					Ту	e of Facility (4)					5411.5-3-		
R	esidence								П	School (K-12	)						
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Cit	y (5)			_					Sa	etc.) Jare Feet	# 0	Floors		Blo	ig. Ag	е	
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	orris					USE ONLY	)			esidential	" Del	ng deliil	oneu)				
	me of Monitoring Firm F	dired by Building	Owner (9)		ASCN	4 No	C	Nama	7.22	batement Contr	acto-	(0)					
Na N		nied by Building	Owner (8)		ASCIV	i NO.				ervices Inc.	actor	(3)					
														_			
Str	eet Address							Street									
								2000		ole Ave.							
Cit	y, State, Zip Code							2000/2000		Zip Code	-						
									_	on, NJ 0705				12-3			
Pro	oject Manager for Monito	oring Firm			Telepho	ne No.		Teleph 862-		No. -9092		License 01107					
Sta	rt Date (10)		Schedule	d Con	npletion l	Date (11)		Name	of O	SHA Monitor						1, (12.5)	
07	7/19/18		07/21/1	8				Lesla	aw I	Valodka							
Ос	cupancy Status During	Abatement (Che	ck Only On	e)				Street	Add	ess							
×	Facility Closed/Vacate	ed Durina Entire	Period of A	batem	nent			156	Map	ole Ave.							
	Abatement Performed							City, S	tate,	Zip Code							
	Other - Describe:						_	Wall	ingt	on,NJ 07057	7						
Sco	ope of Work (Check All	That Apply)							- Cale								
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	Location			ormal Sole				scription						T			
	Asbestos-Containing N TO BE ABAT		Mai	ntenai	nce/			taining iv systems		ial (ACM)		mount pecify	7	,	_	Encapsulate	Щ
	In Facility		Custo	odial S	Staff?	(	surfa	cing, VA	T, or			or LF)	Zellova		Repair	aps	Enclosure
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Ne	wark Carting Inc.			0	5409		5		181	. GCSL							
City	/, State						Dispos	sal Date	•	City, State						7	
	wark NJ.						07/23	3/18		Pen Argy	/l, P/	A					
Cor	mpleted by		Title		-		5	Signature	:	111			Date				
	slaw Nalodka		Presi	dent				1.		Wish		-	07/09	118	8		

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Date of Notification (1)			Name	of Buildir	ng Owner	Operator	r (2)			11 2	3 2	UIB	-
07/13/2018			IRA.	JACOB	S								
Agencies Notified Type Notification	1			Address INDEN	AVF			M 144	ASBES	LICEN	CON	TROL	- &
EPA Initial Amended				tate, Zip					SON WARRANT WAS COME AND STREET OF THE PROPERTY OF THE PROPERT	TO CONTRACT OF THE PARTY OF THE		- Company of	hereaste.
DOL Amendmen				ONA N									
DOH Emergency		g	Name	of Contac	ct				Telephone N	Number			
DCA Cancellation	n			JACOB:					973 - 960				
Name of Facility Where Abatement is Takir	na Plana	(2)	FAC	ILITY IN	FORMAT	ION	_						
PRIVATE	ig Flace	(3)					Тур	e of Facility (	(4)				
Street Address		-					H	School (K-1	2)				
88 LINDEN AVE.						1	X	Other (i.e. p	8 (Other than K private & comme	-12) rcial bu	ildina	s. hon	nes
City (5)								etc.) uare Feet					
VERONA NJ.								284 SF.	# of Floors		Bldg. 98		
County (6)			County	Code (7)					or if being demol	iehod)	90		
			(STATE	USE ONL	.Y)		- 01		V/A	isited)			
Name of Monitoring Firm Hired by Building	Owner (8	()	ASC	M No.		Name	of Ab	patement Con			_		
N/A.									/IRONMETN	AL LL	C.		
Street Address						Street							
City, State, Zip Code						1126		0.000077-00					
ony, otate, zip dode								Zip Code					
Project Manager for Monitoring Firm			Tolock	no Me				BERGEN N					
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tart Date (10)	Schedu	ed Cor	npletion	Date (11)	)	100000000000000000000000000000000000000		HA Monitor	01300				
07/21 /2018	07/21			-4.0 (11)	,				NTAL LABOR	ΔΤΩ	SIEC		
occupancy Status During Abatement (Chec	k Only O	ne)				Street A	The same services		THE EADOR	AIUI	MES		
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	Period of	Abaten	nent					OUTE 22					
Abatement Performed Outside of Norm Other – Describe:	al Facilit	y Hours	3			City, Sta	ate, Z	Zip Code					-
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cope of Work (Check All That Apply)	_												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demolit				XX	Mi	ni-Enclosure ovebag Proce	edure				
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Location of		Locati Vormal			-							emen /pe	t
Asbestos-Containing Material (ACM)	Use	d Sole	ly by	Asbes	Des stos Conta	cription o	of ateria	I (ACM)	Amount		T		
TO BE ABATED In Facility		intenar todial S		(i.e.	. thermal	systems i	insula	ation,	(Specify	Re	ת	Encapsulate	Ē
(13)		(12)			other m	ing, VAT	ous)		SF or LF)	Removal	Repair	apsu	Enclosure
	Yes	No	N/A							va	=	ılate	ure
BASEMENT					DIDE I	101 11 4 -				-		_	
J. OLIVILIY!					PIPE IN	ISULAT	ION	И	90 LF.	X			
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ame of Registered Waste Hauler		N.	JDEP W	aste	Cubic \	'ards		Name of Re	egistered Landfil				
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RI STA ASSOCC INC		118	9951		TBD				A LINIERPK	ISEII\	10.		
ty, State	N.				100			City, State	SBLIDC OLIV				
RI STA ASSOCC INC ty, State RONX NY. completed by ARLOS ESQUIVEL	Title				TBD		<del>/</del>		SBURG OHIO	D,			

(Pursuant to N.J.A.C. 8:60-7 and/12:120-7) JUL 23 2018 Date of Notification (1) Name of Building Owner/Operator (2) July 17, 2018 RUTGERS, THE STATE UNIVERSITY OF NJ Agencies Notified Notification Type ASBESTOS CONTROL & Street Address ☑ Initial Notification ENVIRONMENTAL HEALTH& SAFETY DEPTG X EPA □Amended Certification 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS x DCA ☐ Emergency (including City, State, Zip Code x DOL justification) PISCATAWAY, NJ 08854 X DEP ☐ Cancelled Name of Contact Telephone Number **xDOH** Michael Smith ENV HEALTH & 848.445.2550 SAFETY **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Rutgers Busch Campus Livingston Health Center ☐ School (K-12) Blda # 4157 Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) **Busch Campus** Sq. Feet: 3,000 # of Floors: 1 Bldg. Age: 60 years City (5) County (6) County Code (7) Current Use (prior if being demolished): Academic Piscataway MIDDLESEX (State Use Only) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC ASSOCIATES 0098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE **511 MAIN STREET** City, State, Zip Code City State, ZipCode BURLINGTON, NJ 08016 Butler, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number **BRIAN KEARNY** 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor August 2, 2018 August 7, 2018 Envirovision, Inc. Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours -20-21 Bldg E Wagaraw Road Describe City, State, Zip Code ☑ Other - Describe: 4pm-5am -24hrs&Weekends as Fairlawn, NJ x -Facility Occupied during abatement Source of Work (Check all that apply) x Full Containment with Negative Pressure  $\geq$  3 sf or  $\geq$  3 lf **X** Renovation Mini-Enclosure ≥ 160 sf or ≥ 260 Demolition Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type Material (ACM) in Facility (13) Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Remove Repair Encap Enclose Staff? (12) VAT, or other miscell.) or LF) YES NO NA 1st Floor Room X Linoleum 475 sf X 110,110D Name of Reg. Waste Hauler NJDEP Waste Hauler ID# Cubic Yards of Waste: Name of Registered Landfill See Hauler Below # 1 & 2 See Below **GROWS North Landfill** 20 Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State 100 New Ford Mill August 7, 2018 NJ DEP # 12561 Road, Morrisville, PA Hauler #2) Newark Carting, Inc. - Newark, NJ 04509, NJ DEP # 19551 215-736-1700 Completed by (Print or Type)

Date

Raymond C. Pedalino

July 17, 2018

Notification of Asbestos Abatemen

State of New Jersey

SENIOR PROJECT

MANAGER

Raymond C. Pedalino

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Date of Notification (1) 07/09/18				f Building C kill BOE	Owner/Oper	rator	(2)	•				JUL	23	3 20	18
Agencies Notified  Type Notification  EPA  Initial  DEP  Amended			City, Sta	oln Dr. ite, Zip Coo							ASE	BEST		ONT	ROL
X       DOL       Amendmer         Emergency       justification         X       DCA       Cancellation	(including		Name of Antoin	Kill, NJ 07 Contact ette Kell	у				20000000	ephone 1-567					
Name of Facility Where Abatement is Tak Bryan Elementary School Street Address 15 Brookside Ave	ng Place (3	)	FACI	LITTINFO	RMATION		×	of Facility (4) School (K-12) Subchapter 8 Other (i.e. prietc.)	) (Othe				dings,	home	es,
City (5) Cresskill								re Feet	# of 2	Floors	s	1779	ldg. A	ge	
County (6) Bergen				JSE ONLY)		-	Sch				nolisi	ned)			
Name of Monitoring Firm Hired by Building Westchester Environmental LLC Street Address	Owner (8)		0012		L	esc		rvices Inc.	actor	(9)					
1248 Wrights Lane City, State, Zip Code					Ci	ity, S	tate, Z	e Ave. lip Code	ni						
West Chester, PA 19380  Project Manager for Monitoring Firm  Philip Conteh			Telephoi 610-43	ne No. 31-7545	Te	eleph	ingtor ione N 221-9		,	Licer 011	nse N	lo.			
Start Date (10) 07/23/18	Schedule 07/27/		npletion (	Date (11)	10-23-34			HA Monitor alodka							
Occupancy Status During Abatement (Che  Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:	Period of A	baten			1 Ci	156 ity, S	tate, Z	ss e Ave. ip Code n, NJ 0705	7						
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf		enova emolit			¥0/	×	Mir Glo	Il Containmen ni-Enclosure ovebag Proce n-Exempted (	dure	ō				e	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Use Ma	Locati lormal d Sole intena odial S	ly ly by nce/		Descri os Containi thermal sys surfacing	ing N stem:	lateria s insula		(S	mount pecify or LF	/	Remova		ement pe Encapsulate	Enclosure
(13)	Yes	(12) No	N/A		other misc	cellar	neous)					oval	air	ulate	sure
Basement Child Care Room		*			pipe ins	sula	tion		40	)4 Lf.		*			
Name of Registered Waste Hauler Newark Carting Inc.		F	IJDEP W lauler ID 5409	171701701	Cubic Yar of Waste 5	rds		Name of Re	egiste	red La	andfil				
City, State Newark, NJ					Disposal I 07/28/18	88		City, State Pen Argy	yl, P	4					
Completed by Leslaw Nalodka	Title Presi	dent			Sign	ature		Nak			100000	ate 7/09/	18		



