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

Date of Notification	(1) .		N	ame of	f Buil	ding	Owner/Operator	(2)					
7/21/2014				Barl	bara	Fu	rnari		1				6
Agencies Notified	Type Notifi	cation	s	treet	Addre	ess		75	5			1.0	
[]EPA	[X]Initia	1		31	Erns	t A	ve .		2814 Jl	11 00			
[]DEP	Notif	ication	c	ity,	State,	Zip	Code		- 1.00	"< 28	PP	1 4: 5	, C'
[X]DOL	[]Amende			Blo	omfi	eld	NJ,07003						. •
[X]DOH	NOTII	ication	1 -	lame o	f Cont	act		Telephon	e Number /	Inches	20	TIPO	,
[]DCA	[]EMERGE	NCY		Bari	bara	Fu	rnari				14	G G	(4)
	[]Cancel	lation	Ш										7.1
						LITY I	NFORMATION						
Name of Facility When Same as above	ce Abatemer	nt is Ta	king	g Plac	e (3)			Type of Facil	(K-12)				
Street Addres	***************************************							[]Subchap [X]Other (i.e., priv	ate &	COM	mer-	
								Square Feet	# of Flo			. Age	
City (5		Count	y (6	6) Esse	x	Cou	nty Code (7)	Square reec	. 01 110	010	Daug		
						(ST	ATE USE ONLY)	Current Use (Prior if b	eing d	lemo.	Lished)
Name of Monitoring Fi	irm hired h	y Build	ling	ASC	No.			ment Contracto					
N/A					1.71 - 1.TO				,				
Street Address							Street Addres	stopher St					
City, State, Zip Code	9						City, State,		202				
							Montclai	Lr, NJ 070	42				
Project Manager for M		Tele	ephone A	Numb	er	Telephone Num (973)744			Licens 003		umber		
Scheduled Start Date 7-31-14 Month Day Ye Occupancy Status Duri	ar	8-1	-14 Da	4 ay	Year		Name of OSHA N/A Street Addres						71.50
[X]Facility Close of Abatement	ed/Vacated						Direct Address			12.00			
[]Abatement Per Hours - Descr					acilit	Y	City, State,	Zip Code					
[]other - Descr					<u>ipt»</u>			ě.					
Scope of Work (Check	all that a	apply)					U						
[X]≥3 sf or 2 []≥160 sf or			2500] Renov			[X]Mini	Containment wi i-Enclosure abag Procedure Friable Procedu		e Pres	sur	Э	
			T.0	Is	,					P	bate	ment	
Location Asbestos-Cont Material (TO BE ABA In Facili (13)	taining ACM) TED		No S By te Cus Sta	Used Solely Main nance stodia	y - / 11 2)		Description Asbestos-Com Material (i.e., thermal sulation, surf or other misce	taining (ACM) 1 systems Tacing, VAT,	Amount (Specif SF or LF)	Y	M O V	R CAPSUL	ENCHOSDE
Basement	The second second	1	es	No	N/A X	Pip	e Insulat	ion	140 1:	E X		Ţ.	E
						Boi	ler		20 sf	X			
Name of Registered Wa			Hau	DEP Wa			oic Yards Waste 1.5	Name of Regi		dfill			
City, State			1				sposal Date	City, State					
Montclair, NJ	07042					8	3-4-14	Morrisvi	lle, PA	190	067		
Completed By (Print of Constantine Vi		Title Presi	der	nt			Signature			Dat 7-	e 21-1	4	
							[C V]	1 lign					

mo 1963907607

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:20/N.J.A.C. 7:26-2.12)

68

Date of Notification	(1):				vner/Operator (2)			2014	JUL 28	3 PI	H 1	50	
07/18/2014 Agencies Type Not	ification		Addre	RC Chur	cn					- 11	14.	<u>ે દ</u>	
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BEPA Amend	ed			Zip Code			6	A	& LIUI	Wai	ue Ne	UI.	
DEP Amendm				rick, NJ (08901					1401	!10	, ,	
DOL Emerge		THE RESERVE OF THE PARTY OF THE	of Co	ntact:			Telephone	e Numl	ner:			1,	
DOH justific		Robe	ert										
□ DCA □ Cancell	ation												
					FACILITY INFO	ORMA	TION						
Name of Facility H	ouse					Туре	e of Facility (4):						
101 Jefferson Street						100000000000000000000000000000000000000	hool (K-12)	12)	·				
City/ (5)	Coun	ty (6):		Count	y Code (7):	- 4.0022	bchapter 8 (Other than K her (i.e., private & comm		uildings ho	mes e	tc.)		
Orange	Essex			Count	y Code (7).				-		,		38
						Squ	are Feet:	#	of Floors:	3			
							g. Age						
				<u></u>	T1122111		rent Use : House	V: 3					
Name of Monitoring Apex Development		d by Bı	iilding	Owner:	ASCM No.:	Nan	ne of Abatement Contr	ractor (9):				
Apex Development	, IIIC.					Apo	ex Development, In	c.					
Street Address:	***************************************					Stre	et Address:						
358 Broadway						7.50	0 D-4 DI						
City Court 71 Could	20.7						8 Rutgers Place						
City, State, Zip Cod							, State, Zip Code:						
Newark, NJ 07104							amus, NJ 07652						
Project Manager for		g Firm:			Telephone No.: 973-350-0101	Tele	ephone No.:	Lice	ense No.:				
Sylvester Oraegbu							3) 350-0101	012	15				
Start Date (10): 07/26/14		Schedul 07/27/1		npletion	Date (11):	100000000000000000000000000000000000000	ne of OSHA Monitor: ro Analytical Laborato	ories					
Occupancy Status Dur	ing Abateme	nt (Chec	k only	one)		Stre	et Address:						
☐ Facility Closed/vaca					t	75720.0556-77	West 36th Street, Sui	te 203					
☐ Abatement Performe Describe:	d Outside of	f Normal	Facility	Hours			y, State, Zip Code: v York, New York, 10	0018					
☐ Other Describe:													
Scope of Work (Check	all that app	ly):					EL Paul C			Magai	ino Da		
$\square \ge 3 \text{ sf or } \ge 3 \text{ lf}$	6025		34	- Reno			□ Mini-	Enclos	ment with	Nega	live Pi	essure	
$\square \ge 160 \text{ sf or } \ge 260$	lf			□ Demo	olition		□ Glove	bag Pr	ocedure d (*) and N	lon-Fr	iable P	rocedi	ire
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Location o		1	Vorma	lly	A shootes Con	escript	ion of				Ty	/pe	
Asbestos-Containing	g Material	Use	d Sole	ly by	(i.e., therma	al syst	Material (ACM) ems insulation,			_		Ħ	ш
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Name of Registered TRI-STATE TRAN			IC.	NJDL	I Waste Hauter ID	140	of Waste: 30		NERVA	stered		ii. ERPRI	ISES
									SOC, INC.				
City, State:			Disp	osal Date	2:		City, State:						
Bronx, NY 10474 Completed By:				Title:	****	Qian.	Waynesburg, OH 4 ature:	4688	Date:				
Sylvester Oraegbung	am			Presid	ent		Ž.		07/18/20	14			

MO 1963907606

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:20/N.J.A.C. 7:26-2.12)



· 7 - 6 . 100 Date of Notification (1): Name of Building Owner/Operator (2) 07/18/2014 Saint Peters RC Church 2014 JUL 28 PH 4: 40 Agencies Type Notification Street Address: Notified 94 Somerset Street ☐ Initial City, State, Zip Code: □ Amended FEPA SESTIS CONTROL Amendment#: New Brunswick, NJ 08901 I DEP Telephone Number LIUCHOING □ Emergency Name of Contact: DOL (including Robert justification) DOH ☐ Cancellation **□** DCA **FACILITY INFORMATION** Name of Facility House Type of Facility (4): ☐ School (K-12) 105 Jefferson Street ☐ Subchapter 8 (Other than K-12) ☐ Other (i.e., private & commercial buildings, homes, etc.) City/ (5) County (6): County Code (7): Orange Essex Square Feet: # of Floors: 3 Bldg. Age Current Use: House Name of Monitoring Firm Hired by Building Owner: ASCM No .: Name of Abatement Contractor (9): Apex Development, Inc. Apex Development, Inc. Street Address: Street Address: 358 Broadway 658 Rutgers Place City, State, Zip Code: City, State, Zip Code: Newark, NJ 07104 Paramus, NJ 07652 Telephone No.: Project Manager for Monitoring Firm: Telephone No.: License No.: Sylvester Oraegbunam 973-350-0101 (973) 350-0101 01215 Start Date (10): Scheduled Completion Date (11): Name of OSHA Monitor: 07/26/14 07/27/14 Metro Analytical Laboratories Occupancy Status During Abatement (Check only one) Street Address: 255 West 36th Street, Suite 203 ☐ Facility Closed/vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours City, State, Zip Code: Describe New York, New York, 10018 □ Other Describe: Scope of Work (Check all that apply): ☐ Full Containment with Negative Pressure $\square \ge 3$ sf or ≥ 3 lf $\square \ge 160$ sf or ≥ 260 lf □ Renovation ☐ Mini-Enclosure □ Demolition ☐ Glovebag Procedure □ Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Description of Asbestos Containing Material (ACM) Туре Location of Normally Used Solely by Asbestos-Containing Material (i.e., thermal systems insulation, Maintenance/ Encapsulat (ACM) Removal surfacing, VAT, or Amount Repair Custodial/ TO BE ABATED other miscellaneous) (Specify Staff? IN Facility SF or LF) (12)(13)Yes No N/A ON THE SIDE OF THE X 60 SF SIDING BUILDING NJDEP Waste Hauler ID No .: Cubic Yards Name of Registered landfill: Name of Registered Waste Hauler: of Waste: 30 MINERVA TRI-STATE TRANSFER ASSOC., INC. **ENTERPRISES** ASSOC, INC. City, State: Disposal Date: City, State: Bronx, NY 10474 Waynesburg, OH 44688 Completed By: Title: Signature: Date: Sylvester Oraegbunam 07/18/2014 President

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

Date of Notificatio	n (1)								12:120-7) r/Operator				-				
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[]DCA	[]EMERG	ENCY					icNea	1			rerephor	IGE MITHING .		;	5.71		
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										Curr	ent Use (Prior if	beir	ig de	moli	shed)
Name of Monitoring	Firm hired	by Bu	ildin	or As	SCIM	No.		Name	of Abate	ment	Contracto	r (9)					
Owner (8) N/A				-		W.771.74.7			TECH M								
Street Address									et Addres								27
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City, State, Zip Co	ty, State, Zip Code								, State, !				+-	- To-16			
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Project Manager for	Monitoring	Firm	Tel	lepho	ne	Numbe	er	Tele	phone Numl	ber			Lic	cense	Num	ber	
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Scheduled Start Date	e (10) S	Sched.	Compl	letic	n l	Date	(11)	Name	of OSHA 1	Monit	or		+				
8-4-14		8	-5-1	4				N/A	7								
Month Day Y Occupancy Status Du	ear	Mont		Day		Year											
[X]Facility Clo	sed/Vacate							Stre	et Address	S							
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Hours - Desc	ribe: «OffH	ours I	escri	pt»			·x	City	, State, S	Zip C	oae						
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Scope of Work (Check	k all that	apply)						[]Full	Conta	inment wi	th Negati	ive F	TORR	ire		
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AZTECH MANAG	AZTECH MANAGEMENT, INC.					, no.		wasc	e 1.5	٠. خا	R.O.W.	S.					
City, State	07040						20	7	l Date	1000000	y, State			00			
Montclair, NJ	0/042						8	-6-	14	Mo	rrisvi	тте, Е	A l	1906) /		
Completed By (Print	or Type)	ritle	(i						Signature				t	Date			
Constantine V	ivian	Pre	side	ent					dVi	ic				7-21			
		1							UVI	U			1				

MO#16103537818

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Date of Notification (1)					Name	of Buildin	g Owner/O	perator (2	2)			Tange.	1
07	22 /	14			Susan	Capetta				2814 JU	1 20	_	
Agencies Notified	Type Notif	ication				Address				- 00	- 20	PM 4:	tir
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	Carlos	180011			Susan	Capetta				i see			
					FA	CILITY IN	VFORMAT	TION					
Name of Facility Where A	batement	s Taking	Place	(3)					Type of Facility	(4)			
Private home									School (K-1;				
Street Address						1100				8 (Other than K			
45 Fairmont Avenue									Other (i.e., ; homes, etc.		nmercial b	uildings	ķ.
City (5)									Square Feet	# of Floors	1.0	lidg. Age	
Somerville, NJ 08876									oquare reet	# 01 1 1001s		nog. Agt	-
County (6)					T Coun	ty Code (7)	/STATE //S	E ONLY)	Current Use (P	rios if balan da			
T 100					Ocui	ty code (1)	(SIAIL OS	LONLI	Current use (F	nor ii being dei	nonsnea)		
Somerset Name of Monitoring Firm	Hirod by D	illaliae O		(D) T	10011		1						
reame or wormorning rinin	miled by 5	anamg C	wher	(0)	ASCM	No.	Name of	Abateme	ent Contractor (9)			
							Gr Tech	LLC					
Street Address							Street Ad	ddress					
	2.23						576 Vall	ley Rd#	283				
City, State, Zip Code							City, Sta	te, Zip Co	ode				
							Wayne,	NJ 0747	0				
Project Manager for Moni	toring Firm			Tele	phone	No.	Telephor			License No).		
				1	38		973-638	1777		01127			
Start Date (10)		Sched	uled C	cmole	tion Da	te (11)		OSHA M	Ignitor	01127			
08 /01 /	14	The second secon				CONTROL 100 ACC.							
	77.00	1		-1000000	_ ′ ·				nsultants,Inc				_
Occupancy Status During				11.5			Street Ad	idress					
X Facility Closed/Vacate							20-21 W	agaraw	Road, Bldg .#	34A			
Abatement Performed Time of Abatement:	AM-	INDITION	racilit M	/ Hour	s - Des	AM.	City, Stat	te, Zip Co	ode			1 2 2 2 2 2 2	
		,	u			WIAI	Fair Law	n, NJ 0	7410				
Scope of Work (Check all	that apply)		N (100 - 100 p.m.)		Arter 11		П	Clean up	and decontamin	nation with neg	ative pres	sure	
▼ >3 sf or >3 if			V Pa	novati	22		\bowtie	Full Cont	tainment with Ne	gative Pressur	e		
>3 sf or >3 lf > 160 sf or >260 lf				molitic				Mini-Encl Glovebac	Procedure	Tent with Neg	ative Pres	sure	
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				Locat							A	batemer	it Type
Location				Vorma				cription o				T	
Asbestos-Containing N TO BE ABA		SM)		d Sole Intena	671.47.11.63.436.4				terial (ACM)	Amount	1 -	Repair	Enclosure
IN Facilit				todial		(1.6	e., thermal :	systems i ing, VAT,		(Specify SIF or LF	Jō.	air -	Sue
(13)				(12)				iscellane		OII O: Li	<u>a</u>		Enclosure
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Gr Tech LLC				(03378	35	TBD		T.R.R.F. Inc				
City. State						-	Disposal	Date	City. State	THE RESERVE THE RE		PUBLISHED STORY	
Wayne, NJ 07470							TBD		Tullytown, P	Δ			
Completed By (Print or Ty	rpe)	Titie					7,000	nature ,	fullytowii, P	. 4	Date		
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	State of New Jersey
Project #	NOTIFICATION OF ASBESTOS ABATEMENT
1.10,000.	(Pursuant to NJAC 8:60 and 12:120)

