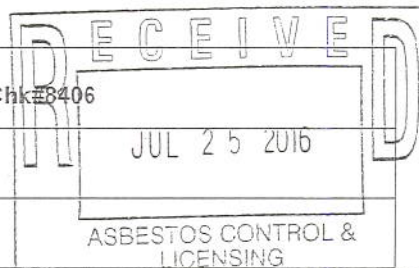


State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1) 7 / 20 / 16		Name of Building Owner/Operator (2) Robert Wood Johnson Job# 1606-5028 Chk# 8406							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	Street Address 24 Hardenberg Street							
		City, State, Zip Code New Brunswick, NJ 08901							
		Name of Contact William Kelly Telephone Number _____							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) RWJ Hospital		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address ONE RWJ Place		Square Feet # of Floors Bldg. Age							
City (5) New Brunswick									
County (6) Middlesex	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Hospital							
Name of Monitoring Firm Hired by Building Owner (8) Omega Environmental		Name of Abatement Contractor (9) AbateTech, Inc.							
Street Address 280 Huyler Street		Street Address 30 Maple Ave. PO Box 25							
City, State, Zip Code S. Hackensack, NJ 07606		City, State, Zip Code Lumberton, NJ 08048							
Project Manager for Monitoring Firm Geiser Fajardo	Telephone No. 201-489-8700	Telephone No. 609-265-2107	License No. 00529						
Start Date (10) 7 / 20 / 16	Scheduled Completion Date (11) 7 / 21 / 16	Name of OSHA Monitor EMSL Analytical							
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM- _____ PM 8PM-5AM		Street Address 200 Route 130 North City, State, Zip Code Cinnaminson, NJ 08077							
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									
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Removal	Repair	Encapsulate			Enclosure			
Radiology Hallway	☐	☒	☐	Ceiling tile	32 SF	☒	☐	☐	☐
Radiology Hallway	☐	☒	☐	Pipe Insulation	30 LF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler AbateTech, Inc.		NJDEP Waste Hauler ID No. 18750	Cubic Yards of Waste 5	Name of Registered Landfill G.R.O.W.S. Landfill					
City, State Lumberton, NJ		Disposal Date 7/21/16		City, State Tullytown, PA					
Completed By (Print or Type) Gwendolyn Trumbetti		Title Operations Coordinator		Signature <i>Gmt</i>			Date 7/20/16		

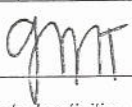


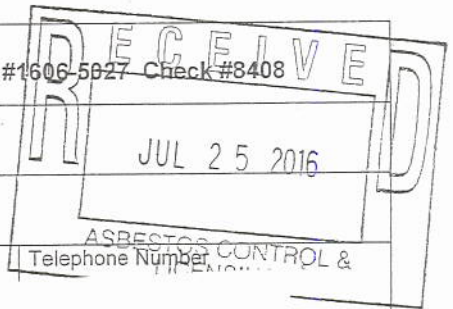
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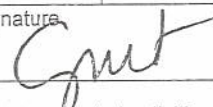
** Do not use this form for asbestos licensure exempted activities.*

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

Date of Notification (1) 7 / 20 / 16		Name of Building Owner/Operator (2) Camden County Technical Schools / Job #1606-5927 Check #8408							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☒ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	Street Address 343 Berlin-Cross Keys Road City, State, Zip Code Sicklerville, NJ Name of Contact Robert Wilkinson							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Camden County Tech School		Type of Facility (4) ☐ School (K-12) ☒ Subchapter 8 (Other than K-12) ☐ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 343 Berlin-Cross Keys Road		Square Feet # of Floors Bldg. Age							
City (5) Sicklerville, NJ									
County (6) Camden	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) School							
Name of Monitoring Firm Hired by Building Owner (8) Health & Safety Services		ASCM No. 117	Name of Abatement Contractor (9) AbateTech, Inc.						
Street Address PO Box 365		Street Address 30 Maple Ave. PO Box 25							
City, State, Zip Code Berlin, NJ 08009		City, State, Zip Code Lumberton, NJ 08048							
Project Manager for Monitoring Firm Jim Proctor		Telephone No. 856-452-1311	Telephone No. 609-265-2107 License No. 00529						
Start Date (10) 8 / 2 / 16	Scheduled Completion Date (11) 8 / 9 / 16	Name of OSHA Monitor EMSL Analytical							
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM- _____ PM/ _____ PM- _____ AM		Street Address 200 Route 130 North City, State, Zip Code Cinnaminson, NJ 08077							
Scope of Work (Check all that apply)									
☒ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition							
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Bathrooms & Closets	☐	☒	☐	Textured paint on ceiling and ductwork	62 SF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler AbateTech, Inc.		NJDEP Waste Hauler ID No. 18750	Cubic Yards of Waste 4	Name of Registered Landfill G.R.O.W.S. Landfill					
City, State Lumberton, NJ		Disposal Date 8/9/16		City, State Tullytown, PA					
Completed By (Print or Type) Gwendolyn Trumbetti		Title Operations Coordinator		Signature 		Date 7/20/16			



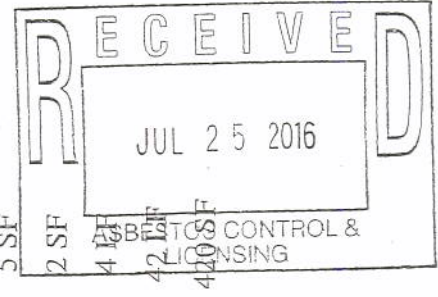
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1) 7 / 20 / 16		Name of Building Owner/Operator (2) Missouri Avenue Energy Center / Job #1607-5034 Check #8407	
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	RECEIVED JUL 25 2016 Street Address 2129 Bacharach Boulevard City, State, Zip Code Atlantic City, NJ 08401 Name of Contact Jerry Decker Telephone Number _____	
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Missouri Avenue Energy Center		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)	
Street Address 2129 Bacharach Boulevard		Square Feet	# of Floors
City (5) Atlantic City, NJ 08401		Bldg. Age	
County (6) Atlantic	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Energy Center	
Name of Monitoring Firm Hired by Building Owner (8) Criterion Laboratories		ASCM No.	Name of Abatement Contractor (9) AbateTech, Inc.
Street Address 3370 Progress Drive Suite J		Street Address 30 Maple Ave. PO Box 25	
City, State, Zip Code Bensalem, PA 19020		City, State, Zip Code Lumberton, NJ 08048	
Project Manager for Monitoring Firm Michael Panepresso		Telephone No. 215-244-1300	License No. 609-265-2107
Start Date (10) 8 / 2 / 16	Scheduled Completion Date (11) 8 / 31 / 16	Name of OSHA Monitor EMSL Analytical	
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____AM-_____PM/_____PM-_____AM		Street Address 200 Route 130 North City, State, Zip Code Cinnaminson, NJ 08077	
Scope of Work (Check all that apply)			
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure	
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)
	Yes	No	
Please see attached	☐	☒	Please see attached
	☐	☐	
	☐	☐	
	☐	☐	
	☐	☐	
Name of Registered Waste Hauler AbateTech, Inc.	NJDEP Waste Hauler ID No. 18750	Cubic Yards of Waste 20	Name of Registered Landfill G.R.O.W.S. Landfill
City, State Lumberton, NJ		Disposal Date 8/31/16	City, State Tullytown, PA
Completed By (Print or Type) Gwendolyn Trumbetti	Title Operations Coordinator	Signature 	Date 7/20/16

