1161100		NOT		tate of New J				In these	EG	E I	W	Pi	rint I
Date of Notification (1)			Pursuan	N OF ASBEST	0 and 12:12	0)			****	0.0	001		
07-10-17				of Building Ow ord States	ner/Operato	r (2)		UL	JUL	28	201.	/	
Agencies Notified Type Notification				Address Brook Ave.				AS	BESTO	s co	NTR	OL 8	
EPA Initial DEP E Amended Amendment	л 1			ate, Zip Code				-	LIC	ENSI	VG_		
Emergency		3		aic, NJ 0705 of Contact)5			Tel	enhone N	umber			
DOH justification) DCA Cancellation				h Muller								_	
Name of Facility Where Abatement is Takin	g Place ((3)	FAC	ILITY INFORM	AATION	Ту	pe of Facilit	y (4)					
Commercial Property Street Address							School (M		or than V	12)			
217 Brook Ave						2	Other (i.e etc.)	private à	er than K- & commer	rz) cial bui	dings	, hom	es,
City (5) Passaic						Sq	uare Feet	# 01	Floors	Table Administrative streets	Bldg. /	Age	
County (6) Passaic				Code (7) USE ONLY) _		Cu	irrent Use (F	rior if bei	ng demoli	shed)			
Name of Monitoring Firm Hired by Building (N/A	Owner (8)	ASCI	M No.			batement Contracting		(9)				200.00
Street Address					Street 522								
City, State, 7ip Code					City, S	State	, Zip Code ity NJ 07()87		***********			
Project Manager for Monitoring Firm			Telepho	one No.	Telept 201		No. -9603	1	License 01206	No.			
Start Date (10) 06-21-17	Schedul 06-23-		mpletion	Date (11)			SHA Monito						
Occupancy Status During Abatement (Check	k Only O	ne)			Street			-					
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe: 7:00 Am - 5:00 Pm	eriod of al Facilit	Abater y Hour	ment 'S		1 000000	tate	St. Zip Code ity NJ 07(197	-				
Scope of Work (Check All That Apply)			W. 1. 4 To 1 To 2		1 01110		11y 140 07 C						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renovi Demoli			- X	1	Full Contains Aini-Enclosu Glovebag Pr	ire ocedure					
	is	Local	tion	The same of the sa	<u>I</u> -	1 1	Von-Exempt	ed (*) and	l Non-Fria	ble Pro		e meni	
Location of Asbestos-Containing Material (ACM)		Norma ed Sole	lly		Description			Property and the same of the s			Ту	rpe	
TO BE ABATED In Facility	100	intena todial		(i.e. ther	Containing N mal systems urfacing, VA	ins	ulation,	(S	nount pecify	Rer	Re	Enca	Enc
(13)	Yes	(12) No	N/A		er miscellar			200	or LF)	Flernoval	Repair	Encapsulate	Enclosure
ndFl Bldg. A North Side stair case	1.50	Х	1	P	ipe Insula	tion		15	0 LF	X	-		
2nd Floor Bldg A North Side		X			VAT			140	00 SF	X			
			-										
lame of Registered Waste Hauler	<u>i</u>	100	J JDEP W		bic Yards		Name o	 f Register	ed Landfi		<u> </u>		
elfa Contracting LLC		+	lauler ID 35240		Waste 15				ource F		ery F	acilit	У
ity, State nion City, NJ				1	sposal Date 6-26-17		City, Sta	ite iwn, PA					
completed by	Title		2722.2700		Signature		10		D	ate			
aime Delgado	Proj.	iviana	ager.		İ	/	10		0	7-10-1	1		

Date of Notification (1)				Na	me of Build	ling Owner (Ot	(0)	Cle #	=	00	2 5	+1
	7 /	17				ling Owner/Operato S OF PRINCETO		/				7
Agencies Notified Ty	pe Notificati	on			eet Addres		IN ONIVERSIT	ME	C	E	П	W
	Initial				200 ELM				0		U	U
☑ DOH	Amended Amendmen	+ #2 7/	20/47	0:4	y, State, Zij			M)				
	Emergency					N, NJ 08544		ШЦ,	JUL	2 8	3 21	017
(NJAC 5:23-8)	justification)	9	Na	me of Cont	act		Telephone Nui	mher	·		55-57,071
L	Cancellation	1		F	OBERT (DRTEGO		T Translation	TIDO		ONT	FRC
Name of Facility and				F	ACILITY	INFORMATION			LIC	ENS	ING	110
Name of Facility Where Abate	ement is Tak	ing Pla	ce (3)				Type of Facility	y (4)				
PRINCETON UNIVERS	IIY - FIRES	STON	E LIB	RARY			School (K-1	(2)				
1 WASHINGTON ROAD	,					Albert State of the State of th	Subchapter	8 (Other than K-1 private and comme	2)			
City (5)	,						homes, etc.	.)	erciai	Dulla	ngs,	
PRINCETON, NJ							Square Feet	# of Floors		Bldg.	Age	
County (6)							1,000,000	8		70		
MERCER				Co	unty Code	(7)(STATE USE ONLY)	Current Use (P	rior if being demol	ished	1)		
Name of Monitoring Firm Hire	d by Building	. 0	- (0)	1000		-		Y LIBRARY				
ATC GROUP SERVICES	o by building	Owne	۲ (۲)		M No.	Name of Abatem			-			
Street Address	LLO			0	0098	The state of the s	VIRONMENTA	L, INC.				
3 TERRI LANE						Street Address						
City, State, Zip Code			-			1123 BEAVE						
BURLINGTON, NJ 0801	6					City, State, Zip Co						
Project Manager for Monitoring			Tol	ephone	- No	BRISTOL, PA	19007					
MICHAEL R. KEEHN	2		1 20		6-8800	Telephone No.		License No.				
Start Date (10)	Sche	eduled (ate (11)	215-788-6040		00509				
3 /13 /17	,				17	Name of OSHA M						
Occupancy Status During Abat							VIRONMENTAI	L, INC				
☐ Facility Closed/Vacated Dur	ring Entire Pe	eriod of	Ahate	ment		Street Address						
△ Abatement Performed Outs	ide of Norma	al Facili	ty Hou	re Do	scribe	1123 BEAVR						
Time of Abatement: 4:00A	M- <u>12:30</u> PM		PM	A	M	City, State, Zip Co						
Scope of Work (Check all that a	apply)			-1.11115.7-11		BRISTOL, PA	19007					
☐ ≥3 sf or ≥3 lf		⊠ n.					ainment with Neg	ative Pressure				
≥160 sf or ≥260 lf			enovat emoliti	on on		☐ Mini-Encl 図 Glovebag	osure					
						☐ Non-Exer	npted (*) and Nor	n-Friable Procedur	e.			
1		1 100	Loca					7000441	_	patem	ont T	
Location of Asbestos-Containing Materia	al (ACM)		Norma ed Sole		A = b =	Description of				-	1	-
TO BE ABATED	- ()	Ma	intena	nce/	(i.e	stos Containing Mate , thermal systems in	erial (ACM)	Amount	(em	Repair	inca	ncl
IN Facility (13)		Cus	todial (12)	Staff?		surfacing, VAT,	or	(Specify SF or LF)	Remova	¥.	psu	Enclosure
1, -7		Yes	No	N/A	1	other miscellaneo	us)	•	-		Encapsulate	ē
HASE 5A - LEVELS C & B	3				PIPE IN	SULATION		404015		-	_	
HASE 5A - LEVELS C & B	3		П			TILE & MASTIC		1010 LF		Ш		
HASE 5A - LEVELS C & B	1		_					43,057 SF				
HASE 5A - LEVELS C & B						fittings on fiberg		285 EA				
ame of Registered Waste Haul			N	JDEP V		pads on fiberglas		40 EA	\boxtimes			
SERVICE TRANSPORT G		.	H	auler ID	No.	Cubic Yards of Waste	Name of Registe					
ty, State				20990		Di- 15	MINERVA L	ANDFILL				
NEW CASTLE, DE						Disposal Date	City, State					
ompleted By (Print or Type)	Title						WAYNESBU	RG, OH				
BRIAN SCAFIRO	1 2 2 2	STIMA	TOD			Signature	P P 1	Date	/	/		
3-41	23	AINIT	IUK			Orian L	Jeafers /	il 7	120	11	7	

