State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60 and 12:120) D&S Proj. #: 16-211 Name of Building Owner/Operator (2) Date of Notification (1) 0 7 / 1 9 / 1 6 sarah izzo Type Notification Agencies Notified Street Address ASBESTOS CONTROL & | Initial ☐ EPA LICENSING Amended DEP City, State, Zip Code Amendment #: DOL Emergency MAPLEWOOD, NJ 07040 (including Telephone Number DOH Name of Contact justification) DCA sarah izzo Cancellation **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) sarah izzo Subchapter 8 (Other than K-12) Other (Private/Commercial Street Address Bldgs./Homes, etc. # of Floors Bldg. Age Square Feet County (6) County Code (7) City (5) (State use only) Current Use (Prior if being demolished) MAPLEWOOD PSSPX Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 License Number Telephone Number Project Manager for Monitoring Firm Phone Number 01169 973-345-8020 Name of OSHA Monitor Start Date (10) Sched. Completion Date (11) D & S Restoration, Inc. Street Address 08/04/16 08/31/16 Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Describe: Other-Describe: NORMAL HOURS Paterson, NJ 07503 Scope of Work (check all that apply) Full Containment w/negative pressure Mini-enclosure  $\times$  >3 sf or >3 lf Renovation Glovebag procedure >160 sf or >260 lf Demolition Non-Exempted (\*) and Non-friable procedure E Is location normally used solely E Location of by maintenance/custodial n Amount asbestos-containing Description of asbestos-containing m staff(12) (Specify SF or C material (acm) to be material (ACM) 0 a abated in facility (13) Yes N/A No p PIPE INSULATION 115 L FT BASEMENT BOILER, storage crawl space Cubic Yards of Waste Name of Registered Landfill Registered Waste Hauler NJDEP Hauler ID# TULLYTOWN, RESOURCE RECOVERY D & S RESTORATION, INC. 13506 2 yds. Disposal Date City, State City, State 0 TULLYTOWN, PA PATERSON, NJ 07503 Signature Date Completed by (Print or Type) Title 07/19/2016 BOGDAN JOLDZIC PRESIDENT

Do not use this form for asbestos licensure exempted activities.

ASB-41

State of NJ Notification of Asbestos Abatement D&S Proj. #: 16-218 (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) 25 Date of Notification (1) 2016 0 7 / 1 8 / 1 6 1 decker residence Agencies Notified Type Notification Street Address ASBESTOS CONTROL & Initial EPA LICENSING Amended DEP City, State, Zip Code Amendment #: 1 DOL M Emergency Scotch Plains, NJ 07076 (including DOH Name of Contact Telephone Number justification) DCA bobbie mulvee Cancellation FACILITY INFORMATION Name of facility where abatement is taking place (3) Type of Facility (4) School (K - 12) decker residence Subchapter 8 (Other than K-12) Street Address Other (Private/Commercial Bldgs./Homes, etc. Square Feet # of Floors Bldg. Age County (6) City (5) County Code (7) (State use only) Current Use (Prior if being demolished) Scotch Plains UNION Name of Monitoring Firm Hired by Bldg. Owner (8) Name of Abatement Contractor (9) ASCM No. D & S RESTORATION, INC. Street Address Street Address 20 California Ave. City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Project Manager for Monitoring Firm Telephone Number License Number Phone Number 01169 973-345-8020 Name of OSHA Monitor Sched. Completion Date (11) Start Date (10) D & S Restoration, Inc. 07/20/16 08/15/16 Street Address Occupancy Status During Abatement (Check only one) 20 California Avenue Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-Other-Describe: NORMAL HOURS Paterson, NJ 07503 Scope of Work (check all that apply) Full Containment w/negative pressure  $\times$  >3 sf or >3 lf Mini-enclosure Renovation Glovebag procedure ≥160 sf or ≥260 lf Demolition Non-Exempted (\*) and Non-friable procedure Is location normally used solely E Location of E е by maintenance/custodial A n asbestos-containing Amount Description of asbestos-containing n m staff(12) p C material (acm) to be (Specify SF or material (ACM) 0 C a a abated in facility (13) Yes No N/A P PIPE INSULATION 20 L FT BASEMENT X Registered Waste Hauler NJDEP Hauler ID# Cubic Yards of Waste Name of Registered Landfill D & S RESTORATION, INC. 13506 TULLYTOWN, RESOURCE RECOVERY Dity, State Disposal Date City, State PATERSON, NJ 07503 07/21/16 TULLYTOWN, PA Completed by (Print or Type) Signature Date Title **BOGDAN JOLDZIC** PRESIDENT 02/18/2016 Do not use this form for asbestos licensure exempted activities. ASB-41

Name of Building Owner/Operator (2) Date of Notification (1) NJ DPMC/ Job # 1509-4949 Check # Page Tof13 7. / 21 16 2010 Street Address Agencies Notified Type Notification **⊠** EPA ☐ Initial PO Box 034 **⊠** DOLWD ☐ Amended City, State, Zip Code ASBESTOS CONTROL & X DHSS Amendment #10 LICENSING Trenton, NJ 08625 ☐ Emergency (including ☐ DCA <del>Telephone Number</del> Name of Contact (NJAC 5:23-8) justification) ☐ Cancellation Scott Fertig FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) NJ Training School for Boys Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 1 State Street homes, etc.) Square Feet # of Floors Bldg. Age City (5) Jamesburg, NJ County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) County (6) Training School Middlesex Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) AbateTech, Inc. **Environmental Connection** Street Address Street Address 30 Maple Ave. PO Box 25 120 North Warren Street City, State, Zip Code City, State, Zip Code Lumberton, NJ 08048 Trenton, NJ 08608 License No. Telephone No. Project Manager for Monitoring Firm Telephone No. 00529 Dominic Derricole 609-392-4200 609-265-2107 Name of OSHA Monitor Start Date (10) Scheduled Completion Date (11) 8 / 31 / 16 \_\_10\_\_ / \_21\_\_ / \_15\_\_ **EMSL** Analytical Street Address Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: \_\_\_\_AM-\_\_\_PM/\_\_\_\_PM-\_\_\_AM Cinnaminson, NJ 08077 Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 lf
 ≥160 sf or ≥260 lf □ Renovation ☐ Mini-Enclosure ☐ Glovebag Procedure ☐ Demolition Non-Exempted (\*) and Non-Friable Procedure Is Location Abatement Type Normally Description of Location of Repair Encapsulate Enclosure Remova Used Solely by Amount Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Maintenance/ (i.e., thermal systems insulation, (Specify TO BE ABATED Custodial Staff? SF or LF) surfacing, VAT, or IN Facility (12)other miscellaneous) (13)Yes No N/A <25 SF Plaster Wilson School Bldg. #3  $\boxtimes$ X П 60 LF Wilson School Bldg. #3 X Pipe Fitting Insulation 325 SF X X Floor tile & Mastic Carpentry Shop Bldg. #35 X 40 LF Pipe Fitting Insulation Carpentry Shop Bldg. #35 Cubic Yards of Name of Registered Landfill NJDEP Waste Name of Registered Waste Hauler Hauler ID No. Waste G.R.O.W.S. Landfill AbateTech, Inc. 18750 Disposal Date City, State City, State 8/31/16 Tullytown, PA Lumberton, NJ Signature Date Completed By (Print or Type) Title 21/16 Gwendolyn Trumbetti Operations Coordinator

\* no not use this form for schooling linearing a semitod activities

Date of Notification (1)			Name	of Building	Owner/Operator (2	2)	DIE CI	<b>E</b> [	W/		
7 / 21 /	16		NJ	DPMC/ J	Owner/Operator (i	Check # Pag	e 2 of 3	<u> </u>	/1/		1
Agencies Notified Type Notifica	ition		Street	Address							
⊠ EPA ☐ Initial		8	PO	Box 034		] [	LI JUL	25 :	2016		$\Pi U$
⊠ DOLWD ⊠ Amended			City, S	state, Zip C	ode						-
□ DHSS Amendme     □ DCA □ Emergence     □ Emergence     □ DCA □ Emergence     □ Emer		~	Trei	nton, NJ	08625		ACRECTA	0.0011			
DCA Emergence (NJAC 5:23-8) La Emergence justification		3	Name	of Contact			Telephone Num	besini	THO	- Č	
☐ Cancellat	ion		Sco	tt Fertig			_				
			FAC	CILITY IN	FORMATION						
Name of Facility Where Abatement is T	aking Place	∋ (3)				Type of Facility (4	4)				
NJ Training School for Boys						School (K-12)		1			
Street Address						☐ Subchapter 8 ☐ Other (i.e., pri	vate and comme	:) rcial bu	ildina	S.	
1 State Street						homes, etc.)				7)	
City (5)						Square Feet	# of Floors	Bio	dg. Ag	e	
Jamesburg, NJ						1127					
County (6)			Coun	ty Code (7	)(STATE USE ONLY)	Current Use (Prid	or if being demoli	shed)			
Middlesex						Training Sch	lool				
Name of Monitoring Firm Hired by Build	ding Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
Environmental Connection		5-7			AbateTech, I						
Street Address					Street Address						
120 North Warren Street						e. PO Box 25					
City, State, Zip Code			-		City, State, Zip C						
Trenton, NJ 08608					Lumberton, I						
Project Manager for Monitoring Firm		Tolo	phone	No	Telephone No.	10 000 10	License No.		-		_
Dominic Derricole		100	9-392		609-265-2107	,	00529				
	Scheduled (	1/1-2		100000000000000000000000000000000000000	Name of OSHA N		00020				
Start Date (10)   Start Date (	Scheduled (	. 55			EMSL Analyt						
Occupancy Status During Abatement (					Street Address						
☐ Facility Closed/Vacated During Entire			ment		200 Route 13	0 North					
☐ Abatement Performed Outside of No				cribe	City, State, Zip C					-	-
Time of Abatement:AM					Cinnaminsor						
Scope of Work (Check all that apply)				-							
	N 0				☐ Full Con ☐ Mini-End	tainment with Neg	ative Pressure				
≥3 sf or ≥3 lf     ≥160 sf or ≥260 lf		enovat emoliti				g Procedure					
					☐ Non-Exe	empted (*) and Nor	-Friable Procedu	ıre			
	I	s Loca				24.0		Ab	ateme	ent T	ype
Location of	Lie	Norma ed Sol			Description of		A t	Re	Re	En	m
Asbestos-Containing Material (ACN TO BE ABATED	14 1	aintena			stos Containing Ma		Amount (Specify	Remova	Repair	Encapsulate	Enclosure
IN Facility	Cu	stodial		(	surfacing, VAT	, or	SF or LF)	<u>a</u>	1	sula	sure
(13)	Yes	(12) No	N/A		other miscellane	eous)	4			te	
Carpentry Shop Bldg. #35	T es	No		Debris	Clean up		5 cy				
Cottage #10					tting Insulation		8 LF				
Attic			+-		ed Pipe Insulati	on	20 LF				Ī
		-					190 SF				T
Wilson School #3			I L		le & Mastic Cubic Yards of	Name of Regis					
Name of Registered Waste Hauler		197	IJDEP I lauler II		Waste	G.R.O.W.S.					
AbateTech, Inc.		, D	18750		32		Lanum				
City, State					Disposal Date	City, State					
Lumberton, NJ					8/31/16	Tullytown,	PA				
Completed By (Print or Type)	Title				Signature		1.4.0	ate	1,	1	
Gwendolyn Trumbetti	Opera	tions	Coord	inator				7/2	111	0	
ASB-41	1									-	

Date of Notification (1)								wner/Operator	(2)	TER	E	1	W/ [		
/		16			N	J DPMC/	Job	# 1509-4949	Check# P	age 3 of 3		<u> </u>	y L	=	
Agencies Notified	Type Notifi	cation			Stree	et Address				5				1	
⊠ EPA	☐ Initial				PC	Box 034	1		1		2 5	2	016	1	14)
☑ DOLWD ☑ DHSS			n		City,	State, Zip	Code	9	-					T	
□ DCA	☐ Emerge				Tr	enton, N.	080	625							
(NJAC 5:23-8)	justifica	tion)	iddiin		Nam	e of Contac	ct			Telephone	Numbe	PIN	TROL	Ġ.	
	☐ Cancella	ation			So	ott Fertig	I		. L					-	
					FA	CILITY II	VFO	RMATION		0.5					
Name of Facility Where		Taking	Place	(3)					Type of Facilit	ty (4)					
NJ Training Scho	ol for Boys								School (K-						
Street Address										er 8 (Other than private and co		ial h	vildine		
1 State Street									homes, etc		mnerc	iai D	uname	٥,	
City (5)									Square Feet	# of Floor	S	В	ldg. A	ge	
Jamesburg, NJ													7		
County (6)					Cou	nty Code (	7)(ST.	ATE USE ONLY)	Current Use (i	Prior if being de	molish	ed)			
Middlesex								**	Training S						
Name of Monitoring Fire	m Hired by Bui	ilding Ov	vner (	8)	ASCN	No.	Na	ame of Abateme	ent Contractor (	9)					
Environmental Co	nnection						M	AbateTech, I							
Street Address							St	reet Address					-		
120 North Warren	Street							30 Maple Ave	e. PO Box 25						
City, State, Zip Code								ty, State, Zip Co							
Trenton, NJ 08608	3						100	Lumberton, I							
Project Manager for Mo	nitoring Firm			Tel	ephone	No.		lephone No.		License N	0.			Sev	
Dominic Derricole	)			1		2-4200	1	509-265-2107		00529					
Start Date (10)	T	Schedu	led C	omple	etion Da	ate (11)	Na	me of OSHA N	lonitor				-		
10 /21						16	E	EMSL Analyt	ical						
Occupancy Status Durin	ng Abatement	(Check o	only c	ne)				eet Address			- 92000				
☐ Facility Closed/Vaca					ment		19	200 Route 13	0 North						
☐ Abatement Performe	ed Outside of N	Iormal F	acility	Hou	rs - De	scribe	- 3	y, State, Zip Co	**************************************						
Time of Abatement:	AM	PM/		_PM		_AM		Cinnaminson							
Scope of Work (Check a	all that apply)	7 <u></u>			7500		-								
≥3 sf or ≥3 lf		Б	☑ Rei	novat	ion			☐ Full Cont ☑ Mini-Enc		egative Pressur	·e				
≥160 sf or ≥260 lf		-	De					Glovebag							
								Non-Exe     Non-Exe	mpted (*) and N	lon-Friable Prod	cedure	ŝ		B	
	2024			Loca orma						25		Ab	ateme	ent T	уре
Location Asbestos-Containing		/I)			lly by	Acho	ctoc	Description o Containing Ma		Amount		Re	Re	m	Ш
TO BE AB		")			ince/			ermal systems i		(Specify		Remova	Repair	cap	clos
IN Faci			Cust	odial (12)	Staff?	,	5	surfacing, VAT,	or	SF or LF		val		Encapsulate	Enclosure
(13)		Ι,	Yes	No	N/A		ot	her miscellane	ous)					ate	
15 Rooms at unit ve	nt locations	Ī			П	Floor ti	e			148 SF	- 1			П	П
Wilson School					Ħ			ing Plaster		15 SF	_				
· · · · · ·					14	vall &	Celli	Ing Plaster	)	15 5	_				
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				Ц							- 1				
Name of Registered Was	ste Hauler			2107	JDEP V	**************************************		oic Yards of		istered Landfill					
AbateTech, Inc.				I	auler II 18750		Wa 1	ste 2	G.R.O.W.S	S. Landfill					
City, State								posal Date	City, State						
Lumberton, NJ							8.	/31/16	Tullytown	n, PA					
Completed By (Print or T	ype)	Title			-			Signature			Date			-	
Gwendolyn Trumbe	etti	Ope	ratio	ns (	Coordi	nator					n	12	1/1	0	
1SR-41											1	10	-11	1000	

