			038555	_	-	n C	2		г					Pr	int Forn
Ch2592	5		NOT	TCATIO	NOF ASI	ew Jerse BESTOS C 8:60 and	ABATE	MENT 0)			G			V	
Date of Notification (1) 7/24/20	19 IN	1309	0	Name o	of Building	g Owner/C	perator Hitop	1000			JUL	. 21	5 21	019	
_	Type Notification			Street A	Address	21	Wiggir	ns Str	reet	AS	SBEST				. &
× EPA DEP × DOL	<ul> <li>Initial</li> <li>Amended</li> <li>Amendment</li> </ul>	#		City, St	ate, Zip C	Code						GEN			Miles - 400 and 1000
—   Дон	Emergency justification)	(including			of Contac	t	ceton,	NJ U	18540	Telepho					
	Cancellation	1			acy Rob					(6	09) 68	33-51	55		
Name of Facility Where At	atement is Takin	a Place (	2)	FAC	ILITY INF	FORMATI	ON	Ture							
Office	Jatement is Takin	ly Place (	3)					-	of Facility (4	• >					
Street Address 21 Wiggins	Street								School (K-12 Subchapter & Other (i.e. pr	(Other th			dinas	. hom	es.
City (5)								_	etc.) re Feet	# of Flo			lldg. A		
Princeton County (6)	, NJ 08540			County	Code (7)			200		2			80 +		
Mercer				(STATE	USE ONL				ent Use (Prior		emolisi	ied)			
Name of Monitoring Firm H MECS	lired by Building	Owner (8)		ASCN	M No.				tement Contr nvironmer		vices,	Inc.			
Street Address PO Box 341							Street PO E	Addre	ss						
City, State, Zip Code Chesterfield, N	09515						City, S	tate, Z	ip Code						
Project Manager for Monito	oring Firm			Telepho	ne No.		Teleph		, NJ 08501 o.		ense N	0.			
Bill Weisgarber Start Date (10)	r	Schedul	no he		98-4070 Date (11)		609 2	ano menuro	688 HA Monitor	00	493				
8/2/2019			8/	12/2019			MEC	S							
Occupancy Status During / Facility Closed/Vacate		~	- C	nent			Street PO B								
Abatement Performed × Other – Describe: 8	Outside of Norm	nal Facility	/ Hour	s		[			ip Code Id, NJ 085	15					
Scope of Work (Check All	That Apply)						onoc		10, 110 000	10					
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>			Renova Demoli				×	Mir Glo	I Containmen hi-Enclosure hvebag Proce h-Exempted (	dure				2	
		le	Locat	ion							n-i nab			ement	
Location o	ŕ	r	Vorma	lly		Des	cription	of						pe	
Asbestos-Containing M <u>TO BE ABAT</u> In Facility (13)	ED	Ma Cus	d Sole intena todial ( (12)	nce/ Staff?	Asbes (i.e	stos Conta thermal s	aining M systems ing, VA	laterial insula T, or	(ACM) ation,	Amou (Speci SF or L	fy	Removal	Repair	Encapsulate	Enclosure
Basemer	nt	Yes	No	N/A	TL	ormal	Dine la	oulet		400	£				
Dasemer		^			11	nermal F	rpe in	sulati		100	T	X			
Name of Registered Waste	Hauler		1.1	IJDEP W		Cubic Y			Name of Re	egistered l	_andfill				
Stevens Environmenta	al Services			lauler ID 18292		of Wast	te 2		Fairless I	andfill					
City, State Allentown, NJ						Disposa 8/12/		Л	City, State Morrisvill	e, PA					_
Completed by Mahlon E. Stevens		Title Proie	ct Ma	anager			gnaturé	R		/	Dat	te 7/24/	2010	a	
				Jugor			-14	-				11241	2013		

JNV 13087		NOT		ATIÓN	TOF AS	ew-dersey BESTOS ABA C 8\60/and 5:1		/	9	05	58	2
Date of Notification (1)			U.	6		g Owner/Operator (	3	ME		3	$\mathbb{N}$	F
7 / 23 /	19			100000		g Owner/Operator ( orestown, LP - I	• •		9 6	<u> </u>	<u> </u>	<u> </u>
						orestown, LF - I	werro commerc			-00-		
Agencies Notified Type Noti EPA Initial	ification			The state of the	t Address			II II JI	IL 2	2.6	2019	9
⊠ DOLWD □ Amen	ded					hip Road, STE 3	300					
	dment #	0			State, Zip (			ACOFC	TOO	0.01	177.00	
DCA Emerg	gency (in	cluding	J		S. S	NJ 08054			LICE	NSIN	IG	JL &
(NJAC 5:23-8) justific				1.	of Contac			Telephone Numb		Addeniueena	er mit tellerige	nonio de veg
	lauon	_	_	_	am Wolo			856-222-305	8			
				FA	CILITY IN	FORMATION						
Name of Facility Where Abatement	is Taking	g Place	(3)				Type of Facility (4	2000 V				
Kmart Moorestown							School (K-12)	(Other than K-12)				
Street Address								vate and commen		uilding	IS,	
401 Route 38							homes, etc.)					
City (5)							Square Feet	# of Floors	B	ldg. A	ge	
Moorestown, NJ 08057							100,000	1		45		
County (6)				Cour	nty Code (7	)(STATE USE ONLY)		or if being demolis	hed)			
Burlington							Vacant					
Name of Monitoring Firm Hired by B	uilding C	Owner (	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
Vertex				NA		Alliance Env	ironmental Syst	ems				
Street Address						Street Address						
700 Turner Way						550 East Uni	on St.					
City, State, Zip Code						City, State, Zip Co	ode					
Aston, PA 19014						West Cheste	r, PA 19382					
Project Manager for Monitoring Firm			10000	lephone		Telephone No.		License No.				
Dave Turotsy			6	610-558	-8902	610-701-9000	)	00508				
Start Date (10) /19 /19				letion Da	10 E	Name of OSHA N AET	Ionitor	1				
Occupancy Status During Abatemen	nt (Check	k only o	one)	20		Street Address						
Facility Closed/Vacated During E						28 N. Pennel	Road					
Abatement Performed Outside of					cribe	City, State, Zip Co	ode					
Time of Abatement: <u>7</u> AM	PIVI/ <u>3:3</u>			_АМ		Media, PA 19	063					
Scope of Work (Check all that apply)	)						1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1					
⊇ ≥3 sf or >3 lf		🖾 Re	nova	tion		⊠ Full Coni ☐ Mini-Enc	tainment with Nega losure	ative Pressure				
X ≥160 sf or ≥260 lf		De				Gloveba	g Procedure					
						Non-Exe	mpted (*) and Non	-Friable Procedur	e			
9		1.	Loca Norm	ation					At	atem	ent T	уре
Location of Asbestos-Containing Material (A	CM)			lely by	Ashe	Description o stos Containing Ma		Amount	Re	Re	Ш	Ш
TO BE ABATED	0111)			ance/		., thermal systems		(Specify	Removal	Repair	cap	Enclosure
IN Facility (13)		Cusi	(12	I Staff?		surfacing, VAT		SF or LF)	al		Encapsulate	ure
(13)		Yes	No	1	1	other miscellane	ous				te	
Main Sales Floor					Floor T	ile / Mastic		70,000 SF				
Expansion Joint Caulk				$\boxtimes$	Back E	xterior Wall		120 LF				
/ibration Damper					Genera	tor Room		8 SF				
		-	-		Contra			501	-			
lama of Desistant 1944												
Name of Registered Waste Hauler				NJDEP I Hauler II		Cubic Yards of Waste	Name of Registe		14,11227			
Richard Burns & Co				19955		100	Western Be	rks Community	y Lar	ndfill		
City, State						Disposal Date	City, State				1993 - 199 1	
Phila., PA						TBD	Birdsboro,	PA				
Completed By (Print or Type)	Title	9				Signature	. 4.	Dat	te į		1	-
Mark Griffin	E	stimat	tor			200	74 AM	-	11-	22	11	9
SB-41	-	-					-ri W	4	14	50	1	IJ
AY 11	*	Do not	use	this form	for asbest	tos licensure exemp	oted activities.					

Jnv 1 h1732	30	8( 1700	FIC/	ATIO	tate of N FOF AS	ew J BES	ersey TOS ABAT 60 and 511	EMENT		C		]	V	E
Date of Notification (1)				Name	of Building	g Owr	ner/Operator (2	2)		JUL	2	6_2	019	
07 /24 /	19	_		Pat	terson Ha	bita	t for Human	ity			States	a data water	This and	1000000
Agencies Notified Type Notifica	ation			Stree	Address				ASB	ESTO	<del>)8 (</del>	SINC	TRO	L-&
EPA Initial				146	S North 1	st Str	eet		MARCINE CONSIGNATION		24C1V	dinesses OU 10	) Containeanna	
DOLWD Amended				City, S	State, Zip C	Code								
		luding		Pat	erson, N	J 075	522							
(NJAC 5:23-8) justificati	on)			0.00000000	of Contac	-			Telephone N	lumbe	er			
Cancellat	tion			Mr.	Rob Alv	arad	o, Const. Di	r.	510-314-9	9464				
				FA	CILITY IN	IFOR	MATION							
Name of Facility Where Abatement is 1	Taking I	Place	(3)					Type of Facility (	4)					
Residential								School (K-12	)					
Street Address								Subchapter 8	(Other than K	(-12) merci	al hi	ilding	19	
								homes, etc.)		morol		alanig	, ,	
City (5)								Square Feet	# of Floors		BI	dg. A	ge	
Paterson														
County (6)				Cour	nty Code (7	)(STAT	TE USE ONLY)	Current Use (Pri	or if being dem	nolishe	ed)			
Passaic														
Name of Monitoring Firm Hired by Build	ding Ov	vner (	8)	ASCM	No.	Nan	ne of Abateme	ent Contractor (9)						
Mark Jovic Consulting LLC						A	LL PRO MA	NAGEMENT LI	_C					
Street Address						Stre	et Address							
87 Main Street, Suite A			_				7 Outwater I					_		
City, State, Zip Code							, State, Zip Co			00000000				0
Lincoln Park, NJ 07035							arfield, NJ	07026						
Project Manager for Monitoring Firm			1000	phone			ephone No.		License No					
Mark Jovic			3	73-650			73-928-4888		1188					
Start Date (10) Start Date (10				tion Da ) /			ne of OSHA M		<u>^</u>		0.000000			
		100			13			NAGEMENT LL	<u>_</u> C	006577-0				
Occupancy Status During Abatement (			-				et Address							
Facility Closed/Vacated During Entire Abatement Performed Outside of No.					cribe		7 Outwater L							
Time of Abatement:AM	PM/		_PM-		AM	10000000	, State, Zip Co							
Scope of Work (Check all that apply)						G	arfield, NJ	07026						_
⊠ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf		☐ Rei					Full Cont		ative Pressure	9				
								mpted (*) and Nor	n-Friable Proce	edure	8			
			Locat				D				Ab	atem	ent T	ype
Location of Asbestos-Containing Material (ACM	I)	Use	d Sole	ely by	Asbe	stos (	Description of Containing Mat		Amount		Re	Re	E	5
TO BE ABATED	·		ntena	nce/ Staff?		., ther	mal systems i	nsulation,	(Specify		Removal	Repair	cap	Enclosure
IN Facility (13)		Jual	(12)	Juni			urfacing, VAT, er miscellane		SF or LF)		al		Encapsulate	ure
		Yes	No	N/A									fe	
I <sup>st</sup> Floor Foyer	1				VAT/Ma	stic			30 SF		$\boxtimes$			
												П	П	
														-
							t:							
Name of Registered Waste Hauler			1.535	IJDEP I lauler II	-1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	Cub Was	ic Yards of	Name of Regist						
Century Waste, LLC				32797	Billion and an and an	A	s Needed	GROWS No	orth Landfill	/ Fai	rles	s La	ndfi	
City, State			14			Disp	osal Date	City, State						
Elizabeth, NJ						TE	BD	Morrisville,	PA					
Completed By (Print or Type)	Title						Signature			Date	2			
Allen Monchik	Pro	oject	Man	ager			Allon	Monchik	2,	7/2	1/1	a		

JAV 13084	ł	N	ЭТΙ	FIC/ (Pi	ATIO	N.OF AS	BESTOS ABA	TEMENT	CWL#	36			
Date of Notification (1) 7 / 22	2 /	19					ng Owner/Operator		D E C	E		7 [	
EPA	pe Notificat Initial Amended	tion			Stree 20	et Address 0 Elm Dr			IN JUL	26	201	9	
	Amendmer	nt #				State, Zip							
	Emergency		ling		Pri	inceton,	NJ 08544		ASBESTO	SCC	INTR	OL 8	2
(NJAC 5:23-8)	justification	n)	U		Nam	e of Conta	ct		Telephone Num	5erSI	NG		-
	Cancellatio	on			Ro	bert Orte	ego		609-258-184	11			
				9-01000	FA	CILITY	NFORMATION					_	
Name of Facility Where Abate	ement is Ta	king Pla	ace (	3)				Type of Facility	(4)				
Princeton University- L				/				School (K-1					
Street Address	Jinversity	otore		-					2) 8 (Other than K-12	2)			
									private and comme		uildin	gs,	
36 University Place								homes, etc.	)		8	2011	
City (5) Princeton								Square Feet	# of Floors	B	ldg. A	ge	
County (6)					Cou	nty Code (	7)(STATE USE ONLY)	Current Use (P	rior if being demolis	shed)			
MERCER							,		a domon				
Name of Monitoring Firm Hire	d by Buildir	na Own	er (8		ASCM	No	Name of Abaten	nent Contractor (9	)				
TTI Environmental Inc	,	ig onn	0, (0	/	10011	140.							
Street Address								NVIRONMENTA	L, INC.				
							Street Address						
1253 N Church Rd							1123 BEAVE	ER STREET					
City, State, Zip Code							City, State, Zip C	Code					
Moorestown, NJ 08057							BRISTOL, P	A 19007					
Project Manager for Monitorin	g Firm			Tele	phone	No.	Telephone No.		License No.				
Michael Keehn						-8800	215-788-604	0	00509				
Start Date (10)	Sc	heduled					Name of OSHA		00505				
8 / 1 / 1						19	In the second second second second second						
					' .	13	BRISTOLE	VIRONMENTA	L, INC.				
Occupancy Status During Aba							Street Address						
Facility Closed/Vacated Du	uring Entire	Period	of Al	bater	nent		1123 BEAVE	R STREET					
Abatement Performed Out	side of Norr	mal Fac	ility I	Hour	s - Des	scribe	City, State, Zip C	Code					
Time of Abatement: 7:00A	101- <u>4:30</u> PIV	W	-PIM-		AM		BRISTOL, P	A 19007					
Scope of Work (Check all that	apply)						4						
⊠ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf				ovati olitio			Mini-En	ag Procedure	gative Pressure on-Friable Procedu	re			
				ocati						Ab	atem	ent T	уре
Location of		1 0		sole	ly ly by		Description			R	R	m	m
Asbestos-Containing Mate TO BE ABATED				tena			estos Containing M e., thermal systems		Amount	Removal	Repair	nca	Enclosure
IN Facility		C			Staff?	(1.0	surfacing, VAT		(Specify SF or LF)	ova	Ξ.	psu	USC
(13)				(12)		4	other miscellane			-		Encapsulate	e
Basement		Ye		No X	N/A	Pipe Fi	tting Insulation		29 LF			" П	
Basement			-							-			
Jasement						Floor ti	le and mastic		220 SF				
Name of Registered Waste Ha BRISTOL ENVIRONMEN				Ha	JDEP \ auler II	D No.	Cubic Yards of Waste	Name of Regis	tered Landfill				
City, State					18706	)	Disposal Date						
BRISTOL, PA 19007							Disposal Date	City, State FAIRLESS	HILLS DA				
Completed By (Print or Type)	1-	Title						I AIILESS					
Brian Scafiro	1	Title Estim	ato	r			Signature Bruin	1 Scalin	Me 7		22	-1	9
AY 11 B5 19085		* Do n	ot us	se thi	s form	for asbest	tos licensure exem	oted activities.	(-v				1

			_				0000						F	Print Form
CH 4777 GL19-028		NOTIF (P	ICATIC	State of New NOF ASBE	STOS AB	ATE 2:12		)	Check #	<u>)</u> E	C		7 0	VER
Date of Notification (1) 07/23/2019 JW 1301	41			of Building O Lawn BOE		rator	(2)			)]		0.0	0.0	
Agencies Notified Type Notification	6.8			Address 1 Fair Law	n Ave.					<u> </u>	][][	26	_20	19
□     EPA     □     Initial       □     DEP     □     Amended       ∞     DOL     _     Amendment	t#			tate, Zip Cod _awn, NJ 0						ASB	ESTO	DS CO		ROL &
X DOH DCA Emergency justification Cancellation	č	g -	Name	of Contact nas Senko					10.659.25	phone Nu -296-04	mber	enant its hards	dismostal	North Table Contraction Collectioning
				CILITY INFOR	RMATION				913	-290-04	100			
Name of Facility Where Abatement is Takin Memorial Middle School	g Place	(3)					_	e of Facility						
Street Address 12-00 1St Street								School (K- Subchapte Other (i.e.	r 8 (Othe	r than K-1 commerc	2) al bu	ildings	, hon	nes,
City (5) Fair Lawn					5			_etc.) are Feet 000+	# of I 2	Floors	1.12	Bldg. / 20+	Age	
County (6) Bergen				Code (7) USE ONLY)		-		ent Use (Pri Jcational	ior if bein	g demolis				
Name of Monitoring Firm Hired by Building ( Garden State Environmetal	Owner (8	5)	ASC N/A	M No.				atement Cor Inc.	ntractor (S	9)				
Street Address 555 Broad Street					0.000000		Addre Hami	ess urg Turnp	ike					
City, State, Zip Code Glen Rock, NJ 07452					Cit	ty, St	tate, Z	Zip Code dale, NJ (						
Project Manager for Monitoring Firm Bruce			Telepho 201-6	one No. 52-1119	1.11.11		one N 10-9	lo. 9725		License N 01084	lo.			
Start Date (10) 07/24/2019	Schedul 07/25/		pletion	Date (11)	1 2223			HA Monitor						
Occupancy Status During Abatement (Check	k Only Or	ne)			Str	eet /	Addre	SS						
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe: limited maintenance	al Facility	V Hours						urg Turnpi ip Code	ike					
Scope of Work (Check All That Apply)	area to h	building be fully	contai	ned	- BI	loor	ningo	dale, NJ (	07403					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renovat Demolitie				×	Mir Glo	II Containme ni-Enclosure ovebag Proc	e edure					
Location of		Locatio						n-Exempted	i ( ) and i	иоп-глар		Abate		t
Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Use Ma	ed Solely intenan todial SI (12)	y by ce/	(i.e. the	Descript Containin ermal syste surfacing, ther misce	ig Ma ems VAT	aterial insula , or	(ACM) ation,	Amo (Spe SF o	ecify	Removal	Repair	Encapsulate	Enclosure
0.11	Yes	No	N/A								a		late	Ire
Girls Locker Room	X				Wrap an	nd C	Cut		30	LF	x			
													-	
Name of Perintered Mart 11														
Name of Registered Waste Hauler GL Group Inc		Ha	DEP W uler ID 33034	No. of	Cubic Yards f Waste BD	S		Name of F	50.00 <del>X</del> . (1997) 100 (1997)		/ Faii	rless	Lan	
City, State Bloomingdale, NJ					isposal Da BD	ate		City, State Morrisvil						E3
Completed by Elena Solakov	Title Presid	dent		1	Signati	ure	Par.	. Stat		Dat 07	e /23/2	2019		-

Jnv 12905	N	ΙΟΤΙ		ATION	OF AS	BESTOS ABA	6)	Chie#:	2'.	36	06	2
Date of Notification (1)						g Owner/Operator	(2)	F	P	2	1/7	EL
6 / 18 /	19			Ve	rizon Co	mmunications		In E	6 li		14	E
Agencies Notified Type Notifica	ation			Stree	Address							
🖾 EPA 🛛 🖾 Initial				15	East Mo	ntgomery Street			1111	nc.	010	And a second sec
☑ DOLWD	ł				State, Zip				IUL I	201	2013	teny teny
DOH Amendm						PA 15212						and the second se
DCA Emergen		uding		-				ASE		CON	TRO	1-8
(NJAC 5:23-8) justificati					of Contac			Telephone Nu	mber	NSIN	G	L CC
Cancellat	tion			An	thony Po	orta		412-633-40	021	nacio No Gierrittia	***********	SCORCAUBUSS
			and a little	FA	CILITY II	FORMATION						
Name of Facility Where Abatement is 7	Faking F	Place	(3)				Type of Facility (	4)				
Pompton Lakes Central Office							School (K-12					
Street Address						0	Subchapter 8			huildin	20	
8-12 Hamburg Pike							homes, etc.)	ivate and comm	lercial	Dunum	ys,	
City (5)							Square Feet	# of Floors		Bldg. A	ae	
Riverdale							33.035	3		+- 5		
County (6)			210.0	Cou	ty Code /	7)(STATE USE ONLY)	Current Use (Pri		lishod		-	
Morris						MOTATE ODE ONE ()		nmunications		/		
	ding O	mart	0)	ACON	No	None of Al-		munications	>	535		
Name of Monitoring Firm Hired by Build	100			ASCM	NO.	REALTY HAT HAT BATTLE TO TRANSFOR	ent Contractor (9)					
Environmental Health Investig	ations,	, inc.	•)				VIRONMENTAL	_, INC.				
Street Address						Street Address						
655 West Shore Trail						1123 BEAVE	R STREET					
City, State, Zip Code						City, State, Zip C	ode					
Sparta, NJ 07871						BRISTOL, PA	A 19007					
Project Manager for Monitoring Firm			Tel	ephone	No.	Telephone No.		License No.				
Tom Januszeski			9	73-729	-5649	215-788-6040	)	00509				
Start Date (10)	Schedul	led Co	l lamc	etion Da	te (11)	Name of OSHA M	Nonitor					
7 / 23 / 19				0 /			VIRONMENTAL	INC				
			02				MICONMENTAL	., 110				
Occupancy Status During Abatement (		T				Street Address						
Facility Closed/Vacated During Entir					e sile e	1123 BEAVE						
Abatement Performed Outside of No Time of Abatement:AM					cribe	City, State, Zip C	ode					
		0.00	141-1	1.00/ 101		BRISTOL, PA	A 19007					
Scope of Work (Check all that apply)												
>3 sf or >3 lf	No.	ব Rei	nova	tion		⊠ Full Con ☐ Mini-End	tainment with Neg	ative Pressure				
		-	nolit				g Procedure					
						Non-Exe	mpted (*) and Nor	n-Friable Proced	dure			
			Loca						A	batem	ent T	ype
Location of			lorm			Description of			1	-	1	
Asbestos-Containing Material (ACM	)			lely by ance/		stos Containing Ma		Amount	(em	Repair	nca	ncl
TO BE ABATED IN Facility				Staff?	(1.6	e., thermal systems surfacing, VAT		(Specify SF or LF)	Kentova	l l ≌i	lsdt	Enclosure
(13)			(12	)		other miscellane	ous)	Of Of Er)	=	-	Encapsulate	ſe
1977 - 25 	1	Yes	No	N/A							0	
Basement Mech. Equip. Room	Г				VAT/M	astic		350 SF	X			
			-	-				500 01				
Basement Mech. Equip. Room				$\boxtimes$	Pipe Fi	ttings		3 LF				
Basement Power Room	Г				Pipe Fi	ttings		2 LF	X			
Name of Registered Waste Hauler				NJDEP		Cubic Yards of	Name of Regist		E.			
	P. INC			Hauler II		Waste	MINERVAL					
				20990	)	Discould						
SERVICE TRANSPORT GROUP	1					Disposal Date	City, State					
SERVICE TRANSPORT GROUP	,					and the second sec	The second secon					
SERVICE TRANSPORT GROUP City, State YARDLEY, PA	,					TBD	WAYNESB	URG, OH				
SERVICE TRANSPORT GROUP	Title				u.	and the second sec	The second secon		Date	1	1	
SERVICE TRANSPORT GROUP City, State YARDLEY, PA	Title	imat	or			TBD Signature	The second secon		Date 71	191	19	

1			NOT		CATIO	N OF AS	New Jersey BESTOS ABA AC 8:60 and 5:1		DEC		$\mathbb{V}$	L	
Date of Notification (1)					Nam	ne of Buildir	ng Owner/Operator	(2)	151				
6 /	18 /	1	9				mmunications	(-/	JUL JUL	26	2019	)	L
Agencies Notified	Type Notif	fication			Stro	et Address			stad level.				
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		led			-		ntgomery Street		ASBESTOS	S COI	AG NTRU	)]_ G	8
DOH DOH	Amend	Iment #	± <u>1-7/3/</u>	19		State, Zip		1		at a contraction	UN VIOLENER PROVINCE	Contraction Co	
	Emerge		ncludin	g			PA 15212						
(NJAC 5:23-8)	justifica					e of Contac			Telephone Num	ber			
	Cancel	llation			Ar	nthony Po	orta		412-633-402	21			
					FA	CILITY I	FORMATION						
Name of Facility Where Ab			g Place	e (3)				Type of Facilit	y (4)				
Pompton Lakes Cent	tral Offic	e						School (K-					
Street Address								Subchapte	r 8 (Other than K-12	!)			
8-12 Hamburg Pike								homes, etc	private and comme	rcial d	ullain	gs,	
City (5)								Square Feet	# of Floors	B	ldg. A	ne	
Riverdale								33,035	3		+- 50	-	
County (6)					Cou	inty Code (	7)(STATE USE ONLY)		Prior if being demolis	(hod)	50	·	
Morris						(int) 0000 (i	NOTATE ODE ONE I)		ommunications	sned)			
Name of Monitoring Firm H	lired by Br	uilding (	Owner	(8)	ASCN	1 No	Name of Abatem	1					
Environmental Healt					AGON	1110.							
Street Address	ii iiivesu	yatio	15, 110					VIRONMENT	AL, INC.				
655 West Shore Trail							Street Address						
City, State, Zip Code							1123 BEAVE						
							City, State, Zip Co						
Sparta, NJ 07871							BRISTOL, PA	19007					
Project Manager for Monito	ring Firm			10 .	lephone		Telephone No.		License No.				
Tom Januszeski				1.1.1	73-729		215-788-6040	)	00509				
Start Date (10)	n					ate (11)	Name of OSHA N	Ionitor					
ON HOL			/		/		BRISTOL EN	VIRONMENT	AL, INC				
Occupancy Status During A	batement	(Chec	k only d	one)			Street Address						
Facility Closed/Vacated							1123 BEAVE	R STREET					
Abatement Performed O	outside of I	Normal	Facilit	у Ног	irs - De	scribe	City, State, Zip Co	ode					
Time of Abatement:	AM	PI	M/ <u>5:00</u>	PM-1	1:00AM		BRISTOL, PA						
Scope of Work (Check all th	nat apply)												
□ ≥3 sf or ≥3 lf ⊠ ≥160 sf or ≥260 lf			⊠ Re □ De	nova molit			Mini-Enc     Glovebag	losure g Procedure	egative Pressure on-Friable Procedu	e			
				Loca						1	atem	ent T	vpe
Location of				Norma	ally lely by	8.0	Description o				1		T
Asbestos-Containing Ma TO BE ABATE		IVI)			ance/		stos Containing Ma		Amount	Remova	Repair	Encapsulate	Enclosure
IN Facility			Cust		Staff?	(1.6	surfacing, VAT,		(Specify SF or LF)	ova	air	Ipsu	uso
(13)			1	(12	1	-	other miscellane			-		Ilate	re
			Yes	No									
Basement Mech. Equip						VAT/Ma			350 SF				
Basement Power Room						VAT/Ma	stic		900 SF				
Basement Mech. Equip						Pipe Fit	-		3 LF	$\boxtimes$			
Basement Power Room	·				$\boxtimes$	Pipe Fit	tings		2 LF				
Name of Registered Waste SERVICE TRANSPOR					NJDEP Hauler I		Cubic Yards of Waste		istered Landfill				
City, State		.,			2099	0	Dia		LANDFILL				
a Sharan an an an an an an an an							Disposal Date	City, State					
YARDI FY PA						1	TBD	WAYNES	BURG, OH				
YARDLEY, PA Completed By (Print or Type		Title				1	Signature						