Check # 2600

Date of Notification (1)				Nama	Building	Ownerlo	norator	- (2)		Date	****		San		72-11-	
07/23/2012			1,					(4)		2014	JUL 2	8	PH	4:	45	
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DEP DOL	Amended Amendment	#	- 1						V.	7	U !	l T ,		10		d .
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DOH	justification)			16 (1970) 1970 (17) 10 (1907)						Tel	ephone N	итье	ir.			
DCA L	Cancellation			Allan B			<u> </u>			-22						
Name of Facility Where Aba	tement is Takin	n Place (3)		FACI	LITY INF	ORMATI	ON	Tyr	pe of Facility	(4)		-	_			
Kinnelon High School		g 1 1200 (0)						1 1								
Street Address								-	School (K- Subchapte		or than K	12)				
121 Kinnelon Rd									Other (i.e.				uild	ings,	home	es,
								_	etc.)				- 3			
City (5) Kinnelon, NJ								Sq	uare Feet	#0	f Floors		Bi	dg. A	ge	
County (6)					Code (7)			Cu	rrent Use (Pr	ior if be	ing demoli	shed)	- 211000		NOTA-
Morris				(STATE	USE ONLY	· —										
Name of Monitoring Firm Hir	ed by Building	Owner (8)		ASCN	ΛNo.		Name	of A	batement Co	ntractor	(9)	-				
Aero Environmental							Nick	Res	storation L	LC	J-1505					
Street Address			-				Stree				~			-		
275 Rt 10 East	10 East						72 B	rook	side Rd							
City, State, Zip Code	ate, Zip Code								, Zip Code					_	-	-
	assuna, NJ 07876								h, NJ 078	60						
	assuna, NJ 07876 ct Manager for Monitoring Firm						Telep			09	License	No				-
Michael Berta			- 1,	Telepho	20-9061		9739				01133	140.				
Start Date (10)		Schedule		3-11: 3				0.00	SHA Monito		01133					
08/01/2014		08/02/2			Date (11)											
Occupancy Status During Al			504 5				Stree		vironment	aı						
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Facility Closed/Vacated Abatement Performed									22 West	-						
Other – Describe: 3P	m	nai Facility	Hour	S					, Zip Code							
							Unio	n, N	NJ 07083							
Scope of Work (Check All Ti	nat Apply)	_						_								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emoli	-			-		Full Containn		n Negative	Pres	sur	е		
2 100 SI DI 2200 II			emoli	шоп					Mini-Enclosu Glovebag Pro							
				120			[Non-Exempte		d Non-Fri	able F	roc	edur	е	
		ls	Locat	tion	Hamilton on September								-	Abate	ement	t
Location of			orma			De	scription	n of				L		Ту	pe	_
Asbestos-Containing Ma			d Sole ntena	ely by		stos Cont	taining l	Mate	rial (ACM)		mount				Е	_
TO BE ABATE In Facility	<u>:D</u>			Staff?	(i.e	. thermal	system cing, V				Specify		Reg	R	nca	Enc
(13)		- 1	(12)				niscella			3	F or LF)		Remova	Repair	Encapsulate	Enclosure
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Name of Registered Waste I	of Registered Waste Hauler				/aste		Yards		Name of	Regist	ered Land	fill				
Nick Restoration LLC			100	Hauler ID		of Wa	ste		G.R.O.	WS						
City, State			10	03378	۷	TBD	sal Date									
Randolph, N.	J					TBD	sai Dale		City, Sta		a					
Completed by		Title					Signatur	e .	1 dilyto	4	<u> </u>	Date	_			
Elvira Mrda		Presid	lent				P	1/1	110x L	Lielo	, lo	7/23	3/2	014		

EDS13-361-1

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

Check #1310 Page 1 of 1



Date of Notification (1)					Building Owner E BROOK I			OLS.							
7-22-14						UBLIC	30110	20	14 J	UL 28	-	H 4	: 4	9	
Agencies Notified	Type Notificati	on		Street Ad 355 M	ayhill Street										
EPA DEP	Initial Amended				e, Zip Code Brook, NJ (7663			32	LICE	il.	JNI	門山	i.	
DOL	Amendm × Emergen	cy (including		and the second	Contact	77003		- GD		phone N			1	11	
DOH DCA	justification Cancellate	on)			onlact and G. Karat	v			l icio	DI KATIE. 1					
□ DCA	Caricella				ITY INFORMA							-			
Name of Facility Where		king Place (3))	,,,,,,,,,			Туре о	f Facility (4)						27-24	
Saddle Brook High	School					,		chool (K-12)		ar than k	(10)				
Street Address								ubchapter 8 ther (i.e. pri				build	ings,	home	s,
355 Mayhill Street							Square	c.)	1 # 0	Floors		BI	dg. A	ne.	
City (5) Saddle Brook							184,0		2	10015		100	ug. A)+	ge	
County (6)			1	County C	Code (7)			t Use (Prior	if bei	ng demo	olishe	d)	-	170	
Bergen					ISE ONLY)		School	ol							
Name of Monitoring Firm	n Hired by Buildi	ng Owner (8)		ASCM		100000000000000000000000000000000000000		ement Contr	actor	(9)					
TTI				0000	3		Group, t Address								
Street Address 1253 N Church Str	eet							ırg Turnpi	ike					.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
City, State, Zip Code Moorestown, NJ 08	3057						State, Zip omingda	Code ale, NJ 07	403						
Project Manager for Mor			100	Telephor		. 80,000,000	hone No.			License 01084					
Michael Stocku Start Date (10)		Schedule			0-8800 x 23			A Monitor		0100		and the same of		-	_
7-31-2014 at 4:00	pm	8-3-201		ipietion t	Jate (11)	100000	Group,								
Occupancy Status Durin	ng Abatement (C	heck Only On	e)				t Address		iko						
Facility Closed/Vac							State, Zip	urg Turnpi	INC						
Abatement Perform Other – Describe:		iormai Facility	Hours			100	(5)	ale, NJ 07	7403						
Scope of Work (Check A	All That Apply)						- 12 T		W 17						
x ≥3 sf or ≥3 lf		× R	enova	tion			Full	Containmer	nt with	Negativ	ve Pr	essui	e		
≥160 sf or ≥260 lf			emoliti	ion				-Enclosure rebag Proce	dure						
							Non	-Exempted		d Non-F	riable	100	Acres 62		
			Locati										Abate Ty	ement pe	
Locatio		Hea	lormall d Sole			Descriptio		(4004)		mount					
Asbestos-Containing TO BE AB) Ma	intenar	nce/	Asbestos C (i.e. therr	ontaining nal systen			(5	Specify		Re	æ	Enca	E
In Faci	ility	Gust	odial 5 (12)	staπ?		rfacing, Variation			SI	or LF)		Remova	Repair	Encapsulate	Enclosure
(13)		Yes	No	N/A	Out	i ilisociic	aneous)					/al	=	late	ле
Cum	n	165	X	IN/A	Di	pe Insul	ation		2	40 LF		x			
Gyn	11.			-	1.1	pe mou	ation			10 21					
				-						-	_				_
										-					
Name of Registered Wa	ste Hauler		N	JDEP W	laste Cu	bic Yards		Name of R	egiste	ered Lan	dfill				
GL Group, Inc			10000	auler ID 033034	TB			Grows				13			
City, State Bloomingdale, NJ					Dis TB	posal Dat D	е	City, State Morrisvil		Α					
Completed by		Title				Signatu	re Ca	m Stolla	. ·		Dat	Carrier was	1		
Elena Solakov		Presi	dent				Cles	m Solla			1-2	22-1	+		

check #1304 Page 1 of 1



Date of Notification (1) 7-21-2014				Name of SCOT	f Building (Owner/C	perator ANW((2) DOD I	BOARD O	盾与D	MEAI	ĮQN	١,,,	- 1794		
Agencies Notified	Type Notific	ation		Street	ddress reen Ave					.619	1111	8	FH	4: 8	-0.	
EPA DEP DOL		ment #2		City, Sta	ite, Zip Co n Plains,	de			ed Ed	ê	LIĈ	Ú ĔN:	SIN	T797 G	JL.	
X DOH X DCA	justifica Cancel				f Contact ah S. Sa	aridaki			-	Tele	ephone	Num	ber			
				FACI	LITY INFO	DRMATI	ON			•		-				
Name of Facility Where A Terrill Middle Schoo		Taking Place (3)						of Facility (4 School (K-12	2)						
Street Address 1301 Terrill Road									Subchapter Other (i.e. pretc.)					dings	hom	es,
City (5) Scotch Plains								Squa 80,0	re Feet 00+	# of 2	Floors			ldg. <i>A</i> 0+	\ge	
County (6) Union					Code (7) USE ONLY)			Curre	ent Use (Prio	r if beir	ng dem	olishe	ed)			
Name of Monitoring Firm EnviroVision Consul		ding Owner (8)	ASCN 0007				of Aba Group	tement Con	tractor	(9)					
Street Address 20-21 Wagaraw Rd,	Building 3	:5E						Addre:	ss ourg Turnp	ike			VO-11-			
City, State, Zip Code Fair Lawn, NJ 07410	0						City, S	State, Z	ip Code dale, NJ 0							
Project Manager for Moni Guillermo M Morales	toring Firm			Telepho (973) 6	ne No. 636-914	5	Telepi	none N 710-9	0.		Licens					
Start Date (10) 6-23-2014		Schedul 7-25-2			Date (11)		Name	101000000000000000000000000000000000000	HA Monitor							
Occupancy Status During	Abatement (Addres				-	_			
Facility Closed/Vaca Abatement Performe	ted During E	ntire Period of	Abater				140	Hamb	ourg Turnp	ike						
Other – Describe: _	o dioide of	TYOTTIGIT GOING	y i ioui.			_	55,700		dale, NJ 0	7403						
Scope of Work (Check All	That Apply)		1.0										-			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demoli				2	Mir	ll Containme ni-Enclosure ovebag Proc n-Exempted	edure					e	
		1	Locat	ion					// LXOIIIPIOG	() 4.10	7110111	, idbit		Abate	emen	t
Location	of		Norma	lly		De	scription	of						Ту	/pe	
Asbestos-Containing I <u>TO BE ABA</u> In Facilit (13)	TED	Ma Cus	ed Sole aintena todial ((12)	nce/ Staff?		tos Cont thermal surfa	aining N	Material s insula T, or		(S	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A		_										
Auditoriu			Х	-			on C	973	1/.		00 SF	-	X			
Boiler Ro	om	X				Hot V	Vater	ank		30	0 SF		X			
			L													
Name of Registered Wast GL Group, Inc	e Hauler		H	IJDEP W lauler ID 033034	No.	of Was TBD			Name of F	Registe	red Lan	idfill				
City, State Bloomingdale, NJ						Dispos TBD	sal Date		City, State Morrisvi		4					
Completed by Elena Solakov		Title Pres	ident			S	Signature	3	lesus Stor	lla		Date 7-2	1-20)14		

GL14-009

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

check # 1305

Page 1 of 1



Date of Notification (1) 7-21-14						Building (District				ne sa v	u 00	DM					
Agencies Notified	Type No	tification			Street A	ddress yersville	Road			744 山				_			
EPA DEP X DOL	Am	ended endment #		_	City, Sta	te, Zip Co am, NJ (de		G	0	LICE			H P			
☑ DOH □ DCA	just	ergency (in ification) ncellation	ncluding		Name of John C	Contact	Markey val		- V):		Tel	ephone	Numbe				
E 50/,		ioonation				LITY INFO	DRMATI	ON									
Name of Facility Where A	Abatemen	t is Taking	Place (3	3)						of Facility (school (K-1	5055 		Vers (=500)				
Street Address 480 Main Street										Subchapter Other (i.e. p tc.)				ouilo	lings,	home	es,
City (5) Chatham							5	4	Square 60,00	e Feet 00+	# 0	Floors		20500	ldg. A 0+	ge	
County (6) Morris					County (Code (7) JSE ONLY)				nt Use (Pri le Schoo		ng dem	olished)			
Name of Monitoring Firm RK Occupational &					ASCM 090	l No.		0.0223000 00000	of Abat Group,	ement Cor Inc	ntractor	(9)					
Street Address 403 St James Aven	iue		KI, NIII NI		-				Addres Hambi	s urg Turn	pike						
City, State, Zip Code Phillipsburg, NJ 088	 365	***************************************		- 111111-2-2					State, Zip mingd	Code ale, NJ (7403		2				
Project Manager for Mor Jonathan Gilbert	itoring Fir	m	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Telephor	ne No. 64-6316		Teleph	none No 710-97			Licens 0108	se No.	<u> </u>			
Start Date (10) 7-22-2014			Schedule			Date (11)		Name		A Monitor				0.00			
Occupancy Status During	n Ahateme								Addres						.000011000		
Facility Closed/Vac	3		3.53		nent					urg Turn	pike						
Abatement Perform Other – Describe:							_	100000000000000000000000000000000000000	state, Zip minad	Code ale, NJ (07403						
Scope of Work (Check A	II That App	oly)							-								~
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			-	Renova Demolit				×	Mini Glov	Containm -Enclosure vebag Pro- -Exempte	e cedure					e.	
			1 10	Locati	ion				1 14011	Lxcmpto	<u>a () an</u>	2 110111	Tidble		Abate	ement	
Location	n of		1	Normal	ly		De	scription	of				_		Ту	ре	
Asbestos-Containing <u>TO BE AB</u> In Facil (13)	Material (ATED	ACM)	Ma Cust	d Sole intena todial s (12)	nce/ Staff?		tos Con thermal surfa	taining M systems cing, VA niscellar	Material s insulat T, or		(5	mount Specify or LF)	LANGE TO PRODUCE TO THE PROPERTY OF THE PROPER	Removal	Repair	Encapsulate	Enclosure
Girl's Bath	room		Yes	No X	N/A	Wra	n & Ci	ıt Pipe	Insula	tion	6	0 LF	X				
Boy's Bath				X				ıt Pipe				0 LF	X	-			
Name of Registered Was GL Group, Inc	te Hauler			. Н	IJDEP W lauler ID 033034	No.	of Wa TBD	Yards ste		Name of Grows	Registe	red Lar	ndfill				
City, State Bloomingdale, NJ						1	Dispo: TBD	sal Date		City, Stat Morrisv		A					
Completed by Elena Solakov			Title Presi	dent			5	Signature	E	Peru Stu	Ma		Date 7-21	-20)14		

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

01 24804

					U.S.	100	-,
Date of Notification (1) July 24, 2014		Name of Building	Owner/Operator (2) Care One Somerset Va	lley Rehabilitatio	· t		
	Notification	Street Address	2014 Jt 1621 Route 22 West	JL 28 PM 4:	i 7		
[x] DOL Amer	nded Notification ndment # gency (including	City, State, Zip Co.	Bridgewater, NJ 08807	LILER SING	D:		
DCA justifi	ication) ellation	Name of Contact Keith	McPeak	Telephone Number	(<u>)</u>		
	FAC	CILITY INFORM	IATION				
Name of Facility Where Abatement is Taking Care One Somerse	Place (3) et Valley Rehabilitation	& Nursing Center	Type of Facility (4	School (k-12)	4 1 1		
Street Address 1621 Route 22 We	est		[]	Subchapter 8 (oth Other (i.e., privat homes, etc.)			dings,
City	County (6)	County Code (7) (STATE USE ONL	15,000 31	# of Floors	Bldg. Age	e 45	
Bridgewater	Somerset	20.24	Rehal	if being demolished) pilitation& Nursi			
Name of Monitoring Firm Hired by Building C Environmental Tac		ASCM No.	Name of Abatement Contracto	or (9) lian Contracting,	Inc		
Street Address 64 Broad Street	zies, me.		Street Address	Route 9, Unit 61	mc.		
City, State, Zip Code Matawan, NJ 0774	17		City, State, Zip Code	River, New Jerse	ev 08755.	1271	
Project Manager for Monitoring Firm	Telephone Number		Telephone Number	License N		12/1	
Tom Geiger	732-290-2217		732-349-9932	00624			
Scheduled Start Date (10) 7/28/14	Scheduled Complet 8/29/14	tion Date (11)	Name of OSHA Monitor	S.L. Analytical			
Occupancy Status During Abatement (Check			Street Address).D. 1		0.77	
[During Entire Period of Aba		1056	Stelton Road			
Abatement Performed C	Outside of Normal Facility H	ours	City, State, Zip Code		SE-22-42/47/07/		
	cupicu		l	away, New Jerse			
Scope of Work (Check all that apply)			X Full Containme	nt with Negative Pres	sure		
[] >3 sf or ≥3 lf	[X] Renov	ation	Glovebag Proce				
[x] ≥160 sf or ≥260 lf	[] Demol			(*) and Non-Friable I	Procedure		
		1		T	Abatemen	t Tyme	
	Is Location		Description of			7.	T
Location of	Normally used	Asi	bestos-Containing	Amount	R R E E	E	E N
Asbestos-Containing Material (ACM) TO BE ABATED	Solely by Maintenance/Custodial		Material (ACM)	(Specify SF	M P	C	С
in facility	Staff	A COLOR	., thermal systems ulation, surfacing,	or LF)	O A	A P	L
(13)	(12)		VAT, or		V R	S	S
		oth	er miscellaneous)		Α -	U	U R
*	YES NO N/A				L	E	Е
Throughout recreation center	X	Plaster ceiling	ļ	2,600 sf	X		
Throughout recreation center	X	VAT & masti	С	6,000	X		
Above ceiling recreation center	X	Pipe fittings		20 fittings	X		
Name of Registered Waste Hauler Guardian Contracting, Inc.	NJDEP Waste Haule 20223	r ID No. Cubic Ya	ards of Waste Name of Regis T.R.R.F.	stered Landfill			
City, State		osal Date	City, State				
Toms River, New Jersey	9/1/	14	Tullytown, Pennsylvan	ia 1	L		
Completed by (Print or Type) Nicholas Fernicola	Title Project Manager	Signature	chot to	1	Date 7/24/20	14	

