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

I Emergency DNC	TIFICATION				NESTE		<u>Ú</u>		
Date of Notification (1)			ner/Operator Private Ho	(-)			0.4.0		
7/22/16 Agencies Notified Type Notification	Street Ac		1 ((Valo) 10		JUL 2	S-2	U16 -	, ••·	
EPA Initial DEP Amended Amendment #		te, Zip Code NJ 08723			ASBESTOS LICE	401K COV	THC G	La	
DOH Emergency (including justification)	Name of John	Contact		· · · · · · · · · · · · · · · · · · ·	Telephone Num	her			
	050000000000000000000000000000000000000	LITY INFORI	MATION						
Name of Facility Where Abatement is Taking Place (3) John Georgalas Private Home				Type of Facility	12)				
Street Address				Subchapte Other (i.e. etc.)	r 8 (Other than K-12 private & commerci	2) al build	ings,	nome	s,
City (5) Brick NJ 08723				Square Feet 1000+	# of Floors 2		dg. A	ge	
County (6) Ocean	County (Code (7) USE ONLY)		Current Use (Pr Home	ior if being demolish	ned)			
Name of Monitoring Firm Hired by Building Owner (8) N/A	ASCN	/I No.		of Abatement Co aco Inc.	ntractor (9)				
Street Address				Address Box 329					
City, State, Zip Code			1 17.00	state, Zip Code t Berlin NJ 080	091				
Project Manager for Monitoring Firm	Telepho	ne No.	1000	ione No. 753-9800	License N 00727	lo.			
Start Date (10) Schedule 7/25/16 7/27/16	d Completion	Date (11)	Name Sam	of OSHA Monitor			23000		
Occupancy Status During Abatement (Check Only On	- No		100000000	Address		200000			
Facility Closed/Vacated During Entire Period of A Abatement Performed Outside of Normal Facility Other – Describe:	batement		City, S	State, Zip Code	g.				
Scope of Work (Check All That Apply)									
	enovation emolition			Mini-Enclosu Glovebag Pro	nent with Negative re ocedure ed (*) and Non-Fria			e	
	Location							ement pe	t
Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) Mai	Normally d Solely by intenance/ odial Staff? (12)	(i.e. th	Description S Containing I Bermal system Surfacing, V Bother miscella	Material (ACM) is insulation, AT, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Yes	No N/A					-		Ф	
Exterior Siding	Х		Exterior S	ding	800 SF	X			
				s ersesse					
Name of Registered Waste Hauler United Roll Off	NJDEP V Hauler III 2245	No.	Cubic Yards of Waste 3	G.R.C	f Registered Landfi).W.S.	11			
City, State			Disposal.Date		ate sville PA 19067				
Completed by Title			marker trained		2.	ate			

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

NIMOK		NOT				C 8:60 and 5:16				
Data of Notification (1)	0 04					g Owner/Operator (2	,			<u>厚厂</u>
Date of Notification (1)	20 /	16				Board of Educati				
Agencies Notified	Type Notification	on		Street	Address		1	THE JUL ?	2 6 2016	
⊠ EPA	☐ Initial			3 W	/illiams S	Street	į		_ 0 20.0	
□ DOLWD □				City, S	State, Zip 6	Code		100=0=		
Ø DOH	Amendmen			Gla	ssboro,	NJ 08028	I	ASBESTOS		JL &
DCA (NJAC 5:23-8)	☐ Emergency justification		,	Name	of Contac	t		Telephone Num	NSING ber	
(110,10 0.20 0)	Cancellation	\$6		Nev	wport Co	nstruction				
				FAG	CILITY IN	FORMATION		Ex E		
Name of Facility Where	Abatement is Tal	king Place	(3)				Type of Facilit	ty (4)		
Glassboro High S	chool						School (K-		2)	
Street Address							☐ Subchapte	er 8 (Other than K-12 private and comme	:) :rcial building	S.
560 Joseph L. Boy	we Boulevard						homes, etc	c.)		20
City (5)							Square Feet	# of Floors	Bldg. Ag	je
Glassboro				10		71/05/15/19/19/19	20,000	2	80	
County (6)				Cour	nty Code (7	7)(STATE USE ONLY)	School	Prior if being demoli	shed)	28
Gloucester Name of Monitoring Firm	n Hisad by Buildin	a Oupor	(0)	ASCM	No	Name of Abateme		(0)		
Environmental De	57 40	ig Owner ((0)	ASCIVI	140.	Shade Enviro	Section 2010 Control of the Control			
Street Address	sign, me.					Street Address				
5434 King Avenue						623 Cutler Av	/enue			
City, State, Zip Code						City, State, Zip Co	ode			#
Pennsauken, NJ 0	8109					Maple Shade	, NJ 08052			
Project Manager for Mo	nitoring Firm		Tele	phone	No.	Telephone No.	8	License No.		
Tim Gromen			85	66-616	-9516	856-755-0099		00842		
Start Date (10)		heduled C				Name of OSHA M	lonitor	-03		
06/16/	16		12	! / _	16	EMSL Analyt	ical, Inc.		*	Đ.
Occupancy Status Durin	ng Abatement (Ch	eck only o	one)			Street Address			•	
☐ Facility Closed/Vaca						200 Route 13				
☐ Abatement Performe Time of Abatement:						City, State, Zip Co				
					,	Cinnaminsor	ı, NJ 08077			
Scope of Work (Check a	ill that apply)					⊠ Full Conf	tainment with N	legative Pressure		
≥3 sf or ≥3 lf			novati			☐ Mini-Enc	losure			
≥160 sf or ≥260 If		∐ De	molitic	n	2		g Procedure mpted (*) and h	Non-Friable Procedu	ıre	
		Is	Locat	ion	Ĭ				Abateme	ent Type
Location	n of		Vorma			Description o			ת ת	т п
Asbestos-Containing TO BE AB			d Sole intena			estos Containing Ma e., thermal systems		Amount (Specify	Repair	Enclosure Encapsulate
IN Faci		Cus	todial	Staff?	(1.0	surfacing, VAT		SF or LF)	val	sure
(13)			(12)	1	-	other miscellane	ous)			ate
Thereselves		Yes	No.	N/A	Close T	ile and Mastic		2,300 SF		
Throughout							W			
Chases		_				sulation/Fitting ((A) (B)			
Chases					Pipe In	sulation (Repair	& Label)	100 LF		
*										
Name of Registered Wa	ste Hauler			JDEP \ auler II		Cubic Yards of Waste		gistered Landfill		
Freehold Cartage		j)		15939		10 -		and County Land	11111	
City, State					*	Disposal Date	City, State			
Freehold, NJ						08/12/2016	Newburg	j, PA		
Completed By (Print or 7	Гуре) Т	Title				Signature	70	\	ate	
Christina Lynch		Operati	ions I	Manag	jer	(// What	\sim		1/2016	O

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

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Date of Notification (1)						•		operator (2			- <u> </u>	0 1		-	
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☑ DOH	Amendmer	1000		G	lass	boro, N	IJ 0802	8			ASBESTOS			Lα	
DCA	☐ Emergency iustification	2000	9	Nam	ne of	Contact					Felephone Numb				
(NJAC 5:23-8)	Cancellation	.0		D	rew	Sole									
				F	ACII	LITY IN	FORMA	TION							
Name of Facility Where	Abatement is Ta	king Plac	e (3)						Ту	pe of Facility (4))	720.00			
Thomas Bowe Sch		3								School (K-12)					
Street Address] Subchapter 8 (i] Other (i.e., priv			Idina		
7 Ruth Mancuso La	ane								اا	homes, etc.)	ate and comme	Ciai Du	iumy.	٥,	
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Glassboro										150,000	1	€	0		
County (6)				Co	unty	Code (7)	(STATE U	ISE ONLY)	Cu	urrent Use (Prior	if being demolis	hed)	•		
Gloucester										School	12				
Name of Monitoring Firm	Hired by Buildi	ng Owner	(8)	ASC	M No	0.	Name o	of Abatem	ent	Contractor (9)		¥			
Environmental Des				00	95		Shad	de Enviro	onn	nental, LLC					
Street Address			<u> </u>				Street A	Address							
5434 King Avenue,	Suite 101						623	Cutler A	ven	nue					
City, State, Zip Code	2 STANSON STANSON 200 TOOLS						City, St	ate, Zip C	ode	:					
Pennsauken, NJ 08	3109						Мар	le Shade	e, N	J 08052					
Project Manager for Mor			Te	lephor	ne No	0.	Teleph	one No.			License No.				
Jay Murray	-		8	356-6	16-9	516	856-	755-0099	9		00842				
Start Date (10)	So	cheduled	Comp	letion	Date	(11)	Name o	of OSHA N	Mon	itor					
07 / 25 /	16	08_	/ _1	2	/	16	EMS	L Analyt	tica	al, Inc.					
Occupancy Status Durin		heck only	one)	8			Street	Address							
□ Facility Closed/Vacat				ement			200	Route 13	30 1	North				18	
Abatement Performe	d Outside of No	rmal Faci	ity Ho	urs - D	escr)	ribe	City, St	ate, Zip C	ode	?					
Time of Abatement:	AM	PM/	PN	Λ	A	M				NJ 08077					
Scope of Work (Check a	Il that apply)	-		201000			1								
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Name of Registered Wa			İ	NJDE Haule			Waste	raius oi			d County Land	lfill			
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Christina Lynch		Opera	ations	s Mar	iage	er		Myb	7	$\mathcal{Q}(\mathcal{I})$) 7	118	110	l	