Date of Notification (1)		- 1	Name of	f Building	Owner	r/Operator (2	)			C i	,0	
7 / 20 / _	16		Camo	den Cou	nty T	echnical S	chools / Job #1	1606-5027 Chec	k#	84	47	
Agencies Notified Type Notifica	tion		Street A	ddress					9 IE	э п	7.77	-
⊠ EPA ☐ Initial			343 E	Berlin-Cr	oss k	Keys Road		In E	J E	3 1	\V/	15
☑ DOLWD ☐ Amended			City, Sta	ate, Zip Co	ode			11531				
☑ DHSS Amendme			Sickl	erville, l	LV							
DCA Emergence [ULIAC 5:23-8]		+	Name o	f Contact				Telephone Numbe	1 2	5	2016	
(NJAC 5:23-8) Justificatio			Robe	ert Wllkin	nson					_		
			FACI	LITY IN	FORM	NATION		ASBES				1 8
Name of Facility Where Abatement is T	aking Place	(3)					Type of Facility (	4)	LICEN	1SH1	3	
Camden County Tech School							School (K-12)	) (Other than K 12)				
Street Address							☐ Subchapter o	(Other than K-12) ivate and commerc	ial buil	ldings	1	
343 Berlin-Cross Keys Road							homes, etc.)					
City (5)					×		Square Feet	# of Floors	Bld	g. Ag	Э	
Sicklerville, NJ												
County (6)			Count	y Code (7)	(STATE	E USE ONLY)	Current Use (Pri	or if being demolish	ied)			
Camden							School					
Name of Monitoring Firm Hired by Buil	ding Owner (	8)	ASCM N	10.	Nam	e of Abateme	ent Contractor (9)					
Health & Safety Services			117		Ab	ateTech, li	nc.					
Street Address					Stree	et Address						
PO Box 365					30	Maple Ave	e. PO Box 25					
City, State, Zip Code					City,	State, Zip Co	ode					
Berlin, NJ 08009					Lu	ımberton, İ	NJ 08048					
Project Manager for Monitoring Firm		Tele	phone N	No.	Tele	phone No.		License No.				
Jim Proctor			56-452-		60	9-265-2107	,	00529				
	Scheduled C	omple	tion Dat	e (11)	Nam	e of OSHA N	Monitor					
8 / <u>2</u> / <u>16</u>			/ _		EN	VISL Analyt	tical					
Occupancy Status During Abatement	Check only	one)			Stree	et Address		B				
☐ Facility Closed/Vacated During Ent			ment		20	0 Route 13	30 North					
☐ Abatement Performed Outside of N	lormal Facilit	y Hou	rs - Des	cribe	City,	State, Zip C	ode					
Time of Abatement:AM	PM/	PM	/	AM	100000000000000000000000000000000000000		n, NJ 08077					
Scope of Work (Check all that apply)											175	
Scope of Work (Officer all that apply)	_		20000			☐ Full Con	tainment with Ne	gative Pressure				
≥3 sf or ≥3 If		enovat emoliti				☑ Gloveba	a Procedure					
≥160 sf or ≥260 lf		21,1071		0.00.00		⊠ Non-Exe	empted (*) and No	on-Friable Procedur				
		s Loca							Ab	ateme	ent Ty	ype
Location of	Lla	Norma ed Sol				Description	of aterial (ACM)	Amount	Rer	Repair	Encapsulate	Enclosure
Asbestos-Containing Material (ACI	MIL	aintena	75	ASD6	estos c e. ther	rmal systems	insulation,	(Specify	Removal	pair	aps	losi
TO BE ABATED IN Facility	Cus		Staff?		SI	urfacing, VAT	Γ, or	SF or LF)	<u>n</u>		ша	Ire
(13)		(12)	T		oth	ner miscellan	eous)				To To	
	Yes	-	N/A	D				3 LF				Г
Bathrooms & Closets			$\perp$	Pipe In		ion			-			-
Bathrooms & Closets				Fire Do	ors			2 each		111		-
							N				Ш	L
Name of Registered Waste Hauler		- 40	NJDEP '		55,125,000	oic Yards of		istered Landfill				
AbateTech, Inc.		1	Hauler II		Was		G.R.O.W.	S. Landfill				
City, State			1875	J	-	posal Date	City, State					
Lumberton, NJ						/9/16	Tullytown	n, PA				
	Title					Signature	1	Da	ate	1	1	
Completed By (Print or Type)	0.0000000	fione	Coord	linator			Pau t			12	1	0
Gwendolyn Trumbetti	Opera	แบบร	COOLG	mator			rrui		*	1	1	-

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

Date of Notification (1)		- 1	Name	of Building	Owner/Operator (2	2),-					
7/15/	16		PSE	&G /	Job#	1606-5019 Che	ck#8366	<del>/-</del>			
Agencies Notified Type Notification	on		Street	Address			Intell		1	W	EF
☑ EPA ☐-Imitial			400	0 Hadley	Road				-	Tank.	
□ DOLWD		) [	City, S	tate, Zip C	Code		111111				111
□ DHSS Amendment	- /			th Plaint			14 H JU	L 2	5 2	016	110
DCA Emergency (NJAC 5:23-8) justification		1	Vame	of Contac	l		Telephone Num	ber			1
Cancellation			Chr	is Colem	ian		,		_		
			FΔC	II ITY IN	IFORMATION			ICENS	SING	£	&
Name of Facility Where Abatement is Tak	ing Place (	3)	170	) I L I I I I I I I I I I I I I I I I I	II ORMATION	Type of Facility (	100				
PSE&G- Ewing Substation	g 1 1000 (	-,				☐ School (K-12					
Street Address						Subchapter 8	Other than K-12	2)	atratta a		
1475 Prospect Street						homes, etc.)	rivate and comme	rciai bi	ıllalıng	S,	
City (5)						Square Feet	# of Floors	BI	dg. A	ge	
Ewing, NJ 08638						*			3 8		
County (6)		1	Coun	ty Code (7	)(STATE USE ONLY)	Current Use (Pri	or if being demoli	shed)		-	
Mercer						Substation					
Name of Monitoring Firm Hired by Building	g Owner (8)	A	SCM I	Vo.	Name of Abateme	ent Contractor (9)					
Health and Safety Services					AbateTech, li	nc.					
Street Address					Street Address						
PO BOX 365					30 Maple Ave	e. PO Box 25					
City, State, Zip Code					City, State, Zip Co	ode					
Berlin, NJ 08009					Lumberton, N	NJ 08048					
Project Manager for Monitoring Firm		Telep	hone l	Vo.	Telephone No.		License No.				
Jim Proctor		856	-452	1311	609-265-2107		00529				
Start Date (10) Sch	neduled Cor	npleti	on Dat	e (11)	Name of OSHA M	Ionitor					
6 /20 /16	8 /	31	_ / _	16_	EMSL Analyt	ical					
Occupancy Status During Abatement (Che	eck only on	e)			Street Address						
☐ Facility Closed/Vacated During Entire I	Period of Al	atem	ent		200 Route 13	0 North					
Abatement Performed Outside of Norm					City, State, Zip Co	ode					
Time of Abatement:AM	_PM/	PIVI	/	AM	Cinnaminson	n, NJ 08077					
Scope of Work (Check all that apply)										e saures	
□ >3 sf or >3 lf	⊠ Reno	ovatio	n		☐ Full Cont	tainment with Neg losure	ative Pressure				
⊠ ≥160 sf or ≥260 lf	☐ Dem				☐ Glovebag	g Procedure					
						mpted (*) and No	n-Friable Procedu		-		
1	1000000	ocatio rmally			Description			Ab	atem		0.000
Location of Asbestos-Containing Material (ACM)	Used	Solely	/ by	Asbe	Description o stos Containing Ma		Amount	Ren	Repair	Enc	Enc
TO BE ABATED	Main Custo	tenan			., thermal systems	insulation,	(Specify	Removal	air.	aps	Enclosure
IN Facility (13)		(12)	<b></b>		surfacing, VAT, other miscellane		SF or LF)	1 22		Encapsulate	6
(15)	Yes	No	N/A							(D)	
Along vertical sides of glass block		7		caulk			144 LF				
Loft Bathrooms				Floor ti	le		240-SF		П	П	
Please see attaached		=			see attached	)	Please see	×		П	$\exists$
Please see attached				riease	see attached		attached				
NI SCDLIASCI_LATE.			□ .	Mant-	Cubic Vassland	None of Darie	torod Landell			Ш	
Name of Registered Waste Hauler	INC	67,893,783	DEP V uler ID		Cubic Yards of Waste	Name of Regis Conestoga					
Environmental Transport Group,	1140.		0069		40		Landin		-		
City, State					Disposal Date	City, State	DA				
Flanders, NJ					8/31/16	Morgantow					
A V	ïtle				Signature	1. A	D	ate		111	
Gwendolyń Trumbetti	Operatio	ns C	oordi	nator	(/X)	MI		. 1 ]	12	116	2

#### POTENTIALLY REGULATED WASTE INVENTORY SUMMARY (AS OF 06/02/16)

#### 1475 PROSPECT STREET EWING TOWNSHIP, MERCER COUNTY, NEW JERSEY

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	JUL	2	5	2016	

			ASBESTOS CONTRO!
lanu / D	Ser las	Potential	LICENSING
Item / Description	Location	Regulated	Estimated Total Quantity
		Material	
Caulking	Along vertical sides of glass block frame windows	Asbestos	144 LF
VAT (Flooring)	Loft Bathrooms	Asbestos	240 SF
Black Expansion Joint	Center Warehouse Area Floor	Asbestos	64 LF
Exterior Black Coating on Red Brick	Exterior of Offices on Red Brick	Asbestos	140 SF
Vibration Cloth	HVAC Closet - Northeast Corner of Old/Front Office Area	Asbestos	2 SF
Black Vapor Barrier	Under/Behind Exterior Brick Façade of Old/Front Office Area	Asbestos	540 SF
Roofing Material	Front Office Roof	Asbestos	2,000 SF
Roof Flashing	Center Warehouse Roof	Asbestos	10,200 SF
ex9 inch Floor Tile (gray w/white streaks) and Associated Mastic	Mezzanine	Asbestos	240 SF
Black Floor Mastic	Old/Front Office Area Floor	Asbestos*	480 SF
Roof Flashing	Front Office Roof	Asbestos*	140 SF
Roof Flashing	Back Warehouse Roof	Asbestos*	140 SF
Green-Painted Wood Windows	Downstairs Front Office Upstairs Loft Area Downstairs Office Bathrooms	LBP Haz Lead	(8) 3x4ft Windows, Sills, Frames (8) 3x5.5ft Windows, Sills, Frames (2) 2x3ft Windows, Sills, Frames
luorescent Light Bulbs	Throughout building	Mercury	192
hermostats, Timers, etc.	Throughout building	Mercury	8
ligh Intensity Flood Lamps	Throughout building	Mercury	28
luorescent Light Ballasts	Throughout building	PCB / Non-PCBs	150

#### NOTES:

Potential regulated waste inventory as detailed from the Omega Pre-Renovation Report dated February 20, 2015 and the Bureau Veritas NA ACM, PCBs and LBP reports dated May 16, 2016. The Contractor is to notify PSE&G immediately should they encounter or identify any other suspected potential regulated waste.

<sup>\*:</sup> PCBs were detected between 2.0ppm and 4.2 ppm below the EPA's 50ppm TSCA Bulk Product Waste requirements.

Date of Notification (1)			Name	of Buildin	g Owner/Operator (	2)					
7 / 19 /	16		Poi	nt Pleasa	ant Beach Schoo	ol District / Jo	b #1603-5001 C	hec	k #8	405	
Agencies Notified Type Notifica	ation		Street	Address				п	D.O.	E	Personal Per
⊠ EPA ☐ Initial			299	Cooks L	_ane	IID			$\mathbb{M}$	E	In
☑ DOLWD ☑ Amended		)	City, S	State, Zip C	Code	115	1			1	H
☑ DHSS Amendm		/			ant Beach, NJ 08	3742					111
□ DCA □ Emergen (NJAC 5:23-8) □ justification		9		of Contac	7-ABS COMPANION SHEET CONTRACTOR	A STATE OF THE STA	Jelephene Number	Er 2	016	-	14)
Cancellat				rk McNar							
			FA	CILITY IN	IFORMATION		ASBESTOS C	ON	- TROI	2	
Name of Facility Where Abatement is 7	aking Place	e (3)		-1-11		Type of Fadility (				- Ct	
Point Pleasant Beach High Sch		***************************************				School (K-12)	Walter Committee of the				
Street Address							(Other than K-12)		.ttuttu.		
700 Trenton Ave.						homes, etc.)	vate and commerc	iai Di	anding	JS,	
City (5)						Square Feet	# of Floors	В	dg. A	ge	
Point Pleasant Beach, NJ 0874	2									7	
County (6)	115		Cour	nty Code (7	)(STATE USE ONLY)	Current Use (Price	or if being demolish	ied)			
Ocean				50 80		High School					
Name of Monitoring Firm Hired by Build	ding Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
RJB Environmental	-				AbateTech, I	nc.					
Street Address					Street Address					THU.	
56 East Bridge Street					30 Maple Ave	e. PO Box 25					
City, State, Zip Code					City, State, Zip Co				W. 34 =		-7773
Morrisville, PA 19067					Lumberton, N						
Project Manager for Monitoring Firm		Tele	ephone	No.	Telephone No.		License No.				
Richard Beach		2	67-991	-9212	609-265-2107		00529				
Start Date (10)	Scheduled (	Comple	tion Da	ite (11)	Name of OSHA M	lonitor					
7 /18 /16		25	5_/_	16	EMSL Analyt	ical					
Occupancy Status During Abatement (	Check only	one)			Street Address	3 37 SYMMON 11-32					
☐ Facility Closed/Vacated During Entit					200 Route 13	0 North					
Abatement Performed Outside of No					City, State, Zip Co	ode					
Time of Abatement:AM	PIVI/	PIVI		Alvi	Cinnaminsor	, NJ 08077					
Scope of Work (Check all that apply)						a la acceptant de la Norma	this Deserves				
☐ ≥3 sf or ≥3 lf	⊠ R€	enovat	ion		☐ Full Cont	ainment with Nega losure	ative Pressure				
≥160 sf or ≥260 lf	-	emolitic				g Procedure					
		. 1			⊠ Non-Exe	mpted (*) and Non	-Friable Procedure				-000 to 1000
Location of		s Locat Norma			Description o			Ab	atem		1
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TO BE ABATED	IVI	aintena todial			., thermal systems	insulation,	(Specify	Remova	pair	aps	Enclosure
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(19)	Yes	No	N/A	1	other miscellane	043)				(i)	
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Dreeze way				Hallsto	e rancis )	1	300 01				
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Name of Registered Waste Hauler			JDEP \		Cubic Yards of	Name of Registe					
AbateTech, Inc.			lauler II 18750		Waste 12	G.R.O.W.S.	Landfill				
City, State					Disposal Date	City, State		140			
Lumberton, NJ					7/25/16	Tullytown, F	PA				
Completed By (Print or Type)	Title				Signature	1	Date	9		1	
Gwendolyn Trumbetti	Operat	ions (	Coordi	inator	( A	met	V	7/1	9	11/2	
ASB-41				Martin of America		000		111	- /	1	
MAY 11	* Do not	use th	is form	for asbest	os licensure exemp	ted activities.					