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Pa	IT	2
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	7/	17				ing Owner/Operato S OF PRINCETO			E C	C	3	7
⊠ EPA ⊠	pe Notification	on			et Address	-			<u> </u>		U	
☑ DOLWD ☑	Amended Amendment	#2 7/	70/47	City	, State, Zip	Code			.][]	2	8	21
	Emergency			P	RINCETO	N, NJ 08544		I had bear	00		U	-
(NJAC 5:23-8)	justification)		119	Nan	ne of Conta	act		Telephone Nu	mber			
	Cancellation			R	OBERT C	ORTEGO		Telephone Nu	BES	ros CEI	CO	N
				F.	ACILITY I	NFORMATION		0.		<i>U</i> 11	4011	100
Name of Facility Where Abate							Type of Facilit	y (4)				_
PRINCETON UNIVERS	ITY - FIRES	STONE	LIB	RARY			School (K-	12)				
Street Address							Subchapte	r 8 (Other than K- private and comm	12)	- 4		
1 WASHINGTON ROAD)						homes, etc	e.)	ierciai	buildii	ngs,	
City (5)							Square Feet	# of Floors	1	3ldg.	Age	-
PRINCETON, NJ							1,000,000	8		70	.90	
County (6)				Cou	inty Code	(7)(STATE USE ONLY)	Current Use (F	Prior if being demo	lished)			_
MERCER								TY LIBRARY		33%		
Name of Monitoring Firm Hire		Owner	r (8)	ASCN	I No.	Name of Abatem	nent Contractor (9					
ATC GROUP SERVICES	SLLC			00	098		NVIRONMENTAL, INC.					
Street Address						Street Address		,				
3 TERRI LANE						1123 BEAVE	R STREET					
City, State, Zip Code)		City, State, Zip C						_
BURLINGTON, NJ 0801						BRISTOL, P.						
Project Manager for Monitoring	g Firm		Tel	ephone	No.	Telephone No.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	License No.				_
MICHAEL R. KEEHN					6-8800	215-788-604	0	00509				
Start Date (10) 3 /13 /17					ate (11) 17	Name of OSHA						
			100				IVIRONMENTA	L, INC				
Occupancy Status During Aba ☐ Facility Closed/Vacated Du						Street Address						
Abatement Performed Outs	ide of Norma	eriod of	Abate	ment	a mulle a	1123 BEAVR	STREET					
Time of Abatement: 4:00A	M- <u>12:30</u> PM	/	PM	A	VI	City, State, Zip C						
cope of Work (Check all that	apply)			BRISTOL, PA 19007								_
_ ≥3 sf or ≥3 If		⊠ R€	enovat	ion		⊠ Full Con ☐ Mini-End	tainment with Neg	gative Pressure				
≥160 sf or ≥260 lf		☐ De	emolitic	on			g Procedure					
		T .				☐ Non-Exe	empted (*) and No	n-Friable Procedu	ıre			
Location of			s Locat Norma				76		At	atem	ent 7	T
Asbestos-Containing Mater	ial (ACM)	Use	ed Sole	ely by	Ashe	Description of stos Containing Ma	of	A 1	R	ZD.	ш	
TO BE ABATED	,	- WARARA	aintena		(i.e	., thermal systems	insulation,	Amount (Specify	Removal	Repair	ncal	
IN Facility (13)		Cus	todial (12)	Stail?		surfacing, VAT	, or	SF or LF)	<u>sa</u>	-	Encapsulate	
()		Yes	No	N/A	1	other miscellane	ous)				ate	
HASE 6 - LEVEL 1				\boxtimes	ACOUS	TICAL CEILING	PLASTER	6075 SF		П		
HASE 6 - LEVEL 1					PIPE IN	SULATION		200 LF				+
HASE 6 - LEVEL 1					SPLINE	CEILING TILES		4050 SF				1
RUSTEES READING RM	MEZZ.				ACOUS	TICAL PLASTER	RCEILING	450 SF	\boxtimes	П	П	1
ame of Registered Waste Hau			N	JDEP \		Cubic Yards of	Name of Regis					1
SERVICE TRANSPORT O	ROUP, IN	С.	2,100,000	auler II		Waste	MINERVA I					
ty, State				20990		Disposal Date	City, State					_
NEW CASTLE, DE							WAYNESB	URG OH				
ierr onores, be							ATREOD	o, orr	HENSTON -			
empleted By (Print or Type)	Title	3				Signature		Da				

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Date of Notification (1)							wner/Operator (-					
	27 /1	7			TRUS	TEES OF	PRINCETON	UN	IIVERSITY	MEG	EI	W	E	A
Agencies Notified	Type Notification	1		S	treet Ad		200							
						LM DRIV	V200				0 -		-	#1
□ DOLWD	Amended Amendment	#3_7/2	0/17	С	53377	te, Zip Coo			and the second	UL, JUL	28 8	2017	ţ	L
⊠ DOH	☐ Emergency (PRIN	CETON, I	NJ 08544		THE PERSON NAMED IN COLUMN 1				_	_
□ DCA (NJAC 5:23-8)	justification)	moradi	9	N	ame of	Contact			ar anna	Telephone Numb	oer o	TRO	71 9	
,	☐ Cancellation			-	ROBE	RT ORT	EGO			LIV	ENOUA	~	<i>γ</i> Ε α	
					FACI	LITY INFO	ORMATION							
Name of Facility Where	Abatement is Taki	ng Pla	ce (3)					9350	pe of Facility (4					
PRINCETON UNIVI	ERSITY - FIRES	STONE	E LIB	RAF	RΥ				School (K-12)	(Other than K-12)			
Street Address								18	Other (i.e., pri	vate and commer	rcial build	lings,		
1 WASHINGTON R	OAD								homes, etc.)					
City (5)								Sc	quare Feet	# of Floors		. Age		
PRINCETON, NJ									1,000,000	8	70)		
County (6)					County	Code (7)(5	STATE USE ONLY)			or if being demolis	shed)			
MERCER									UNIVERSITY	LIBRARY				
Name of Monitoring Firm	n Hired by Building	g Owne	er (8)	A	SCM N	0.	Name of Abatem							
ATC GROUP SERV		7.			0009	8	BRISTOL EN	VIF	RONMENTAL	., INC.				
Street Address				1-			Street Address							
3 TERRI LANE							1123 BEAVE	ER S	STREET					
City, State, Zip Code							City, State, Zip C	Code	9					
BURLINGTON, NJ	08016						BRISTOL, P	A 1	9007					
Project Manager for Mo		10.00	T	elep	hone N	0.	Telephone No.			License No.				
MICHAEL R. KEEH				609	3-386-8	3800	215-788-604	0		00509				
Start Date (10)		nedule	d Com	pleti	on Date	(11)	Name of OSHA	Mon	nitor					
3 / 13_					1		BRISTOL E	NVII	RONMENTAL	L, INC				
Occupancy Status Durin		eck on	alv one)			Street Address							
☐ Facility Closed/Vaca					ent		1123 BEAV	R S	TREET					
☐ Facility Closed/Vaca	ed Outside of Norr	nal Fa	cility H	ours	- Desc	ribe	City, State, Zip							
Time of Abatement:	4:00AM-12:30P	M/	PM		AM		BRISTOL, F							
Scope of Work (Check	all that apply)													
Scope of Work (Check	all that apply)						⊠ Full Co	ntai	nment with Neg	gative Pressure				
≥3 sf or ≥3 lf ≥3 sf or ≥3 lf			Reno Demo	vatio	n		☐ Mini-E	aa F	Procedure					
≥160 sf or ≥260 lf			Demo	JIILIO			☐ Non-E	xem	pted (*) and No	n-Friable Proced				
			Is Lo	ocati	on						Aba	ateme	nt Ty	ре
Location	on of			rmal			Description	n of		Amount	Re	Re	E	Ē
Asbestos-Containin	g Material (ACM)		Used Maint			Asbes	stos Containing N , thermal system	Mate	erial (ACM)	Amount (Specify	Removal	Repair	cap	Enclosure
TO BE AI			Custo	dial S		(1.6.	surfacing, VA	AT, c	or	SF or LF)	val	- 22.0	Encapsulate	ure
(13				12)			other miscella	neou	us)				te	
		Y	/es	No	N/A						57			
TRUSTEES READIN	NG RM MEZZ.] [PIPE IN	SULATION			85 LF				
WALL OUTSIDE CO	TSEN LIBRAR	RY [\boxtimes	WATER	PROOFING			250 SF				
PRESERVATION R	OOF				\boxtimes	WATER	PROOFING			150 SF				
												Ш	Ш	Ш
Name of Registered W	laste Hauler				JDEP \		Cubic Yards of			istered Landfill				
SERVICE TRANS		INC.		Н	20990		Waste		MINERVA	LANDFILL				
City, State			20330		Disposal Date		City, State			-7.5				
NEW CASTLE, D	E								WAYNES	BURG, OH				
Completed By (Print o		Title					Signature		0 1	/ .	Date /	1		
BRIAN SCAFIRO	0042 30		TIMA	TOR	2		Bria		Scolins	/re	7/2	0/1	7	
BRIAN SCAFIRO							1000	10	1 1	11		/		-

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D-1 (Alalifaction (1)					Name	of Buildin	a Ov	vner/Operator (2)	1	1 1 6	툽		1	1
Date of Notification (1)	27 /	17	_		1		37. day		UNIVERSITY	U					
Agencies Notified EPA	Type Notific	cation				t Address DELM DF	RIVE		and the control of th		U JUL	2 8	20	17	-
□ DOLWD		CONTRACTOR OF STREET	01401	_	City,	State, Zip (Code								士一
Ø DOH	Amendm		79.797	7	PR	INCETOR	۷, N.	J 08544	and the second		ASBEST				. &
	☐ Emerger justificat		uaing		Name	of Contac	ct		-		elephone N	mber	INU		
(130) 10 3123 37	☐ Cancella	ition			RO	BERT OF	RTE	GO	v						
					FA	CILITY IN	IFO	RMATION							
Name of Facility Where A	batement is	Taking F	Place (3)					Type of Facility	(4)					
PRINCETON UNIVE	RSITY - FIF	RESTO	NEL	BR	ARY				School (K-1		Nharthan V	12)			
Street Address									Subchapter Other (i.e., p.)				ouild	ngs,	
1 WASHINGTON RO	AD								homes, etc.						
City (5)							34. 25		Square Feet		# of Floors			Age	
PRINCETON, NJ									1,000,000		8		70		
County (6)			MILLOCY 92 -		Cour	nty Code (7)(STA	ATE USE ONLY)				olished)			
MERCER									UNIVERSIT	365	IBRARY				
Name of Monitoring Firm I		ding Ow	ner (8)	ASCM				ent Contractor (9						
ATC GROUP SERVI	CES LLC				000)98			VIRONMENTA	L, I	NC.				
Street Address							1	eet Address							
3 TERRI LANE								123 BEAVE							
City, State, Zip Code							7 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 -	y, State, Zip Co							
BURLINGTON, NJ 08				- .			1	BRISTOL, PA	19007		License No.		5-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		
Project Manager for Monito					phone 9-386		83	ephone No. 15-788-6040			00509				
MICHAEL R. KEEHN		Schedule	od Co				-	me of OSHA M							
Start Date (10) 3 /13 /				300	/				/IRONMENTA	L. I	NC				
Occupancy Status During								eet Address							
Facility Closed/Vacated					ment		100	123 BEAVR	STREET						
Abatement Performed	Outside of No	ormal Fa	acility I	Hour	s - Des	cribe	-	, State, Zip Co							
Time of Abatement: 4:0							1 -	RISTOL, PA							
Scope of Work (Check all t	that apply)							⊠ Full Cont	ainment with Ne	aativ	e Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			Rend					☐ Mini-Encl ☐ Glovebag	osure Procedure	7					
						,		☐ Non-Exer	npted (*) and No	n-F	riable Proced				
				ocat rma								A	-	ment T	ype
Location o Asbestos-Containing M		1)	Used			Asbe	stos	Description of Containing Mat			Amount	Remova	Kepair	Encapsulate	Enclosure
TO BE ABAT		- 1	Main Custo				., the	rmal systems i	nsulation,		(Specify SF or LF)	Nova	ar	aps	losu
IN Facility (13)				(12)	Jian :			urfacing, VAT, ner miscellaned			SF OF LF)	1 20		ulat	le l
(13)		Y	'es	No	N/A				,				<u> </u>	0	
PHASE 5A - LEVELS C	: & B				\boxtimes	PIPE IN	SUL	ATION .			1010 LF	×	L		
PHASE 5A - LEVELS C	: & B] [FLOOR	TILI	E & MASTIC		1	43,057 SF	X	+		
PHASE 5A - LEVELS C	& B] [Packed	fitti	ngs on fiber	glass		285 EA		-		
PHASE 5A - LEVELS C	& B] [Hanger	pad	s on fibergla			40 EA				
Name of Registered Waste				03033	JDEP V auler ID		Cub	ic Yards of	Name of Regis						
SERVICE TRANSPOR	RT GROUP	, INC.			20990				MINERVA	LAr	NUFILL				
City, State			1000				Disp	oosal Date	City, State		0.611				
NEW CASTLE, DE		1			WAYNESB	UR	G, OH								
Completed By (Print or Type	e)	Title						Signature	1 1.			Date /	. /	.1	
BRIAN SCAFIRO		EST	IMAT	OR				Brian	Scofero	1.	pl	6/10	1	1	