SECTION 3.0 ASBESTOS INVENTORY

Missouri Energy Center
2129 Bacharach Blvd.
Atlantic City, NJ

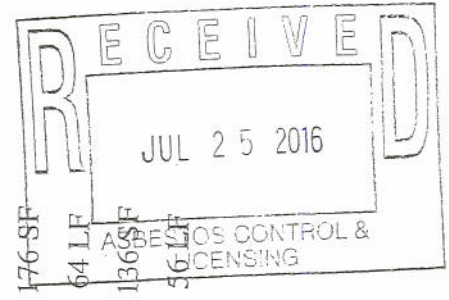
<u>Location</u>	<u>Material</u>	<u>Quantity</u>
Basement		
Main Area	Block Pipe Insulation and Debris	3 Linear Feet (LF)
Main Area	White Wire Insulation	50 LF
Main Area	White Paper Debris in Rack	10 Square Feet (SF)
Main Area	Thin White Wire Insulation	4 LF
Main Area	Thick White/Black Window Insulation	30 SF
Crawl Space Next to Basement	Transite Pipe	540 LF
Crawl Space Next to Basement	Transite Wall Board	80 SF
Crawl Space Next to Basement	White Wire Insulation	160 LF
Crawl Space Under Electrical Room	Transite Wall Board	60 SF
Crawl Space Under Electrical Room	Corrugated Transite Panels	780 SF
Crawl Space Under Electrical Room	Grey/White Debris	5 SF
Crawl Space Under Electrical Room	Block Pipe Insulation and Debris	2 SF
Crawl Space Under Electrical Room	Transite Pipe	4 LF
Crawl Space Under Electrical Room	Black/White Window Caulk	42 LF
Crawl Space Under Electrical Room	Transite Panels	40 SF
Shop		
Parts Room		



SECTION 3.0 ASBESTOS INVENTORY

Missouri Energy Center
2129 Bacharach Blvd.
Atlantic City, NJ

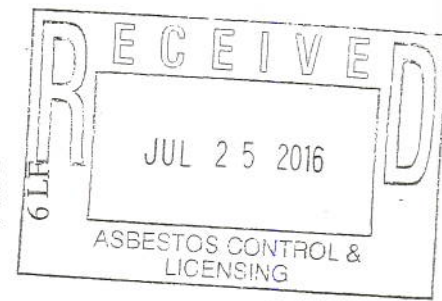
<u>Location</u>	<u>Material</u>	<u>Quantity</u>
1st Floor (Continued)		
Turbine Area	9"x9" Red Floor Tile (FT) w/ Black Mastic	40 SF
480 Volt Room	Black Mastic Associated With (A/W) 9"x9" Green FT	270 SF
Relay Room	Black Mastic A/W 9"x9" Green FT	1200 SF
Old Store Room	9"x9" Dark Brown FT w/ Black Mastic	720 SF
Test Room	9"x9" Green w/ White Swirls FT w/ Black Mastic	360 SF
Test Room	Black Cove Base Material w/ Black Mastic	76 LF
HVAC Room	Block Pipe Insulation	40 LF
2nd Floor		
Room Number 3-8	Black Cove Base Material w/ Black Mastic	88 LF
Room Number 3-8	9"x9" Dark Green w/ Tan Swirls FT (under 12"x12" FT)	244 SF
Room Number 3-8	9"x9" Red FT w/ Black Mastic (under 12"x12" FT)	244 SF
Room Number 3-7	9"x9" Dark Green w/ Tan Swirls FT (under carpet)	176 SF
Room Number 3-7	Black Cove Base Material w/ Black Mastic	64 LF
Room Number 3-6	9"x9" Dark Green w/ Tan Swirls FT	136 SF
Room Number 3-6	Black Cove Base Material w/ Black Mastic	56 LF



SECTION 3.0 ASBESTOS INVENTORY

Missouri Energy Center
2129 Bacharach Blvd.
Atlantic City, NJ

<u>Location</u>	<u>Material</u>	<u>Quantity</u>
2 nd Floor (Continued)		
Men's Room	Grey Window Caulk	3 LF
Hallway	Black Flooring Material	392 SF
Hallway	9"x9" Dark Green w/ Tan Swirls FT	924 SF
Hallway	Black Cove Base Material w/ Black Mastic	438 LF
Roof		
Middle Roof	Grey Flashing Material	360 LF
Stairwells		
Stairwell to Roof	Brown Window Glaze	16 LF
Exterior		
Exterior	White Wall Caulk	70 LF
Exterior	White Window Caulk	6 LF



- Quantities are approximated and to be used for budget purposes only.
- Additional ACM (i.e. pipe insulation) may be found above hard ceilings and behind hard walls.
- No access above plaster ceilings.

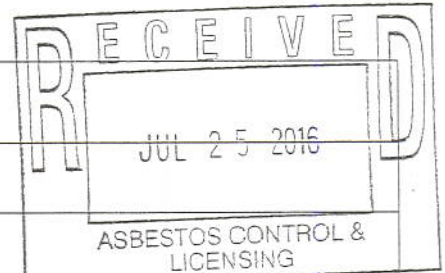
CK # 7245

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

NOTIFICATION

Date of Notification (1) 7/22/16		Name of Building Owner/Operator (2) PSEG		RECEIVED JUL 25 2016					
Agencies Notified		Type Notification				Street Address 4000 HADLEY ROAD			
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA		☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation				City, State, Zip Code SOUTH PLAINFIELD, NJ 07068			
				Name of Contact JOHN DIANGELO		Telephone Number CONTROL &			
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) PSE & G				Type of Facility (4)					
Street Address 155 RAYMOND BLVD				☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
City (5) NEWARK				Square Feet N/A		# of Floors N/A			
County (6) ESSEX				County Code (7) (STATE USE ONLY) _____		Bldg. Age N/A			
Name of Monitoring Firm Hired by Building Owner (8) ENVIRONMENTAL TACTICS				ASCM No. 0045		Name of Abatement Contractor (9) UNIQUE SYSTEMS OF AMERICA			
Street Address 64 BROAD STREET				Street Address 396 WHITEHEAD AVE.					
City, State, Zip Code MATAWAN, NJ 07747				City, State, Zip Code SOUTH RIVER, NJ 08882					
Project Manager for Monitoring Firm TOM GEIGER				Telephone No. 732-290-2217		Telephone No. 732-432-8350			
Start Date (10) 8/8/16				Scheduled Completion Date (11) 12/31/16		License No. 01111			
Occupancy Status During Abatement (Check Only One)				Name of OSHA Monitor UNIQUE SYSTEMS OF AMERICA					
☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: Necessary, asbestos only, outdoors				Street Address 396 WHITEHEAD AVE.					
				City, State, Zip Code SOUTH RIVER, NJ 08882					
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf ☒ Renovation ☐ Demolition									
☒ Cut & Wrap ☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)		Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)		Amount (Specify SF or LF)		Abatement Type	
		Yes	No					N/A	Removal
OUTSIDE			X		ACM WIRE SOCK	1000 LF	X		
Name of Registered Waste Hauler WASTE MANAGEMENT		NJDEP Waste Hauler ID No. 1125		Cubic Yards of Waste APPX 20		Name of Registered Landfill GROWS NORTH			
City, State ELIZABETH, NJ		Disposal Date TBD		City, State MORRISVILLE, PA					
Completed by CAROL RAIMO		Title OFFICE MGR		Signature <i>Carol Raimo</i>		Date 7/22/16			