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

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Agencies Notified	Type Notification				Address								ر	
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DOH DCA	justification) Cancellation		ĺ		N KLICH				Ten	epnone	Number			
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Name of Facility Where		g Place	(3)				Туре	of Facility (4	4)					
Stevens Institute o	recnnology							school (K-1						
davidson room 208	₹							Subchapter Other (i.e. p	8 (Otherivate 8	er than l & comm	K-12) ercial bu	ildinas	hom	105
City (5)	,						_ e	tc.)				_		103
HOBOKEN							N/A	e Feet	# of	Floors	100	Bldg. N/A	Age	
County (6)				County	Code (7)			nt Use (Prio		-				
HUDSON					USE ONLY)			ITUTE		ig com	Juditody			
Name of Monitoring Firm N/A	Hired by Building	Owner (8)	ASC	M No.			ement Con YTEMEN						
Street Address						V 200000000	et Addres							
City State 7:- Code		_					AN AN OLD MINE MINISTER	LIN STR	EET					
City, State, Zip Code							, State, Zip		-0.4					
Project Manager for Mor	iltorina Firm	-	T	Telepho	ne No	10.00	phone No	N,NJ 075	024	1:	- KI			
,anegorior mor				relepho	ile IVO.		3 - 333-51			Licens 0127				
Start Date (10)		Schedu	led Cor	npletion	Date (11)		ne of OSH					-		
7/29/2016		8/7/20				EH	IW ABA	TEMENT	LLC					
Occupancy Status During	g Abatement (Chec	k Only O	ne)			1	et Address							
Facility Closed/Vaca	ated During Entire F	eriod of	Abater	nent			FRANK							
Abatement Perform Other – Describe:	ed Odtside of North	ai raciiii	y Hour:	·		13	State, Zip TERSO							
Scope of Work (Check A	Il That Apply)		-			I FA	TERSU	IN,INJ				40°		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		×	Renova Demoli	ition ion			Mini- Glov	Containmer -Enclosure ebag Proce -Exempted	edure				·e	
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(13)						other miscell	aneous)			×	oval	air	sulat	sure
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Name of Registered Wast				JDEP W		Cubic Yards		Name of Re	egister	ed Lanc	lfill	-		
TRI STATE TRÅNSF	ER			auler ID I /A	1	of Waste N/A		MINERV						
City, State			IN			Disposal Dat		City, State	-				-	
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VICTOR ESPIRITU		PRO	JECT	MANE	GER	ihin	30 W		37		07/20/2	016		

State of NJ

Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7) 2016-105 B & G proj. #: *** ADDITIONAL FOOTAGES *** Date of Notification (1) Name of Building Owner/Operator (2) JUL 26 2016 10 17 1/12 12 1/11 16 1 Stevens Institute of Technology Type Notification Agencies Notified Street Address **ASBESTOS CONTROL &** EPA Castle Point on Hudson LICENSING Initial DEP City, State, Zip Code Amendment Hoboken, NJ 07030 X DOL Telephone Number Name of Contact X DOH Cancellation David Fernandez DCA **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Howe Building (NON Sub 8) Subchapter 8 (Other than K-12) X Other (Private/Commercial Street Address Bldgs./Homes, etc. Bldg. Age Castle Point on Hudson # of Floors Square Feet County Code (7) County (6) City (5) Current Use (Prior if being demolished) (State use only) Hudson College Hall Hoboken, NJ 07030 Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. B & G Restoration, Inc. TTI Environmental Inc. Street Address Street Address 105 Ryerson Road 1253 North Church Street City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Moorestown, NJ 08057 License Number Telephone Number Phone Number Project Manager for Monitoring Firm (973)696-6869 00378 856-840-8800 Jim Guilardi Name of OSHA Monitor Sched. Completion Date (11) Scheduled Start Date (10) B & G Restoration, Inc. 07/25/2016 Street Address 07/22/2016 105 Ryerson Road 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-Describe: Friday 4:00 pm & weekend work LincolnPark, NJ 07035 Other-Describe: Scope of Work (check all that apply) ☐ Full Containment w/negative pressure ▼ Glovebag procedure **X** Renovation Demolition Non-friable procedure X Mini-enclosure x >160 sf or >260 lf >3 sf or >3 lf Ε Is location normally used solely Ε е n Location of by maintenance/custodial Amount n Description of asbestos-containing m p С asbestos-containing (Specify SF or staff(12) 0 C material (ACM) а material to be LF) V D abated in facility (13) N/A No Yes X 20 sf fireproofing from 2 beams X Pierce Dining Area X 60 sf X VAT, mastic, carpet 2nd floor lobby (2 closets) X 144 sf VAT, mastic, carpet X Room 611 X 1 sf fireproofing X Room 611 6 If X pipe fitting insulation Pierce Dining area Cubic Yards of Waste Name of Registered Landfill NJDEP Hauler ID# Registered Waste Hauler Tullytown Resource & Recovery Center 19563 B & G Restoration, Inc. Disposal Date City, State Tullytown, PA 07/26/2016 Lincoln Park, NJ Date Signature Gordana Luna Completed by (Print or Type) 07/22/2016 Secretary/Treasurer G.Irdana Luna

#1700

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

Name of Building Owner/Operator (2) Date of Notification (1) 2016 7/21/2016 John Edelmayer Agencies Notified Type Notification Street Address | Initial EPA Amended DEP City, State, Zip Code LICENSING X DOL Amendment# Pennsauken Emergency (including Telephone Number justification) Name of Contact X DOH DOH Cancellation Randy Victory FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Residence Subchapter 8 (Other than K-12) Street Address Other (i.e., private 8 commercial buildings, homes, etc. Square Feet Bldg. Age # of Floors City (s) 2200 50 yrs Pennsauken County Code(7) (STATE Current Use (Prior if being demolished) County (6) USE ONLY) Residence Camden, NJ Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner ASCM No. AEi2, LLC Street Address Street Address 361 E. Fleming Pike City, State, Zip Code City, State, Zip Code Hammonton, NJ 08037 Telephone No. License No. Project Manager for Monitoring Firm Telephone No. 00689 609-481-2122 Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) AEi2, LLC 8/26/16 7/23/16 Street Address Occupancy Status During Abatement (Check only one) 361 E. Fleming Pike ▼ Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours Hammonton, NJ 08037 Other - Describe: Full Containment with Negative Pressure Scope of Work (Check all that apply) Mini-Enclosure Renovation Demolition >3 sf or >3 If Glovebag Procedure X > 160 sf or ≥260 lf Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Normally Туре Used Solely by Description of Location of Amount Asbestos Containing Material (ACM) Maintenance/ Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, Custodial (Specify e TO BE ABATED surfacing, VAT, or SF or LF) Staff? Pair IN Facility o V (12)other miscellaneous) (13)a 1 N/A Yes No 30 lf X TSI Crawl Space X Name of Registered Landfill Cubic Yards NJDEP Waste Name of Registered Waste Hauler of Waste Hauler ID No. TBD AEi2, LLC 21376 ,2 Disposal Date City, State City, State TBD TBD Hammonton, NJ Date Completed By Title 7/21/16 Program Mgr. Wm. Minnick

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

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X DOL	Amendment: Emergency (South O	tox next out	NJ 07	079				LICEN				
DOH _	justification)	moldang		Name of C		1				Telephone	Number				
DCA	Cancellation			Greg Ca			ON						_		
Name of Facility Where Aba	tement is Taking	Place (3)	-	FACILI	TY INFO	RWAIR	JN	Туре о	f Facility (4)						
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Street Address								s	ubchapter 8	(Other than I	K-12)	.:(2):2	h		
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City (5)					-			Square		# of Floors		Bldg	g. Age	Э	5 45 St.
South Orange															
County (6) Essex				County Co (STATE US						if being dem	olished)				
Name of Monitoring Firm Hir	red by Building	Owner (8)		ASCM I	Vo.				ement Contr						
Competent Superviso	r								Constructi	on Inc.					
Street Address						ď	Street A		s West Sui	to 11					
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City, State, Zip Code									J 07512						
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Project Manager for Monitor	ing Firm			releptions	; INU.		100000000000000000000000000000000000000	332-4		0115	55				
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Start Date (10) 08/06/16		08/13/1			, ,		Same	e as A	Above						4.2
Occupancy Status During A	batement (Chec	ck Only On	e)				Street	Addres	S						
Facility Closed/Vacate Abatement Performed Other – Describe:	Outside of Norr	Period of A mal Facility	batem Hours	nent			City, St	ate, Zi	p Code						
Scope of Work (Check All T	nat Apply)	× R		at a a				LEU	l Containme	nt with Negat	ive Pres	sure			
× ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emolit					Mir	i-Enclosure						
2100 31 01 2230 11							×		vebag Proce	edure (*) and Non-	Friable F	Proce	edure		
		T						1 1401	LXomptou	1/2002				ment	
			Locat Jorma	(S) (S) (S) (S)		Γ.	escription	of				-	Тур	e	
Location of Asbestos-Containing M		Use	d Sole	ely by	Asbes	stos Cor	ntaining M	Naterial	(ACM)	Amount				Ē	m
TO BE ABAT	ED	3/4	intena odial:	Staff?	(i.e.		al systems acing, VA		ation,	(Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
In Facility (13)			(12)			other	miscellar	neous)			´	ova	bair	sula	Sure
A.000064		Yes	No	N/A										ē	
D	1	VIII.		X		Pine	e Insula	tion		80 LF	X			Χ	
Basemen				+ 1		,-									
		- 1							-			-			
				-								+			-
2.							V :		I No. 1	Registered La	204511				
Name of Registered Waste	: Hauler			NJDEP W Hauler ID		of W	c Yards aste				3 101111				
Academy Construction	n Inc.			34422	2007/2007 2007/2007	3				S Landfill					
Academy Constitution						100000000000000000000000000000000000000	osal Date	j	City, State						
City, State						TBD	1		Tullytov	VN. PA					
N 7			_			1					Tn.		_		
City, State		Title PM				1	Signatur	e /	31 1	11	Date 07/2))/1			