2.#	3220	0
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Date of Notification (1) 2 / 27	1	17				ding Owner/Operator					V	
	Notification			Stre	eet Addres	s			JL 2	2 8	2017	7
	mended			City	, State, Zi							
	mendment mergency			5 1		ON, NJ 08544		ASBES	TOS	CO	NTR	OL
(NJAC 5:23-8) ju	stification)		9	Nar	ne of Cont	act		Telephone No	4 40			
	ancellation	1		R	OBERT (DRTEGO						
					ACILITY	INFORMATION						
Name of Facility Where Abatem							Type of Facility					
PRINCETON UNIVERSIT Street Address	Y - FIRES	OIUNI	LIE	KAKY			School (K-1)	2) 8 (Other than K-	12)			
1 WASHINGTON ROAD							Other (i.e., p	rivate and comm	ercial	build	ings,	
City (5)							Square Feet	# of Floors		Bldg	Age	
PRINCETON, NJ			-	10		(7) (07.77.110.01111	1,000,000	8		70	į	
County (6) MERCER				Co	unty Code	(7)(STATE USE ONLY)	Current Use (Pr UNIVERSIT	ior if being demo	lished)		
Name of Monitoring Firm Hired I	•	Owne	r (8)	ASC		Name of Abatem						
ATC GROUP SERVICES I	LLC	-		00	0098		VIRONMENTA	L, INC.				
Street Address						Street Address						
3 TERRI LANE						1123 BEAVE						
City, State, Zip Code						City, State, Zip Co						
BURLINGTON, NJ 08016 Project Manager for Monitoring F	irm		Te	lonbone	Na	BRISTOL, PA	19007	1				
MICHAEL R. KEEHN	11111			elephone	6-8800	Telephone No. 215-788-6040		License No.				
Start Date (10)	Sche	duled			ate (11)	Name of OSHA M		00509	_			
3/13/17					17		/IRONMENTAL	, INC				
Occupancy Status During Abater	nent (Ched	k only	one)			Street Address					-	
☐ Facility Closed/Vacated Durin						1123 BEAVR	STREET					
Abatement Performed Outside						City, State, Zip Co	de					-
Time of Abatement: 4:00AM-			PM	AI	M	BRISTOL, PA	19007					
Scope of Work (Check all that ap	ply)							ma se				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			enova emolit	7877 F 1		☐ Mini-Enclosed Glovebag						
		T Is	Loca	ation			inplied () and 140h	-i liable Flocedu	1	hatan	nent T	
Location of			Norm			Description of					T	T
Asbestos-Containing Material TO BE ABATED	(ACM)	1		lely by ance/	Asbe	stos Containing Mate ., thermal systems in	erial (ACM)	Amount	Removal	Repair	Encapsulate	nclo
IN Facility		Cus		Staff?	(1.0	surfacing, VAT,	or	(Specify SF or LF)	oval	=	psu	Enclosure
(13)		Yes	(12) No	N/A	-	other miscellaneo	us)				late	е
PHASE 6 - LEVEL 1				\boxtimes	ACOUS	TICAL CEILING F	PLASTER	6075 SF				
PHASE 6 - LEVEL 1				\boxtimes	PIPE IN	SULATION		200 LF				
PHASE 6 - LEVEL 1				\boxtimes	SPLINE	CEILING TILES		4050 SF	\boxtimes			
RUSTREES READING RM N	IEZZ.				ACOUS	TICAL PLASTER	CEILING	450 SF				
ame of Registered Waste Hauler SERVICE TRANSPORT GR).	1000	JDEP V lauler ID	No.	Cubic Yards of Waste	Name of Registe					
ity, State	511 17 -11 5 -1 5 - 5	-		20990		Disposal Date	City, State		-			
NEW CASTLE, DE						HC	WAYNESBU	RG, OH				
ompleted By (Print or Type)	Title					Signature	//	/ Dat	e /		/	
BRIAN SCAFIRO	ES	AMIT	TOR			Brian &	Scolino /	yl 1	1/10	6/.	17	

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Date of Notification (1)		4-		4		ding Owner/Operator	The state of the s	MEC	E	П	7.77	r
	/	17			TRUSTEE	S OF PRINCETO	N UNIVERSITY	1D)		Ш	\mathbb{V}	<u>E</u>
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- P. C.		ency (inclu		- 1	PRINCETO	DN, NJ 08544	1					į
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				F	FACILITY	INFORMATION		-				
Name of Facility Where Abate			2000				Type of Facility ((4)	-			
PRINCETON UNIVERSIT	TY - FI	RESTON	E LIE	RARY	1		School (K-12)				
Street Address							Subchapter 8	(Other than K-	12)	build	inaa	
1 WASHINGTON ROAD							homes, etc.)	ivate and commi	ercial	Dulla	ings	Š
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Name of Monitoring Firm Hired		ding Owne	er (8)		M No.	Name of Abateme	(3)(3)					
ATC GROUP SERVICES	LLC			0	0098	BRISTOL EN	VIRONMENTAL	, INC.				
Street Address						Street Address						
3 TERRI LANE		577				1123 BEAVE						
City, State, Zip Code						City, State, Zip Co						
BURLINGTON, NJ 08016						BRISTOL, PA	19007					
Project Manager for Monitoring MICHAEL R. KEEHN	Firm			lephon		Telephone No.		License No.				
		S-1			86-8800	215-788-6040		00509				
Start Date (10)3 /13 /17		Scheduled			months of the control	Name of OSHA M		50 PW 100				
				/	17	BRISTOL EN	/IRONMENTAL,	INC				
Occupancy Status During Abate						Street Address						
☐ Facility Closed/Vacated During ☐ Abatement Performed Outside	ng Entire le of Noi	e Period o	f Abati	ement	caribo	1123 BEAVR						
Time of Abatement: 4:00 AM	-12:30F	PM/	PM-	115 - De A	M	City, State, Zip Co						
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Scope of Work (Check all that ap	opiy)					⊠ Full Conta	inment with Negat	ive Pressure			£41.	
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lame of Registered Waste Haule SERVICE TRANSPORT GR		INC.	Н	JDEP \ auler II 2000	No.	Cubic Yards of Waste	Name of Registere MINERVA LAI					
ity, State				20990		Disposal Date	City, State					-
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BRIAN SCAFIRO		ESTIMA	TOR			Brian &	Redia /s	l 6	/16	11	7	

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uding	17 N	Street Addres 200 ELM I City, State, Zi PRINCETO Name of Cont	DRIVE DP Code ON, NJ 08544 Bact ORTEGO	N UNIVERS	ASB	ESTO	DS C	ON	TR
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uding	3)	City, State, Zi PRINCETO Name of Cont ROBERT (p Code ON, NJ 08544 act ORTEGO		ASB	ESTO	DS C	ON	TR
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er (8)	AS	CM No.	Name of Abateme	nt Contractor	(9)				
		82000	BRISTOL EN	/IRONMENT	TAL, INC.				
			Street Address						
			1123 BEAVER	STREET					
			City, State, Zip Co	de					
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		and the second s			00509				
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	\boxtimes		tings on fibergla		40 EA	M			
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N 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Comp / / one) of Abate lity Hou PM enovate emolitie ss Local Norma ed Sole sintena ttodial \$ (12) No	Telephol 609-3 Completion / 1 / y one) of Abatement lity Hours - Do PM- / enovation emolition s Location Normally ed Solely by sintenance/ todial Staff? (12) No N/A	Telephone No. 609-386-8800 Completion Date (11) / _ 1 / _ 17 y one) of Abatement lity Hours - Describe _PMAM enovation emolition s Location Normally ed Solely by sintenance/ todial Staff? (12) No N/A	Street Address 1123 BEAVER City, State, Zip Co BRISTOL, PA Telephone No. 609-386-8800 Completion Date (11) / 1 / 17 Street Address 1123 BEAVER City, State, Zip Co BRISTOL, PA Telephone No. 215-788-6040 Name of OSHA Mo BRISTOL ENV y one) Street Address 1123 BEAVR S City, State, Zip Cod BRISTOL, PA 1 Full Contain Mini-Enclose BRISTOL, PA 1 Full Contain Mini-Enclose City, State, Zip Cod BRISTOL, PA 1 Full Contain Mini-Enclose City State, Zip Cod BRISTOL, PA 1 AM Full Contain Mini-Enclose City, State, Zip Cod	County Code (7)(STATE USE ONLY) Current Use UNIVERS Der (8) ASCM No. 00098 BRISTOL ENVIRONMENT Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Telephone No. 609-386-8800 Completion Date (11) / 1 / 17 BRISTOL ENVIRONMENT Y one) Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL ENVIRONMENT Y one) Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL ENVIRONMENT Y one) Street Address 1123 BEAVR STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVR STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVR STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVR STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVR STREET City, State, Zip Code BRISTOL, PA 19007 AMDITION OF COMPANY STREET City, State, Zip Code BRISTOL, PA 19007 ASDESTOL OF COMPANY STREET City, State, Zip Code BRISTOL OF COMPANY Current Use UNIVERS NO STREET City, State, Zip Code BRISTOL OF COMPANY STREET City,	County Code (7)(STATE USE ONLY) Current Use (Prior if being den UNIVERSITY LIBRARY Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, INC. Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Telephone No. 609-386-8800 Completion Date (11) / 1 / 17 BRISTOL ENVIRONMENTAL, INC Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL ENVIRONMENTAL, INC Street Address 1123 BEAVER STREET City one) Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 AM Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) No N/A	County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished UNIVERSITY LIBRARY Name of Abatement Contractor (9) BRISTOL ENVIRONMENTAL, INC. Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL, PA 19007 Telephone No. 605-386-8800 215-788-6040 Completion Date (11) / 1 / 17 BRISTOL ENVIRONMENTAL, INC Street Address 1123 BEAVER STREET City, State, Zip Code BRISTOL ENVIRONMENTAL, INC Street Address 1123 BEAVR STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVR STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVR STREET City, State, Zip Code BRISTOL, PA 19007 Street Address 1123 BEAVR STREET City, State, Zip Code BRISTOL, PA 19007 STRUCONTAINMENTAL, INC STRUCTON ON ON ON-Friable Procedure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Street Address 1 123 BEAVR STREET City, State, Zip Code BRISTOL, PA 19007 STRUCTON ON ON-Friable Procedure AN ON-Exempted (*) and Non-Friable Procedure Street Address 1 123 BEAVR STREET City, State, Zip Code BRISTOL ON ON ON ON-Friable Procedure Street Address 1 123 BEAVR STREET City, State, Zip Code BRISTOL ON ON ON ON-Friable Procedure Street Address 1 123 BEAVR STREET City, State, Zip Code BRISTOL ON ON ON ON-Friable Procedure Street Address 1 123 BEAVR STREET City, State, Zip Code BRISTOL ON	County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) UNIVERSITY LIBRARY DO098 BRISTOL ENVIRONMENTAL, INC. 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* Do not use this form for asbestos licensure exempted activities.