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



Date of Notification (1) 07 / 21 / 16		Name of Building Owner/Operator (2) Dr. David Matalon / GooGooMa LLC	
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☐ Initial ☒ Amended Amendment # 4 ☐ Emergency (including justification) ☐ Cancellation	Street Address 400 Western Ave	ASBESTOS CONTROL & LICENSING
		City, State, Zip Code Morris Township	
		Name of Contact Lowell DeGrote	
Telephone Number			

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3) Morristown Animal Hospital		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)	
Street Address 400 Western Ave			
City (5) Morris Township		Square Feet 2,500	# of Floors 2
County (6) Morris		County Code (7)(STATE USE ONLY)	Bldg. Age 200
Current Use (Prior if being demolished) Animal Hospital			
Name of Monitoring Firm Hired by Building Owner (8) Environmental Health Investigations, Inc		ASCM No. 29737	Name of Abatement Contractor (9) Superior Abatement Inc
Street Address 655 West Shore Trail		Street Address 2 Henderson Drive	
City, State, Zip Code Sparta, NJ 07871		City, State, Zip Code West Caldwell, NJ 07006	
Project Manager for Monitoring Firm Jean Paul Von Doehren		Telephone No. (609) 704-8850	License No. 00411
Start Date (10) 08 / 16 / 16	Scheduled Completion Date (11) 08 / 30 / 16	Name of OSHA Monitor Superior Abatement Inc	
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: ____AM-____PM/____PM-____AM		Street Address 2 Henderson Drive	
		City, State, Zip Code West Caldwell, NJ 07006	

Scope of Work (Check all that apply)

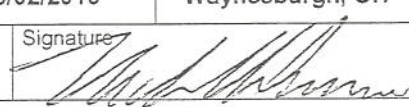
☐ ≥ 3 sf or ≥ 3 lf	☐ Renovation	☒ Full Containment with Negative Pressure
☒ ≥ 160 sf or ≥ 260 lf	☒ Demolition	☐ Mini-Enclosure
		☐ Glovebag Procedure
		☒ Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Throughout	☐	☐	☒	Wall/Ceiling Plaster w/ Joint Comp.	7,500 SF	☒	☐	☐	☐
1 st Floor Kitchen	☐	☐	☒	Linoeum	175 SF	☒	☐	☐	☐
Exterior - Boiler / Windows	☐	☐	☒	Rope Gasket / Window Caulk	10 LF / 22 EA	☒	☐	☐	☐
Roof	☐	☐	☒	Perimeter Flashing	100 LF	☒	☐	☐	☐

Name of Registered Waste Hauler Service Transport Group Inc	NJDEP Waste Hauler ID No. SW2117	Cubic Yards of Waste 100	Name of Registered Landfill Minerva Enterprises
City, State New Castle, DE	Disposal Date 8/30/2016	City, State Waynesburgh, OH	
Completed By (Print or Type) Nick Petrovski	Title President	Signature 	Date 7-21-16

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

CR# 25414

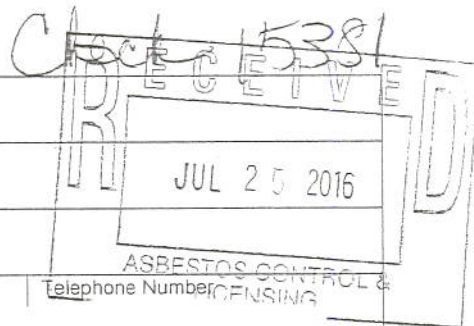
Date of Notification (1) 7 / 21 / 16		Name of Building Owner/Operator (2) Saint Francis Health Center							
Agencies Notified ☒ EPA ☒ DOLWD ☒ DHSS ☐ DCA (NJAC 5:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # ☐ Emergency (including justification) ☐ Cancellation	Street Address 10 Hatfield Street							
		City, State, Zip Code Caldwell, NJ 07006							
		Name of Contact Christopher McIvor							
Telephone Number ASBESTOS CONTROL &									
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Saint Francis Health Center		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private and commercial buildings, homes, etc.)							
Street Address 122 Diamond Spring Road									
City (5) Denville	Square Feet 50,000	# of Floors 3	Bldg. Age 76						
County (6) Morris	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Senior Community Living							
Name of Monitoring Firm Hired by Building Owner (8) Environmental Health Investigations		ASCM No. 29737	Name of Abatement Contractor (9) Superior Abatement Inc						
Street Address 655 West Shore Trail		Street Address 2 Henderson Drive							
City, State, Zip Code Sparta, NJ 07871		City, State, Zip Code West Caldwell, NJ 07006							
Project Manager for Monitoring Firm Bill Kerbel		Telephone No. (973) 729-5649	Telephone No. (973) 808-1616						
License No. 00411									
Start Date (10) 08 / 01 / 16	Scheduled Completion Date (11) 9 / 02 / 16	Name of OSHA Monitor Superior Abatement Inc							
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: ____AM-____PM/____PM-____AM		Street Address 2 Henderson Drive							
		City, State, Zip Code West Caldwell, NJ 07006							
Scope of Work (Check all that apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf ☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Utility Tunnel # 1 and # 2	☒	☐	☐	Pipe Insulation/Pipe Fitting	3,800 LF	☒	☐	☐	☐
Utility Tunnel # 1 and # 2	☒	☐	☐	Floor Debris cleanup	12,500 SF	☒	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
	☐	☐	☐			☐	☐	☐	☐
Name of Registered Waste Hauler Service Transport Group, Inc		NJDEP Waste Hauler ID No. SW2117	Cubic Yards of Waste 100	Name of Registered Landfill Minerva Landfill					
City, State New Castle, DE		Disposal Date 9/02/2016		City, State Waynesburgh, OH					
Completed By (Print or Type) Nick Petrovski		Title President		Signature 			Date 7-21-16		