CX 3494

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification	(1) 7-22-2016	-						(2)	1 - 1		2 20	116			
Agencies Notified	Type Notific	ation					—		 	IUL 2	U 2 4	110		-	
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DEP	Initia								1000	STOS	CON	TRO	L &	ĺ	
☐ DOL ☐ DOH	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ended					/204		<u> </u>	<u> </u>	Kanha	Try Mt	Imbo		
□ DOH □ DCA		ergency cellation					mary Contact) Free	d Gardne.			rc pi io	ie iu	111111	7.0	
DCA	L Can		l`			V2008.	XX70 40								
					CILIT	Y INFO									
Name of Facility Wh			ace (3	3)											
Single Family Home Street Address	e - Basemen	I.							than K-12)						
Street Address										uildings	, hom	es, e	tc.)		
			School (K-12)												
City (5)		County (6)	Co	unty C	Code (7)					20101 VASS	72			
Roselle Park, NJ		Union							demolished	(t					
					7				. (0)						
Name of Monitoring Health and Safety S		by Building Own	er (8)												
Street Address	DEI VICES				1111				roup, ceo			-			
P.O. Box 365									202						
City, State & Zip Co	de														
Berlin, NJ 08009									10.7-						
Project Manager for Mr. Jim Proctor	Monitoring	Firm				per			Lice	inse ivur		5			
Scheduled Start Da	to (10)	Scheduled Cor				<u> </u>					0110				
08-04-201					(, , ,	,			atories, Inc.						
Occupancy Status [pancy Status During Abatement (Check on														
	sed/Vacated	During Entire P	eriod	of Aba	ateme	nt									
		luring Normal H	ours:												
Describe:		g Abatement					Officia, No of	063							
Scope of Work (Che					-	-									
										with Ne	gative	Pres	sure		
≥3 sf or ≥3 l			100												
≥160 sf ≥26	0 If			Den	nolitio	n					Friable	Dro	codu	re.	
1	ocation of		le	Locat	ion	1	Description								
	tos-Containi	na									1.00	101111		, 60	
	erial (ACM)	9									77		П	Ш	
	BE ABATED						(i.e., thermal s	ystems	0		en	Re	Encap	Enclosure	
is	n Facility		Custo		Staff?	i					lova	oair	osulat	nsc	
	(13)		Yes	_	N/A		or other miscen	aneous)			1 70		at	ē	
Dagament			100			Dina I	ngulation		228	IF		П	П	П	
Basement	-		H	H	H	ripe	пзитаттоп		220	LA	th		$\overline{\Box}$	Ħ	
			H	H	H		<u> </u>				ਜ	Ħ	n	n	
			H	H	H				-		愩	Ħ	Ħ		
				H	H						ਜ	Ī	n	П	
			H		H	-									
Name of Registered Waste Hauler					DEP '	Waste	Cubic Yards	Name of Re	egistered La	ındfill					
				1000			Control Contro		1511						
Resource Managem	nent Group,	LLC		00	35218	3			dfill						
City, State									DΛ						
Trenton, NJ 08619				-				iviorrisville,	ra ————						
Completed By (Prin	t or Type)			1			Signature	r 11.			Date	2016			
Mr. Brian Haney				144	esider	10	IKMAN	k -#	V / ()	20	7-22-2016				
							1///	1 /14	47						
<u></u>							M '	1	D						

CK 4020

State of New Jersey NOTHICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1)	Name of	Building Owner/Operator TRAW SEUR	(2) -MATION	HENT!	26	20	16	
Agencies Notified Type Notification PA X Initial	Street Ad	dress .		MUDING	RO	7:47	AOI.	ا ي
DEP Amended Amendment#	City, State	e, Zip Code	M & 0	AI: T	0 8		18	
☐ Emergency (including justification)	Name of 0	EGG HAR	BOYC	Telephone Numb		ے د	10	=-
DCA Cancellation	Name of	TOM					-	
	FACILI	TY INFORMATION		-				
Name of Facility Where Abatement is Taking Place (3)		Type of Facilit	y (4)				
RESIDENCE			School (K-1	12) r 8 (Other than K-12	?)			
Street Address			homes, etc					,
City (5) BRIGHATINE			Square Feet	# of Floors	.	<u>50</u>		
County (6) ATLANITIC	County C USE ON	Code (7) (STATE LY)	T	Prior if being demolis	shed)			
Name of Monitoring Firm Hired by Building Owner	ASCM No.		nent Contractor (
(8) N/A			MCO 1	TWC.				
Street Address		Street Address	S. Spri	DCE AVE				
City, State, Zip Code		City, State, Zip C		DE NI.J	80	305	52	
Project Manager for Monitoring Firm	elephone No.	Telephone No.	9-0472	License No.	Ч ч	(
Start Date (10) Scheduled Corr	pletion Date (1							
8-1-16 8-8			MA					
Occupancy Status During Abatement (Check only on	e)	Street Address						
☐ Facility Closed/Vacated During Entire Period of Ab ☐ Abatement Performed Outside of Normal Facility H	atement lours	City, State, Zip C	Code			_		_
Other - Describe:								
Scope of Work (Check all that apply)		Full Cor	ntainment with N	egative Pressure				
□≥3 sf or ≥3 lf □ Reno		☐ Mini-En	closure ag Procedure					
∑≥160 sf or ≥260 lf		Non-Ex	empted (*) and N	on-Friable Procedu	1			_
. Is Loc Norm		0			"	bate Typ		
Location of Used Sc	olely by	Description of Sbestos Containing Mat		l . Amount			m	
TO BE ABATED Custo	dial	(i.e., thermal systems i	nsulation,	(Specify SF or LF)	Rer	Re	nca	End
IN Facility Star (13) (12		surfacing, VAT, other miscellaned	ore)	Sr O(Cr)	Remova	Repair	Encapsula	Enclosure
1.07	o N/A	₩					ite .	В
5(D ING	X	TRAWSIT	E	1500	X			_
					-	-		-
	NJDEP Waste	Cubic Yards	T Name of Rec	istered Landfill				
Name of Registered Waşte Hauler	Hauter ID No.	of Waste	/ Marie di rieg	- C U 14				
KLEMCO INC	17900	Disposal Date	City, State	· - V · ·				
City State MAPLE SHADE M])			SANITUIZLI	Ē	W .	1	==
Completed By Title	011500	Signature	-1001	Date	-71	_	6	
MICHAET KLEMM SUPE	RUISOR							

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

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OILI	1101	11 10	\neg	CIA

Date of Notification (1)	-			of Building	Owne	r/Operator	(2)		EC) [E	- []-	<u> </u>	E
7/25//6 Agencies Notified Type Notification		_	PSE						,				
EPA Initial	,			Address HADLE	Y RO	AD			JU	L 2	6	2016	j
DEP Amended Amendmen	nt #			itate, Zip C		D NII	7000		T				
DOH Emergency justification	(including	_		of Contact			77000	1770	ASBES lephone Nu				OL 8
DCA Cancellatio			Jo	HN	m	ARO	TTE	. '	ichi ioi ie i Alf	udber	40 <u>0</u>	<u>, G</u>	
Name of Facility Where Abatement is Taki	ng Place (3)		CILITY INF	ORMA	TION	Type of Facility	(4)				0	10 -
Street Address MCBRIDE AVE	RL				138	H	School (K	-12) er 8 (Oth	er than K-1 & commerc	(2)	ilding	r bos	
City (5)		06	VIN	US R	CD.		etc.) Square Feet	# 0	f Floors		Bldg.	-	1169,
County (6) A) N		County	Code (7)			N/A		N/A		1/	A	
BERGEN	9		(STATE	USE ONLY	o		Current Use (P		ng demolis	hed)			
Name of Monitoring Firm Hired by Building ENVIRONMENTAL TACTICS	Owner (8)		ASC 004	M No. 5		Name UNIC	of Abatement Co QUE SYSTEN	ontractor IS OF	(9) AMERIC	A			
Street Address 64 BROAD STREET							Address NHITEHEAD	AVE.					
City, State, Zip Code MATAWAN, NJ 07747							tate, Zip Code TH RIVER, N	J 0888	2				-
Project Manager for Monitoring Firm TOM GEIGER		T		one No. 90-2217		Teleph	one No. 132-8350		License N	10.			<u> 40 3 3 11 0 10</u>
Start Date (10)	Schedule			Date (11)		Name	of OSHA Monitor				10052		
Occupancy Status During Abatement (Cher	k Only One) <u>.</u>	///	6			Address	13 UF /	AMERICA	4			
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr	nal Facility	baten Hours	nent				VHITEHEAD	AVE.					-
Other - Describe: Other - Desc	<u>.</u> S						TH RIVER, N	J 0888	2				
≥3 sf or ≥3 If	₹ R	enova	tion			Г	F. 11 O			0			
≥160 sf or ≥260 lf		emoliti				¥.	Full Containm Mini-Enclosur Glovebag Pro	e cedure					
	ls L	ocatio	on				Non-Exempte	d (*) and	Non-Friab	le Pro		re emen	<u> </u>
Location of Asbestos-Containing Material (ACM)		ormall Solel		Aabaa	De	scription	of					уре	
TO BE ABATED In Facility	Custo			(i.e.	therma	itaining Mi I systems icing, VAT	aterial (ACM) insulation,	(S	nount pecify	Re	R	Enca	Enc
(13)	70000	(12)				miscellane		SF	or LF)	Remova	Repair	Encapsulate	Enclosure
2142	Yes	No Vo	N/A	0.								हिं	Ф
OUTDOORS		\triangle		Pipé	E S	OMAS	stie	2	00 LF	X			
Name of Registered Waste Hauler		l N.	IDEP W	aste	Cubic	Yards	Namo of	Dogists -	ed Landfill				
WASTE MANAGEMENT		Ha	uler ID		of Wa	ste	GROW	10					
City, State ELIZABETH, NJ						sal Date	City, State	e					31
Completed by	Title					BD ignature	MORRI	OVILLE		e /	- 10		_
CAROL RAIMO	OFFIC	EM	GR				ral Xas	mi		1/2	5	116	>