#### CK 1010

#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

CK 1010		CATION		lersey TOS ABAT 60 and 12:1		ENT		CE			7	
Date of Notification (1) 7/18/16			Building Ov a Lamste	mer/Operatein	tor (2	)		JUL 25	201	16	IIL	M
Agencies Notified  Type Notification  I per	ing 1	River E	e, Zip Code dge, NJ	07661				BESTOS CO LICENS elephone Num	ING	OL	Š.	
			ITY INFOR			Type of Fa	ciliby (4)			-		
Name of Facility Where Abatement is Taking Place Residential Home Street Address	e (3)				faced from Biral	School Subc	ol (K-12) napter 8 (O (i.e. private	ther than K-12 e & commercial	al build	ings, I		s,
City (5) River Edge					1	1700	2	Section 2000 to the section of the s	60	ug. A( )+/-	ic.	
County (6) Bergen		County C (STATE U	ode (7) SE ONLY)				se (Prior if b tial Home	eing demolish	ed)			
Name of Monitoring Firm Hired by Building Owner	(8)	ASCM	No.				nt Contract atement I					
Street Address				100000000000000000000000000000000000000		ddress . Midlan	d Ave.					
City, State, Zip Code				100000		ate, Zip Co e Brook,	ode NJ 0766	3				
Project Manager for Monitoring Firm		Telephor	ne No.	2.53		one No. 00-3184		License N 01305	0.			
	eduled Con	npletion [	Date (11)	Nai	me o	of OSHA N	onitor					
Occupancy Status During Abatement (Check Only Facility Closed/Vacated During Entire Period Abatement Performed Outside of Normal Fa Other – Describe: 8A.M to 4P.M	of Abaten					Address ate, Zip Co	ode					
Scope of Work (Check All That Apply)  ≥3 sf or ≥3 If ≥160 sf or ≥260 If	Renova Demolif				×	Mini-Er Gloveb	closure ag Procedu	vith Negative F re and Non-Friab			e	Ü
	Is Locat					19					ment pe	
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Dasement	^				. 1			300 01	A			
Name of Registered Waste Hauler Newark Carting	H	NJDEP W Hauler ID 04509		Cubic Yard of Waste 4 CU	ds		ame of Reg ESI Landf	istered Landfil	<u> </u>	1		
City, State Newark, NJ				Disposal D	Date		ty, State ethlehem	, PA				
Completed by	itle President			Signa	ature		/ki/	D	ate /1-8/1	6		

Project #	NO	TIFIC (Pur	ATION C	OF ASBES	STOS AE	BATEM (2:120)	ENT		Che	Bk #L34	65	$\mathbb{V}$	E	#
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DOH justification justification		V	ince P	ietrucha	3				1					
DCA Carlochaton				ITY INFO		N			-					
Name of Facility Where Abatement is Taking	Place (3)	4-11-	111012				Тур	e of Facility (	4)					
Lafayette Mills School								School (K-1	2)					
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Manalapan, NJ														
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Name of Monitoring Firm Hired by Building O	wner (8)		ASCM	NU.				toration LI		·-/				
AHERA						Street					-			
Street Address								side Rd						
P.O BOX 385								Zip Code				-		1177
City, State, Zip Code				¥7					60					
Oceanville, NJ 08231			T-1	- Na		Teleph		n NJ 078	09	License 1	Vo.			
Project Manager for Monitoring Firm			Telephor			973-9				01133				
John Smoyer	0 1 1 1	1.3		52-1833				SHA Monitor	1	01100				
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00/00/2010	08/05/2					Street	and the same				-		_	
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Abatement Performed Outside of Norm Other – Describe:	al Facility	Hours	3		_			J 07083						
						Offici	1, 14	3 07003						
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Name of Registered Waste Hauler Nick Restoration LLC		1	Hauler ID 3782		of Wa			G.R.O			N-724			
City. State		3	3102		Dispo	sal Dat	е	City, Sta	ate	^				
Randolph, NJ 07869					TBD		71.	Tullyto	wn, P	Α	2=4=			
Completed by Elvira Mrda	Title Pres	ident			8	Signatu	Eli	11/9 K	lod	9 0	Date 17/19/2	2016		

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50 Sargent Avenue	9							etc.)		rate & comm					s,
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County (6) Warren		9925)()		County C (STATE U	ode (7) SE ONLY)			orrent Us acant	se (Prior	if being den	nolishe	d)			
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Street Address 275 Route 10E						1 772	treet Ad 235 W	ddress atchung	g Aveni	Je					
City, State, Zip Code Succasunna, NJ 0	7876					- 22232		te, Zip Co Drange,		052					
Project Manager for Mo Mike Berta	nitoring Firm			Telephor 973-32	ne No. 8-3160		elephor 373-66	ne No. 39-2900	)	Licer 0123	nse No 31				
Start Date (10) August 1, 2016		Schedule		mpletion D 2016	Date (11)	10-20-20		OSHA M ider Lab		ies Globa	l Inc.				
Occupancy Status Duris	ng Abatement (Che	ck Only Or	ie)			1	treet A					-			
Facility Closed/Vac Abatement Perform Other – Describe:	cated During Entire med Outside of Norr	Period of A	Abater Hour	ment s		С	ity, Sta	V Cary te, Zip Co	ode	10					
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Asbestos-Containin <u>TO BE Al</u> In Fac (13	BATED cility	Ma	intena	nce/ Staff?		tos Contain thermal sy surfacing other mise	stems i g, VAT	nsulation or		Amount (Specify SF or LF	/	Removal	Repair	Encapsulate	Enclosure
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Basement Sto			X			Fire Door				56SF		X			
Atti	ic		X		HVA	C Duct B	ands	at Sean	ns	100SF		X			
Name of Registered War Future Sanitation In			170	NJDEP W Hauler ID		Cubic Ya of Waste		1		egistered Li n Facility	andfill				
City, State Passaic, NJ 07055						Disposal	Date		ty, State ullytow						
Completed by Barbara Reed		Title Pres	ident			Sigr	nature	baco			Dat 07		2016		
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Date of Notification (1)	, D	ng Owner/Operator (2) HOUT TERMACE	AST STAR U				
Agency Notified Type Notification	Street Address	DULLES DO	1U =				
□ EPA □ Initial	City, State, Zip		ASSESTOS CONTROL & T				
DEP Amended Amendment #		I'MOHU	2) / 6/20 Pusing				
☐ Emergency (including ☐ DOH ☐ institution)	Name of Cont	act	Telephone Number				
DCA COMPANIENT OF	MR. E	BAUER					
		FORMATION	(0)				
Name of Facility Where Abatement is Taking Place	(3)	Type of Facilit	y (4)				
DUMONT TERRACE	AMS IN		8 (Other than K-12)				
Street Address  1 DULLES I	rive :	DOther (i.e., phomes, etc.	rivate & commercial buildings,				
City (5)		Square Feet					
DUMONT	1	7000	Prior if being demolished)				
County (6)  RENCSEN	County:Code ONLY)	(7) (STATE USE   Current Use (	DENCE ARTS				
0-100	ASCM No.	Name of Abatement Contractor					
Name of Monitoring Firm Hired by Building Owner (8)	ASSIR NO.	Best Removal In					
Street Address		Street Address	:				
	74	450 South River	r St				
City, State, Zip Code		City, State, Zip Code	. 07(01				
		Hackensack, N.	License No.				
Project Manager for Monitoring Firm	Telephone No.	Telephone No. 201-329-7444	00388				
( Call Call ( Call )	npletion Date (11)	Name of OSHA Monitor	1				
7/25/16 7/2	7/15	Omega Environi	nental				
Occupancy Status/During Abatement (Check only		280 Huyler St	_				
☐ Facility Closed/Vacated During Entire Period of ☐ Abatement Performed Outside of Normal Facility	Abatement v Hours	City, State, Zip Code					
Other - Describe: 8 Au : I'. PM	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	S. Hackensacl	,N.J. 07606				
Scope of Work (Check all that apply)		Full Containment wi	th Negative Pressure				
☑≥3⊈01≥3∦	Renovation	Mini-Enclosure	20				
□ ≥ 160 sf or ≥ 260 lf	a Demondon	☐ Non-Exempted (*) a	nd Non-Friable Procedure				
	Is Location	3	Abatement Type				
Location of	Normally Used Solely by	Description of					
Asbestos-Containing Material (ACM) TO BE ABATED	Maintenance/ As	bestos Containing Material (ACM) Le., finermal systems insulation,	Amount (Specify SF or LF)				
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Bosier NOOM #4	X	MOITAL CRUINN					
BOWER ROOM #4	7 140	ERMIC INSULATION)	18 LF K				
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	NJDEP Waste Hauler	Cubic Yards of Name of Re	gistered Landiff				
Name of Registered Waste Hauter Best Removal Inc	ID No.		va Enterprises ,LLC				
Ch. Sheh	1/109	Disposal Date City, State					
City, State Hackensack , N.J. 076	501		esburg, Oh, 44688				
Completed by Title		Signature Ovo 10	Date /				

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) 20 16 Type Notification Street Address Agencies Notified 100 Initial ASBESTOS CONTROL & City, State, Zip Code DEP Amended Amendment # DOL AWR Emergency (including Telephone Number Name of Contact justification) DOH Cancellation DCA FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) # of Floors Bldg. Age Square Feet City (5) 60 10,000 Current Use (Prior if being demolished) County Code (7) County (6) (STATE USE ONLY) Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Street Address Street Address State. Zip Code City, State, Zip Code Telephone No Telephone No. Project Manager for Monitoring Firm Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) IAVOL 0 Street Address Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours Other - Describe: Scope of Work (Check All That Apply) Full Containment with Negative Pressure Renovation ≥3 sf or ≥3 lf Mini-Enclosure Demolition 国 ≥160 sf or ≥260 lf Glovebag Procedure M Non-Exempted (\*) and Non-Friable Procedure Abatement Is Location Type Normally Description of Location of Used Solely by Amount Asbestos Containing Material (ACM) Asbestos-Containing Material (ACM) Maintenance/ (Specify Kemova (i.e. thermal systems insulation, Repair TO BE ABATED Custodial Staff? surfacing, VAT, or SF or LF) In Facility (12)other miscellaneous) (13)Yes No N/A NSU ALION Name of Registered Landfill NJDEP Waste Cubic Yards Name of Registered Waste Hauler Hauler ID No. of Waste INC NOUBI Disposal Date City, State N.D. 08857 010 Signature Date Title Completed by PESIDEN

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

State of New Jersey

CANCELLATION

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ate of Monication (1)	7/20/16				SEAN	3 BALLIN	10 300L (	· · · · · ·	i		1
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Street Address						Other (i.e. prin	rate & commercia				
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City (5)	5 WILL	70		1		2500.			995		4
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County (6)	UNION		ONL				SIDEN				$\dashv$
Name of Monitoring Fi	rm Hired by Building Owner	ASC	CM No.			ement Contractor (9					
(8)			6		Best Re	emoval In	2				
Street Address						uth River	St				
					City State, Ze	Code		30			
City, State, Zip Code					Hacken	sack, N.J	. 07601				_
Project Manager for N	fonitoring Firm	Telep	phone I	Vo.	Tolombone No	1	LICEUSE ING.	i			
Project Manager for N	CHECKED . S.					9-7444	00300	)			-
Start Date (10)	Scheduled Co			11)	Name of OSH	Environm	ental				
81710		112			Street Address						
	sing Abatement (Check only					Huyler St					
☐ Facility Closed/Vac	cated During Entire Period on ned Outside of Normal Facility	f Abaten	nent s		City State 7	in Code		7606	糖		
☐ Abatement Perion: ☐ Other — Describe:	ned Outside of Normal I do	-				ackensack					
Scope of Work (Chec	k all that apply)			,	· QF	uli Containment wit	h Negative Press	sure			
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	TIME A Therefore	N.F	DEP W	faste Ha	uler Cubic Yard		gistered Landfill	W.,	200		,
Name of Registered	i Waste Hauter emoval Inc		No.	+	Waste /	Miner	va Enter	prise	s ,I	) با د	ز
Dog+ Do			171	109							
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Best Re	al .	7601			Disposal D	Wavn	esburg,	Oh, 44	688		_
Best Re	sack , N.J. 0	7601			Disposal Dis	∠ Wayn	esburg,	0h, 44	1	. j ,	,
Best Re	sack , N.J. 0	ima	tor		8/8/1	L Wayn		0h, 44   Date	688 /20	10	16