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

0003

Date of Notification (1) 7/20/2016		Name of Building Owner/Operator (2) Private Property		RECEIVED JUL 25 2016 NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION					
Agencies Notified	Type Notification	Street Address [REDACTED]							
☐ EPA ☐ DEP ☒ DOL ☐ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code North Brunswick							
		Name of Contact Dan							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Private property				Type of Facility (4)					
Street Address [REDACTED]				☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)					
City (5) North Brunswick NJ				Square Feet 1200	# of Floors 1				
County (6) Middlesex				Bldg. Age +50					
County Code (7) (STATE USE ONLY) _____		Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8) N/A		ASCM No. N/A	Name of Abatement Contractor (9) Dinago Environment LLC						
Street Address N/A		Street Address 339 Lafayette Street							
City, State, Zip Code N/A		City, State, Zip Code Newark NJ 07105							
Project Manager for Monitoring Firm N/A		Telephone No. N/A	Telephone No. 973-491-0877	License No. 01240					
Start Date (10) 8/2/2016		Scheduled Completion Date (11) 8/10/2016		Name of OSHA Monitor J&S Environmental Corp					
Occupancy Status During Abatement (Check Only One)				Street Address 2333 Route 22 West					
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____				City, State, Zip Code Union NJ 07803					
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☒ Renovation ☐ Demolition		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure					
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Exterior			x	Roof Flashing	50SF	x			
Roof			x	roofing material	1200SF	X			
Auto Shop Bathroom			x	floor tile	100SF	x			
Window			x	window caulking	24 LF	x			
Name of Registered Waste Hauler Newark Carting Inc		NJDEP Waste Hauler ID No. 04509		Cubic Yards of Waste	Name of Registered Landfill Ises Bethlehem Landfill				
City, State PO Box 5670				Disposal Date	City, State 2335 Applebuter Rd Bethlehem PA				
Completed by Carlos Gomes		Title President		Signature 		Date 7/20/2016			

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



Date of Notification (1) 7/20/16		Name of Building Owner/Operator (2) Townsmen Properties							
Agencies Notified	Type Notification	Street Address 1118 5th Avenue							
☒ EPA ☐ DEP ☒ DOL	☒ Initial ☐ Amended Amendment # _____	City, State, Zip Code Asbury Park, NJ 07712							
☒ DOH ☐ DCA	☒ Emergency (including justification) ☐ Cancellation	Name of Contact Herb Fehrenbach							
		Telephone Number _____							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Apartment 2E		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 1615 Park Avenue		Square Feet 1200	# of Floors 1						
City (5) Asbury Park		Bldg. Age 63							
County (6) Monmouth	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) ABS Environmental Services, LLC						
Street Address		Street Address PO Box 483, 4 E Gate Drive							
City, State, Zip Code		City, State, Zip Code Glenwood, NJ 07418							
Project Manager for Monitoring Firm		Telephone No. 973-764-2276	License No. 703						
Start Date (10) 7/25/16	Scheduled Completion Date (11) 8/31/16	Name of OSHA Monitor							
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: _____		Street Address							
		City, State, Zip Code							
Scope of Work (Check All That Apply)									
☐ ≥3 sf or ≥3 lf ☒ ≥160 sf or ≥260 lf		☒ Renovation ☐ Demolition	☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☒ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure						
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
kitchen/living room			x	pipe insulation	25 LF	x			
Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No. 15939	Cubic Yards of Waste TBD	Name of Registered Landfill Western Berks Landfill					
City, State Freehold, NJ		Disposal Date TBD		City, State Birdsboro, PA					
Completed by A. Scott Higgins		Title President		Signature 			Date 7/20/16		

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

Date of Notification (1) 7/20/16		Name of Building Owner/Operator (2) Terreno Global Plaza, LLC	
Agencies Notified	Type Notification	Street Address 101 Montgomery Street, Suite 200	
☒ EPA ☐ DEP ☒ DOL	☒ Initial ☐ Amended ☐ Amendment # _____	City, State, Zip Code San Francisco, CA 94104	
☒ DOH ☐ DCA	☐ Emergency (including justification) ☐ Cancellation	Name of Contact Paul Marciano	Telephone Number _____

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 RECEIVED
 JUL 25 2016
 ASBESTOS CONTROL &

FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Truck Repair Garage		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)	
Street Address 901 North Avenue East		Square Feet 2000	# of Floors 1
City (5) Elizabeth		Bldg. Age 69	
County (6) Union	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished)	
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	Name of Abatement Contractor (9) ABS Environmental Services, LLC
Street Address		Street Address PO Box 483, 4 E Gate Drive	
City, State, Zip Code		City, State, Zip Code Glenwood, NJ 07418	
Project Manager for Monitoring Firm		Telephone No. 973-764-2276	License No. 703
Start Date (10) 7/30/16	Scheduled Completion Date (11) 8/30/16	Name of OSHA Monitor	
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address	
		City, State, Zip Code	
Scope of Work (Check All That Apply)			
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☐ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure	

Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
window above storage			X	window caulk	25 LF	X			
window above bathroom			X	window caulk	25 LF	X			
piping along roof			X	window caulk	25 LF	X			

Name of Registered Waste Hauler Freehold Cartage		NJDEP Waste Hauler ID No. 15939	Cubic Yards of Waste TBD	Name of Registered Landfill Western Berks Landfill	
City, State Freehold, NJ		Disposal Date TBD		City, State Birdsboro, PA	
Completed by A. Scott Higgins		Title President	Signature 		Date 7/20/16

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

NOTIFICATION
NO. 001

Date of Notification (1) 7/20/16		Name of Building Owner/Operator (2) PSEG		RECEIVED JUL 25 2016 ASBESTOS CONTROL & REMEDIATION
Agencies Notified	Type Notification	Street Address 4000 HADLEY ROAD		
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial ☐ Amended Amendment # 1 ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code SOUTH PLAINFIELD, NJ 07068		
		Name of Contact DOUG MCGARRITY		

Name of Facility Where Abatement is Taking Place (3) PSEG		Type of Facility (4)	
Street Address 981 SPRINGFIELD AVE.		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)	
City (5) IRVINGTON	Square Feet 49,000	# of Floors 3	Bldg. Age approx 53
County (6) ESSEX	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) SUBSTATION	

Name of Monitoring Firm Hired by Building Owner (8) ENVIRONMENTAL TACTICS		ASCM No. 0045	Name of Abatement Contractor (9) UNIQUE SYSTEMS OF AMERICA	
Street Address 64 BROAD STREET		Street Address 396 WHITEHEAD AVE.		
City, State, Zip Code MATAWAN, NJ 07747		City, State, Zip Code SOUTH RIVER, NJ 08882		
Project Manager for Monitoring Firm TOM GEIGER		Telephone No. 732-290-2217	Telephone No. 732-432-8350	License No. 01111

Start Date (10) 7/16/16	Scheduled Completion Date (11) 7/18/16	Name of OSHA Monitor UNIQUE SYSTEMS OF AMERICA	
Occupancy Status During Abatement (Check Only One)		Street Address 396 WHITEHEAD AVE.	
☐ Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: necessary operations only		City, State, Zip Code SOUTH RIVER, NJ 08882	

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	

Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
ROOF		X		ACM Duct INSULATION	130 SF	X			