Name of Building Owner/Operator (2) Date of Notification (1) TRUSTEES OF PRINCETON UNIVERSIT 27 / 17 2 Street Address Type Notification Agencies Notified 2 8 2017 ☑ Initial **⊠** EPA 200 ELM DRIVE **⊠** DOLWD City, State, Zip Code Amendment #1-3/27/17 DOH DOH PRINCETON, NJ 08544 Telephone Number SING ☐ Emergency (including ☑ DCA Name of Contact justification) SING (NJAC 5:23-8) □ Cancellation ROBERT ORTEGO **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) PRINCETON UNIVERSITY - FIRESTONE LIBRARY School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 1 WASHINGTON ROAD homes, etc.) Square Feet # of Floors Bldg. Age City (5) 1,000,000 8 70 PRINCETON, NJ County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) County (6) UNIVERSITY LIBRARY MERCER Name of Monitoring Firm Hired by Building Owner (8) Name of Abatement Contractor (9) ASCM No. BRISTOL ENVIRONMENTAL, INC. ATC GROUP SERVICES LLC 00098 Street Address Street Address 1123 BEAVER STREET 3 TERRI LANE City, State, Zip Code City, State, Zip Code BRISTOL, PA 19007 BURLINGTON, NJ 08016 Telephone No. License No. Telephone No. Project Manager for Monitoring Firm 00509 215-788-6040 609-386-8800 MICHAEL R. KEEHN Scheduled Completion Date (11) Name of OSHA Monitor Start Date (10) BRISTOL ENVIRONMENTAL, INC 8 / 1 / 17 3 / 13 / 17 Street Address Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement 1123 BEAVR STREET Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: 4:00AM-12:30PM/ PM- AM BRISTOL, PA 19007 Scope of Work (Check all that apply) Full Containment with Negative Pressure ☐ Mini-Enclosure □ Renovation ≥3 sf or ≥3 lf ☐ Demolition >160 sf or ≥260 lf ☐ Non-Exempted (*) and Non-Friable Procedure Abatement Type Is Location Normally Description of Location of Remova Used Solely by Asbestos Containing Material (ACM) Amount ncapsulate Asbestos-Containing Material (ACM) Maintenance/ (i.e., thermal systems insulation. (Specify TO BE ABATED Custodial Staff? surfacing, VAT, or SF or LF) IN Facility (12)other miscellaneous) (13)Yes No N/A \boxtimes X ACOUSTICAL CEILING PLASTER 6075 SF PHASE 6 - LEVEL 1 200 LF \boxtimes X PIPE INSULATION PHASE 6 - LEVEL 1 X SPLINE CEILING TILES 4050 SF X PHASE 6 - LEVEL 1 П Name of Registered Landfill NJDEP Waste Cubic Yards of Vame of Registered Waste Hauler Hauler ID No. Waste MINERVA LANDFILL SERVICE TRANSPORT GROUP, INC. 20990 City, State Disposal Date ity. State WAYNESBURG, OH NEW CASTLE, DE Signature ompleted By (Print or Type) Title **ESTIMATOR** BRIAN SCAFIRO

B41 BS17024

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

Ch # 3/65 Pa. I

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Date of Notification (1)	27 / _	17	-			ling Owner/Operato S OF PRINCETO		ME	CE		\mathbb{V}	
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(NJAC 5:23-8)	Cancellation			1	ROBERT		*				NG	
					FACILITY	INFORMATION	1= -45-70	(4)				
Name of Facility Where A	batement is Ta	aking P	ace (3)			Type of Facility					
PRINCETON UNIVE	RISYT - FIRE	ESTOR	E LIE	BRARY	r		☐ School (K-1. Subchapter	2) 8 (Other than k	(-12)			
Street Address							Other (i.e., p	rivate and com	mercia	l buil	dings	1
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MERCER							UNIVERSIT	YLIBRARY				
Name of Monitoring Firm H	Hired by Buildin	ig Own	er (8)	ASC	M No.	Name of Abatem	ent Contractor (9)	8				
ATC GROUP SERVICE	ES LLC			0	0098	BRISTOL EN	VIRONMENTAL	L, INC.				
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-	-			Street Address						
Street Address						1123 BEAVE	R STREET					
3 TERRI LANE						City, State, Zip C						
City, State, Zip Code	848					BRISTOL, PA						
BURLINGTON, NJ 08				1 - 6	- E1-	Telephone No.		License No.				
Project Manager for Monito	ring Firm		1	lephon		215-788-6040	ì	00509				
MICHAEL R. KEEHN			1		6-8800	Name of OSHA N		1 00000				
Start Date (10)	A CONTRACTOR				ate (11)			ILIC				
3 / 13 /	17 _	8	/	1 /	17	BRISTOLEN	VIRONMENTAL	, INC				
Occupancy Status During A	batement (Che	ck only	one)			Street Address						
Teacility Closed Vacated	During Entire P	eriod o	f Abat	ement		1123 BEAVR	STREET					
A shetement Performed O	utside of Norma	al Facil	ity Hou	ırs - De	scribe	City, State, Zip Co	de					
Time of Abatement: 7:00	DAM-3:30PM/		PM	AM	l .	BRISTOL, PA	19007					
cope of Work (Check all the	at apply)		-									
cope of work (Check an in	ar app.,,,					⊠ Full Conta	ainment with Nega	tive Pressure				
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TO BE ABATEL	2	1 2007	todial		(i.e.,	thermal systems in surfacing, VAT, of		(Specify SF or LF)	DVa	=	psu	Insc
IN Facility (13)			(12)			other miscellaneo		,	-		ate	6
(13)		Yes	No	N/A								
(ASE 5A - LEVELS C &	В			\boxtimes	PIPE INS	ULATION		1010 LF	×			
IASE 5A - LEVELS C &				×	FLOOR 1	TILE & MASTIC		43,057 SF	×			
ASE 5A - LEVELS C &				\boxtimes	Packed f	ittings on fiberg	lass	285 EA	×			
ASE 5A - LEVELS C &	В			\boxtimes	Hanger p	ads on fiberglas		40 EA	X			
ne of Registered Waste Ha			1	JDEP W		Cubic Yards of	Name of Registere					
ERVICE TRANSPORT) .	1000	auler ID 20990		Vaste	MINERVA LA	NDFILL				_
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^{*} Do not use this form for asbestos licensure exempted activities.

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Date of Notification (1)						ding Owner/Operator		DEGE	3 [W	F	[
2 /	27 /	17		-	TRUSTEE	S OF PRINCETO	N UNIVERS	MY LE COL	= U	U	느	7]		
Agencies Notified	Type Notifica	ation	-	Str	reet Addres	S				7				
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				E	ACILITY	INFORMATION				3				
Name of Facility Where	hatement is T	aking Pl	ace (3)		NOIL!!!	iiii oriiii iii	Type of Fac	ility (4)						
PRINCETON UNIVE	DIEVY EIDI	FETON	FIR	RARY	,		School (F	(-12)						
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Name of Monitoring Firm	Mireo by Buildii	ng Owne	51 (0)	10000000	0098	BRISTOL EN								
ATC GROUP SERVI	CES LLC			0	0000	Street Address								
treet Address						1123 BEAVE	RSTREET							
3 TERRI LANE						City, State, Zip Co								
ity, State, Zip Code	56/6					BRISTOL, PA								
BURLINGTON, NJ 0			1+.	lonk	a Na	Telephone No. License No.								
roject Manager for Monit			- N	ephone		215-788-6040								
MICHAEL R. KEEHN			_		6-8800		Name of OSHA Monitor							
tart Date (10)					ate (11)	BRISTOL EN		AL INC						
3/13/				/			CONTRACTOR IN	, III O						
ccupancy Status During A	Abatement (Che	eck only	one)			Street Address	4-12 [mm+							
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Abatament Performed C	outside of Norm	nal Facil	ity Hou	rs - De	scribe	City, State, Zip Con								
Time of Abatement: 7:0						BRISTOL, PA	1900/							
cope of Work (Check all th	nat apply)					M Full Conta	inment with Na	egative Pressure						
entreport M		X R	enovati	ion		Mini-Enclo	sure	284110111000010						
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IN Facility	-	Cus	todial S	Staff?		surfacing, VAT, o	or (s)	SF or LF)	<u>a</u>		ula	Tre		
(13)			(12)	81/A	1	other miscellaneou	15)				6			
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ASE 6 - LEVEL 1					OI LINE	CEIPHO HERO				_				
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ERVICE TRANSPORT	GROUP, IN	C.		uler ID 20990	NO.	Waste	MINERVA	LANDFILL						
			1 6	0000		Disposal Date	City, State							
, State EW CASTLE, DE							WAYNESB	URG, OH						
	Title					Signature	4	Date		1				
pleted By (Print or Type)	4	STIMA	TOP			The same	beal'	1-p 21	27	11	7			
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* Do not use this form for asbestos licensure exempted activities.