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

PAIL			ICATION	tate of Ne N OF ASB to NJAC	ESTOS	ABATE		CI.	00	k	175	34	4	
Date of Notification (1) 7/17/18				of Building New Hor			(2)			3 E	C		7\//	E
Agencies Notified Type Notification			Street A	VIA TOTAL TOTAL	1103 LL	.0			-111	115	(b) [	<u> </u>	W	_ <u>L</u>
				orest St	reet					31				
EPA Initial Amended		H		ate, Zip Co					- 111		IUL	23	201	8
DOL Amendment				ıy, NJ 0					14	6.1	JUL	_ 0		•
Emergency justification)		-	Name o	of Contact					Tel	ephone Nu	ımber.	espectation of	energyme.	1001010100
DCA Cancellation			Paul F	Russo					97	3-809-7	5580	SCO	NTR	OL &
			FAC	ILITY INF	ORMAT	ION			Louis		10	-1/1/211		www.contract
Name of Facility Where Abatement is Takin home	g Place (3	3)					Туре	of Facility (4	)					
Street Address								School (K-12			10)			
Street Address						1		Subchapter 8 Other (i.e. pri				dings,	home	es,
City (5)								etc.)					1-0.00	
Kearny							270	re Feet	2	Floors		31dg. A 32	ge	
County (6)			County	Code (7)				ent Use (Prior		na demolis		) _		
Hudson				USE ONLY	)		hom		ii bei	ng demons	neu)			
Name of Monitoring Firm Hired by Building	Owner (8)		ASCN	И No.		Name		tement Contr	ractor	(9)		100		
•	, ,		1 000000			- CONTRACTOR - CON		ronmental		Section 1	С			
Street Address						Street	Addres	SS						
						POE	Box 4	83, 4 E Ga	ate D	rive				
City, State, Zip Code								ip Code	021		1991-00-			
8						200000000000000000000000000000000000000		l, NJ 0741	8					
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 973-				License 1	No.			
Start Date (10) 8/2/18	Schedule 8/16/18		npletion	Date (11)		Name	of OSI	HA Monitor						
Occupancy Status During Abatement (Chec						Street	Addres	88				-		
Facility Closed/Vacated During Entire	hall \$1 test	514	aont			O. O. O.	, , , , , , ,							
Abatement Performed Outside of Norm  Other – Describe: exterior	nal Facility	Hours	5		_	City, S	tate, Z	ip Code						
Scope of Work (Check All That Apply)											-			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	and the same of th	tenova emolit				×	Mir Glo	I Containmer ni-Enclosure ovebag Proce n-Exempted	dure	(50.0)			Δ.	
	le.	Locati	on			-7/	1 110	LXCIIIptou	( ) air	3 14011 1 110			ement	
Location of	N	Vormal	ly		De	scription	of					Ty	ре	
Asbestos-Containing Material (ACM)		d Sole intena			tos Conf	taining M	laterial		Α	mount			т	
TO BE ABATED In Facility		odial S		(i.e.		systems cing, VA		ation,		Specify or LF)	Remova	Re	Encapsulate	Enclosure
(13)		(12)				niscellan			01	01 L1 )	nova	Repair	lusc	osui
	Yes	No	N/A								_		ate	·e
exterior			х		exte	rior sid	ling		1,8	00 SF	х			
Name of Registered Waste Hauler		N	JDEP W	/aste	Cubic	Yards		Name of R	eaiste	red Landfi	11			
Tonys Cleanup & Hauling		Н	auler ID 7787		of Wa			Chrin Br	5.			ndfill		
City, State					Dispos	sal Date		City, State						-
Bridgewater, NJ					TBD			Easton,	PA					
Completed by A. Scott Higgins	Title	dent			S	Signature		17		100000	ate //76/1	2		

	Im A	n	State of	New J	ersey			Check	163	317	
	門座				TOS ABATEMENT 7 and 12:120-7)	)		FG	F-		7 15
Date of Notification	(1)	mh 6m3			Owner/Operator			5 9		U V	- 6
7/17/2018			Christi	ine	Singer						
Agencies Notified	Type Notifica	ation	Street Addre	ess				JUL	23	20.	18
[ ]EPA	[X]Initial										
[ ]DEP	Notific	ation	City, State	, Zip	Code		A	SBEST	25 00	ONTE	201 &
[X]DOL	[]Amended		Glenric	ige,	NJ,07028				ENS		1020
[X] DOH	Notific	ation	Name of Con	tact		Telephon	e Number				
[ ]DCA	[ ]EMERGENC		Christi	ine	Singer						
	[ ]Cancella	tion	FACT	T.TTV T	INFORMATION						
Name of Facility Whe	re Abatement	is Taki	AND THE STATE OF T		CITE OTTALLE TOTAL	Type of Facili	ty (4)				
Christine Sing			(-,			[]School					
	<i>y</i>					[ ]Subchapt		er than	K-12	2)	
Street Addres						[X]Other (i					
							# of Floo	-	.dg.		
City (5		County	(6) Essex	Cou	nty Code (7)	Square Feet	# OI FIO	DIS D	.ag.	Age	
200 AN AND			(-,		ATE USE ONLY)	Current Use (F	Prior if be	eing de	molis	shed)	
Glenridge		Essex									
Name of Monitoring F Owner (8) N/A	irm hired by	Building	g ASCM No.		The second of th	ment Contractor  IANAGEMENT					
Street Address					Street Address	s					
					86 Chris	stopher St.	•27				
City, State, Zip Cod	е				City, State, Montclai	Zip Code r, NJ 0704	12				
Project Manager for	Monitoring Fi	rm Te	lephone Numb	er	Telephone Num	ber	þ	License	Numl	oer	
	-	N	'A		(973) 744	1-8800		0037	1		
Scheduled Start Date 08 - 09 - 3	S		letion Date	(11)	Name of OSHA N/A	Monitor					
			Day Year	ē	1,722						
Occupancy Status Dur [X] Facility Clos	ing Abatement sed/Vacated D	(Check uring En	only one) tire Period		Street Addres	S					
of Abatement [ ]Abatement Per	Tables commence ou con-	de of No	rmal Facilii	tv	City, State,	Zin Code				-	
	ribe: «OffHour	s Descri	pt»	-1	City, State,	alp odde					
Scope of Work (Check	all that app	ly)			Ц	22 22 M		2 Age 375 at 250	V11-28829		
5**** 2	>2.16		X]Renovation			Containment wit Enclosure	th Negative	Press	ure		
[X]≥3 sf or [ ]>160 sf o			]Demolition			ebag Procedure					
_			Is		[ ]Non-F	Friable Procedu	re	Ab	ateme	nt T	Pype
Location	of		ocation		Description	on of			T	E	E
Asbestos-Con		1	Tormally Used		Asbestos-Con		Amount	E	R	C	C
Material	30.000.00 Fr	E	Solely By Main-		Material (i.e., thermal		(Specify SF or	M O	P	A P	O
TO BE ABI		t	enance/ ustodial	in	sulation, surf		LF)	VA	A	S	S
(13)		St	aff (12)		or other misce	llaneous)		L	R	L	R
Basement		Yes	No N/A	Pine	insulati	on	190 I	FX			
Dasement	100 Block   100 Bl										
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Name of Registered W	aste Hauler	N.	JDEP Waste	Cu	bic Yards	Name of Regis	stered Land	dfill	1		
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City, State	egga angga massa			100	sposal Date	City, State	777 7.0.4	7.6			
Montclair, NJ	07042			(	08/13/18	Bronx, 1	NY, 104	14			
Completed By (Print	or Type) Tit	tle			Signature	2	7	Date	·	-	
Constantine V		reside	ent		1 100	sla-inch	Mitte	7/17	/201	8	

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Date of Notification (1)  O7.14.202  Agencies Notification Type Notification	2	VINI	of Building Owner ELAND B.O.E.	/Operato	r (2)			ASE	EST	IS CO	NTROL &
	•	17 V	VEST LANDIS.	AVE		J.	· · ·	: !	CHARLES CAN	7	) I C
DOL	11#	VINE	State, Zip Code ELAND, NJ 083	60		`-"	1 . 3-	1	1	<u> </u>	
DOH Emergency justification Cancellato	)	Name	of Control			1/1/4/1991	refer Number	1	VE.	<u> </u>	
						750	-794	. 6	700	3	ľ
Name of Facility Where Abatement is Taki	ng Place (3)	FA	CILITY INFORMA	TION							
STREET ACTIONS	HOOL	500	N TO		Type of Faci	(Ta. 1.4.)					4
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CITY (8)	W K D B				Square Feet			Bidg.			
County (6) CUMBERLAND	•	County	/ Code (7)		Current Use	Print If being do					
Name of Monitoring Firm Hired by Building	Outper/El		עשב סאנץ,		4	CHOM!	imonsuéa)				
ENC. ELVIDOU THE PLAN	Owner(a) المحمد مد الله	ASC	M No.	Name	of Abatement	ontractor (9)		- 17.00			
(					COMPAN'	ING.					
City, Sibile, Zip Code	> '	1		208	PIAGET AV						
Project Manager for Monitoring Firm	8344		1	City, S	tala, Zip Coda TON, NJ 01	01.1			*		
JIM EBERTS			one No.	Telaph	one No.		maa No.				
Stan Date (10)	Scheduled Co	moletion	105-1077		53 8828 of DSHA Mon	007	'04				
Occupancy Status During Abatement (Chec	Salam   F. L.	120	218			or .					
AFROIDS CIRCUMS IN ALL IN THE TOTAL CO.	A Only One)		17	Street	dddress.						
Abelement Performed Outside of Norm	nat Facility Hou	ment ra		Cky, St	ele, Zip Codis						
Scope of Work (Check All That Apply)					<u> </u>						
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-100 21 01 62 80 11	Demoi	ltion			F MINI-FUCIO	me it with Nege ure	tive Prees	TL6			
			1		Non-Exant	red () and Mou-	Friable Pri	o Ce diu	'e	-	
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TO BE ABATED	Maintena	Inde/	Asbestos Cont	aining Ma	torio (ACM	Amount		T			
in Fecility (13)	Custodiai (12)	Staff?	(i.e. thermal	ing, VAT	. ar	(Spacify SF or LF	, द्व	8	-nca	Š	
‡	YES No	N/A	other m	it cells no	ous)	0.42	Removal	Repair	Encapsulate	Enclosure	
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Name of Registered Waste Hauler		JDEP W			Name :	f Fiagistered La	ndfli	L		-	
NEWARK CAPTILL	21110	054	109		1E		DFIL				
DEWARE LY			Dispose	Dale	Olty, S	stę:				$\dashv$	
Completed by OYTEK ROSZKOWSKI	TITLE		Sh	enstare.	BE:	HLEHEN					
OTTER ROAZKOWSKI	PRESIDE	YT		U.K	والحص	سعطاه	O7/	121	2671	gu +	
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Onte of Notification (1) 07/12/2018				T	Name of	Bullding Ox	DOS/Dages	Hor /3)		ASRE	SICI	111		101
Agencies Notified	Type Notifi	cation			, ng角 Di	ICIU PRIK I	BOE	10' (2)			LICE	MSI	NG	esteron o
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Name of Facility March 51	Cancel				im Tev			100		Telaphor 201-64	TE NUIS	nher	- Children	
Name of Facility Where Ab Grant Elementary Sc	nool	Taking P	pce (3)	_	FAGILI	TY INFORM	ATION	Type of F			- 000			
Steet Address 104 Henry Street								Scho	: (K-12)			500 <del></del>		
City (5)								Subt Other	1 lipte 8 (C	thar the	7 K-12)	)   h <sub>i</sub> , et	(1=	
Ridgefield Park County (8)					Security			Square Fe		of Floor				
Bergen				Co	unty Coo	le (7)		Current 1/-					dg. At	NB.
Name of Monitoring Firm Hir Ahera Consultants Inc	ed by Build	ng Owne	r (8)		ASCM NO		120	Current Us achool			ollehe	d)		1
Street Address					057		VIVIC	of Abalemen Company	Co itracto	x (9)				_
PO Box 385 City, State, Zip Code							Street	Address laget Ave			_			
Oceanville, NJ 08231							City, St	ate. Zin Crui						
rolect Manager for Monitoric John Smoyer	ig Firm			Tele	phone N	0.	Cliffor	n. NJ 070'	1					323
tari Dete (10) 17/17/2018		Sche	dulma C	609	-652-1	833	973-2	ne No. 53-8828		Ucens 00704				
ocupancy Status During Abs	less +- 1 (= "	07/1	8/201	& C	on Date	(11)	Name o	Company	lor	-0.0-		_		
Feelity Closed/Vacated I Abatement Performed Ot Other - Describe:				guall guall			Street A	Sdiess		14				
ope of Work (Check All The							City, Sta	le. Zip Code		-		-	_	-
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Location of			s Loce		T		N.	Non-Exem	ed (*) and	Non-Fria	ble Pro	ocedu	R	
IQ BE ABATED	el (ACN)	Us	Noima ed Sok alatene	aly hy	Asb	Dos:	ription of	82.17.				Abat	emen ype	ıt
In Facility (13)		Chi	10dia: (12)	Staff?	0	estos Conta e, thermal s	ystems ins 18, VAT, o	I clmbia.	(Spe	ount ochy	R		5	50
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of Registered Weste Heule			I N	DEP W	m a to	1=	_			-	-	-	-	_
irk Carting Inc			He	uter ID I 409	No.	Cubic Yar of Waste	de.	Name F	Rigistered	Landfill				
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k Roszkowski	1	Presid				Signa	4	The same of the sa						- 1