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



Date of Notification (1) 7/22/2014 Che	eck #2647				f Building n/Laurer			(2)							-	
Agencies Notified	Type Notification		+	Street A	ddress			-		221	1 JUL	- 28	P	H 4	: 6.	}
☐ EPA	Initial Amended		1		obin Hill											
DEP DOL	Amended Amendment				ite, Zip Co		750				1 - 5	100		JINI	MUI	
	Emergency (i				orough,	NJ UT	752		(10	å L			l⊠u		7.
DOH DCA	justification) Cancellation		- 1	Laurer	f Contact					lele	ephone	Nim	-			
				FACI	LITY INFO	ORMAT	ION			-	-					
Name of Facility Where Residence	Abatement is Taking	Place (3)	•					Type	of Facility (4	4)						
Street Address									School (K-1 Subchapter		or than	V 12\				
20 Schmitt Road								X	Other (i.e. p	rivate 8	comm	n-12) ercial	build	dings,	home	es,
City (5)			-						etc.) re Feet	# of	Floors		TR	ldg. A	.00	
West Orange, NJ 0	7052							2,00		2	. 10013		5		ge	
County (6) ESSEX					Code (7) USE ONLY)	15		nt Use (Prid	or if bei	ng dem	olishe	ed)			
Name of Monitoring Firm	Hired by Building C	wner (8)		ASCN	No.		Name	of Aba	tement Con	tractor	(9)					-
N/A									es Corpoi		3 5					
Street Address							100000000000000000000000000000000000000	Addres 69th	ss Street							
City, State, Zip Code								State, Zi enber	ip Code	10.1800				-		
Project Manager for Mor	nitoring Firm		T	Telepho	ne No.		Teleph	none No 295-1	0.		Licens					
Start Date (10)		Scheduled	Con	npletion I	Date (11)				A Monitor		0107	4				
7/24/14		7/27/14					555	e as a	10							
Occupancy Status Durin	g Abatement (Check	Only One))				Street	Addres	SS					-		
Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire P ned Outside of Norm	eriod of Ab al Facility H	atem lours	ent			City, S	State, Zi	p Code							
Scope of Work (Check A	II That Apply															
≥3 sf or ≥3 lf	ш тпас Арріу)	101 n.					E	ก		202						
≥3 \$1 01 ≥3 11 ≥160 sf or ≥260 lf		EUROPONIUM .	nova moliti				×		l Containme ii-Enclosure	ent with	Negati	ve Pr	essui	e		
									vebag Proc n-Exempted		i Non-E	riable	Dro	nodu in		
		ls l	ocati	on				140	1-Exempled	() and	I NOII-I	Habie		Abate		
Location	n of	No	rmall	у		De	escription	of						Ту	ре	
Asbestos-Containing TO BE AB		Used Maint			Asbes	tos Cor	taining M	/laterial	(ACM)		nount		_		Ф	m
In Faci	lity	Custo	dial S (12)	taff?	(i.e.	surfa	acing, VA	T, or	uon,		pecify or LF)		Removal	Repair	ıcap	Enclosure
(13)		-		1		other	miscellar	neous)					oval	air	Encapsulate	sure
		Yes	No	N/A											е	
Ground Flo	or area		Х		9x9	- Floc	r tile ar	nd ma	stic	30	0 SF		x			
Name of Desistantia	-11-1		1													
Name of Registered Was			12938	JDEP W auler ID		Oubic of Wa	: Yards iste		Name of F					13		
Freehold Carting Inc			15	939	POT 45667	tbd	(##E-E-1		GROWS		n Lan	dtill				
City, State PO Box 5010, Freeh	old, NJ 07728					Dispo tbd	sal Date		City, State Morrosv		Α					
Completed by		Title				1	Signature		7/		П	Date				\dashv
Gina Salvador		Office I	Man	ager				(Il	uas	-		7/2	2/20	14		



Date of Notification (1) 7/22/2014 Che	eck #2649			Name of Board	Building of Educ	Owner/Op ation To	perator ownsh	(2) nip of U	Inion 2114	JUL	- 28	PH	1. •	C.E.		
Agencies Notified	Type Notification			Street At	ddress Morris A		T/a-			- <u>†</u> ::	i e e	T (1:1	7 10			
DEP DOL	Amended Amendment				te, Zip Co NJ 708				6)	č L	CEN	SIN	Ġ	Ui. P		
DOH DCA	Emergency justification) Cancellation			Name of Tom W						Tele	phone	Numb	er			-
				FACIL	LITY INFO	ORMATIC	N									
Name of Facility Where Union High School- Street Address								☐ s	f Facility (4 chool (K-12 ubchapter 8	2)	er than l	<-12\				
2350 North 3rd Stre	eet							Oet	ther (i.e. pr	ivate 8	comm					es,
City (5) Union, NJ 07083								Square 100,0	00	2	Floors		60	ldg. A)+	ge	
County (6) UNION				County C	Code (7) ISE ONLY)		School School	t Use (Prio ol	r if bei	ng demo	olishe	d)	¥6		
Name of Monitoring Firm Omega Environme		Owner (8)		ASCM	No.				ement Cont s Corpor		(9)					
Street Address 280 Huyler Street								Address 69th S	· · · · · · · · · · · · · · · · · · ·							
City, State, Zip Code Hackensack, NJ 07	7606							State, Zip enberg			,					
Project Manager for Mor				Telephor	ne No.		Teleph	none No. 295-17			Licens 01074					
Start Date (10) 8/1/14		Schedule	d Cor	npletion [Date (11)		Name	of OSH	A Monitor		0107.	+				
		8/4/14					GR. ARCHARIS	e as al								
Occupancy Status Durin	g Abatement (Chec	k Only On	e)				Street	Address	1							
Facility Closed/Vac Abatement Perform Other – Describe:	ned Outside of Nom					_	City, S	State, Zip	Code							
Scope of Work (Check A	All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Total Control	enova emolit				XIX	Mini- Glov	Containme -Enclosure rebag Proce -Exempted	edure	•				e	
		le	Locati	ion						() ====	31.41.1	T		15555	ement	t
Location	n of	N	ormal	ly		Des	cription	of						Ту	ре	,
Asbestos-Containing TO BE AB In Faci (13)	g Material (ACM) <u>ATED</u> lity	Mai Cust	d Sole ntena odial ((12)	nce/ Staff?		tos Conta	aining N system: ing, VA	Material (s insulat T, or		(S	mount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A											(D	
Second floor-0	Office Area		×			Pipe Ouct Join					SLF	- 2	۲			
						Juct doi:	TIL CYP	Jai isioi	<u> </u>		OI .	-				_
												_				
													, j			
Name of Registered War Freehold Carting Ind			H	IJDEP W lauler ID 5939		of Was tbd			Name of R							
City, State PO Box 5010, Freel	nold, NJ 07728					Disposa	al Date		City, State Morrosv		A					
Completed by Gina Salvador		Title Office	Mar	nager		Si	gnature	6/1	2			Date 7/22		14		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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

			(Pursua	nt to NJAC 8:60	and 12:12	20)	ch # 2	17	75	<u>)</u>	
Date of Notification (1) July 23, 2014				Name of Building	Owner/Ope Rehab				-"		
Agencies Notified [X] EPA [] DEP [X] DOL Type of Notificati [] Initial I [] Amend Amend	Notific ded No	tification		Street Address City, State, Zip C	ode) Mantoloking Rd.	*	4։ 			
[X] DOH [] Cancel	cation)	including		Name of Contact Bever		NJ 08723	Celephone Number	G	i.		
			FAC	CILITY INFORM	IATION						
Name of Facility Where Abatement is Taking Residence	Place ((3)				Type of Facility (4)	School (k-12)				
Street Address 36 Sunrise Way						[x]	Subchapter 8 (ct Other (i.e., priva homes, etc.)				ldings,
	Count	ty (6)		County Code (7) (STATE USE ONI	.Y)	Square feet 1152 sf	# of Floors		g. Age	48	
Toms River Name of Monitoring Firm Hired by Building C	Ocea			ASCM No.	Nome of	Current Use (Prior in Resider Abatement Contractor	nce)			
N/A		ASCW No.	Name of		an Contracting,	Inc.					
Street Address			Street A	idress 1889 R	oute 9, Unit 61						
City, State, Zip Code					City, Sta	te, Zip Code Toms F	River, New Jers	ev 08'	755-1	271	
Project Manager for Monitoring Firm		Telephone			Number						
Scheduled Start Date (10) 07/24/2014		07/25/2		732-349-9932 00624 Name of OSHA Monitor E.M.S.L. Analytical							
Occupancy Status During Abatement (Check o [X] Facility Closed/Vacated [] Abatement Performed O	During	g Entire Per			Street Ac	1056 St	telton Road	19			
Other – Describe			- uomity m		City, Sta	te, Zip Code Piscata	way, New Jerse	y 088	54		
Scope of Work (Check all that apply)		To			[] []	Full Containment Mini-Enclosure	with Negative Pre	ssure			
[] >3 sf or ≥3 lf [X] ≥160 sf or ≥260 lf		[] [x]	Renova Demoli		[x]	Glovebag Procedi Non-Exempted (*	ure) and Non-Friable	Procedu	ıre		
								Abat	ement	Туре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13)	Is Location Normally use Solely by tenance/Constaff (12)	ised y	Asi i (i.e ins	Description pestos-Conflaterial (A., thermal sulation, sur VAT, of the miscellar miscellar pestos per miscellar pestos per miscellar pestos pestos per miscellar pestos pe	taining CM) systems rfacing, r	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E	
Exterior		Asbestos sidir	ıg		1800 sf	X					
Name of Registered Waste Hauler		IIDED W	to TTen-1	ID No. Cubic M	ada a CTTT	Name -CD'					
Guardian Contracting, Inc.		IJDEP Was 2	te Hauler 0223	ID No. Cubic Ya	rds ofWast	e Name of Registe T.R.R.F.	red Landfill				
City, State Toms River, New Jersey		al Date 3/2014	City, Sta								
Completed by (Print or Type)	Title Projec	ct Manag		Signature	701 -	La A		Date 7/23	/2014		

NÓ (K

	(Pulsua	ILLO NUAC 0.00-7 and 12.1.				6	14		
		Name of Building O			170 1	ii.	->		
Date of Notification (1)		HACKENSACK UMC			t Inner E				
7 / 23 /14		Street Address							
Agencies Notified Type Notifica	ation	30 PROSPECT AVE	NUE 2	## JUL 28	PH 4:	27			
X EPA Initial N	lotification	City, State, Zip Code				54 6			
	led Notification #1	HACKENSACK, NE	W JERSEY 07601		CONTR	3/1/			
X DOL Cancel	lation					Y-11.			
X DOH On Hol		Name of Contact	(Dr	elephone Númbe	FUTTU	1			
DCA EMER	GENCY NOTIFICATION	ON JOHN NESBITT	17~	••			:		
		ACILITY INFORMATION							
Name of Facility Where Abatement is T	aking Place (3)		Type of Facility (4						
			School (K-12)						
HACKENSACK UMC				(Other than K-1)		1000 to 1000 to 1000			
Chroat Address		THE RESIDENCE OF THE PARTY OF T		ate & commcl. b					
Street Address 30 PROSPECT AVENUE-BOILER HOUS	2E		Square Feet 150	# of Floors		g. Age 52			
		County Code (7)	Current Use (Prior i			02			
City (5) County HACKENSACK BERGI	5 (10050 85	(STATE USE ONLY)	BOILER HOUSE	being demonstr	eu)				
Name of Monitoring Firm Hired by Build	HAPPAN TO THE PARTY OF THE PART	ASCM No.	Name of Abateme	nt Contractor (5)				
OMEGA ENVIRONMENTAL CORPORAT		17	PAR ENVIRONME						
Street Address			Street Address						
280 HUYLER STREET			313 SPOOK ROCK	ROAD					
City, State, Zip Code	10.00		City, State, Zip Cod						
	SACK, NEW JERSEY		SUFFERN, NEW Y	Committee of the Commit					
Project Manager for Monitoring Firm	Telephone	Number	Telephone Number	Licen	se Numbe	r			
ANTON REZIN	201-489-87		845-369-7500 1101						
Expected State Date (10)	Sched. Complet	The state of the s	Name of OSHA Mo						
7 / 24 /14 Month Day Year	12 / Month	30 /14 Dav Year	QAUALITY ENVIRONMENTAL						
Month Day Year Occupancy Status During Abatement (Che		Day Year	Street Address			-			
X Facility Closed/Vacated During		ement	1376 ROUTE 9						
Abatement Performed Outside									
X Other - Describe: Monday	y - Friday 5:00 pm - 1:	00 am	City, State, Zip Cod						
. (14/ 1/01 1 11/1 1 1)	× 1	[V_]= " o .		RS FALLS , NE	W YORK	12590			
Scope of Work (Check all that apply) Demolition	Renovation	X Full Conta	ainment with Negative	Pressure					
>3SF OR LF	Reliovation		g Procedure						
X >160 SF OR 260 LF			le Procedure						
Location of	Is Location	Description of As			Abater	nent T	vpe		
Asbestos-containing	normally used	Containing Materi		Amount		I			
Material (ACM)	solely by	(ie. Thermal sy		(Specify	REPAIR	ENCAP	ENCLO		
TO BE ABATED	Maint/Custodial	insulation, surfaci	ing, VAT,	SF or LF)	2 1	P	00		
in Facility (13)	Staff (12)	or other miscella	aneous)		A ~	SULE	SURE		
	Yes No N/A					m	m		
BOILER HOUSE HT WATER TANK ROO	ом х	TANK INSULATION	25	50 SQ. FT.	x				
BOILER HOUSE HT WATER TANK ROO	OM X	PIPE INSULATION	15	50 LN. FT.	х				
BOILER HOUSE HT WATER TANK NOC	DIVI A	FIFE INSOLATION		JO LIV. I I .	^				
						+	-		
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						1			
						-			
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						-	-		
						+-	\vdash		
						+-			
						+-	-		
Name of Registered Wests Hauter	NJDEP Waste	Cubic Yards of Waste	Name of Registered	l Landfill			+-		
Name of Registered Waste Hauler VISION TRANSPORT	Hauler ID No.	Cubic Yards of Waste	GROWS LANDFIL						
2 FISH HOUSE ROAD	15939	10	1121 BORDENTON						
City, State		Disposal Date			,		10		
KEARNY, NJ 07032		7/24/14-12/30/14	City, State		7/		11		
	itle	Signature	XX	Date	112.	3//	14		
BENJAMIN SANCHEZ	IRECTOR OF OPER	ATIONS /	//XO		40	4	4		

					ner/Operator (2)						
Date of Notification (1)		HACE	KENSACK UMC							
7 /	11 /14		Street	Address							
Agencies Notified	Type Notifica	ation	30 PF	ROSPECT AVEN	IUE						
X EPA DEP X DOL X DOH	Amend Cancel On Ho	ld	HACI Name	of Contact	V JERSEY 07601	Telenhone No.	ber			_	
DCA	EMER	GENCY NOTIFICATION		N NESBITT							
Name of Facility Whe	as Abatament in T		ACILITY IN	FORMATION	Type of Facility	(A)					
Name of Facility Wife	ere Abatement is i	aking Flace (5)			School (K-1					-	
HACKENSACK UMC					Subchapter	8 (Other than rivate & comm	K-12) cl. bldgs.,	home	s, etc.)		
Street Address	UE DOUED HOU				Square Feet 150	# of Floors	6		. Age 52		
30 PROSPECT AVEN			Cour	ity Code (7)	Current Use (Price	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	olished)				
City (5) HACKENSACK	Count			E USE ONLY)	BOILER HOUSE	N 157	,				
Name of Monitoring				ASCM No.	Name of Abaten	nent Contract	or (9)				
OMEGA ENVIRONM	ENTAL CORPORA	TION		17	PAR ENVIRONA	MENTAL COR	PORATIO	_			
Street Address					Street Address	OK DOAD					
280 HUYLER STREE	Т				313 SPOOK RO City, State, Zip C				\dashv		
City, State, Zip Code	S HACKEN	SACK, NEW JERSEY	,		SUFFERN, NEV	V YORK 10901	1				
Project Manager for M		Telephone			Telephone Numb		License N	umber			
ANTON REZIN	or acording 1 and	201-489-8			845-369-7500		1101		-		
Expected State Date	(10)		Sched. Completion Date (11) Name of OSHA Monitor OALIALITY ENVIRONMENTAL						20		
7 /	24 /14	12 /	12 / 30 /14 QAUALITY ENVIRONMENTAL								
Month I	Day Year	Month	Day	Year	Street Address						
X Facility CI Abatemen X Other - De Scope of Work (Chec	osed/Vacated Durin It Performed Outsid escribe: MONI It kall that apply) It LF	g Entire Period of Aba e of Normal Facility Ho DAY-FRIDAY 7AM-3:3	urs - Descr	X Full Conta	ainment with Negat	GERS FALLS	, NEW Y	ORK 1	2590		
X >160 SF	OR 260 LF			1.10.1.1		1		Abaten	nent Ty	vpe	
Asbesto Mater TO BE	ation of s-containing ial (ACM) E ABATED cility (13)	Is Location normally used solely by Maint/Custodia Staff (12) Yes No N/A	1	Description of A Containing Mater (ie. Thermal sy insulation, surfac or other miscell	ial (ACM) ystems ing, VAT,	Amount (Specify SF or LF	REMC	REPAIR	ENCAPSULE	ENCLOSURE	
BOILER HOUSE HT	WATER TANK BO	OOM X	TANK INS	SULATION		250 SQ. FT.	X				
	- N. C.		DIDE INS	ULATION		150 LN. FT.	X				
BOILER HOUSE HT	WATER TANK RO	JOIN X	FIFEING	OBTION				7			
			+								
		-+-	+			+	_	+			
			-								
										-	
								+	-	+	
								+	+	+-	
			-			+	-+	+	+-	+-	
Name of Registered VISION TRANSPOR 2 FISH HOUSE RO	RT	NJDEP Waste Hauler ID No. 15939	Cubic Ya	rds of Waste 10	Name of Regist GROWS LAND 1121 BORDEN City, State	OFILL ITOWN ROAL)				
City, State KEARNY, NJ 07032			7/24/14-1	2/30/14	MORBISVILLE	, PA 19067	ID-4-	-1	-	11	
Completed by (Print BENJAMIN SANCH	or Type)	Title DIRECTOR OF OPE	ERATIONS	Signature	388		Date _	7/1	1//	<u>Y</u>	