ck. 7342	State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)						[]	OPEN N	OTII	ic.	ATEC	ייעוכ	
Date of Notification (1) 7/45//6 Agencies Notified Type Notification			PSE(of Building 3 Address	Owner/	Operator	(2)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	26	20	16	
EPA Initial Amended	22		4000	HADLE tate, Zip C		.D			ASBEST		<u> </u>	ــــــــــــــــــــــــــــــــــــــ	j 8
DOL Amendmen Emergency	(including	-	SOUT	TH PLA	INFIEL	D, NJ 0	7068		Li	CENS	ang		
DOH justification			Jo	H N CILITY INF	1 774	Ro	TTO	5	Telephone	· Numbe	er		
Name of Facility Where Abatement is Taking PSE+C=LC Street Address 18-74 Mc/S	CAT		N	15	ONNEAT	ION		ther (i.e.		K-12) nercial b	uildin	gs, hon	nes,
FAIR LA				, 02	-			tc.) e Feet V / A	# of Floors)	Bldg	Age	
County (6) DERGEN			(STATE	Code (7) USE ONL	y)			N	or if being dem	olished)	<u>. </u>	
Name of Monitoring Firm Hired by Building ENVIRONMENTAL TACTICS Street Address	Оwпег (8)		004	M No. 5		UNIC	QUE S	YSTEM	ntractor (9) S OF AMER	RICA		*	-
64 BROAD STREET City, State, Zip Code						396 \		HEAD,	AVE.				
MATAWAN, NJ 07747 Project Manager for Monitoring Firm			-			sou		VER, N.	J 08882		g		
TOM GEIGER Start Date (10)				90-2217		732~	one No 432-83	50	Licens 0111				
Occupancy Status During Abatement (Chec	Scheduled 121	/3	npletion	Date (11)				A Monitor YSTEM:	S OF AMER	ICA		7.	
Facility Closed/Vacated During Entire I	Period of Ab	aten	nent			396 V		HEAD A	AVE.				
Other – Describe: Gul Doo A Scope of Work (Check All That Apply)	S	10015					tate, Zip TH RI	Code VER, N.	08882				
≥3 sf or ≥3 If ≥160 sf or ≥260 If		nova molit		8		K	Mini- Glov	Enclosure ebag Prod	ent with Negatives cedure d (*) and Non-F			III.e	
Location of		ocati rmal	ly .		Des	scription					Ab	atemen Type	it
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Maint Custod	enar	rce/	Asbes (i.e.	tios Cont thermal surfac other m	aining M systems cing, VAI niscelland	insulati F. or	ACM) on,	Amount (Specify SF or LF)	Kemova	Kepair	Encapsulate	Enclosure
OUTDOORS	A	No X	N/A	P. O.	E S		<u> </u>	4		4		ale	re l
				11/20	= 0	OMA.	7 [1		200 L	F			
Name of Registered Waste Hauler			JDEP W		Cubic `			Vame of F	Registered Land	dfill			
WASTE MANAGEMENT City, State			125	INU.	of Was	15		GROWS	NORTH		_		
ELIZABETH, NJ Completed by	Title				丁	BD gnature			SVILLE, PA	Dota			
CAROL RAIMO	OFFICE	E M	GR						1	Date	100	11	/

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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) PSEG Agencies Notified Type Notification Street Address 4000 HADLEY ROAD									FIC)W,
7/25/16		PSE	3	vner/Operato	r (2)	JUL 2	 26	 2016		1
EPA Initial	1	N 00000 N 0000 N 000		ROAD						
DEP Amended Amendment	t #		tate, Zip Code TH PLAINF		7068	ASBESTOS LICE			L a	_
DOH Emergency justification)`		of Contact			Telephone Nu				
DCA Cancellatio		FAC	HN CILITY INFOR	MATION	TTE					
Name of Facility Where Abatement is Takin PSE+C-Lo Street Address 9-// WESTM City (5)	CATI	ion	14		Type of Facil School (Subchar Other (i. etc.) Square Feet	2 . 7	ial buil	dings,		les,
County (6) A	<i>N</i>	County	Code (7)			A W/A	1) [A		
BERGEN -		(STATE	USE ONLY)			Prior if being demolish	ned)			
Name of Monitoring Firm Hired by Building ENVIRONMENTAL TACTICS	Owner (8)	004	M No. 5	Name UNI	of Abatement of QUE SYSTE	Contractor (9) MS OF AMERIC	Α			
Street Address 64 BROAD STREET				Street	Address WHITEHEA	2000 000000				
City, State, Zip Code MATAWAN, NJ 07747				City, S	State, Zip Code TH RIVER,					-
Project Manager for Monitoring Firm TOM GEIGER		Telepho 732-2	one No. 90-2217	Telept	none No. 432-8350	License N	0.			
Start Date (10)	Scheduled (Completion			of OSHA Monit	The second secon		-	•	
Occupancy Status During Abatement (Chec	k Only One)		<u> </u>	Street	Address					
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	nal Facility He	itement ours		City, S	WHITEHEAL tate, Zip Code	W 76.5 N-9.		-		
Scope of Work (Check All That Apply)				300	TH RIVER,	NJ 08882				
≦ ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		ovation nolition		-	Mini-Enclos Glovebag P					20
Location of		cation mally		December			A	Abater Typ	nent	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mainte Custodi	olely by nancel al Staff? 2)	(i.e. the	Description Containing M rmal systems surfacing, VA her miscellan	laterial (ACM) insulation, T, or	Amount (Specify SF or LF)	Remova		Encapsulate	Enclosure
	Yes N	o N/A					/al	7	ilate	иге
OUTDOORS	>	<u>۲</u>	Pipe	SOMA	stie	200 LF	×			
Name of Registered Waste Hauler		NJDEP W	/aste I Co	ubic Yards	Name	of Pogistored I - 15"			+	
NASTE MANAGEMENT		Hauler ID 1125	No. of	Waste	CDO	of Registered Landfill WS NORTH				
City, State ELIZABETH, NJ				sposal Date ており	City, St	ate RISVILLE, PA				\dashv
Completed by CAROL RAIMO	Title OFFICE	MGR		Signature	100		/2-	-//	4	

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CK.7342	State of New Jest NOTIFICATION OF ASBEST((Pursuant to NJAC 8:60)	OS ABATEMENT	DE CE	IFICATION"
Date of Notification (1) 1/25//6 Agencies Notified Type Notification	Name of Building Owner PSEG Street Address	er/Operator (2)	JUL 2	6 2016
EPA Initial Amended	4000 HADLEY RC City, State, Zip Code		ASBESTOS (
DOL Amendment # Emergency (inclu justification) DCA Cancellation	Name of Contact	LD, NJ 07068	Telephone Nu	
Sueet Address	FACILITY INFORM	Type of Fac	cility (4) I (K-12) apter 8 (Other than K-1) (i.e. private & commerci	2) al buildings, homes
FAIR LAW.	N	Square Fee	# of Floors	Bldg. Age
County (6) BERGEN Name of Monitoring Firm Hired by Building Owner	County Code (7) (STATE USE ONLY)		e (Prior if being demolisi N / A	ned)
ENVIRONMENTAL TACTICS Street Address	ASCM No. 0045		t Contractor (9) EMS OF AMERIC	Ą
64 BROAD STREET City, State, Zip Code		Street Address 396 WHITEHE		
MATAWAN, NJ 07747 Project Manager for Monitoring Firm	Telephone No.	City, State, Zip Cod SOUTH RIVER	l, NJ 08882	8
TOM GEIGER	732-290-2217	Telephone No. 732-432-8350	License N 01111	0.
8/8//6 Occupancy Status During Abatement (Check Onl	2/31/16		nitor EMS OF AMERICA	4
Facility Closed/Vacated During Entire Period Abatement Performed Outside of Normal Fa Other – Describe:	of Abatement	Street Address 396 WHITEHEA	e	
Scope of Work (Check All That Apply)		SOUTH RIVER	., NJ 08882	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Renovation Demolition	Mini-Enclo	ainment with Negative Posure Procedure npted (*) and Non-Friab	
Location of	Is Location Normally	Description of		Abatement Type
TO BE ABATED	Maintenance/ Custodial Staff? (i.e. therm	ontaining Material (ACM) nal systems insulation, facing, VAT, or r miscellaneous)	Amount (Specify SF or LF)	Enclosure Encapsulate Repair Removal
OUTDOORS		<u> </u>		
5 X + 5 CO R S	17) 11 15	Somastia	200 LF	$ \mathcal{X} $
Name of Registered Waste Hauler WASTE MANAGEMENT	Hauler ID No. of W	/aste	of Registered Landfill OWS NORTH	
City, State ELIZABETH, NJ	Disp	osal Date City,	State RRISVILLE, PA	
Completed by Titll CAROL RAIMO OF		Signature	200000	7/25/11