13 2018 13:54 NJ Asbesto			633.0664		pa	ige 2			E		V E
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Dase of Notification (1)	7	NC	144 1000 125	tele of Now N OF ASBE t to NJAC 8:	CYTTO	TEMENT 120)	AS	BEST	OS (	CONT	I POL 8
Agencies Notified Type Notified			1 117779	of Building O	wner/Opera	lor (2)	in confinement of the confinemen	-	GEN	SING	- SILLER PROPERTY.
1 1 No. 140(1)		_	Street A	Address							
EPA DEP Initial Amer	idea		City, Sta	Incoln Ave	une	D(	100	137		7	
Emerg	diment # pancy (incli	udina	Ridge	field Park.	NJ 07660		H - 10 D/	17	-	+	
DCA Cance	ation)	•	Jim Ta	Contact rvis		ال	Telepi	ione N	mbar	+	
Name of Facility Where Abatement is Grant Elementary School	Taking Pla	Ce (3)	FACI	LITY INFORM	MATION	-	-: - 1:5501-16	41-0	100		_
Street Address						Type of Fi	ty (t)		N	1	
104 Henry Street						<b>PA</b> ME	MERRO	/FD	Fal	1	
City (5) Ridgefield Park						Other	pretione & co	mmerci	af V	laine	home-
County (6)						Square Fa	# of Flo			Bldg. A	
Bergen			County Co	ide (7)						Nog. A	9.0
Name of Monitoring Firm Hired by Bullo Ahera Consultants Inc.	Ing Owner	(8)	(4 IATE US	E ONLY		- www.root	Prior if being di	molish	ed)		
Ahera Consultants Inc		(~)	ASCM N 0057	10.	Name	nemeiadA to	Contractor (B)				
PQ 80x 385		-			VIVIC	Company	nc				
Olly, State, Zip Code					205 F	iagal Ave					
Oceanville, NJ 08231					City. St	ete, Zip Con-	:				
roject Manager for Monitoring Firm John Smoyer			Telephone	No .		1, NJ 0701					
fart Date (10)	I Date	11	609-652.	1833	Telepho 973-2:	ne No. 53-8828		se No.		_	
7/20/2018	07/23	Hed Com /2018	pletion Date	i († 1)	Name of	OSHA MOE	0070	)4			
coupancy Status During Abatement (Ch	ock Only o				AMC	company i	IC				
Facility Closed/Vacated During Enting Abatement Performed Outside of No Other – Describe:	e Period of Imal Facilit	Abateme y Hours	rat		Street Ac	e. Zip Cods				S. (	
ope of Work (Check All That Apply)					July, Other	e. sip Code					$\neg$
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Asbestos-Conteining Material (ACM)	l N	iormally Solely b	1	Dr-				T P	Aba	temer	1
TO BE ABATED	Men	nichance diai Stafi	/ As	Pesios Conta	cription of	(ACM)	Amount	-	7	ype	
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of Registered Waste Hauler			+-	DOS	rds/masti	C	115 SF	κ			-
irk Carting Inc		NIDER	Weste .	Cubic Ya	rds	I Nize				-	$\dashv$
fate		D5409	ID No.	of Waste		GRO', IS	Registered Landfi				-
1414						-11015	•				
rk, NJ				Disposal	Date	City Pi					- 1
rk, NJ Pled by K Roszkowski	Title Presider			Disposal		City, Si a	e, PA		-		$\dashv$

Name of Registered Waste Hauler Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Newark Carting, Co. 4509 Grand Central Sanitary Landfill City. State Disposal Date City. State Newark, NJ Pen Argyl, PA 18072 Completed By (Print or Type) Title Signature Date Bilyana Kulakovska Office Administrator 7/16/18 ASB-41 JUN 95

# State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

	Ц			/k·k·	*EMERG	EI	1 C Y ***		Check #	9090				
Date of Notification	ı (1)	Name	of Building Ow	vne	r/Operator (2)				I F	- A	PI	177	7 F	, [-
10 17 1/11 17		11	den Board o						IID)	E C				
Agencies Notified	Type Notificati	on Street	Address	_					1151					111
☐ EPA	Initial	11	East Gibbons		Street					JUL	23	20	8	$\perp \!\!\!\! \perp \!\!\!\!\! \perp$
X DOL	Amenda		State, Zip Code nden, NJ 070		3					are an extended to	partatonnas	esperior pro		
₩ DOH	_		of Contact						Telephone	Number				0
☐ DCA	☐ Cancella	ntion	arry Miranda			1172303333			908-86	management in any	- semestrari			No. of the Control of
-	<u> </u>		FA	CIL	ITY INFORMA	TOITA	N					5000		
Name of facility w	here abatement is	s taking place (	(3)	-				Туре	of Facility (4	)				
	School (NON	857,63							School Subcha	(K - 12) pter 8 (O	ther th	an K-	12)	
Street Address									Other (F	Private/Co	mme			
121 West St.	Georges Ave	nue						Squa		lomes, et		Blo	ig. Ag	je
City (5)		County (6	6)		T		unty Code (7)	50,00	00 2			50+		
Linden, NJ 0	7036	Union				(Sta	ate use only)	-1	ent Use (Pri			olishe	d)	
Name of Monitorin	ng Firm Hired by I	Bldg. Owner (8	)	T	ASCM No.	T	Name of Abatement	-						
EnviroVision	1				0079		B & G Restorat	ion, Ind	D					
Street Address 20-10 Maple	e Avenue, Bui	lding 35F					Street Address 105 Ryerson F	Road						
City, State, Zip Coo	de	9 002				-	City, State, Zip Code							
Fair Lawn, N	anto stat Wasses						Lincoln Park,	NJ 070	)35					
Project Manager fo			Phone Nur				Telephone Number (973)696-686	9		License 00	Numb	er		
Guillermo M			973-636-			_	Name of OSHA Mon				-	-		
Scheduled Start Da	ate (10)		mpletion Date	(11	)		B & G Restora		c.					
07/19/2018		07/21/2					Street Address							
Occupancy Status	During Abatemer ed/vacated during						105 Ryerson R							
Abatement p	ed/vacated during performed outside						City, State, Zip Code							
Describe: Other-Descri	ribe:			_		-	LincolnPark, N	J 0703	5					
Scope of Work (c		y)												
Demolition	X	Renovation					Full Containment w/ne	gative pr		Glove				
$3 \text{ sf or } 3 \text$	f 🗶	≥160 sf or ≥26	0 If				Mini-enclosure		2	Non-fr		oroce	dure	
Location of		Is location no by maintenar	ormally used sol	lely			× 5€		Americat		e R	R	E n	E
asbestos-co material to b		staff(12)	100/040104141	_	Description material (		asbestos-containing )		Amount (Specify S	F or	m	p a	c a	n
abated in fa	cility (13)	Yes	No N/A		,				LF)		v e	i	p	L
2nd fl School	Media Center		X		wood sub-	-floo	ring & mastic		2,028 sf s	f	X			口
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Basistarad Wasta	Houler	INIDER	Hauler ID#	C	ubic Yards of V	Naste	Name of Registered	1 Landfill			<u> </u>	Ш	Ш,	
Registered Waste B & G Restora		195			20	-330	Grand Ce							
City, State Lincoln Park,	NJ		Disposa 0		ate 21/2018		City, State Pen Argy	le, PA						6
Completed by (Pri		Title		1.023	Signature		Gordana Luna			Date	7/00	10		
Gordana Lun	а	Secretary/	i reasurer				zoruana Luna			07/1	1120	١۵		

RECEIVED 07/17/2018 03:47PM Jul 17 2018 15:42 NJ Asbestos Control 609.633.0664 page 1 State of NJ 2 3 2018 Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-" 2018-145 8 & G proj. #: \*\*\* EMERGENCY \*\*\* LULUITH Date of Notification (1) Name of Building Owner/Operator (2) 0 17 1/11 17 1/11 18 Linden Board of Education JUL 1: ZUIS Type Notification Agancies Notified ☐ EPA 2 East Gibbons Street Initial DEP City, State, Zip Code WAIVER Amendment Linden, NJ 07036 图 DOL Telephone Number Name of Contact IN DOH Cancellation 908-862-0950 Larry Miranda ☐ DCA FACILITY INFORMATION Type of Papility (4) Name of facility where abatement is taking place (3) 2 School (K - 12) Subchapter & (Other than K-12) Linden High School (NON Sub 8) Other (Private/Commercial Stragt Address Bidgs./Homes, etc. Bidg. Age Square Feet | # of Floore 121 West St. Georges Avenue 50+ 50,000 2 County Code (7) County (8) Clty (5) Current Use (Prior it being demolished) (State use only) High School (non sub 8) Linden, NJ 07036 Unlon Name of Abati mark Contractor (9) Name of Monitoring Firm Hired by Blog. Owner (B) ASCM No. 0079 B & G Ret toristion, Inc. EnviroVision Street Addres Street Address 105 Ryes on Road 20-10 Maple Avenue, Building 35E City, State, Zip Code City, State, Zip Code Lincoln I ark, NJ 07035 Fair Lawn, NJ 07410 License Number Telephone Nu 1be Project Manager for Monitoring Firm Phone Number (973)69 -6869 00378 973-636-9145 Guillarmo Morales Name of OSI | Minhtor Sched, Completion Date (11) Scheduled Start Date (10) B & G Restaration, Inc. Street Address 07/21/2018 07/19/2018 105 Ryel ior: Road Occupancy Status During Absternant (Check only one) City, State, Z Gode Facility closed/vacated during entire pariod of abatement. Abatement performed outside of normal facility hours-Describe: LincolnF: irk, NJ 07035 Other-Describe; Scope of Work (check all that apply) Full Containme twinagative pressure Glovebag procedure X Renovation ☐ Demolition Non-friable procedure Mini-enclosure R ≥160 af or ≥260 ! 25 sf or >3 lf E is location normally used solely E 0 8 n Location of by maintenance/custodial Amount n Description of ganestos-cont: ning m P gninistroo-cotsedes Ċ (Specify SF or staff(12) material (ACM) 0 4 ٤ absted in facility (13) NA Yes 1 Il wood sub-flooring & mast 2.028 af af 2nd fi School Media Center Name of Ri gistered Landril Cubic Yards of Waste Registered Waste Hauter Gri nd Central Landfill 19563 B & G Restoration, Inc. City, Stat: City, State Pe i Argyle, PA 07/21/2018 Lincoln Park, NJ

Signature

Carechona , Zamas

Title Secretary/Treasurer

Completed by (Print or Type)
Gordens Luna

Date

07/17/2018

AppROUED 184: tom Voorhees	NOTIFICAT	State of N.	of Nev ASB J.A.C	w Jersey ESTOS AE 860 and	ATEMENT 12:120)	Clik#	3	40	4	
Date of Notification (1)	N	lame of Buil	ding O	wner / Operato	or (2)		7 0	D 0		pontane.
7/18/18		lacys Inc.				DECE	3	$\mathbb{V}$	[5]	1
Agencies Notified Type Notification	4 Page 1	treet Addres West Sev		Stroot						
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			INFO	RMATION		110	1/12/1/1/1		O-Travalence	MANUTE TO
Name of Facility Where Abatement is	Taking Place (3)			Type of Facil						
Macys Store Street Address				School (	n-12) oter 8 (Other th	on K 12)				
2000 Route 38, Suite 200						nmercial buildings	s hom	ies e	etc.)	
				Square Feet	The second secon		dg. Ag	110000	,,	
City (5)	unty (6) Cou	nty Code (7	)	1			5 0			
Cherry Hill Ca	mden			Current Use	(Prior if being o	lemolished)				
				Retail		13823				
Name of Monitoring Firm Hired by Bu	ilding Owner (8)	ASCN	ИNo.	The state of the s	tement Contra	, ,				
Pennoni Associates, Inc. Street Address				Street Addres	ironmental,	nc.				-
515 Grove St.				1123 Beave						
City, State & Zip Code				City, State &						
Haddon Heights, NJ 08035				Bristol, PA						
Project Manager for Monitoring Firm Alan Lloyd		one Numbe <b>56-2875</b>	er	Telephone No		License Nu	mber			
	eduled Completion			(215) 788-60 Name of OSH		00509				
7/18/18	7/20/1	FIRST CONTRACTOR OF STATE OF STATE		등 이 이 회사 사람들은 이 경험에 되었다. 그 전에 없는 것이 없다.	ironmental li	ıc.				
Occupancy Status During Abatement				Street Addres	7 TO					
Facility Closed/Vacated Durin	- A 11		t	1123 Beave						
Abatement Performed Outsid Describe: 10:00PM to 7:00A		rs –		City, State & 3 Bristol, PA						
Facility Occupied During Aba				Bilstoi, PA	19007					
Scope of Work (Check all that apply)					- HEART - 1			5444		
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in Facility		dial Staff?	ins	sulation, surfac	ing, VAT		Remova	Repair	Encapsulate	Enclosure
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N. CO.										
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Service Transport Inc.		20990		2 Cu Yd	Minerva La	ndfill				
City, State		-		isposal Date	City, State					
New Castle, Delaware		_		7/20/18	Waynesbur	* 100 mg / 1				
Completed By (Print or Type)		Title		ignature	0 .		Date			~
Gino Pizzigoni		Project Manager		Diro.	Pungon	i /gh	7-	-18	-10	r