B517024

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Print Form State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) Warren Bradley 07-18-17 Street Address Type Notification Agencies Notified ASBESTOS CONTROL & LICENSING initial **EPA** City, State, Zip Code Amended DEP Wayne, NJ 07470 Amendment # DOL × Emergency (including T-I-shana Number Name of Contact justification) DOH Warren Bradley Cancellation DCA **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Private Home Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) Bldg Age # of Floors Square Feet City (5) Wayne Current Use (Prior if being demolished) County Code (7) County (6) (STATE USE ONLY) Bergen Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) Delfa Contracting LLC. NA Street Address Street Address 522 7th St. City, State, Zip Code City, State, 7ip Code Union City NJ 07087 License No. Telephone No. Telephone No. Project Manager for Monitoring Firm 01206 201 216-9603 Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) Delfa Contracting LLC 07-27-17 Street Address Occupancy Status During Abatement (Check Only One) 522 7th St. Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours Other – Describe: 7:00 Am - 5:00 Pm Union City NJ 07087 Scope of Work (Check All That Apply) Full Containment with Negative Pressure Renovation ≥3 sf or ≥3 lf Mini-Endosure Demolition ≥160 sf or ≥260 lf Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement is Location Type Normally Description of Location of Used Solely by Amount Asbestos Containing Material (ACM) Encapsulate Asbestos-Containing Material (ACM) Enclosure Maintenance/ (i.e. thermal systems insulation, (Specify Remova Repair TO BE ABATED Custodial Staff? SF or LF) surfacing, VAT, or In Facility (12)other miscellaneous) (13)

Name of Registered Landfill Cubic Yards NJDEP Waste Name of Registered Waste Hauler of Waste Tullytown Resource Recovery Facility Hauler ID No. Delfa Contracting LLC 35240 City, State Disposal Date City, State Tullytown, PA 07-31-17 Union City, NJ Date Signature Completed by 07-18-17 Proj. Manager. Jaime Delgado

VAT

Yes

No

X

NIA

110 SF

X

2nd Floor

aburage

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

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Pate of Notification (1)		Na M	me of Bu	uilding Owr AIR STA	ner/Operato	r (2) ERSITY.	na de la companya de	ASBEST			ROL	<u> </u> &	- Committee of the Comm
gencies Notified Type Notification		15		OVE ROA	ND. 3rd F	loor		LIC	CENS	ING			4
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DOH justification) Cancellation	accury	W		N ROBLE		ciate Dire	ector)						_
Name of Facility Where Abatement is Taking I	Place (3)		FACILI	TY INFOR	MATION		Facility (4)	V					
PRIVATE Street Address						The City	hool (K-12 bchapter 8 her (i.e. pri) (Other than I vate & comm	(-12) ercial bi	uildin	gs, ho	mes,	
City (5)						Square	Feet	# of Floors			. Age		1
MONCLAIR NJ.			ounty Co			1	Use (Prior	if being dem	olished)				-
County (6) ESSEX COUNTY	wner (8)	(S	ASCM	No.	Nan	ne of Abate	ment Cont	N/A ractor (9)					\dashv
Name of Monitoring Firm Hired by Building O DETAIL ASSOCIATE INC.	Wilei (b)					ORTH EA		IRONMEN	TAL L	LC.			-
Street Address 300 GRAND AVE.					11	26 - 51 S	ST.						_
City, State, Zip Code ENGLEWOOD NJ. 07631					No	ORTH BE	RGEN N	NJ. 07047	se No.				_
Project Manager for Monitoring Firm STEPHEN JARACZEWSKI		2		69. 6708	20	ephone No. 01,776.06	42	0130					
Start Date (10) 07/20/2017	Scheduled 07/27/2		pletion D	ate (11)	D		SSOCIAT	TES INC.					
Occupancy Status During Abatement (Check						eet Address 00 GRAN							
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe:	eriod of Al al Facility	Hours	ent		Cit	y, State, Zig NGLEW	o Code OOD NJ.	07631					
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf	⊠ R	enoval	tion	1.		Full Min	Containm	ent with Nega	tive Pre	essure	9		
≥160 sf or ≥260 lf	L D	emoliti	on				wehen Pm	cedure d (*) and Non-	-Friable	Proc	edure	<u> </u>	
		Locati								,	Abate Ty	ment pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	lormal d Sole intenal todial s (12)	ly by nce/	Asbest (i.e.	os Containi thermal sys surfacino	otion of ing Material stems insula g, VAT, or cellaneous)	ation,	Amoun (Specif SF or Li	У	Removal	Repair	Encapsulate	Enclosure
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(Sprague Library)		^											
Name of Registered Waste Hauler			NJDEP \		Cubic Ya			f Registered I		IOF	IAIC		
TRI STATE ASSOC INC		13. 1	Hauler II 19951	J NO.	TBD		MINE City, St	RVA ENTE		IOE	1140.		
City, State BRONX, NY.					Disposal			VESBURG	OHIC	-			
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ONITEO ESCOTE					/	/	1	//					

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

Name of Building Owner/Operator (2)

		NOTIF:	ICAT	ION OF	F ASBE	STOS	nd 12:120-7)				P E	П	7\//	写	-
	(1)	(Pursual	ame	of Bu	ildin	g Ow	ner/Operator	(2)	a committee	In E	C E	Ш	W		-11)
Date of Notification	(1)		Ni	cole	e Lu	isi				3					
7/21/2017												0	201	7	IIU
Agencies Notified	Type Notifica	tion	Stre	et Ado	iress						IUL 2	8	ZUI	1	-
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[]DEP	[]Amended		Ha	awth	orne	, N	7,07506				LICE	NS	NG		
[X]DOL	Notifica	ation	Name	of C	ontac	t			Telephone	7					
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[]DCA	[]Cancella											_			
	[]Cancerra	02011		FA	CILIT	Y IN	FORMATION			- (4)					-
Name of Facility Who	are Abatement	is Takir	ng P	lace	(3)				e of Facility						
Nicole Luisi	516 1200								[]School (K- []Subchapter	-12) - 0 (Other	than	K-1	2)		
NICOTE THIST									[]Subchapter [X]Other (i.e	e., privat	e & c	omme	rci	al	
Street Address									buildings, he	omes, etc.)				
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and the second s		To too	161			Coun	ty Code (7)								
City (5)		County Passa				(STA	TE USE ONLY)	Cu	rrent Use (Pr	ior if be:	ing de	mol:	ishe	d)	
Hawthorne		Passa	ITC												
			- 1	ASCM N	To		Name of Abate	men	t Contractor	(9)					
Name of Monitoring	Firm hired by	Buildin	ıg ¦	ASCM I			AZTECH N	MAN	AGEMENT,	Inc.					
Owner (8) N/A							Street Addres								
Street Address							86 Chris	sto	pher St.						
City, State, Zip Co	ode						City, State,	zıp	NJ 0704	2					
City, State,							1			F	icens	a Ni	ımbe	r	
Project Manager for	r Monitoring E	irm To	elep	hone l	Number	=	Telephone Nur	mber		Ī	003				
Project Manager 10	r Monitoring 1	Control of the Contro	/A				(973)74	4-8	3800		000				
	10-1	ned. Com			ate (11)	Name of OSHA	Mor	nitor						
Scheduled Start Da			-1-		7		N/A								
07 -31 -17		onth.	Day	Į.	Year						-				
Month Day Occupancy Status D	i Shatomer	at (Chec	k or	nly on	e)		Street Addre	SS							
[X] Facility C.	Losed/ vacaced	During 1	Enti	re Pe	riod							_		77.	
of Abatem	parformed Outs	ide of	Norm	nal Fa	cility	I	City, State,	Zij	o Code						
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[]other - De	scribe: «Other	Occupan	cy L	escri	pc»										
Scope of Work (Che	eck all that a	pply)					[]Ful:	l Co	ntainment wit	th Negativ	e Pres	ssur	e		
[X]>3 sf			[X]	Renov	ation		[]Min:	i-En	closure pag Procedure						
[]>160 s	f or >260 lf		[]	Demol:	ition		[]Non	-Fri	able Procedu	re				L D	
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Togat	ion of			cation rmally			Descript Asbestos-Co	ion	of	Amoun		RE	R	N	N C
Asbestos-	Containing		1	Used			Material	L (A	CM)	(Speci:		M	E P	A P	L
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	ABATED cility		Cus	stodia	1	i	nsulation, su or other mis	rfac	laneous)	111,		A	R	T L	U R
	13)	Ye	es	No	N/A		or other mis	cer.							E
			-		X	Din	e Insulat	tic	n	125		K.			
Basement			-		5 &										
							Lie Vende		Name of Regi	stered La	ndfil				
Name of Register	ed Waste Haule	r		DEP Wa		100	ubic Yards of Waste 1.5		Minerva	Enter	pris	e	IN	C	
AZTECH MAN	AGEMENT,	INC.	1°	7040	LD HO.					-				-	
	20.00					D	isposal Date		City, State Waynesh	nira/ 0	hio	44	68	8	
City, State Montclair,	NJ 07042						8-2-17	/	Maynest	, 7					
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Completed By (Pr	int or Type)	Title					Signat	_	4/1/	1/_	7	/21	/201	7	
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Agencies Notified Type Notification	11 10	Str	eet Add	ress ,		11.100	2	L	U BESTO	00.2	NTR)) 8	
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Name of Facility Where Abatement is Taking F	Place (3)		I AOILI	TT NOT COLUMN		Type of F	acility (4)						
Street Address . Or I.	11					Sub	iool (K-12) ochapter 8 ier (i.e. pri	(Other th	nan K-12) mmercial	buildin	igs, h	omes,	
						etc. Square F		# of Flo	ors	Bld	g. Age	9	
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County (5)			ounty Co	ode (7) SE ONLY)		Current	Use (Prior		demolishe	ed)			
Somest	mor (0)		ASCM		Name	of Abater	nent Contr	-					
Name of Monitoring Firm Hired by Building Ov	viiei (o)		ACOM				ries Inc.						
Street Address						Address Box 91	5						
					I DE MESSE	tate, Zip							
City, State, Zip Code							Jersey 0						_
Project Manager for Monitoring Firm		Te	elephon	e No.		one No.)899-74	199		icense No 1196).			
	Schedulep	Comp	letion D	Date (11)	10 235	of OSHA							
Start Date (10) 1/24/17	XT	7/	17										_
Occupancy Status During Abatement (Check	Only One	:)			Street	Address							
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe:	eriod of Ab Il Facility I	ateme Hours	ent		City, S	State, Zip	Code						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 if ≥160 sf or ≥260 if	D Re □ De	enovati	on			Mini-	Containme Enclosure ebag Proc Exempted	edure		le Proc	cedure		
	Is	Locatio	n								Abate Ty	ment ce	
Location of		ormally Solely		D Asbestos Co	escription	n of Material (ACM)	Amo	ount			т	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	ntenan odial S (12)	ce/	(i.e. therm	al system facing, V	ns insulat AT, or	ion,		ecify or LF)	Removal	Repair	Encapsulate	Enclosure
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S Davids and Waste Hauler		N	JDEP V	Vaste Cub	ic Yards		Name of	Registere	ed Landfi	1			
Name of Registered Waste Hauler Brick Industries Inc.		Н	auler ID 1602	No. of W	Vaste C) re	GROV City, Sta						
City, State Brick, New Jersey				0.00	Signatu	7	PA		T D	ato	111	1	
Completed by Eric Plackis	Title Pres	ident			O.g. iaco	86	2			1/	19	//	1