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			NOT				BESTOS ABAT AC 8:60 and 5:10		Steliett	35	9	RE	n
Date of Notification (1)		0			Nam	e of Buildin	g Owner/Operator (	2)	Uh			ing constant of	1111
<u> </u>	18 /	19	<u> </u>				mmunications			26	2010	3	
Agencies Notified	Type Notific	ation			Stree	t Address				2.9	CON		burner
EPA	🛛 Initial				15	East Mor	ntgomery Street						
DOLWD 6248	Amendeo Amendm	×			City,	State, Zip	Code		ASBESTO	G CO	NTR	OL &	
					Pit	tsburgh,	PA 15212		LICE	INSI	d (A nament	-	04612,9456
(NJAC 5:23-8)	justificati		Cluding	9	Name	e of Contac	zt		Telephone Numb	er			
	Cancella	tion			An	thony Po	orta		412-633-4021				
					FA	CILITY IN	FORMATION						
Name of Facility Where A	batement is 7	Taking	9 Place	e (3)				Type of Facility	(4)				
Pompton Lakes Cer	ntral Office							School (K-12					
Street Address									8 (Other than K-12) rivate and commerce		ilding	19	
8-12 Hamburg Pike								homes, etc.)			inding	, ,	
City (5)								Square Feet	# of Floors	Blo	dg. A	ge	
Riverdale		1.445-753						33,035	3	1	+- 50	)	
County (6)					Cou	nty Code (7	7)(STATE USE ONLY)		ior if being demolis	ned)			
Morris									nmunications				
Name of Monitoring Firm	12.2			30 E U	ASCM	No.	Name of Abateme						
Environmental Heal	th Investiga	ation	is, Inc					VIRONMENTA	L, INC.				
Street Address							Street Address						
655 West Shore Tra	il						1123 BEAVE						
City, State, Zip Code							City, State, Zip Co						
Sparta, NJ 07871				1			BRISTOL, PA	19007			_		
Project Manager for Monit Tom Januszeski	oring Firm			1	ephone		Telephone No.		License No.				
		Cabad	ulad C			9-5649	215-788-6040 Name of OSHA M		00509		175-11		
Start Date (10) 7 / 8 /						ate (11) 19		VIRONMENTA					
		-						VINCONMENTA	L, INC	_			
Occupancy Status During			-	- C-	mont		Street Address 1123 BEAVER	DOTDEET					
Abatement Performed	· · · · · · · · · · · · · · · · · · ·					scribe	City, State, Zip Co						
Time of Abatement:							BRISTOL, PA						
Scope of Work (Check all	that apply)					in de la composition. La versita de la composition de la comp							
			57 5					ainment with Neg	gative Pressure				
☐ ≥3 sf or ≥3 lf ⊠ ≥160 sf or ≥260 lf			Re	novat moliti			Mini-Enc     Glovebac	losure g Procedure					
	4								n-Friable Procedure	Э	2223	5	
				Loca						Ab	atem	ent Ty	ype
Location of Asbestos-Containing N		IX.		lorma d Sol	ely by	Asha	Description o stos Containing Ma		Amount	Re	Re	m	m
TO BE ABA		2	Ma	intena	ance/		e., thermal systems i		Amount (Specify	Removal	Repair	cap	Enclosure
IN Facility	Y		Cust	todial (12)	Staff?		surfacing, VAT,		SF or LF)	val		Encapsulate	sure
(13)			Yes	No	N/A	-	other miscellane	ous)				ate	
Basement Mech. Equi	p. Room					VAT/Ma	astic		350 SF				
Basement Power Roo	m	3	$\Box$			VAT/Ma	astic		900 SF				
Basement Mech. Equi	p. Room					Pipe Fit	ttings		3 LF				
Basement Power Roo	m			Ċ		Pipe Fi	ttings		2 LF		Π		
Name of Registered Wast	e Hauler			1	JDEP		Cubic Yards of	Name of Regis				_	
SERVICE TRANSPO		, inc	<b>)</b> .	F	auler I		Waste	MINERVA					
City, State							Disposal Date	City, State					
YARDLEY, PA							TBD	WAYNESB	URG, OH				
Completed By (Print or Ty	pe)	Title	1				Signature	~ ^	Dat Dat	е			
Dillan DeCaro		E	stimat	tor			Dilla	n DeCa	W/MR (	0-1	14 -	19	

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Date of Notification (1)							ng Owner/Operato	r (2)	Part 12 (A)	r≓ n	П.Л	fr <sup>-1</sup>	Ference
	19 /	1	9		Ve	rizon Co	mmunications		$  n  \ge 6$	E	W	Ē	1
Agencies Notified	Type Notif	ication	1		Stree	t Address							
⊠ EPA	🛛 Initial				15	East Mo	ntgomery St			0.0	0.04	~	
DOLWD		75.00	ī		City,	State, Zip	Code			2.6	201	9	less less
	Amend			-	Pit	tsburgh,	PA 15212						
(NJAC 5:23-8)	justifica		nciuum	g	-	e of Conta			Telephone Num	ber O	NTR	OL 8	i dinana
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Name of Facility Where A	batement is	Takin	g Place	e (3)			onazioni	Type of Facili	tv (4)				
Verizon Summit Ce								School (K-					
Street Address								- Subchapte	er 8 (Other than K-12				
544 Springfield Ave								Other (i.e., homes, et	, private and comme	rcial b	uilding	gs,	
City (5)								Square Feet	# of Floors	D	da A	~~	
Summit, NJ 07901								33,625	3		ldg. A	~	
County (6)					Cou	nty Code (	7)(STATE USE ONLY				+- 5(	J	
Union					000	my code (	I JOINTE USE UNLY	and the second second second second second second second	Prior if being demoli	sned)			
Name of Monitoring Firm	Hired by P.	ilding	Owner	(8) 1	ASCM	No	Non- of the		ommunications				
USA Environmental		-		(0)	ASCIVI	NO.	<ul> <li>A second first fi</li></ul>	nent Contractor (					
Street Address	manayen	ient I	110					NVIRONMENT	AL, INC.				
							Street Address						
8436 Enterprise Ave City, State, Zip Code	,							ER STREET					
	450						City, State, Zip (						
Philadelphia, PA 19				1			BRISTOL, P	A 19007					
Project Manager for Monit	oring Firm			1	ephone		Telephone No.		License No.				
Mark Jenkins				1		5-5810	215-788-604	0	00509				
Start Date (10)	40					ite (11)	Name of OSHA						
8_/5_/.					/ .	19	BRISTOL EI	VIRONMENT	AL, INC				
Occupancy Status During							Street Address						
Facility Closed/Vacated	d During En	tire Pe	riod of	Abate	ment		1123 BEAVE	R STREET					
Abatement Performed	Outside of I	Normal	Facilit	y Hou	s - Des	scribe	City, State, Zip C	Code					
Time of Abatement:		PI	VI/ <u>5:00</u>	PIVI-1			BRISTOL, P	A 19007					
Scope of Work (Check all	that apply)									-			
⊠ >3 sf or >3 If			🖾 Re	novati	00		Section Full Col		egative Pressure				
				molitic			Gloveb:	ag Procedure					
			1				Non-Ex	empted (*) and N	Ion-Friable Procedu	re			
Looption -	c			Locat Iorma						Ab	atem	ent T	уре
Location o Asbestos-Containing N		M)		d Sole		Ashe	Description stos Containing M		0	Re	Re	Щ	Щ
TO BE ABAT	ED	,	100000	intena			e., thermal systems		Amount (Specify	Removal	Repair	cap	Iclo
IN Facility (13)	1		Cus	(12)	Staff?		surfacing, VA	Γ, or	SF or LF)	val		Encapsulate	Enclosure
(15)			Yes	No	N/A	1	other miscellan	eous)				ate	
Basement Boiler Roor	n					VAT/Ma	astic		450 SF	1			
Basement Stairwell "A			-		-								
Dasement Stanwell A	Landing	3				VAT/Ma	astic		144 SF				
10 11 111					JDEP \		Cubic Yards of	Name of Reg	istered Landfill	-			
	RT GROU	P, INC	C.	Н	auler IE 20990		Waste	MINERVA	LANDFILL				
SERVICE TRANSPO							Disposal Date	City, State					
SERVICE TRANSPO													
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City, State		Title	,				TBD			te			
SERVICE TRANSPO City, State YARDLEY PA			stimat	or			and the second of		BURG, OH	-	19-	19	

Agencies Notified     Type Notification     Street Address       ☑ EPA     ☑ Initial     15 East Montgomery St	UL 2 8985 2105 ercial b	CON NSIN buildin Bldg. 4 +-5(	g ngs, Age	9
Agencies Notified       Type Notification       Street Address       15 East Montgomery St         △ DOLWD       △ Amended       Amendment #       15 East Montgomery St       17 Elephones Nut         △ DOLH       △ Amendment #       □ Emergency (including justification)       Pittsburgh PA 15212       18 Elephones Nut         △ DOLA       ○ Cancellation       Anthony Porta       12-633-40         Name of Facility Where Abatement is Taking Place (3)       FACILITY INFORMATION       Type of Facility (4)         Verizon Market Central Office       □ School (K-12)       Subchapter 8 (Other than K-1         Street Address       □ OT IO Z       Square Feet       # of Floors         Yerizon Market Central Office       □ Other (i.e., private and comm homes, etc.)       County Code (7)(STATE USE ONLY)       Current Use (Prior if being demo Verizon Communication         Name of Monitoring Firm Hired by Building Owner (8)       ASCM No.       Name of Abatement Contractor (9)       BRISTOL ENVIRONMENTAL, INC.         Street Address       1123 BEAVER STREET       City, State, Zip Code       Elseys Abatement No.       215-788-6040       00509         T12 Schedule Completion Date (11)       8 / _ 23 / _ 19       Name of OSHA Monitor       BRISTOL, PA 19007       00509         Street Address       1123 BEAVER STREET       Code       00509       00509	UL 2 8985 2105 ercial b	2 6 CON NSIN Duildin Bldg. 4 +-5(	201 VTRC G	9
Agencies Notified       Type Notification       Street Address         Image: Deck DOLWD       Amended Amendment #	UL 2 8985 2105 ercial b	2 6 CON NSIN Duildin Bldg. 4 +-5(	201 VTRC G	9
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⊠ DOLWD       ☐ Amended         △ DOH       ☐ Amendment #	2) ercial b	CON NSIN Duildin Bldg. 4 +-5(	NTRO G	
X DOH       Amenoment #       Pittsburgh PA 15212         DCA       Emergency (including justification)       Name of Contact       Telephone Nu         Anthony Porta       412-633-40         FACILITY INFORMATION         Name of Facility Where Abatement is Taking Place (3)       Type of Facility (4)         Verizon Market Central Office       School (K-12)         Street Address       Other (i.e., private and commony homes, etc.)         95 William Street       Other (i.e., private and commony homes, etc.)         City (5)       County Code (7)(STATE USE ONLY)       Current Use (Prior if being demo Verizon Communication         Name of Monitoring Firm Hired by Building Owner (8)       ASCM No.       Name of Abatement Contractor (9)         TTI Environmental       Street Address       Street Address         1253 North Church Street       City, State, Zip Code       City, State, Zip Code         Moorestown, NJ 08057       Telephone No.       609-313-8218       215-788-6040       00509         Start Date (10)       Scheduled Completion Date (11)       Name of OSHA Monitor       BIISTOL ENVIRONMENTAL, INC         Screet Address       1123 BEAVER STREET       Cousency Status During Abatement (Check only one)       Street Address         Fraility Closed/Vacated During Entire Period of Abatement       Matement Performed Quiside of Norma	2) ercial b	CON NSIN Duildin Bldg. 4 +-5(	NTRO G	
□ DCA       □ Linergency (including justification)       Name of Contact       Interform (including justification)         □ Cancellation       Anthony Porta       Interform (including justification)       Interform (including justification)         Name of Facility Where Abatement is Taking Place (3)       Type of Facility (4)       Interform (1,e,, private and comm homes, etc.)         Street Address       Subchapter 8 (Other than K-1 © Other (i.e., private and comm homes, etc.)       Subchapter 8 (Other than K-1 © Other (i.e., private and comm homes, etc.)         City (5)       Newark       O 1 0 2       Square Feet 425,442       12         County (6)       County Code (7)(STATE USE ONLY)       Current Use (Prior if being demo Verizon Communication Verizon Communication Verizon Communication         Name of Monitoring Firm Hired by Building Owner (8)       ASCM No.       Name of Abatement Contractor (9)         TTI Environmental       Street Address       Street Address         123 North Church Street       City, State, Zip Code       City, State, Zip Code         Moorestown, NJ 08057       Telephone No.       Elephone No.       License No.         Project Manager for Monitoring Firm Kris Smith       Go9-313-8218       215-788-6040       00509         Start Date (10)       Scheduled Completion Date (11)       Name of OSHA Monitor       BRISTOL ENVIRONMENTAL, INC         Staret Address	2) ercial b	ouildin Bidg. 4 +-50	g ngs, Age	OL &
Antion y Porta         FACILITY INFORMATION         Name of Facility Where Abatement is Taking Place (3)         Verizon Market Central Office         Street Address         95 William Street         Street Address         95 William Street         County (6)         County Code (7)(STATE USE OMLY)         Current Use (Prior if being demo Verizon Communication         Name of Monitoring Firm Hired by Building Owner (8)         ASCM No.         Name of Abatement Contractor (9)         BRISTOL ENVIRONMENTAL, INC.         Street Address         1123 BAVER STREET         City, State, Zip Code         Moorestown, NJ 08057       Telephone No.         Froject Manager for Monitoring Firm         Telephone No.         609-313-8218         Street Address         125- / 19	2) ercial b	ouildin Bidg. 4 +-50	g ngs, Age	DL &
Antion Ford         FACILITY INFORMATION         Name of Facility Where Abatement is Taking Place (3)         Verizon Market Central Office         Street Address         Street Address         Subchapter 8 (Other than K-1         Street Address         Subchapter 8 (Other than K-1         Other (i.e., private and comm homes, etc.)         County (6)         County Code (7)(STATE USE ONLY)         Current Use (Prior if being demo Nemes, etc.)         Name of Monitoring Firm Hired by Building Owner (8)         ASCM No.         Name of Abatement Contractor (9)         BRISTOL ENVIRONMENTAL, INC.         Street Address         1123 BAVER STREET         City, State, Zip Code         Moorestown, NJ 08057       Completion Date (11)         Project Manager for Monitoring Firm       Telephone No.         Attract Address         Street Address         Street Address         Street Address         129 OS         Street Address         129 /	2) ercial b	ouildin Bidg. 4 +-50	g ngs, Age	
Name of Facility Where Abatement is Taking Place (3)       Type of Facility (4)         Verizon Market Central Office       School (K.12)         Street Address       Subchapter 8 (Other than K-1         95 William Street       O1102         City (5)       Square Feet         Newark       O102         County (6)       County Code (7)(STATE USE ONLY)         Essex       County Code (7)(STATE USE ONLY)         Name of Monitoring Firm Hired by Building Owner (8)       ASCM No.         TTI Environmental       ASCM No.         Street Address       Street Address         1253 North Church Street       Street Address         1253 North Church Street       City, State, Zip Code         Moorestown, NJ 08057       Telephone No.         Frigs Smith       Scheduled Completion Date (11)        8 /5 /19       Scheduled Completion Date (11)        8 /5 /19       Scheduled Completion Date (11)        8 /19       Street Address         Street Address       Street Address         1123 BEAVER STREET       00509         City, State, Zip Code       BRISTOL ENVIRONMENTAL, INC         Scheduled Completion Date (11)      8 /	ercial b	3ldg. / +-5(	Age	
Verizon Market Central Office       School (K-12)         Street Address       Subchapter 8 (Other than K-1         95 William Street       Square Feed         City (5)       O102         Newark       O102         County (6)       County Code (7)(STATE USE ONLY)         Essex       County Code (7)(STATE USE ONLY)         Name of Monitoring Firm Hired by Building Owner (8)       ASCM No.         Name of Monitoring Firm Hired by Building Owner (8)       ASCM No.         TTI Environmental       Street Address         1253 North Church Street       City, State, Zip Code         Moorestown, NJ 08057       Telephone No.         609-313-8218       215-788-6040         Start Date (10)       Scheduled Completion Date (11)	ercial b	3ldg. / +-5(	Age	
Street Address       Gubchapter 8 (Other than K-1         95 William Street       City (5)         City (5)       O102         Newark       23,442         County (6)       County Code (7)(STATE USE ONLY)         Essex       Current Use (Prior if being demo Verizon Communication         Name of Monitoring Firm Hired by Building Owner (8)       ASCM No.         TTI Environmental       ASCM No.         Street Address       Street Address         1253 North Church Street       Street Address         1253 North Church Street       Street Address         1253 North Church Street       City, State, Zip Code         Moorestown, NJ 08057       Celephone No.         Froject Manager for Monitoring Firm       Telephone No.         Kris Smith       Completion Date (11)	ercial b	3ldg. / +-5(	Age	
95 William Street       ☑ Other (i.e., private and comm homes, etc.)         City (5)       O1O2       Square Feet 425,442       12         County (6)       County Code (7)(STATE USE ONLY)       Current Use (Prior if being demo Verizon Communication Verizon Communication         Name of Monitoring Firm Hired by Building Owner (8)       ASCM No.       Name of Abatement Contractor (9)         TTI Environmental       Street Address       Street Address         1253 North Church Street       Street Address       Street Address         1253 North Church Street       City, State, Zip Code       BRISTOL, PA 19007         Project Manager for Monitoring Firm       Telephone No.       609-313-8218       215-788-6040       00509         Start Date (10)       Scheduled Completion Date (11)       Name of OSHA Monitor       00509       00509         Start Date (10)       Scheduled Completion Date (11)       Name of OSHA Monitor       00509       00509         Start Date (10)       Scheduled Completion Date (11)       Name of OSHA Monitor       00509       Street Address	ercial b	3ldg. / +-5(	Age	
bowes, etc.)       homes, etc.)         City (5)       0102       Square Feet 425,442       # of Floors 425,442         County (6)       County Code (7)(STATE USE ONLY)       Current Use (Prior if being demo Verizon Communication         Name of Monitoring Firm Hired by Building Owner (8)       ASCM No.       Name of Abatement Contractor (9)         TTI Environmental       ASCM No.       Name of Abatement Contractor (9)         Street Address       Street Address       Street Address         123 BEAVER STREET       City, State, Zip Code       City, State, Zip Code         Moorestown, NJ 08057       Telephone No.       609-313-8218       215-788-6040       00509         Start Date (10)       Scheduled Completion Date (11)       Name of OSHA Monitor       BRISTOL ENVIRONMENTAL, INC         Scheduled Completion Date (11)       8 / 23 / 19       BRISTOL ENVIRONMENTAL, INC       Street Address         Occupancy Status During Abatement (Check only one)       Street Address       1123 BEAVER STREET       City, State, Zip Code         Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement       MAH PM/5100PM/1-30AM       Street Address	B	3ldg. / +-5(	Age	
Newark     OTIOL     425,442     12       County (6)     County Code (7)(STATE USE ONLY)     Current Use (Prior if being demoindent of being d		+-50	2020	
County (6)       County Code (7)(STATE USE ONLY)       Current Use (Prior if being demo Verizon Communication         Name of Monitoring Firm Hired by Building Owner (8)       ASCM No.       Name of Abatement Contractor (9)         TTI Environmental       BRISTOL ENVIRONMENTAL, INC.         Street Address       Street Address         1253 North Church Street       Street Address         1253 North Church Street       City, State, Zip Code         Moorestown, NJ 08057       BRISTOL, PA 19007         Project Manager for Monitoring Firm       Telephone No.         Kris Smith       Scheduled Completion Date (11)        8      3        8      3         Street Address       1123 BEAVER STREET         City, State, Zip Code       BRISTOL, PA 19007         Project Manager for Monitoring Firm       Telephone No.        8      3      1         Start Date (10)       Scheduled Completion Date (11)        8      3      1        8      3      1         Occupancy Status During Abatement (Check only one)       Street Address	lished)	1000	)	
Essex     Verizon Communication       Name of Monitoring Firm Hired by Building Owner (8)     ASCM No.     Name of Abatement Contractor (9)       TTI Environmental     BRISTOL ENVIRONMENTAL, INC.       Street Address     Street Address       1253 North Church Street     Street Address       1253 North Church Street     1123 BEAVER STREET       City, State, Zip Code     City, State, Zip Code       Moorestown, NJ 08057     City, State, Zip Code       Project Manager for Monitoring Firm     Telephone No.       Kris Smith     Scheduled Completion Date (11)      8     /3       Start Date (10)     Scheduled Completion Date (11)      8     /3      3    3      3    3	lished)			
Name of Monitoring Firm Hired by Building Owner (8)       ASCM No.       Name of Abatement Contractor (9)         TTI Environmental       BRISTOL ENVIRONMENTAL, INC.         Street Address       1123 BEAVER STREET         City, State, Zip Code       City, State, Zip Code         Moorestown, NJ 08057       BRISTOL, PA 19007         Project Manager for Monitoring Firm       Telephone No.         Kris Smith       609-313-8218         Start Date (10)       Scheduled Completion Date (11)				
TTI Environmental       BRISTOL ENVIRONMENTAL, INC.         Street Address       Street Address         1253 North Church Street       1123 BEAVER STREET         City, State, Zip Code       City, State, Zip Code         Moorestown, NJ 08057       BRISTOL, PA 19007         Project Manager for Monitoring Firm       Telephone No.         Kris Smith       Completion Date (11)         Start Date (10)       Scheduled Completion Date (11)				
Street Address       Street Address         1253 North Church Street       Street Address         1253 North Church Street       1123 BEAVER STREET         City, State, Zip Code       City, State, Zip Code         Moorestown, NJ 08057       BRISTOL, PA 19007         Project Manager for Monitoring Firm       Telephone No.         Kris Smith       609-313-8218         Start Date (10)       Scheduled Completion Date (11)				
1253 North Church Street       1123 BEAVER STREET         City, State, Zip Code       City, State, Zip Code         Moorestown, NJ 08057       BRISTOL, PA 19007         Project Manager for Monitoring Firm       Telephone No.         Kris Smith       609-313-8218         Start Date (10)       Scheduled Completion Date (11)        8_/_5_/_19      8_/_23_/_19         Doccupancy Status During Abatement (Check only one)       Street Address        Facility Closed/Vacated During Entire Period of Abatement       Street Address        Abatement Performed Outside of Normal Facility Hours - Describe       Tit23 BEAVER STREET				
City, State, Zip Code       City, State, Zip Code         Moorestown, NJ 08057       City, State, Zip Code         Project Manager for Monitoring Firm       Telephone No.         Kris Smith       609-313-8218         Start Date (10)       Scheduled Completion Date (11)        8       /5        8       /19				
Moorestown, NJ 08057       BRISTOL, PA 19007         Project Manager for Monitoring Firm       Telephone No.       License No.         Kris Smith       609-313-8218       215-788-6040       00509         Start Date (10)       Scheduled Completion Date (11)       Name of OSHA Monitor       00509         Start Date (10)       Scheduled Completion Date (11)       Name of OSHA Monitor       BRISTOL ENVIRONMENTAL, INC         Occupancy Status During Abatement (Check only one)       Facility Closed/Vacated During Entire Period of Abatement       Street Address       1123 BEAVER STREET         Abatement Performed Outside of Normal Facility Hours - Describe       City, State, Zip Code       City, State, Zip Code				
Moorestown, NJ 08057       BRISTOL, PA 19007         Project Manager for Monitoring Firm       Telephone No.       Constant of the second seco				
Project Manager for Monitoring Firm       Telephone No.       Telephone No.       License No.       License No.       00509         Kris Smith       Scheduled Completion Date (11)       Name of OSHA Monitor       BRISTOL ENVIRONMENTAL, INC         Start Date (10)       Scheduled Completion Date (11)       Name of OSHA Monitor       BRISTOL ENVIRONMENTAL, INC         Occupancy Status During Abatement (Check only one)       Street Address       1123 BEAVER STREET         Abatement Performed Outside of Normal Facility Hours - Describe       City, State, Zip Code       City, State, Zip Code				
Kris Smith       609-313-8218       215-788-6040       00509         Start Date (10)       Scheduled Completion Date (11)       Name of OSHA Monitor       00509				
Start Date (10)       Scheduled Completion Date (11)       Name of OSHA Monitor         8       1       5       19       BRISTOL ENVIRONMENTAL, INC         Occupancy Status During Abatement (Check only one)       Street Address       1123 BEAVER STREET         Abatement Performed Outside of Normal Facility Hours - Describe       Time of Abatement:       AM-				
8       /      19      19       BRISTOL ENVIRONMENTAL, INC        0      19      19       BRISTOL ENVIRONMENTAL, INC        0      0      0       Street Address        0      0       Abatement Performed Outside of Normal Facility Hours - Describe       1123 BEAVER STREET        0      0      0      0       City, State, Zip Code				
□ Facility Closed/Vacated During Entire Period of Abatement 3 Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: AM- PM/5:00PM-1:30AM City, State, Zip Code				
Abatement Performed Outside of Normal Facility Hours - Describe				
Time of Abatement: AM- PM/5:00PM-1:30AM				
The of AbatementAMPM/3.00 PM-1.30 AM BDISTOL DA 40007	-1-0-010000			
DRIDTOL, FA 13007				
Scope of Work (Check all that apply)				
⊇ ≥3 sf or ≥3 lf				
☑ ≥160 sf or ≥260 lf				
Non-Exempted (*) and Non-Friable Proced	ure			
Is Location	Ał	batem	nent 7	Гуре
Location of Normally Description of Used Solely by Achestos Containing Material (ACM)	R	R	П	ш
Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> Used Solely by Maintenance/ Maintenance/ (i.e., thermal systems insulation, (Specify	Remova	Repair	nca	nclo
IN Facility Custodial Staff? surfacing, VAT, or SF or LF)	oval	1 7	Encapsulate	Enclosure
(13) (12) other miscellaneous)			late	o
Yes         No         N/A           Basement HSB #2         Image: Comparison of the second s				
			12	
Basement Corridor #1 U VAT / Mastic 450 SF		-		
	-			
Hauler ID No. Waste				
20990 WINERVA LANDFILL				
Disposal Date City, State				
YARDLEY, PA TBD WAYNESBURG, OH				
Completed By (Print or Type) Title Signature D			21025	
Dillan DeCaro Estimator	ate		-10	5 1