NO. (-K. Notification of Asbestos Abatement (Pursuant to NJAC 5:50 and 12:120)

Date of Notification (1)	アクノーノ		MEDITE OF	Building Owner Opis	rator (2) //	7	The second secon
Agency Notified	Des Walls	الماستان المساحد	- A THE CONTRACT		K	Wan //2	HEUR OF
© EPA O DEP	Type Rotification Initial Amended		Street Add	20/ Zip Code · /	Melle	en Hill	
1 2 2011	Amandment# O. Zosigancy (inclusive) iustification)	Oling	Name of C	Glassbor	in NJ	08028	& LICENS!
	Cancollation		Jose	TO COCETY	mo	Telephone	Number -
Name of Fedility Where Ab	Stement is Taking Pi	ace (3)	FACILITY	INFORMATION	15- 05		
Strest Address	IN HAL	2			Type of Fac	-12)	-
201 M	ollica Hi	11 /2	d		hemes, ex	et 8 (Other than he private & comme	i-12) ucial buildings.
County (6)	070 1	1/5		•	Square Feet	13	Bidg. Age
			ONLY)	(7) (STATE USE	Current Uss (Prior if being dem	(belief)
Name of Monitoring Firm Hire (6)	id by Building Cemer	ASCA	No.	Name of Abster			(1) (1)
Streat Address				Street Address		patement	/ Seach time
City, State, Zip Code				City, State, Zip C	silington 1		8 0 √ .
Project Vienager for Monitoring	Fann ·	· ·		Delanie		05070	
		1 GISDNOT	e No.	Tolonisees tie	The state of the s		C .
Sist Celb (10)		Telephon		Telephone No.	0971.	License No.	· 表点
Start Date (10) 8-5-14	" Scheduled Com	pletion Date		Telephone No.	officer :	License No.	3:
Start Date (10). S-5-/4 Coupency Status During Abab	Scheduled Com	pletion Date -/4/		Telephone No.	0971 · Onliver · Sel. 4		No. 16
Start Date (10) S-5-14 Scoupency Status During Abate Pacific Closed/Vecated During Abatement Performed Oursid Other - Describer	Scheduled Com 5 Briefit (Check only of Briefit Period of Al G of Normal Facility	pletion Date -/4/		Telephone No.	onliner Self		75 C
Sight Date (10) S-5	Scheduled Com 5 Briefit (Check only of Briefit Period of Al G of Normal Facility	pletion Date -/4/		Telephone No. STL STL Name of OSHA M	onliner Self		
Start Date (10) S-5-14 Scoupency Status During Abate Pacific Closed/Vecated During Abatement Performed Oursid Other - Describer	Scheduled Com 5 Briefit (Check only of Briefit Period of Al G of Normal Facility	pletion Date - / 4/ ne) . batement		Telephone No. Street Address City, State, Zip Cod City, State, Zip Cod City Con C	e dainment with Ne	egative Pressure	
Signt Date (10). Source Status During Abate Pacility Closed/Vacated During Abatement Performed Outsid Other – Describe; Sopo of Wari; (Check all that ap 25 si or 2 3 fi 2 160 sf or 2 250 fi	Schnolded Com Serbit (Check only or Be Entire Period of Al Cof Normal Facility i	pletion Date '4' ie) . hatement initial control con	Penovalian	Telephone No. Street Address City, State, Zip Cod City, State, Zip Cod City Con C	e dainment with Ne	0,070	eni
Sign Date (10) S-5	Schoolded Com Sensor (Gheck only or Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (pletion Date / 4/ ne) . batement	Renovation Demolition Aspestos (i.e., iii	Telephone No. Street Address City, State, Zip Cod City, State, Zip Cod City Con C	salament with Ne tooure Tracedure and Ne	egative Pressure	ure Abatoment Type
Coupency Status During Abate Practify Closed/Vecated During Abatement Performed Outsid Other - Describe Cope of Work (Check all that up 25 or 2 3 if 2 160 of or 2 260 if Lecation of Asbestos-Containing Materia TO BE ABATED IN Pacific (13)	Schoolded Com Sensor (Gheck only or Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (Re of Normal Facility (pletion Date pleti	Removation Demotition Assestor	Telephone No. Street Address Chy. State, Zip Cod	salament with Ne tooure Tracedure and Ne	egative Pressure	urə Abatomani
Sent Date (10) Securency Status During Abate Pacific Closed/Vacated During Abatement Performed Outsid Other – Describe; Specific 3 lif 2 160 of or 2 250 lif Lecation of Asbestos-Containing Materia TO SE ABATED IN Facility (13)	Schoolded Com Serenti (Gheck only or By Entire Period of Al Gof Normal Facility i	pletion Date pleti	Removation Demotition Assestor	Telephone No. Street Address Chy. State, Zip Cod	samment with Ne locure moted (*) and Ne	egative Pressure	Enclosives Enclosives Enclosives Ropely Romoval
Sight Date (10) S-5-14 Coupency Status During Abate Facility Closed/Vacated During Abatement Performed Outsid Other - Describe; Pape of Work (Check all that ap #3 si or 2 3 li = 160 sf or 2 260 li Lecation of Asbesins-Containing Materia TO BE ABATED IN Facility (13)	Schoolded Com Serenti (Gheck only or By Entire Period of Al Gof Normal Facility i	pletion Date pleti	Removation Demotition Assestor	Telephone No. Street Address City, State, Zip God G Full Con G Mini-Em G Glaubar G Root-Excit Containing Material surfacing, VAT, or ther miscellaneous)	samment with Ne locure moted (*) and Ne	Amount (Specify SF or LP)	Enclosives Enclosives Enclosives Ropely Romoval
Sight Date (10) S-5-14 Pacupancy Status During Abate Paculty Closed/Vacated During Abatement Performed Outsid Other - Describer The Paculty (Check all that an AS at or 2 3 lf 2 160 af or 2 250 lf Lecation of Asbestos-Containing Materia TO SE ABATED IN Facility (13) Letter Public (13)	Schoolded Com Serenti (Gheck only of Be Entire Period of Al Be of Normal Facility i Coly) (ACAN) Ves	pletion Date pletion Date his pletion Da	Renovation Demotion Assestor (i.e., in a lauler Cub	Telephone No. Street Address City, State, Zip Cod City, State,	esimment with Ne losuro Procedure Total (*) and No	egative Pressure Pressure Pressure Amount (Specify SF or LF)	Enclosives Enclosives Enclosives Ropely Romoval
Signt Date (10) S-5-14 Recupency Status During Abate Pacifity Closed/Vacated During Abatement Performed Oursid Other - Describe; Page of Work (Check all that ap #3 si or a 3 li = 160 sf or a 260 li Lecation of Asbesins Containing Materia TO SE ABATED IN Pacifity (13) Empury Of Registered Waste Hauter A Jiff LL L Lecation Lecation of Asbesins Containing Materia TO SE ABATED IN Pacifity (13)	Schoolded Com Serenti (Gheck only of Serenti (Gheck only only of Serenti (Gheck only only only only only only only only	pletion Date pletion Date his pletion Da	Renovation Demolition Asbestos (i.e., iii	Telephone No. Street Address City. State, Zip Cod City. State,	e dainment with Ne docume spied () and Ne document spied	egative Pressure Pressure Pressure Amount (Specify SF or LF)	Enclosives Enclosives Enclosives Ropely Romoval
Sight Date (10) S-5-14 Recupency Status During Abate Pacinty Closed/Vacated During Abatement Performed Outsid Other - Describe; Page of Work (Check all that ap 23 st or 2 3 li 2 160 st or 2 260 li Lecation of Asbesics-Containing Materia 10 SE ABATED IN Facility (13) Astrophysical Recupency of Registered Waste Hauter Alice CL Cate Delance	Schoolded Com Serenti (Gheck only of Serenti (Gheck only only of Serenti (Gheck only only only only only only only only	pletion Date pletion Date his pletion Da	Renovation Demotifien Assesto: (i.e., in the lauler Cub	Telephone No. Street Acdress City. State, Zip God City. State,	sammant with Ne locure spled () and Ne locure	egative Pressure Pressure Pressure Amount (Specify SF or LF)	Enclosives Enclosives Enclosives Ropely Romoval
Sight Date (10) S-5-14 Recupency Status During Abate Pacinty Closed/Vacated During Abatement Performed Outsid Other - Describe; Page of Work (Check all that ap 23 st or 2 3 li 2 160 st or 2 260 li Lecation of Asbesics-Containing Materia 10 SE ABATED IN Facility (13) Astrophysical Recupency of Registered Waste Hauter Alice CL Cate Delance	Scheduled Com Service (Gheck only of Service (Gheck only only of Service (Gheck only only of Service (Gheck only only only only only only only only	pletion Date pleti	Renovation Demolition Assestor (i.e., in Cub Wes Dispor	Telephone No. Street Acdress City. State, Zip God City. State,	e dainment with Ne docume spied () and Ne document spied	egative Pressure Pressure Amount (Specify SF or LP) Bata	Enclosives Enclosives Enclosives Ropely Romoval

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Date of Notification (1) 06 -24-13					f Building Associa			(2)	20	14 .1111	1 00	1	Company Company	His.		>
Agencies Notified Type Notified Type Notified Initia				Street A 51 Nev	ddress w Marke	et Stree	et		4 31	14 JU <u>l</u>	- 28	PH	4:	50		
DEP Ame	nded ndment #		_		ite, Zip Co NJ 080				(D)	& LI	CEN.	OH	i A	01.		
DOH justif	gency (ir cation) ellation	cluding		Name of Ray B	Contact arr			10280			phone			i,		
Name of Facility Where Abatement i Salem Middle School	s Taking	Place (3	3)	FACI	LITY INFO	DRMAT	ION	PERSONAL PROPERTY.	of Facility (4	10.55 10.55						
Street Address 51 New Market Street								×	School (K-1: Subchapter Other (i.e. p etc.)	8 (Othe			build	dings,	hom	es,
City (5) Salem, NJ,08079				,	\				re Feet	# of 2	Floors		1000	ldg. A	\ge	
County (6) Camdan	<u> </u>			County (Code (7) USE ONLY			Curre	ent Use (Pric	or if beir	ng demo	olishe	(t			
Name of Monitoring Firm Hired by B	uild(ng D	wner (8)	1	ASCN	l No.			of Aba Joe	atement Con LLc	tractor	(9)					
Street Address		W	v -				1212	Burl	Address Burlington Ave							
City, State, Zip Code		, · 		Dela				State, Zip Code anco .NJ . 08075								
Project Manager for Monitoring Firm				856-				6-824-0971 070				e No. O				
Start Date (10) 07 -07-14		Schedule 07-30-						e of OSHA Monitor								
Occupancy Status During Abatemen							Street	eet Address								
Facility Closed/Vacated During Abatement Performed Outside Other – Describe:	of Norma	I Facility	Hours	City, State, Zip Code							e-Sidimiya			11100-00	141-88 e4	-
Scope of Work (Check All That Appl	y) .															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		processed.	Renova Demoliti						Il Containme ni-Enclosure ovebag Proc on-Exempted	edure						
		Is	Locati	on				110	II-Exempled	() and	INUIT	nable		Abate	emen	t
Location of Asbestos-Containing Material (A	~NA\		Normall d Sole		Ashaa		scription taining N		LACAN			1		Ty	pe	Г
TO BE ABATED In Facility (13)	Siviy	1000	intenar todial S (12)			thermal surfa	l system cing, VA niscellar	s insula T, or	ation,	(S	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
windows from autoids		Yes	No	N/A		/0.0	20.4				2001				6	
windows from outside						(AC	CM) ca	ulk		52	280lf	2				
Name of Registered Waste Hauler ani & joe IIc			Н	NJDEP Waste Cubic Yards Hauler ID No. of Waste 2444992 40cy				3			ed Lan	dfill				
City, State Delanco NJ				Disposal Date TBD				Date City, State Tullytown NJ				- / / 2				
Completed by Joseph T Hill		Title VP		Signature						Date 06-24-14						

NO (K

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-14												9	
Date of Notification (1) July 24,	2014			3	Name of Building Owner/Operator (2) RUTGERS, THE STATE UNIVERSITY OF NJ								
Agencies Notified EPA DCA	al Paris	Notificatio Initial Amen	Notifica	ition ification #1 –	Street Address ENVIRONMENTAL 27 ROAD 1, BLDG	HEAL	TH 201	& VEEL	K ADE	DT.		A second	
☑ DOL ☑ DEP- No Longer REQUIRE	D	Not Sub Friable V		erial is Not	City, State, Zip Code PISCATAWAY, NJ				10	JUN I			
⊠ DOH	100		cation)	including	Name of Contact MICHAEL SMITH, HEALTH & SAFET	ENV.		relephone	Nůn	nbet (G			
				FACILITY IN	FORMATION					-			
Name of Facility Where Abateme JOHNSON APARTMEN	nt is Ta	king Place (3 LDG#			Type of Facility (4) School (K-12)	un rayen	of manager	-					
Street Address BUSCH CAMPUS					Subchapter 8 (other Other (i.e. private & co Sq. Feet: N/A	ommercia	l building	s, homes, 3ldg. Age		0+ yea	ırs	15	
City (5) PISCATAWAY	MIDE	DLESEX		y Code (7) Use Only)	Current Use (prior if being			and the state of the state of	(KE MILE)	9563		S	
Name of Monitoring Firm Hired by Cardno ATC	/ Bldg. (Owner (8)	0098		Name of Contractor (9) GREENWOOD ABA	TEME	NT COR	JSIII TA	NTS	. INC			
Street Address			.1	V270 - 110V 220 110V	Street Address		** 00.		1141	, 1140	00		
3 TERRI LANE					268 MAIN STREET			3	28	281/	40		
City, State, Zip Code BURLINGTON, NJ 080	16				City State, ZipCode BUTLER, NJ 07405		Se:	à,	JU	- 4			
Project Manager for Monitoring Fi		Telephone	Number		Telephone Number	- 11	icense Nu	mher					
BRIAN KEARNY		609-386			973-492-0477		0840	-	28		5		
Scheduled Start Date (10)				on Date (11)	Name of OSHA Monitor			7.5		PH	ii.		
07/24/14		07/31/14			ENVIROVISION, IN		-	d hou	<u></u>	\$ 1 5 1			
Occupancy Status During Abate					Street Address							-	
☐ Facility Closed/Vacated Durin ☐ Abatement Performed Outsid ☐ Describe				nt	20-21 WARGARAW City, State, Zip Code		->	~	<u>ن</u>		(1)		
☑Other – Describe: Shift Honeeded)	urs:	8:00AM –	8:00Al	VI (24hrs. as	FAIRLAWN, NJ								
Scope of Work (Check all that app	oly)							_			The state	- 2-2-10	
 ⊇ 3 sf or ≥ 3 lf ≥ 160 sf or ≥ 26 				☑Renovation ☐ Demolition		Mini-E Glove	Enclosure bag Prod	ent with Ne e cedure & \ (*) and No	Vrap	& Cut		re	
Location of Asbestos-Containing Material (ACM) in Facility (13)	Sole	ocation Norma ly by Maint./C (? (12) NO			bestos Containing Material nal systems insulation, surfac scell.)	mount Specify S r LF)	SF		nt Type Repair E	ncap E	nclose		
Apartment #887		X		VAT			950 SF	- X					
			100										
								-					
Name of Reg. Waste Hauler See Hauler Below #1 & 2		NJDEP Was See Belov		<u> ID #</u>	Cubic Yards of Waste:	20 CY		ame of Re i.R.O.W.				11	
Hauler #1) Greenwood Abatemer NJDEP # 28969 Hauler #2) Horizon Disposal Serv NJ DEP # 22612					Disposal Date 07/31/14 City, State 100 New Ford Mill Rd. Morrisville, Pa 19067 215-736-1700								
Completed by (Print or Type) RAYMOND C. PEDALING	ENIOR P	Signature Raymand C. Pe	<u>Date</u>										