Name of Registered Waste Hauler WASTE MANAGEMENT		NJDEP Waste Hauler ID No. 1125	Cubic Yards of Waste approx 20	Name of Registered Landfill GROWS NORTH	
City, State ELIZABETH, NJ		Disposal Date TBD		City, State MORRISVILLE, PA	
Completed by CAROL RAIMO		Title OFFICE MGR	Signature <i>Carol Raimo</i>	Date 7/20/16	

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Unique Systems of America

732-432-8352

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CHECK #7847

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:26 and 12:120)EMERGENCY
NOTIFICATION

Print Form

Date of Notification (1) 7/15/16		Name of Building Owner/Operator (2) PSEG	
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☐ DOH ☐ DCA		Type Notification ☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	
Street Address 4000 HADLEY ROAD		City, State, Zip Code SOUTH PLAINFIELD, NJ 07068	
Name of Contact DORG MCGARRITY		Telephone Number	
Name of Facility Where Abatement is Taking Place (3) PSEG			
Street Address 981 SPRINGFIELD AVE.		Type of Facility (4) ☐ School (K-12) ☐ Subchapter S (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)	
City (5) IRVINGTON		Square Feet 4900	
County (6) ESSEX		# of Floors 3	
County Code (7) (STATE USE ONLY)		Bldg. Age 2005	
Name of Monitoring Firm Hired by Building Owner (8) ENVIRONMENTAL TACTICS		Current Use (Prior if being demolished) SUBSTATION	
Street Address 64 BROAD STREET		Name of Abatement Contractor (9) UNIQUE SYSTEMS OF AMERICA	
City, State, Zip Code MATAWAN, NJ 07747		Street Address 396 WHITEHEAD AVE.	
Project Manager for Monitoring Firm TOM GEIGER		City, State, Zip Code SOUTH RIVER, NJ 08882	
Telephone No. 732-290-2217		Telephone No. 732-432-8350	
Start Date (10) 7/16/16		License No. 01111	
Scheduled Completion Date (11) 7/25/16		Name of OSHA Monitor UNIQUE SYSTEMS OF AMERICA	
Occupancy Status During Abatement (Check Only One) ☐ Facility Closed/Vacated During Entire Period of Abatement ☒ Abatement Performed Outside of Normal Facility Hours Other - Describe: necessary access only		Street Address 396 WHITEHEAD AVE.	
Scope of Work (Check All That Apply) ☐ 23 sf or 23 lf ☐ 260 sf or 260 lf ☒ Renovation ☐ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glove bag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure		City, State, Zip Code SOUTH RIVER, NJ 08882	
Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)		Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A	
Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)		Amount (Specify SF or LF)	
Roof		ACM DUCT INSULATION 130 SF	
Name of Registered Waste Hauler WASTE MANAGEMENT		NJDEP Waste Hauler ID No. 1125	
City, State ELIZABETH, NJ		Cubic Yards of Waste 20	
Disposal Date TBD		Name of Registered Landfill GROWS NORTH	
City, State MORRISVILLE, PA		Completed by CAROL RAIMO	
Title OFFICE MGR		Signature Carol Raimo	
Date 7/15/16			

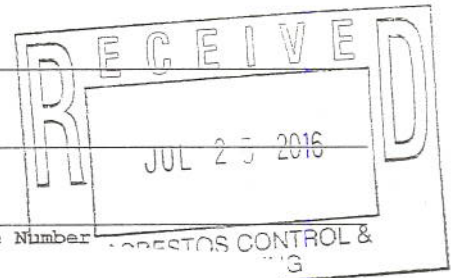
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

CIC 6271

Date of Notification (1) 7/21/16		Name of Building Owner/Operator (2) RFL ELECTRONICS, INC	
Agency Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	Street Address 353 POWERVILLE RD	
		City, State, Zip Code BOONTON TWP, NJ. 07005	
		Name of Contact MR. ARTHUR FREIL	
		Telephone Number 25 2016	
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) RFL ELECTRONICS, INC		Type of Facility (4) ASBESTOS CONTROL & LICENSING	
Street Address 353 POWERVILLE RD		☐ School (K-12) ☐ Subchapter S (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)	
City (5) BOONTON TWP	Square Feet 3000	# of Floors 1	Bldg. Age 1935
Country (6) MORRIS	Country Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) OFFICES / FACILITIES	
Name of Monitoring Firm Hired by Building Owner (8)	ASCM No.	Name of Abatement Contractor (9) Best Removal Inc	
Street Address		Street Address 450 South River St	
City, State, Zip Code		City, State, Zip Code Hackensack, N.J. 07601	
Project Manager for Monitoring Firm	Telephone No.	Telephone No. 201-329-7444	License No. 00388
Start Date (10) 8/8/16	Scheduled Completion Date (11) 8/15/16	Name of OSHA Monitor Omega Environmental	
Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☒ Other - Describe: 8:00 AM TO 5:00 PM		Street Address 280 Huyler St	
		City, State, Zip Code S. Hackensack, N.J. 07606	
Scope of Work (Check all that apply)			
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☒ Renovation ☐ Demolition	
		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure	
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)
	Yes	No	
FIRST FLOOR BLDG 2A			X
			VAT
			2700 SF
Name of Registered Waste Hauler Best Removal Inc	NJDEP Waste Hauler ID No. 17109	Cubic Yards of Waste 12cy	Name of Registered Landfill Minerva Enterprises, LLC
City, State Hackensack, N.J. 07601		Disposal Date 8/15/16	City, State Waynesburg, Oh, 44688
Completed by J. Maiorano	Title Estimator	Signature <i>[Signature]</i>	Date 7/21/16

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

Date of Notification (1) 7/21/2016		Name of Building Owner/Operator (2) Marilyn Mehr	
Agencies Notified	Type Notification	Street Address [REDACTED]	
☐ EPA	☒ Initial Notification	City, State, Zip Code West Orange, NJ, 07052	
☐ DEP	☐ Amended Notification	Name of Contact Marilyn Mehr	
☒ DOL	☐ EMERGENCY	Telephone Number [REDACTED]	
☒ DOH	☐ Cancellation		
☐ DCA			



Name of Facility Where Abatement is Taking Place (3) Same as above			Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private & commercial buildings, homes, etc.)		
Street Address			Square Feet 1200	# of Floors 1	Bldg. Age 81
City (5)	County (6) Essex	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)		

Name of Monitoring Firm hired by Building Owner (8) N/A		ASCM No.	Name of Abatement Contractor (9) AZTECH MANAGEMENT, Inc.	
Street Address		Street Address 86 Christopher St.		
City, State, Zip Code		City, State, Zip Code Montclair, NJ 07042		
Project Manager for Monitoring Firm	Telephone Number N/A	Telephone Number (973) 744-8800	License Number 00371	
Scheduled Start Date (10) 8/2/2016	Sched. Completion Date (11) 8/3/2016	Name of OSHA Monitor N/A		
Month Day Year 8 2 2016		Month Day Year 8 3 2016		
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe: «OffHours Descript» ☐ Other - Describe: «Other Occupancy Descript»		Street Address		
		City, State, Zip Code		

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-Friable Procedure

Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely By Maintenance/Custodial Staff (12)			Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E
Basement			☒	Pipe insulation	105 lf	☒			