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

NOTIFICATION OF ASSESTOR ABATEMENT (Pursuant to NAIGE 540 and 12:120) Notified Type of Facility (A) Saddingtor S (Other than K-12) Other Le. private & commercial buildings, homes, etc.) Type of Facility (A) Saddingtor S (Other than K-12) Other Le. private & commercial buildings, homes, etc.) Type of Facility (A) Saddingtor S (Other than K-12) Other Le. private & commercial buildings, homes, etc.) Type of Facility (A) Saddingtor S (Other than K-12) Other Le. private & commercial buildings, homes, etc.) Type of Facility (A) Saddingtor S (Other than K-12) Other Le. private & commercial buildings, homes, etc.) Type of Facility (A) Type of Facility (A) Saddingtor S (Other than K-12) Other Le. private & commercial buildings, homes, etc. Type In the Interest of the I										Print Fo	orm
andes Notified Type Notification FPA Initial DEP DEP DOL Initial DEP Amended To Contact Energency (including lustification) Ene	CH2152	(Purs	TION OF A uant to NJ.	SBESTOS A AC 8:60 and	12.120)						
encies Notified Total Initial Amended Amended Total Telephone Number Telep	e of Notification (1) 7		Lesi	il 50	scib.	aldi		000			
DEP DOL Amendment # Langerincy (including justification)	encies rrounes							ASBESTOS	CONT	ROL 8	Š.
Rame of Contact Cancellation C	DEP Amended		TO	MS B	vec	INI	08753)			-
## PACILITY INFORMATION Type of Facility (Vhere Abatement is Taking Place (3)) ## School (K-12)	DOH justification		ame of Con Eric Plack	itact is							
Subdraplet & Office value of Commercial buildings, homes, etc.] Sugare Feet \$ of Floors Bidg, Age	DCA 🗀	ne (3)	FACILITY	INFORMATI	ON						
Square Feet	-							ther than K-12) e & commercial bu	ildings	, homes,	
County (6) County (7) County (8) Name of Material (ACM) City, State, Zip Code Street Address City, State, Zip Code Brick, New Jersey 08723 City, State, Zip Code Street Address City, State, Zip Code Mini-Enclosure Scope of Work (Check All That Apply) Asbestos-Containing Material (ACM) Couplancy State Suring Abatement (Specify Specify Custodial Staff' (12) Ves No N/A Name of Registered Waste Hauler Brick Industries Inc. City, State, Zip Code Name of Registered Landfill (Specify Specify S	treet Address	- 1				etc.)			Bldg. A	Age	
Name of Monitoring Firm Hired by Building Owner (8) Name of Abatement Contractor (9) Brick Industries Inc. Sireet Address P.O. Box 915 City, State, Zip Code Brick, New Jersey 08723 City, State, Zip Code Brick, New Jersey 08723 Telephone No. (722)899-7499 Cocupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other — Describe: Scope of Work (Check All That Apply) 23 of or 23 lf 2160 sf or 2260 lf Asbestos-Containing Material (ACM) TO BE ABATE USE ONL. Name of Asbestos-Containing Material (ACM) In Facility (13) Yes No N/A Name of Registered Waste Hauler Brick Industries Inc. Sireet Address City, State, Zip Code Street Address City, State, Zip Code City, State, Zip Code Street Address City, State, Zip Code City, State, Zip Code Street Address City, State, Zip Code City, State, Zip Code Street Address City, State, Zip Code City, State, Zip Code Street Address City, State, Zip Code City, State, Zip Code City, State, Zip Code Street Address City, State, Zip Code City, State	ity (5) Toms River		County Cod	e (7)		Current Us	se (Prior if t	peing demolished)	-		
Sireet Address Sireet Address City, State, Zip Code Project Manager for Monitoring Firm Telephone No. Tele	County (6)		(STATE USE	ONLY)				tor (9)			
City, State, Zip Code City, State, Zip Code City, State, Zip Code City, State, Zip Code Brick, New Jersey 08723 Telephone No. (732)899-7499 O1196 Start Date (10) Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe: Scope of Work (Check All That Apply) 23 sf or 23 lf 23 sf or 25 lf 2160 sf or 2560 lf Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Is Location Normally Used Solely by Maintenance Custodial Staff? (12) Yes No N/A Name of Registered Waste Hauler Brick Industries Inc. Disposal Date P.O. Box 915 City, State, Zip Code Brick, New Jersey 08723 Telephone No. (732)899-7499 O1196 Street Address City, State, Zip Code City, State, Zip Code City, State, Zip Code Street Address City, State, Zip Code Full Containment with Negative Pressure Abatement Abatement And Description of Asbestos Containing Material (ACM) (Specify SF or LF) Registered Landfill GROWS Inc. City, State P.O. Box 915 City, State, Zip Code City, State Disposal Date City, State P.O. Box 915 City, State P.O. Brick Industries Inc. Disposal Date City, State	Name of Monitoring Firm Hired by Building Own	er (8)	ASCM N	0.	Bric	k Industrie	es Inc.				\dashv
City, State, Zip Code City, State, Zip Code Brick, New Jersey 08723 Telephone No. Telephone	Street Address				P.C). Box 915					_
Telephone No.					City,	State, Zip C	ode ersey 087	723			
Start Date (10) Scheduled Completion, Date (11) Scheduled Completion, Date (11) Name of OSHA Monitor Street Address City, State, Zip Code Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Exempted (*			Telephone	No.	Tele	phone No.		License No.			
Start Date (10) Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Scope of Work (Check All That Apply) 23 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A Name of Registered Waste Hauler Brick Industries Inc. Street Address City, State, Zip Code Full Containment with Negative Pressure Mini-Enclosure (Slovebag Procedure) Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) an					(73	32)899-749 ne of OSHA	Monitor	01100			
Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other - Describe:	Start Date (10)	- 1	mpletion Da	1				2.2.9			
Abatement Performer Outside Statistics Cother - Describe:	Occupancy Status During Abatement (Check	Only One)	mont				2 1-				
Scope of Work (Check All That Apply) Sope of Work (Check All That Apply) Sal sf or ≥3 if ≥160 sf or ≥260 if Renovation Demolition Renovation Renovation Renovation Demolition Renovation Reno	Abatement Performed Outside of The	Facility Hou	irs		City	, State, Zip (Jode				
Non-Exempted (*) and Noti-Friesd (*) and Not	Scope of Work (Check All That Apply) >3 sf or ≥3 lf	Reno	vation			Mini-	Enclosure	141120			
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A NJDEP Waste Hauler Brick Industries Inc. Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A NJDEP Waste Hauler ID No. 21602 Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Amount (Specify SF or LF) Republic In Carry In Carr	\[≥160 sf or ≥260 lf					Non-	Exempted	(*) and Non-Friabl	e Proce	Datomo	:nt
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A NJDEP Waste Hauler Brick Industries Inc. Used Solely by Maintenance/ Custodial Staff? (12) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) (i.e. thermal systems insulation) (i.e. thermal s					Descrip	otion of		Amount		T	7
Name of Registered Waste Hauler Brick Industries Inc. No N/A DSDESTOS FLOD(till 290 SF Name of Registered Landfill GROWS Inc. Disposal Date Disposal Date Date Inc. Date Inc.	Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Used S Mainte Custodi	olely by enance/ ial Staff?	(i.e. the	ermal sys	items insular LVAT, or	ion,	(Specify	Removal	Repair	Enclosure
Name of Registered Waste Hauler Brick Industries Inc. Name of Registered Landfill Hauler ID No. 21602 Disposal Date City, State PA Date I Dat	(13)	Yes 1	No N/A	othes	tos	floor	file	290SF	Y		
Name of Registered Waste Hauler Brick Industries Inc. NJDEP Waste Hauler ID No. 21602 Disposal Date City, State PA				1,7,5		1			-		
Name of Registered Waste Hauler Brick Industries Inc. NJDEP Waste Hauler ID No. 21602 Disposal Date City, State PA									311		
Brick Industries Inc. 21602 Disposal Date PA	Name of Ponistered Waste Hauler		NJDEP				10		nt.		
City, State						9					
Brick, New Jersey Signature / 10/1							100000000000000000000000000000000000000	0	Date I	1	