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(NJAC 5:29-8) justification)  Cancellation		- 1	riel S	of Contact			W 1 11 V	Helephone Numb	far in L	_		
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West New York, NJ 07093						pero accordan	i					
County (6) Hudson			Count	y Code (7) (	STATE USE ONLY)	Currers	Use (Pri	or if being complis	hed)			
Name of Monitoring Firm Hired by Building (	Dwitter	(\$)	GOM	No.	Name of Abetem	ent Conir	cto · (9)					_
					Gr Tech LLC							_
Street Address				i	Street Address 576 Valley Rd #	(207						
City, State, Zip Code			+		City, State, Zip C				_			
Project Manager for Monitoring Firm		7=-			Wayne, NJ 074	70		171				
Project derigies to somitoring right		100	hone	2000	Telephone No. 973-638-1777			License No. 01127				
		amplet		le (11)	Name of OSHA N	Admitor		10.127				-
	07_/	-	1 /	18	Envirovision Co	พาธนส์ของ	,Lnc					
Occupancy Status During Abstament (Check Facility Closed/Vecated During Entire Pr			nmnt		Street Address		11 4					
	Facilit	. Laur	Das	criba	20-21 Wagaraw City, State, Zip C	Kozad, i	148 .# .	338		-		
Abatement Performed Outside of Norma	de de de	y moun								- Butaness	postalia de	
Time of Abatement:P	tu/	PM_		AM ·	Fair Lawn, NJ 0	7410	Dept. Militar	SECTION AND DESCRIPTION OF THE PARTY OF THE	Dress	ura		
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## State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

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

Date of Notification (1)				T		_				1				
07/12/2018					of Building  Demoli		/Operator	(2)			臣 (			$\mathbb{W}$
Agencies Notified	Type Notification	1			Address					<u> </u>				***
X EPA					30x 42									
DEP	Initial Amended			City, St	ate, Zip Co	ode				Leed lead			3	2018
× DOL	Amendmen			Section 1997	-By-The-		NJ 077	17						
X DOH	Emergency justification	(including			of Contact					Telephone	Manah	erne	CON	ITPOL
DCA	Cancellatio			Frank	Lurch					732-988	-8814	LICE	NSIN	G
				FAC	ILITY INFO	ORMAT	TION			birthero-tensylenemer	who the production of	Consultative and	and the same	ariwatelescenting
Name of Facility Where	Abatement is Taki	ng Place (3	)					Туре	of Facility (4)					
Avon United Metho	odist Church								School (K-12)	)				
Street Address									Subchapter 8	(Other than	K-12)			
507 Garfield Avenu	ue								Other (i.e. privetc.)	vate & comm	iercial l	buildin	gs, hor	nes,
City (5)								Squar	e Feet	# of Floors		Bldg	. Age	
Avon-By-The-Sea,								5.00	0	2		704	-	
County (6)	2				Code (7)			Curre	nt Use (Prior	if being dem	olished	1)		
Monmouth				(STATE	USE ONLY,	,		Chu	rch					
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASC	M No.		Name	of Abat	tement Contra	actor (9)				
							Alph	a Env	ironmental	LLC				
Street Address							1	Addres						
			-01224				PO	Box 8	297					
City, State, Zip Code							100		p Code					7-23,112-2
							Tren	ton N	J 08650					
Project Manager for Mor	nitoring Firm			Telepho	ne No.			one No		Licens				
0. (0. 11.	-						609-	847-2	956	0122	2			
Start Date (10) 07/21/2018					Date (11)				A Monitor					
	11	07/23/2		i					lytical					
Occupancy Status Durin							I DESCRIPTION	Addres						
Facility Closed/Vac	ated During Entire	Period of A	bate	ment					130 North					
Abatement Perform Other – Describe:		nal Facility	Hour	'S			City, S						1000-9650	
Scope of Work (Check A							Cinn	amins	on NJ 080	)77				
	ii That Apply)						_	,						
≥3 sf or ≥3 lf ≥ 160 sf or ≥260 lf			enova emoli				-		Containment	t with Negativ	ve Pres	sure		
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(13)			(12)			other	miscellan	eous)		•		Removal	Encapsulate	Enclosure
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		1												
Name of Registered Was				JDEP W			Yards		Name of Re	gistered Lan	dfill	The same of		
Alpha Environmenta	I LLC		71 (1) (2)	lauler ID 1003333		of Wa	iste		Grows La	ındfill				
City, State	****			3 2 3 3 3 3			sal Date		City, State					
Trenton, NJ						vario			Morrisville	e. PA				
Completed by		Title				15	Signature			1	Date			
Kelly Sisk		Projec	t M	anager	<	===		7	Z.	15/1	07/1	2/201	8	
			-				- The same		Y S	15 10				

# FINE GENCY NOTIFICATION OF ASSESTED ABATEMENT PURSuant to NUAC 8:50 and 42:120)

CK 6876

Date of Notification (1)			T	Name o	of Building	Owner	/Operato									
7/18/18	- N. 115 11			JOSE	ph O	hlu	eiler	P	hivede t	lan	E)	E	P	E	N D	
Agencies Notified	Type Notification			Street A	Address						Ulr	5	<u> </u>	5	U C	
EPA DEP	Initial		H	City St	ate, Zip Co	de					7					
DOL	Amended Amendment	#			onfield N		133					J	UL	23	20	18
⊠ DOH	Emergency	(including	- F	-17 -17 -17 -17 -17 -17 -17 -17 -17 -17	of Contact					Thi	ephone	Nlum	hor	100000	50000	31.350 //
DCA DCA	justification) Cancellation		- 1	John	, Gomaoi					I lei			-	networks.	ermone glue	Metadolomora
				FAC	ILITY INF	ORMA	TION			1	,	1001	LIC	ENS	NG	ROL 8
Name of Facility Where		g Place (3	)					Туре	of Facility (4	)		-		10.1.4	110	
Joseph Ohlweiler F	rivate Home								School (K-12	2)						
Street Address	41								Subchapter 8	(Oth	er than	K-12				
			10						Other (i.e. pri etc.)	ivate d	s comn	nercia	Duile	aings,	nome	es,
City (5)	200							(5)	re Feet	# 0	Floors		В	ldg. A	ge	
Haddonfield NJ 080	)33							100	0+	2			3	35+		
County (6) Camden					Code (7) USE ONLY	)		Curre	ent Use (Prior	if bei	ng dem	olishe	ed)			
Name of Monitoring Firm	Hirod by Puilding	Ourner (9)					1.00				(0)		00778133			
N/A	niled by building	Owner (8)		ASCN	vi No.		5 555	of Aba	tement Contr	ractor	(9)					
Street Address			-					Addres								
01100171001000								Box 3								
City, State, Zip Code									ip Code							
***************************************							100		in NJ 0809	91						
Project Manager for Mon	itoring Firm			Telepho	ne No.	O		none N			Licen	se No				$\neg$
-1 222							856-	753-9	9800		0072	27				
Start Date (10)				npletion	Date (11)		Name	of OSI	-IA Monitor							$\neg$
7/19/18		7/20/18					Sam	e								
Occupancy Status During	g Abatement (Chec	k Only On	e)				Street	Addres	SS							
Facility Closed/Vaca	ated During Entire I	Period of A	baten	ent												
Abatement Perform  Other – Describe:			Hours	;			City, S	tate, Z	ip Code							
Scope of Work (Check A															-	
	іі тпас Арріу)	157					_	1								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	v		enova emolit				-		I Containmer ni-Enclosure	nt with	Negati	ive Pr	essui	re		
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(13)				Γ		other	miscenar	leous)					val	#	Encapsulate	ure
		Yes	No	N/A											ω	
Garag	e			X		Trai	nsite pa	nel		12	20 SF					
			-													$\overline{}$
Name of Registered Was	te Hauler		N	JDEP W	l /aste	Cubic	Yards		Name of Re	eniete	red I ar	ndfill				_
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Completed by Anthony T Perna		Title Presi	dont				Signature	1				Date		,		
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NOTIFICATION OF ASBESTOS (Pursuant to NJAC 8:60 and 12:120) 2018 Date of Notification (1) Name of Building Owner/Operator (2) ASBESTOS CONTROL & Agency Notified Type Notification Street Address □ EPA City, State, Zip Code **M**Initial DEP ☐ Amended Amendment # Emergency (including □ DOH Telephone Number iustification) DCA ☐ Cancellation 09-268-1614 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) ☐ School (K-12) Street Address ☐ Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, (homes, etc.) Square Feet # of Floors Bldg. Age County County Code (7) (STATE USE Current Use (Prior if being demolished ONLY) Name of Monitoring Firm Hired by Building Owner ASCM No. Name of Abatement Contractor Street Address Street Address ARREN City, State, Zip Code City, State, Zip Code Project Manager for Monitoring Firm Télephone No. Telephone No. License No. ) /eve Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor Occupancy Status During Abatement (Check only one) Street Address KFacility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ☐ Renovation ☐ Mini-Enclosure □ ≥ 160 sf or ≥ 260 lf Demolition ☐ Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Abatement Is Location Туре Normally Location of Used Solely by Description of Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Maintenance/ Amount Encapsulate TO BE ABATED (i.e., thermal systems insulation, Removal Custodial (Specify IN Facility surfacing, VAT, or Staff? SF or LF) (13)other miscellaneous) (12)Yes No N/A Name of Registered Waste Hauler NJDEP Waste Hauler Name of Registered Landfill Cubic Yards of ID No. Waste GROWS N. LANG City, State Disposal Date Completed by Signature

Do not use this form for asbestos licensure exempted activities

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

D : 511 115 4 4 111		<u> </u>						C	heck #	1368	3	
Date of Notification (1)	July 16, 2018			of Buildi	ng Owner / Opera	ator (2)		ME	C F	П	71//	r
	Type Notification		The same of the sa	t Address				忧严	<u>U 15</u>	U	W	5
⊠EPA					0.21			IM				11
DEP			2090	Greenwo	od Avenue				IUL 2	3 2	กาล	
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⊠DCA	Amendment	200							STOS	M. 12. 2. 1	4	
MDCA	Cancellation		DASHE JOHN TO	of Conta					Telephon			
			Clian	es mom	as, Superintend	ent of Public	Property		609-890-	3535		
			FA	CILITY	INFORMATIO	ON						
Name of Facility Where Hamilton Twp. Police	Abatement is Takin  Division	ig Place (3)				Facility (4) hool (K-12)						
Street Address					=		ther than K-12	)				
1270 Whitehorse-Mer	cerville Road						ate & comme		as hon	ne. e	tc.)	
					Square		# of Floors		ldg. Age		,	
City (5) Hamilton						30,000	1			70		
namilion						Use (Prior if b B <b>uilding</b>	eing demolish	ed)				
County (6)		County Code	e (7)		T ubile E	Juliumg						
Mercer		USE ONLY										
Name of Monitoring Fire Pars Environmental, I	m Hired by Building (	Owner (8)		ASCM 00023	No. Name of Synatec	f Abatement C	ontractor (9)					
Street Address	the appearance			00023	Street A						_	
500 Horizon Drive, Su City, State & Zip Code	ite 540					lio Road						
Robbinsville, NJ 0869	91					ite & Zip Code gg Harbor, NJ						
Project Manager for Mo	nitoring Firm		lephone I			ne Number	00001	License Nu	mber			
Julian Fernandez Scheduled Start Date (	10)   Cabadu		9-890-72	NAME AND ADDRESS OF THE OWNER, WHEN PERSON OF THE OWNER, WHEN PERSON OF THE OWNER, WHEN PERSON OF THE OWNER,	609-296				0081	7		
August 15, 20		led Completi Augu	st 20, 20		Synatec	OSHA Monito	or					
Occupancy Status Duri	ng Abatement (Chec	k only one)			Street A	ddress						
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Other – Descri	rformed Outside of N	Iormal Hours	3			te & Zip Code						
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Scope of Work (Check											_	_
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$\ge$ 3 sf or $\ge$ 3 lf			Renovati	on		Mini-End	losure	regulive i ic.	33410			
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TO BE A	ABATED	Custo	dial Staff	? (12)	Mate	erial (ACM)		SF or LF)				
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									Removal	Repair	Encapsulate	Enclosure
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Ground Floor Men's Ho	Iding Cell – Pipe Cha	ise		х	Pipe Fit	ting Insulation		40 LF	X	_		
Ground Floor Women's Chase	Holding Cell – Pipe			Х		ting Insulation		40 LF	$-\frac{1}{x}$			
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Synatech, Inc.		Hauler ID	No. 429	3		Grauss	Landfill					
City, State			120	Disposa	al Date	City, St			To the same			
ittle Fee Useban St.	00007											
<u>ittle Egg Harbor, NJ</u> Completed By	08087			Signatu	21, 2018 re	Morris	/ille, PA					
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Diane Aloia	Exec	Administrate	or	1 /	111me 11	10 (0	July	16 2018				

