State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:50 and 12:20)

Date of Notification (1) 7/21/17

Name of Building Owner/Operator (2) PSE&G

Agencies Notified

- EPA
- DEP
- DOL
- DOH
- DCA

Type Notification

- Initial
- Amended
- Amendment #
- Emergency (including justification)
- Cancellation

Street Address 4000 HADLEY ROAD

City, State, Zip Code SOUTH PLAINFIELD, NJ 07080

Type of Facility (4)

- School (K-12)
- Subchapter B (Other than K-12)
- Other (i.e. private & commercial buildings, homes, etc.)

Name of Facility Where Abatement Is Taking Place (3)
PSE & G

Soo WASHINGTON BLVD

Jersey City

Hudson

County Code (7) (STATE USE ONLY) N/A

Current Use (Prior if being demolished) N/A

Name of Monitoring Firm Hired by Building Owner (8)
ENVIRONMENTAL TACTICS

ASCM No. 0044

UNIQUE SYSTEMS OF AMERICA

Type of Abatement Contractor (9)

Street Address 396 WHITEHEAD AVE.

City, State, Zip Code SOUTH RIVER, NJ 08882

Project Manager for Monitoring Firm TOM GEIGER

Telephone No. 732-250-2217

Telephone No. 732-432-8350

License No. 01111

Start Date (10) 7/21/17

Scheduled Completion Date (11) 12/31/17

Name of OSHA Monitor UNIQUE SYSTEMS OF AMERICA

Street Address 396 WHITEHEAD AVE.

City, State, Zip Code SOUTH RIVER, NJ 08882

Scope of Work (Check All That Apply)

- ≥30 sf or ≥3 if
- ≥160 sf or ≥260 lf
- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED

Name of Registered Waste Hauler VEOLIA

NJDEP Waste Hauler ID No. 080631369

Cubic Yards of Waste 10

Name of Registered Landfill EQ-WAYNE DISPOSAL

Disposal Date TBD

City, State BELLEVILLE, MI

Completed by Carol Rains Title Office Mgr.

Signature Carol Rains Date 7/21/17

* Do not use this form for asbestos licensure exempted activities.
STATE OF NEW JERSEY
NOTIFICATION OF ASBESTOS ABATEMENT
(PURSUANT TO NJAC 8:60-7 AND 12:120-7)

Date of Notification (1)
08 / 20 / 17

Name of Building Owner / Operator (2)
RUSSO DEVELOPMENT INC.

Agencies Notified
☐ EPA
☐ DEP
☐ DOH
☐ DOL

Type of Notification
☐ Initial
☐ Amended
☐ Amendment # 1
☐ Emergency w/ justification
☐ Cancellation

Street Address
570 COMMERCE BLVD

City, State, Zip Code
CARLSTADT, NJ 07072

Name of Contact
DOMINICK TUCCI

Facility Information

Name of Facility Where Abatement is Taking Place (3)
FORMER MERCK UNION

Street Address
1011 MORRIS AVE

City (5)
UNION

County (6)
UNION

County Code (7)

Square Feet
22,000

# Of Floors
1

Building Age
40 +

Name of Monitoring Firm Hired by Bldg. Owner (8)
EHII

ASCM NON

Type of Facility (4)
☐ School (K-12)
☐ Subchapter 8 (Other than K-12)
☐ Other (i.e., private & commercial bldgs., homes, etc.)

NORTHSTAR CONTRACTING GROUP, INC.

Street Address
655 WEST SHORE TRAIL

City, State, Zip Code
SPARTA, NJ 07871

Project Mgr. For Monitoring Firm
WILLIAM KIERBL

Telephone Number
973-729-5649

Name of OSHA Monitor
NORTHSTAR CONTRACTING GROUP, INC.