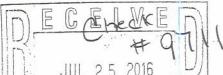
NOCK

			(Pu	rsuant	to NJAC	8:60 and 5:16	5)	D E P E	э П	7.7	P		
Date of Notification (1)				Name o	of Building	Owner/Operator (2	2)	DECEIVEN					
7 /	20 /	16				Holy Cross	1	183					
	Type Notification				Address			U JUL 2	5 2	016	il	U	
Agencies Notified  ⊠ EPA	I ype Notificatio	וונ			entral Av	/enue		1 1 001 1	JL	010	1	7	
☑ DOLWD	☐ Amended			2007/2007	ate, Zip Co								
⊠ DOH	Amendmen	t#			geton, N.		1	ASBESTOS			L &		
☐ DCA	☐ Emergency				of Contact			Telephone Numb	4SINC	<u> </u>			
(NJAC 5:23-8)	justification  Cancellation			11001110		ding Contractor	'S						
	M Caricellation												
Name of Facility Where	Abatamant is Tal	king Place	(3)	FACILITY INFORMATION  Type of Facility (4)									
Saint Teresa of Av		Killy I lace	(0)				School (K-1	2)					
	ila Ciluicii						Subchapter	8 (Other than K-12)	and beauty	dines			
Street Address							Other (i.e., homes, etc.)	private and commerc	lai buli	aings	'n		
46 Central Avenue	to to						Square Feet	# of Floors	Bld	g. Ag	e		
City (5)							20,000	2	100	00			
Bridgeton				Tosus	tu Cada (7)	(STATE USE ONLY)		Prior if being demolis					
County (6)	2			Coun	ty Code (7)	NSTATE DOE ONET)	Church	not it being dome.				i	
Cumberland		_	(0)	1001	NIa	Name of Abatem	120,121,000,000	9)					
Name of Monitoring Firm		ng Owner	(8)	ASCM	NO.		onmental, LL						
MDG Environment	tal, LLC					Street Address	Offitterital, LL				-		
Street Address		_				623 Cutler A	VODUO						
1000 Maplewood I	Orive, Suite 20	7										100000	
City, State, Zip Code						City, State, Zip C							
Maple Shade, NJ (			_			Maple Shade	e, NJ 00052	License No.					
Project Manager for Mo	nitoring Firm			ephone		Telephone No.	0	00842					
Chris Macri				56-755		856-755-009		00042					
Start Date (10)		cheduled				Name of OSHA I							
07 /26	/ _16_	07	1 _2	9 / -	16	EMSL Analy	ticai, inc.			70 m 30 m			
Occupancy Status Duri						Street Address	14						
□ Facility Closed/Vaca	ated During Entire	e Period o	f Abat	ement		200 Route 1							
Abatement Performe	ed Outside of No	rmal Facil	ity Ho	ırs - Des 1	AM	City, State, Zip C							
Time of Abatement:	AIVI	PIVI/		1	'VIVI	Cinnaminso	n, NJ 08077						
Scope of Work (Check	all that apply)					⊠ Full Co	ntainment with N	legative Pressure					
≥3 sf or ≥3 If		⊠ F	enova	ition		☐ Mini-En	closure						
□ ≥160 sf or ≥260 lf			emoli			☐ Gloveb:	ag Procedure	Non-Friable Procedu	re				
30.00						☐ NOII-EX	empled ( ) and	TVOIT-I Habie 1 1000dd		atem	ent Ty	vne	
	estruct •		ls Loc Norm			Description	of .					T	
Location Asbestos-Containin		Us		lely by	Asbe	stos Containing M	laterial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure	
TO BE A		10		nance/	(i.e	e., thermal systems	s insulation,	(Specify SF or LF)	ova	air.	squ	unso	
IN Fac		01	(12			surfacing, VA other miscellan		31 01 11 /	_		llate	G)	
(13	)	Yes	N	o N/A			50 co 40 co 50 co 4° co						
Boiler Room					Pipe In	sulation		170 LF	$\boxtimes$				
Boller Rooth			15	1		*11			To				
			1	무						In		$\overline{\Box}$	
		ᆜᆜ											
						* * *				Ш	Ш		
Name of Registered W	aste Hauler			NJDEP		Cubic Yards of Waste	5 2000000000000000000000000000000000000	egistered Landfill	75:11				
Freehold Cartage	•			Hauler 0226		2		land County Land	11111				
City, State						Disposal Date	City, State						
Freehold, NJ						07/29/2016	Newbur	g, PA					
Completed By (Print or Type) Title						Signature		1	ate				
Christina Lynch Operations Manager							20)X		7/2	0/	16		
JJulia Lynon						UIV V	<u> </u>			-			

CK 1475200271

				(PL	ırsuant t	to NJAC 8	3:60 an	d 12:120	0)	F	) E	G	EI	V	7 [	-	7
2000	e of Notification (1) 18/2016					Building ( Baldwin	Owner/(	Operator	(2)			0 1					
Age	ncies Notified	Type Notification			Street Ad	ddress			- 1000		Ш	JUL	25	20	16	TL	1
×	EPA DEP	X Initial Amended			City, Star	te, Zip Co	de				_					J	1
×	DOL	Amendment Emergency (		<u> </u>	Summi	it, NJ 07	901			-	ASB	ESTO	S CO	NTI	ROL	å.	
×	DOH DCA	justification)  Cancellation	iricidaling	1.0		Contact Baldwin					Tele	<del>phone 1</del>	Numbe	30	-	WIND WATER	
			LITY INFO	RMAT	ION							150					
	ne of Facility Where A use	batement is Taking	g Place (3	5)					Тур	e of Facility ( School (K-1	20.25						
Stre	et Address								X	Subchapter Other (i.e. p	8 (Othe			uildi	ngs,	nome	s,
City	(5) mmit		Square Feet # of Floors Bldg. Age N/A N/A N/A					je									
5.00	inty (6) sex	County Code (7) (STATE USE ONLY)								rent Use (Pri use	or if bei	ng demo	olished)				
Nan N/A	ne of Monitoring Firm	Hired by Building (	Owner (8)		ASCN	No.	æ	Name of Abatement Contractor (9) D&S Abatement, Inc									
Stre	et Address	72						Street 11 R		ess ngren Ave	nue						
City	, State, Zip Code									Zip Code NJ 07512							
Project Manager for Monitoring Firm Telephone No.								Teleph 973-		No. 8685		Licens 0131					
	t Date (10)				npletion [	Date (11)				SHA Monitor							le C
	/01/2016	A	08/02/2					D&S Street	Service Control	itement, Ir	ic						
	upancy Status During Facility Closed/Vaca				nent					ess ngren Ave	nue						
×	Abatement Performe Other – Describe: 0	ed Outside of Norm					_	U Printing State of the last		Zip Code NJ 07512							
Sco	pe of Work (Check Al	l That Apply)	77 TO SOL														
×	≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit				Full Containment with Negative Pressure  Mini-Enclosure Glovebag Procedure									
								L	J N	on-Exempte	d (*) an	d Non-F	riable F		edure Abate		-
	Location	of	1	Locati Vormal	ly		De	escription	n of						Ту	e .	
	Asbestos-Containing TO BE ABA	Material (ACM)		ed Sole iintenai			tos Cor		Materi	al (ACM)		mount Specify		, l	200	5	ш
	In Facili		Cus	todial 9 (12)	Staff?	(1.0.	surfa	ecing, VA miscella	AT, or			or LF)	9	Removal	Repair	Encapsulate	Enclosure
	(13)		Yes	No	N/A		Outer	miscenai	ricous	')			2	Val	Ŧ	iiale	ure
	baseme	ent		х			duc	t insula	ation		15	50 SF	x				
							1.2						100				
Company Co	ne of Registered Was S Abatement, Inc	te Hauler		H	IJDEP W lauler ID		of Wa			Name of Waste				Д			
City, State							sal Date		City, Stat	190	90111011		1				
						Disposal Date City, State TBD Tullytown, PA											
	npleted by		Title					Signature	e –	Ca 1			Date 07/1	2/2	016		
Ned Joksimovic PM									<	110			0771	Ji Z	010		

	hlama of E	Building Owner/Op	perator (2):		L 0	016	All	11
Date of Notification (1) 7 - 20 - 1	( Name of E	Stillding Owner/Of	Ke	norand	RÓ	Vib ac	الا	1
Agencies Notified Type Notification	Street Add	dress		e OGRESTOR	ah k	TRO	- &	
□ EPA  Initial	City. State	e, Zip Code	- J. 6 7 E.	LICE	VSIN	G		-
DEP Amended Amendment #		We	strield	NJOT	709	90		
DOH Emergency (incli	I Mailing of	1 17	• 0	Telephone Numb	er '			
□ DCA □ Cancellation		ITY INFORMATIO	road					1
Name of Facility Where Abatement is Taking Pl		III INFORMATIO	Type of Fac	cility (4)				1
Single family	Dwellin	19		I (K-12)				
Street Address		ر	Other	apter 8 (Other than K-12) (i.e. private & commercial	buildin	igs, ho	mes,	
			etc.) Square Fee	et # of Floors	Bld	g. Age		+
City (5) Westfield N	T 070	90	Oqualo	2	-	70 1	-	
County (6)	County C	ode (7)	Current Us	e (Prior if being demolishe	d)	-		1
Union		SE ONLY)		10(0)				+
Name of Monitoring Firm Hired by Building Own	ner (8) ASCM	No.	Name of Abatemer	Schooled	ie.S		nL	
Street Address	162	14/40	Street Address	232		and the second	0.00	1
Ro. Bex 33	7		P.O. Bo	3x 35 †				-
City, State, Zip Code	AT DO	523	City State, Zip Co	de LAL ALT	ME	15	33	
New Egypt, 1	Telephor	ne No	Telephone No.	License No	9	A	4	1
Project Manager for Moeiffiri gr Firm		758-3365	609 758-3	3365 00	0	4		
Start Date (10)	cheduled Completion [	1 40	Name of OSHA M	onitor	-			1
8-1-16		16	EPC Street Address	Technologies	Ln			-
Occupancy Status During Abatement (Check C				box 337				Ì
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal	iod of Abatement Facility Hours		City, State, Zip Co					
Other – Describe:			New Egi	pt NJ C	185	33		
Scope of Work (Check All That Apply)			~					1
≥3 sf or ≥3 lf	☐ Renovation ☐ Demolition		Full Cor	ntainment with Negative Proclement	ressure	2		
\( \simeq \geq 160 \text{ sf or ≥260 lf}	_ bemoinen	id.	Gloveba	ng Procedure empted (*) and Non-Friabl	е Ргос	edure		
	Is Location					Abatem		
Location of	Normally	De	escription of			Туре		+
Asbestos-Containing Material (ACM)	Used Solely by Maintenance/	Asbestos Con	taining Material (AC I systems insulation	M) Amount (Specify	R <sub>0</sub>	R	Ence	
TO BE ABATED In Facility	Custodial Staff? (12)	surfa	acing, VAT, or miscellaneous)	SF or LF)	Remova	Repair	Enclosure	
(13)		Ollier	miscenarieous)		al		re	
	Yes No N/A	() II	april TSI	100 SF	~	$\vdash$		7
Garage	×	Cardbo	ard 131	100 31	X	1		
						1		7
	NJDEP V	Maste Cubic	yards Na	ame of Registered Landfill				-
Name of Registered Waste Hauler	Hauler ID	No. of W		Vaste Manage		۲ ۲	PIA	+
EPC Technologies	170	Dispo	nsal Date Ci	ty, State		0 (		7
City. State	VJ.	9	5-2-16 /	Mornisville E	A			
Completed by	Title		Signature	Da	te 7-	20	-16	
Steve Schenker	President		Sleep	Check				



					1 (0):	- 111 1	. 006 2.0		10	1	-
Date of Notification (1) 7-20-1	6	Na	me of B	Building Owner/C	perator (2)	ee I	Narda	VISIT	ear M		
Agencies Notified Type Notification		Str	eet Add	dress	4, 32	0	ee TLICENS	ING	HOL	. α	
			, , , , , ,	÷ (#x. •••)	'atl	K	PE TEICHE	1140			=
☐ EPA	3 *** J	Cit	y, State	, Zip Code	. 12.		LIT	130	20.1	1	
DOL Amendment #_					ist Du	lunsw	ick, NJ	U	ישו	6	
☐ Emergency (inc	luding	Na	me of C	Contact ~			Telephone Numb	er			
DOH justification Cancellation			L	ee Di	Vardo						
B BOA . B GENTAL			-	ITY INFORMAT	ON				- 7/4		_
Name of Facility Where Abatement is Taking F	Place (3)				Тур	e of Facility (4	-				
Single family	, D	We	· Ili.	25		School (K-12	2)				
Street Address	1			)	-	Subchapter	8 (Other than K-12) rivate & commercial	huildi	nas t	оптея	
						etc.)	ilvate a commercial	Darron	.90, .		,
City (5)		4	VALUE OF THE STATE	-		are Feet	# of Floors	Blo	ig. Ag	ie.	
East Brunsw	CK	٨	15	0881	6		2	5	0	÷	
	i Cit			ode (7)	Cur	rent Use (Prid	or if being demolishe	ed)			
County (6) Middle Sex				SE ONLY)							
Name of Monitorina Firm Hired by Building Ow	mer (8)	-	ASCM	No. a	Name of Ab	patement Con				_	
The state of the s		ľ	3	N/A	FP	C Tee	chaoleg	ies	95	In	6
	6100			4-40-4	Street Addr	ess	0				
Street Address	17				P.0	Box	337				
F.O. DON DE	9 6	-	-		City State,		. 117	A	16	100	7
City, State, Zip Code	T. W	(	180	533	New	Equ	At M	U		3,	5
New Egypt,	40	T	elephon	ne No.	Telephone	No.	License No	. 0	A	6 P	
Project Manager for Mooit rill gil Firm		1 678		758-3365		8-336	5 00	ک (	M	4	
Trac Schenker	Scheduled	Comp	letion [	Date (11)	Name of O	SHA Monitor	,	- Villa	-		
Start Date (10) Aug 2, 2016	ALLE	0		16	F	(Tec	hnologies	I	ic		
	1 10-7	$\alpha$	40	7.6	Street Add	ress	7				
Occupancy Status During Abatement (Check		- 100			P-0	BOR	337				
Facility Closed/Vacated During Entire Pe	riod of Aba	ateme	กเ		City, State	Zip Code					
Abatement Performed Outside of Norma     Other – Describe:	i radiity ri	ouic	*		New	Egypt	ALT C	185	53	3	
					1 6	JIP.	700				
Scope of Work (Check All That Apply)					п .	Eull Containm	ent with Negative P	ressur	e		
≥3 sf or ≥3 lf		novati			70 I	Mini-Enclosur	е				
□ ≥160 sf or ≥260 lf	□ Dei	HOHLIC	N.1.:		×	Glovebag Pro	cedure	o Pro	~dur		
				1		Non-Exempte	d (*) and Non-Friable			ement	
7	ls L	ocatio	n						Ту		
Location of		mally		0	escription of		A a at				
Asbestos-Containing Material (ACM)	Used	tenan		Asbestos Co	ntaining Mate al systems ins	nal (ACM)	Amount (Specify	ZJ.	71	nc	E
TO BE ABATED	Custo			(i.e. trieffin	facing, VAT, o	)r	SF or LF)	Removal	Repair	Encapsulate	Enclosure
In Facility (13)		(12)		othe	miscellaneou	rs)		val	=	ulat	ure
(.5)	Yes	No	N/A	1						C	
		. 40		1. 7	. 1 \$410.	c 0	50 SF	X			
Basement	X			HIR DU	ict WR	ΨP	0030	1			
					7/9533			-		-	-
	+										1100,401,30
		I k'	JDEP V	Maste Cut	ic Yards	Name o	f Registered Landfill		1		
Name of Registered Waste Hauler		10000000	auler ID	1000	Vaste				,	a 1	DiA
EPC Technologies	S			00-	ŀ	was	te Manage	nen	Fo	+ 1	VT
City, State			- 10	Dis	posal Date	City, Sta		Δc			
	NJ	S,		18	5-3-16	Mor	- cl 2 d ( bc -	PA			
New Egypt Completed by	Title		- 13 - 12 - 12 - 12 - 12 - 12 - 12 - 12		Signature	-c1	Da Da	ate 7	` ¬	2	11-
Steve Schenker	Pres	sid	ent		Sleza	p)>0%	when	/	d	0-1	9
C ILTHE MAIN IN LIGHT	1 2 500		-			and the second					

## NOCK

State of New Jersey

Blate of the first	
NOTIFICATION OF ASBESTOS ABATEMEN	T
(Pursuant to NJAC 8:60 and 12:120)	