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JAN 13	$\mu \mu l$	9046	

Inv 130	18	N	οτι		ATION	DOF AS	ew Jersey BESTOS ABA C 8:60 and 5			Chk	#3	36	08	
Date of Notification (1) 7 /	19 /	10				of Buildin	g Owner/Operato	r (2	2)	ME	GE	Γ.	$\mathbb{W}$	E
			-				lthority				UL	<u> </u>	U	5
Agencies Notified	Type Notifica	ation			0.02/03/2020	Address	ham Drive			IIN				
DOLWD	Amended	1				State, Zip (					UL 2	6 ;	2019	
DOH DOH	Amendme				1000	son, NJ								100023
	Emergeno justificatio		ding			of Contac				Telephone Nu	2042	CC1N	700	0
(NJAC 5:23-8)	Cancellat				N/A					N/A	LICEN	ISIN	3	- 61
										NIA		with Tale (Tall ) and	Solites Kunge	M <sup>ar</sup> tilette-staatus
Name of Facility Where	Abstement is T	Taking D	lace	(2)	FA	GILITYIN	FORMATION	-1	Tupo of Facility /	4)				
Housing Unit E6	Abatement is i	aking r	lace	(3)					Type of Facility (	12				
Street Address								_	Subchapter 8		12)			
Willard Dunham D	rivo								Other (i.e., pr	ivate and comm	nercial b	uildin	gs,	
City (5)	iive							_	homes, etc.)	# of Floore		Ida A	~~	
Edison									Square Feet +-1000	# of Floors	B	ldg. A	10 <del>7</del> 015-005	
County (6)					0	the Carda /				2	P-1-1	+-30		
Middlesex					Cour	ity Code (/	)(STATE USE ONLY	2	Current Use (Pric	or it being demo	blisned)			
	- Line d ha Daila	1' O	10		10014	N			Home					
Name of Monitoring Firm	-	aing Ow	ner (a	5)	ASCM	NO.			ent Contractor (9)	INIO				
Hillmann Consultir Street Address	ig Group							N	VIRONMENTAL	., INC.				
1600 Route 22 Eas	+						Street Address	-	OTDEET					
							1123 BEAV							
City, State, Zip Code Union, NJ 07083							City, State, Zip							
Project Manager for Mor	itoring Firm			Tala	phone	No	BRISTOL, F	A	19007	Lizzana Na				
TBD	-			т	BD		215-788-604	40		License No. 00509				
Start Date (10) 8 / 5 /	2 X 2 X 2	Schedule			etion Da 4 /		Name of OSHA BRISTOL E		lonitor VIRONMENTAL	, INC				
Occupancy Status Durin	g Abatement (C	Check o	nly or	ne)			Street Address							
Facility Closed/Vacat	ed During Entir	re Period	d of A	bate	ment		1123 BEAV	EF	R STREET					
Abatement Performe						cribe	City, State, Zip	Co	ode					
Time of Abatement:	7:00AM- <u>3:30</u> P	PM/	_PN	1	AM		BRISTOL, F							
Scope of Work (Check a	ll that apply)						L	-						
>3 sf or >3 lf			] Rer	ovat	ion		Full Co		ainment with Neg	ative Pressure				
$\boxtimes \geq 160 \text{ sf or } \geq 260 \text{ lf}$				nolitio			Gloveb	bag	osure g Procedure mpted (*) and Nor	n-Friable Proce	dure			
				Loca							A	oatem	ent T	ype
Location	Construction and the second construction of			orma	illy ely by		Description				R	R	m	ш
Asbestos-Containing TO BE AB/		)			ance/		stos Containing M			Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facil			Custo		Staff?	(i.e	surfacing, VA			SF or LF)	oval	-	psu	sur
(13)		-	. 1	(12)	1	-	other miscellar	nec	ous)				late	Ø
			'es	No	N/A	1						-		
2 <sup>nd</sup> Floor & Staircase	9					Double	layer VAT/Mas	sti	c	362 SF				
		E												
Name of Registered Was	ste Hauler	l		1.121	JDEP		Cubic Yards of		Name of Regist	ered Landfill			-	
SERVICE TRANSP	ORT GROUP	, INC.		H	lauler II 20990		Waste		MINERVA L	ANDFILL				
City, State					20330	,	Disposal Date		City, State					
YARDLEY, PA							TBD		WAYNESB	URG, OH				
Completed By (Print or T	ype)	Title					Signature	1			Date			
Dillan DeCaro			mat	or				1	n DeCan	10		19	-10	2
CP /1 0							Dal	Û	n recevi	NIN	l	r (	(	

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APPROVED BY	D	State of	New Jersey						
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NJ DOG TAV 12336	Pursuant	46 <u>N.J.</u>	.C. 8:60 and	12:120)	CAL	H	36	0	ſ
Date of Notification (1) 7/19/19		e of Buildin er Univers	g Owner / Operate ity	or (2)			$\square$		
Agencies Notified Type Notification		et Address			1111 2 0 004		11	1	
	and the second se	State & Zip	eville Road		JUL 2 6 201	<u>y   </u>	0	-	
DOL Amended			, NJ 08648	-					
DOH Emergency	Name	e of Contac		AS	BESTOS CONTRA LICENSING	Félépho	one	Num	ber
DCA Cancellation	Walt	er Eddy		Description and the second		609-89			
Name of Facility Where Abatement is Taking	FA	CILITY IN	FORMATION						
Rider University – Cranberry Cafe	Place (3)		Type of Faci	lity (4) (K-12) Univers	sity				
Street Address				pter 8 (Other ti					
2083 Lawrenceville Road					ommercial building	js, hon	nes,	etc.)	
City (5) County (6)		0.1.17	Square Feet		oors B	ldg. Ag	е		
City (5) County (6) Lawrenceville Mercer	County	Code (7)	30,000		3		40-	F	
Transcribe wile liner cer			Dormitory	(Prior if being	demolished)				
Name of Monitoring Firm Hired by Building O	wner (8)	ASCM N		atement Contra	actor (9)				
Pennoni Associates			Bristol Env	vironmental,					
Street Address 515 Grove Street, Suite B			Street Addre	Contraction of the second s	17				
City, State & Zip Code		1	City, State &						
Haddon Heights, NJ 08035			Bristol, PA						
Project Manager for Monitoring Firm Brian Clark	Telephone 856-656-2		Telephone N (215) 788-6		License No 00509	umber			
	ompletion Da	te (11)	Name of OSH	HA Monitor					
7/20/19 Occupancy Status During Abatement (Check	7/21/19 only one)		Street Addres	ironmental I ss	nc.				
Facility Closed/Vacated During Entire     Abatement Performed Outside of Nor	Period of Aba	atement	1123 Beave	A STATE OF A					
Describe: 7:00 AM to 3:30 PM	mai Hours -	7 am to 3ph	City, State & Bristol, PA						
Facility Occupied During Abatement			DIISCOI, FA	19007					
Scope of Work (Check all that apply)			•						
≥3 sf or ≥3 lf	🕅 Ren	ovation		Full Co	ntainment with Ne Iclosure	egative	Pres	ssure	e
⊇160 sf ≥260 lf		nolition			Bag Procedures				
				Non-Ex	empted and Non-	Friable	Pro	cedu	ire
Location of Asbestos-Containing	Is Locati Normally i		Descriptior Asbestos-Con		Amount (Specify	Aba	tem	ent T	уре
Material (ACM)	Solely b	oy 🛛	Material (AC	CM)	SF or LF)				_
TO BE ABATED in Facility	Maintenan Custodial S		(i.e., thermal sy insulation, surfact	ystems		Remova	Repair	Clea	Incls
(13)	(12)		or other miscella	aneous)		oval	bair	Clean Up	Enclsoure
	Yes No	N/A							
Former Faculty Seating Area			roweled on fire	eproofing	22 SF				
	+	H					Н	Ц	H
						H	H	H	H
Name of Registered Waste Hauler				1					
		UEP Waste uler ID No.	Cubic Yards of Waste	Name of Reg	istered Landfill				
Bristol Environmental Inc.	18	706	1 Cu Yd	Fairless La	ndfill				
City, State Bristol, PA			Disposal Date 7/21/19	City, State					
Completed By (Print or Type)	Title	e	Signature	Fairless Hil	15, FA	Date			
Gino Pizzigoni	Pro	oject Inager	11- 1	Win you	nº/gr	7/19/	/19		
CI 10166	1416		1.50100 1.	10 00	1 0		-		

CM8541	N		State of N TION-OF AS Suant to NJA	BESTO	SABATE	EMENT 20)	N.	R		E	1 1	
Date of Notification (1) 07/23/19	10U		ame of Buildin CEF Const			or (2)	1		JUL	26	-201	9
Agencies Notified Type Notification	47	Sti	reet Address		-			AS	BESTO	DS CC	NTR	OL &
EPA Initial DEP Amended			59 East Co		ne Ra			L	LIC	ENS	NG	
DOL Amendment Emergency (		La	akewood, N	IJ 087	01							
DOH justification) DCA Cancellation		1.	me of Contac CEF Const		1			Telephone 732-367		r		
			FACILITY IN	FORMA	TION			1				
Name of Facility Where Abatement is Taking	g Place (3)					Туре	e of Facility (4	)				
Street Address							School (K-12 Subchapter & Other (i.e. pri etc.)	Other than	K-12) nercial bu	uildings	, hom	ies,
City (5) Lakewood							are Feet	# of Floors		Bldg.	Age	
County (6) Ocean			unty Code (7) ATE USE ONL		N	Curre Horr	ent Use (Prior Ne	if being dem	iolished)			
Name of Monitoring Firm Hired by Building C	Owner (8)	A	ASCM No.				atement Contr D PROFES					
Street Address						Addres	ss DOVE CO	URT				
City, State, Zip Code					City, S	State, Z	ip Code OD, NJ 08					
Project Manager for Monitoring Firm			ephone No.			none No 668-9		Licens 1200				
	Scheduled 08/06/19		tion Date (11)	)			HA Monitor	SIONALS				
Occupancy Status During Abatement (Check	- 17 A				Street	Addres	SS					
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe:	eriod of Ab al Facility H	atement Hours			City, S	tate, Zi	DOVE COU					
Scope of Work (Check All That Apply)					LAK	EVVO	OD, NJ 087	/01				
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>		novation molition			×	Min Glo	l Containmen ni-Enclosure ovebag Proce n-Exempted (	dure			e	
		ocation				5000				Abate	ement /pe	
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Used Main Custo	Solely by tenance/ dial Staff (12)	Asbes	stos Cor therma. surfa	escription ntaining M Il systems acing, VA miscellan	laterial s insula T, or		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No N	I/A								ate	re
EXTERIOR					SIDING			1000SF	x			
INTERIOR				FLC	OR TIL	ES		100SF				
Name of Registered Waste Hauler			P Waste	Cubi	Vord		Nerrow	-1-4	1611			
NEWARK CARTING			r ID No.	of Wa	: Yards iste		Name of Re	gistered Lan	dfill			
City, State NEWARK, NJ				Dispo 08/06	sal Date 5/19		City, State BETHLEF	HEM PA				
Completed by JOSEPH PERLSTEIN	Title OWNE	R		5	Signature				Date 07/23/	19		

hzing	/					dealer statistics	10 C					
1 100		NO	TIFIC (P	ATIO Pursu	NOF AS	Rev Jersey	6)	DE C	GE		$\mathbb{V}$	
Date of Notification (1)						ng Owner/Operator	(2)		UL 2	6	2010	}
/12	/1	19		A	dam A. Ei	nterprise LLC				. 0	2010	,
Agencies Notified Type No		n		Stre	et Address				nen antora	sources.		-
🛛 EPA 🛛 🕅 Initia				16	2 Liberty	Street		ASBE	STOS			)L&
⊠ DOLWD □ Amei ⊠ DOH Amei	nded ndment :	21		City,	State, Zip	Code		Brown the state of	Ind U Ind	10111		
			-	Ha	ackensac	k, NJ 07601						
	ication)		ig	Nam	e of Conta	ct		Telephone Nur	nber			
Cano	ellation			Ef	fi Alter			201-343-90	60			
				F/	CILITY I	NFORMATION						
Name of Facility Where Abatement	is Takir	ng Piac	e (3)				Type of Facility	(4)			-	
1207 John F. Kennedy Blvd	, Bayo	nne, l	41				School (K-1					
Street Address							Subchapter	8 (Other than K-1				
1207 John F.Kennedy Bould	evard						homes, etc.	private and comme	ercial b	uildin	ıgs,	
City (5)							Square Feet	# of Floors	IB	lldg. A	Age	
Bayonne							1360	3		99	32	
County (6)				Cou	inty Code (	7)(STATE USE ONLY)	Current Use (Pr	rior if being demol	ished)			-
Hudson					34	vara da	Vacant					
lame of Monitoring Firm Hired by E	Building	Owner	(8)	ASCM	No.	Name of Abatem		)	644 A C			
Altomonte Environmental S	ervices	s, LLC	:			Super, LLC	, , ,	·				
treet Address						Street Address						
2200 Paterson Plank Road,	Unit #7	7				203 Belmont	Avenue					
ity, State, Zip Code						City, State, Zip Co	ode					
North Bergen, NJ 07047						Haledon, NJ	07508					
roject Manager for Monitoring Firm	1		Tele	ephone	No.	Telephone No.		License No.				
Carmelo Altomonte			20	01-864	4-6583	201-336-0477	•	01195				
tart Date (10)	Scher	duled (	Comple	ation Da	ate (11)	Name of OSHA N	Ionitor					
7 / _22 / _19	_	8	/3	/	19	Super, LLC						
ccupancy Status During Abatemer	nt (Chec	k only	one)	Maria - Maria - Casa a	energia accasa energia das ratio	Street Address	n a the last of a little of a spin-spin-	n en waard de oorte oorte de statie en de stat	and second second		in - Chileron	
Facility Closed/Vacated During E	ntire Pe	eriod of	Abate	ment		203 Belmont	Avenue					
Abatement Performed Outside of	Normal	I Facilit				City, State, Zip Co	ode			-		-
Time of Abatement:AM	PI	M/	PM-		AM	Haledon, NJ						
cope of Work (Check all that apply	)											
] ≥3 sf or ≥3 lf ⊴ ≥160 sf or ≥260 lf			enovati emolitic			Mini-Encl     Glovebag	Procedure	gative Pressure n-Friable Procedu	Ire			
			Locat							atem	ent T	ype
Location of Asbestos-Containing Material (A	014)		Norma ed Sole			Description o			1000	-	1	T
TO BE ABATED	JN1)	Ma	intena	ince/		stos Containing Mai ., thermal systems i		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facility		Cus	todial \$ (12)	Staff?		surfacing, VAT,	or	SF or LF)	val	-	luso	sure
(13)		Yes	No	N/A	1	other miscellaned	ous)				ate	0
sement					Floor Ti	loc		000.05				
1-747-1187111		-						200 SF				
					Floor Ti	lles		120 SF				
		1										
econd Floor Kitchen North												-
econd Floor Kitchen North				JDEP V		Cubic Yards of	Name of Regist	lered Landfill				
econd Floor Kitchen North			Ha	auler ID	) No.	Waste	a second s	lered Landfill Waste Manage	ement	t		
econd Floor Kitchen North ame of Registered Waste Hauler SUPER, LLC			Ha		) No.		a second s		emen	t		
econd Floor Kitchen North ame of Registered Waste Hauler SUPER, LLC ty, State			Ha	auler ID	) No.	Waste TBD	G.R.O.W.S, City, State	Waste Manage	ement	t		
econd Floor Kitchen North ame of Registered Waste Hauler SUPER, LLC ty, State Haledon, NJ ompleted By (Print or Type)	Title	I	Ha	auler ID	) No.	Waste TBD Disposal Date	G.R.O.W.S,	Waste Manage		t		

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Date of Notification (1) 07/22/19	1 - 1301	6			of Building O Jersey Co				1			- <u>L</u>	<u> </u>	2013	1
Agencies Notified	Type Notification			Street	Address			aprica		AS	SBEST				L&
EPA DEP	Initial Amended				Church St,		FIOOF			Leanentama/waxes.com	L	K/E/	ISIN	Сі 	attining a gina analisi
X DOL	Amendmen	t #			Brunswick		08901								
DOH DCA	justification)				of Contact	mmu	inity Co	nital		Telepho			004		
	Cancellation	1			Jersey Co		37	apital		973 84	1 207	4 X	334		
Name of Facility Where A	Abatement is Takir	ng Place (	3)					Туре	e of Facility (4	)					
14-16 Finlay Street Address									School (K-12	2)	7725 0028				
14-16 Finlay								×	Subchapter Other (i.e. pr	8 (Other tha ivate & com	n K-12 mercia	) I buil	dings	, hom	es,
City (5) Newark					12			Squ	etc.) are Feet	# of Floo	rs	E	3ldg. /	Age	
County (6) Essex				County (STATE	Code (7) USE ONLY)	1 <u></u>		Curr Hor	ent Use (Prio Me	I r if being de	molishe	ed)			
Name of Monitoring Firm	Hired by Building	Owner (8	)	ASCI	M No.				atement Cont D PROFE		S				
Street Address							Street 6 WH		ess DOVE CO	URT					
City, State, Zip Code									Zip Code OD, NJ 08	701					_
Project Manager for Moni	toring Firm			Telepho	one No.		Teleph 732-6			Lice 120	nse No 0				
Start Date (10) 07/23/19		Schedul 07/26/		mpletion	Date (11)				HA Monitor	SIONAL	S				
Occupancy Status During	Abatement (Cheo	k Only O	ne)				Street								
Facility Closed/Vaca Abatement Performe Other – Describe:	ted During Entire ed Outside of Norn	Period of nal Facility	Abater y Hour	nent s			City, S	tate, Z	DOVE CO						
Scope of Work (Check All	That Apply)					-	LAKE	=WO	OD, NJ 08	701					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demoli				×	Mi Gl	III Containmer ni-Enclosure ovebag Proce on-Exempted	dure				P	
Location	-6		Locat										Abate	ement pe	
Asbestos-Containing I <u>TO BE ABA</u> In Facilit (13)	Material (ACM)	Use Ma	ed Sole intena todial 3 (12)	ely by nce/		s Cont iermal surfa	scription taining M systems cing, VA niscellan	lateria insul T, or	ation,	Amoun (Specify SF or LF	/	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A										ite	Ø
INTERIC	DR						Duct			15LF		x			
												_			
												-			_
Name of Registered Wast	e Hauler			IJDEP W			Yards		Name of R	egistered La	andfill				
NEWARK CARTING				lauler ID 4509	No. 3	of Was 3	ste		IESI						
City, State NEWARK, NJ					1 (A)	Dispos )7/26	sal Date /19		City, State BETHLE	HEM PA					
Completed by JOSEPH PERLSTEIN	N	Title OWN	IER			S	ignature				Date 07/2		9		

48536		NOTII (F	FICATIC	State of Ne IN OF ASB Int to NJAC	ESTOS A	ABATE	MEN	т	R		CE		₩ V	rint F
Date of Notification (1) 07/22/19	3		Name Plaza	of Building a Health A	Owner/O And Rel	perato hab	(2)			J	<del>UL-2</del>	6 2	019	and and a
Agencies Notified Type Notification	1			Address Rahway A	Ave					ASBE	STOS	CON	TRO	_ &
DEP     Image: Amended Amended Amendmen       X     DOL     Amendmen				tate, Zip Co beth, NJ,					Louis and a subsection of the			10111		
DOH justification DCA Cancellation	)	3		of Contact					100000000000000000000000000000000000000	hone N -354-1				
Name of Equility M/bara Abatament in Tali		l	FAC	ILITY INFO	ORMATIC	DN								
Name of Facility Where Abatement is Takin 456 Rahway Ave	ng Place (	3)					Тур	e of Facility (	108.0					
Street Address 456 Rahway Ave							×	School (K-1 Subchapter Other (i.e. p	8 (Other	than K comme	-12) rcial bui	Idings	, hom	es,
City (5) Elizabeth							Squ	_etc.) are Feet	# of F	loors		Bldg	Age	
County (6) Union				Code (7) USE ONLY)		_		ent Use (Pric Iding	or if being	demol	ished)			
Name of Monitoring Firm Hired by Building	Owner (8)	)	ASC	M No.				atement Con D PROFE						
Street Address						Street 6 WH		ess DOVE CC	URT					
City, State, Zip Code						City, S	tate, 2	Zip Code						
Project Manager for Monitoring Firm			Telepho	one No.		Teleph 732-6	one N	10.	L	icense 200	No.			
Start Date (10) 08/01/19	Schedule 08/05/*		npletion	Date (11)				HA Monitor						
Occupancy Status During Abatement (Chec						Street /		D PROFE	5510N/	ALS				_
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other – Describe:	Period of Anal Facility	Abaten Hours	nent		_			DOVE CO	URT					
Scope of Work (Check All That Apply)					_	LAKE	WO	OD, NJ 08	3701					
23  sf or  ≥3  lf ≥160 sf or ≥260 lf	provide the second	Renova Demolit				×	Mi	II Containme ni-Enclosure ovebag Proce n-Exempted	edure				e	
Provide and Other		Locati Iormal										Abate	ement pe	
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Use Mai	d Sole intenar odial S (12)	ly by nce/	(i.e. t	Desc os Contai thermal sy surfacin other mis	ystems ng, VA1	ateria insula , or	I (ACM) ation,	Amo (Spe SF or	cify	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A								<u> </u>		ate	ſe
INTERIOR						ping			100	)sf	x			
					Insu	lation			80:	sf	x			
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Name of Registered Waste Hauler		1.1.5.538	JDEP W auler ID	Creduced and the C	Cubic Ya of Waste			Name of R	egistered	l Landfi	11			_
VEWARK CARTING City, State		10.002	509		5 Disposal			IESI City, State						
NEWARK, NJ					08/05/1	9		BETHLE	HEM P	A				
Completed by	Title OWN	ER			Sigr	nature				1 2 3 3	ate 7/22/1	9		

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Date of Notification (1) 07/18/19	13010	n			of Building ( ervice Us		Operator	(2)			JUL-C	-0	2013	Transla
	Type Notification	Carried .			Address Route 54	17				ASB	ESTOS	CON	TRO	L&
DEP	Initial X Amended			City, St	ate, Zip Co	de				Landersteinen	LIVE	VOIN	3	willow Lawre
X DOL	Amendment Emergency	(including	_		II, NJ 077	731				1				
DOH DCA	justification) Cancellatior				ervice US	S				Telephone 732-367-				
Name of Facility Where Al	patement is Takir	n Place (	3)	FAC	ILITY INFO	RMAT	ION	Turn	o of Escility (					
2-6 Morris Street	Datement is Taki	iy Flace (	3)						e of Facility (	-				
Street Address 2-6 Morris Street	8							×	Other (i.e. p	2) 8 (Other than I rivate & comm		ildings	, hom	es,
City (5) Paterson								Squ	etc.) are Feet	# of Floors		Bldg. /	Age	
County (6) Passaic					Code (7) USE ONLY)			Curr	ent Use (Pric	or if being demo	olished)			
Name of Monitoring Firm H	lired by Building	Owner (8)		ASC	M No.		Name AAA	of Ab LEA	atement Con D PROFE	tractor (9) SSIONALS				
Street Address							Street 6 WH		ess DOVE CO	OURT				
City, State, Zip Code									Zip Code OD, NJ 08	3701				
Project Manager for Monito	pring Firm			Telepho	ne No.		Teleph 732-6			Licens 1200	e No.			
Start Date (10) 06/12/19		Schedul 08/12/		npletion	Date (11)				HA Monitor	SSIONALS				
Occupancy Status During							Street		oss DOVE CC					
Abatement Performed Other – Describe:	ed During Entire F I Outside of Norm	Period of / nal Facility	Abaten Hours	nent S			City, St	ate, Z	Zip Code					
Scope of Work (Check All	That Apply)						LAKE	2000	OD, NJ 08	3701				
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			(enova )emolit				×	Mi Gl	ni-Enclosure ovebag Proc				ē	
		10000	Locati Iormal	1000000								Abat	ement pe	
Location o Asbestos-Containing M <u>TO BE ABAT</u> In Facility (13)	aterial (ACM)	Use Ma	d Sole intenar odial S (12)	ly by nce/	(i.e. t	os Conta hermal surfac	cription aining M systems ting, VA1 hiscellane	ateria insul , or		Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A							<u> </u>		ate	"e
EXTERIO					ROOF	FING	AND FI	LAS	HING	23000SF	x			
INTERIO	R				Т	RANS	ITE PA	NE	L	5SF	X			
lame of Registered Waste	Hauler		H	JDEP W auler ID	No.	Cubic Y of Was			Name of R	legistered Land	fill			
City, State EWARK, NJ			04	4509		200 Dispos			City, State					
Completed by		Title				08/12/	19 gnature		REIHTE	HEM PA	Date			