Name of Registered Waste Hauler AZTECH MANAGEMENT, INC.		NJDEP Waste Hauler ID No. 17040	Cubic Yards of Waste 1.25	Name of Registered Landfill Minerva Enterprise INC	
City, State Montclair, NJ 07042		Disposal Date 8/4/2016	City, State Waynesburg, Ohio 44688		
Completed By (Print or Type) Constantine Vivian	Title President	Signature 	Date 7/21/2016		

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

Date of Notification (1) 7/21/2016		Name of Building Owner/Operator (2) Pauline Sullivan		RECEIVED JUL 25 2016 ASBESTOS CONTROL & LICENSING
Agencies Notified	Type Notification	Street Address [REDACTED]		
☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☒ Initial Notification ☐ Amended Notification ☐ EMERGENCY ☐ Cancellation	City, State, Zip Code Ridgewood, NJ, 07450		
		Name of Contact Pauline Sullivan	Telephone Number	

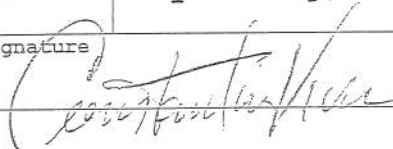
FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3) Same as above			Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e., private & commercial buildings, homes, etc.)		
Street Address			Square Feet 1600	# of Floors 2	Bldg. Age 93
City (5)	County (6) Essex	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished)		
Name of Monitoring Firm hired by Building Owner (8) N/A		ASCM No.	Name of Abatement Contractor (9) AZTECH MANAGEMENT, Inc.		
Street Address		Street Address 86 Christopher St.			
City, State, Zip Code		City, State, Zip Code Montclair, NJ 07042			
Project Manager for Monitoring Firm		Telephone Number N/A	Telephone Number (973) 744-8800		License Number 00371
Scheduled Start Date (10) 7/30/2016 Month Day Year		Sched. Completion Date (11) 8/2/2016 Month Day Year		Name of OSHA Monitor N/A	
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe: <u>«OffHours Descript»</u> ☐ Other - Describe: <u>«Other Occupancy Descript»</u>			Street Address		
			City, State, Zip Code		

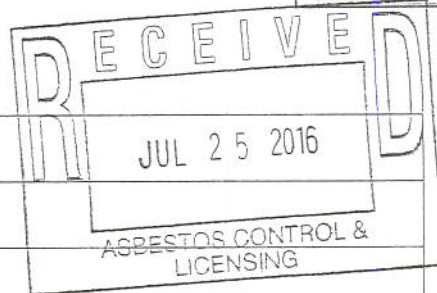
Scope of Work (Check all that apply)

☒ >3 sf or >3 lf	☐ Renovation	☐ Full Containment with Negative Pressure
☐ >160 sf or >260 lf	☐ Demolition	☐ Mini-Enclosure
		☒ Glovebag Procedure
		☐ Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely By Maintenance/Custodial Staff (12)			Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			R E M O V A L	R E P A I R	E N C A P S U L .	E N C L O S U R E
Basement			X	Pipe insulation	85 lf	X			

Name of Registered Waste Hauler AZTECH MANAGEMENT, INC.		NJDEP Waste Hauler ID No. 17040	Cubic Yards of Waste 1.5	Name of Registered Landfill Minerva Enterprise INC	
City, State Montclair, NJ 07042		Disposal Date 8/3/2016	City, State Waynesburg, Ohio 44688		
Completed By (Print or Type) Constantine Vivian	Title President	Signature 	Date 7/21/2016		

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



Date of Notification (1) 07/21/2016		Name of Building Owner/Operator (2) Kent Place School							
Agencies Notified	Type Notification	Street Address 42 Norwood Avenue							
☐ EPA ☐ DEP ☒ DOL ☐ DOH ☐ DCA	☐ Initial ☒ Amended Amendment #1 _____ ☐ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Summit, NJ 07902							
		Name of Contact Frank Lemire	Telephone Number						
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Kent Place School		Type of Facility (4) ☒ School (K-12) ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 42 Norwood Avenue		Square Feet	# of Floors 2						
City (5) Summit		Bldg. Age							
County (6) Union	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) vacant							
Name of Monitoring Firm Hired by Building Owner (8) Partner Engineering and Science Inc.		ASCM No.	Name of Abatement Contractor (9) Be Construction Corporation						
Street Address 611 Industrial Way West		Street Address 235 Watchung Avenue							
City, State, Zip Code Eatontown, NJ 07724		City, State, Zip Code West Orange, NJ 07052							
Project Manager for Monitoring Firm Brian Nemetz		Telephone No. 732-380-1700	License No. 01231						
Start Date (10) 07/21/2016	Scheduled Completion Date (11) 08/15/2016	Name of OSHA Monitor Schneider Laboratories Global Inc.							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 2512 W Cary Street							
		City, State, Zip Code Richmond, VA. 23220							
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☐ Renovation ☒ Demolition							
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
B-1, B-2, B-3, B-4, Tech Room		X		Transite Panels	180SF	X			
Exterior of Building		X		Vapor Barrier	400SF	X			
Ground Level		X		Pipe Insulation	50LF	X			
Name of Registered Waste Hauler Future Sanitation, Inc.		NJDEP Waste Hauler ID No.	Cubic Yards of Waste	Name of Registered Landfill Tullytown Facility					
City, State Passaic, NJ		Disposal Date		City, State Tullytown, PA					
Completed by Barbara Reed		Title President	Signature <i>Barbara Reed</i>			Date 07/21/2016			

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:80 and 12:120)

Date of Notification (1) 07/20/2018		Name of Building Owner/Operator (2) Kent Place School	
Agencies Notified ☐ EPA ☐ DEP ☐ DOL ☐ DOH ☐ DCA		Type Notification ☐ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	
Street Address 42 Norwood Avenue		City, State, Zip Code Summit, NJ 07902	
Name of Contact Frank Lamira		Telephone Number	
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Kent Place School		Type of Facility (4) ☒ School (K-12) ☐ Subchapter S (Other than K-12) ☐ Other (i.e. private & commercial buildings, homes, etc.)	
Street Address 42 Norwood Avenue		Square Feet	
City (5) Summit		# of Floors 2	
County (6) Union		Bldg. Age	
County Code (7) (STATE USE ONLY)		Current Use (Prior to being demolished) vacant	
Name of Monitoring Firm Hired by Building Owner (8) Partner Engineering and Science Inc.		ACSM No.	
Street Address 611 Industrial Way West		Name of Abatement Contractor (9) Be Construction Corporation	
City, State, Zip Code Eatontown, NJ 07724		Street Address 235 Watchung Avenue	
Project Manager for Monitoring Firm Brian Nemetz		City, State, Zip Code West Orange, NJ 07052	
Telephone No. 732-380-1700		Telephone No. 878-888-2900	
Start Date (10) 07/21/2018		License No. 01231	
Scheduled Completion Date (11) 08/15/2018		Name of OSHA Monitor Schneider Laboratories Global Inc.	
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours Other - Describe: _____		Street Address 2512 W Cary Street	
Scope of Work (Check All That Apply) ☐ ≥3 sf or ≥3 lf ☒ ≥150 sf or ≥2250 lf ☐ Renovation ☒ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure		City, State, Zip Code Richmond, VA, 23220	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)		Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A	
Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)		Amount (Specify SF or LF)	
Abatement Type		Removal Repair Encapsulate Enclosure	
B-1, B-2, B-3, B-4, Tech Room		X	
Exterior of Building		X	
Transite Panels		160SF	
Vapor Barrier		400SF	
Name of Registered Waste Hauler Future Sanitation, Inc.		NJDEP Waste Hauler ID No.	
Cubic Yards of Waste		Name of Registered Landfill Tullytown Facility	
City, State Passaic, NJ		Disposal Date	
City, State Tullytown, PA		Completed by Barbara Reed	
Title President		Signature <i>Barbara Reed</i>	
Date 07/20/2018			