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-14						,						
Date of Notification (1)			*		Name of Building Own	ner/Onera	ator (2)					
July 11,	2014				RUTGERS, THE	STATE	= IINIVI	FRSITY	OE N	E		
Agencies Notified		Notification	on Type	Name and Address of the Address of t	Street Address	O.A.	- Oldivi	LIVOITI	OL M2			
⊠ EPA	每	I Initia	al Notif	ication	ENVIRONMENTA	AI HEA	TUS	CAEET	V DED	-		
☒ DCA	- 6			tification #	27 POAD 1 PLD	C 4000		SAFEI	I DEP	1.		
⊠ DOL				(including	27 ROAD 1, BLD	G 4086	, LIVIN	GSTON	CAMP	2US		
DEP- No Longer REQUIR	ED				City, State, Zip Code							
⊠ DOH	LD		fication	1)	PISCATAWAY, N	J 0885	4					
		☐ Cano	elled		Name of Contact			Telephone	Numbe	er		
					MICHAEL SMITH	, ENV.						
					HEALTH & SAFE	TY	1					
Nome of Facility Miles				FACILITY I	NFORMATION							
Name of Facility Where Abateme	ent is Ta	king Place (3	3)		Type of Facility (4)					0.77411 2412		
JOHNSON APARTMEN	IIS, B	LDG#			School (K-12)							
Street Address					Subchapter 8 (other	r than K-1	12\					
BUSCH CAMPUS					Other (i.e. private & c	commomi	ol buildina					
					Sq. Feet: N/A	# of Ele	ar building	s, nomes,	etc.)			
City (5)	ounty (6	5)	Cour	nty Code (7)	Sq. T CCL. IVA	# 01 110	0015. 2	Bldg. Age	: 60+	years		
PISCATAWAY	MIDE	LESEX		e Use Only)	Current Use (prior if he	ina doma	liah a di.	4040==				
	250.000000				Current Use (prior if be	ang demo	olisnea):	ACADEN	IIC OFFI	CES/L/	ABS	
Name of Monitoring Firm Hired b	v Blda (Owner (8)	ASC	M No.	1 1 10				(6)			
Cardno ATC		5 WHO! 107	009		Name of Contractor (9)							
			008	70	CREENIMOOD AD	A TERRE		ONSULTANTS, INC.				
Street Address					Street Add	AIEME	NI CO	NSULTA				
3 TERRI LANE					Street Address	1	50		Salar Salar Salar			
					268 MAIN STREET		,	3 -	2			
City, State, Zip Code							4.0	2814				
BURLINGTON, NJ 080	16				City State, ZipCode		Qu T					
Project Manager for Monitoring Fi	im	Talashass			BUTLER, NJ 07405							
BRIAN KEARNY	1111	Telephone	111111111111111111111111111111111111111		Telephone Number	L	icerise Nur					
DIGAT REALTY		609-386	-8800		070 400 04		C 2 -					
Scheduled Start Date (10)		Schodulad	Complet	ion Date (11)	973-492-0477	0	0840		1 -			
07/24/14		07/31/14		ion Date (11)	Name of OSHA Monitor	100	002		£ £	- 1 - 1		
0		0//3//14						SING				
Occupancy Status During Abate	ement (Check only o	ne)		ENVIROVISION, IN	IC		(D) -	1640			
☐ Facility Closed/Vacated Durin	o Entire	Period of	hatomo	nt.	Street Address						AP	
☐ Abatement Performed Outsid	o of Nic	mal Facilit	voateme	er i L	20-21 WARGARAW	/ BOAD		- 12	-	200		
Describe	e or ivo	imai racility	Hours -		City, State, Zip Code	KUAD						
☑Other - Describe: Shift Ho	ure. 9	2.00 A B A	0.004	N# (O.4)	Oity, State, 2ip Code							
needed)	uis. c	.UUMIVI —	O.UUA	IVI (24nrs. as	1							
necded)					FAIRLAWN, NJ							
0												
Scope of Work (Check all that app	ly)					water the same						
					X	Full C	ontainme	ent with Ne	native P	reccure		
≥ 3 sf or ≥ 3 If				■ Renovation			nclosure		ganver	ressure		
≥ 160 sf or ≥ 26	60 If			Demolition	ō					1000		
25 TO 10 TO						Non Evo	mated (*)	edure & W	rap & Ci	ut .		
Location of Asbestos-Containing	Is Loc	ation Norma	ly Used	Description of As	bestos Containing Material	INOII-EXE	mount) and Non-			ire	
Material (ACM) in Facility (13)	Solely	by Maint./Ci	ustodial	(ACM) (i.e. therm	nal systems insulation, surface		Specify SF		ement Tyr	<u>be</u>		
	Staff?			VAT, or other mis	scell.)		r LF)		ve Repair	Encap	Enclose	
Apartment #887	YES	NO	NA	Marine management of the	The Control of the Co							
Apartment #007		X		VAT & LINO	LEUM		950 SF	X		T	T	
				Village.				_	+-		-	
						-+			-		-	
							400					
Name of Reg. Waste Hauler												
See Hauler Below #1 & 2		NJDEP Was		r ID#	Cubic Yards of Waste:	20 CY	Na	me of Regi	stered La	andfill		
See Hauter Below #1 & 2	- 16	See Below					G.	R.O.W.S	. North	Landfi	in	
Hauler #1) Greenwood Abatement	Consul	tants. Inc	Butler 1	VI 07405		Di						
NJDEP # 12561						Disposa			City, Sta			
Hauler #2) Horizon Disposal Servi	ces, Inc.	, Trenton, N	J 08611			07/31/	14		100 New			
NJ DEP # 22612	9A171.977				Rd. Morrisvi 19067				ris vine,	ıa		
Completed by (Print or Type)	Tree				215-736-170					-1700		
RAYMOND C. PEDALINO	Titl		0 100	-	<u>Signature</u> <u>Date</u>							
J. I EDALINO	23.00	ENIOR PR		1	Raymand C. Pedalino July 11, 2014					Į.		
	IMI	ANAGER			0, 12	unino		15				

0	2		-0
Pg.	4		1
1.7		7.60 2	

Date of Notification (1)				Name	of Duildi	na Owner/Operator /	2)	· J		*		
01 / _	15 /	14		Pri	nceton l	ng Owner/Operator (University-Office	of Design and	Quistruction	} . PM	1	50	
Agencies Notified EPA	Type Notifica			Stree	t Address D Elm Dr							
☑ DOLWD ☑ DHSS		ent # <u>16-7/</u> 2	25/4/	City,	State, Zip	Code	69) & LICE	11314 11314	10	VI.	
□ DCA	Emergend	The second secon		Pri	nceton,	NJ 08544	¥ 59	, ~	11.011	1 (1	ℓ^1	
(NJAC 5:23-8)	justification	on)	9	Name	e of Conta	ct		Telephone Nun	nber			
	☐ Cancellat	ion		Ro	bert Orte	ega		- 1				
		1100000	1000	FA	CILITY I	NFORMATION		1				
Name of Facility Where A	Abatement is T	aking Place	e (3)				Type of Facility ((4)				_
Princeton Universit			3.6				School (K-12	Sales.				
Street Address	•	•					☐ Subchapter 8	(Other than K-1:	2)			
Washington Rd								ivate and comme	ercial b	uilding	gs,	
City (5) Princeton							Square Feet	# of Floors	В	dg. A	ge	
County (6)				Cou	nty Codo	(7)(STATE USE ONLY)	Current Hea /Dri					
MERCER				Cou	nty Code (T)(STATE OSE ONLT)	Current Use (Pric	or ii being demoii	snea)			
Name of Monitoring Firm	Hired by Build	ling Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
ATC Associates Inc	o.					BRISTOL EN	VIRONMENTAL	., INC.				
Street Address						Street Address					-	-
Three Terri Center						1123 BEAVE	R STREET					
City, State, Zip Code						City, State, Zip Co	ode					
Burlington, NJ 0801	16					BRISTOL, PA	19007					
Project Manager for Moni	itoring Firm		Te	lephone	No.	Telephone No.		License No.		-		
Michael Keehn			6	09-386	-8800	215-788-6040	ri -	00509			+	
Start Date (10)	Is	cheduled C	Compl	etion Da	te (11)	Name of OSHA M	lonitor	1				4
2 / 5 /		ON		OLD		BRISTOL EN	VIRONMENTAL	INC.				
Occupancy Status During	Abatement (C	check only	one)			Street Address						
☐ Facility Closed/Vacate				ement		1123 BEAVER	STREET					
☐ Abatement Performed					cribe	City, State, Zip Co						
Time of Abatement: 6	:30AM- <u>3:00</u> P	M/P	M	AM		BRISTOL, PA						
Scope of Work (Check all	that apply)						(b) (67 Y232 S253					
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		⊠ Re	enova emolit	tion ion			ainment with Nega losure g Procedure mpted (*) and Nor		ıro			
		Is	Loca	ation	Τ	Z Non-Exc	inpice () and Noi	I-I Hable I Tocedo		atem	T	
Location Asbestos-Containing N TO BE ABA IN Facilit (13)	Material (ACM) TED	Use Ma	Normaded Sometimen	ally lely by ance/ Staff?		Description of estos Containing Mainer, thermal systems in surfacing, VAT, other miscellaneous	terial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
B Level					Floor t	ile and mastic		40 SF			П	
B Level						sulation (Wrap &	Cut)	2 LF				
Delong Reading Leve	1					sulation (Wrap &	(4)	30 LF				H
			П	+=	•							
Name of Registered Wast			5	NJDEP N Hauler III 20990	No.	Cubic Yards of Waste	Name of Registr	ered Landfill NORTH LAND	FILL	<u> </u>	Ш	
City, State NEW CASTLE, DE			-			Disposal Date	City, State MORRISVIL	LE, PA 19067				
Completed By (Print or Ty Brian Scafiro	rpe)	Title Estima	tor	*		Signature Suran &			7/2	5//	14	
SB-41							11 10	/	1	1	7.50	

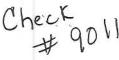
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Date of Notification (1)				Na	mo of Duile	dia = 0	(0)	7 1	الدرائية			
01 /15		14		F	Princeton	ding Owner/Operator University-Office	(2) e of Desi ញ្ញាំ គុំក្រុ	Constructi	on . =	9		
☐ EPA ☐ II ☐ DOLWD ☐ A A A	e Notification nitial mended mendment	# <u>16-7</u>		2 City	00 Elm D	s or. o Code	1.3E	ST. S.CC; LIGENSI!	NTRO			
DCA DCA jt	mergency istification)	(includ	ing	_	ne of Cont	NJ 08544		T= 1		F 1		
	ancellation			933	obert Or			Telephone I	Numher			
				F	ACILITY	INFORMATION		1			_	
Name of Facility Where Abaten	nent is Tak	ing Pla	ce (3)				Type of Facility	(4)				
Princeton University-Fire	estone Li	brary					School (K-12	2)				
Street Address Washington Rd							☐ Subchapter ☐ Other (i.e., p	B (Other than h	(-12)	E. Dat		
City (5)							homes, etc.)	iivale and con	imerciai	Dullai	ngs,	
Princeton							Square Feet	# of Floors		Bldg.	Age	
County (6)				10-								
MERCER		_		Co	unty Code	(7)(STATE USE ONLY)	Current Use (Pr	or if being den	nolished)		
Name of Monitoring Firm Hired ATC Associates Inc.	by Building	Owne	r (8)	ASCI	И No.	Name of Abateme	ent Contractor (9)			-		
Street Address						BRISTOL EN	VIRONMENTAI	_, INC.				
Three Terri Center					No. 10	Street Address						
City, State, Zip Code		_				1123 BEAVE						
Burlington, NJ 08016						City, State, Zip Co						
Project Manager for Monitoring I	Firm		To	lephone	NI-	BRISTOL, PA	19007					
Michael Keehn				117	6-8800	Telephone No.		License No.		20,-12,-12	,	
Start Date (10)	Sche	duled (ate (11)	215-788-6040 Name of OSHA M		00509				
_2 / _5 / _14		ON	H	OLD	ate (11)		onitor /IRONMENTAL	INC				
Occupancy Status During Abater	ment (Chec					Street Address	ALCHIMEN I AL	, INC.				
☐ Facility Closed/Vacated Durin	g Entire Pe	eriod of	Abat	ement		1123 BEAVER	STDEET					
	e of Norma	I Facili	ty Ho	ire - Do	scribe	City, State, Zip Co						
Time of Abatement: 6:30AM-		P	PM	AM	l	BRISTOL, PA						
Scope of Work (Check all that ap	ply)											_
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf		⊠ Re					ainment with Nega osure Procedure opted (*) and Non					
l cooties f		1	Loca	\$3000000000000000000000000000000000000		8				oatem	ent T	vne
Location of Asbestos-Containing Material	(ACM)	Use	Norma ed So	lely by	Asho	Description of stos Containing Mate	arial (A CAA)	•		_	_	1
TO BE ABATED IN Facility	,	Ma	inten	ance/ Staff?	(i.e	., thermal systems in	sulation,	Amount (Specify	Removal	Repair	nca	nclo
(13)		Ous	(12)			surfacing, VAT, other miscellaneo	or .	SF or LF)	<u>va</u>	-	Encapsulate	Enclosure
Throughout Levels C, B and		Yes	No	-			us)				ate	
	I A				Floor ti	le and mastic		1,465 SF				
Office A-7J Throughout Levels C, B and					Window			96 LF	\boxtimes			
	А				Duct W	ork		1775 SF				
1 st Floor Level 1					Pipe Ins	sulation (Wrap &	Cut)	72 LF				П
Name of Registered Waste Hauler SERVICE TRANSPORT GR			1000	IJDEP \ lauler I[No.	Cubic Yards of Waste	Name of Registe					-
City, State				20990		Disposal Data	G.R.O.W.S. I	NOR I H LAN	DLILL			
NEW CASTLE, DE						Disposal Date	City, State	E DA 4000				
Completed By (Print or Type)	Title					Signature	MORRISVILL					
Brian Scafiro	100.00	stimat	or			Signature	Scafino 1.	., [Date /	25	1,1	
SB-41	2000					youan y	refer /	1	1/0	9	17	

ASB-41 MAY 11 B 5 1 4 0 0 3 - B



Date of Notification (1)					Owner/Ope	The second second	2) 2	MH JU	1 20	D			
7-25-2014	T 11 00 0			130,000,000,000	olutions, L	LC		. 00	- 20	PHI	ų: į	0	
Agencies Notified EPA	Type Notification X Initial			Address Brooksid	e Way		9 9		1201	'Osta	· in a	•	
DEP DOL	Amended Amendment	#	19 10 10 10 10 10 10 10 10 10 10 10 10 10	State, Zip C	ode JJ, 08062		Ø)	ŒĹ	DENS	ING	TU:		1
	Emergency (STATE STATES	of Contact				Teler	hone Nu	mber		62. C	
DOH DCA	justification) Cancellation		100000000000000000000000000000000000000	rew Ricco				reiek	mone real	IIIDEI			
	—		FA	CILITY INF	ORMATION	ų.				-			2006.16.1
Name of Facility Where	Abatement is Taking	g Place (3)					Type of Facility ((4)					
residence							School (K-1						
Street Address						L	Subchapter Other (i.e. p				dinas.	home	es.
504 Third Avenue							etc.)						
City (5) Haddon Heights							Square Feet 2050	# of F	loors	12500	ldg. A	ge	
County (6)			Count	y Code (7)			Current Use (Pri		a demolic		-		
Camden				E USE ONL			vacant	or ii being	y demons	neu)			
Name of Monitoring Firm n/a	Hired by Building (Owner (8)	ASC	CM No.			Abatement Con Construction		9)				
Street Address						Street A		. Оогр					
					188		reek Road						
City, State, Zip Code					C	City, Sta	ite, Zip Code						
						Bellma	awr, NJ, 080	31					
Project Manager for Mor	nitoring Firm		Telepl	hone No.		elepho			License N	lo.			
							66-6452		01204				
Start Date (10) 8-8-2014		Scheduled 9-8-2014		n Date (11			OSHA Monitor						
Occupancy Status Durin	a Abstament (Chae					Street A	w Ricco		_				
					1 22		reek Road						
	ated During Entire F ned Outside of Norm				1,000		ite, Zip Code						
Other - Describe:							awr, NJ, 080	31					
Scope of Work (Check A	II That Apply)		X 1900	707.20.22					-+-		- 17		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Britanian Britania Britani	novation molition			×	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure				A	
		le I	ocation				Non Exemple	() a	rton i na	1	Abate		t
Location	n of	No	rmally		Descr	ription o	of .				Ту	ре	
Asbestos-Containing <u>TO BE AB</u> In Faci (13)	Material (ACM) ATED lity	Main Custo	Solely by tenance/ dial Staff? (12)			ning Ma vstems i g, VAT	iterial (ACM) insulation, , or	(Sp	ecify or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No N/A	<u> </u>			•			<u>a</u>]	ate	re
Exteri	ior		x		Transit	e Sidi	ng	160	0 SF	х			
					ince- en re-					-			
Name of Registered Was	ste Hauler		NJDEP	Waste	Cubic Ya	ards	Name of	Registere	ed Landfil	<u> </u>			
Ricco Construction	Corp		Hauler 28909		of Waste	•	Salem	County					
City, State Bellmawr, NJ					Disposal TBD	Date	City Stat	•					
Completed by		Title			/	nature	Allowa	7,,,,,,,		ate	-		
Andrew Ricco		owner			1	111	du /	n	3	-25-2	014		
ASB-41 (R-06-08)					V.	✓ Do not	use this form fo	r asbesto	s licensu	e exer	npted	activi	ities.