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CK 1342		NOTIF	ICATIO	State of New	"0	PEN	~~			TIO	N"			
Date of Notification (1)		(P	Name	of Building			·			_[5	<u>C</u>	5	\ <u>\</u>	
Agencies Notified Type Notification				Address HADLEY	/ ROA	D				-	JUL	20	20	16
EPA Initial Amended Amendment #			City, S	tate, Zip Co TH PLAIN	ode		7068			ASBE	ESTO			ROL
DOH Emergency (in justification) DCA Cancellation	cluding		Name	of Contact		Ro	TTE		Teleph	one N		ENS	<u>ING</u>	
Name of Facility Where Abatement is Taking In SEAC - LOC Street Address 14-23 3 RD	A	Ti	FAC CAC	LITY INFO	DRMAT	ION	Type of Fac	ol (K-12) apter 8		nan K-	12) cial bui	Idings	, horr	nes,
FAIR LAWN		700		<u>r</u>			Square Fee	A-	# of Flo	DOTS		Bldg.	Age A	
County (6) DERGEN			(STATE	Code (7) USE ONLY)			Current Use	Prior	if being o	demolis				
Name of Monitoring Firm Hired by Building Ow ENVIRONMENTAL TACTICS Street Address	vner (8)		004	M No. 5		UNIC	of Abatemer UE SYST	t Contr EMS	actor (9) OF AM	ERIC	A		-	
64 BROAD STREET City, State, Zip Code						396 V	Address VHITEHE		/E.					
MATAWAN, NJ 07747 Project Manager for Monitoring Firm			Tolonh	na Na	_	SOU	ate, Zip Coα ΓΗ RIVER							
TOM GEIGER	chedule			90-2217 Pate (11)		732-4	one No. -32-8350			tense (1111	No.			2000
Occupancy Status During Abatement (Check C	12	/3	3//	16		UNIQ	of OSHA Mo UE SYST Address		OF AM	ERIC	Α		*	
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal Other – Describe:	iod of A Facility	batem	ent			396 V City, St	VHITEHEA ate, Zip Cod	e	-					
Scope of Work (Check All That Apply)	~~					500	TH RIVER	., NJ 0	8882		_			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Name of the last o	enova emoliti				X	Full Conta Mini-Enck Glovebag Non-Exen	osure Proced	lure				•	
Location of	Ν	Location ormali	у		Dos	scription (.p.co () 4114 140	11-11101	Jie 1 10	Abate	ement pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mair	i Solel ntenan odial S (12)	ice/	(i.e. t	os Conta hermai surfac	aining Ma	aterial (ACM) insulation, , or)	Amou (Speci SF or L	ify	Remova	Repair	Encapsulate	Enclosure
OUTDOORS	Yes	No X	N/A	0.00				-					ate	œ .
0,100,100		<u></u>		11/2		o MAS	stie		200	LF				
Name of Registered Waste Hauler						-								
WASTE MANAGEMENT		Ha	IDEP W Juler ID 125	No.	Cubic \ of Was		8 18		gistered L NORTH					
City, State ELIZABETH, NJ					Disposi	al Date	City,		ILLE, F	 PA				
0.4001	Title OFFIC	EM	GR			gnatuce	ralX	1		TDa	te /2	'S'	11	

* *		NOTI	EICATIO	State of Ne	ew Jerse	еу • А.Б. А.Т. Б.	n,	OPEN NO	TIF	IC#	\ T tt	ONF
CK 1342		(Pursuai	nt to NJAC	8:60 ar	d 12:120	MENT)	TE G			\mathbb{V}	旦
Date of Notification (1)			Name PSE	of Building G	Owner/	Operator	(2)	W.		=	0010	<u>-</u>
Agencies Notified Type Notification)			Address HADLE	Y ROA	.n			11_2	6_	2016) ;
EPA Initial Amended Amendmer	ıt #		City, S	tate, Zip C	ode	<u> </u>	7000	ASBES	STOS	5 00	NTF	POL
Emergency justification	(includir	ng .	PLANTE SHOW THE PARTY OF THE PA	TH PLAI		D, NJ U	7068	Telephone Nu	LIUE	=14.54	INU	
DCA Cancellatio			FAC	HN	ORMAT	1ROT	ITE					<u>~</u>
Name of Facility Where Abatement is Takin	Place CA						Type of Facility (School (K-1	1.8				
Street Address LAMBER		R	/	· /			Subchapter Other (i.e. p	8 (Other than K-1	2) ial bu	ilding:	s, hon	nes,
FAIR LAW			<u> </u>				etc.) Square Feet	# of Floors		Bldg.		
County (6) DERGEN	10			Code (7) USE ONLY)		Current Use (Price	or if being demolis	hed)	<u>U</u> / .	<u>#</u>	
Name of Monitoring Firm Hired by Building ENVIRONMENTAL TACTICS	Owner (8	3)	ASC 004	M No.	-	Name o	of Abatement Con	A stractor (9) S OF AMERIC	^			
Street Address 64 BROAD STREET			1001		-	Street A	Address		H			
City, State, Zip Code MATAWAN, NJ 07747					- 000 - 1000000	City, Sta	VHITEHEAD A					
Project Manager for Monitoring Firm TOM GEIGER			Telepho			Telepho		License N	lo.			
Start Date (10)	Schedu	iled Coi	npletion	90-2217 Date (11)		Name o	32-8350 f OSHA Monitor	01111		- OTE		
Occupancy Status During Abatement (Chec	k Only C	2/)ne)	311	16		UNIQI Street A	Marine Committee	OF AMERICA	٩			
Facility Closed/Vacated During Entire in Abatement Performed Outside of Norm Other – Describe:	nal Facilit	Abater ty Hour	nent s			396 W City, Sta	HITEHEAD A					_
Scope of Work (Check All That Apply)			19			SOUT	H RIVER, NJ	08882				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolii	ition iion			文	Glovebag Proce	nt with Negative F				
		s Locati					Non-Exempled	(*) and Non-Friab	le Pro		emen	t
Location of Asbestos-Containing Material (ACM)	Use	Normal ed Sole	ly by	Asbest	Des	scription o	f terial (ACM)	A	_	Ty	ре	
<u>TO BE ABATED</u> In Facility (13)		aintenar stodial S (12)		(i.e.	thermal surfac	systems in sing, VAT, niscellane	nsulation, or	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A		outer it	iiscelianed	ous)		oval	air	sulate	sure
OUTDOORS		X		Pipe	: Se	MAS	tie	200 LF	×			
Name of Registered Waste Hauler		N.	JDEP W	aste	Cubic \	ards.	Name of Re	egistered Landfill				
VASTE MANAGEMENT		H	auler ID 125	No.	of Wast	te	GROWS					
City, State ELIZABETH, NJ		No.			Disposa	al Date	City, State MORRIS	VILLE, PA			_	
Completed by AROL RAIMO	Title OFFI	CE M	GR		Sig	gnature	· 0 \$.	LDat	e /	15	111	

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Date of Notification (1) Agencies Notified Type Notification Type Notification Amended Amendmer Emergency justification DCA Name of Facility Where Abatement is Taking	nt # (including) nn ng Place	(3)	Name PSE Street 4000 City, S SOU Name	of Buildin	C 8:60 and	nd 12:120 Operator AD D, NJ 0	7068 Type of F Sub Sub Othe	Facility (4) ool (K-12) chapter 8 er (i.e. pri	SBESTOS O LICENS Telephone N	ONT SING Umber	<u>W (</u> 1716 ROL	&	
County (6) DERGEN	<u> </u>		County (STATE	Code (7)	Y1		Square F N Current U	Se (Prior	# of Floors # of Floors # of Floors # of Floors	1	Bldg.	Age A	
Name of Monitoring Firm Hired by Building ENVIRONMENTAL TACTICS Street Address 64 BROAD STREET City, State, Zip Code	Owner (8	3)	ASC 004	M No.		Street A	of Abatemo UE SYS Address VHITEH ate, Zip Co	EAD A	actor (9) OF AMERIC	:A			
MATAWAN, NJ 07747 Project Manager for Monitoring Firm TOM GEIGER Start Date (10)			mpletion	one No. 90-2217 Date (11)		SOUT Telepho 732-4	H RIVE	R, NJ 0	08882 License i 01111	No.			
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other – Describe:	ck Only O Period of	Abator	mont	6		Street A 396 W City, Sta		EAD AV		A			
≥3 sf or ≥3 if ≥160 sf or ≥260 if		Renova Demolii		a a		X	Gloveba	closure ig Proced	with Negative Flure () and Non-Friat				
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Locati Normal ed Sole intenar todial S (12)	ly ly by nce <i>l</i>	Asbes (i.e.	itos Conta thermal surfac	scription of aining Ma systems i cing, VAT, niscellane	f terial (ACN nsulation, or		Amount (Specify SF or LF)	Removal	Abate		Enclosure
OUTDOORS		X		Pipo	€ Se	MAS	tia		200 LF	X		τυ	
Name of Registered Waste Hauler VASTE MANAGEMENT City, State		Ha	JDEP W auler ID 125		Cubic) of Wasi	te /5	GR	N SWO	istered Landfill				
ELIZABETH, NJ Completed by SAROL RAIMO	Title OFFI	CE M	 GR		Disposa T Sign	BD gnature		, State PRRISV	ILLE, PA	/ ر	,	-/	

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"OPEN NOTIFICATION"