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

- Check # 9714

Date of Notification (1) 7-22-16		Name of Building Owner/Operator (2) J. Vinch + Sons, Inc							
Agencies Notified ☐ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☒ Initial ☐ Amended ☐ Amendment # ☐ Emergency (including justification) ☐ Cancellation	Street Address P.O. Box 5465							
		City, State, Zip Code Trenton NJ 08638							
		Name of Contact Gary Vinch							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Single family Dwelling Duplex		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address [REDACTED]		Square Feet	# of Floors						
City (5) Trenton NJ 08638			Bldg. Age 80+						
County (6) Mercer	County Code (7) (STATE USE ONLY)	Current Use (Prior if being demolished) Single family Dwellings							
Name of Monitoring Firm Hired by Building Owner (8) EPC Technologies		ASCM No. N/A	Name of Abatement Contractor (9) EPC Technologies Inc						
Street Address P.O. Box 337		Street Address P.O. Box 337							
City, State, Zip Code New Egypt, NJ 08533		City, State, Zip Code New Egypt NJ 08533							
Project Manager for Monitoring Firm Steve Schenker		Telephone No. 609 758-3365	License No. 00394						
Start Date (10) 8-2-16	Scheduled Completion Date (11) 8-19-16	Name of OSHA Monitor EPC Technologies Inc							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		Street Address P.O. Box 337							
		City, State, Zip Code New Egypt NJ 08533							
Scope of Work (Check All That Apply) ☒ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf ☐ Renovation ☒ Demolition ☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure									
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
712/714 exterior walls	x			Siding Shingles	3000 SF	x			
712/714 Flat Roofs	x			Silver Roof Tar Sealant	500 SF	x			
714 Kitchen/Break Room		x		9"x9" Floor Tile	150 SF	x			
714 Kitchen		x		Linoleum flooring	150 SF	x			
Name of Registered Waste Hauler EPC Technologies		NJDEP Waste Hauler ID No. 17000	Cubic Yards of Waste 12	Name of Registered Landfill Waste Management of PA					
City, State New Egypt NJ		Disposal Date by 8-19-16		City, State Morrisville PA		Date 7-22-16			
Completed by Steve Schenker		Title President		Signature Steve Schenker		Date 7-22-16			

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State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
 (Pursuant to NJAC 8:26 and 12:12)

Date of Notification (1) 7/21/16		Name of Building Owner/Operator (2) SHARIT GELSTEIN	
Agencies Notified ☒ SPA ☒ DEP ☒ DCL ☒ DOH ☒ DCA		Type Notification ☒ Initial ☒ Amended ☒ Amendment # ☒ Emergency (including justification) ☐ Cancellation	
Street Address [REDACTED]		City, State, Zip Code NEW MILFORD, N.J.	
Name of Contact SHARIT GELSTEIN		Telephone Number 07646-5111	
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) RESIDENCE		Type of Facility (4) ☐ School (K-12) ☐ Subchapter S (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)	
Street Address [REDACTED]		Square Feet 1,600	
City (5) NEW MILFORD		# of Floors 2	
County (6) BELLEVILLE		Bldg. Age 150	
County Code (7) 01		Current Use (Prior if being demolished) RESIDENTIAL	
Name of Monitoring Firm Hired by Building Owner (8)		ASCM No.	
Street Address		Name of Abatement Contractor (9) A.MAC Contracting Inc.	
City, State, Zip Code		Street Address 185 Vreeland Ave.	
Project Manager for Monitoring Firm		City, State, Zip Code Midland Park, NJ	
Telephone No.		Telephone No. (201)262-6841	
Start Date (10) 7/22/16		License No. 00156	
Scheduled Completion Date (11) 8/15/16		Name of OSHA Monitor Omega Environmental Services	
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe:		Street Address 280 Huyler St.	
Scope of Work (Check All That Apply) ☒ 23 or 23 H ☒ 2190 or 2190 H ☒ Renovation ☐ Demolition		☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Non-Exempted (5) and Non-Friable Procedure	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) BASEMENT	Is Location Normally Used Solely by Maintenance/Custodial Staff (12) Yes No N/A		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) VAT & MASTIC
	Amount (Specify SF or LF) 220 SF		
Abatement Type Removal Repair Encapsulate Enclosure			
Name of Registered Waste Hauler Newark Carting, Inc.		Name of Registered Landfill IESI PA Bethlehem Landfill Corp.	
City, State Newark, NJ		City, State Bethlehem, PA	
Completed by Joseph Vaccaro		Signature J. Vaccaro	
Title Vice President		Date 7/21/16	

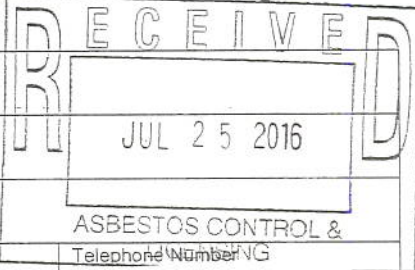
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

CK # 1210

Date of Notification (1) 06/02/16		Name of Building Owner/Operator (2) Yeshivat He-Atid School						
Agencies Notified	Type Notification	Street Address 1500 Queen Ann Road						
☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	☐ Initial ☐ Amended ☐ Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	City, State, Zip Code Teaneck, NJ 07666						
		Name of Contact Idan Levin						
FACILITY INFORMATION								
Name of Facility Where Abatement is Taking Place (3) Yeshivat He-Atid School		Type of Facility (4)						
Street Address 1500 Queen Ann Road		☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)						
City (5) Teaneck		Square Feet 3,000	# of Floors 1					
County (6) Bergen		Bldg. Age 50+-						
County Code (7) (STATE USE ONLY)		Current Use (Prior if being demolished) School						
Name of Monitoring Firm Hired by Building Owner (8) N/A		ASCM No.						
Street Address		Name of Abatement Contractor (9) Stanmark Contractors, LLC						
City, State, Zip Code		Street Address 27 Edsall Drive						
Project Manager for Monitoring Firm		City, State, Zip Code Sussex, NJ 07461						
Telephone No.		Telephone No. 973-864-2022	License No. 01137					
Start Date (10) 06/03/16	Scheduled Completion Date (11) 06/06/16	Name of OSHA Monitor AmeriSci						
Occupancy Status During Abatement (Check Only One)		Street Address 117 East 30th Street						
☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		City, State, Zip Code New York, NY 10016						
Scope of Work (Check All That Apply)								
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☐ Renovation ☒ Demolition						
		☐ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure						
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	No	N/A			Removal	Repair	Encapsulate	Enclosure
1958 Section		X	Window glazing	140 S.F.	X			
1958 Section		X	window calking	250 L.F.	X			
1970 Section		X	window calking	50 L.F.	X			
Name of Registered Waste Hauler Atlantic Carting		NJDEP Waste Hauler ID No. 190713	Cubic Yards of Waste 30	Name of Registered Landfill G.R.O.W.S.				
City, State Wayne, NJ			Disposal Date on completion	City, State Morrisville, PA				
Completed by Marko Stankovic		Title President	Signature Marko Stankovic		Date 06/02/16			