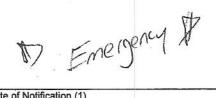


							•					
Date of Notification (1) 7-25	14		Name o	of Building Owner/Op		taman	te					
Agencies Notified Type Notification		i,	Street A	Address 73	-	eet A			120			
DOL Amended Amendmen		_	City, Sta	ate, Zip Code		hen		08	38	40)	-
DOH Emergency justification DCA Cancellation			1	of Contact			Telephor			753		7
				ILITY INFORMATIO		<u>. </u>	٠.	-	_	=	•••	
Name of Facility Where Abatement is Takin Single femi	ng Place (3	Du	e lli			De of Facility (4				28	`	
Street Address 73 Eggen-	'. · .					Subchapter Other (i.e. p	8 (Other tha	mercial	build	ings,	home	eŝ,
City (5) Metuchen N			0 un		Squ	etc.) Jare Feet	# of Floo	rs (2)		ldg. A		1200
County (6) Middle sex			County	Code (7) USE ONLY)	Cur	rent Use (Prio	or if being de	molishe	d)	<u></u>	>	
Name of Monitoring Firm Hired by Building	Owner (8)	- 1	ASC		Name of Al	patement Con		1 .				
Street Address	3/16	<u> </u>		MA	Street Add	ess.	hno	logi	C.	,	In	16
City, State, Zip Code	37	-	00	533	City State,		. 8	19	<u> </u>	24		
Project Manager for Month right Firm	NS		Telepho	335 ine No.	Telephone	Egy No.		nse No.	0)5	3
Steve Schenke	Schedule	ed/Com	p09	758-3365 6	09 75	8-336 SHA Monitor	5 1	00	3	59	4	
8/4/14	8	16/	14		EF	'C Tech	molog	ies	I	nc		
Occupancy Status During Abatement (Cher Facility Closed/Vacated During Entire	Period of A	Abatem	ent			Box	337	•				
Abatement Performed Outside of Norr Other - Describe:	nal Facility	Hours			City, State,	Zip Code Egypt	LLA	- 0	g	53	3	
Scope of Work (Check All That Apply)						JIP.	700					
SC ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf	1000	denovat Demoliti			<u>√</u>	ull Containme fini-Enclosure Blovebag Proc Ion-Exempted	edure				9	
	1	Locatio		T		- Complete	() and reon	Tidolo		N. 12	ement	
Location of		lormali		Dosc	ription of					Ту	pe	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	d Solel intenan odial S (12)	ice/	Asbestos Contail (i.e. thermal sy surfacin	ning Materi	ılation,	Amoun (Specify SF or LF	/	Removal	Repair	Encapsulate	Enclosure
	Yeś	No	N/A								.0	-
Basement		አ		Pipe Ins	u la fic	200	100 L	F	X			
	+					-		-		-		
	1											
Name of Registered Waste Hauler. EPC Technologie	ς ,	100	JDEP Wauler ID	No. of Waste			Registered Li		ent	- 01	e P	'A
City, State	NJ.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	,,,,	Disposal	Date	City, State	sville	PI		<u> </u>	<u> </u>	• •
Completed by Schen Kee	Title	sid	ent		nature	Sch	L	Date		25	-14	,

NJ Dept. of Health & Senior Services	,	TIFIÇA (Pulz	O MOTTA	of New FASBES NJAC 8:	Jersey STOS ABATE 60 eptd 12:12	MEN (0)		5407		מ	-	<u> </u>	NI C
Date: Time:					olerid Operate			24 01			- 0		-
7-23-2014					rsippany /	Troy	Hulls	<u> </u>			_		0.24.7
Agencies Notified Type Notification		1 20	rest Add D01 Pa	resa ersippar	ny Blvd		. (1	14 JUL 21	3 1	PH	4: ;	2	
DEP Initial Amended	2			, Zip Cod		-						-	
☐ DOL Amendment#					07054					111	Tar	1.7	
Emergency (iii	scholing		ame of C				- (h	Telephone	Num	ben -	Tit	t.	
DOH justification) DCA Cancellation	- 0	J	oe Gia	nnetti								11,	
					RHATION				_			12.	
Name of Facility Where Abatement in Taking	Place (3)					Tyl	po of Facility	(4)					
House for Demo Street Address 67 Lake Shore Drive							Other (i.e.	i2) r 8 (Other thus I private & comm	K-12) ercla	bullo	lings,	hone	es,
City (5)						Sq	otc.) vare Feet	# of Floors			dg. A	ge	
Lake Hlawatha, NJ									F 1		0+		
County (6) Morris	5		ounty Co TATE US				ment Use (Pri ouse For D	ar if being dam IOMO	dishe	9Ø)			
Name of Monitoring Firm Hired by Building O	wner (8)		ASCM N	do.	Nam	e of A	batement Co	ntrector (9)				ř.	
n/a			n/a		Loz	znica	Managem	ent Corpora	tion				
Street Address					Stree	t Ada	TOOS						
n/a					22	Troy	Lane						
City, State, Zip Code				The second second	City,	State	, Zip Code	-					
n/a		2			Lin	coln	Park, NJ 0	7035		0.5	5).		
Project Manager for Monitoring Firm		Te	dephone	No.	Tele	phone	No.	Liceria					
n/a.		l n	√a		97:	3-706	7950	0118	Ė	•			
Start Date (10)	Scheduled	Comp	letion De	ate (11)	Nam	e of C	SHA Monitor		(6)	-			
7-24-2014	7-26-20				Lo	znica	Managem	ent Corpora	lion				
Occupancy Status During Abatement (Check	Only One)			Street	at Add	ress			W .=	4		15
Facility Closed/Vacated During Entire P	eriod of Ab	فالالجوارية	at		. 22	Troy	Lane	*					
Abatement Performed Outside of Norma	al Facility F	lours			City,	State	, Zip Code					****	
Cither - Describe: Sem - Som					- Lin	apin	Park, NJ 0	7035					.,
Scope of Work (Check All That Apply)			·	-									-
고 3 의 6 ~ 23 년 제 ≥180 의 6 0 ≥260 년		novatio molitic			*	H	Mini-Enclosur Glovobag Pro				36		
· · ·	7						eus recompas	d () eard (seal-)	· PERSON	-	-4	aneni	
		ocator			27 12-38			N NA L	- 0			pe	200
Location of Asbestos-Conteining Meterial (ACM)		Solely		Acheete	Descriptions Containing		Ant (ACM)	Amount					
TO BE ABATED		tenano		(i.e. t	hermel system	ns Ins	ulation,	(Spedify		곲	20	20	Endosure
In Facility		dial Sta (12)	ant	*	auritiding, \	AT, o	1	SF or LF)		Remove	Repair	P	204
(13)	Yes	No	N/A		diner miscell	aneol	IS)	kd 99		Val	-	Encapaulale	- Far
Ground Floor		1000000	x		Asbestos	Debr	is	Undetermin	ed	ж		-	
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		لنح			- W				- Comment		١.		<u> </u>
Name of Registered Weste Hauler Loznica Management Corporation		He	DEP Wa wor ID N 33137		Cubic Yards of Weste TBD			Registered Lar VS Lamdfill	ociali.		g (
City, State Lincoln Park, NJ 07035					Disposel De	æ	City, Sta	te ville PA 190	67	89	20	10 1-40	
Completed by	Title				Signatu	niej/			Da	te ed			
E. Cirovic	Secre	etary			12	14	roin	æ	7-	23-2	014		

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* Do not use this form for asbestos licensure exampted activities



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Date of Notification (1)					wner/Ope	rator (2) dao Privat				1.72		-	
Agencies Notified Type Notifica	ation	1 -	treet Ad		view Dr	. (91st)	2614	JU	28 P	Ħ 4:	23		
EPA Initial Amend	ment #			e, Zip Cod each Tw	ie vp NJ 08	8008	ØA.	2	11.14	JHTF	IJί,		
DOH justifica		1000	lame of o				₹Ð	Tele	Phone Nu	mber	1,	Z	
Name of Facility Where Abatement is Michael And Paula Jordao Priv			FACIL	ITY INFO	RMATION	Туре	of Facility (4						
Street Address 15 West Oceanview Dr. (91st)			3		×	Subchapter (Other (i.e. pretc.)	(Othe			ings,	home	s,
City (5) Long Beach Twp NJ 08008			+				re Feet	# of 2	Floors		dg. A 5+	ge	
County (6) Ocean	*		County C	ode (7) SE ONLY)		Curre Hom	nt Use (Prio 1e	r if bei	ng demolis	hed)			
Name of Monitoring Firm Hired by Buil N/A	ding Owner (8)		ASCM	No.		lame of Aba Pernaco II		tractor	(9)		•		
Street Address						Street Addres							
City, State, Zip Code						City, State, Z West Berli		91					
Project Manager for Monitoring Firm		T	Γelephor	ne No.		Telephone N 856-753-9			License I 00727	No.		*****	
Start Date (10) 7/24/14	Scheduled 7/28/14		pletion [Date (11)		Name of OSI Same	HA Monitor				-		
Occupancy Status During Abatement Facility Closed/Vacated During E Abatement Performed Outside of Other – Describe:	ntire Period of A	batem	ent			Street Addre							
Scope of Work (Check All That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovat emoliti				Mi Gl	II Containme ni-Enclosure ovebag Prod on-Exempted	e cedure				e	
20 20 20	ls	Locatio	on								Abat	ement	t
Location of Asbestos-Containing Material (AC <u>TO BE ABATED</u> In Facility (13)	Mai	ormali d Solel ntenar odial S (12)	ly by nce/		tos Contai thermal s surfacii	ription of ining Materia ystems insul ng, VAT, or scellaneous)	ation,	(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
exterior siding			x		exteri	or siding		19	900 SF	x	\vdash		
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						0.0							
Name of Registered Waste Hauler United Containers		Н	JDEP W lauler ID 2459		Cubic Y of Wast 3		Name of G.R.O.	7.5	ered Land	fill	100.00		
City, State Elm NJ			II.		Disposa 7/28/1		City, Stat Morrisv		A 19067	v.			
Completed by Anthony T Perna	Title Presi	dent			Sig	gnature				Date 7/23/1	4		



Date of Notification (1)	- 3		-		Name	of Buildin	g Owner/Operator (2)	V . 1	S			
7 /	8	/14	_		1		Iniversity-Office		Construction				
Agencies Notified EPA	Initia			7.50		Address Elm Dr.	10	2614 JUL	28 PM 4: 28	3			
☑ DOLWD ☑ DHSS	⊠ Ame		7/00	14.4	City, S	State, Zip	Code	. + .	- coarso	1			_
⊠ DHSS		ndment #2 ergency (in			Pri	nceton, l	NJ 08544		OS CONTRO				
(NJAC 5:23-8)		fication)	cluding	l		of Contac		(D) & L	Telephone Numb	er i		-	
8.0		cellation			Rol	bert Orte	ego	42	l siepiiolio italiio				
					FΔ	CILITYII	NEORMATION					-	
Name of Facility Where A	batemer	nt is Takino	Place	(3)	- ' ^	OILIT I	TOKINATION .	Type of Facility	(4)				
Princeton Universit			, , , , , , , , , , , , , , , , , , , ,	(0)				School (K-12)				
Street Address									(Other than K-12)			32T	
Washington Rd.								homes, etc.)	ivate and commerc	ciai bi	illaing	ıs,	
City (5)								Square Feet	# of Floors	BI	dg. A	ne .	
Princeton										-	-g. , ,	90	
County (6)	_		-		Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pri	_ or if being demolisi	ned)			
MERCER					1	,	Λγ	Library	or it boing dominate	icu,			
Name of Monitoring Firm	Hired by	Building C	Owner ((8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
ATC Associates Inc				(-)	000		III A CAN A A A A A A A A A A A A A A A A A	VIRONMENTAI	INC				
Street Address			1000				Street Address	VINOIVIENTAL	L, INC.				
Three Terri Center							1123 BEAVE	DOTREET					
City, State, Zip Code													
Burlington, NJ 0801	6						City, State, Zip Co						
Project Manager for Moni		m		TTA	lephone	No	BRISTOL, PA	19007	Ti				
Michael Keehn	toring Fi	111			609-386		Telephone No.		License No.				
Start Date (10)		Cohen	م ادمانا				215-788-6040		00509				
	14				letion Da		Name of OSHA N BRISTOL EN	ionitor VIRONMENTAL	_, INC.				
Occupancy Status During	Abatem	ent (Check	c only c	one)			Street Address			- 700			
☐ Facility Closed/Vacate					ement		1123 BEAVE	RSTREET					
Abatement Performed	Outside	of Normal	Facility	у Но	urs - Des	scribe	City, State, Zip Co						
Time of Abatement: 6:	30AM-3	:30PM/_	PI	M	AM		BRISTOL, PA						
Scope of Work (Check all	that app	oly)										-	
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			⊠ Re □ De				☐ Mini-End ☐ Gloveba	g Procedure	native Pressure n-Friable Procedur	a		81	
			Is	Loc	ation	T				-	atem	ent T	vne
Location	75.5	MALCON COLOR		Norm			Description of	of			_	Γ -	
Asbestos-Containing N TO BE ABA		(ACM)			lely by ance/		estos Containing Ma		Amount	em	Repair	nce	ncl
IN Facilit				todia	I Staff?	(1.6	e., thermal systems surfacing, VAT		(Specify SF or LF)	Removal	=	Encapsulate	Enclosure
(13)	74			(12	T	-	other miscellane					late	G,
			Yes	No	N/A								
Labs 227A, 227B & St	uite 230)		\boxtimes		Double	layer Floor tile	and mastic	1500 SF				
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Name of Registered Wast				100	NJDEP I		Cubic Yards of	Name of Regis			WINDOW CO		22
BRISTOL ENVIRON	MENTA	L, INC.			Hauler II 1870		Waste	G.R.O.W.S	NORTH LAND	ILL			
City, State							Disposal Date	City, State					
BRISTOL, PA 19007								MORRISVI	LLE, PA 19067				
Completed By (Print or Ty	pe)	Title		•			Signature	1 1.	(Dat	e /		1,,	/
Brian Scafiro		E	stima	tor			Prian	Scafero	/pl /	1/0	13/	19	+
SR-41							95	//	/ /	1	1		