MO#24905938230 Committee of the second of the second of the second Print Form OTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) DOL - 10 DAY Date of Notification Name of Building Owner/Operator (2) 05/25/18 Wayne Ford Agencies Notified Type Notification Street Address X **EPA** Initial DEP City, State, Zip Code Amended X DOL Amendment # Wayne, NJ 07470 Emergency (including Name of Contact × DOH justification) DCA Cancellation Poll Kessler **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Wayne Ford JUL 2018 School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, × etc.) ASBEST City (5) Square Feet # of Floors Bldg. Age LIC Wayne 50.000 50+ County (6) County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished) Passaic Car Dealership Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) N/A Stanmark Solutions, LLC Street Address Street Address 28 Edsall Drive City, State, Zip Code City, State, Zip Code Sussex, NJ 07461 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973-997-1650 01309 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 05/26/18 05/29/18 **EMSL** Occupancy Status During Abatement (Check Only One) Street Address 1056 Stelton Road Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Piscataway, NJ 08854 Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 lf × Demolition Mini-Enclosure Glovebag Procedure × Non-Exempted (\*) and Non-Friable Procedure Is Location Abatement Normally Type Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ Encapsulate TO BE ABATED (i.e. thermal systems insulation, (Specify Removal Custodial Staff? In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A 2nd floor Repair room X floor tiles 250 S.F. x Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Atlantic Carting G.R.O.W.S. 190713 4

City, State Disposal Date City, State on completion

Wayne, NJ Completed by

Stan Stankovic

Title G. Manager

Signature Stan Stankovic Date 05/25/18

Morrisville, PA

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PAID	)	NOTII	Pursuan	t to NJAC	BESTOS A 8:60 and	12:12	0)			MAY 2	9_201	8/			
Date of Notification (1) 05/29/18					Owner/Op						16	/	T		
Agencies Notified Type Notification	n				oln Park,	LLC			L	15 D C F		11.17			
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Name of Facility Where Abatement is Taki Vacated Residence	ing Place	(3)					Туре	e of Fac	cility (4)	ASBEST	os cc	TM	ROL	. &	
Street Address								Schoo	L(K-12)	LIC	CENSI	NG			
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City (5)								etc.)							(3.5%)
Lincoln Park							1,3	are Fee	et.	# of Floor	S		ildg. <i>A</i> 50+	Age .	
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Morris			(STATE	USE ONLY	)	_		cant	1, 1101	being del	TOTISTIE	4)			
Name of Monitoring Firm Hired by Building	Owner (8	5)	ASCI	M No.	1	Name			t Contra	actor (9)			_		
N/A								k Solu							
Street Address			A			Street	Addre	ess							722
						28 E	Edsall	Drive	)						
City, State, Zip Code								Zip Cod							
							200	NJ 07	461						
Project Manager for Monitoring Firm			Telepho	ne No.	1 2		none N	lo. 1650		Licer 013	nse No.				
Start Date (10)	Schedu	led Co	mpletion	Date (11)		97575	37172	HA Moi	nitor	013	09				
05/30/18	06/04					EMS			illoi						
Occupancy Status During Abatement (Che	ck Only O	ne)			5	Street	Addre	ss		7 1 1 X					
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor	Period of	Abater	ment			1056	Ste	Iton R	oad						
Abatement Performed Outside of Non Other – Describe:	mal Facilit	y Hour	s					ip Cod							
					_	Pisc	ataw	ay, N.	J 0885	54					
Cope of Work (Check All That Apply)	_					_	_								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	×	Renova Demoli	ation			×	Fu	II Conta	ainment	with Negat	tive Pre	ssui	re		
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TO BE ABATED		aintena stodial		(i.e.	thermal sy	stems	s insula	ation,	<b>'</b>	(Specify		Re	מ	Enc	g.
In Facility (13)		(12)			surfacin other mis					SF or LF)	)	Remova	Repair	apsı	Enclosure
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ame of Registered Waste Hauler		11 800	JDEP W	100 CO. 100 CO	Cubic Ya			Name	e of Re	gistered La	ndfill				
tlantic Carting			lauler ID 90713	NO.	of Waste 10			G.F	R.O.W	.S.					
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Vayne, NJ					on com		on	5.00	risville	e, PA					
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Stan Stankovic	G. N	lanag	er			5	tan S	Stanke	rvic		05/2	29/1	8		

#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 07 18 18 PERTH AMBOY BOARD OF EDUCATION Agencies Notified Type Notification Street Address ASBESTOS CONTROL **⊠** EPA ✓ Initial ... 178 BARRACKS STREET LICENSING **⊠** DEP ☐ Amended City, State, Zip Code □ DCA (NJAC 5:16) Amendment # ☑ DHSS PERTH AMBOY, NJ 08861 Emergency (including ☐ DCA justification) Name of Contact Telephone Number (NJAC 5:23-8) ☐ Cancellation Derek J. Jess 732-376-6200 F. V a FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Perth Amboy High School School (K-12) Street Address Subchapter 8 (Other than K-12) Other (i.e., private & commercial buildings, 300 Eagle Avenue homes, etc.) City (5) Square Feet # of Floors Bldg. Age Perth Amboy, NJ 08861 300,000 3 1950 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Middlesex High School Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) AHERA Consultants, Inc. 00057 APS Contracting, Inc. Street Address Street Address PO Box 385 155-161 Pennsylvania Avenue City, State, Zip Code City, State, Zip Code Oceanville, NJ 08231 Paterson, NJ 07503 Project Manager for Monitoring Firm. Telephone No. Telephone No. License No. ..... John Smoyer 609-652-1833 973-754-1980 01-287 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor . .08 / \_ 06 \_ / \_ 18 08 / 30 / 18 APS Contracting, Inc. Occupancy Status During Abatement (Check only one) Street Address □ Facility Closed/Vacated During Entire Period of Abatement 155-161 Pennsylvania Avenue Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code .. Time of Abatement: \_\_\_\_AM-\_\_ PM/ Paterson, NJ 07503 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure $\square \ge 3$ sf or > 3 If ☐ Mini-Enclosure ≥160 sf or ≥260 lf ☐ Demolition ☐ Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure 1s Location Normally Abatement Type Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Repair Enclosure Amount Remova Encapsulate - Maintenance/ TO BE ABATED (i.e., thermal systems insulation, surfacing, Custodial Staff? (Specify IN Facility VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Throughout the Building Elevation $\boxtimes$ Caulking Material All Windows 2,000 SF X П П П П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill APS Contractors, Inc. Hauler ID No. Waste Grows Landfill 21259 5 Yards City, State Disposal Date City, State Paterson, New Jersey 08/25/18 Morrisville, PA 19067 Completed By (Print or Type) Title .... Signature Date Svetozar Savreski ir i President

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



EDS18-056-3

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

Check #3976

Date of Notification (1) 07/18/2018					of Building		Operato	r (2)				E (	7 [		1	
	e Notification			Street A	Address Vest Clir		e.						1 ′	3	วก	10
EPA DEP DOL	Amended Amendment	#			ate, Zip C enfield, N		21					لية لي. ـــــــــــــــــــــــــــــــــــ		- 1/		10
X DOH	Emergency ( justification) Cancellation	including	3	Name o	of Contact					Te	lephone'i	Numbe	TOS ICE	CO	NTI	ROL
					ILITY INF		ION	-		20	1.251.	17.07	********		- truescul	distances to the
Name of Facility Where Abate Franklin Elementary Sci		g Place (	(3)					Тур	e of Facility ( School (K-1	3075						
Street Address 2 NORTH FRANKLIN A	VENUE							×	Subchapter Other (i.e. petc.)				uildin	gs, h	ome	s,
City (5) Bergenfield, NJ 07621						311 - 5111 33		- 115	are Feet 000+	# o	f Floors		Bldg 50+	ı. Ag	е	
County (6) Bergen					Code (7) USE ONLY	)		Cur	rent Use (Pri	or if be	ing demo	lished)				
Name of Monitoring Firm Hired Westchester Environtme		Owner (8	)	ASCN 0012					patement Cor p Inc.	ntractor	(9)					
Street Address 1248 WRIGHTS LANE	WEST CHE	STER					Street 140		ess burg Turn	pike						
City, State, Zip Code PENNSYLVANIA 19380	)								Zip Code gdale, NJ (	7403						
Project Manager for Monitoring Matthew Abraham	g Firm			Telepho 610-43	ne No. 31-7545		Telepi 210-		No. 9725		License 01084	2000 Million Add			·)	
Start Date (10) 07/21/2018		Schedu 07/23/		npletion	Date (11)				SHA Monitor p Inc.							
Occupancy Status During Abar	tement (Check	Only O	ne)				Street									
Facility Closed/Vacated D Abatement Performed Out	Ouring Entire F Itside of Norm	eriod of al Facilit	Abaten y Hours	nent			City, S	State,	burg Turn Zip Code							
Other – Describe:	t Amelya					_	Bloo	ming	gdale, NJ 0	7403						
Scope of Work (Check All That ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	( Арріу)	Construction of the last of th	Renova Demolit				×	V G	ull Containme lini-Enclosure lovebag Proc on-Exempted	e edure	Š			lure		
			Locati											atem Type		
Location of Asbestos-Containing Mater TO BE ABATED In Facility (13)	rial (ACM)	Use Ma Cus	Normal ed Sole aintenar todial S (12)	ly by nce/ staff?		tos Cont thermal surfac		Materia s insu T, or		(8	mount Specify For LF)	Kemovai		Ť	Encansulate	Enclosure
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CK 105			Α			Pipe	Insula	ition		1	2LF	X	-		+	
															1	
Name of Registered Waste Har	uler		N	JDEP W	/aste	Cubic	Yards		Name of F	Registe	red Land	Ifill				-
GL Group Inc.				auler ID 033034		of Was			Minerva	Ente		50,000				
City, State Bloomingdale, NJ						TBD	al Date		City, State Waynes	burg,						
Completed by Elena Solakov		Title Presi	ident			S	ignature (	50	Inex St	. N.		Date 07/18	/20	18		