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

CK # 1226



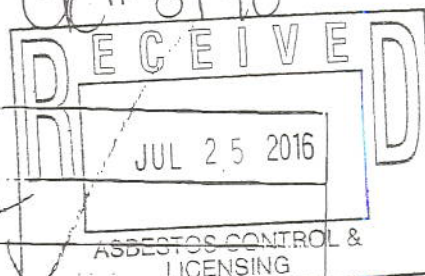
Date of Notification (1) 06/24/16		Name of Building Owner/Operator (2) Meridia Lifestyles II, Linden, LLC							
Agencies Notified ☒ EPA ☐ DEP ☒ DOL ☒ DOH ☐ DCA	Type Notification ☐ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation		Street Address 201 South Wood Avenue						
			City, State, Zip Code Linden, NJ 07036						
		Name of Contact Michael Goras, Jr.							
FACILITY INFORMATION									
Name of Facility Where Abatement is Taking Place (3) Meridia Lifestyles II		Type of Facility (4) ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) ☒ Other (i.e. private & commercial buildings, homes, etc.)							
Street Address 112 South Wood Avenue		Square Feet 1,500	# of Floors 2						
City (5) Linden		Bldg. Age 50+-							
County (6) Union	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) Commercial Property							
Name of Monitoring Firm Hired by Building Owner (8) N/A		ASCM No. _____	Name of Abatement Contractor (9) Stanmark Contractors, LLC						
Street Address		Street Address 27 Edsall Drive							
City, State, Zip Code		City, State, Zip Code Sussex, NJ 07461							
Project Manager for Monitoring Firm		Telephone No. 973-864-2022	License No. 01137						
Start Date (10) 06/24/16	Scheduled Completion Date (11) 06/29/16	Name of OSHA Monitor AmeriSci							
Occupancy Status During Abatement (Check Only One) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours ☐ Other - Describe: _____		Street Address 117 East 30th Street							
		City, State, Zip Code New York, NY 10016							
Scope of Work (Check All That Apply)									
☐ ≥ 3 sf or ≥ 3 lf ☒ ≥ 160 sf or ≥ 260 lf		☐ Renovation ☒ Demolition							
		☐ Full Containment with Negative Pressure ☒ Mini-Enclosure ☒ Glovebag Procedure ☒ Non-Exempted (*) and Non-Friable Procedure							
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)		Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type				
		No			N/A	Removal	Repair	Encapsulate	Enclosure
1st Floor		x		floor tiles & Linoleum	650 S.F.	x			
2nd Floor		x		Linoleum	180 S.F.	x			
Basement		x		pipe insulation	80 L.F.	x			
Roof		x		roof flashing	124 S.F.	x			
Name of Registered Waste Hauler Atlantic Carting		NJDEP Waste Hauler ID No. 190713	Cubic Yards of Waste 10	Name of Registered Landfill G.R.O.W.S.					
City, State Wayne, NJ			Disposal Date on completion	City, State Morrisville, PA					
Completed by Marko Stankovic		Title President	Signature Marko Stankovic			Date 06/24/16			

07/28/2016 11:42

NO. 831 #882

CK #3170

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:26 and 8:16)



Date of Notification (1) 7 / 20 / 16		Name of Building Owner/Operator (2) Allison Letourneau	
Agencies Notified ☒ EPA ☒ DOLWD ☒ DOH ☐ DCA (NJAC 8:23-8)	Type Notification ☒ Initial ☐ Amended Amendment # _____ ☒ Emergency (including justification) ☐ Cancellation	Street Address [REDACTED] City, State, Zip Code Cranford, NJ 07016 Name of Contact Allison Letourneau Telephone Number	
FACILITY INFORMATION			
Name of Facility Where Abatement is Taking Place (3) Letourneau Residence		Type of Facility (4) ☐ School (K-12) ☐ Subchapter B (Other than K-12) ☒ Other (i.e., private and commercial buildings, houses, etc.)	
Street Address [REDACTED]		Square Feet 2,200	
City (5) Cranford		# of Floors 3	
County (6) Union		Bldg. Age 60	
County Code (1) (STATE USE ONLY) Union		Current Use (Prior if being demolished) Residence	
Name of Monitoring Firm Hired by Building Owner (6) Mgmt. & Environmental Consulting Services		ASCM No. ASCM No.	
Street Address PO Box 341		Name of Abatement Contractor (9) Shade Environmental, LLC	
City, State, Zip Code Chesterfield, NJ 08515		Street Address 623 Cutler Avenue	
Project Manager for Monitoring Firm Bill Welgerber		City, State, Zip Code Maple Shade, NJ 08052	
Telephone No. 809-298-4070		Telephone No. 856-755-0099	
Start Date (10) 07 / 22 / 16		License No. 00842	
Scheduled Completion Date (11) 07 / 23 / 16		Name of OSHA Monitor EMSL Analytical, Inc.	
Occupancy Status During Abatement (Check only one) ☒ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: _____ AM- _____ PM/ _____ PM- _____ AM		Street Address 200 Route 130 North	
Scope of Work (Check all that apply) ☒ >3 sf or >3 lf ☒ >160 sf or >250 lf ☐ Renovation ☐ Demolition ☒ Full Containment with Negative Pressure ☐ Mini-Enclosure ☐ Glovebag Procedure ☒ Non-Exempted (?) and Non-Practical Procedure		City, State, Zip Code Cinnaminson, NJ 08077	
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A	Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)
Basement	☐ Yes ☒ No ☐ N/A	Floor Tile and Mastic	255 SF
	☐ Yes ☐ No ☐ N/A		
	☐ Yes ☐ No ☐ N/A		
	☐ Yes ☐ No ☐ N/A		
Name of Registered Waste Hauler Freshhold Garbage		NJDER Waste Hauler ID No. 15939	Cubic Yards of Waste 3
City, State Freshhold, NJ		Disposal Date 07/25/2016	Name of Registered Landfill Cumberland County Landfill
City, State Freshhold, NJ		Disposal Date 07/25/2016	City, State Newburg, PA
Completed By (Print or Type) Christina Lynch	Title Operations Manager	Signature 	Date 7/20/16

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