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2h8539	N	(Pu	CATIO	tate of New	STOS ABA 60 and 12	:12	<b>9</b> ))	r		)			PERSONAL AND AND	W	
Date of Notification (1) 07/11/19	21			of Building O Properties	wher/Oper	ator	(2)			1	JUL	ć	0 2	019	
Agencies Notified Type Notification		1 2		Address	Street					ASBI	ESTO	SO	SING	ROL	. &
EPA Initial DEP Amended X DOL Amendment	#			ate, Zip Code Vindsor, N				1				tarong	0140	f 1999 - Antonio	
DOH Emergency (i justification) DCA Cancellation	ncluding	N	Name o	f Contact Properties						ephone 9-944					
Encol				ILITY INFOR	MATION				00	3-344	-4020	,			21 - C
Name of Facility Where Abatement is Taking The Jewelry Exchange, 1 Woodbrid		er					Туре	e of Facility (4	<i>.</i>						
Street Address 1 Woodbridge Center, Floor 2, 3 AN	ND 4			EMP.			×	School (K-12 Subchapter & Other (i.e. pr	B (Oth			buil	dings	, hom	es,
City (5) Woodbridge							Squa	etc.) are Feet	# of	f Floors		E	Bldg. A	\ge	
County (6) Middlesex				Code (7) USE ONLY)			Curr	ent Use (Prio	r if bei	ng dem	olisheo	3)			
Name of Monitoring Firm Hired by Building C	wner (8)		ASCN	A No.				atement Cont			0				
Street Address					1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		Addre	ess DOVE CO	URT						
City, State, Zip Code					City	, S	tate, Z	Zip Code OD, NJ 08						0	-
Project Manager for Monitoring Firm		T	elepho	ne No.	Tel	eph	none N 668-9	lo.		Licens 1200					
	Scheduled		pletion I	Date (11)	Nar	me	of OS	HA Monitor	SSIO		<i></i>				
Occupancy Status During Abatement (Check	Only One	)					Addre								
Facility Closed/Vacated During Entire Pr Abatement Performed Outside of Norma Other – Describe:	eriod of Ab al Facility H	ateme lours	ent				185-65-62	DOVE CO	URT		1010				
Scope of Work (Check All That Apply)					- LA	KE	EWO	OD, NJ 08	701						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novatio molitio				x	Min	II Containmer ni-Enclosure ovebag Proce n-Exempted	dure					9	
		ocatio											Abate	ement pe	
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Used Main Custo	rmally Solely tenanc dial Sta (12)	by ce/	(i.e. the	Descript Containing ermal syste surfacing, ther misce	g M ems VA	lateria insula T, or		(S	nount pecify or LF)		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A									<u>.</u>		ate	ē
INTERIOR				FLOO	RING AN			STIC	450	00SF	x				
INTERIOR					SPRAY	0	N		20	0 SF	X				
		-				_									
Name of Registered Waste Hauler			DEP W	No. o	Cubic Yards of Waste 00	S		Name of Re	egister	red Lan	dfill				
City, State IEWARK, NJ		040	.03	C	00 Disposal Da 7/31/19	ate		City, State BETHLE	HEM	PΔ					_
Completed by OSEPH PERLSTEIN	Title OWNE	R	Ŧ.	0	Signat	ure					Date 02/14	4/1	9		_

Thu 1206	-0		L. L.	( parent	New Jo	I IN				Check	# 16	693		
UN-1002	М					TOS ABATEMENT 7 and 12:120-7	,		protection of the second					
Date of Notification	(1)	(Eursc				Owner/Operator			In	EC	In I	11	FF	F
7/22/2019			Hayl	ley	Orn	stein						<u>.</u>		
Agencies Notified	Type Notif	ication	Street	Addre	955					111	26	5 20	10	H ]]
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[]DEP	Noti:	fication	City, S	tate,	, Zip	Code								
[X] DOL	[]Amendo Noti:	ed fication				NJ,07042	-			SBEST	DS CO	ONTR	OL&	
[X] DOH []DCA	[]EMERGI	ENCY	Name of Havl			stein		Telephor	ne Number	Raillandoni Silvin en conar	Nacio de Artene m		ustatusten ander	
	[]Cance	llation												
					LITY I	INFORMATION		6	:			•		
Name of Facility When		nt is Taki	ng Place	a (3)			Type	of Facil	1ty (4)	1993				
Hayley Ornstei	L 11						-	]School	(K-12) ter 8 (Oth	or that	R-1	21		
Street Address								]Other (	i.e., priv	ate & d	onne	r-		
*							Smar	cial p	# of Flo		ldg.			
City		County			Com	nty Code (7)	bquar	6 1666	. 01 110		.ug.	ingo		
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Montclair		essex												
Name of Monitoring F: Owner (8)	irm hired I	by Buildin	g ASCM	No.		Name of Abate								
N/A						AZTECH M		ACTARCEN T	, 110.					
Street Address						Street Addres								
						86 Chris			•					
City, State, Zip Code	9					City, State, Montclai			42					
Project Manager for 1	Monitoring	na secondaria de la constante d	lephone /A	Numbe	ər	Telephone Num (973)744		00		License 003		ber		. Se
Scheduled Start Date	(10) Se	ched. Comp			(11)	Name of OSHA 1	Monito	r						
	19		10 19			N/A								
Month Day Ye Occupancy Status Dur: [X]Facility Clos	ear ing Abatem sed/Vacated	ent (Check	only on	Year ne) riod		Street Addres	s							
of Abatement [ ]Abatement Per Hours - Descr	formed Out	urs Descri	ipt»		Y	City, State,	Zip Co	de						
[]other - Descr			/ Descrij	pt»										
Scope of Work (Check [X]>3 sf or			X]Renova	ation		[ ]Full [X]Mini-			th Negativ	e Press	ure			
[X]25 SI OI []2160 sf o			]Demoli			[X]Glove	bag Pi	cocedure	100/2					
			Is			[]Non-F	riable	Procedu	lre	Ab	atem	ent 1	ype	
Location	of		Location			Descriptio				R	_	EN	EN	
Asbestos-Con Material (			Used Solely			Asbestos-Con Material (		g	Amount (Specif	E	1	CA	CL	
TO BE ABA			By Main-			(i.e., thermal	. syste		SF or	0	7	PIS	o s	
In Facil: (13)	ity	) C	ustodial			sulation, surf	0.00 702		LF)	A	D	UL	UR	
(13)		Yes	and the second se	N/A							_		E	
Basement			X		Pipe	Insulati	on		10 LF	X				
											+			
Name of Registered W AZTECH MANAGE		TNC	JDEP Was auler ID 7040		1000	pic Yards Waste 1.5		of Regi ci - S	stered Lan	dfill		<u> </u>		
City, State						sposal Date	1000	, State		PR - 0				
Montclair, NJ	07042				0	8/12/19	B	conx,	NY, 104	74			100 M 100 M	
Completed By (Print		Title				Signature	1	.1.	Dain	Date				
Constantine V:	ivian	Preside	ent			COR	sta	The	mar	7/2:	2/201	.9		

172 Montclair Ave	172	Montc	lair	Ave
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h3471923	N		ICATION	of New OF ASBE to NJAC 8	STOS	ABATE				EG		] []		
Date of Notification (1) 07/20/2019	58			Building C am Schw		Operator	(2)			JUL	26	201	9	
Agencies Notified Type Notificat	ion		Street Ad	ddress										-
EPA Initial										ASBEST			OL &	All House
X DEP Amender X DOL Amender				te, Zip Coo NJ 070				Luno	Contraction of the Astron	LIC	JEN5	NG	an constraint and a	er chana
Emerger	cy (including	-	Name of		17				Tel	ephone Nu	Imper			
DOH justificati				am Schw	vartz				i ici	CDITOTIC INC	iniber			
			FACIL	LITY INFO	RMATI	ON								
Name of Facility Where Abatement is Ta House	aking Place (3)	)					personal line	of Facility (						
Street Address								School (K-1 Subchapter		er than K-	12)			
							×	Other (i.e. p				dings	home	es,
City (5)							Squa	etc.) re Feet	1000	f Floors	1.11	Bidg. A	lge	
Clifton			County	rado (7)			N/A	nt Lloo (Driv	N/	2504		J/A		
County (6) Passaic			County C (STATE U	ISE ONLY)			Hou	nt Use (Pric se	or ii be	ng demon	sneu)			
Name of Monitoring Firm Hired by Build N/A	ng Owner (8)		ASCM	l No.				tement Con ement, In		(9)				
Street Address							Addre							
								gren Aver	nue					
City, State, Zip Code								ip Code J 07512						
Project Manager for Monitoring Firm			Telephor	ne No.			hone N 34586			License 01311	No.			
Start Date (10) 08/02/2019	Schedule 08/03/2		mpletion [	Date (11)				A Monitor ement, In	c.	1				
Occupancy Status During Abatement (C	heck Only On	e)					Addres							
Facility Closed/Vacated During Ent Abatement Performed Outside of N Other – Describe: Occupied	ire Period of A Iormal Facility	bater Hour	ment s			City, S	State, Z	gren Aver	nue					
Scope of Work (Check All That Apply)						loto	wa, N	J 07512						
$\boxed{X}$ ≥3 sf or ≥3 lf $\boxed{2}$ ≥160 sf or ≥260 lf		enova emoli				>	Mir Glo	I Containme hi-Enclosure ovebag Proc	e cedure	100000 1000000				
	10	Locat	ion			-	1 110	n-Exempted	1 ( ) ai				ement	t
Location of	N	lorma	lly		De	scriptior	1 of					Т	/pe	
Asbestos-Containing Material (ACM <u>TO BE ABATED</u> In Facility (13)	Mai	intena	Staff?		os Cont thermal surfa	taining M system cing, VA miscellar	Materia s insula AT, or		(3	amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A										te	
Basement		Х			Pipe	Insula	ation		4	15 LF	X			
											_	-	-	-
												-		$\vdash$
Name of Registered Waste Hauler Atlantic Carting		H	NJDEP W Hauler ID	and the second sec	Cubic of Wa TBD	Yards ste		Name of Grand (		ered Landf al	) )	_	1	
City, State Wayne, NJ						sal Date	)	City, State Pen Arg		A		1		
Completed by Ned Joksimovic	Title Proje	ct M	anager		S	Signature	e f	TN .			)ate )7/20/	2019	,	

Print Form

410118692	1	NOTIF (P	ICATION	ate of Nev OF ASB to NJAC	ESTOS	ABATE	MEN	т	DE	C	E		V	nt Forr
Date of Notification (1) 07/20/2019 JAN 1305	7			f Building Brook	Owner/	Operator	(2)			JUL	2	62	2019	
Agencies Notified Type Notification			Street A	ddress					ASB	ESTC	) S (		TRO	R
X   EPA   X   Initial     X   DEP   Amended		-	City Sta	ate, Zip Co	de							SINC		- 0
X DOL Amendment		_		away, N		54								
DOH Emergency ( justification) DCA Cancellation				f Contact Brook					Telenhono	NJ				
			FAC	LITY INFO	ORMAT	ION			<u> </u>		-			
Name of Facility Where Abatement is Takin House	g Place (3	5)					Тур	e of Facility (4	•)					
Street Address							×	Other (i.e. pr	2) 3 (Other than H ivate & comme		ouild	lings,	home	es,
City (5) Piscataway								etc.) Iare Feet	# of Floors N/A			dg. A /A	ge	
County (6) Middlesex				Code (7) USE ONLY)			Cur		r if being demo	olished				
Name of Monitoring Firm Hired by Building ( N/A	Owner (8)		ASCN	/I No.			of At	atement Cont atement, Inc	50.00					
Street Address						Street 11 R		ess ngren Aven	ue					
City, State, Zip Code								Zip Code NJ 07512						
Project Manager for Monitoring Firm			Telepho	ne No.		Teleph 9733			Licens 0131			te (minis		
Start Date (10) 08/01/2019	Schedule 08/02/2		npletion	Date (11)				SHA Monitor Itement, Inc	).					
Occupancy Status During Abatement (Chec	k Only On	e)				Street								
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: Occupied	Period of A nal Facility	baten Hours	nent S			City, S	tate,	Tip Code	ue					
Scope of Work (Check All That Apply)						1010	wa,	NJ 07512						
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>		enova emolit				×	F M G	lini-Enclosure lovebag Proce	nt with Negativ edure (*) and Non-Fi				0	
	Is	Locati	ion									Abate	ement	
Location of Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Use Mai	lormal d Sole intenar odial S (12)	ly by nce/		tos Con therma surfa	scription taining M systems cing, VA niscellar	lateri s insu T, or		Amount (Specify SF or LF)		Removal	Repair	e Encapsulate	Enclosure
	Yes	No	N/A								a	-	late	re
Crawl Space		Х		Duct	Insula	ition ( v	vrap	& cut)	260SF	2	x			
Name of Registered Waste Hauler Atlantic Carting		H	IJDEP W lauler ID 6085		Cubic of Wa TBD	Yards ste		Name of R Grand C	egistered Lan entral	dfill				
City, State Wayne, NJ						sal Date		City, State Pen Arg						
Completed by Ned Joksimovic	Title Proje	ct Ma	anager		S	Signature		FN		Date 07/2	0/2	019		

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CK21109		5		tCATIO ursuant	tate of Nev N OF ASB t to NUAC	ESTÓS B:60 ai	ABATE	0)	T		<u> </u>	GU		<u> </u>		
Date of Notification (1) 07/20/2019	v 1309	55			of Building ( Ins Institu				/		J	UL a	26	201	Э	
Agencies Notified	Type Notification	0			Address		udaan				ASBE	STOS	CO	NTR	OL 8	
× EPA × DEP × DOL	X Initial Amended		-		tle Point		uason					LICE	MSI	NG	THOMAS STAN	c-means-rea
	Amendment Emergency		_		ken, NJ 0	7030	)									
DOH DCA	justification) Cancellatior			Name o Kevin	of Contact Klich					1.1.1	lephone 51-655					
				FAC	ILITY INFO	RMAT	TION									
Name of Facility Where Ab Burchard Building, Ba								Typ	e of Facility	12)						
Street Address 1 Castle Point on Huc	dson								Subchapter Other (i.e. p etc.)	r 8 (Oth private	er than & comn	i K-12) nercial	build	lings,	home	es,
City (5) Hoboken								N/A		N/.	V.52		N	ldg. A /A	.ge	
County (6) Hudson					Code (7) USE ONLY)				rent Use (Pri USE	or if be	ing den	nolishe	d)			
Name of Monitoring Firm H Briggs Assocites	ired by Building	Owner (8)	)	ASCN 0004	VI No. 1				atement Con atement, Ir		. (9)					
Street Address 3 Crosswicks Street							Street 11 R		ess ngren Ave	nue						
City, State, Zip Code Bordentown, NJ 0850									Zip Code NJ 07512							
Project Manager for Monito Michael Hoodak	ring Firm			Telepho 609-29	one No. 98-5520		Teleph 9733				Licen 0131	se No. I 1				
Start Date (10) 08/03/2019		Schedul 08/04/		npletion	Date (11)				SHA Monitor Itement, In	IC.						
Occupancy Status During A				- 1424 - 1444 - 1444 - 144	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		Street		ess ngren Avei							
Abatement Performed Other – Describe: Occ	Outside of Norn	Period of nal Facility	Abaten y Hours	nent S			City, S	tate,	Zip Code NJ 07512	nuc						
Scope of Work (Check All T	hat Apply)						1010	wa, i	113 07 512							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit				×	M G	ull Containm lini-Enclosure lovebag Pro on-Exempted	e cedure	5				9	
Location of	£		: Locati Normal			De								100 C	ement	
Asbestos-Containing Ma <u>TO BE ABAT</u> In Facility (13)	aterial (ACM)	Ma	ed Sole iintena todial \$ (12)	nce/		os Con herma surfa	escription Itaining M I systems acing, VA miscellan	Aateria s insu T, or	lation,	(5	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
Description		Yes	No	N/A						_					te	
Basement Roor	n #003		Х				VAT			30	00 SF		X			
Name of Registered Waste	Hauler			JDEP W	laste	Cubio	Yards		Name of	Docisio	rodle	odfill				
Atlantic Carting			H	auler ID	10.00	of Wa			Grand (							
City, State Wayne, NJ						Dispo TBD	sal Date		City, State Pen Arg		4					
Completed by Ned Joksimovic		Title Proje	ect Ma	anager		5	Signature	0	FN			Date 07/2		019		

Agencies Notification (1) 07/19/2019 DAV BO50 Agencies Notified Type Notificatio EPA Initial DEP Initial DOL Initial	n	NOTI (	Pursuan Name	State of NOF NOF ASI to NJAC	BESTOS 8:60 an	АВАТЕ d 12:12	0)	т		r C			M	
07/19/2019     Type Notificatio       Agencies Notified     Type Notificatio       X     EPA     Initial       DEP     Initial	Ч n					Operator	. /01		11111					
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X DEP Amended			Street	Address stle Poin					AS	SBEST	281		TRO	1.8
				tate, Zip C		lason			https://www.eserates			isina(		L 0(
Emergency		g	A CONTRACTOR	ken, NJ										
DOH justification		-	1 1000000 201	of Contact NKlich					Telepho 551-6					
Name of Facility Where Abatement is Taki	ing Place	(2)	FAC	ILITY INF	ORMATI	ON								
Burchard Building Room 212	ng Place	(3)					1	e of Facility (4						
Street Address 1 Castle Point on Hudson								School (K-12 Subchapter Other (i.e. pr	8 (Other the	an K-12) mmercia	) I bui	ldings	, horr	nes,
City (5) Hoboken							Squ N/A	etc.) lare Feet A	# of Floo N/A	Ors		Bidg. /	Age	
County (6) Hudson			County (STATE	Code (7) USE ONLY	0		Curr Bui	rent Use (Prio rchard Build	r if being de ding	emolishe	ed)			
Name of Monitoring Firm Hired by Building Briggs Associates	Owner (8	5)	ASCI 0004	M No. 4				atement Cont Itement, Inc						
Street Address 3 Crosswicks Street						Street 11 R	100010000000000000000000000000000000000	ess ngren Aven	ue					
City, State, Zip Code Bordentown, NJ 08505						City, S	tate, i	Zip Code NJ 07512						
Project Manager for Monitoring Firm Michael Hoodak			Telepho 609-2	one No. 98-5520		Teleph 9733			Lice 013	ense No 311				
Start Date (10) 08/03/2019	08/04/	2019		Date (11)				HA Monitor tement, Inc	I					
Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire	Period of	Abater	ment			Street / 11 Ro		ess Igren Avenu	ue					
Abatement Performed Outside of Norr Conter – Describe: Occupied	nal Facilit	y Hour	S					Zip Code NJ 07512						
Scope of Work (Check All That Apply)						10100	va, 1	10 07 012						
≥3 sf or ≥3 lf           ≥160 sf or ≥260 lf		Renova Demoli				××	Mi Gl	II Containmer ni-Enclosure ovebag Proce	dure					
	15	s Locat	ion					on-Exempted (	(*) and Non	1-Friable			e emeni	
Location of	1	Norma ed Sole	lly	10		cription				ŀ		Ту	rpe	
Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Ma	aintena stodial \$ (12)	ince/ Staff?	Asbesi (i.e.	tos Conta thermal s surfaci other mi	systems ing, VAT	insul , or	ation,	Amoun (Specifi SF or LF	y	Removal	Repair	Encapsulate	Enclosure
Durahard D. H.H.	Yes	No	N/A		1.1.1.1.1.1.1						FE		ate	ē
Burchard Building Rm # 212		X			Pipe I	Insulat	ion		25 LF		X			
		11/23/2	IJDEP W		Cubic Y	ards		Name of Re	egistered L	andfill	1		-	
Name of Registered Waste Hauler		H	lauler ID	No.	of Wast			Grand Ce		- Control				
		26	6085		TBD			Gianu Ce	sinual					
Name of Registered Waste Hauler Atlantic Carting City, State Nayne, NJ		2	6085		TBD Disposa TBD	al Date	e.	City, State Pen Argy						

MCK			NOT				SBEST	rsey OS ABA 30 and 5:1		ne (	ρĒ	U V	1 E	
Date of Notification (1)					Nar	ne of Buildi	na Own	er/Operator	(2)					11
	18 /	19	)			orePoint			(-/		11.26	20:	G	
Agencies Notified	Type Notific	cation			Stre	et Address							4	1 Company
🖾 EPA	🗌 Initial				1 1 1 1 1 1 1			rpenter Fr	reeway, Suite	1650	NGBULUMUMAINS	-	anautori a l'al	James
🖾 DOLWD	Amende	ed				, State, Zip		i ponter i i	comay, ounc	ASHES			IOL 8	
	Amendr			-		ving, Tx 7				Record of the second se	LICENS	11453 		
	Emerger		ncludin	g		ne of Conta								
(NJAC 5:23-8)	justificat				1.5		1.5-57.8			Telephone N				
		ation			J	on Lunds	ten			817-846-	6215			
					F.	ACILITY I	NFORM	ATION						
Name of Facility Where	Abatement is	Taking	g Place	e (3)					Type of Facility	/ (4)				
La Quinta									School (K-1	2)				
Street Address									Subchapter	8 (Other than k	(-12)			
265 Route 3 East									homes, etc.	private and com	mercial	buildin	gs,	
City (5)									Square Feet	# of Floors	1	Bldg. A	ane	-
Clifton, NJ 07011									35,000	12		45	ige	
County (6)				2.2.2	Co	unty Code (	(7)(STATE	USE ONLY)		rior if being den	aliahad			
Passaic							(1)(01/11	. USE UNLT	Current Ose (P	nor ir being den	lolished	)		
Name of Monitoring Firm	n Hirod by Puil	Idina (	Junos	(0)	ASCI	4.51-		C A1 .						
ATC Group Service		iuniy c	Jwner	(0)	ASU	VI INO.			ent Contractor (9	))				
	es LLC							N Restora	tion Inc					
Street Address							Stree	t Address						
3 Terri Lane, Suite	4						47	Foster Ro	ad					
City, State, Zip Code							City,	State, Zip C	ode					
Burlington, NJ 080							Sta	ten Island	1 NY 10309					
Project Manager for Mor	nitoring Firm			Te	lephon	e No.	Telep	hone No.		License No				
Jim Nuccio				6	609-38	6-8800	718	8-605-6256	5	00774				
Start Date (10)		Sched	luled C	Compl	etion D	ate (11)	Name	of OSHA N	Aonitor		T-Hurden I		_	
06 /27 /	19	C	)7 /	′ 1	5 /	19	Tes	stor Tech						
Occupancy Status Durin	a Abatement (	Check	conly	one)			Street	t Address						
Facility Closed/Vacat					ement				on Avenue					
Abatement Performed						escribe								
Time of Abatement: §								State, Zip Co						
Coope of Mede (Charles					S		LIC	NY 11101	1		-		_	
Scope of Work (Check a	iii that apply)							Eull Con	tainment with Ne	active Procesure				
$\boxtimes \ge 3$ sf or $\ge 3$ lf			🛛 Re	enova	tion			Mini-Enc		galive Flessule				
☐ ≥160 sf or ≥260 lf			🗌 De	emolit	ion				g Procedure					
			la	Loca	tion			Non-Exe	mpted (*) and No	on-Friable Proce	edure			
Location	h of			Norm					. 6		A	batem	ent T	уре
Asbestos-Containing		1)			lely by	Ashe		escription o	ot iterial (ACM)	Amount	70	Re	m	g
TO BE ABA	ATED				ance/	(i e		al systems		(Specify	Kemova	Repair	Encapsulate	Enclosure
IN Facil	ity		Cus	todiai (12	Staff?			facing, VAT		SF or LF)	val	.   ~	USC	Sur
(13)			Yes	No	1		other	r miscellane	ous)	1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 -			late	Ø
1 <sup>st</sup> Floor						Floor T	Tile			120 SF				
										120 36				
Name of Registered Was	ste Hauler					Waste	Cubic	Yards of	Name of Regis	stared Landfill		· [ 🖵		
Newark Carting					Hauler NJ-5	ID No.	Waste 15			ntral Sanitary	Landfi	11		
City, State					110-0		the second se	sal Date	City, State					
Newark, NJ								30/2019	Pen Argyl,	PA				
Completed By (Print or T	(vne)	Title					-		1 1/1	,,	Date			
Ralph Barnhardt	3207		roject	Mar	ager		3	signature	Ilm	2	Date	13	i	G