Title

President

Completed by

Eric Plackis

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

MOIL	NOTI	FICA Pursi	TION OF	of New Jers ASBESTO NJAC 8:60	S ABATE	MENT					<u> </u>		
Date of Notification (1) 06/21/17				uilding Owne Torres	r/Operator	(2)			JUL	28	20	17	
Agencies Notified Type Notification		Str	eet Addr	ess					ASBEST	OS C	TNC	ROL	8
EPA Initial Amended Amendment		Cit	y, State, aywoo	Zip Code d, NJ 07	607				The state of the s	CENS	ING		
Emergency (i DOH DCA Cancellation	ncluding		me of C aphnae	ontact e Torres				Teler	nhone Num	iner	_		
	DI (0)		FACILI [*]	TY INFORM	ATION	Tvp	e of Facility (4)				1000		\neg
Name of Facility Where Abatement is Taking Daphnae Torres	Place (3)						School (K-12)	(Othe	r than K-12)			
Street Address						×	Other (i.e. privetc.)	vate &	commercia	al buildir	g. Ag		
City (5) Maywood, NJ 07607							are Feet		Floors		g. Ag		
County (6)		Co (S	ounty Co	ode (7) EE ONLY)		Cur	rent Use (Prior	if bein	ig demolish	ied)			
Name of Monitoring Firm Hired by Building (Owner (8)	1	ASCM I	No.	Nam MK	e of A	batement Controperty Maint	ractor enan	(9) ce				
Street Address						et Add Van	ress Riper Aven	ue					
City, State, Zip Code							Zip Code NJ 07011						
Project Manager for Monitoring Firm		T	elephone	e No.		phone	No. -6399		License N 01336	lo.			
Start Date (10)	Scheduled		oletion D	ate (11)	Nam	ne of C	SHA Monitor						
07/01/17 Occupancy Status During Abatement (Cher	07/15/17 ck Only One)				Stre	et Ado	Iress						
Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other – Describe:	Period of Ab	ateme	ent		City	, State	, Zip Code						
Scope of Work (Check All That Apply) ≥ 3 sf or ≥3 lf ≥ 160 sf or ≥260 lf	× Rei	novati molitic	ion on			×	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	edure				e	
	Is L	ocatio	on								Abate	ement pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Main Custo	tenan dial S (12)	y by nce/ staff?	(i.e. th	Descript Containing ermal system surfacing, other misce	g Mate ems in VAT,	or	(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
haaamant	Yes	No	N/A		pipe ins	ulatio	n		155 l ft	х			
basement													
Name of Registered Waste Hauler TBD		F	JDEP V lauler ID BD	No.	Cubic Yard of Waste 2 yds		110 Sa	and C	tered Land ompany	fill			
City, State 136 Apagnoli Road, Melville, NY	11742				Disposal [07/03/17	·	City, Sta			Date			
Completed by Darko Raloska	Title	ct ma	anager		Signa	ature			- 4	06/21/	17		

Print Form



State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT DECEIVED

						AC 8:60 and 5:1	-)	prop.					1 4 4
Date of Notification (1)	/_1	7			e of Buildir	ng Owner/Operator #1	(2)		JUL	2 8	20)17	
Agencies Notified Type I	Votification	1	C	Stree	et Address								
□ EPA □ Init				10	8 Church	Street, 3 rd Floor	r [Α	SBEST	OS CO CENS			. &
	ended	44		City,	State, Zip	Code		-	Lit	JEN C	HIVC	2	
	endment ergency (_	Ne	w Bruns	wick, NJ 08901							
	tification)	modudii	ig	-	e of Contac			I.Le	elephone N	Numbe	r		
☐ Cai	ncellation			Da	niel Karb	ownik		1 -	2004B2-0500503		ì		
				FA	CILITY II	NFORMATION							
Name of Facility Where Abateme		ng Plac	e (3)				Type of Facili	ity (4)					
Residential Muiltiple Fam	ily						School (K	-12)					
Street Address							Subchapte Other (i.e.	er 8 (O . privat	ther than he	K-12)	al bu	ildinas	
							homes, et	tc.)	o ana con		ai bu	ildiligo	,
City (5)							Square Feet	#	of Floors	è	Blo	dg. Ag	е
Jersey City		-					4,800		4		8	32	
County (6)				Cou	nty Code (7	7)(STATE USE ONLY)	Current Use (Prior if	being den	nolishe	ed)		
Hudson	_						Vacant						
Name of Monitoring Firm Hired by		Owner	(8)	ASCM		Name of Abateme		(9)					
Health and Safety Service	s, Inc.			001	17	Superior Aba	atement Inc						
Street Address						Street Address							
PO Box 365						2 Henderson	Drive						
City, State, Zip Code						City, State, Zip Co							
Berlin, NJ 08009						West Caldwe	II, NJ 07006						
Project Manager for Monitoring Fi Jim Proctor	rm			ephone		Telephone No.		L	icense No),			
.IIM Proctor				EC 4EC	4244	(070) 000 404	_	1					
	10.			56-452		(973) 808-161			00411				
Start Date (10)			Comple	etion Da	ite (11)	Name of OSHA M	lonitor		00411				
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State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

B & G proj. #: 2017-96

B & G proj. #:		_		S	ub chapter	8 Proj	ect	Che	CK #			_		-
Date of Notification	(1)	I I Name	of Buildin	a Owner/C	Operator (2)				E	P E	П	1//	EI	7
10 17 1/12 15		1 1			Education					CE	<u>U</u>	\mathbb{V}_{-}	5	
Agencies Notified	Type Notification	11	t Address					IID				6	1	
☐ EPA	X Initial	11 12 12 12 12 12 12 12 12 12 12 12 12 1	9 Avenu	e A				1	-	111 2	8 2	017		
☐ DEP			State, Zip		-			A) esteroise (i)						
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X DOH	Caracillatio		of Contac						-	LICE	ADIIA	<u>u</u>		
☐ DCA	☐ Cancellation)n L	eo J Sm		Scott Nolar									_
				FACILI	TY INFORMA	TION		Type of Fac	lib. (A)					_
Name of facility w	here abatement is t	aking place	(3)					Type of Fac	chool (K - 12)				
John M Baile	y School									er 8 (Oth			2)	
Street Address						,				vate/Con		aı		
75 West 10th	n Street							Square Fe		of Floors		Bldg	. Age	
City (5)		County	(6)				y Code (7)	Current Us		if heing	demol	ished)	
	1	Huds	on			(State	use only)	School	se (Prio	il bellig	demoi	isilou		
Bayonne, N.	ing Firm Hired by Bl	7			ASCM No.	IIN	lame of Abatement	Contractor (9)					3 da	
T & M Asso	ciates	ug. Owner (-,	10.0	145		B & G Restorat	tion, Inc.						_
Street Address						3	Street Address 105 Ryerson F	Road						
11 Tindall F	Road		-54				ity, State, Zip Code					-		
City, State, Zip Co Middletown	ode 1. NJ 07748						Lincoln Park,	NJ 07035						
	for Monitoring Firm		Pho	ne Numbe	Г	-	elephone Number (973)696-686	39		License N		Г		
Kevin Burn			73	32-539-2	482		Name of OSHA Mor				-			
Scheduled Start D	Date (10)	Sched.	Completion	Date (11)			B & G Restora							
08/04/2017		08/07	/2017				Street Address							
Occupancy Status	s During Abatement	t (Check on	y one)				105 Ryerson F							
T Englishy class	ed/vacated during	entire period	of abatem	nent.			City, State, Zip Code	Э						
	performed outside			-		-11	Lincoln Park,	NJ 07035					- 2	
Other-Desc	cribe: start 4:30 p	om un-occ	cupieu			_ 11								
Scope of Work (check all that apply) Renovation				X FL	ıll Containment w/n	egative pressi	ire [Gloveb				
		≥160 sf or ≥				☐ M	ini-enclosure			Non-fri	able p	roceo	ure	
>3 sf or >3	II .	Is location	normally u	sed solely						la la	R	Re	E n	E
Location of asbestos-		by mainter	nance/cust	odial	Descripti		sbestos-containing		ount ecify Sl	or or	m o	p a	С	n
material to		staff(12)	No	N/A	material	(ACM)		LF)			v	i	a p	L
abated in i	racinty (10)	Yes	NO			flaarin	a system	750	sf		e X			
basement Ro	oom G1			×	asbestos	HOOH	ig system	700	<u> </u>					
_														1
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Registered Wast	te Hauler	NJDE	P Hauler I	D# C	ubic Yards of 8	Waste	Name of Register	ed Landfill n Resource	& Re	covery	Cen	er		
B & G Resto	oration, Inc.		9563	Disposal D	Date		City, State	1840		THE REAL PROPERTY AND ADDRESS OF THE PERSON NAMED IN COLUMN TWO PERSON NAMED IN COLUMN TO THE PERSON NAMED IN COLUMN TWO PERSON N				
City, State Lincoln Parl	k, NJ			08/0	07/2017		Tullytow	n, PA		Date			- 3	
Completed by (F	Print or Type)	Title Secreta	ry/Treasi	urer	Signature		Gordana Luni	7		07/2	5/20	17		

State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

B & G proj. #:

2017-97

Check # 8504

													_
Date of Notification (1)		LLN	ame of B	uilding Own	er/Operator (2	1							
10 7 / 2 5 / 1	7 1			J. Calle	leiroperator (2	,		MEC	EI	W	F	J	7
1	Notification	L-	reet Add							///		711	+
□ FPA			reet Add	1622									
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▼ DOL □	Amendment			, Zip Code)range, N	J 07017							Security	
⋉ DOH		N:	ame of C	ontact				Aelephone	Number	NTA	OL 8	Ž.	T
□ DCA □ C	Cancellation		Ferna	ndo Saco	to				CENSIN	JG			
					ILITY INFORM	MATIO	N N						
Name of facility where abate	ement is tak	cing pla	ce (3)	1,105				Type of Facility (4	4)				
Norma J. Calle		5 P	\-/						(K - 12)		N.	100	
								The state of the s	apter 8 (Ot Private/Co			12)	
Street Address									Homes, et				
								Square Feet	# of Floors		Blo	ig. A	зе
City (5)		Coun	ity (6)			1/2000	unty Code (7) ate use only)	Current Use (Pr	ior if boing	dom	olicho	۲)	
East Orange		Ess	sex			(0)	ate use only)	residential	ioi ii beilig	uen	UllSHE	u)	
Name of Monitoring Firm H	ired by Bldg	. Owne	er (8)		ASCM No.	-	Name of Abatement C	ontractor (9)					
					n/a	**	B & G Restorati	on, Inc.					
Street Address							Street Address 105 Ryerson R	nad					
-							City, State, Zip Code						
City, State, Zip Code							Lincoln Park, N	NJ 07035					
Project Manager for Monitori	ing Firm		F	Phone Numb	ber	-	Telephone Number		License	Numb	er		
							(973)696-6869		00:	378			
Scheduled Start Date (10)		Sched	. Comple	tion Date (1	1)		Name of OSHA Monit						
08/07/2017		08/0	7/2017	1 0			B & G Restorati	on, Inc.	-				_
Occupancy Status During Al	natement (C						105 Ryerson Ro	pad					
Facility closed/vacated				tement.			City, State, Zip Code						
Abatement performed	outside of n	ormal	facility ho	urs-									
Describe: Other-Describe:						_	Lincoln Park, N	J 07035					
Scope of Work (check all th	nat apply)												
Demolition	X Rei	novatio	n				Full Containment w/neg	ative pressure	Gloveb				
>3 sf or >3 lf	_ ≥16	0 sf or	≥260 If			X	Mini-enclosure		Non-fri		oroce	dure	
Location of			normall	y used solel	У					R e	R	E n	E
asbestos-containing material to be		aff(12)	manoerce	Jacourar	Descript material		asbestos-containing	Amount (Specify S	For	m o	p a	С	n
abated in facility (13)	,	Yes	No	N/A	material	(AOIVI	/	LF)		v	i	a p	L
Basement				×	7 pipe insu	lation	1	1 If		e	\Box	П	\Box
Basement				×	pipe msu	latioi	<u> </u>	45 lf		Ī		X	T
Dasement		=			1								
					1								
Registered Waste Hauler			EP Haule 19563	r ID#	Cubic Yards of			Landfill Resource & Re	covery	Cen	er		
B & G Restoration, Ind	J.	-	19000	Disposal	1/2 yo	4	City, State	1030uloc a No	JOV CITY	0011	.01		
Lincoln Park, NJ					07/2017		Tullytown,	PA				3	
Completed by (Print or Type				1	Signature		Gordana Luna		Date	100	7		
Gordana Luna	Se	creta	ry/Trea	surer	1		zoraana Luna		07/25	1201	1		