Street Address
655 WEST SHORE TRAIL

City, State, Zip Code
SPARTA, NJ 07871

EPA

Scheduled Start Date (10)
07 / 05 / 17

Sched. Completion Date (11)
07 / 30 / 17

Telephone Number
973-884-8582

License Number
00560

Occupancy Status During Abatement (Check Only 1)
☐ Facility Closed/Vacated During Entire Period of Abatement
☐ Abatement Performed Outside of Normal Facility Hours - Describe:
☐ Other - Describe: 7:00 AM-3:30 PM

Scope of Work (Check All That Apply)

Demolition

Renovation

Full Containment with Negative Pressure

Mini - Enclosure

Glovebag Procedure

Non-Exempted (*) and Non-Friable Procedure

Location of
Asbestos Containing

Material (ACM)

(I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

Description of

Amount

Location (13)

Location Normally

Location Used

Solely by

Maintenance/

Custodial

Staff (12)

Abatement Type

YES NO N/A

09 / 9A

CAULK

10 LF

09 / 9A

ROOF TAR

10 SF

09 / 9A

ROOF FLASHING

1,600 SF

Name of Registered Waste Hauler
NEWARK CARTING

Name of Registered Landfill
I.E.S.I.

EPA

Cubic Yards of Waste
4599

Disposal Date

City, State
NEWARK, NJ

Bethlehem, PA 18015

Completed by (Print or Type)
Steve Stiles

Project Manager

Signature

Date

07/24/17
<table>
<thead>
<tr>
<th>Location of Asbestos Containing Material Normally Used Solely by Maintenance/Custodial Staff</th>
<th>Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES NO N/A</td>
<td>Amount (Specify SF or LF)</td>
<td>REMOVAL</td>
</tr>
<tr>
<td>U9 / 9A.</td>
<td>VAT/MASTIC</td>
<td>3.060 SF</td>
</tr>
<tr>
<td>U9 / 9A.</td>
<td>FITTINGS</td>
<td>2 EA</td>
</tr>
</tbody>
</table>
**NOTIFICATION OF ASBESTOS ABATEMENT**
(Pursuant to NJAC 8:60 and 12:120)

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>07-21-17</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Building Owner/Operator (2)</td>
<td>PSE&amp;G</td>
</tr>
</tbody>
</table>

### Agencies Notified
- [x] EPA
- [x] DEP
- [x] DOL
- [x] DOH
- [x] DCA

### Type Notification
- [x] Initial
- [x] Amended

### Street Address
- 4000 Hadley Road
- South Plainfield, NJ

### Name of Contact
- Dawn Neville

### FACILITY INFORMATION
- Name of Facility Where Abatement is Taking Place (3)
  - PSEG Hackensack Substation

### Street Address
- 202 South River Street
- Hackensack, NJ

### City (5)
- N/A

### County (6)
- Bergen

### County Code (7)
- N/A

### Square Feet
- N/A

### # of Floors
- N/A

### Blg. Age
- N/A

### Current Use (Prior if being demolished)
- N/A

### Electrical Switching yard
- N/A

### Name of Monitoring Firm Hired by Building Owner (8)
- ASCM No.
- N/A

### Street Address
- 17 Old Dock Rd

### City, State, Zip Code
- City, State, Zip Code
- Yaphank, NY 11980

### Project Manager for Monitoring Firm
- N/A

### Telephone No.
- N/A

### License No.
- 01136

### Start Date (10)
- 07-26-17

### Scheduled Completion Date (11)
- 10-21-17

### Occupancy Status During Abatement (Check Only One)
- [x] Facility Closed/Vacated During Entire Period of Abatement
- [x] Abatement Performed Outside of Normal Facility Hours
- Other - Describe: Work performed during ongoing construction

### Scope of Work (Check All That Apply)
- [x] 30 sf or 30 ft
- [x] 150 sf or 1500 ft
- [x] Demolition

### Renovation
- VAT
- 244 SF

### Description of Asbestos-Containing Material (ACM)
- Location of Asbestos-Containing Material (ACM) to be Abated in Facility (13)
- Name of Registered Waste Hauler (17)
- NJDEP Waste Hauler ID No. 17273
- Cubic Yards of Waste
- 20
- Name of Registered Landfill
- Grows Landfill North

### Disposal Date
- TBD

### City, State
- Newark, NJ 07114

### Completed by
- Amanda Vallone
- Admin Operations Manager

### Title
- Signature: Amanda Vallone

### Date
- 07-21-17

*Do not use this form for asbestos licensure exempted activities.*
<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)</th>
<th>Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)</th>
<th>Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Switching yard</td>
<td>x</td>
<td>Transite cement pipe</td>
<td>200</td>
<td>x</td>
</tr>
</tbody>
</table>