				m A		(mark)			[	F	rint Fo	rm
MILINON	-	NOTI	FICATIO	State of New Jers	ey		IN E C			$\mathbb{N}$		2
CUICK-	Inv#130	n = 0	Pursuai	nt to NJAC 8:60 a	id 12:12	0)						
Date of Notification (1)	7		Name	of Building Owner	Operato	r (2)		1 2	6	2019		
Agencies Notified	Tumo NatiGastian		M	1KE 170	1/1R	GSWORT		L (	. U .	2013	م مد	e.A
	Type Notification		Street	Address			Aggeg	TOS	000	007	1.2.	
EPA DEP	Initial		City, S	tate, Zip Code	1 11		ASBES	LICE	NSIM	G G		
DOL	Amendment #_ Emergency (ind	cluding	1	OUNT 17	dis	I NJ	08060	2				
	justification)	Juding	Name	of Contact, //	11	1 051	Telephone Nu					
	Cancellation		67//	LE / 10/1		SWORTH						
Name of Facility Where A		Place (3)			ION	Type of Facility	(4)					
RESIDER Street Address	TIAL.					School (K	-12)					
Olicer Address						Subchapte	er 8 (Other than K-1 private & commerc	2) ial bu	ildinas	. hom	ies.	
City (5)	<i>i</i> 1					etc.) Square Feet	# of Floors		Bldg.			
MOUNT HO	114					1500	# 01 P10015		blug.	Aye		
County (6)	1		County	Code (7) USE ONLY)		Current Use (P	rior if being demolisi	hed)	6	7.)		
Name of Monitoring Firm	Hired by Building Ow	por (8)				RESID	50-TIAL					
ATLAS GAL			ASC	M No.	Name	of Abatement Co		1722				
Streét Address		/			Street	Address	CONSTRU	G	100	n,	Sol.	
POBOK 110 City, State, Zip Code	645				P	Box	11587					
					Ćity, S	tate, Zip Code	2. 10.11			1191944		
Project Manager for Monit	oring Firm	T	Telepho	ne No	Teleph		A 11/16 License N	-				
BRIAN S	-		217	784-4693		7-7821- 4		88) 1	lő.			
Start Date (10)	Sc	heduled Cor	npletion	Date (11)	Name	of OSHA Monitor		20				
Occupancy Status During	Abatement (Check O	$\gamma - \delta - \delta$	19		01							
Facility Closed/Vacat			nent		Street /	Address						
Abatement Performe Other – Describe:	d Outside of Normal F	acility Hours	S		City, St	ate, Zip Code						
Scope of Work (Check All	That Apply)											
Stope of Work (Check Air ≥3 sf or ≥3 lf	пас дрруу	Z Panaur	tion		171							
≥160 sf or ≥260 lf	Ĺ	Renova			É	Full Containm Mini-Enclosur	ent with Negative P	ressu	re			
					12	Glovebag Pro	cedure d (*) and Non-Friabl	le Pro	codur	0		
		Is Locati	ion							ement		
Location of		Normal Used Sole			cription of			L	Ту	pe		
Asbestos-Containing M TO BE ABAT	TED	Maintenar Custodial S	nce/	Asbestos Conta (i.e. thermal			Amount (Specify	R	_	Enc	ш	
In Facility (13)		(12)	sian?	surfac	ing, VAT	, or	SF or LF)	Remova	Repair	Encapsulate	Enclosure	
		Yes No	N/A	ouler in	nocenane	ous)		val	lir	ulate	ure	
BASEMEN,				EL C	-,1		6-					
1 13 56 . 00 1				FLOOR	1112	2	700 35	é				
Name of Registered Waste	Hauler	N	JDEP W	aste Cubic	ards	Name of	Registered Landfill					
FRYMAR CI	NO-STRUCT		auler ID	No. of Was					/			
City, State	7	1000 0	036	757 / Dispos	al Date	City Stat	TERN BE	RK	5	Ċ	-	
PHIA P	A			8-9.	19		PDSBORD		P,	7.		
Completed by	Deta T	itle	20	Si	gnature	2	// Date	е	- )	~		
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CKI588 IN #	- (3	)@° NOT	IFIGAT	State of N ION OF AS	BESTO	SABATEME	NT T	NEC	E	7 11	VI [	E
Date of Notification (1) 07/16/2019			Nam	e of Buildin	g Owner	/Operator (2) of Education			Chec	k No		-1
Agencies Notified Type Notification				et Address Eagle Roo	k Aven	ue		JUL JUL	26	20	19	
Image: DEP     Image: Amended       Image: DOL     Amendment amendmen	#		City, Wes	State, Zip C t Orange,	Code New Je	ersey 07052	Prostanting of the second s	ASBESTO	DS CC	) MTF	IOL &	2
☑ DOH     justification)       ☑ DCA     □ Cancellation	including			e of Contac ert Csigi	t			Telephone Nur 973-669-540	nber	a nor Process	allemand even	Notice an
Name of Facility Where Abatement is Taki West Orange BOE Administration Buil	ng Place	(3) /areh/		CILITY INF	ORMAT	TION Type of F	acility (4)					
Street Address 179 Eagle Rock Avenue						Scho	ol (K-12) hapter 8 (Other the (i.e. private & con	an K-12) nmercial buildin	igs, ho	mes,	etc.)	
City (5) West Orange, New Jersey 07052						Square Fe 15000	eet	# of Floors 1	B	dg. A )+		
County (6) Essex			Count (STAT	y Code (7) E USE ONLY	0	Current U BOE Adr	se (Prior if being o ministration Build	lemolished) ding - Wareho	use	2000 - 50 70		
Name of Monitoring Firm Hired by Building AHERA Consultants, Inc.	Owner (8	3)	AS0 000	CM No. 057		Name of A Lilich Cor	batement Contrac poration	tor (9)				
Street Address P.O. Box 385						Street Add 246 Unior	ress n Boulevard					
City, State, Zip Code Oceanville, New Jersey 08231						City, State, Totowa, N	Zip Code Jew Jersey 0751	12		-11-100A		
Project Manager for Monitoring Firm John Smoyer				ione No 552-1833		Telephone 973-225-8	No. 3400	License No 01104	ı.			
Start Date (10) 08/08/2019	08/10/2	2019	mpletior	n Date (11)		Name of O Iris Enviro	SHA Monitor nmental Labora	tories, LLC				
Occupancy Status During Abatement (Chec Facility Closed/Vacated During Entire Per Abatement Performed Outside of Norma Other – Describe:	eriod of A	hatem	ent			Street Addr 2333 Rout City, State, Union, NJ	te 22 West Zip Code					
Scope of Work (Check All That Apply)							07083					
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>		Renova Demolit		Ψ.			ull Containment wi lini-Enclosure Slove Bag Procedu n-Exempted (*) ar	ire / Limited Co	ntainm	ent A	&Tent	t.
Location of	1	Locat Normal ed Sole	lly			Description of		Amount (Specify SF of LF)		To Lucian	ment e	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma Cus	intena todial \$ (12)	nce/ Staff?	Asbes therr	mal syste	taining Mater ems insulatio VAT, or er miscellaneo	•		Removal	Repair	Encapsulate	Enclosure
dministration Building - Warehouse	Yes X	No	N/A	Pipe Insulat	tion			10 LF			te	CD
		-							^			_
												_
Name of Registered Waste Hauler		N	JDEP W	/aste	Cubic Y	ards	Name of Regist	iorod Landfill			2	
Lilich Corporation		H	auler ID 18724	1.7	of Wast		Fairless Land					
City, State					Disposa 08/10/2		City, State					
Totowa, New Jersey Completed by					00/10/2	2019	Morrisville, PA	4				

ASB-41 (R-06-08)

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Inv #13048	Ś	NC	DTIF		ON OF A	New Jersey SBESTOS ABA JAC 8:60 and 5:	TEMENT 16)	Ċ.	14	22	12	10
Date of Notification (1)				Na	me of Build	ling Owner/Operator	(2)	TOPA	<del>à 17</del>		<del>7.0</del>	FT
07 /15		19				tgomery St. LLC.		D) <u>EC</u>		]	V	
Agencies Notified Type No		n.		Str	eet Address	S					-	11
					80 Hamilt	on Ave Suite 101		11 10 .11	L 20	5 21	110	
	nded ndment :	н			, State, Zip				<u> </u>	1 61	10	lh
					Trenton N		annt		This was been been	-		-
	ication)	inciua	ing		me of Conta			ASBES	TOSC	ONT	ROL	. &
					lichael Ke			Telephone Nu 609-656-8	PERMANANTA COL	MNG	10.605 NP-20	Dalation (1977)
				F	ACILITY	NFORMATION		1				
Name of Facility Where Abatement	is Takir	ng Pla	ce (3)	)			Type of Facility	(4)				
Office Building							School (K-12					
Street Address							Subchapter 8	:) 3 (Other than K-	12)			
70 N. Montgomery St.							Other (i.e., pr homes, etc.)	rivate and comm	nercial I	buildi	ngs,	
City (5)							Square Feet	# of Floors	I	Bldg.	Ane	_
Trenton							3,000	6	1	191		
County (6)				Co	unty Code (	(7)(STATE USE ONLY)	Current Use (Pri	Or if heing demo	lichod		5	
Mercer							Office Build		Jisiicu)			
Name of Monitoring Firm Hired by E	Juilding	Owne	r (8)	ASCI	M No.	Name of Abateme		ing				
Finog Environmental Inc.							n Environmenta		~			
Street Address				1		Street Address	I Environmenta	al Service, LL	.C.			
617 Stokes Rd Suite 4-318												
City, State, Zip Code						958 Jackson						
Medford, NJ 08055						City, State, Zip Co						
Project Manager for Monitoring Firm			1-			Mays Landing	g, NJ 08330					
speechanager for Monitoring Film	66			elephone		Telephone No.		License No.				
Start Date (10)	L Cale				5-2211	609-561-1901		01158				
/24 /19					ate (11)	Name of OSHA M						
				10 /	19	Graham-Tech	Environmenta	I Services, LL	.C.			
Occupancy Status During Abatemen	t (Check	k only	one)			Street Address						
Facility Closed/Vacated During E	ntire Per	riod of	Abat	ement		958 Jackson F	٦d					
Abatement Performed Outside of Time of Abatement: 7AM-11:30	Normal			urs - De AM	scribe	City, State, Zip Coo	de					
		PIV				Mays Landing	, NJ 08330					
Scope of Work (Check all that apply)						-						
$\boxtimes \geq 3$ sf or $\geq 3$ lf		Re	enova	tion		Full Conta     Mini-Enclo	inment with Nega	tive Pressure				
□≥160 sf or ≥260 lf		De				Glovebag	Procedure					
		1.				Non-Exem	pted (*) and Non-	Friable Procedu	Jre			
Location of			s Loca Norm			-			Ab	atem	ent T	vpe
Asbestos-Containing Material (AC	:M)			lely by	Asbes	Description of stos Containing Mate	rial (ACM)		R	R	m	m
TO BE ABATED				ance/ Staff?	(i.e.	, thermal systems in	sulation.	Amount (Specify	em	Repair	nca	nclo
IN Facility (13)		Cus	(12			surfacing, VAT, c	or	SF or LF)	Removal	Ŧ	Ipsu	Enclosure
(10)	Ī	Yes	No		1	other miscellaneou	(au	0.000 M 0.000 M 0.000 M	-		Encapsulate	ſe
Basement					Pipe Ins	ulation		460LF				
Basement					Pipe Fit			250LF				
Basement					Breechi	ng		130SqFt				
				Π				issoqri				
ame of Registered Waste Hauler					Nasta	Cubio Vende d						
Graham-Tech Environmental	Service	е	10.000	auler I	D No.	Waste	Name of Register Pioneern Cro					
City, State		1000		00345		30 Disposal Date		Josniy				
						- oposal Date	City, State					
Completed By (Print or Type)	Title					-	1 /					
Vernice Graham		o i d -	mt			Signature		Da	te	*.co-		
SB-41	Pre	eside	110			VO MAR	CTV /	1.0 -	7-	10	- [	4
					the second s	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 162	1 / N	6 1	e	6	

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

ner	# 13		NOTI	FICAT Pursu	ION OF A	AC 8:60 a	ABATEMEN		DEC		********	V	
Date of Notification (1) 07/22/2019				Nam	e of Buildi	ing Owner Schools	Operator (2)		Check No.	<del>L 2</del> 1597	6 2	2019	
Agencies Notified Type Noti					et Address Clifton A				ASBES	TOS	DON	TRO	1. &
I DEP Am	iai hended endment # _ 2	>		City, Clifto	State, Zip	Code Jersey 07	013		<u> </u>	JCEN	SINC	3	isotropus
DOH Eme	ergency (inclu ification)	iding		Name	e of Conta	ict			Telephone Nu	mber		-	
⊠ DCA □ Can	cellation				archione				973-470-227	6			
Name of Facility Where Abatemer Clifton High School	nt is Taking P	lace (3	)	FA	CILITYIN	FORMAT	Type of F	acility (4)					
Street Address 333 Colfax Avenue							Scho	ol (K-12) hapter 8 (Other t (i.e. private & co	han K-12) mmercial buildir	ngs, ho	mes,	etc.)	i.
City (5) Clifton, New Jersey 07013							Square Fe 30,000		# of Floors	B	ldg. A )+		
County (6) Passaic				Count (STAT	y Code (7 E USE ONI	) LY)	Current Us	se (Prior if being High Sch	demolished)				
Name of Monitoring Firm Hired by AHERA Consultants, Inc.	Building Own	ner (8)			CM No.		Name of Al	batement Contra					
Street Address P.O. Box 385				_			Street Addr 246 Union	ress Boulevard					
City, State, Zip Code Oceanville, New Jersey 08231							City, State, Totowa, N	Zip Code lew Jersey 075	512				
Project Manager for Monitoring Fire Domenic D'Errico	m				ione No 352-1833	}	Telephone 973-225-8		License No 01104	D.			
Start Date (10) 07/18/2019	08/	/09/20	19	npletior	n Date (11	)	Name of OS Iris Environ	SHA Monitor nmental Labor	atories, LLC				
Occupancy Status During Abateme			5	3104			Street Addre 2333 Rout	ess e 22 West					
Facility Closed/Vacated During     Abatement Performed Outside     Other – Describe: Occup	of Normal Fa pied 6 am -	cility H	ours	ent			City, State, Union, NJ	Zip Code					
Scope of Work (Check All That App	oly)												
<ul> <li>□ ≥3 sf or ≥3 lf</li> <li>⊠ ≥160 sf or ≥260 lf</li> </ul>	1.2		nova molit					ull Containment ini-Enclosure love Bag Proced on-Exempted (*)	ure / Limited Co	ntainm	ent 8	Tent	t
		ls L	ocati	on				m-Exempted ( )	Amount			nent	1
Location of Asbestos-Containing Material (A <u>TO BE ABATED</u> In Facility (13)		Used Main Custor	tenar dial S (12)	ly by nce/ staff?	Asb the	estos Con ermal syste	Description of taining Mater ems insulation VAT, or r miscellaneo	ial (ACM) (i.e. n, surfacing,	(Specify SF of LF)	Removal	Typ Repair	e Encapsulate	Enclosure
ooms S 112, 114, 116	1		No X	N/A	Cinder Blo	ock Mortar			600 SF	Х	-	Ø	
oms S 112, 114, 116		;	x		9 x 9, 9 x	9, & 12 >	12 Floor Tile	es & Mastic	2375 SF	X	-		$\vdash$
llway Adjacent to S 112, 114, 116			X				ar (Spot Rem		10 SF	X	-		-
309			X		9x9 Floor	r Tile & M	astic under 1	2 x 12 Tiles	1250 SF	Х			-
ep Rooms for N 309			X		9x9 Floor	r Tiles & N	lastic		600 SF	Х			
		3	X		Glue Dot	S			30 SF	x			
			/		Glue Dot	s (Non Fri	able Method	)	10 SF				
om N313		,							· · · · · · · · · · · · · · · · · · ·		10 C 1		
om N313 ame of Registered Waste Hauler	N co/DBA A		NJ Ha	IDEP W auler ID	l /aste No.	Cubic Y of Wast		Name of Regi					
om N313 lame of Registered Waste Hauler SBESTOS TRANSPORTATIO	N co/DBA A		NJ Ha	DEP W	l /aste No.	of Wast 80 Disposa	e I Date	MINERVA E	NTERPRISE,	LLC			
ooms S112, S114, S116 oom N313 Name of Registered Waste Hauler ASBESTOS TRANSPORTATIO City, State YAPHANK, NEW YORK Completed by Adriana Olejarova	N co/DBA A	TC	NJ Ha S	IDEP W auler ID	l /aste No.	of Wast 80 Disposa 08/09/2	e I Date	MINERVA E	NTERPRISE,				

*	<b>*</b>	٩		ICATION		ESTOS	ABATEMENT	۲ <u></u>		-		ور من المالة	- Interior	
Date of Notification (1) 07/05/2019				Name of	to NJAC f Building Public Sc	Owner/(	Operator (2)		E G	G		$\mathbb{V}$	E	T
E EPA	Type Notification Initial Amended Amendment #_	1		City, Sta	ddress fton Aver ate, Zip Co New Jer	de	013			2 (	Acapana	Bath at		
DOH DOH	<ul> <li>Emergency (inc justification)</li> <li>Cancellation</li> </ul>	luding		Name or Al Marc	f Contact chione				ASBEST lephone Ni 3-470-22	limber.			11 &	
Name of Facility Where Clifton High School	Abatement is Taking	Place (3	)	FACI	LITY INFO	ORMAT	Type of Faci		ž					
Street Address 333 Colfax Avenue							School (	K-12) oter 8 (Other than e. private & comm	K-12) nercial build	tings, t	nome	es, e	tc.)	
City (5) Clifton, New Jersey (	07013						Square Feet 30,000	# 0 3	of Floors		Bldg 50+	. Ag	e	
County (6) Passaic	5				Code (7) USE ONLY)			(Prior if being der High Schoo	ol					
Name of Monitoring Fin AHERA Consultants		wner (8)		ASCN 0005			Lilich Corpo		r (9)					
Street Address P.O. Box 385							Street Addres 246 Union E							
City, State, Zip Code Oceanville, New Jers	•						City, State, Z Totowa, Ne	ip Code w Jersey 07512	2			\$		
Project Manager for Mo Domenic D'Errico	onitoring Firm			Telepho 609-65	ne No 52-1833		Telephone N 973-225-84		License 01104	No.				-
Start Date (10) 07/18/2019	1	08/09/20	019	npletion	Date (11)		Name of OSH Iris Environi	A Monitor mental Laborato	ories, LLC					
Occupancy Status Duri Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire Pen ned Outside of Normal	riod of At I Facility I	ateme Hours	ent			Street Addres 2333 Route City, State, Z Union, NJ 0	22 West						
Scope of Work (Check □ ≥3 sf or ≥3 lf ⊠ ≥160 sf or ≥260 lf	All That Apply)		lenova Vemolit				□ Mir □ Glo	II Containment wi ni-Enclosure ove Bag Procedur I-Exempted (*) an	e / Limited	Conta	inme		Tent	t
Locatio	on of	1	Locat Iorma	lly			Description of		Amount (Specify SF of LF)		Ab	ater Typ	nent e	
Asbestos-Containir <u>TO BE A</u> In Fac (13	ig Material (ACM) BA <u>TED</u> cility	Ma Cust	d Sole intena todial ( (12)	nce/ Staff?		mal sys	ntaining Materia tems insulation VAT, or ter miscellaneor	, surfacing,			Removal	Repair	Encapsulate	Enclosure
Rooms S 112, 114, 116		Yes	No X	N/A	Cinder Blo	ck Morta	ir		600	SF	X			$\left  \right $
Rooms S 112, 114, 116			X		9 x 9, 9 x	9, & 12	x 12 Floor Tile	s & Mastic	2375	SF	X			$\square$
Hallway Adjacent to S 1	12, 114, 116		X		Cinder Blo	ock Mo	rtar (Spot Remo	oval)	10	SF	x			
N 309			Х		9x9 Floor	Tile & I	Vlastic under 1	2 x 12 Tiles	1250	SF	x			$\square$
Prep Rooms for N 309			Х		9x9 Floor	Tiles &	Mastic		600	SF	x			$\square$
Name of Registered W Lilich Corporation	aste Hauler			JDEP W Jauler ID 18724		Cubic of Wa 30	: Yards iste	Name of Regist		fill				
City, State Totowa, New Jersey							sal Date 9/2019	City, State Morrisville, PA	4					
Completed by Adriana Olejarova		Title Pre	esider	nt			Signature	<u>j</u>		Date 07/05	5/20	19		

	= 130700	TIFICATI	State of N ON OF AS	lew Jerse BESTOS C 8:60 ar	ey ABATEMENT nd 12:120)	n n e (	GEIN	/ E	In	Π	
Date of Notification (1) 07/22/2019		Name	of Buildin	g Owner/	Operator (2) of Education	IN		ck No.	5	19	
Agencies Notified Type Notificatio	n		Address 18th Ave	enue			<del>UL 2-6-2</del> 0	19	head	1	
□     EPA     ⊠     Initial       ⊠     DEP     □     Amendeed       ⊠     DOL     Amendmeded	ent #	City, S Wall,	State, Zip ( New Jers	Code sey 0771	19	ASBE	STOS CONT LICENSING	70L &			
☑     Emergence       ☑     DOH     justification       ☑     DCA     □			of Contac rt Roman				Telephone Nur 732-556-202				
Name of Facility Where Abatement is T	aking Place (3)	FA	CILITY IN	FORMAT	ION Type of Fa	cility (A)					
West Belmar Elementary School					_ D School						
Street Address 925 17th Avenue					□ Subcha	pter 8 (Other that i.e. private & con	an K-12) nmercial buildi	ngs, hor	nes,	etc.)	
City (5) Wall, New Jersey 07719			24		Square Fee 2500		t of Floors	Blo 50	lg. A	ge	
County (6) Monmouth		County (STATE	Code (7) USE ONL	Y)	Current Use	e (Prior if being d Elementary Sci	emolished) hool		101103		
Name of Monitoring Firm Hired by Build Partner Engineering and Science Ir	ing Owner (8) IC.	ASC	CM No.		Name of Ab Lilich Corp	atement Contract	tor (9)				
Street Address 611 Industrial Way West					Street Addre 246 Union						
City, State, Zip Code Eatontown, New Jersey 07724					City, State, Z Totowa, Ne	Zip Code ew Jersey 0751	2				
Project Manager for Monitoring Firm Brian Nemetz			one No 80-1700		Telephone N 973-225-84		License No 01104	).			
Start Date (10) 08/05/2019	Scheduled 08/10/2019	Completior	n Date (11)	)	Name of OS Iris Environ	HA Monitor mental Labora	tories, LLC				
Occupancy Status During Abatement (C	heck Only One)				Street Addre			0		7707	
Facility Closed/Vacated During Entir Abatement Performed Outside of N     Other – Describe:	e Period of Abate ormal Facility Hou	ement urs			2333 Route City, State, Z Union, NJ (	lip Code					
Scope of Work (Check All That Apply)											
□ ≥3 sf or ≥3 lf ⊠ ≥160 sf or ≥260 lf		ovation olition				ll Containment w ni-Enclosure ove Bag Procedu n-Exempted (*) a	re / Limited Co	ntainm	ent &	Tent	t
		cation nally					Amount (Specify		bater Typ	2004209-002	
Location of Asbestos-Containing Material (ACM)	Used S	olely by nance/	Asbe	l estos Con	Description of taining Materia	al (ACM) (i.e.	SF of LF)		1.76	Γ	
TO BE ABATED In Facility (13)	Custodi	al Staff? 2)	the		ems insulation VAT, or er miscellaneo			Remova	Repair	Encapsulate	Enclosure
Room 18		o N/A						100		te	œ
Room 19			Transite Transite				105 SF				
	^		Tansice	Fanels			105 SF	Х			
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Name of Registered Waste Hauler Lilich Corporation		NJDEP V Hauler ID 18724		Cubic V of Was 20		Name of Regis					
City, State Totowa, New Jersey				Dispos	al Date	City, State Morrisville, P					
Completed by Adriana Olejarova	Title Presid	ent		1	ignature,	QA	Date	e /22/20	)19		_

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Date of Notification (1)		$\sim$		Na	me of Build	ding Own	er/Operator	(2)		n =					
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Agencies Notified Type Not	tification				adeen Pre eet Addres										
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ame of Facility Where Abatement	is Takin	n Pia	ce (3)	F	ACILITY	INFORI	ATION	· /- ····							
ivate house	ie ranny	9110	56 (5)					Type of Fa							
treet Address								School	(K-12)	her than K	( 1 0)				
								Other (i	i.e., prival	e and com	1 Z) Imercia	il bui	ldir	ias	
ity (5)								homes,	etc.)			- ur		37.	
uth Plainfield, NJ 07080								Square Fe	et #	of Floors		Bld	g. /	Age	
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ddlesex				000	anty Code (7	) (STATE	USE ONLY)	Current Us	e (Prior if	being dem	nolishe	d)	-		-
ame of Monitoring Firm Hired by B	uildina C	wnei	(8)	LASCA	ANIA										
	90		(3)	ASCN	NO.			ent Contracto	or (9)						
reet Address		-					ch LLC								
						in the second	Address								
y. State, Zip Code							alley Rd #								
							state, Zip C								
oject Manager for Monitoring Firm			Tel	ephone	No		e, NJ 0747 Ione No.	0							
(E))				sprone		1				icense No.					
art Date (10)	Schedu	uled (	Comple	ation D	ate (11)		8-1777 of OSHA N	oniter	01	127					
07 / 31 / 19				1 /		1									
cupancy Status During Abatement								nsultants,In	С			2010/07/0			
Facility Closed/Vacated During En	ntire Peri	od of	Abate	ement			Address					111			
Abatement Performed Outside of I	Normal F	acilit	ty Hou	rs - Des	scribe	20-21 City C	Wagaraw ate, Zip Co	Road, Bldg	.# 35E				-		
Time of Abatement:AM	PM	/	PM		_AM										
ope of Work (Check all that apply)				_		rair La	wn, NJ 07		main at					-	
			1			H	Full Cont	and deconta ainment with	Negative	with negat Pressure	tive pre	essur	е		
>3 sf or >3 If ≥ 160 sf or >260 If	ľ		enovati emolitio				Mini-Encl	osure							
				ne di Zhini		0	Non-Exer	Procedure opted (*) and	Non-Fria	ble Proces	ive Pre	ssur	е		
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Location of Asbestos-Containing Material (ACI	M)		Norma ed Sole				scription of					-	- 1	ent Ty	
TO BE ABATED	1	Ma	intena	ince/	Asbes	stos Con therma	aining Mati systems ir	erial (ACM)		Amount	Kemova	Repair	;	Enca	Enclosure
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e of Registered Waste Hauler ech LLC State ne, NJ 07470				EP Waste		TBE	Date	T.R.R.F. In City. State	10	.andfill					
ement ne of Registered Waste Hauler ech LLC State ne, NJ 07470 pleted By (Print or Type) vtic				EP Waste		TBL Disposa TBL	Date	T.R.R.F. In	nc PA						