		110		V	78	) (	1	0.0						
Job Car	lce			tate of New N OF ASBE t to NJAC 8	STOS	ABATE			DE	C			W	
Date of Notification (1) 07/03/F8 7/19/18				of Building C Jersey St			r (2)			JUL	2	3 2	018	
Agencies Notified Type Notification			Street A	Address Box 7068					ASB	ESTO	OS C	ON	TRO	L&
K EPA K DEP Amended Amendment	#		2500	ate, Zip Coo Trenton,		3628			US attended to the state of the	West to state	\$-\$-0		- Augustan	Y 035-2450V
Emergency justification)  DCA  Cancellation		1	Name o	of Contact					Telephone	Numb	er			$\neg$
X DCA Cancellation	)			Genco	DNAAT	ON			609-882	-2000	)	W.C.		
Name of Facility Where Abatement is Takin	g Place (	3)	FAC	ILIT INFO	RIVIATI	ION	Туре	of Facility (4	-)					
New Jersey State Police Street Address 1040 River Road			XII. 334X-181				X	Other (i.e. pr	2) 8 (Other than livate & comm		ouildi	ngs,	home	es,
City (5) Ewing Township		iii—					Squa	etc.) are Feet	# of Floors		Blo	ig. A	ge	
County (6) Mercer			County (STATE	Code (7) USE ONLY)				ent Use (Prio ice Buildin	r if being demo gs	olished	)		2,0,00	
Name of Monitoring Firm Hired by Building USA Environmental Management	C. Erick St. Dr. warren at general	)	ASCN 001	M No. 12		1 5 5 5 5		atement Cont d Specialty	ractor (9) Contractor	's				
Street Address 344 West State Street		600 H 10 to 00				Street 2400			nsion Suite	10				
City, State, Zip Code Trenton, NJ 08618								tip Code e, NJ 0887	2					
Project Manager for Monitoring Firm Bill Weisgarber		***************************************	Telepho	ne No. 56-8101		Teleph 732-	one N	0.	Licens 0075			re 1777		
Start Date (10) 07/23/2018	Schedul 08/03/			Date (11)				HA Monitor ental Tacti	cs, Inc.					
Occupancy Status During Abatement (Chec						Street		ss Street						
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:					_	City, St	tate, Z	ip Code , NJ 07747	•					
Scope of Work (Check All That Apply)						Wicke	A COUNTY	, 110 077 17						
≥3 sf or ≥3 if ≥160 sf or ≥260 if		Renova Demolit				L X	Mir Glo	ni-Enclosure ovebag Proce						THE REAL PROPERTY OF THE PERSON NAMED IN COLUMN
Location of	1	Locati Vormal	ly		Des	scription	, ,,,,	n-Exempted	(*) and Non-Fi	nable F		-	ment	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole intenar todial S (12)	nce/	10.000.000.000.000.000	s Conta nermal surfac		laterial insula T, or		Amount (Specify SF or LF)	- Constant	Removal	Repair	Encapsulate	Enclosure
B 0.0	Yes	No	N/A							_		_		
Buildings 1a	-	X	-	O&M p		dure de d docu			10 sqf		-	X	X	
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N			IDED II		o v									
Name of Registered Waste Hauler Freehold Cartage		Н	JDEP W auler ID 5939	No.	Cubic ` of Was 1			Grows L	egistered Land andfill	dfill				
City, State Freehold, NJ				100		al Date /2018	,	City, State Morrisvil	le. PA		77.00			
Completed by Kurt Nale	Title Bran	ch Ma	anager			gnature	1/1/	4/2	lo :	Date 07/0	3718	119	118	Verb

D&S Proj. #: 18-149	~		Notifi (Pursu	State cation of As uant to NJA	best	s Abatement and 12 120)		D-	E C		] [		
Date of Notification (1)	II N		Ø	ner/Operator (2	!)				JUL	23	201	8	1
Agencies Notified Type Notifica  EPA Initial  DEP Amended	41	john duff treet Addre						F	LIC	S CC ENS		OL &	Manual St.
DOL Amendment # ☐ Emergency (including			ne, nj 075	506									
DCA justification Cancellatio	)	john duf						Telepho	ne Numbe	r			
			FAC	ILITY INFORM	IATIO	N							
Name of facility where abatement john duffin	is taking pla	ice (3)					Ty	=	(4) of (K - 12) napter 8 (0		han k	(12)	
Street Address								Other Bldgs.	(Private/0 /Homes, e	omme etc.	ercial	900	
City (5)	Coun	ty (6)			The second	unty Code (7)	5	Square Feet	# of Floo	rs	B	ldg. Aq	ge 
hawthorne		SSAIC			(Sta	ate use only)		Current Use (P	rior if beir	ig den	nolish	ed)	
Name of Monitoring Firm Hired by	Bldg. Owne	er (8)		ASCM No.		Name of Abatement D & S RESTOR							
Street Address					=	Street Address		ON, INC.					_
City, State, Zip Code					_	20 California A City, State, Zip Code	_						
Drainet Manage for Maria is 5						Paterson, NJ 07							
Project Manager for Monitoring Firm	1	Ph	one Numb	er		Telephone Number 973-345-8020			License 0	Numl 1169			_
Start Date (10)	Sched.	Completio	n Date (1	1)		Name of OSHA Mon D & S Restorati		Inc					
07/27/18	08/27					Street Address	,						
Occupancy Status During Abateme Facility closed/vacated during Abatement performed outside	entire perio	d of abater	ment. s-			20 California Av City, State, Zip Code		e				_	
Describe: NORMAL I	IOURS				_	Paterson, NJ 07	503						
Scope of Work (check all that appl $\ge 3$ sf or $\ge 3$ If	y) Renovation	1					Mini	Containment w -enclosure ebag procedu		press	sure		
≥160 sf or ≥260 lf	Demolition							-Exempted (*)				edure	
Location of asbestos-containing material (acm) to be abated in facility (13)		normally unance/cust		1		sbestos-containing		Amount (Specify S LF)	F or	e m o	Repa	E n c a	E n c
basement 3 locations	100		IN/A	PIPE INSU	LAT	ION	_			e e	i F	р	
BASEMENT storage Rm. 2 loc.		X		PIPE INSU				61ft 91ft			H	H	#
											H	旹	計
												3	
Registered Waste Hauler	NJDE	P Hauler II	D#   C	ubic Yards of V	Vaste	Name of Registered	Lan	dfill					
D & S RESTORATION, INC.	1350	06	1	yd.		TULLYTOWN,			COVER	Y			
City, State PATERSON, NJ 07503			Disposal D 07/30/13			City, State TULLYTOWN,	РА						
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESIDE	ENT		Signature		1			Date 07/16	/2018	3		
ASB-41	Do not use	this form f	or asbesto	s licensure ex	empte	d activities.			1				

ASSESTOS CONTROL & ASSESTOS CONTROL & Bender Address   ASSESTOS CONTROL & BENDER ADDRESS CONTROL & BEN	D&S Proj. #: 18-146			(Pur		antito (WA)	besto C 8 60	s Abatement 3 and 2:120)				<b>I</b> <u>V</u>			
DOL   Cancellation   Deciding   Description   Deciding   Description   Deciding   Description   Deciding   Description   Deciding   Description   Description of abbesion-containing meteral (acm) by maintenance/custodial	Agencies Notified Type Notifical	ion	Street Add	ress		er/Operator (2	)	9					ROL	3	
Name of facility where abatement is taking place (3)   Street Address   Street Address   Street Address   Street Address   Street Address   Street Address   Square Feet   # of Floors   Bigg. Age   Current Use (Prior if being demolished)	DOL Emergency (including justification)		perth a	mboy, 08 ontact		51				Telephone	e Numbe	er			
Name of facility where abatement is taking place (3)   Street Address   Street Address   Street Address   Street Address   Street Address   Street Address   Square Feet   # of Floors   Bigg. Age   Current Use (Prior if being demolished)				FA	CII	LITY INFORM	ATION	ı							
City (5)		s taking pl	ace (3)							School Subcha Other (I Bldgs./I	(K - 12 apter 8 ( Private/ Homes,	Other to Comme etc.	ercial	100.	ge ge
Name of Monitoring Firm Hired by Bidg. Owner (8)  Street Address  City, State, Zip Code  Project Manager for Monitoring Firm  Phone Number  Project Manager for Monitoring Firm  Phone Number  Project Manager for Monitoring Firm  Phone Number  O7/26/18  O8/10/18  O8/1								57 30 30 30	_			construct			
Street Address   Street Address   20 California Ave.   City, State, Zip Code   Paterson, NJ 07503   Telephone Number   City, State, Zip Code   Paterson, NJ 07503   Telephone Number   Start Date (10)   Sched. Completion Date (11)   O7/26/18   O8/10/18						ASCM No.									
Project Manager for Monitoring Firm								Street Address 20 California A	ve.						
Sched. Completion Date (11)  07/26/18  08/10/18  Occupancy Status During Abatement (Check only one)  Facility closed/vacated during entire period of abatement.  Abatement performed outside of normal facility hours- Describe:  Other-Describe: NORMAL HOURS  Scope of Work (check all that apply)  32 sf or ≥2 lf Renovation  Location of asbestos-containing material (acm) to be abated in facility (13)  basement (ABOVE ceiling)  basement crawl space  NoBEP Hauler   D# S RESTORATION, INC.   13506   Disposal Date DGDAN JOLDZIC  Registered Waste Hauler  DAS RESIDENT  D & S Restoration, Inc.  Street Address 20 California Avenue  City, State  Paterson, NJ 07503  Description of asbestos-containing material (ACM)  Paterson, NJ 07503  Description of asbes	Project Manager for Monitoring Firm		F	hone Num	nbe	er	_	Telephone Number		3	ı				
Orcupancy Status During Abatement (Check only one)    Facility closed/vacated during entire period of abatement.   Abatement performed outside of normal facility hours-Describe:   NORMAL HOURS     Scope of Work (check all that apply)   Full Containment w/negative pressure   Paterson, NJ 07503     Scope of Work (check all that apply)   Full Containment w/negative pressure   Paterson, NJ 07503     Scope of Work (check all that apply)   Full Containment w/negative pressure   Mini-enclosure   Glovebag procedure     Location of asbestos-containing material (acm) to be abated in facility (13)   Ves   No   N/A     Description of asbestos-containing material (acm) to be abated in facility (13)   PIPE INSULATION   150 l ft   More   PIPE INSULATION   More   PIPE INSULAT	Start Date (10)	Sched	l. Comple	tion Date (	11	)	_			Inc					
Facility closed/vacated during entire period of abatement.   Date period of abatement.   Date period of normal facility hours-   Describle:   Other-Describe:   NORMAL HOURS      Scope of Work (check all that apply)   Full Containment w/negative pressure   Mini-enclosure   Glovebag procedure   Non-Exempted (*) and Non-friable proced	07/26/18	08/10	0/18						1011,	, IIIC.	-				
Same of the part of the par	☐ Facility closed/vacated during ☐ Abatement performed outside Describe:	entire peri of normal	od of aba					City, State, Zip Code	9		P.				
Location of asbestos-containing material (acm) to be abated in facility (13)  basement  basement (ABOVE ceiling)  basement crawl space    Description of asbestos-containing material (ACM)	≥3 sf or ≥3 lf	Renovation		14					Min Glo	ii-enclosure vebag procedure	е			edure	
basement (ABOVE ceiling)    Disposal Date PATERSON, NJ 07503   Disposal Date Date PATERSON, NJ 07503   Disposal Date Date PATERSON, NJ 07503   Disposal Date	asbestos-containing material (acm) to be	by mainte staff(12)	enance/cu	stodial	ely -			sbestos-containing		Amount (Specify SI		R e m o v	Rep	E n c a	Е
basement crawl space															
Registered Waste Hauler D & S RESTORATION, INC.    NJDEP Hauler ID#   Cubic Yards of Waste   Name of Registered Landfill   TULLYTOWN, RESOURCE RECOVERY    City, State   Disposal Date   O7/27/18   TULLYTOWN, PA    Completed by (Print or Type)   Title   PRESIDENT   Signature   Signature   O7/16/2018			LX	4	4						-		닏	닏	쀼
D & S RESTORATION, INC.         13506         2 yds.         TULLYTOWN, RESOURCE RECOVERY           City, State         Disposal Date         City, State           PATERSON, NJ 07503         07/27/18         TULLYTOWN, PA           Completed by (Print or Type)         Title         Signature           BOGDAN JOLDZIC         PRESIDENT         Signature	basement crawl space		LX	4	4	PIPE INSU	LATI	ON	-	40 I ft		12	牌	H	H
D & S RESTORATION, INC.         13506         2 yds.         TULLYTOWN, RESOURCE RECOVERY           City, State         Disposal Date         City, State           PATERSON, NJ 07503         07/27/18         TULLYTOWN, PA           Completed by (Print or Type)         Title         Signature           BOGDAN JOLDZIC         PRESIDENT         Signature				-	╣							붐	H	片	쓔
PATERSON, NJ 07503         07/27/18         TULLYTOWN, PA           Completed by (Print or Type)         Title         Signature           BOGDAN JOLDZIC         PRESIDENT         07/16/2018					2	yds.	Vaste	TULLYTOWN			COVE	RY			
Completed by (Print or Type)         Title         Signature         Date           BOGDAN JOLDZIC         PRESIDENT         07/16/2018				- The state of the					i, P <i>A</i>	A					
* Do not use this form for scheetes licensure exempted activities	BOGDAN JOLDZIC	PRESID										/2018			