		(Purs		NJAC 8:60 at				7 E C	EI	$\mathbb{V}$	F			
ate of Notification (1) 7/20/2016				me of Building O	wner/Opera Macalu	tor (2) so Tre	ee Service	grig in	20	9192	7			
DEP X Amen	Notification ded Notificati dment #			reet Address ty, State, Zip Cod	502 Ch		Road	ASBESTO	Z J S CO ENSIN		DL E.			
y l DOU justifi	ency (includi cation) llation	ng	N	ame of Contact Chris l	Macaluso		Tele	phone Number						
		· F	ACILI	TY INFORM	ATION	m	of Papility (4)					$\neg$		
Jame of Facility Where Abatement is Taking Residence Treet Address	Place (3)					Type	[ ] S [x]	School (k-12) Subchapter 8 (other Other (i.e., private			buildin	gs,		
City	County (6)			ounty Code (7) TATE USE ONL	Y)		re feet 1000 sf	# of Floors  1	Bldg.	Age 60				
Brick	Ocean						ent Use (Prior if be Marina							
Name of Monitoring Firm Hired by Building	Owner (8)		A	SCM No.	Name of	Name of Abatement Contractor (9) Guardian Contracting, Inc.								
N/A Street Address					Street Address 1889 Route 9, Unit 61									
City, State, Zip Code					City, Sta		Code Toms Ri	ver, New Jerse		55-12	71			
Project Manager for Monitoring Firm	mber		Telephon 732-34			00624	unoci							
Scheduled Start Date (10) 7/21/16	mpletion	Date (11)	Name of		Monitor E.M.S.L	. Analytical	· · · · · · · · · · · · · · · · · · ·							
Occupancy Status During Abatement (Check  [ X ] Facility Closed/Vacate  [ ] Abatement Performed  [ ] Other – Describe	d During Ent	ire Period o ormal Facil	of Abater lity Hour	nent s	City, St		Code	elton Road vay, New Jerse	y 0885	54				
Scope of Work (Check all that apply)  [ ] >3 sf or ≥3 lf	[	] F	Renovatio		[ [ [x	] N	Mini-Enclosure Glovebag Procedur	vith Negative Press e and Non-Friable F		re				
[ X ] ≥160 sf or ≥260 lf									Abate	ement "	уре			
Location of Asbestos-Containing Material (ACM)  TO BE ABATED in facility (13)	Lsbestos-Containing Material (ACM)  TO BE ABATED in facility  Solely by Maintenance/Custor Staff				Descript sbestos-Co Material ( .e., therma sulation, s VAT, ther misce	ontaini (ACM) il syste surfacio , or	ms ng,	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	ENCLOSURE		
District		X		Asbestos sic	ling			1000 sf	X					
Exterior					-									
										-				
Name of Registered Waste Hauler Guardian Contracting, Inc	18.000	DEP Waste	223	3	Yards of W		Name of Registe T.R.R.F.	red Landfill						
City, State Toms River, New Jersey Completed by (Print or Type)	Title		8/1/1	al Date 6 Signature	City, Tull	State ytown	n, Pennsylvania	4	Dat 7/2	e .0/201	6			
Nicholas Fernicola	er		0.010,011,010,01	compto	d activities.		112	.0,201						

JARDIAN CONTRACTING, INC. 89 ROUTE 9 ITE 61 MS RIVER, NEW JERSEY 08755



#### DEMOLITION / RENOVATION NOTIFICATION

Operato	or Project#:	Po	Postmark: Notificati			ion:					
	TYPE OF NOTIFICATION (O - Original R - Revi	sed C-Car	ncelled):	R	п	IS ASBESTOS PRESENT? (Y	es/No):	Y			
Π.	FACILITY INFORMATION (identify owner, remov	al contractor	and other or	perator)							
	OWNER NAME: Maca	luso Tree S	Service								
	Address: 502 Church Ra	od									
	City: Point Pleasant	State:	New Jer	sey	Zip:	08742					
	Contact: Chris Macalus	0			Tel:	732-604-9392					
	REMOVAL CONTRACTOR: Guard	lian Contr	acting, In	c.		NJ License: 00624	4				
	Address: 1889	Route 9, U	Jnit 61								
-1-51-4	City: Toms River	State:	New Jer	sey	Zip:	08755					
	Contact: Nicho	olas Fernic	ola		Tel:	732-349-9932					
	OTHER OPERATOR (if different)			tu .		NJ License:					
	Address:										
	City:	State:			Zip:	lip:					
	Contact:				Tel:						
IV.	TYPE OF OPERATION (D - Demo O - Ordered	Demo R -	Renovation	E - Emergency F	Renovation):	D					
V.	FACILITY DESCRIPTION (Including building nam										
	Building Name: Residence						1				
	Address: 72 Sandy Poir	nt Drive									
	City: Brick	State:	New Je	rsey	County:	Ocean					
	Site Location: Exterior		-								
	Building Size: 1000 sf	# of Floo	rs:	1	Age in Y	Years: 60					
	Present Use: Residence			Prior Use:	Resider	nce					
VI.	PROCEDURE, INCLUDING ANALYTICAL MET	THOD, IF AF	PPROPRIAT	TE, USED TO DET	ECT THE PRI	ESENCE OF ASBESTOS MATE	RIAL:				
	IS MATERIAL ASSUMED TO BE ASBESTOS?						Non	friable			
VII.	APPROXIMATE AMOUNT OF ASBESTOS INC	LUDING:		* ************************************			Asbesto	s Material To Be			
	<ol> <li>Regulated ACM to be removed</li> <li>Category I ACM not removed</li> </ol>			RACM To Be		LOCATION	0.757 (2.855.)	noved			
	Category I ACM not removed     Category II ACM not removed	9		Removed			Cat I	Cat II			
	Pipes (Linear feet):										
	Surface Area (Square feet): 1000 sf		Asbesto	os siding		Exterior					
	RACM Off Facility Component (Cubic feet):										
VIII.	SCHEDULE DATES ASBESTOS REMOVAL (MM/	DD/YY)	Start:	7/21	7/16	Complete: 7/	29/16				

	NOTIFICATION	OF DEMOLIT	ION AND RENOVA	ATION (continued)	7
Χ.	DESCRIPTION OF PLANNED DEMOLITION OR	RENOVATION WO	DRK, AND METHOD(S) T	O BE USED DE CEIVE	
xi.	AND RENOVATION SITE:			ASBESTOS CONTROL & ASBESTOS will be placed on the ground before highlightens will be	LION
	removed by non-friable procedures. All waste will be place	d in double 6 mil. Bags,	sealed and labeled and placed in	n a locked container for disposal.	
				8	
xii.	WASTE TRANSPORTER #1 Name: Guard	lian Contracting,	Inc.		
	Address: 1889	Route 9, Unit 61			
	City: Toms River	State:	New Jersey	Zip: 08755	
	Contact Person: Nicho	olas Fernicola			
	WASTE TRANSPORTER #2 Name:				
	Address:				
	City:	State:		Zip:	
	Contact Person:				
xiii.	WASTE DISPOSAL SITE Name: T.R.F.	F.			
	Location: Borde	entown Road			
	City: Tullytown	State:	Pennsylvania	Zip: 19007	
	Telephone: 215-943-9732			101494	
xív.	IF DEMOLITION ORDERED BY A GOVERNME	NT AGENCY, PLEA			
	Name:		Title:		
	Authority:				
	Date of Order (MM/DD/YY):		Date Ordered to Begin	(MM/DD/YY):	
XV.	FOR EMERGENCY RENOVATIONS		1	(Cara Davis 1).	
	Date and Hour of Emergency (MM/DD/YY):				
	Description of the Sudden, Unexpected Event:				
	Explanation of how the event caused unsafe condition	is or would cause equ	nipment damage or an unrea	sonable financial burden:	
xvi.	DESCRIPTION OF PROCEDURES TO BE FOLLO ASBESTOS MATERIAL BECOMES CRUMBLED	WED IN THE EVEN PULVERIZED, OR	NT THAT UNEXPECTED . REDUCED TO POWDER	ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE	
xvii.	I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE DEMOLITION OR RENOVATION AND EVI AVAILABLE FOR INSPECTION DURING NORM	DENCE THAT THE	REQUIRED TRAINING H	40 CFR PART 61, SUBPART M) WILL BE ONSITE DUR. (AS BEEN ACCOMPLISHED BY THIS PERSON WILL BINDER 20, 1991)	ING E
	Nicholas Fernicola / Project Manager (Printed Name/Title)		(Signature of Owner/C	July 20, 2016 (Date)	
xviii.	I CERTIFY THAT THE ABOVE INFORMATION I	S CORRECT.			
	Nicholas Fernicola / Project Manager (Printed Name/Title)		(Signature of Owner/C	July 20, 2016 (Date)	

#### State of New Jersey - Notification of Asbestos Abatement

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

Date of Notification (1)					Name of Building Owner/Operator (2) RUTGERS, THE STATE UNIVERSITY OF NJ								
July 21, 2016					The tra								
Agencies Notified	Notificat	ion Type			Street Address			EDT					
rigerioles (verifies	Initia	al Notificati	on		ENVIRONMENTAL H	EALTH &	SAFEIYD	EP1.					
X EPA		ended Certif		5	27 ROAD 1, BLDG 40	86ABIVING	STONICA	MPUS					
Average Control of the Control of th				THE COLUMN THE PROPERTY OF THE PARTY OF THE	City, State, Zip Code	1	ICENSING						
xDCA -	New St	tart Date &	Complet	ion Date	DYSCHIE AND CODE		TO LI VCIII VIO		8				
x DOL	□ Em	ergency (in	cluding	L	PISCATAWAY, NJ 08	8834	- 1 1 - N						
X DEP		tification)			Name of Contact		<u>Tele</u> phone Ni	Imner	į				
x DOH				1	Michael Smith, ENV HEAL	_TH &							
	☐ Car	ncelled			SAFETY	1							
				FACILITY INFO	DRMATION								
	ment in Tok	ing Place (2)			Type of Facility (4)								
Name of Facility Where Abate	ment is Tak	ing Place (3)	1004	0000	School (K-12)								
NEWELL CENTRAL H	HEATING	PLANI, E	SLUG#	0200		16 40)							
					Subchapter 8 (other than	N-12)	er governmen enge						
Street Address					Other (i.e. private & com	mercial building	gs, homes, etc	)					
DOUGLAS CAMPUS					Sq. Feet: Unknown	# of Floors:	1 Bldg. Ad	ge: 60 years	5				
	0 . (0)		County C	odo (7)	34:133								
<u>City (5)</u>	County (6)	No 1922-19	(State U		Current Use (prior if being	demolished):	Academic						
New Brunswick	Middles	sex	(State U	Se OHIV	Current Ose (prior it being	dernonomouy							
				10									
Name of Monitoring Firm Hire	d by Bldg C	)wner (8)	ASCM N	io.	Name of Contractor (9)								
	d by blug. C	7441101 (0)	0098										
ATC			0030		GREENWOOD ABATI	EMENT CO	NSULTAN	TS, INC.					
the state of the s					Street Address								
Street Address					Street Address								
3 TERRI LANE					511 MAIN STREET								
City, State, Zip Code					City State, ZipCode								
BURLINGTON, NJ 0	8016				Butler, NJ 07405								
Project Manager for Monitoria		Telephone N	lumber		Telephone Number		License Numb	<u>ber</u>	1				
	IQ FIIII	609-386-											
BRIAN KEARNY		009-300-	0000		973-492-0477		00840						
		Scheduled (	Completion	Date (11)	Name of OSHA Monitor								
Scheduled Start Date (10)				Date (11)	11441110								
July 26, 2016		August 6	, 2016		EMSL inc.								
Occupancy Status During A	Abatement (	Check only o	ne)		Street Address								
Facility Closed/Vaca	ted During I	Entire Period	of Abaten	nent	4056 Stolton Boad								
Abatement Performe	d Outside o	of Normal Fac	ility Hours	3 -	1056 Stelton Road								
Describe	o ditoria				City, State, Zip Code								
	Sub 9 C	Documind											
☑ Other - Describe	Suboc	occupied	and the second second	(المام المام ا	Piscataway, NJ 088	354							
Schedule: 3pm-12 N	1id (24 H	ours & We	ekends	as needed)					- 1				
•													
Source of Work (Check all th	nat apply)								_				
								egative Pressure	4				
0.1.0	15			□ Renovat	ion	■ Mini-End	closure						
≥ 3 sf or ≥ 3				Demolition		Gloveba	g Procedure						
≥ 160 sf or ≥	260			Demolition		Non-Evenn	~ ~ · · · ·	ble Proce	edure				
					O - t-i-i Material	Amoun		туре					
Location of Asbestos-Contai		ocation Norma	illy Used	Description of As	bestos Containing Material		SF /NOUTE	STITOTIC TYPE					
Material (ACM) in Facility (1:	<ol> <li>Sole</li> </ol>	ely by Maint./C	ustodial		nal systems insulation, surfaci	or LF)	Remo	ve Repair Encap	Enclose				
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Sta	ff? (12)		VAT, or other mis	sceil.)	Of Li							
	YE	s NO	NA			100.0	- 57						
Boiler Room		X		TSI-FLU Duc	ct/Equip Insulation	400 S							
		X	1	TSI-Pipe Ins		150 S	F 🗵						
Boiler Room				131-1 the this	ulation	2000							
					T = 11 12 1 (10) to		Name of Red	gistered Landfill					
Name of Reg. Waste Hauler		NJDEP Wa	ste Hauler	- ID #	Cubic Yards of Waste:			North Landfill					
See Hauler Below # 1 & 2 See Below					40	0.5030	GROWS N						
		. 0 . 1	- 4- In-	Dutler NI	7405	Disposal Da	te	City, State					
Hauler #1) Greenwood Abatement Consultants, Inc Butler, N.					77403	August 6	. 2016	100 New Ford					
NJ DEP # 1	2561						4 (3) 2	Road, Morrisvi	IIe, PA				
Hauler #2) Newark Carting, Inc. Newark, NJ NJDEP # 4509								19067					
Hauter #2) Newark Carting, the Newark, 113 113 Det 17 4309						500		215-736-1700					
THE					Signature		<u>Date</u>						
Completed by (Print or Type		Title	200 150	`T	2 10 21	line	July 21,	2016					
Raymond C. Peda	lino	SENIOR F		- I	Raymond C. Pedaline July 21, 2016								
		MANAGE	R										

Name of Building Owner/Operator (2) Date of Notification (1) 2016 5 KLAA, LLC/Long&Foster Property Mgmt. 07/19/2016 Street Address Agencies Notified Type Notification 150 Piedra Springs Road ASPESTOS CONTROL & Initial EPA X City, State, Zip Code LICENSING DEP Amended Arroyo Grande, CA 93420 DOL Amendment # Emergency (including Telephone Number Name of Contact justification) DOH Andrea Previte/Property Manager DCA Cancellation FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Angelo's Pizzeria shop School (K-12) × Street Address Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, 122 Haddon AVenue etc.) # of Floors Square Feet Bldg. Age City (5) Haddonfield Current Use (Prior if being demolished) County Code (7) County (6) (STATE USE ONLY) Camden ASCM No. Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) Garden State Environmental Lilich Corporation Street Address Street Address 555 Broad Street 606 McBride Ave City, State, Zip Code City, State, Zip Code Glen Rock, NJ 07452 Woodland Park, NJ 07424 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 973-225-8400 Bruce Wolf 201-652-1119 01104 Start Date (10) Name of OSHA Monitor Scheduled Completion Date (11) 07-29-16 08-01-16 Iris Environmental Laboratories, LLC 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 City, State, Zip Code Other - Describe: Union, NJ 07083 Scope of Work (Check All That Apply) × ≥3 sf or ≥3 lf Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 lf Mini-Enclosure Demolition Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Abatement Is Location Туре Normally 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 Remova Repair Custodial Staff? SF or LF) In Facility surfacing, VAT, or (12)(13)other miscellaneous) Yes No N/A 30 LF basement area pipe insulation X NJDEP Waste Cubic Yards Name of Registered Landfill Name of Registered Waste Hauler Hauler ID No. of Waste Lilich Corporation **GROWS** Landfill 18724 City, State Disposal Date City, State Woodland Park, New Jersey Morrisville, PA Completed by Date Title Signature 07/19/16 Momo Glavatovic vice president