Jul 25 2017
State of New Jersey  
NOTIFICATION OF ASBESTOS ABATEMENT  
(Pursuant to NJAC 8:60 and 12:120)  

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>Name of Building Owner/Operator (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>7/21/17</td>
<td>ALEXANDER De ROSA</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Agencies Notified</th>
<th>Type Notification</th>
<th>Name of Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>EPA</td>
<td>Initial</td>
<td>ALEXANDER De ROSA</td>
</tr>
<tr>
<td>DEP</td>
<td>Amended</td>
<td></td>
</tr>
<tr>
<td>DOL</td>
<td>Emergency (including justification)</td>
<td></td>
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<tr>
<td>DOH</td>
<td>Cancellation</td>
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<table>
<thead>
<tr>
<th>Street Address</th>
<th>City, State, Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>JUL 25 2017</td>
</tr>
</tbody>
</table>

Name of Facility Where Abatement is Taking Place (3)
RESIDENCE

<table>
<thead>
<tr>
<th>Type of Facility (4)</th>
<th>Square Feet</th>
<th># of Floors</th>
<th>Bldg. Age</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2800</td>
<td>1</td>
<td>50</td>
</tr>
</tbody>
</table>

Name of Facility Hired by Building Owner (8)
ACSM No.

<table>
<thead>
<tr>
<th>Name of Abatement Contractor (9)</th>
<th>Street Address</th>
<th>City, State, Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>A.MAC Contracting Inc.</td>
<td>185 Vreeland Ave</td>
<td>Midland Park, NJ 07432</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Telephone No.</th>
<th>License No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>(201)262-6841</td>
<td>00158</td>
</tr>
</tbody>
</table>

Start Date (10) | Scheduled Completion Date (11)
8/2/17          | 8/15/17

Occupancy Status During Abatement (Check Only One)
- X Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours
- Other - Describe: Residential

Scope of Work (Check All That Apply)
- 25 sf or 25 sf
- 160 sf or 280 sf
- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED
In Facility (12)

<table>
<thead>
<tr>
<th>Location</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>BASEMENT PIPE INSULATION</td>
<td>183 LF</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Registered Waste Hauler</th>
<th>NJDEP Waste Hauler ID No.</th>
<th>Cubic Yards of Waste</th>
<th>Name of Registered Landfill</th>
</tr>
</thead>
<tbody>
<tr>
<td>Newark Carting Inc.</td>
<td>04509</td>
<td>3</td>
<td>Grand Central Sanitary Landfill</td>
</tr>
</tbody>
</table>

City, State, Zip Code  
Newark, NJ 07105

Completed by
Joseph Vocaturo  
Title  
Vice President  
Signature  
7/21/17

Disposal Date  
8/12/17

City, State, Zip Code  
Pan Argyl, PA 08702

* Do not use this form for asbestos licensure exempted activities.
State of NJ  
Notification of Asbestos Abatement  
Pursuant to NJAC 8:60 and 12:120

Date of Notification (1)  
1/19/17

Name of Building Owner/Operator (2)  
crossroads community ministries, inc.

Street Address  
498 e. 25th street

city, State, Zip Code  
paterson, nj 07514

Name of Contact  
thomas henion

Telephone Number  

FACILITY INFORMATION

Name of facility where abatement is taking place (3)  
crossroads community ministries, inc.

Street Address  
409 e. 25th street

city (5)  
paterson

County Code (7) (State use only)  
PASSAIC

Name of Monitoring Firm Hired by Bldg. Owner (8)  
ASCM No.

Type of Facility (4)  

Square Feet  

# of Floors  

Bldg. Age  

Current Use (Prior if being demolished)  

Name of Abatement Contractor (9)  
D & S RESTORATION, INC.

Street Address  
20 California Ave.

city, State, Zip Code  
Paterson, NJ 07503

Telephone Number  
973-345-8020  
License Number  
01169

Name of OSHA Monitor  
D & S Restoration, Inc.