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CK 1342		NOTIF	FICATIO	State of N N OF AS It to NJA	BESTOS	ABATE	MENT					1
Date of Notification (1)				of Buildin			1) EGE		<u></u>		$\frac{1}{4}$
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DEP Amended Amendmer Emergence				tate, Zip (TH PLA		D, NJ (7068	ASBESTOS	CON	TRO	L &	
DOH justification Cancellation)	9	Jo	of Contac <u></u> H ん	m	1 Ro	TTE	Telephone				
Name of Facility Where Abatement is Taking PSE*G.	ng Place			ILITY IN	-ormat Q	ION	Type of Facil	51 3. 5				
Street Address 10-90 ARM			P1.				School (Subchar	r.K-12) oter 8 (Other than F e. private & comme	(-12) ercial bui	ldings	, hom	nes,
FAIR LAU	UN						Square Feet	# of Floors		Bldg.		
County (6) BERGEN Name of Monitoring Firm Hired by Building	Ouras /S		(STATE	Code (7) USE ONL	y)		٨	Prior if being demo	lished)			
ENVIRONMENTAL TACTICS Street Address	Owner (8	5)	004	M No. 5		UNIC	of Abatement QUE SYSTE Address	Contractor (9) EMS OF AMERI	CA			
64 BROAD STREET City, State, Zip Code	<u> </u>			200		396	WHITEHEA					
MATAWAN, NJ 07747 Project Manager for Monitoring Firm			Telepho			SOU	TH RIVER,		e No.			
TOM GEIGER Start Date (10)	Schedu		mpletion	90-2217 Date (11)		Name	432-8350 of OSHA Moni	0111 tor	1	-		
Occupancy Status During Abatement (Che	1/3/20 -50	ne)	3///	16	-	Street	Address	MS OF AMERI	CA			_
Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other – Describe: 🕒 🗘 🗀 👝	mal Facilit	Abaten y Hour	nent S			City, S	WHITEHEAI tate, Zip Code TH RIVER,					
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf	FSI .						1 :		-			
≥160 sf or ≥260 lf		Renova Demolit				X	Mini-Enclos Glovebag P				-	
Location of		s Locati Normal	ly		De	scription				Abat	emen rpe	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole sintenar stodial S (12)	nce/		stos Cont thermal surfa	taining M	aterial (ACM) insulation, Γ, or	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A						val	+	ulate	ure
OUTDOORS		X		Pip	€ S	OMA.	stic	200 4	e X			
Name of Registered Waste Hauler WASTE MANAGEMENT		H	JDEP W auler ID 125		Cubic of Was	ste	CRO	 of Registered Land: WS NORTH	fill			
City, State ELIZABETH, NJ					Dispos	IS Date BD	City, St	5 4		_		
Completed by CAROL RAIMO	Title OFFI	CE M	GR			ignature	izal La	Tr) ate /2	 57:	16	

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CK 1342		(P	игѕиап	t to NJAC	8:60 an	d 12:12	D)			5.1		E'	1
Date of Notification (1)			Name o	of Building	Owner/	Operator	(2)			<u> </u>	107	_!=	
Agencies Notified Type Notification EPA Initial			1100-100-00-00-00-00-00-00-00-00-00-00-0	Address HADLE	Y ROA	D	-		JUL.	26	2016)	رت
DEP T Amended		f		ate, Zip C			89	+-					
X DOL Amendment Emergency		-		TH PLAI		D, NJ (7068		ASBESTO			OL 8	X X
DOH justification) DCA Cancellation				of Contact		Ro	TTE		Telephone	Jumber		-	
Name of Facility Where Abatement is Takin	a Dioes (2)		FAC	ILITY INF	ORMAT	ION			_		-		
PSE+G-Loc Street Address	CAT		N	91	7_	-		ol (K-12)	(Other than K	-12)			
102 MCLEA	N /	ΒL	-11	١.			Other etc.)	(i.e. priv	rate & comme	rcial bu	ildings	, hom	ies,
PATERSON							Square Fe	et A-	# of Floors		Bldg.	Age 4	- 70
PASSAIC				Code (7) USE ONLY	1			e (Prior	if being demo	lished)			
Name of Monitoring Firm Hired by Building (ENVIRONMENTAL TACTICS	Owner (8)		0045	M No.			of Abatemer QUE SYS		actor (9) OF AMERI	CA			
Street Address 64 BROAD STREET							Address WHITEHE	AD A\	/E.		-		
City, State, Zip Code MATAWAN, NJ 07747							tate, Zip Coo TH RIVEF		8882		83		
Project Manager for Monitoring Firm TOM GEIGER			Telepho 732-2	one No. 90-2217			none No. 432-8350		License 0111				
Start Date (10)	Schedule	. /	ppletion	Date (11)			of OSHA MO		OF AMERI	^Δ		1.0	
Occupancy, Status During Abatement (Chec	CONLY ONE	e)		/ 8	-	Street	Address WHITEHE		one of the state o		<u></u>		
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: 647 Dae A	al Facility	baterr Hours	ient			City, S	tate, Zip Coo	de					
Scope of Work (Check All That Apply)						500	TH RIVER	K, NJ 0	8882				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	enova emolit					Mini-End Glovebag	losure 3 Proced	with Negative lure) and Non-Fri			٥	
		ocati				200	£		7 = 1.0 1.011111		Abati	emen	t
Location of Asbestos-Containing Material (ACM)	Used	ormall Sole	ly by	Asbes		scription aining M	of aterial (ACM	0)	Amount	-	1	pe	
<u>TO BE ABATED</u> In Facility	Custo			(i.e.	thermal	systems	insulation,	7	(Specify SF or LF)	Ren	Re	Enca	Encl
(13)	Yes	(12) No	N/A			niscellan			or or Ery	Removal	Repair	Encapsulate	Enclostire
OUTDOORS		メ		P: po	£ 5.	OMA.	stic		200 Li	= ×			
				•									
Name of Registered Waste Hauler WASTE MANAGEMENT		Ha	JDEP W auler ID 125		Cubic of Was		CD	10	gistered Landi NORTH	FII .	-		
City, State ELIZABETH, NJ					Dispos	al Date	City,	State RRISV	ILLE, PA				
Completed by CAROL RAIMO	Title OFFIC	EM	GR			gnature	, A H	1.		ate //	2-	/,	

V

"OPEN NOTIFICATION"

CK 7342

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

"OPEN NOTIFICATION"

Date of Notification (1)		Namo	of D. 314: 0			X-17-18-1				
7/25/16		PSE(of Building Owne	r/Operato	or (2)		U :			
Agencies Notified Type Notificat	ion	Street.	Address			<u> </u>	_		_ ப	11
EPA A Initial			HADLEY RO	AD		[] JUL 2 (2 20	116		JI
DEP Amended	71	City, St	tate, Zip Code		[m]	+) (710		ン
American	ent # cy (including	SQU	TH PLAINFIE	LD, NJ	07068					
justification	on)		of Contact			ASBESTOS C	ONT	RQL	. &	
☐ DGA ☐ Cancellat	ion	Jo	HN M	ARO	TTEL	Telephone	hidas	Γ		1
Name of Facility Where Abatement is Ta	king Place (3)	FAC	ILITY INFORMA	TION						_
PSETC. 1	A CAT		. 9		Type of Facilit	y (4)				
Street Address	OCAT:	OV	J_/		School (F	(-12)				
63 E. 30	TH ST	2 C	< T		Subchapt Other (i.e	er 8 (Other than K- private & commer	12)	71 -17		
City (5)		V C	e /		[(10.)		CIAI DI	mainā	s, noi	mes
PATERSON	\cup				Square Feet	# of Floors		Bldg.		
County (6)		County	Code (7)		, , , , , ,				A	
PASSAIC	1 1	(STATE	USE ONLY)		À)	rior if being demoli	shed)			
Name of Monitoring Firm Hired by Buildin ENVIRONMENTAL TACTICS	g Owner (8)	ASCN	M No.	Name	of Abatement C	Optractor (D)				
Street Address		0045	5	UNIC	QUE SYSTEN	MS OF AMERIC	A:			
64 BROAD STREET		<u> </u>		Street	Address	o. y will de				
City, State, Zip Code				396 1	WHITEHEAD	AVE.				
MATAWAN, NJ 07747				City, S	tate, Zip Code					
Project Manager for Monitoring Firm			*		TH RIVER, N	J 08882				
TOM GEIGER		Telepho:		Teleph	ione No.	License 1	No.			-
Start Date (10)			90-2217		432-8350	01111				
3/8//6	Scheduled Com	3/ /	1	Name	of OSHA Monito		-	_	٠.	
Occupancy Status During Abatement (Che	eck Only One)	21/	16	DIAIC	TOE SYSTEM	IS OF AMERIC	Α			
Facility Closed/Vacated During Entire	Dogod of AL-1	a t			Address VHITEHEAD	A \			-	
Abatement Performed Outside of Nor Other – Describe: 647 366	mol Facility 11	er IL	iii	2,800,000	ate, Zip Code	AVE.				
	3-5				TH RIVER, N	108880				
Scope of Work (Check All That Apply)										
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		on			Full Contain-					
100 37 07 =200 17	Demolitio	n			WILLI-EUCIOSUL	ent with Negative F	Pressu	re		
					Glovebag Pro	cedure				
	Is Location	n			NoiFExemple	d (*) and Non-Friab	le Pro			
Location of	Normally Used Solely		De	scription o	of.		Š	Abate Ty	∍meni 'pe	í
Asbestos-Containing Material (ACM) TO BE ABATED	Maintenanc	e/	Asbestos Coni	aining Ma	sterial (ACM)	Amount				
In Facility	Custodial Sta	atī?	(r.e. merma)	systems cing, VAT	insulation	(Specify	Re	מ	Enc	9
(13)	(12)		other n	niscellane	ous)	SF or LF)	Remova	Repair	aps	clos
	Yes No	N/A					/al	7	Encapsulate	Enclosure
OUTDOORS	X		Pine =				-			
	1 31		PipE S.	MAS	110	200 LF	X			
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ame of Registered Waste Hauler			·							_
ASTE MANAGEMENT	NJD Haut	EP Was ler ID N	ste Cubic \ o. of Was	ards	Name of F	Registered Landfill				
	112		APP.	-0 000 <u>-</u> 0	100000000	NORTH				
ty, State IZABETH, NJ			Disposa		City, State					
impleted by				SD		SVILLE, PA				- 1
AROL RAIMO	Title		Sig	gnature	A					
	OFFICE MG	K			eel Xou	, Dall	7/2	~	10	-