C2433		NOTIF	ursuan	N OF A	New Jersey ASBESTOS IAC 8:60 and	ABA (E) d 12:120	,,		EC		$\mathbb{V}$	E	M	
Date of Notification (1)	7/20116		5	Address	oling Owner/C	Operator	(2) LVIC		ال	<del>UL 25</del>	2016			
Agencies Notified	Type Notification		Street	Audiq	11	1								1
EPA DEP DOL	Initial Amended Amendment # Emergency (includi	ng	Name	ONF of Cor		y ,	N2 0	7853	ASBES Telephon	STOS C LICENS ne Number	ONTR SING	OL 8	<u></u>	
DOH	justification) Cancellation			Plack										1
DCA			FA	CILITY	/ INFORMA	TION	Type of Fa	acility (4)						
Name of Facility Where A	Abatement is Taking Plac	e (3)					School Subo	ool (K-12) chapter 8 (0 er (i.e. priva	Other that	an K-12) mmercial b	ouildings	s, hon	nes,	
City (5) / D = 0	(0)10:40	-					Square E	eet /	# of Floo		Bldg.	Age		
(100%	18/108		10	nty Coo	do (7)		Current L	Jse (Prior if	f being d	emolished	i)			
County (6)	1016		(STA	TE USE	ONLY)		NO	me						-
11/15	)((1)	r (8)	IA	SCM N	lo.	Nar	me of Abatem	nent Contra	ctor (9)	*				
Name of Monitoring Firm	n Hired by Building Owner	ei (0)				1000000	ick Industr	ies Inc.						$\dashv$
						Stre	eet Address O. Box 91	E						
Street Address							y, State, Zip (							
City, State, Zip Code						Cit	rick, New -	Jersey 08	3723					
City, State, 2.p con					No		lephone No.	•	Li	icense No				
Project Manager for Mo	onitoring Firm		Tel	ephone	NO.	(7	732)899-74	199	0	1196				
Start Date (10)		heduled	Comple	etion Da	ate (11)		ame of OSHA							
Ctatus Dur	ing Abatement (Check O	nly One	)			St	reet Address							
	acated During Entire Peri rmed Outside of Normal	od of Ab	atemer	nt		C	ity, State, Zip	Code						
Scope of Work (Check  ≥3 sf or ≥3 lf  ≥160 sf or ≥260	All That Apply)	Re	enovatio emolitio	on in			Mini	Containme -Enclosure rebag Proc	e dura					
							☐ Non	-Exempted	(*) and	NOII-FIIAL	A	Abate	ment	
		ls	Locatio	n								Ту	oe T	_
Asbestos-Contair TO BE In F	ation of hing Material (ACM) ABATED acility 13)	Use Ma	lormally d Solely intenan odial Si (12)	/ y by ce/	(i.e. th	s Contain ermal sy surfacir	ription of ning Material ystems insula ng, VAT, or scellaneous)	(ACM)	(S	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
,		Yes	No	N/A					00	SF	X			
	A)			X	osbest	DS (	ontain	NP	201	7.).1	10			
						191	millik	2 ~			-			-
		-				V	***************************************					-	-	-
			I N	JDEP '	Waste	Cubic \	Yards ,	Name o	f Registe	ered Land	fill			
Name of Registered			H	lauler II	CO1975	of Was		GROV	NS Inc					
Brick Industries	Inc.		2	1602		Dispos	al Date	City, St	ate					
City, State						7	Callb.	PA			Data		1	. /
Brick, New Jers	ey	Title				S	ignature (	11/1			Date	1/7	10	16
Completed by Eric Plackis	1-2-1-	Pre	sident	t				UK				., .	ad acti	ivitio

CK 3145

Date of Notification (1)	19 /	16				Owner/Operator (2 Philip Caccese	2)			<u>V</u>		
				.=								1 11
Agencies Notified  ⊠ EPA	Type Notificat	IION		Street	Address			L' JUL 2	5 20	116	1	L//
Ø DOLWD	Amended			City S	tate, Zip C	`ode				-	+	
☑ DOH	Amendme	nt #		7.00.00 <b>6</b> .0150.000		, NJ 08109	1	ASBESTOS	CONIT	DOI	-	į
DCA	☐ Emergenc		-		of Contact			Telephone Num			- α	
(NJAC 5:23-8)	justificatio				la Cacce							
	E comonan			0-05/61/085		FORMATION		1			-	_
Name of Facility Where	Abatament is Tr	akina Dlace	(3)	FAC	ILII Y IN	FORMATION	Type of Facility	(4)		-		
Caccese Residence		aking riace	(3)				School (K-12					
Street Address	-						Subchapter	8 (Other than K-12	2)	9.7		
Circuit Address	84						homes, etc.	rivate and comme	ercial bu	ilaing	S,	
City (5)		- 24					Square Feet	# of Floors	Blo	ig. Ag	je	
Pennsauken							2,000	3	1	30		
County (6)	E37/2		-	Coun	ty Code (7	(STATE USE ONLY)	Current Use (P	rior if being demoli	ished)			
Camden							Residence					
Name of Monitoring Firm	Hired by Build	ing Owner (	(8)	ASCM	No.	Name of Abatem	ent Contractor (9	)			300	
Mgmt. & Environm						Shade Enviro	onmental, LLC	:				
Street Address						Street Address						
PO Box 341						623 Cutler A	venue					
City, State, Zip Code						City, State, Zip C	ode					
Chesterfield, NJ 08	3515					Maple Shade	e, NJ 08052					
Project Manager for Mor	nitoring Firm		Tele	phone	No.	Telephone No.	*	License No.				
Bill Weisgarber			60	9-298	-4070	856-755-0099	9	00842				
Start Date (10)	S	cheduled C				Name of OSHA N	Monitor					
07 /16 /	16	07 /	18	_ / -	16	EMSL Analyt	tical, Inc.					
Occupancy Status Durin	g Abatement (C	Check only	one)			Street Address	N	=======================================				
□ Facility Closed/Vacat						200 Route 13	30 North					
Abatement Performed						City, State, Zip C						
Time of Abatement:	AIVI	PIVI/	PIVI-		AIVI	Cinnaminsor	n, NJ 08077					
Scope of Work (Check a	II that apply)					M Eull Con	tainment with Ne	astive Pressure				
≥3 sf or ≥3 lf		⊠ Re	enovati	on		☐ Mini-En		gative riessure				
≥160 sf or ≥260 lf		☐ De	emolitic	n		☐ Gloveba	g Procedure	on-Friable Proced	ura			
		1 10	Locat	ion		⊠ Mon-Exe	stripted ( ) and 14	JII-I Hable 1 Toccu		atem	ant T	VDE
Location	n of		Norma	lly		Description	of			_		1
Asbestos-Containing	Material (ACM	10 000000000000000000000000000000000000	ed Sole aintena			estos Containing Ma		Amount	Removal	Repair	Encapsulate	Enclosure
TO BE AB			todial		(1.6	e., thermal systems surfacing, VAT		(Specify SF or LF)	oval	=	psu	)SUT
(13)			(12)	1		other miscellane					late	Œ
		Yes	No	N/A								
Laundry Room			$\boxtimes$		Floor T	ile		80 SF	$\boxtimes$			
		П										
	70121C25C25									П	П	П
								,	1	I		
N	ata Havilan				Mosto	Cubic Vards of	Name of Reg	stered Landfill		Ш	Н	ш
Name of Registered Wa Freehold Cartage	ste mauter		190	JDEP \ auler  [		Cubic Yards of Waste	100	nd County Lan	dfill			
				15939	9	1 Disposal Date	City, State				_	
City, State Freehold, NJ						07/18/2016	Newburg,	PA				
Lancard Control	[una)	Titlo					1,5,1,5,1,9,		Date			
Christina Lynch	уре)	Title Operat	ional	Manaa	ier.	Signature h	10)		1/19	1	0	
Christina Lynch		Operat		riailag	101	UNDA		)	1/1-1	111	X	

CK 21513	NOTI	Purs	TION O uant to	of New Jer F ASBESTO NJAC 8:60	os ABATE and 12:12	0)	(ID)	E		W			
Date of Notification (1) 7/19/2016		Na	me of B UMON	uilding Owne T BOARD	er/Operator OF EDI	r (2) UCATIO	N III	Vi JUL	2 5	20'	16_	1	4
Agencies Notified Type Notification			reet Add 5 DEPI	ress EW STRE	ET							1	
EPA Initial Amended Amendment #		Ci	ty, State	, Zip Code IT, NJ 076	528				ENSI	1G	-		_
Emergency (inclusion)	ding	N	ame of C					Telephone No	ımher				
DCA Cancellation				TY INFORM	IATION		r = _10b - /4\					_	-
Name of Facility Where Abatement is Taking Plant DUMONT HIGH SCHOOL	ace (3)					×	of Facility (4) School (K-12) Subchapter 8	(Other than K-	12)		- 60	m.o.*	
Street Address 101 NEW MILFORD AVENUE						- e	etc.)	# of Floors			. Age		
City (5)						3	e Feet						
DUMONT County (6)			County C	ode (7) SE ONLY) _		Curre	nt Use (Prior	if being demol	iished)				
Name of Monitoring Firm Hired by Building Own KARL & ASSOCIATES, INC.	ner (8)	1	ASCM		Nan	ne of Aba	tement Contr THERS C	actor (9) ONTRACT	ING, IN	IC.			
Street Address						et Addre VREEL	ss _AND AVE	NUE					
20 LAUCK ROAD  City, State, Zip Code					City	, State, Z DTOWA	ip Code ., NJ 07512	2					
MOHNTON, PA 07628  Project Manager for Monitoring Firm			Telepho	ne No. 56-7700		ephone N		Licens 0049			1		
Stall Date (10)		i Con		Date (11)			HA Monitor S (9) ABO\	/E					
7/21/2016 7 Occupancy Status During Abatement (Check	/23/201 Only One	40 M/M				eet Addre			,				
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe:	riod of Al	baten	nent s		Cit	y, State, 2	Zip Code						
Scope of Work (Check All That Apply)  Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	X R	enova emoli	ation tion			l N	lini-Enclosure					ı.	
	le le	Loca	tion				IOII-Exciliptor	,		A	bate Ty	ment	
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Use Mai	lorma d Sol intena	ally ely by ance/ Staff?	(i.e. f	os Containi hermal sys	stems insi 1, VAT, or	ulation,	Amount (Specify SF or LF)		Domoval	Repair	Encapsulate	Enclosure
Dogge and a control	Yes	No X	N/A		INDOW	CAULK	ING	40 LF	2	2			
EXTERIOR (kitchen and second													
floor science room)							8						
							- T.,	Registered La	andfill				
Name of Registered Waste Hauler			NJDEP Hauler		of Waste			E MANAG		G	.R.0	D.W.	S.
TWO BROTHERS CONTRACTING			18743		2 Disposal		City, Sta	ite					
City, State TOTOWA, NJ	Title				07/2/3/2	016 nature	MORE	RISVILLE, F	Date				
Completed by VIVECA RAMOS	PRO	JEC	CT CO	ORDINAT	Andrew Co.	Ullin	ece /	Cenne	7/19	3/2	U16		

07/18/20

US.STITT TO	acting					Œ	AXX973 958 E	118		00.9	2/00	14
/2018 08:51 Two Brothers Contr	acuig					212			E C	-	it For	m
K 21513	HOTIFI (Pr	CATIO	NOFA	New Jersey SBESTOS AB: AC BIBS and 12	ATEMB 2:120)	NT		4	_	_	_	2016
19/2018		NEWS	ONT E	ing Ownsr/Öps BOARD OF	rator (2) EDUC	ATION	/	/ A	SBES	STO	S C	ONTF SING
genoles Notified Type Notification		Sireel 25 D	Addisa	STREET				1				
EPA Initial Amended Amendment #		City.	State, Zh	p Code NJ 07828					*		48	
OOH justification)	ding	Name	o of Can	itaal			Telep	hone Numbe			_	
	(2)	į.	ACILITY	INFORMATIO	N	Type of Fac	1115/ (4)			_	_	
Jame of Paolity Where Abstement is Taking Pla DUMONT HIGH SCHOOL	CB (3)					School Subohi	ton & tothe	r than K-12)				
Birse! Address 101 NEW MILFORD AVENUE						Othar (	(i.e. privale à	commercial c			198,	4
City (5)						Square Fas	"   " "	Floori	Bidg.	Age		
DUMONT County (6)		COL	mly ood	e (Y)	_			% demolished	1)			
BERGEN Name of Menkoring Firm Hirad by Building Own	ner (B)	1	SCM N	0.	TWO	BROTHE	nt Contractor ERS CONT	(B) Tracting	INC.			
KARL & ASSOCIATES, INC.					Atrost	Address	D AVENUE					
20 LAUCK ROAD					CITY, 8	tate, Zip Oc	do				_	7
City, State, Zip Octo MOHNTON, PA 07828			-			OWA, NJ	07512	T License No	),		_	-
Project Manager for Manisoring Firm		8	laphona 10-856	7700	973	-958-870		00494				_
Stort Data (10)	/23/201		lation De	Bts (11)	SA	ME AS (9)	) ABOVE					4
Decupancy Status During Abatement (Chack	Only One	)			Sins	Address						
Fsolity Closed/Vaceted During Entire Pe 	mod of Ab	rana-	<u></u>		- CHy,	Stata, Zip.C	ods—					
Scope of Work (Check All That Apply)  23 of or 23 if 21 50 of or 2260 if	Ri Di	enery e (i	ion			Mini-E	inclosure	ith Wegative re and Non-File	ble Pros	adnı		
	\\	Locati	on					nu suma Tiste ni interiori		Abate	ps ps	
Location of Asbastos-Contining Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ormali d Sols intenti odiel 6 (12)	poen A pa A	Asbestes O	mai ayat Intechno.	on of p Meterial (A ame Insulation VAT, or ollangous)	ACM)	Amount (Specify SF or L <sup>®</sup> )	Rumoral	Repair	Encapsulate	Enclosure
	Yes	No X	NIA	WINT	OWO	AULKING	3	40 LF	X			
EXTERIOR (kilchen and second	+-	^	+	71111						-	-	-
floor salence raam)	-	-	+						_	-	-	-
						-	Noma al ba	gistered Len	off))		_	1
Name of Registered Waste Hauler TWO BROTHERS CONTRACTING	G	- 1	NJOEP I Hauler II 18743	DNo. of	Masto	os.	WASTE	MANAGE	MENT	G.R.	0.W	.s.
			10143		  accade	D=19	CIN, Sun	SVILLE, PA				
TOTOWA, NJ	Title				7/23/2 Elg	estre	1	)	Oate 7/19/	2018	3	
Completed by VIVECA RAMOS	PR	SJEC	TCO	ORDINATOR		Whe	2/5	be of boring				