Montclair, NJ 07042     Square Fset     # of Floors     Bidg. Age       County (8)     County Code (7)(STATE USE OWLY)     Current Use (Prior if being demolished)       Nome of Monitoring Firm Hired by Building Owner (8)     ASCM No.     Name of Abatement Contractor (9)       Street Address     Street Address	Private House       Type of Facility (4)         Street Address       School (K-12)         Subchapter 8 (Other than K-12)       Subchapter 8 (Other than K-12)         City (b)       Other (i.e., private and commercial buildings. homes, etc.)         Montclair, NJ 07042       Square Fast         County (6)       County Code (7)(STATE USE ONLY)         Eesax       County Code (7)(STATE USE ONLY)         Name of Monitoring Firm Hired by Building Owner (8)       ASCM No.         Name of Abatement Contractor (9)       Gr Tech LLC         Street Address       Street Address	Street Address       Type of Facility (4)         Street Address       School (K-12)         Subchapter 8 (0)       Subchapter 8 (0)         Montclair, NJ 07042       Square Feet         County (8)       Square Feet         Eesax       County Code (7)(STATE USE ONLY)         Name of Monitoring Firm Hired by Building Owner (8)       ASCM No.         Name of Address       Street Address	Diher then K-17 to and comme # of Floors	olished)		 
Montclair, NJ 07042     Square Fset     # of Floors     Bidg. Age       County (8)     County Code (7)(STATE USE OWLY)     Current Use (Prior if being demolished)       Nome of Monitoring Firm Hired by Building Owner (8)     ASCM No.     Name of Abatement Contractor (9)       Street Address     Street Address	Private House       Type of Facility (4)         Street Address       School (K-12)         Subchapter 8 (Other than K-12)       Subchapter 8 (Other than K-12)         City (b)       Other (i.e., private and commercial buildings. homes, etc.)         Montclair, NJ 07042       Square Fast         County (6)       County Code (7)(STATE USE ONLY)         Eesax       County Code (7)(STATE USE ONLY)         Name of Monitoring Firm Hired by Building Owner (8)       ASCM No.         Name of Abatement Contractor (9)       Gr Tech LLC         Street Address       Street Address	Street Address     Type of Facility (4)       Street Address     School (K-12)       Chy (5)     Subchapter 8 (0)       Montclair, NJ 07042     Square Feet       County (6)     Square Feet       Eesax     County Code (7)(STATE USE ONLY)       Name of Monitoring Firm Hired by Building Owner (8)     ASCM No.       Name of Address     Street Address	Diher then K-17 to and comme # of Floors	olished)		 
Montclair, NJ 07042     Nomes, etc.)       Montclair, NJ 07042     Square Feet       County (8)     Square Feet       Essax     County Code (7)(STATE USE ONLY)       Name of Monitoring Firm Hired by Building Owner (8)     ASCM Nc.       Name of Abatement Contractor (9)       Street Address	Private House       Type of Facility (4)         Street Address       School (K-12)         Subchapter 8 (Other than K-12)       Subchapter 8 (Other than K-12)         City (5)       Other (i.e., private and commercial buildings. homes, etc.)         Montclair, NJ 07042       Square Feet         County (8)       County Code (7)/STATE USE OHLY)         Exeax       County Code (7)/STATE USE OHLY)         Nome of Monitoring Firm Hired by Building Owner (8)       ASCM No.         Name of Abatement Contractor (9)       Street Address	Street Address       Type of Facility (4)         Street Address       School (K-12)         Montclair, NJ 07042       Subchapter 8 (0)         Montclair, NJ 07042       Square Feet         County (6)       Square Feet         Eesax       County Code (7)(STATE USE ONLY)         Name of Monitoring Firm Hired by Building Owner (8)       ASCM Nc.         Name of Abatement Contractor (9)       Street Address	Diher then K-17 to and comme # of Floors	olished)		
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Montclair, NJ 07042     Square Fset     # of Floors     Bidg. Age       County (8)     Square Fset     # of Floors     Bidg. Age       Essax     County Code (7)(STATE USE OWLY)     Current Use (Prior if being demolished)       Name of Monitoring Firm Hired by Building Owner (8)     ASCM No.     Name of Abatement Contractor (9)       Street Address     Street Address     Street Address       City, State, Zip Code     City, State, Zip Code     City, State, Zip Code	Private House       Type of Facility (4)         Street Address       School (K-12)         City (c)       Studtepter 8 (Other than K-12)         Montclair, NJ 07042       Square Feet         County (8)       Square Feet         Eesax       County Code (7)(STATE USE OWLY)         Name of Monitoring Firm Hired by Suijding Owner (8)       ASCM No.         Name of Abatement Contractor (9)       Gr Tech LLC         Street Address       Street Address         City, State, Zip Code       City, State, Zip Code         Project Managar for Monitoring Firm       Immediate Internet Interne	Street Address       Type of Facility (4)         Street Address       School (K-12)         Montclair, NJ 07042       Square Feet         County (8)       Square Feet         Eesex       County Code (7)(STATE USE ONLY)         Name of Monitoring Firm Hired by Building Owner (8)       ASCM Nc.         Name of Monitoring Firm Hired by Building Owner (8)       ASCM Nc.         Street Address       Street Address         City, State, Zip Code       Street Address         Project Manager for Monitoring Firm       Firm Firm	Diher then K-17 to and comme # of Floors	olished)		 _
Montclair, NJ 07042     Nomes, etc.)       Montclair, NJ 07042     Square Feet       County (6)     Square Feet       Esteax     County Code (7)(STATE USE ONLY)       Name of Monitoring Firm Hired by Building Owner (6)     ASCM No.       Name of Address     Street Address       City, State, Zip Code     Street Address       Project Manager for Monitoring Firm     Telephone No.	Private House       Type of Facility (4)         Street Address       School (K-12)         City (5)       Studchepter 8 (Diher than K-12)         Montolair, NJ 07042       Square Feet         County (6)       Square Feet         Essax       County Code (7)(STATE USE OWLY)         Name of Monitoring Firm Hired by Building Owner (8)       ASCM Nc.         Name of Address       Street Address         City, State, Zip Code       Street Address         City, State, Zip Code       City, State, Zip Code         Project Manager for Monitoring Firm       Telephone No.	Street Address     Type of Facility (4)       Street Address     School (K-12)       Montclair, NJ 07042     Square Facility (4)       County (6)     Square Facility (4)       Easax     County Code (7)(STATE USE ONLY)       Name of Monitoring Firm Hired by Building Owner (8)     ASCM No.       Name of Monitoring Firm Hired by Building Owner (8)     ASCM No.       Street Address     Street Address       City, State, Zip Code     Street Address       Project Manager for Monitoring Firm     Telephone No.	Other then K-1/ te and comme d of Floors f being demoli	olished)		 _
County (d)     Nomes, etc.)       Montclair, NJ 07042     Square Feet       County (d)     Square Feet       Eesax     County Code (7)(STATE USE ONLY)       Name of Monitoring Firm Hired by Building Owner (8)     ASCM No.       Name of Abatement Contractor (9)     Street Address       City, State, Zip Code     Site Code	Private House       Type of Facility (4)         Street Address       School (K-12)         Bubchepier 8 (Other than K-12)       Bubchepier 8 (Other than K-12)         City (c)       Other (i.e., private and commercial buildings. homes, etc.)         Montclair, NJ 07042       Square Feet         County (6)       Square Feet         Eesax       County Code (7)(STATE USE ONLY)         Name of Monitoring Firm Hired by Building Owner (8)       ASCM No.         Name of Abatement Contractor (9)       Gr Tech LLC         Street Address       Street Address         City, State, Zip Code       City, State, Zip Code         Project Manager for Monitoring Firm       Telephone No.	Street Address     Type of Facility (4)       Street Address     School (K-12)       Montclair, NJ 07042     Square Feel       County (6)     Square Feel       Essax     County Code (7)(STATE USE ONLY)       Name of Monitoring Firm Hired by Building Owner (8)     ASCM Nc.       Name of Monitoring Firm Hired by Building Owner (8)     ASCM Nc.       Street Address     Siteet Address       City, State, Zip Code     Siteet Address       City, State, Zip Code     City, State, Zip Code       Project Managar for Monitoring Firm     Telaphone No.	Other then K-1/ te and comme d of Floors f being demoli	olished)		
County (d)     Nomes, etc.)     Investe and commercial buildings.       Montolair, NJ 07042     Square Feet     # of Floors       County (d)     Square Feet     # of Floors       Eesax     County Code (7)(STATE USE ONLY)     Current Use (Prior if baing demolished)       Name of Monitoring Firm Hired by Building Owner (8)     ASCM No.     Name of Abatement Contractor (9)       Street Address     Gr Tech LLC       City, State, Zip Code     Sitest Address       Project Manager for Monitoring Firm     Telephone No.	Private House       Type of Facility (4)         Street Address       School (K-12)         Other (I.e., private and commercial buildingo. homes, etc.)       Studnepter 6 (Other than K-12)         Montclair, NJ 07042       Square Feet         County (6)       Square Feet         Eesax       County Code (7)(STATE USE OWLY)         Name of Monitoring Firm Hired by Building Owner (8)       ASCM Nc.         Name of Abatement Contractor (9)       Gr Tech LLC         Street Address       Street Address         City, State, Zip Code       City, State, Zip Code         Project Manager for Monitoring Firm       Telephone No.	Street Address     Type of Facility (4)       Street Address     School (K-12)       Montclair, NJ 07042     Square Feet       County (6)     Square Feet       Eesax     County Code (7)(STATE USE ONLY)       Name of Monitoring Firm Hired by Building Owner (8)     ASCM Nc.       Name of Monitoring Firm Hired by Building Owner (8)     ASCM Nc.       Street Address     Street Address       City, State, Zip Code     Street Address       Project Managar for Monitoring Firm     Telephone No.	Other then K-1/ te and comme d of Floors f being demoli	olished)		 _
Montclair, NJ 07042     Square Feet     # of Floors     Bidg. Age       County (6)     County Code (7)(STATE USE ONLY)     Current Use (Prior if being demolished)       Name of Monitoring Firm Hired by Building Owner (8)     ASCM No.     Name of Abatement Contractor (9)       Street Address     Sireet Address       City, State, Zip Code     City, State, Zip Code	Private House       Type of Facility (4)         Street Address       School (K-12)         Subchapter 8 (Other than K-12)       Subchapter 8 (Other than K-12)         City (c)       Other (i.e., private and commercial buildings. homes, etc.)         Montclair, NJ 07042       Square Feet         County (8)       County Code (7)(STATE USE ONLY)         Eesax       County Code (7)(STATE USE ONLY)         Name of Monitoring Firm Hired by Building Owner (8)       ASCM Nc.         Name of Abatement Contractor (9)       Gr Tech LLC         Street Address       Siteet Address         City, State, Zip Code       City, State, Zip Code         Project Manager for Monitoring Firm       City State, Zip Code	Street Address       Type of Facility (4)         Street Address       School (K-12)         Subchapter 6 (0)       Subchapter 6 (0)         Montclair, NJ 07042       Square Feet         County (6)       Square Feet         Eesax       County Code (7)(STATE USE ONLY)         Name of Monitoring Firm Hired by Building Owner (8)       ASCM No.         Name of Monitoring Firm Hired by Building Owner (8)       ASCM No.         Street Address       Street Address         City, State, Zip Code       Street Address         Project Manager for Monitoring Firm       Eirm	Diher then K-17 to and comme # of Floors	olished)		
County (6)     Nomes, etc.)       Montclair, NJ 07042     Square Feet       County (6)     Square Feet       Eesax     County Code (7)(STATE USE ONLY)       Name of Monitoring Firm Hired by Building Owner (8)     ASCM Nc.       Name of Monitoring Firm Hired by Building Owner (8)     ASCM Nc.       Street Address     Street Address       City, State, Zip Code     City, State, Zip Code	Private House       Type of Facility (4)         Street Address       School (K-12)         Subchapter 8 (Other than K-12)       Subchapter 8 (Other than K-12)         Chy (a)       Other (i.e., private and commercial buildings. homes, etc.)         Montolair, NJ 07042       Square Feet         County (6)       County Code (7)(STATE USE OWLY)         Eesax       County Code (7)(STATE USE OWLY)         Name of Monitoring Firm Hired by Building Owner (8)       ASCM No.         Name of Abatement Contractor (9)       Gr Tech LLC         Street Address       Street Address         City, State, Zip Code       City, State, Zip Code	Street Address       Type of Facility (4)         Street Address       School (K-12)         Montclair, NJ 07042       Square Feet         County (6)       Square Feet         Eesax       County Code (7)/STATE USE ONLY)         Name of Monitoring Firm Hired by Building Owner (8)       ASCM No.         Name of Address       Street Address         City, State, Zip Code       Street Address	Diher then K-17 to and comme # of Floors	olished)		 _
County (6)     Nomes, etc.)       Montclair, NJ 07042     Square Faet       County (6)     Square Faet       Eesax     County Code (7)(STATE USE ONLY)       Name of Monitoring Firm Hired by Building Owner (8)     ASCM No.       Name of Abatement Contractor (9)       Street Address       City, State, Zip Code	Private House       Type of Facility (4)         Street Address       School (K-12)         Subchapter 8 (Other than K-12)       Subchapter 8 (Other than K-12)         City (a)       Other (i.e., private and commercial buildings. homes, etc.)         Montolair, NJ 07042       Square Feet         County (6)       County Code (7)(STATE USE OWLY)         Eesax       County Code (7)(STATE USE OWLY)         Name of Monitoring Firm Hired by Building Owner (8)       ASCM Nc.         Name of Abatement Contractor (9)       Gr Tech LLC         Street Address       Street Address         City, State, Zip Code       Street Address	Street Address       Type of Facility (4)         Street Address       School (K-12)         Subchapter 8 (0)       Subchapter 8 (0)         Montclair, NJ 07042       Square Feet         County (6)       Square Feet         Eesax       County Code (7)(STATE USE ONLY)         Name of Monitoring Firm Hired by Building Owner (8)       ASCM No.         Name of Address       Street Address         City, State, Zip Code       Street Address	Diher then K-17 to and comme # of Floors	olished)		 
Montclair, NJ 07042     Nomes, etc.)       Montclair, NJ 07042     Square Faet       County (8)     County Code (7)(STATE USE ONLY)       Eesax     County Code (7)(STATE USE ONLY)       Name of Monitoring Film Hired by Building Owner (8)     ASCM No.       Name of Abatement Contractor (9)     Gr Tech LLC       Street Address     Street Address	Private House       Type of Facility (4)         Street Address       School (K-12)         Succhapter 8 (Other than K-12)       Succhapter 8 (Other than K-12)         Chy (a)       Other (i.e., brivate and commercial buildings. homes, etc.)         Montclair, NJ 07042       Square Feet         County (6)       County Code (7)(STATE USE OWLY)         Eesax       County Code (7)(STATE USE OWLY)         Name of Monitoring Firm Hired by Building Owner (6)       ASCM Nc.         Name of Abatement Confractor (9)       Gr Tech LLC         Street Address       Sireet Address	Street Address     Type of Facility (4)       Street Address     School (K-12)       Subchapter 8 (0)     Subchapter 8 (0)       Montclair, NJ 07042     Square Feet       County (6)     Square Feet       Eesax     County Code (7)/STATE USE ONLY)       Name of Monitoring Firm Hired by Building Owner (8)     ASCM No.       Name of Abatement Contractor (9)     Gr Tech LLC       Street Address     Sireet Address	Diher then K-17 to and comme # of Floors	olished)		
County (6)     Nomes, etc.)       Montclair, NJ 07042     Square Feet       County (6)     Square Feet       Essax     County Code (7)(STATE USE OWLY)       Name of Monitoring Firm Hired by Building Owner (8)     ASCM No.	Private House     Type of Facility (4)       Street Address     School (K-12)       Succhapter 8 (Other than K-12)     Succhapter 8 (Other than K-12)       Chy (a)     Other (i.e., private and commercial buildings. homes, etc.)       Montolair, NJ 07042     Square Faet       County (8)     County Code (7)(STATE USE ONLY)       Eesax     County Code (7)(STATE USE ONLY)       Name of Monitoring Firm Hired by Building Owner (8)     ASCM No.	Street Address     Type of Facility (4)       Street Address     School (K-12)       Succhapter 8 (0)     Succhapter 8 (0)       Montclair, NJ 07042     Square Feet       County (6)     Square Feet       Eesax     County Code (7)(STATE USE OWLY)       Name of Monitoring Firm Hired by Building Owner (8)     ASCM No.	Diher then K-17 to and comme # of Floors	olished)		1
County (6)     Nomes (c.)       Montclair, NJ 07042     Square Faet       County (8)     County Code (7)(STATE USE OWLY)       Eesax     County Code (7)(STATE USE OWLY)	Private House     Type of Facility (4)       Street Address     Bohool (K-12)       Subchapter & Other (i.e., private and commercial buildinge. homes, etc.)     Other (i.e., private and commercial buildinge. homes, etc.)       Montclair, NJ 07042     Square Fast     # of Floors       County (6)     County Code (7)(STATE USE ONLY)     Duract then if the if t	Street Address     Type of Facility (4)       Street Address     School (K-12)       Subchapter 6 (Dill     Subchapter 6 (Dill       Montclair, NJ 07042     Square Facility (4)       County (6)     Square Facility (4)       Eesax     County Code (7)(STATE USE ONLY)	Diher then K-17 to and comme # of Floors	olished)		 
Montclair, NJ 07042	Private House     Type of Facility (4)       Street Address     School (K-12)       Subchapter 8 (Other than K-12)     Other (i.e., private and commercial buildings, homes, etc.)       Montclair, NJ 07042     Source Facility (4)	Street Addrass     Type of Facility (4)       Street Addrass     School (K-12)       Subchapter 6 (01)     Subchapter 6 (01)       City (5)     Other (i.e., private homes, etc.)       Montclair, NJ 07042     Scuare Factor	Other then K-12 te and comme	10	ed)	  
Service Plant in the service of the	Private House (3) Type of Facility (4) Street Address Column 2 (K-12)	Street Addrass	Star at	mercial b	ial build	
(NJAC 5:23-8) Ustification) Name of Contact Cencellation Ryan MoClutchy Telephone Number	/NIAA B.de AN IS Amergency (Including Montclair, NJ 07040	Image: Coles Notified     Type Notification     Streat Address       Image: Coles Notified     Initial     Streat Address       Image: Coles Notified     Initial     Initial       Image: Coles Notified     Initial     Image: Coles Notified       Image: Coles Notified     Image: Coles Notified     Image: Coles Notified       Image: Coles Notified     Image: Coles Notified     Image: Coles Notified       Image: Coles Notified     Image: Coles Notified     Image: Coles Notified       Image: Coles Notified     Image: Coles Notified     Image: Coles Notified	-1			
Image: Note Notified     Type Notification     Street Address       Image: Delwo     Initial     Initial       Image: Dock     Initial       Image: Dock     Amendment #       Image: Dock     Amendment #       Image: Dock     Image: Dock       Image: Note State     Image: Dock       Image: Note State <td>Initial     Stredt Address       DoLWD     Amended       Dhss     Amended       Montelair, NJ 02042     Montelair, NJ 02042</td> <td>OHECH # 3396     NOTIFICATION OF ASBESTOS ABATEMENT       Oate of Notification (1)     07 / 19 / 19       Name of Building Owner/Operator (2)     1</td> <td></td> <td>V</td> <td><u>/</u> OVE</td> <td></td>	Initial     Stredt Address       DoLWD     Amended       Dhss     Amended       Montelair, NJ 02042     Montelair, NJ 02042	OHECH # 3396     NOTIFICATION OF ASBESTOS ABATEMENT       Oate of Notification (1)     07 / 19 / 19       Name of Building Owner/Operator (2)     1		V	<u>/</u> OVE	

ThV# 1305	2	4											Ľ	Р	rint For
OK LIUZIO PA	T		IFICATIO	State of N ON OF AS	BESTOS	ABATE		т	In		C	E	1	$\mathbb{V}$	EF
Date of Notification (1) 07/19/2019	and and a specific second s		Name MAD	of Buildin ISON B	g Owner/ OARD	Operato OF ED	r (2) UCA	TION			0	<u> </u>	U	U	
Agencies Notified Type Notification			1	Address Noodlar	nd Road	ł				-	JUL	2	52	019	
DEP Amended Amendmen				tate, Zip ( son, Ne		y 0794	10		TT Lis months	ASBI					.&
☑     DOH     justification)       ☑     DCA     ☑		g	Name Mike	of Contac Zulla	t					ephon 3-593	e Nur	nber	SING		
Name of Facility Where Abatement is Takir	ng Place	(3)	FAC	CILITY IN	FORMAT	ION	Tun	e of Facility	(4)				_		
Madison Junior School	3	(0)					x	School (K-							
Street Address 160 Main St								Subchapte Other (i.e. etc.)	r 8 (Oth	er thar & comr	n K-12 merci	2) al bui	ldings	, hom	ies,
City (5) Madison, NJ 07940								are Feet 0,000	# o 2	f Floor	S		Bldg. / 60 ye	- C	
County (6) Morris			County (STATE	Code (7) USE ONL	n		Curr Pul	rent Use (Pr blic High S	ior if bei School	ng den	nolish	ied)			
Name of Monitoring Firm Hired by Building RK Occupational & Environmental	<sup>Owner</sup> (8 Analys	is Inc		M No. D				atement Co nstruction		(9)					
Street Address 401 St. James Avenue						Street 205 F	21012 200	ess e 46 Suite	e 15						
City, State, Zip Code Phillipsburg, New Jersey 08865								Zip Code NJ 07512							
Project Manager for Monitoring Firm Jonathan S. Gilbert			Telepho 908 4	one No. 54 6316	i.	Teleph 973-3				Licen 0103		D.			
Start Date (10) 07/31/2019	08/02/	2019		Date (11)				HA Monitor	Corp						
Occupancy Status During Abatement (Chec						Street									
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: 3:30pm - 12am	Period of a lateration of a la	Abate y Hour	ment 's			City, St	tate, 2	e 46 Suite	15	-					
Scope of Work (Check All That Apply)						TOTOV	va, r	NJ 07512							
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>	F	Renov Demol	ation ition			×	Fu Mi Gl	III Containmo ni-Enclosure ovebag Proc	e cedure						
	Is	Loca	tion					on-Exempted	1 (*) and	Non-H	-riable	e Pro	1	e emen	
Location of	1	Norma ed Sole	lly			cription							Ту	pe	
Asbestos-Containing Material (ACM) <u>TO BE ABATED</u> In Facility (13)	Ma	intena todial (12)	ince/ Staff?	Asbes (i.e		aining Mi systems ing, VAT iiscellane	insul , or	ation,	(S	nount pecify or LF)		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A				,					/al	ï	late	ure
Main Hallway		Х		Adhe	sive glu	e dots	on ti	ne wall	15	0 SF		x		x	
Name of Registered Waste Hauler			JDEP W		Cubic	rards		Name of F	Register	ed Lar	ndfill				
Savic Construction Corp			lauler ID 2253	No.	of Was 3			GROWS	5						
City, State Totowa NJ					Dispos TBD	al Date		City, State Morrisev		A					
Completed by Sava Savic	Title Presi	dent			Si	gnature		l		~	Date	e 19/2	010		
						22.1	02-	Na		C-	011	JIL	013		

Inv+1	304	19 N TT	NOT		ATION	OF AS	lew Jersey BESTOS ABA AC 8:60 and 5:1			EC	ا د	F		V	En	
	<u>I</u> F k	117	JU)	(FL				1								
Date of Notification (1)	23 /	19					og Owner/Operator ( OZ Developer U			JU	1	2 5	20	)19		
Agencies Notified				_			OZ Developel 0	I Dan Kenewa		00	5	- J	1 41	ng		
	Type Notifica	auon				650 East Swedesford Road, Suite 400									1000	
DOLWD	Amendeo	Ь			City, State, Zip Code					ASBESTOS CONTROL						
DOH	Amendm	0.000 (M) (C			1	vne, PA			LICENSING						-	
	Emergen justification		cluding	3		of Contac			Talashana Nu 1							
(NJAC 5:23-8)	Cancellat	1000			1.112.111.12	hathan P		Telephone I 610-648								
							FORMATION		010-040	-1700						
Name of Facility Where A	Abatement is T	Taking	Place	(3)	TA		FORMATION	Type of Facility	(4)				-			
Commercial		3	, , ,	(0)				School (K-1								
Street Address								Subchapter	8 (Other than I	K-12)						
357 Wilson Avenue	•							Other (i.e., homes, etc	private and con	nmercia	al bu	ilding	IS,			
City (5)								Square Feet	# of Floors		Blo	dg. A	qe			
Newark												9.11				
County (6)					Cour	nty Code (7	7)(STATE USE ONLY)	Current Use (P	Prior if being der	molishe	d)					
Essex											-030					
Name of Monitoring Firm	Hired by Build	ding O	wner (	8)	ASCM	No.	Name of Abateme	ent Contractor (9	9)							
Mark Jovic Consult	ting LLC						ALL PRO MA	NAGEMENT	NAGEMENT LLC							
Street Address							Street Address									
87 Main Street, Suit	te A						27 Outwater	Lane								
City, State, Zip Code						City, State, Zip Code										
Lincoln Park, NJ 0						Garfield, NJ 07026										
	Project Manager for Monitoring Firm Tele						Telephone No.	License No.								
Mark Jovic					3-650		973-928-4888 1188									
Start Date (10) 07 /22 /						te (11)	Name of OSHA M									
				Street Street	_ / _	20		NAGEMENT	LLC							
Occupancy Status During					nont		Street Address									
Abatement Performed						cribe	27 Outwater									
Time of Abatement:						AM	City, State, Zip Co Garfield, NJ									
Scope of Work (Check all	that apoly)						Garneid, NJ	07020								
□ $\geq$ 3 sf or $\geq$ 3 lf □ $\geq$ 160 sf or $\geq$ 260 lf			□ Re ⊠ De				Mini-Enc     Glovebag		-							
				Locati							Aba	atem	ent T	ype		
Location Asbestos-Containing I		,		lormal d Sole		Acho	Description o stos Containing Ma	Amount	F		-					
TO BE ABA	TED	·		intena odial S			., thermal systems i		(Specify		Remova	Repair	Encapsulate	Enclosure		
IN Facili (13)	ty		Cusi	(12)	stan?		surfacing, VAT, other miscellane		SF or LF	)	Val		sula	sure		
(13)			Yes	No	N/A	1	other miscellarie	ous)					ate			
Unit #6,7,8 (attached)	- Roof					Built-U	p Roofing		25,000 S	F						
Unit #11- North & South	ext. Windows	s					v Glazing		30 LF							
Unit #11- Roof						Roof FI	ashing		1,600 SF							
Unit #5- Roof						Built-U	p Roofing									
Name of Registered Was	te Hauler				JDEP \		Cubic Yards of	Name of Regi	stered Landfill th Landfill / Fa					-		
Century Waste, LLC	C/Newark Ca	arting	I	Н	auler ID	0 No. 7 / 0283	Waste As Needed		th Landfill / Fa al Sanitary Lar		and	dfill /				
City, State							Disposal Date	City, State						_		
Elizabeth, NJ / New	ark, NJ						TBD	Morrisville	e, PA / Pen A	rgyl, P	A					
Completed By (Print or Ty	ype)	Title					Signature			Date						
Allen Monchik		Pr	oject	Mana	ager		Allen	Monchik	6	7/23	3/1	9				
ASB-41										1.120	21 1	-				

ASP	-41
JAN	13

	JA 14 64 87		Pursuan	t to NJAC	8:60 and		MEN 0)	11/	EN QU	1					
Date of Notification (1)	and a start of the				Owner/Op			UL	4011	4		-	****		
7-24-19		ral Real	ME	MECEIVE											
Agencies Notified Type Notification			Address												
EPA Initial			E. Jeffe		IIII 0 = 0010										
DEP Amended DOL Amendme	nt #			tate, Zip Co						JUL	2 5	201	1		
Emergence	g	Rockville, MD 20852 Name of Contact						Talaah	1						
DOH justificatio				Voodie					Telephonesness Control & 301-998-8286CENSING						
			FAC	ILITY INF	ORMATIO	N			Laure to the Destance of the				Lenviron and the		
lame of Facility Where Abatement is Tak Ellisburg Shopping Center Space			allmark	(store)			Тур	e of Facility (4	4)						
treet Address	= 12 (1011	nei n	allinaik	store)				School (K-12		101					
22 NJ-70							H	Other (i.e. pi	8 (Other than K rivate & comme	ercial bu	ildings	, hom	ies,		
ity (5)							Sau	etc.) are Feet	# of Floors		Bldg.	Ane			
Cherry Hill							100		1		+/-50				
ounty (6)			County	Code (7)	0		Current Use (Prior if being demolished)								
Camden			(STATE USE ONLY) Vaca												
ame of Monitoring Firm Hired by Buildin /ertex Companies LLC	g Owner (8	;)	ASCM No. Name of Abatement												
treet Address	Pepper Environmer Street Address					intal Services, Inc.									
00 Turner Way.	2251 Fraley Street					t									
ity, State, Zip Code	City, State, Zip Code														
Aston, PA 19014						Phila	idelp	hia, PA 19	137						
roject Manager for Monitoring Firm Don Heim	Telepho		Telephone No. License No.												
tart Date (10)	led Cor	610-7		215-533-5155 01166											
3-1-19	tion Date (11) Name of OSHA Monitor Vertex Companies														
ccupancy Status During Abatement (Che	eck Only O	ne)	Street Address												
Facility Closed/Vacated During Entire	Period of	Abater	ment			700 1	Turne	er Way							
Abatement Performed Outside of Nor Other – Describe:	mal Facilit	y Hour	S					Zip Code							
cope of Work (Check All That Apply)						Astor	n, PA	A 19014							
≥3 sf or ≥3 if	হি ।	7				×	1 -		N 1921 DON 1972	723					
≥160 sf or ≥260 lf		Renova Demoli				Mini-Enclosure									
						×		ovebag Proce	dure (*) and Non-Fri	abla Dr	aaaduu	-			
	19	Locat	ion			increase of	110	II-Exempted				emen	t		
Location of		Normal	lly		Descr	Description of					Туре				
Asbestos-Containing Material (ACM) <u>TO BE ABATED</u>		ed Sole aintena			tos Contair thermal sy	ning M	ateria		Amount			g	m		
In Facility	Cus	todial 3 (12)	Staff?	(1.6.	surfacin	ig, VAT	Γ, or		(Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure		
(13)					other mis	cellane	eous)			oval	air	sulat	sure		
office area (august)	Yes	No	N/A			-						œ			
office area (exposed)			x			d and Tan and mastic			350sf	x	-				
elevated wood platform			x	VAT	red and	tan a	nd m	nastic	1000sf	X					
ame of Registered Waste Hauler		N	IJDEP W	aste	Cubic Ya	arde		Name of D	egistered Landf	511					
ervice Transport Group			lauler ID	ST4.733.03	of Waste			Minerva							
ty, State ardley, PA					Disposal	Date		City, State Libson, (	лн						
ompleted by	Title				Sign	nature				)ate					
nnifer Niven	Dir o	f Ope	Derations Signature Date							04.	19				