Street Address  
20 California Avenue

city, State, Zip Code  
Paterson, NJ 07503

Occupancy Status During Abatement (Check only one)  

Scope of Work (check all that apply)  

≥3 sf or ≥½ if  

≥160 sf or ≥260 if  

Location of asbestos-containing material (ACM) to be abated in facility (13)  

Description of asbestos-containing material (ACM)  

Amount (Specify SF or LF)  

Removal  

Repair  

Encapsulation  

Location of asbestos-containing material (ACM) by maintenance/custodial staff (12)  

Yes  

No  

N/A  

BASEMENT  

PIPE INSULATION  

180 ft

Registered Waste Hauler  
D & S RESTORATION, INC.

NJDEP Hauler ID#  
13506

Cubic Yards of Waste  
2 yds.

Name of Registered Landfill  
TULLYTOWN, RESOURCE RECOVERY

City, State  
Paterson, NJ 07503

Completed by (Print or Type)  
BOGDAN JOLDZIC  
Title  
President

Disposal Date  
08/08/17

City, State  
TULLYTOWN, PA

Date  
07/19/2017

This document is for asbestos inspection exempted activities.
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60-7 and 12:120-7)

Date of Notification (1)
10/17/11

Name of Building Owner/Operator (2)
Bristol-Myers Squibb

Street Address
1 Squibb Drive

City, State, Zip Code
New Brunswick, NJ 08903

Name of Facility Where Abatement is Taking Place (3)
Bristol-Myers Squibb

Street Address
1 Squibb Drive

City, State, Zip Code
New Brunswick, NJ 08903

Name of Monitoring Firm Hired by Building Owner (8)
Environmental Tactees, Inc.

Address
64 Broad St.

City, State, Zip Code
Marlton, NJ 08044

Name of Abatement Contractor (9)
Advanced Specialty Contractors, LLC

Address
2400 Main Street Extension Suite 10

City, State, Zip Code
Staunton, VA 24401

Name of Asbestos Contractor (5)
Environmental Tactees, Inc.

Address
64 Broad St.

City, State, Zip Code
Marlton, NJ 08044

Scheduled Start Date (10)
10/18/11

Scheduled Completion Date (11)
11/01/11

Occupancy Status During Abatement (Check one only)
X Abatement Performed Outside of Normal Facility Hours - Describe:

Scope of Work (Check all that apply)
X Demolition

Amount
10,000 sq ft

Abatement Type
Full Containment with Negative Pressure

Location of Asbestos-Containing Material (ACM)

Building 80-84

Material of Containing
Flour Tile VAT

### Table

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM)</th>
<th>Location of Normally Used Material</th>
<th>Description of Asbestos-Containing Material (ACM)</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Building 80-84</td>
<td>X</td>
<td>Flour Tile VAT</td>
<td>10,000 sq ft</td>
</tr>
<tr>
<td></td>
<td>X</td>
<td>Pipe Insulation</td>
<td>1,000 sq ft</td>
</tr>
<tr>
<td></td>
<td>X</td>
<td>Cont. Ceiling Plaster</td>
<td>1,250 sq ft</td>
</tr>
<tr>
<td></td>
<td>X</td>
<td>Metal Walls</td>
<td>4,000 sq ft</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Total</td>
<td>16,250 sq ft</td>
</tr>
</tbody>
</table>

Name of Registered Waste Hauler
Freemold Cartage

Address
15939

City, State
Freehold, New Jersey

Completed By (Print or Type)
Kurt Male

Date
7/21/11
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60-7 and 12:120-7)

Date of Notification (11):
1/17/21

Name of Building Owner/Operator (2):
Bristol-Myers Squibb

Address:
1 Squibb Drive
City, State, Zip Code:
New Brunswick, NJ 08903

Type of Notification:
[X] Initial Notification

Name of Facility Where Abatement is Taking Place (3):
Bristol-Myers Squibb

Street Address:
1 Squibb Drive

City (5):
New Brunswick

County (6):
Middlesex

County Code (7):
(STATE USE ONLY)

Type of Facility (4):
[X] Other (i.e., private & commercial buildings, homes, etc.)

Square Feet:
70

Current Use (Prior to being demolished): Laboratory

Name of Abatement Contractor (9):
Advanced Specialty Contractors, LLC

Street Address:
2400 Main St., Extension Suite 10
City, State, Zip Code:
Sayreville, NJ, 08872

Name of OSHA Monitor:
Environmental Tactics, Inc.