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

Date of Notification (1)						Name	of Buildin	g Owner/Operator (2)					
	88	1_	14	_		Pri	nceton L	Iniversity-Office	of Design and	Construction				
The state of the s	Type N	otifica	ation			Stree	t Address							
The state of the s	☑ Initi	al				200	Elm Dr.							
	⊠ Am		50				State, Zip							
☑ DHSS ☑ DCA			ent #1.		_			NJ 08544						
(NJAC 5:23-8)		ergen lificati	cy (inc	luaing)		of Contac			Tolophone No.				
5 32 5000000	☐ Car					2200	bert Orte	551 M		Telephone Nur	nber			
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Name of Facility Where Ab	pateme	nt is 7	Taking	Place	(3)	FA	CILITYII	NFORMATION	7	(0)				
Princeton University				i iacc	(3)				Type of Facility	N				
Street Address			u 11	-					☐ School (K-1) Subchapter	²⁾ 8 (Other than K-1	2)			
Washington Rd.									Other (i.e., p	rivate and comm	ercial b	uildin	gs,	
City (5)									homes, etc.			-		
Princeton					77				Square Feet	# of Floors	В	ldg. A	\ge	
County (6)				-		10-	1 0 1 1	TV /0 T1 T2 T10 T 0 T 11 T 1						
MERCER						Cou	nty Code (7)(STATE USE ONLY)		rior if being demo	lished)			
Name of Monitoring Firm F	lirad by	. D. iil	di== 0		(0)	10011			Library					
ATC Associates Inc.		y bullo	aing O	wner	(8)	ASCM		Name of Abateme						
Street Address	-					000	98	BRISTOL EN	VIRONMENTA	L, INC.				
								Street Address						
Three Terri Center								1123 BEAVE						
City, State, Zip Code								City, State, Zip Co						-
Burlington, NJ 08016								BRISTOL, PA	19007					
Project Manager for Monito Michael Keehn	oring Fi	ırm			1000	phone		Telephone No.		License No.				
		- 1-			1	09-386		215-788-6040		00509				
Start Date (10) ON HOLD			Schedu ——				ite (11)	Name of OSHA M BRISTOL EN	onitor VIRONMENTA	L, INC.				
Occupancy Status During A	Abatem	nent (Check	only o	one)		2512717 (Same See)	Street Address					-	
☐ Facility Closed/Vacated	During	g Enti	re Peri	od of	Abate	ment		1123 BEAVER	RSTREET					
Abatement Performed (Dutside	of No	ormal F	acilit	y Hou	rs - Des	scribe	City, State, Zip Co	•					
Time of Abatement: 6:3	30AM-	3:30F	PM/	P	M	AM		BRISTOL, PA						
Scope of Work (Check all t	hat app	oly)		-										
□ >2 of o=>2 \f			6	7 .					ainment with Ne	gative Pressure				
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf					novat moliti			☐ Mini-Encl	losure					
					mont	JII				n-Friable Proced	ure			
				Is	Loca	tion			, ,	114010 10000		atem	ent T	1/00
Location of	50				Norma	iliy ely by		Description o		<u> </u>		_	T-	_
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IN Facility				Cus		Staff?	(1.6	e., thermal systems i surfacing, VAT,		(Specify SF or LF)	Removal	air.	sde	Enclosure
(13)			-		(12)	T	-	other miscellaned		S. S. L. ,	=		Encapsulate	6
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Labs 227A, 227B & Sui	ite 23(0			\boxtimes		Double	layer Floor tile a	ind mastic	1500 SF				
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7.					_	-						1		
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Name of Registered Waste	Haule	r				JDEP I		Cubic Yards of	Name of Regis	stered Landfill			_	_
BRISTOL ENVIRONM	IENTA	L, IN	IC.			18706		Waste	G.R.O.W.S	NORTH LAND	OFILL			
City, State			235	10000		10/00)	Disposal Date	City, State					-
BRISTOL, PA 19007										LLE, PA 19067	,			
Completed By (Print or Type	e)		Title	-				Signature						
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Date of Notification (1)			Name	of Building	Owner/Operator (2)			-	Ì
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Agencies Notified	Type Notification	7	Street	Address			1971	21/14		-
EPA	initial 🔀		15 Wa	inut Place	z	1	1 1	11/19/1/1/		
S porme	Amended		City, 5	State, Zip C	ode			THE PROPERTY		$\neg \neg$
S DHSS □ OCA	Amendment Emergency		Allen	dale, NJ 0	7401		WAIVER	APPRO	UED	į
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	Cancellation		Bainho	el Roone					(S)	
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Name of Facility Where	Shasanan in Taki	h = 100 - 100	FA	CILITY IN	FORMATION					
1 No. 1	Adetellishing (ex	ing Pisce (3)				Type of Facilit	(2		
Private home Street Address						School (K-	12) r 8 (Other than K-	12)	2	
						Other (i.e.	private and comm	neroial build	nge,	
15 Walnut Place City (5)						Square Feet		Çe ;	Age	
Allendale, NJ 07401						Advance . met	-0110013	0109	, reger , ∕⊃	,
County (6)			Cour	Ny Code 471	STATE USE ONLY)	Current Itan	Prior If being dem	Olishari.		-
Bergen			300	-I -nes (r)	, - I'll our one I'	-0.1611, D36 (An II have a green	W-IDIPOUT -	77	0
Name of Montoring Fir	m Hired by Building	Owner (8)	ASCM	No	Name of Abatem	ant Content of	MAN .	<u> </u>		La .
1		, (4)	AUGIN	No.	1	an contractor t	121	1	1	F
Street Address		_			Gr Tech LLC Street Address			07		۲.
								C	2 .	· O
City. State, Zip Code					576 Valley Rd A					
Project Manager for Mic	mitoring Firm		elephone	No	Wayne, NJ 074'	70	License No.			
		1"	a i d'Al Jose se	NO.			1			
Start Date (10)		eriuled Comp	4-6' D		973-638-1777		01127			
07 / 24					Name of OSHA	denior				
			25 /	14	Envirovision Co	ensultants, inc				
Occupancy Status Dur					Street Address				** ***	
S Facility Closed/Vsc	sted During Enlire I	Period of Atte	itement.		20-21 Wagaraw	Road, Bidg .	# 34A			
Time of Abstement	AW-	DAN P	1015 - Des La	AN	City. State. Zip C	Ods				
L		.,		-L14	Fair Lawn, NJ 0	7410				
Scope of Work (Check	all size at lay)				CMSh u	p and decoman	ally the very the	live pressur	q ·	1
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Neme of Registered V	asia Hauler	27/10/10	NUCEP WHIST	e Haste: 10 No	Cubic Yards of Was	is Name of Re	gistered Landlill			
Gr Tech LLC			00337	85	TBD	T.R.R.F. In	c			i
City State				The state of	Disposal Date	City, State				
Wayne, NJ 07470					TBD	Tullytown,	PA			į
Completed By (Print or	Type) T	itle			Signature	/	1/3	Date		
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Date of Notification (1)			: N	lame a	f Building	Owner/Op	erator (2		APPROV	/Elb	-	7		-
07 ;	24 ; 14		-					NA	it. of Health &	Senior S	ervic	esl.		Ì
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Agencies Notified	Type Notification				Address			-	(signatur	0)		71		į
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⊠ DHSS	Amendment #		R	idaeu	ood, NJ	07450								
DCA	Emergency (in itst:ficetion)	cluding	1.	Name :	of Contac	f :50	-		Telephone	Numbel				002254
(NJAC 5:23-8)	Cancellation		100						1 8					
	Dancementon		12		r. Lopez									
W TWO		VV	S	FAC	ILITY IN	FORMA	ION							
Name of Facility Where	Abatement is Takin	g Płace (3)					Type of Facil	St. 10, 10,					
Private home								School (K		V 4 71				
Street Address								Superapr	er B (Olher than ., private and c	(h.) <)	al huil	dinas		
943 East Ridgewood	Avenue							hames, e		J , C. C.	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	On 197		
City (5)	VACUTE							Square Feet		rs ·	Bid	g. Age		_
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Ridgewood, NJ 0745	U			To:	10111	/CTATE 110	E OMILIA	Outer-training	/ Chalma le la	lemelial	ad!			
County (6)				Count	y Gode (7)	(STATE US	C OWLY)	Current Use	(Prior If baing o	IOFFICHSITE	10)			
Bergen					ner									
Name of Monitoring Fir	m Hired by Building	Owner (8	S) A	SCM I	Nφ.	Name of	Abatem	ent Contractor	(8)	3		_		
						Gr Tech	LLC			_		0		
Street Address		40		**********		Street A			-11 M (3/11)					-
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City, State, Zip Code							ite, ZIp C			Š	2		3	
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Project Manager for Me	enitoring Firm		Telep	shone l	VΦ,	Telepho	ne No.		License	No.	نے در		三	
						973-638	-1777		01127		22		_	
Start Date (10)	Sche	duled Co	niplet	ion Dal	cg (11)		OSHAN	Monitor						100
07 / 25				_ /				11 11 5			É	*** ***	Ch	
						Street A		nsultants, ln	<u>c</u>			-		
Occupancy Status Dur.								1000 201-001020						
□ Facility Closed/Vac □ Abatement Perform						20-21 V	agaraw	Road, Bldg	.# 34A					
Time of Abatement	AM-	n racility M/		s - Des		City, Sta	ita, Zip C	ode						
time of Vesteriter	· —— ` ` ` · —— '	161/			H- Int	Fair Lav	vn, NJ C	7410						
Scope of Work (Check	all that apply)					11	Clean u	p and decont	mination with r	едации	press	ure		
									Negative Press	sure				
>3 sf or >3 if > 160 sf or >250 if		⊠ Re	novatio	חכ			Mini-End	eruzok	Tent with N	castina I	Smer	I IFA		
160 ST OF 2250 R		∐ Ue	molitio	n		P	Non-Exe	ig Procedure	Non-Friable P	rocedure	,	w.C		
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Name of Registered V	Vaste Hautor		N.	DEP Wass	d Haulor ID N	io. Cubic Ya	rds of Wa	ste Name of F	Registered Land	ifi#				
				יביבטו	0.5	TB	D	T.R.R.F.	Inc					
Gr Tech LLC				00337	, C	Disposi		City. State				-	· · · · · · · · · · · · · · · · · · ·	
City, State														
Wayne, NJ 07470						TB	D	Tullytow	n, PA		1192			
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Print Form



Date of Notification (1)					Building C			(2)	-	nass					
07/21/14				Archdi	ocese of	f Newa	rk			2874 11	1 28	} F	ML	1: 3	2
Agencies Notified	Type Notification		1	Street Ad 171 Cl	ddress lifton Ave	е.				i specii			1117		۷.
EPA X DEP X DOL	Initial Amended Amendment #	ı	1878		te, Zip Cook, NJ 07				G:) &	JOE	N3	ING	1 + 1	15
- SERVICES	Emergency (in	ncluding			Contact				-	Telephone	Numb	er			8.1
DOH DCA	justification) Cancellation		100		Mohamm	nad				1.00.004					. 1
				FACI	LITY INFO	RMATIC	N								
Name of Facility Where Global Charter Sch	and the second s	Place (3))						of Facility (4) School (K-12						
Street Address								T S	Subchapter 8	(Other than			e co conce	•	
255 Congress St.									Other (i.e. pri	vate & comr	nercial	DUIIC	iings,	nome	es,
City (5)									e Feet	# of Floor	5	50%	ldg. A	ge	
Jersey City								33,00	V-1/21	3		1	0+		
County (6)					Code (7) JSE ONLY)			Currer	nt Use (Prior	if being der	nolishe	d)			
Hudson Name of Monitoring Firm	Lizad by Building O	unor (0)		ASCN			Namo		ement Contr	actor (0)	-				
Enviro Vision Cons	옷이 되었어요? 아이를 하는 아이나 아이나 아이를 보다?	wner (o)		0007					vices Inc.	actor (9)				120	
Street Address							Street	Addres	s					-	
20-21 Wagaraw Ro	d.							Maple							
City, State, Zip Code Fair Lawn, NJ 074	10								p Code , NJ 0705	7					
Project Manager for Mor Guillermo Morales	nitoring Firm			Telephoi 973-63	ne No. 33-9145		Teleph 973-4	one No 406-7:		Licer 011	ise No. 07	\$1 55			
Start Date (10) 07/31/14		Schedule 08/08/1		pletion I	Date (11)			of OSH aw Na	A Monitor lodka						
Occupancy Status Durin	g Abatement (Check	Only On	e)				Street	Addres	S						
Facility Closed/Vac	ated During Entire P	eriod of A	batem	ent			156 r	naple	Ave.						
Abatement Perform	ned Outside of Norma			77.17.7			City, St								
Other – Describe:							Walli	ngton	, NJ 0705	7					
Scope of Work (Check A	III That Apply)						lo.	1							
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		_	enovat emoliti				×	Min	Containmer i-Enclosure vebag Proce i-Exempted	dure				e	
		1-	l ===#		-				ZXOMPTOG	7 4.10 11011	1		Abate	J	
Location	o of	1	Location Lormall			Des	cription	of					Ту	ре	
Asbestos-Containing	Material (ACM)		d Solel			tos Conta	aining M	laterial		Amount		~		Щ	m
TO BE AB In Faci			odial S		(i.e.	thermal s surfaci	systems ing, VA		tion,	(Specify SF or LF		Remova	Repair	Encapsulate	Enclosure
(13)	ň.		(12)			other m	iscellan	eous)				oval	air	sular	sure
		Yes	No	N/A										е	
boiler ro	oom		*			boiler	insula	ition		100sf.		*			
boiler ro	oom		*			duct i	insulat	tion		110sf.		*			
boiler ro	*			pipe i	insulat	tion		245lf.		*					
boiler ro	*				g mate	erial		448sf.		*					
Name of Registered Was	10,10,000	JDEP Wauler ID		Cubic Y			Name of R	egistered La	indfill						
Newark Carting Inc.	100000	5409	140.	20			G.R.O.W	V.S							
City, State Newark NJ				Disposa 08 /11			City, State Morrisvil	le,PA							
Completed by		Title			Si	gnature			i i i i i i i i i i i i i i i i i i i	Date					
Leslaw Nalodka		Presi	dent				1	_ /	Noh		07/	21/	14		

*	-							(78	14) [Pri	nt Fe	orm
	NC		ATION	ate of New Je I OF ASBEST to NJAC 8:60	S ABATE			DOL -	<u></u> 10 D	ΔΥ			
Date of Natification (1) 07/17/14				Building Own ley Heights		(2)	T	ם טוב	100	1	7		
Agencies Notified Type Notification		14 22		ddress Isinfield Ave),			الله الله	8/20	14	+		
X DEP Amended DOL Amendment #		100		na, Zip Code ley Heights,	NJ 0792	2		VM W			1		1
Emergency (in justification) DCA Caincelletton	ncluding	24 58	10 miles	Conuci ny Amiano				ALLERA	Vimbelin	9	.0	寸	
				LITY INFORM	ATION			4					+
Name of Facility Where Abatement is Taking Mountain Park Elamentary School	Flace (3)				3	图:	of Facility (4 School (K-12	1		7			
Street Address 65 Fairfax Or.							Bubchapter (Other (i.e., pr etc.)	Other than & ivate & comma	(-12] er cio l aull	dings,	ישמת	PE.	
City (3) Berkeley Heights							e Feet	of Floors	1	idg. A	94		1
County (8) Union		C	OURTY (Code (7) USE ONLY)		Curre		If being demo	tished)			E.	-
Name of Monitoring Firm Hired by Building On Environmental Tactics Inc.	wner (B)		ASCN 0045			of Aba	Isment Cont Vices Inc.			<u>ا</u> ن		200	£.
Street Address 84 Broad St.						Addres	Ave.			6			78
City, State, Zip Code Matawan, NJ 07747					City, 8	tate, Z	p Code 1. NJ 0705	7				-	179
Project Manager for Monitoring Firm Thomas Geiger			slepho	ne No. 90-2217	Telepi	one No 406-7	j.	License 01107		_	7		,
Start Data (10)	Scheduled	Camp			Name	of OBF	A Menitor	101101		+	_ 0	7	
07/18/14 Occupancy Status During Abstement (Check	07/18/12 Only One					Addres	ilodka ia						-
Facility Clased/Vacated During Entire Pe Abatement Performed Outside of Norms Other - Describe:	eriod of Ab	enetare Auch	int		City, 9	tate, Z	Ave. p Code 1,NJ 0705	7					
Scope of Work (Check All That Apply)					7,5					+			1
조 33 sf or 23 tf 고 2160 sf or 2280 lf		noveti molitis				Min	i-Endosyra webag Produ) COT 9 nt with Negstive edure (*) and Non-Fr					
						NOI	-Exemples	[] and Men-Fr	ISDIS PIO			_	1
. Location of	No	oiteop. Yllamy			Description	of			_		pe		
Asbeştes-Containing Material (ACM) TO BE ABATED In Facility (13)	Asbeştos-Conteiring Material (ACM) TO BE ABATED In Facility Lized Mair Custo						(ACM)	Amount (Specify SF or LF)	Removal	Rupatr	Encupatiate	Endosure	
Bathroom 1	Yes	No	NIA		oe insula	tion		3/1.		_			
Bathroom 2		-	-		pe insula	3850		3lf.	7	-			1
Baltinoom 2		+		pi	he made	uDi:	-	30,	+				
Number Registered Wasta Hauter Newark Carting Inc.		Ha	DEP W ular 10 408		bic Yards Nasta		G.R.O.V	egistered Land V.S	sin .				
City, State Newark, NJ				500	posel Date /19/14		City, Stete Morrisvil				_		
Completed by Legisty Nalodka	Titla Presid	ent	-		Elepenius.	/			Date 07/17/	14		•	