D&S Proj. #: 18-144    Date of Notification (1)   0   7   / 1   6   / 1   8     Agencies Notified	ion	tim haas Street Addre	(Pursuilding Own	enOperator (2)	pesto 2 8:60	S Abatement (20)		ESTOS ( LIGEN	3 2	018		And the second s
			FAC	ILITY INFORM	ATION	I						
Name of facility where abatement is tim haas  Street Address	s taking p	ace (3)					Subcha Other ( Bldgs./	I (K - 12) apter 8 (C Private/C Homes, e	omme tc.	rcial	-12) dg. A	
City (5)	Cou	nty (6)			Cou	nty Code (7)	Square Feet	# of Floor	S	DI	ug. A	ge
						te use only)	Current Use (Pr	ior if bein	g dem	olishe	ed)	
newton  Name of Monitoring Firm Hired by	2001719.0	sex		ACCMAL		Name of Abstances (	\(0)					
rune or workonkoning i mirrimed by i	Jiag. Own	ei (0)	- 1	ASCM No.		Name of Abatement C						
Street Address					-	D & S RESTORA Street Address	TION, INC.					
						20 California Av	e.					
City, State, Zip Code						City, State, Zip Code						
Defeated to the second						Paterson, NJ 075	503					
Project Manager for Monitoring Firm		Ph	one Numb	er		Telephone Number 973-345-8020		License 0	Numb 1169	er		
Start Date (10)	Sched	d. Completio	on Date (11	)		Name of OSHA Monit						
07/18/18	08/1	718				D & S Restoration	on, Inc.					
Occupancy Status During Abatemen	Mineralinappen	THE RESIDENCE OF THE PARTY OF T				20 California Ave	enile					
Facility closed/vacated during Abatement performed outside Describe: NORMAL H	of normal				_	City, State, Zip Code Paterson, NJ 075						
Scope of Work (check all that apply  ≥ 3 sf or >3 lf  ≥160 sf or ≥260 lf						□ M ⊠ G	ull Containment w. fini-enclosure flovebag procedur flon-Exempted (*) :	e			edure	
Location of asbestos-containing material (acm) to be		n normally usenance/cust				sbestos-containing	Amount (Specify S	For	R e m o	Repa	E n c a	E n c
abated in facility (13)	Yes	No	N/A				LF)		v e	i	p	L
basement		$\square X$		PIPE INSU	LATI	ON	62 l ft		×			
basement				bare heating	g pipes	3	70 l ft		$\boxtimes$			
										뷔	부	쓔
Registered Waste Hauler	INJD	EP Hauler II	]  D#   C	ubic Yards of V	Vaste	Name of Registered I	andfill			Щ	Ц	
D & S RESTORATION, INC.	135	506	2	yds.		TULLYTOWN, F		COVER	Y			
City, State PATERSON, NJ 07503			Disposal D 07/19/13			City, State TULLYTOWN, I	PA					
Completed by (Print or Type)	Title			Signature		I TODDITOWN,		Date			_	
BOGDAN JOLDZIC	PRESID	ENT						07/16/	2018			

D&S Proj. #: 18-150  Date of Notification (1)    0     7   / 1   8   / 1   1   8    Agencies Notified   Type Notification	ation		(Purs Building Ow	ication of A	<b>C</b>  8:6	bs Abatement 0 and 42 20)		CE JUL 23	20 DNT	18	8	
EPA Initial		Street Ad	idress				(NO ASSESSMENT OF THE PARTY OF	LIVEIN	IIVO	o waterway	nis <b>um</b> arron	
Amendment	#:	City, Stat	e, Zip Code									
DOL Emergency (including	111		ridge, nj	07075								
justification	1)	Name of 0					Telephor	ne Number				
Cancellatio	on	craig	adelhardt									
Name of facility where abatement	is taking n	Jaca (3)	FAC	CILITY INFORM	MATIO	N .	T= '.= '	2.48				
craig adelhardt Street Address	is taking p	nace (3)					Subch	(4) of (K - 12) napter 8 (O (Private/Co /Homes, et	mme		(-12)	
City (5)	I Cou	1051 (C)						# of Floor		В	dg. A	ge
City (5)	Col	unty (6)				unty Code (7) ate use only)	Current Use (P	rior if heing	den		ed)	
wood ridge Name of Monitoring Firm Hired by		rgen						nor ii being	y ucii	1011311		
Name of Monitoring Film Hiled by	ыад. Owr	ier (8)		ASCM No.		Name of Abatemen						
Street Address				-		D & S RESTOR	CATION, INC.					
City, State, Zip Code						20 California A						
ony, otato, zip oode						City, State, Zip Code Paterson, NJ 0						
Project Manager for Monitoring Firm	n	1	Phone Numb	per		Telephone Number		License I		er		
Start Date (40)	10.1			233-34		973-345-8020 Name of OSHA Mor		01	169			
Start Date (10)	100000000		etion Date (1	1)		D & S Restorat						
07/30/18 Occupancy Status During Abateme		7/18 only one)				Street Address						
Facility closed/vacated during Abatement performed outside Describe:	entire per	iod of aba				20 California A City, State, Zip Code						
Other-Describe: NORMAL I					-	Paterson, NJ 07	7503					
Scope of Work (check all that appl	Renovatio Demolitio	n					Full Containment w Mini-enclosure Glovebag procedur Non-Exempted (*)	re			edure	
Location of asbestos-containing	by mainte	n normally enance/cu	y used solely ustodial		on of a	sbestos-containing	Amount		R e	R e	E n	Е
material (acm) to be abated in facility (13)	staff(12) Yes	No	N/A	material (		sbestos-containing	(Specify S LF)	F or	m o v e	p a i	c a p	c L
BASEMENT				PIPE INSU			10 l ft		Š			
BASEMENT		LX		bare heating	g pipe:	S	30 l ft				X	口
										님	片	ዙ
									ㅐ	ㅐ	片	믐
Registered Waste Hauler D & S RESTORATION, INC.	NJDI 135	EP Hauler 506	1	ubic Yards of V yd.	Vaste	THE RESERVE AND ADDRESS OF THE PARTY OF THE	Landfill RESOURCE RE	COVERY	(			
City, State PATERSON, NJ 07503			Disposal D 07/31/1			City, State TULLYTOWN,	PA					
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESID	ENT		Signature		1		Date 07/18/2	2018			
ASR_//1	Do not us	e this form	n for acheeto	e licaneura ave	amnton	Lactivities		-				

night	1		NOTI	(P	ursuan	to NJA	C 8	:60 and 5:10	ENIEN I		M					
Date of Notification (1)					Name	of Building	a Ow	ner/Operator (	2)		- L-J	Jl	H	23	-20	118
	19 / _	18			7000000		10/200	an Renewal								
Agencies Notified	Type Notifica	ation			Street	Address					A	SBES	10	SC	INC	HOL
	☑ Initial				2 B	road Stre	eet. S	Suite 400				TOTAL CO.	LIC	ENS	ING	
	☐ Amended					State, Zip C	50									-
⊠ DOH	Amendme	_				omfield,		7003								
DCA (NJAC 5:23-8)	☐ Emergeno justification	cy (inc	luding			of Contac				Teler	hone N	ımher				_
	☐ Cancellati					rren Spra	-				8-670-5					
								RMATION								
Name of Facility Where Ab	atement is T	aking	Place	(3)		JILIT I III		WILL TOTAL	Type of Facility	(4)						-
Commercial				\- <i>/</i>				6	School (K-12							- 1
Street Address		-							Subchapter	g (Othe						- 1
1200 Randolph Road	l- Buildina	7							Other (i.e., p homes, etc.)		nd comr	nercia	l bui	ilding	s,	
City (5)		-							Square Feet		Floors		Blo	lg. Ag	16	$\dashv$
Plainfield									oquaio i cot	" "	1 10010		Dic	9.7%	,-	- 1
County (6)					Cour	tv Code (7	YSTA	TE USE ONLY)	Current Use (Pr	ior if be	ing dem	olishe	4)			$\dashv$
Union						.,	ησ	in our oneig	ouron ooc (r r	101 11 00	ing dom	Oliditio	-,			
Name of Monitoring Firm H	lired by Build	ling O	wner (	8)	ASCM	No.	Nar	ne of Abateme	ent Contractor (9)				_	-		-
Bio Terra Solutions		3		-,		10.70	100		NAGEMENT L							
Street Address								eet Address	IVIOLINEITI E							-
P.O. Box 1224								7 Outwater I	ano							
City, State, Zip Code							_	, State, Zip Co			-					
Union, NJ							1	arfield, NJ								
Project Manager for Monito	oring Firm			Tel	ephone	No.	1	ephone No.	700000000000000000000000000000000000000	Lice	nse No.					
Rick Eustaquio				1	73-494		1	73-928-4888			188					
Start Date (10)	S	chedu	iled Co	omple	etion Da	te (11)	Nar	ne of OSHA M	lonitor							$\dashv$
07 /30 / _					1_/_		A	LL PRO MA	NAGEMENT L	LC						
Occupancy Status During	Abatement (C	Check	only o	ne)			Stre	eet Address		-		-		112541111		$\neg$
□ Facility Closed/Vacated							2	7 Outwater I	Lane							
Abatement Performed C	Outside of No	rmal F	acility	Hou	rs - Des	cribe	City	, State, Zip Co	ode							
Time of Abatement: × Saturday	AM	PM	/	_PM		AM	G	arfield, NJ	07026							- 1
Scope of Work (Check all t	hat apply)						1	X Wrap and						_		$\dashv$
☐ >3 sf or >3 lf		6	⊠ Da		lion				ainment with Neg	gative P	ressure					
≥160 sf or ≥260 lf		100	Rei     Dei     Dei     Dei     Rei     Dei     Rei     Rei					<ul><li>☐ Mini-Enc</li><li>☑ Glovebag</li></ul>								
									mpted (*) and No	n-Friab	le Proce	edure				
	_			Loca									Aba	ateme	ent Ty	/pe
Location o Asbestos-Containing M		,			lely by	Acha	ctoc /	Description o Containing Ma		۸	mount	Γ	Z,	Re	щ	四
TO BE ABAT		'			ance/			mal systems i			Specify		Removal	Repair	cap	Cio I
IN Facility			Cust	odial (12	Staff?		S	urfacing, VAT,	or		or LF)	1	val	7	Encapsulate	Enclosure
(13)		t	Yes	No	T		oth	ner miscellane	ous)						ate	(0
Basement						Pipe Ins	sulat	tion- Wrap a	nd Cut	4	00 LF		X	П		П
Basement			$\Box$	П		Elbow I	U. a.a.				Elbows		X			
		-	_	_	-	LIDOW	ilioui	ation		10	LIDOWS					
								are use - see						Ш	Ц	Ш
N																
Name of Registered Waste					NJDEP I Hauler II		Cub	oic Yards of	Name of Regis Minerva Ente	stered L	andfill	VS I av	ndf:	11/		
ATC/ Century Waste	, LLC					10/32797	1350775	ste s Needed	Fairless Land		, ORUM	. O Lai	rull	111		
City, State								posal Date	City, State				1000			
Shirley, NY/ Elizabet	h, NJ						T	BD	Waynesbu	ırg, Ol	l/ Morr	isville	e, P	Α		
Completed By (Print or Typ	oe)	Title					-	Signature	·	-		Date				
Allen Monchik	V 197	Pr	oiect	Mar	nager			200	711 /:	/						