In	17. (	3()5	2		State									
B & G proj. #:	2019-166	PAI					s Abatement ' and 12:120-7)	Chec	k # 9453					
Date of Notification (1)		محد <u>م ار</u>	Name of Puil	ding Our						= 1		1 Г	-	
0 17 1/12 13 1/	1191	'	Scot Bra		er/Operator (2)	)			ECE	3	W	E	10	
	ype Notificat	tion	Street Addres											
EPA			Street Addres	55				ana ny kaodim- isa ny kaodim- na taona ana amin'ny kaodim- na taona amin'ny kaodim- na taona amin'ny kaodim- na taona amin'ny kaodim- na taona amin'ny kaodim-paositra dia kaodim- na taona amin'ny kaodim-paositra dia kaodim-paositra dia kaodim- na taona amin'ny kaodim-paositra dia kaodim-paositra dia kaodim-paositra dia kaodim-paositra dia kaodim-paositra na taona amin'ny kaodim-paositra dia kaodim-paositra dia kaodim-paositra dia kaodim-paositra dia kaodim-paositra na taona amin'ny kaodim-paositra dia kaodim-paositra dia kaodim-paositra dia kaodim-paositra dia kaodim-paositra na taona amin'ny kaodim-paositra dia kaodim-paositra dia kaodim-paositra dia kaodim-paositra dia kaodim-paositra na taona dia kaodim-paositra dia kaodim-paositra dia kaodim-paositra dia kaodim-paositra dia kaodim-paositra dia	JUL	25	201	9		
DEP			City, State, Z	in Code								-		
K DOL	Amend		Newark,		04		ASBESTOS CONTROL &							
X DOH			lame of Con				none Number NSKIG							
	Cancell	ation	Scot Braswell											
I				FAC	ILITY INFORM	ATION						_		
Name of facility where	abatement i	is taking pl	ace (3)				1	Type of Facility	(4)					
Scot Braswell									ol (K - 12)					
									hapter 8 (Ot			(-12)		
Street Address								Bldgs	(Private/Co ./Homes, et	C.				
City (5)		Cou	nty (6)			Cou	nty Code (7)	Square Feet	# of Floors	5	BI	dg. A	ge	
Newark, NJ 0710	04	Es	sex		te use only)	Current Use (Prior if being demolished)								
Name of Monitoring Fir					ASCM No.		Name of Abatement	residential	i de la contra contra					
i i i i i i i i i i i i i i i i i i i		blug. om			ASCIM NO.		B & G Restora							
Street Address							Street Address		-					
							105 Ryerson F	Road						
City, State, Zip Code							City, State, Zip Code							
							Lincoln Park,	NJ 07035						
Project Manager for Mor	nitoring Firm	1	Pho	one Numb	er		Telephone Number (973)696-686	9	License I	Numb 378	ber			
Scheduled Start Date (1	0)	Sched	d. Completion	n Date (11	1)		Name of OSHA Mon			5.3. C. C. C. C.				
08/02/2019		08/0	03/2019				B & G Restoration, Inc.							
Occupancy Status Durin	g Abatemer						105 Ryerson F	load						
K Facility closed/vac	ated during	entire peri	od of abaten				City, State, Zip Code							
Abatement perforr Describe:	med outside	of normal	facility hours	-										
Other-Describe:						-	Lincoln Park, N	IJ 07035						
Scope of Work (check a	all that apply	Y)				Dw	rap & cut							
Demolition	×	Renovatio	n			F F	ull Containment w/ne	gative pressure	Gloveba	ag pr	ocedu	ıre		
✓ > <u>3</u> sf or > <u>3</u> If		≥160 sf or	≥260 lf			XN	lini-enclosure		Non-fria	able j	proce	dure		
Location of			n normally us enance/custo		/					R e	R e	E	E	
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abated in facility (	13)	Yes	No	N/A	material (			LF)		o v	a i	a p	L	
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Registered Waste Haule B & G Restoration,			EP Hauler ID 19563	)# C	ubic Yards of V 1	Vaste	Name of Registered Grand Central							
City, State Lincoln Park, NJ				isposal D 08			City, State Pen Argyl, PA							
Completed by (Print or T	Type)	Title			Signature				Date			¥		
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	/ _1	9					rtners LLC	(2)		[]	<u>U</u>			
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Haddon Heights, NJ 08035							SOUTHAMPT							
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□ ≥3 sf or ≥3 lf			enovati	00			Full Conta	ainment with Ne	gative Pressure					
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IN Facility (13)		003	(12)	stan :			surfacing, VAT, other miscellaneo	Material (ACM) Amount R R R C L ns insulation, (Specify o ai part AT, or SF or LF) a						
····/		Yes	No	N/A		C	saler miscellaneo	us)				ate		
1 <sup>st</sup> Floor Office					Pipe ins	ul	ation		160 LF					
1 <sup>st</sup> Floor					Radiato	r lı	nsulation		75 SF					
Basement			$\boxtimes$		Pipe Ins	;. a	bove Plaster (	Ceiling	600 LF					
Basement			$\boxtimes$		Contam	ina	ated Plaster Ce	eiling	12,000 SF					
Name of Registered Waste Hauler				JDEP V			ubic Yards of	Name of Regis						
SERVICE TRANSPORT GRO	UP		H	auler ID	No.		aste	MINERVA						
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58 PYLES LANE NEW CAST	LE DE						Spoour Date		URG, OHIO					
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	×	600 sf	9X9 Floor Tile	×	1st fl.entryway to stairs and
			A DATA DATA DATA DATA DATA DATA DATA DA		floor tile continues under
	×	600 sf	Mastic on bottom of drywall	×	1st fl Cafeteria /kitchen side
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	X	50 lf	cove base mastic	×	cafeteria
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School of the second	×	35 lf	Block Pipe Insulation	X	2nd floor Tool Shop
	×	50 lf	Block Pipe Insulation	×	Above Large Storage 1' dia
	×	50 lf	Block Pipe Insulation	×	Above Large Storage 4" dia
	×	840 sf	Duct Tar	×	Above Cellings and Old Roof
	×	60 sf	Residual 9x9 Mastic	X	2nd H Large Rm entry-stairway
- 2003-00-00 4-2003-00-00 - 900-4-00-00 - 900-4-00-00	×	600 sf	Residual 9x9 Mastic	X	
	TILLING AND			710,2642 CIT.11218	2nd Fl Large Rm 40sf under
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Ware house existing roof	7th Floor 8th Floor	Ath Floor	Top Roof	Exterior	Exterior	Exterior	1st fl-Kitchen	Mictor Building Warehouse	MATERIAL (ACIV) IN FACILITY 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
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×	××	×	×	×	×	×	××	NO N/A	IS LOCATION NORMALLY USED SOLEY BY MAINTENANCE/ CUSTODIAL STAFF?
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Partial Rotted Roof	Pipe insulation above plaster ceiling Pipe insulation above plaster ceiling	Contaminated Plaster ceiling	Roofing Material	Exterior Window Glazing	Exterior Window Caulk	Door Frame Caulk	9x9 Red floor tile and Mastic		DESCRIPTION OF ASBESTOS CONTAING MATERIAL (ACM) (IE, THERMAL SYSTEMS INSULATION SURFACING, VAT, OR OTHER MISCELLANEOUS)
1800 SF	200LF 8 LF	1500 SF	32,000 sf	1,420 lf	250 lf	1,350 st 3.0 lf	600 sf		AMOUNT SPECIFY SF OR LF
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	×	50 lf	cove base mastic	×	cafeteria
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	X	360 sf	9x9 Gray Floor Tile and Mastic	×	2nd floor office after bathrm
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	×	840 51			
	Carl Description of the second se	QAD of	y ben a can be a be a ben a Bouct Tar	X	Above Ceilings and Old Roof
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99.200 200 200 200 200 200 200 200 200 200	×	600 sf	Residual 9x9 Mastic	×	concrete floor
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BESTOS-CONTAINING       NORMALLY         ATERIAL (AGM)       Sole       USED SOLEY BY         BE ABATED       Sole       USED SOLEY BY         FACIUITY       Sole       VES       NO         FACIUITY       Sole       YES       NO       NAINTENANCE/         FACIUITY       Sole       YES       NO       NAINTENANCE/         FACIUITY       YES       NO       NAINTENANCE/       X         FACIUITY       YES       NO       N/A       X         tor Building-Warehouse       YES       NO       N/A         tor/Building-Warehouse       YES       NO       N/A         tor/Building-Warehouse       YES       NO       N/A         cough out       X       X       X         FI Cafeteria       X       X       X         FI Large Rm 40sf under       X       X       X         crete floor       X       X       X       X         FI Large Rm entry-stairway       X       X       X       X         floor Tool Shop       X       X       X       X       X         floor office after bathrm       X       X       X       X       X       X	DESCRIPTION OF	AMOUNT	REMOVAL	REPAIR	ENCAPSULATE	ENCLOSURF
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FACIUITY       Sold       WANNERANCE         tor Building-Warehouse       YES       NO       N/A         tor/Building-Warehouse       YES       NO       N/A         tor/Building-Warehouse       YES       NO       N/A         tor/Building-Warehouse       X       X       X         rough out       X       X       X       X         FI Cafeteria       X       X       X       X         FI carge Rm 40sf under       X       X       X       X         I FI Large Rm 40sf under       X       X       X       X         I FI Large Rm entry-stairway       X       X       X       X         I FI Large Storage 1' dia       X       X       X       X         floor Tool Shop Closet       X       X       X       X         floor office after bathrm       X       X       X       X       X         rloor Cafeteria/Kitchen       X       X       X       X       X         I Cafeteria /kitchen side       X       X       X       X       X	(IE, THERMAL SYSTEMS INSULATION	SF OR LF	Rinney or a	St Statut		
tor Building-Warehoulsé       YES       NO       N/A         tor/Building-Warehouse       X       X         ough out       X       X         rough out       X       X         Fl Cafeteria       X       X         I Fl Large Rm entry-stairway       X       X         rcrete floor       X       X         rcrete floor       X       X         receilings and Old Roof       X       X         ve Large Storage 1' dia       X       X         floor Tool Shop       X       X         floor Tool Shop Closet       X       X         floor office after bathrm       X       X         rin pile debris in       X       X         teria       X       X       X         rloor Cafeteria/Kitchen       X       X       X	OTHER MISCELLANEOUS)				-	
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floor office after bathrm x <ul> <li>, in pile debris in</li> <li>teria</li> <li>rloor Cafeteria/Kitchen</li> <li>x</li> </ul>	Block Pipe Insulation	Joo n	× ``	ALC - CALLER - LANSING COLONE		No. of Concession, Name
<ul> <li>I, in pile debris in terria</li> <li>Ioor Cafeteria/Kitchen</li> <li>X</li> <li>Cafeteria /kitchen side</li> </ul>	9x9 Gray Floor Tile and Mastic	1360 cf			Charlenger, warman fallenser in Concern	
-loor Cafeteria/Kitchen x	narcon ( ) 2 may balance or encourses, and a structure of the located as the activity of the control of the control of the structure of the		<			C Collecter and Action and Call
-loor Cafeteria/Kitchen x			×	WW Sharey		20129932
l Cafeteria /kitchen side		50 lf	<	1		SCARE OF STREET, STREET, SCARE, SCARE
ide	ndse indstic	50 lf			dera Calco	
	ic on bottom of drywall	50 lf				Contract Concernant Statement
Tloor tile continues under	Mastic on bottom of drywall	50 lf 600 sf	××××		2 <b>1</b> /2	Gerration
walls and mastic x 9x9 Floor Tile	ic on bottom of drywall	50 lf 600 sf	××××			The state
1st fl,entryway to stairs and	ic on bottom of drywall loor Tile	5f 5f	× × × ×			
into walk-in freezers x Residual 12	ic on bottom of drywall loor Tile	sf sf	×××××			Contract Protestanting

	10.0									
	8th Floor			Top Roof	Exterior	Exterior	Exterior	1st fl Kitchen	1st fl.Superintendent's Office	LOGATION-OF- ASBESTOS-CONTAINING MATERIAL (ACM) TO BE ABATED IN FACILITY 2 Victor Building Wafehouse
×	×	X		X	×	×	×	X	×	IS LOCATION NORMALLY USED SOLEY BY MAINTENANCE/ CUSTODIAL STAFF? YES NO N/A
Pipe insulation above plaster ceiling	Pipe insulation above plaster ceiling	Contaminated Plaster ceiling		Roofing Material	Exterior Window Glazing	Exterior Window Caulk	Door Frame Caulk	Mastic associated with non-ACM Kitchen sheet flooring	9x9 Red floor tile and Mastic	DESCRIPTION OF ASBESTOS CONTAING MATERIAL (ACM) (IE, THERMAL SYSTEMS INSULATION SURFACING, VAT, OR OTHER MISCELLANEOUS)
8.LF	200LF	1500 SF		32,000 sf	1,420 lf	250 lf	32 lf	1,350 sf	600 sf	AMOUNT REMOVAL REPAIR ENCAPSULATE ENCLOSURE SPECIFY SF OR LF SF OR LF
×	×	X		×	×	X	X	×	×	REMOVAL
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			And the second se			All servers in a later to calculate and the part of the	A PROPERTY CONTRACTOR AND A CONTRACTOR		and a second	ENCAPSULATE
to any scaling pair ve at voluments							and appropriate the processing of some			ENCLOSURE

(As affered

# 1370-03

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

Date of Notification (1)				Nar	ne of Buildi	ng (	wner/Operator	(2)	E E	C_	E [	$\square$	
	22 /	19					thers LLC	(-)			nian dilian di In	And an entranks	alariani <u>a</u> ba
Agencies Notified	Type Notificatio	20			et Address						C.		
🖾 EPA	Initial	511		1.000	See Share a second second					UL	45	201	19
⊠ DOLWD	🖾 Amended						ive Suite 500						
🛛 DOH	Amendmen				State, Zip				Lana and	2000-000-000			
	Emergency	(includi	ng		amden N.		103		ASBE		IS OC FNSI		ROL
(NJAC 5:23-8)	justification)			Nam	e of Conta	ct			Telephone Nur	nber-	51621	1328.79	
1		1							1 800 971-6				
N				FA	ACILITY I	NFC	RMATION						
Name of Facility Where Ab	atement is Tak	ing Plac	ce (3)					Type of Facility	(4)				
The Victor Bldg								School (K-1	2)				
Street Address								Subchapter	8 (Other than K-1)	2)			
201 N. Front Street								homes, etc.	private and comme	ercial	bulldin	gs,	
City (5)								Square Feet	# of Floors		Dida (	1.00	
Camden								90,000	7		Bldg. A	. 370	
County (6)				Cou	inty Code (7	)(ST	ATE USE ONLY)	and the second sec	rior if being demoli	1	100	7	
Camden								Canoni Obe (FI	nor il peirig demoli	sned)	)		
Name of Monitoring Firm H	ired by Building	Owner	(8)	ASCN	No.	N	me of Absteme	nt Contractor (9					
Pennoni							DELTA/BJDS		)				
Street Address							reet Address	, 1140					
515 Grove Street, Sui	te 1B					1	1345 INDUST						
City, State, Zip Code													
Haddon Heights, NJ (	8035						ly, State, Zip Co						
Project Manager for Monitor			Tala	phone	No			ON PA 18966					
Alan Lloyd			1		NO. 6-2875	1 12	lephone No.		License No.				
Start Date (10)	Sche	dulad C			nte (11)		215 322-2900		00783				
<u>2</u> / <u>1</u> /	19	<u>5</u> /					me of OSHA M						
				_ / .	19		riterion Labs	5					
Decupancy Status During A	Datement (Cher	CK only	one)	620			eet Address				071 HT # 1151		-
Facility Closed/Vacated I Abatement Performed O	utside of Norma	enod of	Abater	nent		4	00 Street Ro	ad					
Time of Abatement: <u>7</u> AM	-4PM/ P	a ⊨acilit M-	A M	s - Des	scribe	Cit	y, State, Zip Coo	de			3-110-		
						E	ensalem Pa	19020					
Scope of Work (Check all th	at apply)						-						
_≥3 sf or ≥3 if		Re	novatio	on			Full Conta	inment with Neg	ative Pressure				
∑ ≥160 sf or ≥260 If			molitio				Glovebag	Procedure					
		1					Non-Exem	pted (*) and Nor	n-Friable Procedur	re			
Location of			Locati Jormal					1			oateme	ent T	VDe
Asbestos-Containing Ma	terial (ACM)	Use	d Sole	ly by	Anher		Description of			-	1		
TO BE ABATE	D	Ma	intenar	nce/	(i.e	the	Containing Mate	enal (ACM)	Amount	tem	Repair	Enci	ncl
IN Facility (13)		Cust	odial S (12)	staff?		S	urfacing, VAT, o	Dr	(Specify SF or LF)	Removal	air	apsu	Enclosure
(13)		Yes	No	N/A			ner miscellaneoi			=		Encapsulate	re
st Floor Office		-										Ø	
			$\boxtimes$		Pipe ins	ulat	tion		160 LF				
<sup>st</sup> Floor			$\boxtimes$		Radiator	Ins	ulation		75 SF				
asement							ove Plaster C	alling .					
asement		-				-			600 LF	$\square$			
			$\boxtimes$				ed Plaster Ce	iling	12,000 SF				
ame of Registered Waste F				IDEP V			c Yards of	Name of Regist	ered Landfill			-1	-
SERVICE TRANSPORT	GROUP		1.00000	uler ID 20990	22282624	Was	ste	MINERVA L					
ity, State						Disp	osal Date	City, State					
58 PYLES LANE NEW	CASTLE DE							WAYNESBL	IDE OUIO				
ompleted By (Print or Type)	Title	3					Cined	TATREODU					
CHRISTINE DEL VISCI		SST. A	DAMA		ATOD		Signature	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	J Dat	e	1		
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REMOVAL REPAIR		f X	Re of Concession	X	X	×	X		A STATE OF CONTRACTOR OF CONTON OF CONTO OF	A V				~	×			X		
AMOUNT SPECIFY SF OR LF		32,000 sf	500 LF	150 SF	100 SF	600 sf	60 sf	840 sf	50 If	ECO IF	35 IF	13 If	360 cf	IC ODC	50.If	600 cf		600 sf	1,275 sf	
DESCRIPTION OF ASBESTOS CONTAING MATERIAL (ACM) (IE, THERMAL SYSTEMS INSULATION SURFACING, VAT, OR OTHER MISCELLANEOUS)	YES NO N/A	Old Roof below newer roof	Wire Insulation	Residual 9 X 9 Mastic	Residual 9 X 9 Mastic	Residual 9x9 Mastic	Residual 9x9 Mastic	Duct Tar	Block Pipe Insulation	, and a summariant memory and a summary and a B summary and a summary and	Burger Pipe Insulation	Block Pipe Insulation	19x9. Gray Floor Tile and Mastic		cove base mastic	Mastic on bottom of drvwall	n kan berne sen en e	9x9 Floor Tile	Residual 12 x 12 Mastic	
IS LOCATION NORMALLY USED SOLEY BY MAINTENANCE/ CUSTODIAL STAFF?	NO N/A	X	×	×	×	×	×	×	×	×	×	×	X		×	×		×	×	
LOCATION OF IS ASBESTOS-CONTAINING-NOF MATERIAL (ACM) USED S TO BE ABATED MAINTI IN FACILITY CUSTO	Victor Building Warehouse YES	Victor Building Warehouse	Through out	1st Fl Cafeteria	1st fl small office	2nd Fl Large Rm 40sf under concrete floor	2nd Fl Large Rm entry-stairway	Above Ceilings and Old Roof	Above Large Storage 4" dia	Above Large Storage 1' dia	2nd floor Tool Shop	2nd floor Tool Shop Closet	2nd floor office after bathrm	1st Fl , in pile debris in	cafeteria	1st Floor Cafeteria/Kitchen Side	1st fl Cafeteria /kitchen side floor tile continues under	walls and mastic	1st fl,entryway to stairs and into walk-in freezers	