Street Address:
64 Broad St.
City, State, Zip Code:
Matamoras, PA 07747

Name of Monitoring Firm Hired by Building Owner (8):

Project Manager:
Tom Geiger

Telephone Number:
732-220-2217

Scheduled Start Date (10):
1/18/21

Scheduled Completion Date (11):
1/18/21

Occupancy Status During Abatement (Check only one):
[X] Facility Closed/Vacated During Entire Period of Abatement

Scope of Work (Check all that apply):
[X] Demolition
[X] Renovation

Is Location Normally Used Soiled?
Location
Regular Maintenance/Custodial Staff (12)

Description of Asbestos-Containing Material (ACM):
(i.e., thermal systems insulation, surfacing, VAT.
or other miscellaneous)

Amount:
SF or LF

Abatement Type:

Name of Registered Waste Hauler:
Freecarrage
Waste Hauler ID No.:
12549

Cubic Yards of Waste:
30

Name of Registered Landfill:
Grass Landfill

Disposal Date:
10/05/17

City, State:
Tullytown, PA

Completed By (Print or Type):
Kurt Nale

Signature:

Date:
7/21/17
**State of New Jersey**

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

**Date of Notification (1)**
7/12/17

**Name of Building Owner/Operator (2)**
New Jersey Natural Gas

**Agencies Notified**
- EPA
- DEP
- DOL
- DOH
- DCA

**Type Notification**
- Initial
- Amended
- Emergency (including justification)
- Cancellation

**Street Address**
775 Vassar Ave

**City, State, Zip Code**
Lakewood, NJ 08701

**Name of Contact**
Edward Yurick

**Name of Facility Where Abatement Is Taking Place (3)**
New Jersey Natural Gas

**Street Address**
858 Lakewood Farmingdale Rd.

**County Code (7)**
(MONMOUTH)

**Name of Monitoring Firm Hired by Building Owner (8)**

**ASCM No.**

**Project Manager for Monitoring Firm**

**Telephone No.**

**Start Date (10)**
7/31/17

**Scheduled Completion Date (11)**
8/29/17

**Occupancy Status During Abatement**
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours
- Other – Describe: Outdoor removal, no one in the area

**Scope of Work (Check All That Apply)**
- 2,300 sf or 2,311 sf
- 2,160 sf or 2,160 sf
- Demolition
- Renovation

**Location of Asbestos-Containing Material (ACM) TO BE ABATED**

**In Facility**

**Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)**
- Yes
- No
- NA

**Description of Asbestos Containing Material (ACM)**
(i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)

**Amount (Specify SF or LF)**
600 LF

**Location of Registered Waste Hauler**

**Name of Registered Waste Hauler**
NJDEP Waste Hauler ID No. 15939

**Cubic Yards of Waste**
40

**Name of Registered Landfill**
G.R.O.W.S.

**Disposal Date**
8/12/16

**City, State**
Morrisville, PA

**Completed by**
Michael Migliore

**Title**
Sr Account Manager

**Signature**

**Date**
7/12/17

---

**Advanced Specialty Contractors, LLC**

**Street Address**
2400 Main Street Extension, Suite 10

**City, State, Zip Code**
Sayreville, NJ 08872

**Telephone No.**
732-525-0100

**License No.**
00750

**Name of OSHA Monitor**
Tiger Environmental

**Street Address**
16 W Elizabeth Ave #2

**City, State, Zip Code**
Linden, NJ 07036

**Type of Facility (4)**
- School (K-12)
- Subchapter 8 (Other than K-12)
- Other (i.e. private & commercial buildings, homes, etc.)

**Square Feet**
NA

**# of Floors**
NA

**Bldg. Age**
NA

**Current Use (Prior if being demolished)**
Outdoor pipe insulation

**Full Containment with Negative Pressure**

**Mini-Enclosure**

**Glovebox Procedure**

**Non-Exempted (*) and Non-Friable Procedure**

---

**Pipe to truck loading rack from T1 and**

**Pump Stations**

---

**Name of Registered Waste Hauler**
Freehold Cartage Inc

**Freehold Cartage Inc**

**Title**

**Signature**

**Date**
7/12/17