@10003/0004

06/06/2033 11:17 FAX

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_		NOT	TEICATIO	n of Asses to NJAC 8:	TOS ABAYE	MENT			rla	2D16	1)	7
Date of Notification (1) 07/19/2016			Name	of Bullding Ov Ir Grove Bo	rest/Operator	(2) cation:			TWI THE	4	ia	
Agendes Notified Type Notification			Street	Address Compton Av			W. ASI	EST LUCE	<del>S 0\$</del> 1 ENSIN	KTRI VG	\$1.8 	
X EFA Initial X DEP Amended Amendment X DOL Emergency	(#_	_		tate, Zip Code r Grova, No		1,112.3	14 21 675		. <u></u>	i		- Per .
DOH justification) Cancellaflor	)	8		of Contact Galta			Teles	in enone	HUPAL		!	
Name of English (NAmes About 1997)			FAC	ILITY INFOR	MATION							
Name of Facility Where Abatament is Yekir North End Sch∞l	ng Place	(3)				Type of Fac					1	
Stevens Ave						Subche	apter 5 (Other Le. private &	than K-	(2) Stal but	Mingi	i inon	163,
City (6) Cedar Grove						Square Feet 150,000	# of F	loors		Blog.	Aga	
Dounty (B) Essex			County (STATE	USE ONLY)		Current Use school	(Prior if being	demolis	hed)		-	
Name of Monitoring First Hired by Building Ahera Consultants, Inc Street Address	Owner (8	3)	ASC	M No.	Name Lillot	of Abstermint Corporation	Contractor (S	)	-		-	
POB 385 City, State, Zip Code						Address McBride Av	8			+	-	
Ocenaville, NJ 08231					City, S Woo	tate, Zip Code dland Park,	NJ 07424		-			
reject Manager for Monttoring Firm 08 Capone				52-1833		1000 No. 225-8400		ICERSO 1 11104	VO.		-	-
ar Date (10) 7-20-18	07-24-	-18	ompletion	Date (11)	Nome Iris E	of OSHA Mon nvironment	itor	orias.Li	LC		-	
Facility Closed/Vecated During Entire F Abatement Performed Outside of Norm Other - Describe: accupied weakend w	erlod of	Abele	ment irg		2333	Address Route 22 V	Vest					
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main office		×			ng tiles/glu		300		X			
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principal's office	+	X	-		pet,VAT/N		300		К			
אוווישףסופ טווויס		X	NUDEP W		ng files/glu		300		X	,		
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me of Rapistered Wasto Hauler bastos Transportation Corp			-24310			10,10	Tro, Lattus	III.			200	
me of Registered Waste Hauler	Tile				possi Date	City, 8						

ABB-41 (A-06-08)

<sup>\*</sup> Do not use this form for asbestos licensum exempled addivities.

2016 10:22AM NJ	Asbestos Co	ntrol 6	09,63	3.0664			page	1							
07/2033 13:14 F	AX									EG			100 D	003	Z 0 0 C
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Oate of Notification (1) 07-20-2016				Name East	of Building Brunswid	Owner/	Operator	(2)	11-7	SBESTOS	CON	VTRO	LA	1.	77
Agencies Notified  EPA	Type Notification			Street 760 F	Address Route 18					LICEN	W.	G \	#	+	1
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DCA	Cancellatio			200	ly Leiser					- 10001101	40 (40)	muer	ļ.		
Name of Facility Where	Abelement is Takl	ng Place	(3)	FAC	CILITY INF	QRMAT	ION	Тура	of Facility	(4)			7	_	
Irwin Elementary so	וססו							X	School (K-						
71 Racetrack Road									Subchapte Other (i.e. etc.)	r 8 (Cither tha private & com	n K-1 merd	2) lai buil	dings	s, hon	ies,
City (5) East Brunswick								Squa	re Fool	# of Floor			štag.	Age	
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Name of Monitoring Firm Environmental Desi	Hired by Building gn, Inc	Owner (B	1)	ASC	M No.		Name Lilich	of Aba		ntracior (9)	- 7 - 6330	*****	$\dagger$		
Street Address 5434 King Ave		Sa250 S						Addres	de Aveni	ie.	-		$\dagger$		
City, State, Zip Code Pennsauken, NJ 08							City, &	tate, Z	ip Coos Park, N.				+		
Project Manager for Moni Dennis Gober	toring Firm				16-9516	W	Teleph 973-2	90e N 225-8		Licer O11	nse N	٥,	1		
Start Date (10) 07-21-2016		07-27	2016	noteton	Date (11)				A Monitor	aboratorie	as,LL	.c			
Occupancy Status During Facility Closed/Vaca	ted During Entire	Period of	Abatar	nent			6treet 2333		e West 2	2			1		
Abatement Performe  Other – Describe: 1	tart 4 pm	nal Facilit	y Hour	<u> </u>		_	12.700.000	20000000	p Gode 07083						
Scope of Work (Check All 23 stor 23 if 2180 sfor 2250 if	That Apply		Renova				XXXX	Full Min Glo	-Enclosure vebso Prod	ent with Nega tedure					
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Location Asbestos-Containing I TO BE ABA In Facilit (13)	Vaterial (ACM)	Ma Ma	Normal so Sole sintens stodisi S (12)	ily by nce/	Asbest (I,ē,	tos Cont in⇒imal surfsi	eription aining M systems sing, VAT	aterial insula	(ACM)	Amount (Specify SF or LF)		Remova	Ropai	Eucapsullate	Enclasure
212		Yes	No	N/A								<u>a</u>	Ī	fale	ic.
clasaroo		-	X				s/fitting			100 LF		×			
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Name of Registered Wasti High Corporation	Hauler		H	JDEP W auler ID 3724		Cubic '				egistared La S, Landfill	ndfill		1		
City, State Yoodland Park, New	Jersey					Diapos	ol Date	$\exists$	City, State Morrisvi				+		
Completed by Momo Glavatovic		Title vice :	presid	ent		S	gnalure	(	OL		Carl 07-	20-2	018		

Date of Notification (1) 07/20/2016					vner/Operator nip Public S			JUL 25	2016		U	
Agencies Notified Type Notification			treet Add	dress mwell Ro	ad		1	BESTOS CO	NITD!	71 0		
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X DOL Amendment #_ X Emergency (inc	luding	_		et NJ 08	8/3			Telephone Nu	mher	_		
DOH justification)  Cancellation	J	1000	ame of (	Strimple	1	1.		Telephone Nu	TIDEI			
Name of Facility Where Abatement is Taking F	laca (2)		FACIL	ITY INFOR	RMATION	Type o	f Facility (4)					
Sampson G Smith School Street Address	Tace (3)	45			<u></u>	× s	chool (K-12 ubchapter 8	) 3 (Other than K-1	2)			
1649 Amwell Road				19	9.		ther (i.e. pri	ivate & commerc	ial build			S,
City (5) Somerset NJ 08873				N.		Square 90,00	0	# of Floors 2	3	dg. Aq ) yea	T	
County (6) Somerset			County C	ode (7) SE ONLY)		Publi	c High Sc		hed)			
Name of Monitoring Firm Hired by Building Ow AHERA Consultants	vner (8)		ASCM 0057	No.			ement Cont struction (					
Street Address PO Box 385				\$8		Route	s 46 Suite	15				
City, State, Zip Code Oceanville, NJ, 08231-0385						State, Zi owa, N.	Code J 07512					
Project Manager for Monitoring Firm John Smoyer		10	elephon	ne No. 2-1833		ohone No -339-9		License 01034	No.			
Start Date (10)	Schedule		pletion D	Date (11)	332,5333		A Monitor struction (	Corp				
Occupancy Status During Abatement (Check	Only On	e)			(4) (4)	et Addres	s 46 Suite	16				
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe: Start 3pm	riod of A I Facility	Abatem Hours	ent		City,	State, Zi		15				
Scope of Work (Check All That Apply)									W			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	tenovat emoliti				Mir Glo	i-Enclosure vebag Proc					
						NOI	-Exempled	( ) and Non-i ne	DIE I TO		ement	
Location of	1	Location Normall	у		Descripti	on of				Ту	rpe	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility  (13)	Ma	d Solel intenar todial S (12)	rce/		os Containing thermal syste surfacing, \ other miscell	Material ms insula /AT, or		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Main Office	165	X	18//		transite p	anels		262 SF	x			
Science Classrooms 402, 404, 406		X		cemer	ntitious slat		ow sills	48 SF	X			
Name of Registered Waste Hauler Newark Carting		Н	JDEP W lauler ID 4509		Cubic Yards of Waste	3	Name of GROW	Registered Land S	fill			
City, State Newark NJ					Disposal Da 07/24/201		City, Stat Morrise	e ville, PA				
Completed by Milos Savic	Title Proje	ect Ma	anager		Signat	ore Col		1	Date 07/20/	2016		

Print Form

		NOTIF	Pursuan	N OF ASB t to NJAC	ESTOS 8:60 an	ABATEN d 12:120	TENT		(	1,1	ŧ4	2:
Date of Notification (1) - 07/19/2016			Name o	of Bullding r Grove I	Owner/0 Board	Operator of Educ	(2) atlon			E		
Agencies Notified Type Notification  EPA InItial			520 P	Address Ompton		е		TIME	1111	25	201	16
EPA Initial Amended Amendment	#			ate, Zip Co r Grove,		009			JUL	2 3	- 20	H <del>U</del>
Emergency ( justification)  DCA  Cancellation	including			of Contact Gaita				Telephone	в. Ингаве	500	⊃νiτ <sub>Ε</sub>	ROL
				ILITY INFO	ORMAT	ION		i			_	
Name of Facility Where Abatement is Taking North End School	Place (	(3)					Type of Facility					*********
Street Address 122 Stevens Ave					14		Other (l.e.	12) r 8 (Other thar private & comr	n K-12) mercial bi	ullding	s, hom	nes,
City (5) Cedar Grove							etc.) Square Feet 150,000	# of Floors	S	Bldg.	Age	
County (6) Essex			County (STATE	Code (7) USE ONLY,	)		Current Use (Pri school	ior if being den	nolished)			
Name of Monitoring Firm Hired by Building C Ahera Consultants, Inc	wner (8	)	ASCI	M No.		Name o	of Abatement Co Corporation	ntractor (9)				
Street Address POB 385 City, State, Zip Code						606 N	Address IcBride Ave					
Ocenaville, NJ 08231						City, St Wood	ate, Zip Code land Park, N.	J 07424				
Project Manager for Monitoring Firm Joe Capone			Telepho	ne No. 52-1833		Telepho			se No.	****		
Start Date (10) 07-20-16	Schedul 07-24-	ed Cor	npletion	Date (11)		Name o	f OSHA Monitor					
Occupancy Status During Abatement (Check						Street A	vironmental	Laboratorie	s,LLC			
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other - Describe: occupied weekend we	ol Engility	Abaten y Hours	nent s				Route 22 We	st				
Scope of Work (Check All That Apply)			-			Union	, NJ 07083					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli			74		Full Containm Mini-Enclosure Glovebag Prod Non-Exempted	cedure				
L		s Locat Norma					Then Exemples	Z ( ) and Non-r	TIADIE PI	Abat	emen	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Sole aintena stodial (12)	ely by nce/	Asbest (i.e.	tos Cont thermal surfac	scription of aining Ma systems bing, VAT hiscellane	iterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	e Encapsulate	Enclosure
	Yes	No	N/A	<u>(</u>	outor ii	nocenarie	ous)		oval	air	sulate	sure
main office/princip.office adjacent		Х			cle	ean up		3,000 SF				
								4	-			
Name of Registered Waste Hauler Asbestos Transportation Corp		H	JDEP Wauler ID I	100000000000000000000000000000000000000	Cubic Y of Wast			Registered Lan	l, Idfill	l,	ţ .	
Dity, State Shirley, New York	# #		24010		Disposa	al Date	City, State			-21-25-2019		
Completed by Nomo Glavatovic	Title vice p	resid	ent		Sig	gnature	Morrisvi	ile, PA	Date 07-19-	2016		
							X		01-15-	2010		

#### NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) Date of Notification (1) New Jersey Turnpike Authority 07 21 16 1 Street Address Agencies Notified Type Notification 581 Main St. EPA -Initial ASBESTOS CONTROL & ⊠ DEP City, State, Zip Code **LICENSING** DCA (NJAC 5:16) Amendment #2 Woodbridge NJ 07095 ☑ DHSS □ Emergency (including) Telephone Number Name of Contact □ DCA justification) ☐ Cancellation (NJAC 5:23-8) Robert Wowensdorf FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Existing Bldg Subchapter 8 (Other than K-12) Street Address Other (i.e., private & commercial buildings, MP E111.5 homes, etc.) Bldg, Age # of Floors Square Feet City (5) 1960 6900 1 Secaucus County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) County (6) Prosecutor's Office Hudson Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) Bio Terra Environmental Solutions LLC 06-15995 APS Contracting, Inc. Street Address Street Address 155-161 Pennsylvania Avenue PO Box 1224 City, State, Zip Code City, State, Zip Code Paterson, NJ 07503 Union . NJ 07083 License No. Telephone No. Telephone No. Project Manager for Monitoring Firm 973-494-3762 973-754-1908 01-287 Rick Eustaquio Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) 08 / 10 / 16 08 / 19 / 16 APS Contracting, Inc. Occupancy Status During Abatement (Check only one) Street Address 155-161 Pennsylvania Avenue Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: \_\_\_\_AM-\_\_\_PM/\_\_\_PM-\_\_ Paterson, NJ 07503 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure Mini-Enclosure ☐ Renovation ≥3 sf or ≥3 If ☐ Demolition ☐ Glovebag Procedure ≥ 160 sf or ≥ 260 lf Non-Exempted (\*) and Non-Friable Procedure Is Location Abatement Type Normally Description of Location of Used Solely by Repair Encapsulate Removal Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Maintenance/ (i.e., thermal systems insulation, surfacing, (Specify TO BE ABATED Custodial Staff? SF or LF) VAT. or IN Facility (12)other miscellaneous) (13)Yes No N/A 8,448 sf. $\boxtimes$ VAT $\boxtimes$ Thruout Bldg Fiberglass Wall Insul/Cement Brd $\boxtimes$ 324sf $\boxtimes$ Thruout Bldg Panele/Transite 7.940sf X Mastic/Cork Floor Tile П X EC Rm1038 $\times$ 22 If Cement Piping/Pipe Insulation X EC Rms 1040 Name of Registered Landfill N.IDFP Waste Cubic Yards of Name of Registered Waste Hauler Hauler ID No. Waste Grows Landfill APS Contractors, Inc. 40 Yards 21259 Disposal Date City, State City, State Morrisville, PA 19067 08/20/16 Paterson, New Jersey Date Signature > Completed By (Print or Type) Title Svetozar Savreski President