CK-72112	NOT	IFICATI	State of New Jers ON OF ASBESTOS	SARATE	EMENT	"OPE	N NO	TIF	ICA	TI	ON
Date of Notification (1)		(Pursua	ent to NJAC 8:60 a	nd 12:12	20)		Z-G-	E.,		7. [
7/25/16		Name PSE	e of Building Owner G	/Operato	r (2)	127					11
Agencies Notified Type Notification		Stree	t Address				- JUL	7 6	3-20	16_	!
EPA Initial Amandad			O HADLEY ROA	√D				U.FERS SE			i i
DOL Amendment		City,	State, Zip Code JTH PLAINFIEL	D N.L.	77068	AS	SBESTO			ROI	
DOH Emergency (justification) DCA Cancellation	including		of Contact			Tela	LIC phone No		SING	_	
		E A	BHN MY.	1Ro	TTE			2111001			
Name of Facility Where Abatement is Taking	J Place (3)		D #	ION	Type of Facility	y (4)					
Street Address	PATIO		8A		School (K	(-12)					
221 E. 30TH	STE	e	57		Other (i.e etc.)	er 8 (Othe . private &	r than K-1 commerc	.2) ial bu	ildings	, hor	nes,
PATERSON					Square Feet		Floors		Bldg.	Age	
County (o)	J	Count	y Code (7)		Current Use (P) / A		J /	4	
Name of Monitoring Firm Hired by Building C	(E)		E USE ONLY)		N	/A		nea)			
ENVIRONMENTAL TACTICS	wher (8)	004	CM No. 15	Name UNIO	of Abatement Co QUE SYSTEN	ontractor (9) MEDIC	- ^			
Street Address 64 BROAD STREET				Street	Address			~ 			
City, State, Zip Code					WHITEHEAD	AVE.					
MATAWAN, NJ 07747 Project Manager for Monitoring Firm				SOU	TH RIVER, N	J 08882	_	2			
TOM GEIGER			ione No. 290-2217		one No. 132-8350	1	License N 01111	o.			
Start Date (10)	Scheduled Co		1.0	Name	of OSHA Monito		W 10	-			
Occupancy, Status During Abatement (Check	Only One)	31,	116		UE SYSTEM	IS OF A	MERIC/	Α			
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma	I Facility 11	nent	*	396 V	VHITEHEAD	AVE.					
E Other - Describe: _54 1 546 E	S	s 			ate, Zip Code TH RIVER, N	10000					
Scope of Work (Check All That Apply) ≥ ≥3 sf or ≥3 lf					1111010111, 10	J U000Z				_	-
≥160 sf or ≥260 lf	Renova Demolii	ition ion			Full Containm Mini-Enclosur Glovebag Pro	e cedure					
	Is Locati	on			Non-Exempte	d (°) and h	lon-Friab	17	cedure Abate		
Location of Asbestos-Containing Material (ACM)	Normal Used Sole	ly by	Des	cription (of				Тур		·
TO BE ABATED In Facility	Maintenar Custodial S	nce/ Staff?	Asbestos Conta	iining Ma systems ing, VAT	insulation	Amo (Spe	cify	20	_	Enc	ū
(13)	(12)	·	other m	ing, va i iscellane	ous)	SF or	·LF)	Remova	Repair	Encapsulate	Enclosure
2100	Yes No	N/A	0					<u>a</u>	,	late	ii.e
OKTDOORS	\triangle		PipE So	MAS	itie	20	OLF	X			
Name of Registered Waste Hauler WASTE MANAGEMENT	N.	IDEP W			Name of F	Registered	Landfill				
City, State		125	No. of Wast	e 15		S NORT					
ELIZABETH, NJ			Disposa	I Date	City, State						-
	Title		Sig	S <u>N</u> nature	MORRIS					~	
C GWO	OFFICE MO	JR 		_a	eal Xac	me	Date	12.	5%	16	

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CK-7342		NOTIF	ICATION	tate of New N OF ASBE to NJAC 8	STOS	ABATEM	ENT	"OP	EN NO	TIF	ICA	TIC	N"
Date of Notification (1)		- 1		of Building C		3			-G-E				#
Agencies Notified Type Notifica	ation		PSEG	Address ·				[八]	THE VICEOUS CONTRACTOR			7!!	
EPA Initial			4000	HADLEY)		ШЩ	JUL 2	6 20)16	-	쒼[]
DEP Amende Amende	ment #			ate, Zip Coo H PLAIN), NJ 07	'068	ASP	ESTOS (CONT	ROL	<u>.</u>	
DOH Justifica			7-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	of Contact					elenh CEM			. u	\pm
Name of Facility Where Abatement is 1		1	FAC	HN ILITY INFO	RNIATIO								
1284C. 1	LOCA		0 2	8			Type of Fac Schoo	ility (4) I (K-12)					
Street Address 394 E. 3				EET			Subch Other	apter 8 (Ot	her than K-1 & commerc	2) ial buil	dings,	home	≘s,
City (5) PATERSO			/ ~	<i>cc</i> /			Square Fee	et #	of Floors		Sldg. A	•	
County (6)	2			Code (7)			Оптепt Use	Prior if be	eing demolis	hed)] [A	<u>.</u>	
PASSAIC Name of Monitoring Firm Hired by Build	ling Owner (8)			USE ONLY) M No.		Name o	f Abaiemen	N / A	r (9)				
ENVIRONMENTAL TACTICS Street Address	200		0045	5		UNIQ	UE SYST		AMERIC	A			
64 BROAD STREET						Street A 396 W	vaaress VHITEHE	AD AVE.					
City, State, Zip Code MATAWAN, NJ 07747							ate, Zip Cod H RIVER		82				
Project Manager for Monitoring Firm TOM GEIGER	·		Telepho 732-2	one No. 90-2217		Telepho	one No. 32-8350		License N	10.			
Start Date (10)	17.00		ppletion	Date (11)		Name o	f OSHA Mo					**	
Occupancy Status During Abatement (ne)	31/	16		Street A	ddress		AMERIC.	A ———			
Facility Closed/Vacated During En Abatement Performed Outside of	Vormal Facility	Abaten / Hours	nent		ŀ		/HITEHE/ ate, Zip Cod	The same of the sa				_	
Other - Describe: Out Describe: Scope of Work (Check All That Apply)	<u> </u>						H RIVER		82				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit					Mini-Encl Glovebag	osure Procedure	h Negative (: : nd Non-Friat				
		Locati Vormal					HOIPLAGE	iipied () ai	id Non-Friat	DIE Pro	Abate	ment	
Location of Asbestos-Containing Material (ACM <u>TO BE ABATED</u> In Facility (13)) Use Ma	ed Sole intenar todial S (12)	ly by nce <i>l</i>	(i.e. t	os Conta hermal : surfac	scription of aining Ma systems ing, VAT, aiscellane	terial (ACM Insulation, , or	(Amount Specify F or LF)	Remova	Ty Repair	Encapsulate	Enclosure
	Yes	No	N/A		onier III	nscenarie	ous)		8	val	alr	ulale	sure
OUTDOORS		X		Pipe	: S.	OMAS	itia		200 LF	×			
								-					
Name of Registered Waste Hauler			105014										
WASTE MANAGEMENT		H	JDEP W auler ID 125	No.	Cubic Y of Wasi	te		e of Regist DWS NO	ered Landfill RTH				
City, State ELIZABETH, NJ					Dispos	al Date	City,	State		-			\dashv
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Date of Notification (1)	Nam PSE		ilding Owner/Op	erator (2)			.004			
Agencies Notified Type Notification		et Addr 00 HA	ess DLEY ROAD				 	-201	D		
EPA Milital Amended Amendment #_	City,	State, UTH	Zip Code PLAINFIELD	NJ 07	7068		ASBESTOS CO LICENS		OL	&	
★ DOL Amendment # Emergency (inclining justification) Cancellation	uding Nam	ne of C			-		Telephone Numb	ег		_	
	F = (2)	ACILIT	TY INFORMATIO	N	Type of F	acility (4)				-	_
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Name of Monitoring Firm Hired by Building Ow ENVIRONMENTAL TACTICS	mer (8) /	ASCM 1 1045	No.	UNIC		STEMS	OF AMERICA	_			
Street Address 64 BROAD STREET					Address WHITE	HEAD A	VE.				
City, State, Zip Code MATAWAN, NJ 07747				City, SOL	State, Zip (JTH RIV	Code ER, NJ	08882				
Project Manager for Monitoring Firm TOM GEIGER		lephon 32-29	e No. 0-2217		hone No. -432-835	50	License No 01111).			
	Scheduled Compl)ate (11)	Name	e of OSHA QUE SY	Monitor STEMS	OF AMERICA			240	
Occupancy, Status During Abatement (Check	Only One)			Stree	t Address WHITE	HEAD A	AVE.				
Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal Other – Describe: 647 Das AS	I Facility Hours	nt ——		City,	State, Zip UTH RI\	Code					
Scope of Work (Check All That Apply)		_	*			or			220		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Renovation Demolition				Mini- Glov	Enclosum ebag Pro					
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City, State ELIZABETH, NJ				posal D ア月	7		RISVILLE, PA				
Completed by	Title OFFICE M	GP	L	Signa	ture	0	ing	ate //	25	1/	6