ASB41 (R-08-08)
Fax # 862 - 221 - 9207

Print Form

			NOT	Pursual	on of ASBES In to NJAC 8:6	708 ABATI 9 and 12:13	ement Eo)			/		
Date of Notification (1) 07/17/14				Berk	of Building Ow eley Heights	ner/Operato) (2) D	UL - 10	DAY		7	
n ma	Type Notificatio	n		345	Address Plainfield Av	ъ.		mn : d	1	7		
K DOT	Amended Amendman El Emergence	nt#			rata, Zip Gode Aley Heights	, NJ 0793	22 -	Thull		1		
E DOH	Justification Cancallate	1)	, g	Name	of Contact			1 Piekal			\dashv	
<u> </u>					ony Amiano		I WAI	/ERSHA	4(1303	:U		
Name of Facility Where Ab	atement is Tak	ng Place	(3)		SILLI Y WOLLD WILL	MOITAG	Type of Facility	(4)				
Governor Livingston	High School						School (K		<i>(</i> i)			
Street Address				92			Subchapt	ar 6 (Other the	n K-12)			
175 Wetchung Blvd.		- 7					Dihar (i.a.	private & con	morcial b	uliding	a, họ	mes,
ity (5) Berkeley Helghts		į					Square Feet 150,000	3	ra i	Bidg.		
eurky (8) Jalon		5		County (BTATE	Cods (7)		Current Use (P School	not if being de	mollahaa)	_		
lame of Monitoring Firm H	red by Building	Owner (3)	ABC	M No.	Namo	el Abetiment Co	ontractor (9)				-
Environmental Taction	s Inc.	,d .u		004	5	Lesc	co Services In	ic.	3 1	2		23
iresi Address 34 Broad St.	100					277.03.00.07.0	Address Maple Ave.		1	3		7
City, State, Zip Code			~				Maple Avs.					ب
Astewan, NJ 07747							ington, NJ 07	057		·		7
roject Menager for Monitor	ing Fina			Telspho			one No.		nse Na.	1,6		
homas Geiger					90-2217	973-	406-7341	011				
ort Date (10) 07/18/14	1110	07/18	114	mpletion	Date (11)		of OSHA Monito. BW Nalodka		*******		() i	
ocupancy Status During A							Address				Ç,	7
Fedility Closed/Vacete: Abstement Performed Other - Describe:	During Entire	Period of	Abets	ment			Maple Ave.					<u></u>
Other - Describe:		IIII FAGILI	y 1100				tate, Zip Code Ington, NJ 070	ET			-	2
cope of Work (Check All Ti	net Apply)					14 911			A-01/01	_		
23 sf or 23 if 2160 sf or 2280 if			Renov				Mini-Enclosur Glovebec Pro	ent with Negs 8	livo Press	ute		
Location of			Local Norma				MINISTRAL STOCKS CONTROL			Aber	amer ype	a l
Asbestos-Conteining Mai		Use Sen	nd Soli	aly by	Ashestos C	Description ontaining M nat systems	sterial (ACM)	Amount		T	1	
in Facility			todigi : (12)		su	rading, VAT	T, der	(Specify SF or LF)	Rem	R.	Encap:	G C
(13)		Yes	No	NA	DINE	a miscellan	BOTIE)		parcon	Pair	Byraffisc	annea
Bathroom 1		P			. pis	oe insulat	ion	1017.		+	-	-
Bathroom 2		•				e insulat		Bif.		++	-	H
		+ 1			219	- J GOODL		oll.	-	\vdash	-	\vdash
									-	-	-	H
lawark Corting Inc				JDEP Williamler ID I		ic Yards /aste	Name of	Registered Lar	14तीम	1		+
City, Stare					DIA	ossi Date	City, State	-				-
Newark, NJ Completed by Title					07/	19/14	Morrisv	ille, PA				
slaw Nalodka	dent			Signature	Nel	300-2-100	Date 07/17/	14				

Far 7 862-221-5207

^{*} Do not use this form for asbestos ilicen sure exampled activities.

CK 000 215



Date of Notification (1) 07-23-2014		Name of Building Owner/Operator (2) Julia Bayci Name of Building Owner/Operator (2) Zel 14 JUL 28 PM 4: 54										
• • • • • • • • • • • • • • • • • • • •	otification	Street A						-				
	otification		adway				8, [1 19	والله م	ITA	01.	
EPA Initi			te, Zip Cod	le .	-		Ce L	10 = 1	SH	G	- 7	
Tanada	nended nendment #	1014057800404-000		NJ 07047	7	42						
L I I Em	nergency (including	Name of		, 140 07 047	···		Telepho	ne Num	her	+1		-
	stification) ancellation	Julia E					releprie	nic ream	3			
L DOA	aricenation		LITY INFO	RMATION					_			
Name of Facility Where Abatemen	nt is Taking Place (3)	- FAOII	LITT HEI O	MATION	Тур	e of Facility (4)	Y					
Private Residenče						School (K-12)						
Street Address						Subchapter 8	(Other th					9
14 14th Ave					X	Other (i.e. privetc.)	rate & cor	nmercia	l build	lings,	home	es,
City (5)					Squ	uare Feet	# of Floo	ors	В	idg. A	ge	
Elmwood Park											TAX S	
County (6)		County C	Code (7)		Cui	rent Use (Prior	if being d	emolish	ed)			
Bergen		(STATE L	JSE ONLY)									
Name of Monitoring Firm Hired by	Building Owner (8)	ASCN	No.	Nam	ne of A	batement Contra	actor (9)	-	en en en en	-		
N/A	, – (– ,					ontracting LL						
Street Address	*****			Stre	et Add	ress						
				52	2 7th	Street						
City, State, Zip Code				City	, State,	Zip Code		_				
				Un	nion C	ity NJ 07087						
Project Manager for Monitoring Fir	irm	Telephor	ne No.	Tele	phone	No.	Lic	ense No).			
				20	1 216	-9603	01	206				
Start Date (10)	Scheduled C	ompletion [Date (11)	Nam	ne of O	SHA Monitor		-				
08-02-2014	08/04/201	4		De	elfa Co	ontracting LL	C					
Occupancy Status During Abatem	nent (Check Only One)			Stre	et Add	ress		1				
Facility Closed/Vacated Durin	ng Entire Period of Abate	ement		52	2 7th	Street						
Abatement Performed Outsid	de of Normal Facility Hou			City	, State,	Zip Code						
Other – Describe: 08:00 AM	1 - 05:00 PM			— Ur	nion C	ity NJ 07087	•					
Scope of Work (Check All That Ap	pply)				1180				100000			
≥3 sf or ≥3 lf	Reno	vation				ull Containmen	t with Neg	gative P	ressur	e		
2160 sf or ≥260 lf	☐ Demo	lition		,		Mini-Enclosure	draw.					
SC - 22, 480						Glovebag Proce Non-Exempted (n-Friabl	e Pro	cedure	3	5.55
										Abate		
1	Is Loc		2	Descripti	on of					Ту	ре	
Location of Asbestos-Containing Material ((ACM) Used So	lely by	Asbesto	os Containing		ial (ACM)	Amou	nt			m	_
TO BE ABATED	Mainter Custodia			hermal syste	ms ins	ulation,	(Spec		Rei	Z.	nca	Enc
In Facility (13)	(12			surfacing, \other miscel			SF or I	_୮)	Remova	Repair	Encapsulate	Enclosure
(10)		Laura							<u>a</u>	7	ate	ē
	Yes No	N/A		-					_			
Basement	* X			Pipe Insu	ulation		60 L	F	х			
		-						-				\vdash
		1		0.1: 37		Ness of D		l on den				\Box
Name of Registered Waste Hauler	F	NJDEP W Hauler ID		Cubic Yards of Waste	5	Name of Re						
Delfa Contracting LLC		35240		1		Tullytow	n Resou	irce R	ecov	ery F	acılı	ty
City, State				Disposal Da	ate	City, State						
Union City NJ 07087				08/06/201	14	Tullytow	n, PA					
Completed by	Title			Signat	ure	770 ·		Da				
Jaime Delgado	Proj. Ma	nager		a con	26	Report		07	-23-	2014		
						7/	77.0					

40 old

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:20/N.J.A.C. 7:26-2.12)

Date of No 06/25/201	otification (1):					wner/Operator (2) Board of Education		3				1	
Agencies	Type Notificati	on		Addre	whether we the The Tables and I	Soard of Education			7.1 				
Notified	⊟Initial		1 Cre	st Way				-	III 2 a 2012	A	W to	Ċ	
□-EPA	□ Amended				Zip Code	4							
O DEP	Amendment#: ☐ Emergency			e of Co	J 07747			T.1	ne Number:				
□ DOL	(including				niaci: Badalam	enti		retennor	ie Number:	*			
D'DOH D'DCA	justification) □ Cancellation		1110	. Jane	Dadaiaiii			•			,	į	
						FACILITY INFO	ORMA	TION					
Name of F	Pacility Matawa	an-Ab	erdeen	Region	al Midd	le School	Туре	of Facility (4):					
469 Matav	wan Avenue							hool (K-12) bchapter 8 (Other than l	K-12)				
City/ (5)		Count				y Code (7):	□Ot	her (i.e., private & com	mercial buildings, he	omes, e	tc.)		
Cliffwoo	d	Monn	outh		07721		Squ	are Feet:	# of Floo	rs:			
				-									
								g. Age rent Use : School					
	Monitoring Firm				Owner:	ASCM No.:		ne of Abatement Con	tractor (9):				
ENVIRO	NMENTAL CO	ONNE	CTION	I, INC.		00030	Ane	ex Development, I	nc.				
Street Add	dress:							et Address:			-		
120 Nort	h Warren Stre	et											
						0		Rutgers Place	A :				
City, State	e, Zip Code:						City	, State, Zip Code:					
Trenton,	NJ 08608						Par	amus, NJ 07652					
Project Manager for Monitoring Firm:						Telephone No.:	Tele	phone No.:	License No.:				
Roland (609-392-4200	THE RESERVE AND ADDRESS OF THE PARTY OF THE	3) 350-0101	01215				
Start Date 07/25/14	:(10):		schedul 8/05/1		npletion	Date (11):		ne of OSHA Monitor x Development, Inc.	:				
47. 57	Status During A							et Address: Rutgers Place	-				
	Closed/vacated Dent Performed Out					t	City	, State, Zip Code:					
□ Other							Par	amus, NJ, 07652					
Describe:													
Scope of W	ork (Check all th	at appl	y):					CHENT	Containment with	Nega	tive Pr	eccure	•
$\square \ge 3$ sf or	$r \ge 3$ If for ≥ 260 If				☐ Reno			□ Min	i-Enclosure vebag Procedure	тчеда		Casure	•
G ≥ 100 SI	1 01 2 200 11	wesser.		-1000 W/V-000	D Denn	ontion		□ Non-	Exempted (*) and	Non-Fr			
				Locat		De	escript	ion of		19		emen ype	t
V 6.0 (b)	Location of Containing Ma	terial		Norma d Sole		Asbestos Con	taining	(Material (ACM)			T	T	T
7 150 651 65	(ACM)	tor itti	Ma	aintena	ince/	(i.e., therma	al syste	ems insulation, VAT, or	Amount	R	-21	E	E
	BE ABATED		C	ustodi				llaneous)	(Specify	eme	Repair	cap	clo
	IN Facility (13)			Staff (12)					SF or LF)	Removal	air	Encapsulat	Enclosure
	(13)		Yes	No	N/A							=	()
	ROOM			X		Breeching Insu	lation		100 SF	*			
BOILER	BOILER ROOM					Tank Insulation	n		300 SF	*			
BOILER	ROOM			X		Cementitious F	itting	Insulation	50 LF	*			
						N 11 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0							
Name of Registered Waste Hauler: TRI-STATE TRANSFER ASSOC., INC.					NJDE	P Waste Hauler ID	No.:	Cubic Yards of Waste: 30	Name of Regi MINERVA ASSOC, INC.			ll: ERPR	ISES
City, State Bronx, N				Disp	osal Date	e:		City, State: Waynesburg, OH	_				*
Completed By: Title:							Signa		Date:				
	Oraegbunam				Presid	lent	()	~ , Q2S	06/25/20	14			

Date of Notification (1)			Name of Building Owner/Operator (2)															
July 23, 2014												Check # 1330						
Agencies Notified	lammal .	Notification			Street Ac 265 S.		ship Roa			7	٠							
EPA DEP	_	Initial Amended			City, State, Zip Code						1710500		0					
X DOL		Amendment		_	Maple	Shade,	NJ 080			0018								
DOH		Emergency (justification)	including		Name of Contact				J l	JL 28	Tele	phone l	Numbe	er	-			
DOH DCA		Daniel J. Dugan																
					FACIL	ITY INFO	RMATIO	N										
Name of Facility Where Abatement is Taking F Dugan Residence				lace (3)					Type of Facility (4) School (K-12)									
Street Address										Subchapter 8 (Other than K-12)								
265 S. Fellowship Road										Other (i.e. pri etc.)	vate 8	comme	ercial t	uild	ings,	home	s,	
City (5)							-	Squar	Floors	ors Bldg. Age								
Maple Shade									5,00					100				
County (6) Burlington				County Code (7) (STATE USE ONLY)					Current Use (Prior if being demolished) Residence									
Name of Monitoring Firm Hired by Building Or			Owner (8)	vner (8) ASCM No.					Name of Abatement Contractor (9)									
Management & Enviro. Consulting S			Serv							vironmenta	al, LL	.C						
Street Address PO Box 341										et Address Cutler Avenue								
City, State, Zip Code									State, Zip Code									
Chesterfield, NJ 08515									Maple Shade, NJ 08052									
Project Manager for Monitoring Firm Lou Laureti				Telephone No. 609-298-4070				Telephone No. License No. 00842										
Start Date (10) August 2, 2014				Scheduled Completion Date (11) August 4, 2014					Name of OSHA Monitor EMSL Laboratories									
Occupancy Status During Abatement (Check Only One)									et Address									
Facility Closed/Vacated During Entire Period of Abat Abatement Performed Outside of Normal Facility Ho					ment				Route 130 North									
Abatement Performed Outside of Norma Other – Describe:			nal Facility	I Facility Hours				City, State, Zip Code Cinnaminson, NJ 08077										
-	Ollilla					5011, 145 00	011	-										
Scope of Work (Check A	ui inat	Apply)	[52] _		2200				٦				_		tien)			
					Renovation Demolition				Full Containment with Negative Pressure Mini-Enclosure									
									Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
	-								No	n-Exempted	(*) an	Non-F	riable	Abatement				
	Is Loca Norm			ally									Type					
Location of Asbestos-Containing Material (ACM)				d Sole		Achac		cription	on of Material (ACM)		Amount		, [
TO BE ABATED In Facility			Ma	intena	nce/				s insulation,		(Specify SF or LF)		fy	Z.	ח	Enc	四	
			Cus	todial 9 (12)	staπ?		surfac							Removal	Repair	sde	Enclosure	
(13)				diologic.			otner m	iscellar	neous)					val	Ŧ	Encapsulate	ure	
			Yes	No	N/A									100				
Basement				XXX As			oestos F	aper	on Di	Ducts 6		60 SF		X				
							,											
Name of Registered Waste Hauler				NJDEP Waste Hauler ID No.				Cubic Yards of Waste		Name of Registered Landfill					ıcı			
Freehold Cartage					2253	1	vveste			ern Berks Community Landfill								
City, State Freehold, NJ					Disposal Date 8/4/2014				e City, State Birdsboro, PA									
Completed by Title						8/4/2014 Signatur								Date				
					s Manager				and e				7/23/2014					