	NOT	TFIC (F	urs	ON OF .	AS VJ/	SE A(	ESTOS ABA C 8:60 and 5:1	16)	D) E C			V	E
			Na	ame of Bui	ldin	ng	Owner/Operator	(2)					
				Millennia	l P	a	rtners LLC			2	5	2010	- 100 m
			Str	reet Addre	SS					- ;	5 1	1013	
			12	2 Riversi	de	D	rive Suite 500		1		an in the second		and an and a second
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s raking P	lace	(3)											
								School (K-	12)				
								Other (i.e.,	or 8 (Other than K-1	2) arcial	build	inac	
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									75 SF				
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	/19 tification ded dment #3 gency (inclustion) illation is Taking F  illding Own Schedule  (Check on ire Period lormal Fac  0 1) U N Cu  1) U N Cu  10 DE	/ tification ded dment #3 gency (including sation) is Taking Place illation is Taking Place Scheduled Cor  Scheduled Cor  (Check only one ire Period of Ab lormal Facility H  (Check only one ire Period of Ab lormal Facility H  Demo  Demo  Demo DE	(F         /19	/19       Na         tification       Stingle         ded       Cit         ded       Cit         gency (including partion)       Na         partion)       Na         particion       F         is Taking Place (3)       Condition         illation       F         is Taking Place (3)       Condition         illation       Condition         illation       Condition         illation       ASCI         is Taking Place (3)       Condition         illation       Condition         illation       ASCI         illation       Condition         illation       ASCI         illation       Condition         illation       ASCI         illation       Condition         illation       ASCI         illation       ASCI	NOTIFICATION OF (Pursuant to I (Pursuant to I Millennia tification         / _19       Name of Bui Millennia 2 Riversi City, State, Z Camden Name of Con Name of Con Reading Mane of Con Itation         / _19       City, State, Z Camden Name of Con Reading Mane of Con Reading Mane of Con Street Addre 2 Riversi City, State, Z Camden Name of Con Reading Mane of Con Street Addre Camber Nome of Con Street Addre Camber Nome of Con Street Addre County Code ASCM No.         Image: County Code Mane of Con Street Addre County Code Mane of Con Street Addre County Code ASCM No.         Image: County Code Mane of Con Street Addre Street Addre Street Addre Street Addre Street Addre County Code ASCM No.         Image: County Code Mane of Con Street Addre Street Addre Street Addre Street Addre Street Addre ASCM No.         Image: County Code Mane of Con Street Addre Street A	NOTIFICATION OF AS (Pursuant to NJ, Mame of Buildin Millennial P         / _19       Name of Buildin Millennial P         / _19       Millennial P         Uffication       Street Address 2 Riverside         ded       City, State, Zip Q         gency (including pation)       Name of Contact         llation       FACILITY IN         is Taking Place (3)       County Code (7)         illding Owner (8)       ASCM No.         Steet Address       Steet Address         illding Owner (8)       ASCM No.         Steet Address       Steet Address         illding Owner (8)       ASCM No.         Steet Address       Steet Address         illding Owner (8)       ASCM No.         Steet Address       Steet Address         illding Owner (8)       ASCM No.         Steet Address       Steet Address         Quest Solely by Maintenance/ Custodial Staff? (12)       Yes No         Millennial P       Pipe Insult         Maintenance/ Custodial Staff? (12)       Pipe Insult         Maintenance/ Custodial Staff? (12)       Pipe Insult         Maintenance/ Custodial Staff? (12)       Pipe Insult         Maintenance/ Custodial Staff?       Pipe Insult         Quest No       Quest No <td>NOTIFICATION OF ASE (Pursuant to NJA Mame of Building Millennial Pa Jiffication         / _19       Name of Building Millennial Pa Jiffication         ded       Street Address 2 Riverside D City, State, Zip Co Camden NJ 0 Name of Contact         jency (including jation)       Camden NJ 0 Name of Contact         jency (including jation)       FACILITY INF         is Taking Place (3)       FACILITY INF         is Taking Place (3)       County Code (7)(S County Code (7)(S)         illding Owner (8)       ASCM No.         X       S         illding Owner (8)       ASCM No.         X       19         Check only one)       S         ire Period of Abatement       S         Iormal Facility Hours - Describe       City (i.e., the Custodial Staff?         Maintenance/ Custodial Staff?       S         Maintenance/ Custodial Staff?       S         Yes No       N/A         Pipe Ins. ab       Pipe Ins. ab         X       X       Pipe Ins. ab</td> <td>(Pursuant to NJAC 8:60 and 5:         / 19       Name of Building Owner/Operator Millennial Partners LLC         ification       Street Address         2 Riverside Drive Suite 500       City, State, Zip Code         Gamden NJ 08103       Name of Contact         illation       FACILITY INFORMATION         is Taking Place (3)       County Code (7)(STATE USE ONLY)         iilding Owner (8)       ASCM No.       Name of Abateme DELTA/BJDS,         street Address       1345 INDUSTF         City, State, Zip Code       Street Address         1345 INDUSTF       City, State, Zip Consouthamer         Street Address       1345 INDUSTF         City, State, Zip Consouthamer       Street Address         1345 INDUSTF       City, State, Zip Consouthamer         Scheduled Completion Date (11)       Name of OSHA Mc        </td> <td>NO TIFICATION OF ASSESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)         / 19       Name of Building Owner/Operator (2) Millennial Partners LLC         iffication       Street Address         2       Riverside Drive Suite 500         ded       2         gency (including action)       City, State, Zip Code         stating Place (3)       Type of Facility School (K- Subchapte         ifilding Owner (8)       ASCM No.         Name of Contact       Square Feet 90,000         County Code (7)(STATE USE ONLY)       Current Use (F Square Feet 90,000         iilding Owner (8)       ASCM No.         Name of Abatement Contractor (County Code (X) State, Zip Code SOUTHAMPTON PA 18966         Telephone No.       Street Address 1345 INDUSTRIAL BLVD.         Street Address       1400 Street Road         ire Period of Abatement formal Facility Hours - Describe PMAM       Street Road         Check only one)       Street Address         ire Renovation       Street Address         Mini-Enclosure       Glovebag Procedure         PMAM       Description of Asbestos Containing Material (ACM) (i.e., themal systems insulation, surfacing, VAT, or other miscellaneous)         (1)       Wate       Name of Regist Waste         (1)       Pipe Insulation       City, State         &lt;</td> <td>NO INFICATION OF ASSESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)         D           / 19         Name of Building Owner/Operator (2) Millennial Partners LLC         U         U           viffication         Street Address         U         U         U           very (including ation)         Street Address         Camden NJ 08103         Access Access Camden NJ 08103           very (including ation)         Name of Contact         Telephone Nu 1 800 971-4         Telephone Nu 1 800 971-4           is Taking Place (3)         FACILITY INFORMATION         Type of Facility (4) School (K-12)         Subchapter 8 (Oher than K-1 bornes, etc.)           is Taking Place (3)         County Code (7)(STATE USE ONLY)         Current Use (Prior if being demoil bornes, etc.)           ididing Owner (8)         ASCM No.         Name of Abatement Contractor (9) DELTA/BJDS, INC           Street Address 1345 INDUSTRIAL BLVD.         City, State, Zip Code SOUTHAMPTON PA 18966           Check only one)         Telephone No. 856-656-2875         215 322-2900         00783           Scheduled Completion Date (11)         Name of OSHA Monitor City, State, Zip Code Bensalem Pa 19020         00783           Millennance/ Custodial Starty         Abatement Orde Starter Road         Moniter City, State, Zip Code Bensalem Pa 19020         Amount City, State, Zip Code Bensalem Pa 19020           Mather Address A00 Street Road         <t< td=""><td>NOTIFICATION OF ASSESTOS ABATEMENT (Pursuant to NUAC 8:60 and 5:16)       Image: Construction of the second s</td><td>NOTIFICATION OF ASESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)       D       E       G       E       I         / 19       Name of Building Owner/Operator (2)       JII J       JII 2 5       JII 2 5         iffication       Street Address       ZRiverside Drive Suite 500       Ascessros conc deal 42       JII 2 5         iffication       Street Address       ZRiverside Drive Suite 500       Ascessros conc deal 42       LiCleNSING         iffication       Street Address       Type of Facility (4)       Street Address       LiCleNSING         iffication       FACILITY INFORMATION       Type of Facility (4)       Stochas (Kr12)       Subchapter 6 (Oher than K-12)         Stochas (Kr12)       Subchapter 6 (Oher than K-12)       Other (i.e., private and commercial build both genes, etc.)       Subchapter 6 (Oher than K-12)         Stochas (Kr12)       Subchapter 6 (Oher than K-12)       Subchapter 6 (Oher than K-12)       Stochas (Kr12)         Subchapter 6 (Oher than K-12)       Stochas (Kr12)       Stochas (Kr12)       Stochas (Kr12)         Stochas (Kr12)       Stochas (Kr12)       Stochas (Kr12)       Stochas (Kr12)       Stochas (Kr12)         Subchapter 6 (Oher than K-12)       D       DELTARUSJNIC       Current Use (Prior if being demolished)       J12         Idding Owner (8)       ASCM No.       Name of A</td><td>NO THECATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)</td></t<></td>	NOTIFICATION OF ASE (Pursuant to NJA Mame of Building Millennial Pa Jiffication         / _19       Name of Building Millennial Pa Jiffication         ded       Street Address 2 Riverside D City, State, Zip Co Camden NJ 0 Name of Contact         jency (including jation)       Camden NJ 0 Name of Contact         jency (including jation)       FACILITY INF         is Taking Place (3)       FACILITY INF         is Taking Place (3)       County Code (7)(S County Code (7)(S)         illding Owner (8)       ASCM No.         X       S         illding Owner (8)       ASCM No.         X       19         Check only one)       S         ire Period of Abatement       S         Iormal Facility Hours - Describe       City (i.e., the Custodial Staff?         Maintenance/ Custodial Staff?       S         Maintenance/ Custodial Staff?       S         Yes No       N/A         Pipe Ins. ab       Pipe Ins. ab         X       X       Pipe Ins. ab	(Pursuant to NJAC 8:60 and 5:         / 19       Name of Building Owner/Operator Millennial Partners LLC         ification       Street Address         2 Riverside Drive Suite 500       City, State, Zip Code         Gamden NJ 08103       Name of Contact         illation       FACILITY INFORMATION         is Taking Place (3)       County Code (7)(STATE USE ONLY)         iilding Owner (8)       ASCM No.       Name of Abateme DELTA/BJDS,         street Address       1345 INDUSTF         City, State, Zip Code       Street Address         1345 INDUSTF       City, State, Zip Consouthamer         Street Address       1345 INDUSTF         City, State, Zip Consouthamer       Street Address         1345 INDUSTF       City, State, Zip Consouthamer         Scheduled Completion Date (11)       Name of OSHA Mc	NO TIFICATION OF ASSESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)         / 19       Name of Building Owner/Operator (2) Millennial Partners LLC         iffication       Street Address         2       Riverside Drive Suite 500         ded       2         gency (including action)       City, State, Zip Code         stating Place (3)       Type of Facility School (K- Subchapte         ifilding Owner (8)       ASCM No.         Name of Contact       Square Feet 90,000         County Code (7)(STATE USE ONLY)       Current Use (F Square Feet 90,000         iilding Owner (8)       ASCM No.         Name of Abatement Contractor (County Code (X) State, Zip Code SOUTHAMPTON PA 18966         Telephone No.       Street Address 1345 INDUSTRIAL BLVD.         Street Address       1400 Street Road         ire Period of Abatement formal Facility Hours - Describe PMAM       Street Road         Check only one)       Street Address         ire Renovation       Street Address         Mini-Enclosure       Glovebag Procedure         PMAM       Description of Asbestos Containing Material (ACM) (i.e., themal systems insulation, surfacing, VAT, or other miscellaneous)         (1)       Wate       Name of Regist Waste         (1)       Pipe Insulation       City, State         <	NO INFICATION OF ASSESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)         D           / 19         Name of Building Owner/Operator (2) Millennial Partners LLC         U         U           viffication         Street Address         U         U         U           very (including ation)         Street Address         Camden NJ 08103         Access Access Camden NJ 08103           very (including ation)         Name of Contact         Telephone Nu 1 800 971-4         Telephone Nu 1 800 971-4           is Taking Place (3)         FACILITY INFORMATION         Type of Facility (4) School (K-12)         Subchapter 8 (Oher than K-1 bornes, etc.)           is Taking Place (3)         County Code (7)(STATE USE ONLY)         Current Use (Prior if being demoil bornes, etc.)           ididing Owner (8)         ASCM No.         Name of Abatement Contractor (9) DELTA/BJDS, INC           Street Address 1345 INDUSTRIAL BLVD.         City, State, Zip Code SOUTHAMPTON PA 18966           Check only one)         Telephone No. 856-656-2875         215 322-2900         00783           Scheduled Completion Date (11)         Name of OSHA Monitor City, State, Zip Code Bensalem Pa 19020         00783           Millennance/ Custodial Starty         Abatement Orde Starter Road         Moniter City, State, Zip Code Bensalem Pa 19020         Amount City, State, Zip Code Bensalem Pa 19020           Mather Address A00 Street Road <t< td=""><td>NOTIFICATION OF ASSESTOS ABATEMENT (Pursuant to NUAC 8:60 and 5:16)       Image: Construction of the second s</td><td>NOTIFICATION OF ASESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)       D       E       G       E       I         / 19       Name of Building Owner/Operator (2)       JII J       JII 2 5       JII 2 5         iffication       Street Address       ZRiverside Drive Suite 500       Ascessros conc deal 42       JII 2 5         iffication       Street Address       ZRiverside Drive Suite 500       Ascessros conc deal 42       LiCleNSING         iffication       Street Address       Type of Facility (4)       Street Address       LiCleNSING         iffication       FACILITY INFORMATION       Type of Facility (4)       Stochas (Kr12)       Subchapter 6 (Oher than K-12)         Stochas (Kr12)       Subchapter 6 (Oher than K-12)       Other (i.e., private and commercial build both genes, etc.)       Subchapter 6 (Oher than K-12)         Stochas (Kr12)       Subchapter 6 (Oher than K-12)       Subchapter 6 (Oher than K-12)       Stochas (Kr12)         Subchapter 6 (Oher than K-12)       Stochas (Kr12)       Stochas (Kr12)       Stochas (Kr12)         Stochas (Kr12)       Stochas (Kr12)       Stochas (Kr12)       Stochas (Kr12)       Stochas (Kr12)         Subchapter 6 (Oher than K-12)       D       DELTARUSJNIC       Current Use (Prior if being demolished)       J12         Idding Owner (8)       ASCM No.       Name of A</td><td>NO THECATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)</td></t<>	NOTIFICATION OF ASSESTOS ABATEMENT (Pursuant to NUAC 8:60 and 5:16)       Image: Construction of the second s	NOTIFICATION OF ASESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)       D       E       G       E       I         / 19       Name of Building Owner/Operator (2)       JII J       JII 2 5       JII 2 5         iffication       Street Address       ZRiverside Drive Suite 500       Ascessros conc deal 42       JII 2 5         iffication       Street Address       ZRiverside Drive Suite 500       Ascessros conc deal 42       LiCleNSING         iffication       Street Address       Type of Facility (4)       Street Address       LiCleNSING         iffication       FACILITY INFORMATION       Type of Facility (4)       Stochas (Kr12)       Subchapter 6 (Oher than K-12)         Stochas (Kr12)       Subchapter 6 (Oher than K-12)       Other (i.e., private and commercial build both genes, etc.)       Subchapter 6 (Oher than K-12)         Stochas (Kr12)       Subchapter 6 (Oher than K-12)       Subchapter 6 (Oher than K-12)       Stochas (Kr12)         Subchapter 6 (Oher than K-12)       Stochas (Kr12)       Stochas (Kr12)       Stochas (Kr12)         Stochas (Kr12)       Stochas (Kr12)       Stochas (Kr12)       Stochas (Kr12)       Stochas (Kr12)         Subchapter 6 (Oher than K-12)       D       DELTARUSJNIC       Current Use (Prior if being demolished)       J12         Idding Owner (8)       ASCM No.       Name of A	NO THECATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

LOCATION OF	IS LOCATION	- Calerrent Lore	AMOUNT	REMOVAL REPAIR	ENCAPSULATE	ENCLOSURF	
MATERIAL (ACM) TO BE ABATED	NORMALLY USED SOLEY BY MAINTENANCE/	ASBESTOS CONTAING MATERIAL (ACM) (IE, THERMAL SYSTEMS INSULATION SURFACING, VAT, OR	SPECIFY SF OR LF				6.
IN FACILITY	CUSTODIAL STAFF?	COLL WE ADDRESS	an an an an ar an				
Victor Building Warehouse	YES NO N/A						
Victor Building Warehouse	X	Old Roof below newer roof roof	32 000 cf		TRANSPORTATION OF THE PARTY OF	Communication of the second second	
Through out	×	and the environmentation of the construction of the statement of the statement and the statementation of the			Contract of the contract of the contract of		
1st Fl Cafeteria	X	Providence and support and support and support of the support of t			AND A DESCRIPTION OF A	THE REAL PROPERTY AND INCOME.	
1st fl small office		Residual 9 X 9 Mastic	100 SF	\ \	Section Indication for summarizing of	TALI PETERSIPARA ANAL PROVINCI MEN	
2nd Fl Large Rm 40sf under					oreneuronetouroverorenetoreneto		
concrete floor	×	Residual 9x9 Mastic	600 sf	200718 X		<b>G</b> 67 (100, 200)	
2nd Fl Large Rm entry-stairway	×	Residual 9x9 Mastic	60 sf				
Above Ceilings and Old Roof	×	она по	840 sf	V		Construction of the output of the party of the output of t	
Above Large Storage 4" dia	×	In the managementation of the second s	ISO IF			And the state of t	
Above Large Storage 1' dia	×	Block Pipe Insulation	11 U 1		and the second se	COMPANY OF A DESCRIPTION OF A DESCRIPTIO	
2nd floor Tool Shop	ARTICLES ALCONOMIC SCIENCES	and outparts to the second superside the second second superstant second superstant second seco		X			
2nd floor Tool Show Cloont		DIUCK F1/PEINSUMMANTATIONALION	35 If	×			
		Block Pipe Insulation	3 If	X	AN OTHER PRESERVE AN ADDRESS OF THE PROPERTY OF		
Land floor office after bathrm	X	9x9 Gray Floor Tile and Mastic	360 sf	A restaurant of the second		Parameters an address of	
1st Fl , in pile debris in	No.	A NORMAL PROVIDED AND A DESCRIPTION OF A	THE REAL PROPERTY AND INCOME.	Section of the sectio	and a second sec	CONSISTENCE OF THE REPORT OF THE PARTY OF TH	
cafeteria	X	cove base mastic	50 If	×			
1st Floor Cafeteria/Kitchen					And the second se		
Side	×	Mastic on bottom of drywall	600 cf				
1st fl Cafeteria /kitchen side			10 000		And a second sec	An other statements in the second sec	A second se
floor tile continues under	ronas Trans			The second		and the second sec	3
walls and mastic	X		600 sf	X			ß
1st fl,entryway to stairs and							C
into walk-in freezers	X	Residual 12 x 12 Mastic	1,275 sf	×		25 SCON ENSIN	EI
					7		V
					******		
					17#14" a. y. "	All and a second	Le com
							2 2 minutes

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2		RECEIVED
ENCLOSURE		ASBESTOS CONTROL &
ENCAPSULATE		I I CEP SING
REMOVAL		
AMOUNT SPECIFY SF OR LF	600 sf 600 sf 1,350 sf 32 lf 1,420 lf 1,420 lf 32,000 sf	
ION DESCRIPTION OF ASBESTOS CONTAING MATERIAL (ACM) (IE, THERMAL SYSTEMS INSULATION E/ SURFACING, VAT, OR TAFP? OTHER MISCELLANEOUS)	V/A 9x9 Red floor tile and Mastic Mastic associated with non-ACM Kitchen sheet flooring Mastic associated with non-ACM Kitchen sheet flooring Exterior Window Caulk Exterior Window Caulk Exterior Window Glazing Roofing Material	
IS LOCATION NORMALLY USED SOLEY BY MAINTENANCE/ CUSTODIAL STAFF?	YYES NO N X X X X X X X X X X X X X X X X X X X	
LOCATION OF ASBESTOS-CONTAINING MATERIAL (ACM) TO BE ABATED IN FACILITY	Victor Building WarehouseYESNON/AVictor Building WarehouseYESNON/A1st fl Superintendent's OfficeX9x9 Red fl1st fl KitchenXMastic associaExteriorXDoor Frame (XExteriorXExterior WincExteriorXKExteriorXRoofing MateTop RoofXRoofing Mate	

1370-03		N	OTIF	ICAT	ION OF	f New Jersey ASBESTOS AB	ATEMENT					
				(Purs	uant to N	JAC 8:60 and 5	5:16)					
Date of Notification (1)						ding Owner/Operate		I'm P	M F	э п	0.0	
		19	0		Millennia	I Partners LLC	or (2)	们则严	(b) [c	<u></u>	W	E
	pe Notificat	ion		St	reet Addres	SS						
	Initial			1.		de Drive Suite 50	in.		JUL 2	5 0	010	and in
	Amended				ty, State, Zi			1 Cret		5 6	013	
	Amendmer				Camden N							i.
	Emergency justification		ling		ame of Cont			ASB	ESTOS	CON	TROP	2.
	Cancellation	P		ING	ine of Cont	tact		Telephone	e Number	ISINC	2	- 125
								1 800 9	71-6773	;	and the loss of the loss	₩ instate j
Name of Facility Where Abate	mantin T I			F	ACILITY	INFORMATION						
The Victor Bldg	ment is Tak	ang Pla	ace (3)				Type of Facility	(4)				
Street Address							School (K-1					
							Subchapter	8 (Other than	1 K-12)			
201 N. Front Street							V Other (i.e., p	private and co	mmercial	buildi	ngs,	
City (5)							nomes, etc.	)			101-001-0	
Camden							Square Feet	# of Floor	rs	Bldg.		
County (6)				Co	unty Code	(7)(STATE USE ONLY)	90,000	7		100	) +	
Camden					and occe	(INSTATE USE ONLY)	Current Use (Pr	rior if being de	emolished	)		
Name of Monitoring Firm Hired	by Building	Owne	r (8)	ASC	M No.	Nome						
Pennoni			(1) (2)	1.00	WI 190.		nent Contractor (9)	)				
Street Address				1		DELTA/BJD	S, INC					
515 Grove Street, Suite	IR					Street Address		-	-	000000		
City, State, Zip Code							TRIAL BLVD.					
Haddon Heights, NJ 080	25					City, State, Zip C	Code					-
Project Manager for Monitoring						SOUTHAMP	TON PA 18966					
Alan Lloyd	Firm			ephone		Telephone No.		License N	0			
					6-2875	215 322-2900	)	00783	0.			
Start Date (10)	Sche				Date (11)	Name of OSHA M	Monitor	00100				
/ /9		3	/ _ 3	1 /	19	Criterion Lat						
Occupancy Status During Abate	ement (Chee	ck only	one)			Street Address						
Facility Closed/Vacated Duri	na Entire P	eriod of	f Ahate	ment		400 Street Ro						
Abatement Performed Outsid	le of Norma	I Facili	ty Hou		scribe							
Time of Abatement: <u>7</u> AM- <u>4</u> P	M/P	M	AM			City, State, Zip Co						
Scope of Work (Check all that a	(vlac					Bensalem Pa	19020					
] ≥3 sf or ≥3 lf ⊠ ≥160 sf or ≥260 lf			enovat emolitio	ion on		Slovebac	tainment with Nega losure g Procedure mpted (*) and Non				÷	
			s Locat		T			I-Filable Proc				
Location of Asbestos-Containing Materia	LACAN		Norma ed Sole			Description o	f		A	batem	ent T	уре
TO BE ABATED		Ma	intena	nce/	Asbe	stos Containing Ma	terial (ACM)	Amount	Re	Repair	E	5
IN Facility		Cus	todial	Staff?	(1.6	., thermal systems i surfacing, VAT,	nsulation,	(Specify		pair	cap	clos
(13)		N.	(12)	Terr	-	other miscellaned	ous)	SF or LF)	al		Encapsulate	Enclosure
<sup>t</sup> Floor Office		Yes	No	N/A	Ding						ate	
<sup>st</sup> Floor					Pipe ins Radiato	r Insulation		160 LF				
asement ADD	and the second se					a above Plaster	Ceiling	75 SF				
asement 1_ADD	5-7-3-9 3-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		$\boxtimes$			inated Plaster C		600 LF				
ame of Registered Waste Haule			Contraction of the	JDEP V		Cubic Yards of	-	12,000 SI				
SERVICE TRANSPORT GR	ROUP		H	auler IE 20990	D No.	Waste	Name of Registe					
ty, State						Disposal Date	City, State					
58 PYLES LANE NEW CAS	TLE DE						WAYNESBU	RG OLUC				
ompleted By (Print or Type)	Title	-				Signature		NG, OHIO				
CHRISTINE DEL VISCIO	A	SST. A		ISTR	ATOR	Signature			Date	-	6	
3-41					on				2-1	5-0	20	19

1370-03	N	OTIF	ICATI( (Pursu	ON OF A	New Jersey SBESTOS ABA JAC 8:60 and 5:	TEMENT 16)						
Date of Notification (1)			Na	me of Build	ling Owner/Operator	(2)	11990 FD	(1)	C		<u>Л</u> Г	2 parente
/ /	/19				Partners LLC	(-)		U	5	] [	y E	2
Agencies Notified Type Not	ification		Stre	eet Addres	S		- [[ras]]					
EPA Initial			2	Riversid	e Drive Suite 500	)		JUL	2.5	20	19	le
and the second s	ded 🔍 dment #1			, State, Zip								
	jency (inclu	dina		amden N				ار از میروند. ایک فور روز می معر	an a			-
(NJAC 5:23-8) justific	ation)	ung		ne of Conta			Telephone Nu		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1. 1	SOL 8	A
Cance	llation						1 800 971-				San Ind S. Storage Sond	uth - dr-air
			F	ACILITY	NFORMATION		1 1000 011-	0115				-
Name of Facility Where Abatement i	s Taking Pla	ace (3)				Type of Facility	(4)					_
The Victor Bldg						School (K-12	2)					
Street Address						Subchapter	3 (Other than K-	12)				
201 N. Front Street City (5)						homes, etc.)	rivate and comm	ercial	buildir	ngs,		
Camden						Square Feet	# of Floors	1	Bldg. ,	Age		-
County (6)						90,000	7		100			
Camden			Cou	unty Code (	(7)(STATE USE ONLY)	Current Use (Pri	or if being demo	lished)				1
Name of Monitoring Firm Hired by Bu	ilding Out	10	1000									
Vertex	mang Owne	er (8)	ASCN	A No.		ent Contractor (9)						1
Street Address					DELTA/BJDS	S, INC						
700 Turner Way Suite 105					Street Address							1
City, State, Zip Code					1345 INDUST							
Aston Pa 19014					City, State, Zip Co	ON PA 18966						1
Project Manager for Monitoring Firm		Te	lephone	No.	Telephone No.	ON PA 18966					-	
David Brown				3-8902	215 322-2900		License No.					
Start Date (10)	Scheduled				Name of OSHA M		00783		_			
/ /9	3				Criterion Lab							
Occupancy Status During Abatement	(Check only	one)			Street Address							
Facility Closed/Vacated During Ent	tire Period c	fAbate	ement		400 Street Ro	ad		3				
Abatement Performed Outside of N	Iormal Facil	ity Hou	ırs - Des	scribe	City, State, Zip Co			_				
Time of Abatement: <u>7</u> AM- <u>4</u> PM/	PM	AM	l		Bensalem Pa							
Scope of Work (Check all that apply)												
$\Box \ge 3 \text{ sf or } \ge 3 \text{ lf}$		enova			Full Conta	ainment with Nega	tive Pressure					
⊠ ≥160 sf or ≥260 lf		emoliti	on		K Glovebag	Procedure						
		s Loca	tion	1		npted (*) and Non-	-Friable Procedu	Ire				
Location of		Norma			Description of			Ab	atem	ent T	ype	
Asbestos-Containing Material (ACM <u>TO BE ABATED</u>	M	ed Sol aintena	ance/	Asbe	stos Containing Mat	erial (ACM)	Amount	Rer	Repair	Enc	Enc	
IN Facility	Cu	stodial		(1.6	, thermal systems ir surfacing, VAT,	or	(Specify SF or LF)	Remova	bair	aps	Enclosure	
(13)	Yes	(12) No	N/A		other miscellaneo	us)		1		Encapsulate	Ire	
1 <sup>st</sup> Floor Office				Dine In-	ulatia-			-		Ø		
1 <sup>st</sup> Floor				Pipe ins			160 LF	$\boxtimes$				
				Radiato	r-Insulation		℃75 SF~	$\boxtimes$				
								Π	Π			
Name of Registered Waste Hauler		N	IJDEP V	Vaste	Cubic Yards of	Name of Registe	red Landfill					
SERVICE TRANSPORT GROUP	2	H	auler ID 20990		Waste	MINERVA LA						
City, State			20000		Disposal Date	City, State						
58 PYLES LANE NEW CASTLE	DE					WAYNESBU	RG. OHIO					
Completed By (Print or Type)	Title				Signature			to				
CHRISTINE DEL VISCIO	ASST.	ADMI	NISTR	ATOR	1 ha	t'i)o.		Z	L-2	20	G	
SB-41					/ · / · / ·	meril	incon	6	~ 6	-01		

370 .0	ſ	VOTIF	ICAT	ION OF A	f New Jersey ASBESTOS AB	ATEMENT	RR	67	n	<u>n<i>n</i></u>	• 1522
370-03			(Purs	uant to N	JAC 8:60 and 5	:16)	n <u>e</u> C	F		W	E
Date of Notification (1)			N	ame of Build	ding Owner/Operato	or (2)	10021				
	/19			Millennial	Partners LLC	n (2)		2	5 20	010	
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## DESCRIPTION OF THE WORK

This Section describes the procedures to remove asbestos containing insulating materials utilizing "wrap and cut" methods.

### PRODUCTS

- Amended Water
- Wettable/Adhesive Lagging Cloth
- Encapsulant (if specified in Section "Scope of Work")
- Disposal Bags
- Six mil polyethylene sheeting
- HEPA vacuum
- Duct Tape
- "Saw-zall"

### DESCRIPTION OF THE WORK

All work shall be conducted in strict accordance with applicable federal, state and local regulations and shall be coordinated through the Owner's representative.

AbateTech, Inc. shall adequately wet all ACM with amended water and wrap all exposed thermal system insulation with two individual layers of 6-mil polyethylene sheeting. Each layer shall be sealed with high grade duct tape, and "candy-striped" around the pipe system to the best seal possible.

Upon the wetting, wrapping and sealing of thermal system insulation AbateTech, Inc. shall cut the pipe in existing spatial openings into sections no greater than ten (10) linear feet. These wetted, wrapped and sealed sections shall be properly labeled and disposed of as asbestos waste.

Where no spatial openings are present, AbateTech, Inc. shall perform glove bag abatement to remove approximately six (6) inches of ACM thermal system insulation to facilitate the cutting of the pipe as described.

AbateTech, Inc. shall remove all asbestos containing materials from the work site in double 6-mil polyethylene waste bags or impermeable packages. <u>All asbestos materials shall be</u> <u>adequately wet with amended water using a fine low pressure sprayer or other wetting</u> <u>mechanism.</u> The surfactant used by AbateTech, Inc. shall be available at all times at the work site. AbateTech, Inc. shall assure that all asbestos waste materials are sufficiently saturated with amended water to prevent fiber emission and/or visible emissions.

All asbestos waste bags, pipe sections and other waste packages shall be labeled with the

prescribed Federal OSHA warning signs and shall include site specific waste generator information.

AbateTech, Inc. shall provide a fully enclosed, watertight waste container complete with a locking device for storage of all contaminated waste removed from the site. The waste container shall have asbestos warning signs affixed to all sides and doors

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