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Name of Abatement Contractor (8)	County (6)		County	Code (7)			NIA	. 4	J/A	A	ر .310g ن _ز / (20075	
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TOM GEIGER T32-290-2217 T32-432-8350 Containing Maintenance Cocupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Cotty - Describe: Cotty State, Zip Code SOUTH RIVER, NJ 08882 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Coty State, Zip Code SOUTH RIVER, NJ 08882 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Normally Used Solely by Maintenance/ Custodial Star? (12) Yes No N/A NORMA Normally Coty State Custodial Star? (12) Yes No N/A NORMA N	MATAWAN, NJ 07747 Project Manager for Monitoring Firm		Talanh	ano No	SC	UTH F	RIVER, N	J 0888					
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Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Name of Registered Waste Hauler NASTE MANAGEMENT City, State, Zip Code SOUTH RIVER, NJ 08882. City, State		350		116	Stre	et Addre	ess		AMERICA	4			_
Renovation Demolition Secondary Part	Other - Describe: @classide of Nom	nal Facility Hour	nent s		City	State, 2	Zip Code		2.				
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Maintenance/ In Facility (13) Yes No N/A Name of Registered Waste Hauler WASTE MANAGEMENT Name of Registered Waste Hauler VASTE MANAGEMENT Name of Registered Waste Hauler NJDEP Waste Hauler ID No. 1125 Disposal Date Disposal Date Disposal Date TRANSMITTER Amount (Specify SF or LF) Registered (Specify SF or LF) Registered Landfill GROWS NORTH Disposal Date TRANSMITTER MORRISVILLE PA		Normal Used Sole	lly ly by	Ashastas	Descriptio	วก ดร์				1	Abate	meni	
Name of Registered Waste Hauler VASTE MANAGEMENT Disposal Date Disposal Date TRA MORRISVILLE PA	In Facility	Custodial 9 (12)	Staff?	(i.e. the	ermal syster surfacing, V	ns insul 'AT, or	ation,	(Sp	pecify	Removal	Repair	Encapsulate	Enclosure
VASTE MANAGEMENT Hauler ID No. 15 City, State ELIZABETH, NJ Name of Registered Landfill GROWS NORTH Disposal Date City, State MORRISVILLE PA	OUTDOORS	X		P: p∈	Som	AST	ie	2	00 LF	×			
TRY MORRISVILLE PA	Name of Registered Waste Hauler WASTE MANAGEMENT City, State	H	auler ID	No. oi	FWaste PF≃ 16	5	GROW	S NOR					
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Date of Notification (1)		(F		of Building			2)	<u> </u>		\mathbb{V}		D
7/25/16			PSEC				-/					
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DEP Amended Amendmen	t#	Ī		tate, Zip C TH PLAI) NIO	7068	ASBESTO	S CO	NTR	01.8	\
Emergency justification		-		of Contact	0.00		000		ENSI			`
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Street Address 55 Gould A	CA	Tio			OINMA		School (k Subchapt Other (i.e etc.)		12) cial bui	ldings	, hom	ies,
City (5) PATERSON							Square Feet	# of Floors		Bldg.		
County (6) PASSAIC				Code (7) USE ONLY	1		Current Use (F	Prior if being demoli	shed)	1.5		-
Name of Monitoring Firm Hired by Building ENVIRONMENTAL TACTICS	Owner (8)	ASC 004	M No.		Name o	f Abatement C		A.			
Street Address 64 BROAD STREET	-					Street A						
City, Stale, Zip Code MATAWAN, NJ 07747						City, Sta	ate, Zip Code H RIVER, N	V. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10				
Project Manager for Monitoring Firm TOM GEIGER			Telepho 732-2	one No. 90-2217		Telepho		License 01111	No.			
Start Date (10)	Schedul			Date (11)		Name o	f OSHA Monito		. ^		(5)	
Occupancy, Status During Abatement (Che	ck Only O	ne)	3//	16		Street A		VIS OF AIVIERIC	.A			
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe: ©47 Das A	nal Facilit	Abaten / Hours	nent				HITEHEAD	AVE		<u> </u>		
Scope of Work (Check All That Apply)	-2					SOUT	H RIVER, 1	NJ 08882				
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OUTDOORS		X	<u> </u> 	Pipe	E 5,	OMAS	tie	200 LF	: ×			
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Name of Registered Waste Hauler		7	IDEE									
WASTE MANAGEMENT		H	JDEP W auler ID 125		Cubic of Was		Santana Car	f Registered Landfi VS NORTH	II	_		
City, Stale ELIZABETH, NJ					Dispos	al Date	City, Sta	ate			-	

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"OPEN NOTIFICATION"

Completed by

CAROL RÁIMO

Title

OFFICE MGR

CK 1342			State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)					"OPEN NOTIFICATION							
Date of Notification (1)		ne of Building Owne													
Agencies Notified T	ype Notification		et Address			JUL 2 6 2016									
EPA DEP				4000 HADLEY ROAD				10 200 20 2010							
⊠ DOL L	Amended Amendment	#		State, Zip Code UTH PLAINFIEI	DMI	07000									
™ DOH	Emergency (including				_D, NJ I	07068	ASBESTOS CONTROL &								
DCA C	justification) Cancellation		-	ie of Contact しゃ Hぃ か	. 0		' Tel	ephone Mo	mber						
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Name of Facility Where Aba		The second second second second		,/		Type of Facility	(4)								
Street Address	= ° Loc	CATIO	ν_{-}	7		School (K	-12)								
132 (iRC/	ϵ	11/		Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes,										
City (5)	MEN	- //	15		etc.)	etc.)									
CLIFT	TON					Square Feet	100000000000000000000000000000000000000	Floors		Bidg.					
County (6)			Cour	nty Code (7)		Current Use (P	900	J / /	J f	9/	4				
PASSAIC	_		(STA	TÉ USE ONLY)			/A	ig demons	пеа)			2			
Name of Monitoring Firm Hir ENVIRONMENTAL TA	red by Building C	wner (8)	/I D5	SCM No.	Name	of Abatement C	ontractor	ntractor (9)							
Street Address			00	45	UNIC	IQUE SYSTEMS OF AMERICA									
64 BROAD STREET				-		Street Address 396 WHITEHEAD AVE.									
City, State, Zip Code MATAWAN, NJ 07747		City, S	City, State, Zip Code SOUTH RIVER, NJ 08882					_							
Project Manager for Monitoring Firm				hone No.		none No.	J 0888;								
TOM GEIGER				-290-2217		2-432-8350 01111									
2/01/11				1		e of OSHA Monitor IQUE SYSTEMS OF AMERICA									
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Facility Glosed/Vacated During Entire Period of Abater				nent 396 WHITEHE			D AVE.								
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Scope of Work (Check All Th	at Apply)				500	TH RIVER, N	J 08882	2. ≠ 							
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TO BE ABATED	Mainte	enance/	Asbestos Con (i.e. thermal	aterial (ACM)					Ш						
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City, State			1125		15	GROW		ıН							
ELIZABETH, NJ				NOTE: US	al Date	City, State		D.							
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CAROL RAIMO		OFFICE	MGR		La	al La	·	Date	1/2	51	10				
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SEA Color County Color Count	7/25/16		Name PSE	e of Building Owner. EG										
SOUTH PLANNFIELD, NJ 07068 ASBESTOS CONTROL 8 Name of Centact DDA Name of Facility Where Absterment is Taking Plaze (3) FACILITY INFORMATION FACILITY INFORMATION Signal Address AGO K WIER RD Signal Address County Code (7) Signal Address County Code (7) Signal Address County (3) County (4) Store (4) County (4) County (5) Store (4) Store (4) County (5) County (5) Store (4) County (5) Store (4) County (5) Store (4) County (5) County (5) Store (4) County (5) Store (6) County (5) Store (7) County (6) County (7) County (6) Coun	EPA Initial Amended	n	4000	0 HADLEY ROA	AD.	i		JU	L 2	6 2	016	- !!		
Name of Facility When Abstoment is Taking Place (3) FACILITY INFORMATION Type of Facility (4) Type of Facility (4) Type of Facility (4) Schoolagiars (5) Schoolagiars (5	DOH Emergence justification	(including	SOU	JTH PLAINFIEL of Contact		ASBESTUS CC)L &		
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County (6) As S ic Name of Monitoring Firm 'Fired by Building Owner (8) Name of Monitoring Firm 'Fired by Building Owner (8) Sinest Andress 64 BROAD STREET City. State. Zip Code MATAWAN, NJ 07747 City. State. Zip Code MATAWAN, NJ 07747 Telephone No. TOM GEIGER Schedules Completion Onto (11) Name of OSHA Mocitor Unicute SYSTEMS OF AMERICA Size Address SOUTH RIVER, NJ 08882 Cocupancy, Slatus During Abatement (Check Only One) Facility Classed/vacted During Entire Pento of Abatement Abatement Pentome Outsige of Normal Pacility Hours Other - Describe: Part - De Case Scope of Work (Check All That Apphy) Scope of Work (Check All That Apphy) Asbestos-Containing Material (ACM) Location of Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) Custodial Staff Cus	260 KullER) ?	uB 304	3 D	Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.)								
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City, State, Zip Code MATAWAN, NJ 07747 City, State, Zip Code SOUTH RIVER, NJ 08882 Project Manager for Monitoring Firm TOM GEIGER Start Date (10) Scheduled Completion Date (11) Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Enter Period of Abatement Abatement Performed Outside of Normal Facility Hours Other — Describe: ②+1 200 RS Stope of Work (Check All That Apply) 23 5f of ≥8 if 15 Location Normally Location of Asbestos-Containing Material (ACM) In Facility (13) Fee South State 200 RS Normal Facility (12) Yes No N/A Name of Registered Waste Hauler Normally Used Solely by Mathemanoper Custodial Staff? (12) Yes No N/A Name of Registered Waste Hauler Normally Used Solely Dy Mathemanoper Custodial Staff? (12) Name of Registered Landfill GROWS NORTH City, State City, State City, State Name of Registered Landfill GROWS NORTH City, State Completed by Comple	Street Address	1		UNIC	NIQUE SYSTEMS OF AMERICA									
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Scope of Work (Check All That Apply) South River, NJ 08882	L COURTE FELIDIMEN LIBERTO OF NAME	a - 1 F 2124	nent s		1000	State, Zip Code								
≥160 sf or ≥260 lf	Scope of Work (Check All That Apply)	-	-		SOU	UTH RIVER, NJ 08882								
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