State of New Jersey

#### EDS16-178

Page 1	of	

EDS16-178		NC	(Pur	suant to	NJAC 8:6	0 and	12:120)		Che	ck#	2296	= n r	\// [	2 -	
Date of Notification (1)					Building Ov			2)			ال ال	3 11 1	W	5,	nì
7-20-2016					Public S	choo	ols							-	
Agencies Notified Ty	pe Notification			treet Ad	<sub>dress</sub> cust Stree	et					JUL :	2 5 2	016		9
EPA DEP	Initial Amended		0	City, State	e, Zip Code	:									
X DOL	Amendment #2 Emergency (incl	luding	- N		, NJ 072	03				AS	RESTOS	CONT	ROL	8.	
ĭ DOH	justification)	idding	1 83	lame of Kelvin \					L	Lele	nnone we	amuner IC			
DCA	Cancellation		- 1 '		ITY INFOR	MATI	ON								
Name of Facility Where Aba		lace (3)							Facility (4)						
Harrison Elementary S Street Address	SCHOOL		_					T S	chool (K-12 ubchapter 8	(Othe	er than K-	12)			
310 Harrison Avenue								Of et	ther (i.e. pr	ivate &	commerc	cial build	ings,	nome	s,
City (5)								Square	Feet	# of 2	Floors	469	idg. Aq 0+	ge	
Roselle			17	County C	ada (7)			40,00	t Use (Prio		na demoli				
County (6) Union					ISE ONLY)			School			5				
Name of Monitoring Firm H	ired by Building Ow	ner (8)		ASCM				of Abate Broup,	ement Cont	ractor	(9)				
EnviroVision Consulta	ants, Inc.			0007	9	- settinud		Address							
Street Address 20-21 Wagaraw Rd, E	Building 35E						1000000		irg Tpke						
City, State, Zip Code								tate, Zip	Code ale, NJ 0	7403					
Fair Lawn, NJ 07410	ring Firm			Telephor	ne No			none No		7-00	License	No.			
Project Manager for Monito Guillermo M Morales	ning riim				36-9145		(201	710-9	725	550 Table	01084				
Start Date (10)	197.00			npletion l	Date (11)			of OSH	A Monitor						
7-23-2016 Occupancy Status During	1.5	3-201			<u> </u>			Address							
Facility Closed/Vacate				nent					urg Tpke						
Abatement Performed Other – Describe:	Outside of Normal	Facility	Hours	5		_		State, Zip mingd	ale, NJ 0	7403					
Scope of Work (Check All	That Apply)						IS	7				,			
. ≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			Renova Demolit				É		Containme i-Enclosure		n Negative	e Pressu	ire		
2 100 31 01 2200 11		Luni					ALL STATES	Glov Non	vebag Prod -Exempted	cedure d (*) an	d Non-Fri	iable Pro	cedur	e	
		ls	Locat	ion										emen /pe	t
Location of		0.000	Norma ed Sole	-	Ashast		escription		(ACM)	_	Amount		Τ		
Asbestos-Containing N TO BE ABA	<u>red</u>		intena todial			therma	al system	ns insula			Specify F or LF)	Remova	Repair	Encapsulate	Enclosure
In Facility (13)	1		(12)				miscella				. 0. 1. ,	loval	pair	suiai	Sure
		Yes	No	N/A										a	
Boiler Ro	om	X					ct Insul				70 SF	X			
Boiler Ro	om	X				250 300 / 129	ittings			-	45 LF	X			
Boiler Ro	om	X			200000000000000000000000000000000000000		ater Ta			-	10 SF	X			
Boiler Ro		Х			Exterior I			Materi Materi	al		80 SF ered Land	X			
Name of Registered Wast	e Hauler		H	NJDEP V Hauler ID	No.	of W	ic Yards /aste		Minerva	- 5	CICU LAIIC	u IIII			
GL Group, Inc			0	03303	4	TBD	osal Date	9	City, Stat						
City, State Bloomingdale, NJ						TBE		C	Wayne		, OH				
Completed by		Title					Signatu	re	Poren S	11		Date 7-20-2	016		
Elena Solakov		Pres	ident					_ C	leson do	Lulli	9/_	1-20-2	.010		

EDS16-143

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

check # 2275 Page 1 of 1

Date of Notification (1) 7/18/2016		N E	lame of B Bogota	suilding Ov Board o	wner/O f Edu	perator ocation	(2)			][[	G			W	
Agencies Notified Type Notification		1000	Street Add	iress C. Luth	in Pla	ice		=			.][]	1 2	5	2016	
EPA X Initial Amended Amendment	#			, Zip Code NJ 076					12	4					The second second
Emergency ( justification)  DCA  Cancellation	ncluding	13.53	Name of C	Contact Pantolia	no				Tele	ephoñe	Nami	MEDS	CUN	טאוו	L&
Z DCA Carcellation			FACILI	TY INFOR	RMATI	ON									
Name of Facility Where Abatement is Taking Bogota High School	Place (3)						×	of Facility (4) School (K-12 Subchapter 8	)	er than	K-12)				
Street Address 2 Henry C. Luthin Place								Other (i.e. pri etc.)	vate 8	& comm	ercia	build			,
City (5) Bogota							10,0		2	Floors		50	dg. A	ge 	
County (6) Bergen		(	County County County US	ode (7) SE ONLY)			Curr	ent Use (Prior 1001	if bei	ng dem	olishe	ed)			
Name of Monitoring Firm Hired by Building ( Ahera Consultants Inc	Owner (8)		ASCM 0057	No.				atement Cont	ractor	(9)					
Street Address						Street	Addre		ike						
PO Box 385  City, State, Zip Code						City, S	State,	Zip Code Idale, NJ 0	-						
Oceanville, NJ 08231-0385 Project Manager for Monitoring Firm			Telephon			Teleph	none l	No.	+00	Licen		١.			
John Smoyer			Section 1	52-1833	3			9725 SHA Monitor		0108	54				
Start Date (10) 7-29-2016	Schedule 8-2-201	6	npietion D	Jale (11)		GL C	Group	o, Inc							
Occupancy Status During Abatement (Chec						Street 140		ess burg Turnp	ike						
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe: Weekend work 6am	nal Facility	batem Hours	nent		_	City, S	State,	Zip Code gdale, NJ 0		)					
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolit					] N	ull Containme lini-Enclosure llovebag Proc lon-Exempted	edure	7				0	
						E.	IN IN	on-Exempled	( ) al	IU NOII-	Паи	1		ement	
Landing of	1 450	Locati Iormal			De	escription	a of						Ту	pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma Cust	d Sole intena odial s (12)	nce/ Staff?		os Cor therma surfa		Materi ns insu AT, or		(	Amount Specify F or LF		Removal	Repair	Encapsulate	Enclosure
Rooms 28 & 29	Yes	No X	N/A	Mul	lti-lave	ered V	AT/N	lastic	1.:	550 S	F	X			
Room 28		X				Hood			7,548	25 SF	2	X			
NOOM 20															
													3		
Name of Registered Waste Hauler GL Group, Inc		H	JDEP W lauler ID 033034	No.	of Wa			Name of I		ered La	andfill				
City, State Bloomingdale, NJ					Dispo TBD	osal Date	е	City, State Waynes		g, OH				4	
Completed by Elena Solakov	Title Presi	ident				Signatur	re .	Elenu Ste	lla	j	7-	te 18-2	016		

GL16-004 Science

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

check # 2295 Page 1 of 1

Date of Notification (1) 7-21-2016				Building Colleg				y [		1	E	C	E		$\mathbb{V}$		n
Agencies Notified Type Notificat	ion		Street Ad 505 Ra	ldress Imapo V	alley	Road			100	3							
EPA Initial DEP Amende DOL Amendm	ent #1			e, Zip Coo h, NJ 07					Ц		,	JUL	2	5	2016		
➤ DOH Emerger justificati			Name of					95	П	Tėl	epho	ne N	umb	er			1
DCA Cancella	tion			y Rome	70	ION	-			_			i_+r=1	1211	J()		
Name of Facility Where Abatement is To Science Building	aking Place (3	)	PACIL	arr marc	KWAI	IOIN	Тур	oe of Facility School (K									
Street Address 505 Ramapo Valley Road							×	Subchapte Other (i.e.	er 8	(Oth				build	ings,	home	:S,
City (5) Mahwah								etc.) uare Feet ,000+		# o	f Flo	ors			dg. A(	ge	
County (6) Bergen			County C	ode (7) ISE ONLY)	_		1000	rrent Use (P				lemoi	ishe	d)			
Name of Monitoring Firm Hired by Build USA Environmental Manageme			ASCM 0011			100000000000000000000000000000000000000		batement C ip, Inc	ontra	actor	r (9)						
Street Address 344 West State Street						Street 140		ress nburg Tur	npil	ke							
City, State, Zip Code Trenton, New Jersey 08618				1075-0				, Zip Code gdale, NJ	07	403	3						
Project Manager for Monitoring Firm William Weisgarber, Jr.			Telephor 609.65			Telepi 201-		No. -9725			13350	ense 084					
Start Date (10) 7-28-2016	Schedul 9-15-2		mpletion [	Date (11)				SHA Monito	or								
Occupancy Status During Abatement (0	Check Only Or	ne)				Street		and the second									
Facility Closed/Vacated During En Abatement Performed Outside of I Other – Describe:	tire Period of A Normal Facility	Abater / Hour	ment s			City, S	State	nburg Tur , Zip Code igdale, Nu			3						
Scope of Work (Check All That Apply)						Bioc	211111	194410, 114									
≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	-	Renova Demoli						Full Contain Mini-Enclosi Glovebag Pi Non-Exemp	ure roce	dure	1					e	
		Locat			122										Abate Ty	ment	
Location of Asbestos-Containing Material (ACN TO BE ABATED In Facility (13)	Use Ma Cus	ed Sole aintena todial (12)	ely by ance/ Staff?		tos Cor therma surf	escription ntaining I al system acing, VA miscella	Mate ns ins AT, o	r		(	Amou Spec F or	cify	8	Removal	Repair	Encapsulate	Enclosure
Λ Λ ΙΙ	Yes	No X	N/A	Draw	oll on	d loint	Col	mpound	+	27	668	3 SF	-	X			
Apartments A-H	X				loist Ac			+	200	-	5 LF	-	X				
Apartments A-H						Floor (	200000	70	+	-	796		_	X			
Apartments A-H		X	_	Ke	Sillerit	FIDOI (	JUV	enings	+	٥,	130	01		Δ.			
Name of Registered Waste Hauler GL Group, Inc		1	NJDEP W Hauler ID 0033034	No.	of W			Name Miner	va	egist	tered	Land	ifill I			11	
City, State Bloomingdale, NJ					Disp TBD	osal Date	9	City, Si Wayr		ourg	g, O	Н		i.			
Completed by Elena Solakov	Title Pres	ident				Signatur	е	Elerm S.	Lub	Kor	)		Date 7-2	1-20	016		

			NOTIF	ICATION OF AS (Pursuant to N.			CV#	005	51	HOC	0		
Date of Notification (1) 07/22/16					Name of Building Owner/Operator (2)								
	Calpine New Jersey Generation LLC												
Agencies Notified Notification			Type		Street Address JUL 2 5 2016 LUJI								
(X) EPA ( ) DEP (X) DOL (X) DOH		() Initial No (x) Amend () Cancelle	ed Certifica	ation	717 Texas Ave, Suite 1000  City, State, Zip Code  Houston, TX 77002-2743  ASBESTOS CONTROL &								
( ) DCA					Name of Contact Paul Ostberg								
				FACILITY IN	FORMATION								
Name of Facility Where Ab	Type of Facility (4) ( ) School (K-12)												
Calpine New Jersey Gene Street Address	( ) Subchapter 8 (other than K-12) (X) Other (i.e. private & commercial bldgs., homes, etc.												
272 N. Proodusty	Sq. Feet 97,850 # of Floors 8_												
373 N. Broadway           City (5)         County (6)         County Code (7)					_ Oq. 1 GGL 37,000 # 01 1 10013_0_								
Pennsville	Salem		(State Use Only)		Bldg. Age55 Current Use (prior if being demolished) Power Plant								
	Name of Monitoring Firm Hired by Bldg. Owner		ASCM N	0.				Contractor (9)					
				<del></del>									
Horizon Environmental Group			00073		I at	Brandenburg Industrial Service Company							
Street Address					Street Address								
PO Box 316	2217 Spillman Dr												
City, State, Zip Code					City State, Zip Code								
Thorofare, NJ 08086	Bethlehem Pennsylvania 18015												
Project Manager for Monitoring Firm Telephone Number					Telephone Number License Number								
Steve Flanigan	00		610-691-1800		00721								
Scheduled Start Date (10) Scheduled Completion Date				Date (11)	Name of OSHA Monitor								
08/01/16 03/03/17				Brandenburg Industrial Service Company									
Occupancy Status During Abatement (Check only one) (x) Facility Closed/Vacated During Entire Period of Abatement					Street Address								
( ) Abatement Performed	Outside of N	ormal Facility	Hours -		2217 Spillman								
Describe_Demolition(x) Scheduled Demo Start 07/11/16 Scheduled Demo Completion 09/29/17					City, State, Zip Code								
Scheduled Demo Completion 09/29/17 Source of Work (Check all that apply)					Bethlehem, PA 18015								
(x) Demolition () Rend (x) Large Proj. (>160 SF d	ovation	CM\/\SMB	soi />25/1	en SE ar >10 <2	SOLE ACM	( ) Minor	Proj. /<25 SE o	- <10   E AC	-MA)				
(x) Full Containment with	Negative Pr	essure (x)	) Mini-Enc		Glovebag Proce		. 10j. ( -20 01 0	TO LI AC	2111)				
Location of Asbestos- Is Location Normally U				Description of		CM (i.e. Amount (Specify SF or LF) Abatement T				ment Ty	/pe		
		by Maint./Cus	stodial	thermal system			50.5						
Facility (13)	Staff? YES	(12) NO	NA	surfacing, VAT miscell.)	, or other			l R	tem.	Rep.	Encap	Enclose	
Plant Boilers	1 1 1 2 3	INO	X	Insulation		80.000	sf	X			T	T	
Plant Boilers			×	Fire Brick		24,000		X				1	
Main Plant			X	Pipe Insulation	ľ	12,500		X					
Main Plant			X	Transite/Galbe		29,265	100	_ X					
Main Plant			X	VAT	Online Seedy	53,000		x					
Main Plant			X	Flashing/Tar P	aper	64,100		X					
Main Plant			X	Caulk/Exp Jt		13,570		X					
Pipe Rack			x	Pipe Insulation		9,520 1		X					
Conveyor			X	Galbestos		8,000 s	sf	X					
Misc Small Out Bldgs			X	Caulk/Exp Jt		33,000	sf	Х					
Misc Small Out Bldgs			X	Transite/Galbe	stos	4,450 s		X					
Misc Small Out Bldgs			Х	Insulation		2,840 s	f	X					
Name of Reg. Waste Haule	er	NJDEP Was	ste Hauler	ID#	Cubic Yards o	of Waste		Name of	Reg.	Landfill			
Brandenburg Industrial Serv Co		21838			15,000 cy			Waste Management - Tullytown					
City, State						Landfill   Disp. Date   City, State							
Bethlehem, PA							TBD		Е	Bethlehe	em, PA		

Completed by (Print or Type)

Jennifer Polzer

Contract Manager

Signature

07/22/16

Mail to: NJDEP-DSHW-BRRTP 401 E. State St., PO 414 Trenton, NJ 08625-0414

Telephone 609-984-6620

C:\WORD\MYDOCS\ASBESTOS 9/18/00