Allen Monchik

7/19/18

**Project Manager** 

			P	NOTFICAT	ION OF AS	IEW JERSEY BESTOS ABATEMI C 8:60-7 AND 12:12	10-7 (he	14	3/	50	<u> </u>	
Date of Notification	(1) / <u>18</u>					Building Owner / O RIVER ASSOCIATE		In	EC	E [		
Agencies Notified	Type of N	otific	ation			TSIDE DRIVE					The same of the sa	
☐ EPA	<b>I</b>	Initia				e, Zip Code		11711		1.00	000000000000000000000000000000000000000	111
☐ DEP			ended			TER, NJ 07020			JUL	23	2018	L
☑ DOH			endment #		Name of (				ne Numb	er		i
☑ DOL			ergency w. cellation	/ justification	DANNY D	AIBES		201-840-	MATERIAL PROPERTY AND A STATE OF THE PARTY O	someton white	eminutus discher	
	-	Cali	Cellation	E	ACILITY IN	FORMATION		4	ASBEST	OS CC CENSI		1 &
					ACILITI IN	ORWATION		CT-COLORADA AND AND AND AND AND AND AND AND AND	fuel 	OCIACI	17 CT	THE PERSON NAMED IN
Name of Facility Wh 115 RIVER ROAD	ere Abaten	ent i	s Taking F	Place (3)		Type of Facility (4	5.0					
Street Address 115 RIVER ROAD				Million Aberrania (Internegación de America)		☐ Subcha ☑ Other (	apter 8 (Other I.e., private &					
City (5)	County (6	1		County Code	(7)	Square Feet	homes, etc.)	-	Building	~ ^ ~ ~		
EDGEWATER	Bergen	,		County Code	(1)	35,000		3	Dullullig	g Age		
						Current Use (Prior			t	40	+	
						OFFICE .	J	•				
Name of Monitoring	Firm Hired	by B	lldg. Owne	er (8)	ASCM NO							
AET Street Address						NORTHSTAR CON	TRACTING G	ROUP, IN	C.			
907 Doolittle Drive						Street Address						
City, State, Zip Code	9					32 Williams Parkwa	av					
Bridgewater, NJ 088	07					City, State, Zip Co						
Project Mngr. For M	onitoring F	irm		Telephone Nu	mber							
Eric Houseknecth Sheduled Start Date	(40)	Icah	ad Camal	908-218-1108 letetion Date (1	41	East Hanover, NJ (		11 ( )	N			
07/ 30	/ 18	Sch	10	31	18	Telephone Number	er .	License I	vumber			
//	/		/	/		973-884-8682			0	0860		
Occupancy Status D						Name of OSHA Mo	OTTOGRA AND THE CO					
		ted D	uring Ent	ire Period of		NORTHSTAR CON	ITRACTING G	ROUP, IN	C.			
Abatemer Abatemer	77.7	d Ou	teida of N	ormal Facility		Street Address						
Hours - D		u Ou	iside of N	Offilal Facility		32 Williams Parkwa	av					
	escribe:	7:00	AM - 3:30F	PM		City, State, Zip Co						
			N-FRI			East Hanover, NJ 0	7936					
Scope of Work (Che	ck All That	Appl	у)									
☐ Demolitio ☐ ≥3sf or ≥3 ☑ ≥160 sf o	3If		V	Renovation		Full Containment Mini - Enclosure Glovebag Procedu		Pressure	£			
2100310	1 <u>2</u> 200 II					Non-Exempted (*)		ble Proce	dure			
Location of			ls		Descript		T	Abateme	nt Type	100		
Asbestos Cont	aining		ocation	As	sbestos - C	•		R	_	E	E	
TO BE ABAT	ΓED		ormally Used	a	Material ( e., thermal		Amount (Specify	E M	R	N	N	
in Facility		1	Solely			acing, VAT,	SF or LF)		P	A	L	
(13)		b	y Main-	or	other misc	ellaneous)		V	Α	Р	0	
		100	enance/					A	1	S	S	
			ustodial taff (12)					L	R	U	U R	
			NO N/A							+-	- 12	
ROOF			V I	TAR SEALANT		· · · · · · · · · · · · · · · · · · ·	3,200 SF	V			$\vdash$	П
ROOF				COPING TAR			2,300 SF	V				
ROOF				FLASHING			8,000 SF	V				
ROOF				ROOFING			6,000 SF	<b>V</b>				
Name of Registered NORTHSTAR CONT			P, INC	NJDEP Waste Hauler ID No.	Cubic Yards of Waste	Name of Registere FAIRLESS LANDF						
City, State					Disposal	City. State						
EAST HANOVER, N.	J 07936			s*	Date	MORRISVILLE, PA	10967					
Complete the Control								0		1=		
Completed by (Print	or Type)			Title		Signatu	ire	1/-	1	Date		
Steve Stiles				Project Manage	er	DA	Ella,	XIII	<del>/</del>	-	07/20/1	18
ASB-41		-	allier and the		ALCOHOLD STATE		1	The state of the s			0/	



## State of New Jersey FICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) (\*# 523

Date of Notification (1)			Y		N	ame	of Duildin	~ 0	unariOnaraha	- /2	1	-	1 \	- 71		ainva ex	v. >>					
07 / 20 / 18						Name of Building Owner/Operator (2)								\	e /	a 1	7	ח ר				
						Verizon							In		E 1	G		] [				
Agencies Notified Type Notification						Street Address							1	1		-			-			
⊠ EPA ⊠ DOLWD	☐ Initial ☐ Amended						1 Verizon Way															
☑ DOLWD			Ci	City, State, Zip Code								11	J	UL	23	20	18					
□ DCA		Amendment # Basking Ridge, NJ 07920										1										
(NJAC 5:23-8)		justification) Name of Contact											ohq	ne N	Vumb	er-o		CONTRACTOR OF	ROL &			
	☐ Cancellation Brian Kingsbury												01-8	02-	5112	210	SUC	NU NG	OLA			
					_				M			Į.	Halleton	-	-	- Contract	toleron-	turnestal	**************************************			
FACILITY INFORMATION  Name of Facility Where Abatement is Taking Place (3)  Type of Facility (4)																						
Verizon	ibatomont is			- 10																		
Street Address		☐ School (K-12) ☐ Subchapter 8 (Other than K-12)																				
2700 Secaucus Roa		Other (i.e., private and commercial buildings.																				
homes, et																						
	7047										Square Feet			ors		Bldg. Age						
North Bergen, NJ 07047										1							50					
							ity Code (7	7)(ST/	ATE USE ONLY	)   (	Current Use (Prio	nolish	hed)									
Hudson																						
Name of Monitoring Firm Hired by Building Owner (8) ASCM No.									Name of Abatement Contractor (9)													
USA Environmenta			JVN Restoration Inc																			
Street Address									Street Address													
8436 Enterprise Av	47 Foster Road																					
City, State, Zip Code	City, State, Zip Code																					
Philadelphia, PA 19	Staten Island NY 10309																					
Project Manager for Moni	Telephone No. License No.																					
Project Manager for Monitoring Firm Telephone No.  Mark Jenkins 215-365-5810								718-605-6256 00774								*						
Start Date (10) Scheduled Completion Date (11)									Name of OSHA Monitor													
08/06/18									Testor Tech													
	Street Address																					
Occupancy Status During Abatement (Check only one)  Facility Closed/Vacated During Entire Period of Abatement									10 59 Jackson Avenue													
Abatement Performed																						
Abatement Performed Outside of Normal Facility Hours - Describe     Time of Abatement:AMPM/5:00PM-1:30AM									City, State, Zip Code													
LIC NY 11101																						
Scope of Work (Check all	that apply)								⊠ Eull Co	nta	inmont with None	tion I	D									
≥3 sf or ≥3 If			⊠ Re	nova	tion				☐ Mini-En		inment with Nega	tive	Pres	sure	9							
≥160 sf or ≥260 lf			☐ De	molit	ion				⊠ Gloveba	ag l	Procedure											
☐ Non-Exempted (*) and Non-Friable Procedure																						
Location	ation				_							Abatement Type										
Asbestos-Containing I	0	Normally Used Solely by					stos	Description Containing M				۸ma			R	Z [ [ [						
TO BE ABA	_		inten			(i.e	., the	ermal systems	s in	sulation,	Amount (Specify			Removal	Repair	ıcar	Co					
IN Facilit (13)		Custodial Staff? (12)					5	surfacing, VA	T, c	or .	S	For	LÉ)		val	-	Encapsulate	Enclosure				
(13)	Yes	No	<u> </u>	/A	İ	ot	ner miscellan	ner miscellaneous)								ate	(0)					
Ground Floor Boiler F					10000000	Fitting	Insu	lation			60 LF				П							
Ground Floor Boiler Room							Collar Insulation					2 SF					П					
Ground Floor Hallways			$\boxtimes$		1	]	Floor T	Tile a	and Mastic		530 SI						П	П				
						]						000 01										
Name of Registered Waste Hauler							Vaste	Cut	oic Yards of	$\neg$	Name of Registered Landfill											
Newark Carting Ha						er ID	No.	Wa	Vaste GROWS													
City, State						-56	6		5 posal Date	-												
Hackettstown, NJ									posal Date	City, State	IIo PA											
								U	8/28/2018	Morrisville,P												
									Signature	1//	/// Date											
Ralph Barnhardt Project Manager									MAL	7	Ihm		A	7	0	7	20	ria	3			

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

Date of Notification (1) Name of Building Owner/Operator (2) 7 20 18 Morris School District 1 Agencies Notified Type Notification Street Address **⊠** EPA 31 Hazel Street □ DOLWD ☐ Amended City, State, Zip Code **⊠** DOH Amendment # Morristown, NJ 07960 □ DCA ☐ Emergency (including) Name of Contact Telephone Number ASBESTOS CONTROL & (NJAC 5:23-8) justification) ☐ Cancellation Kevin Knowles **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Morristown High School School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 50 Early Street homes, etc.) City (5) Square Feet # of Floors Bldg. Age Morris 3 50+ County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Morris school Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Aero Environmental Services Controlled Environmental Systems Street Address Street Address 275 Route 10 East, Suite 220-306 1121 N. Bethlehem Pike - Suite 60 City, State, Zip Code City, State, Zip Code Succasunna, NJ 07876 Spring House, PA 19477 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Mike Berta 973 542 7000 215 542 7000 00847 Scheduled Completion Date (11) Start Date (10) Name of OSHA Monitor 8 / 1 / 18 8 / 3 / 18 CES Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 1121 N. Bethlehem Pike - Suite 60 ☐ Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: 7:00AM-7:00PM/\_\_\_\_PM-\_\_ Spring House, PA 19477 ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure Scope of Work (Check all that apply) ☐ >3 sf or >3 lf □ Renovation ≥160 sf or ≥260 lf ☐ Demolition Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Remova Enclosure Encapsulate Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Room 255B M Transite Pipe 10 LF П П M П П П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste Geppert Recycling Western Berks Community Landfill City, State Disposal Date City, State Hatfield, PA Birdsboro, PA 19508 Completed By (Print or Type) Title Signature Date Patricia Visco Office Manager

														Pr	int E		
Ch 1740			ursuant	to NJAC	W Jersey BESTOS AB 8 60 and 12	2:12	0)			E	C			V			
Date of Notification (1) 07/17/18					Owner/Oper ty Technic			I District	LLL		JUL	. 2	3 6	UTO	-		
Agencies Notified Type Notification  EPA Initial	1		Street A		gewood A	ve				ASE	EST	OS (	CON	TROI	-8		
X EPA X Initial Amended Amendmen	nt#		City, State, Zip Code Paramus NJ				LIGENSING										
Emergency justification		Name o	f Contact			Telephone N											
DCA Cancellatio		Tom J		ORMATION		201-3436000											
Name of Facility Where Abatement is Taki Midland Park High School	ng Place (	3)	FACI	ILIIT INF	ORWATION		Туре	of Facility (4)	)								
Street Address								School (K-12 Subchapter 8		than	K-12	)					
250 Prospect st						Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, hon etc.)						hom	es,				
City (5) Midland Park NJ 07432	24			0				re Feet	# of F	loors		В	lldg. A	\ge			
County (6) Bergen			Code (7) USE ONLY	)	-	Current Use (Prior if being demolished) High School											
Name of Monitoring Firm Hired by Building Owner (8) TTI Environmental Inc				И No.		ame of Abatement Contractor (9) DYV ENTERPRISES LLC											
Street Address 1253 N Church St					St	reet	eet Address										
City, State, Zip Code					Ci	ty, S	state, Z	ip Code	25								
Moorestown NJ 08057  Project Manager for Monitoring Firm Telephone No.						Lincoln Park NJ 07035  Telephone No. License No.											
Michael R Stocku				043969	9	73-	3-9426924 01129										
Start Date (10) 8-02-18	npletion Date (11) Name of OSHA Monitor TTI Environmenta																
Occupancy Status During Abatement (Check Only One)				Street Address 1253 N Church S													
Facility Closed/Vacated During Entire Period of Abate Abatement Performed Outside of Normal Facility Hou Other – Describe:				ment													
Scope of Work (Check All That Apply)						/100	restor	WII					-		-		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	premium p	Renova Demolit				×	Mir Glo	Containmenti-Enclosure vebag Proce	dure					e			
Location of	Locati Normal			Dogarin	scription of							Abatement Type					
Asbestos-Containing Material (ACM)  TO BE ARATED  Mail			ly by nce/ Staff?	tos Containi thermal sys surfacing	ontaining Material (ACM) al systems insulation, facing, VAT, or r miscellaneous)			Amount (Specify SF or LF)			Remova	Repair	Encapsulate	Enclosure			
	Yes	No	N/A			Warners .								ate	ei		
Room #34 Room #34			X									X					
			X		Mas	Mastic			400 SF			x					
Name of Registered Waste Hauler OYV Enterprises LLC	Н	JDEP Wauler ID	No.	of Waste 10Yds	iste			Registered Landfill Carting Inc.									
City, State Lincoln Park NJ					Disposal Dis				NJ 07105								
Completed by	Title				Signa	ature	(0)	Λ	.0 01	, 55	Date	e		ACC 100 TO			
Dorian Carpio	Man	ager			O	15	770				94.019.00	17/1	8				