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K						Pri	nt Fo
		JUL	2	8	2017		

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ate of Notification (1) 7/25/2017		S	chool D	istrict of (r/Operator of Chathams	(2)	-	ASBI	ESTOS LICEN	JSING	HUL	. α	-
gencies Notified Type Notification		St 5	reet Addre 8 Meyer	ess sville Ro	ad								
EPA Initial Amended		Ci	tv. State.										
DOL Amendment # Emergency (inclusion) DOH Justification)	ıding	N	ame of Co	intact			1	¥.1.,	hana Nun	nber			
DCA Cancellation		J		Y INFORM	ATION					-			_
lame of Facility Where Abatement is Taking Pla	ace (3)		FACILII	1 mil Orași	7,1011	Type of	Facility (4)						
Chatham Middle School						ments C.	hool (K-12) bchapter 8 her (i.e. pri	Othe	r than K-12	2) al buildin	gs, he	omes,	
480 Main Street						Square	5.)		Floors		g. Age		
City (5) Chatham						80,00	0	2	a domolis	50	+		
County (6) Morris			County Co STATE US	de (7) E ONLY)		School				neu)			
Name of Monitoring Firm Hired by Building Own RK Occupational & Environmental Ar	ner (8) nalysis,	Inc	ASCM N 0090	lo.	Name Bak	of Abate o Cons	ment Contraction 8	ractor k Res	(9) storation,	Inc			
Street Address			<u> </u>		Stree 265	t Address A Rout	e 46 Suit	e 3D					
401 St. James Avenue City, State, Zip Code		-			City,	State, Zip	Code						
Phillipsburg, NJ 08865 Project Manager for Monitoring Firm			Telephone	No.	Teler	ohone No	•		License	No.			
Jon Gilbert	choduled	1	908-454		Nam	e of OSH	A Monitor						
08/05/2017	8/05/20	017	ipiolion =			co Cons	struction	& Res	storation	, Inc			
Occupancy Status During Abatement (Check (265	A Rou	s te 46 Sui	te 3D)				
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Normal Other – Describe:	riod of At Facility	baten Hours	nent S			State, Zi towa, N	p Code J 07512						
Scope of Work (Check All That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emoli				Mir Glo	Containme i-Enclosure vebag Prod	e cedure	E				
						<u>No</u>	n-Exempte	d (*) ar	nd Non-Fn	able PIO	Abate	ement	
		Locat									Ту	pe	_
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	intena	ely by ance/ Staff?	(i.e. th	Descript s Containing nermal system surfacing, other misce	g Materia ems insuli VAT, or	ation,		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	And the Advisor of the Party County of the Indian and I
	Yes	No	N/A		Pipe Ins	ulation		-	4.5 LF	Х	-		1
Room 152 hallway	1	X	-		Pipe Insu				4.5 LF	X			-
Auditorium mechanical room		-	-										-
									alamad 1 a	460			1
Name of Registered Waste Hauler)C		NJDEP V Hauler ID		Cubic Yard of Waste TBD	ds			stered Lan Resource		very	Faci	lit
Bako Construction & Restoration, In			20889		Disposal D	Date	City, Sta	ate	PA				-
1 CITY SIBIE					TBD		Tunytt	JVYII,	. / \				
City, State Totowa, NJ	Title				Sign	ature	- Sa	1		Date 07/25			

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

CK1400				(Pu	rsuan	t to NJA	C 8:	60 and 5:16	5)	DEC	O P	1 17/		1
Date of Notification (1)			Y 1- M	11	Name	of Building	g Own	ner/Operator (2)			$\mathbb{L}\mathbb{V}$	<u> </u>	
7 /	20 /	17			CVS	3								
Agencies Notified	Type Notifica	ation			Street	Address				 	L 28	201	7	111
⊠ EPA						0 Fair La	wn A	Ave.			L L U	LUI	/	1
□ DOLWD	☐ Amended				City, S	tate, Zip C	ode			ASDEO				
□ DHSS	Amendme					Lawn, N		410	1	ASBEST	OS CO ICENSI	NTR	OL 8	&
☐ DCA (NJAC 5:23-8)	☐ Emergene justification		iding			of Contact				Telephone No		UVU		
(140/10/0.20/0)	☐ Cancellat				Ter	ry Bonga	rd			1 .	_			
					FAC	CILITY IN	FOR	MATION						
Name of Facility Where A	Abatement is T	aking P	lace (3)					Type of Facility	(4)	1			
CVS									School (K-12					
Street Address									☐ Subchapter ☐ Other (i.e., p	8 (Other than K		ilding	10	
2400 Fair Lawn Ave	э.								homes, etc.		rici ciai bi	anding	3,	
City (5)									Square Feet	# of Floors	В	dg. A	ge	
Fair Lawn, NJ 0741	0								13,730	1		45+		
County (6)					Coun	ty Code (7)(STA	TE USE ONLY)	Current Use (Pr	rior if being dem	olished)			
Bergen									Retail					
Name of Monitoring Firm	Hired by Build	ding Ow	ner (8	3)	ASCM	No.	Nan	ne of Abateme	ent Contractor (9)		-//8/		
Vertex					NA		Α	Iliance Envi	ironmental Sy	stems				
Street Address							Stre	et Address						
700 Turner Way							5	50 East Uni	on St.					
City, State, Zip Code							City	, State, Zip Co	ode					
Aston, PA 19014							W	lest Cheste	r, PA 19382					
Project Manager for Mon	itoring Firm			Tele	phone	No.	Tele	ephone No.		License No.				
Don Heim					10-558		6	10-701-9000)	00508				
Start Date (10)	201	Schedule					Nan	ne of OSHA N	Monitor					
8 / _7_ /	17	9	_ /	29	<u> </u>	17	V	ertex						
Occupancy Status During	g Abatement (Check o	nly or	ne)			Stre	et Address						
☐ Facility Closed/Vacate							70	00 Turner W	/ay					
						cribe	City	, State, Zip Co	ode					
Time of Abatement. 1	FIV	11/ <u>3.30</u> F			Alvi		Α	ston, PA 19	014					
Scope of Work (Check al	ll that apply)							⊠ Full Con	tainment with Ne	antivo Pronouro				
≥3 sf or ≥3 lf		\boxtimes	Ren	ovat	ion			Mini-End		gative Flessure				
≥160 sf or ≥260 lf] Den	noliti	on				g Procedure empted (*) and No	on Erioblo Droce	ndura			
			le l	Loca	tion			☑ Non-Exe	impled () and No	III-Filable Floce		atem	ont T	
Location	of	1	N	orma	lly			Description of	of		-	1		
Asbestos-Containing		1)			ely by ance/			Containing Ma	aterial (ACM)	Amount	l Rem	Repair	nca	ncl
TO BE ABA					Staff?	(i.e		rmal systems urfacing, VAT		(Specify SF or LF)	Removal	¥.	psc	Enclosure
(13)	it.y			(12)				ner miscellane		0. 0. 2.)	-		Encapsulate	6
		,	Yes	No	N/A									
Store Area			╗╎		\boxtimes	VAT				2460 SF				
Store Area					\boxtimes	Glue D	ots			2460 SF				
Vacant Area			5			VAT				670 SF				
		Г	7	П			100	****				T		П
Name of Registered Was	ste Hauler			1	NJDEP V		Cub	oic Yards of	Name of Regi	stered Landfill				
Richard Burns				1	Hauler II		Was			Berks Commu	inity La	ndfill		
City, State					19955)	-	0 posal Date	City, State					
Phila., PA								BD Date	Birdsboro	, PA				
Completed By (Print or T	vne)	Title						Signature		***************************************	Date			
Mark Griffin	100)	NO. 150 150	imat	or				Jignature			Date			
				EST:										

CK1400			(1	Purs	uan	t to NJA	C 8:	:60 and 5:10	6)	BEC	0 P	7 77	7 [6	J P.
Date of Notification (1)				N	lame	of Building	g Ow	ner/Operator (2)	11),5		$-\mathbb{V}$		3
7 /	20 /	17			CVS					In				111
Agencies Notified	Type Notifica	ation		S	treet	Address				 	L 28	201	7	-11
⊠ EPA	☐ Initial	40011				0 Fair La	wn	Ave.		aw has UU	L & 0	201	1	
□ DOLWD	☐ Amended			C		tate, Zip C				1				
☐ DHSS	Amendme		-			Lawn, N		7410	1	ASBEST	OS CC	NTF	POL	&
☐ DCA (NJAC 5:23-8)	Emergen		g	N		of Contac				Telephone N	ICENSI umber	VG.	-	
(110/10/0.20/0)	☐ Cancellat	STATE IN			Teri	ry Bonga	ard							
					FAC	CILITY IN	IFOF	RMATION						
Name of Facility Where A	Abatement is T	aking Plac	e (3)						Type of Facility	(4)				
CVS									School (K-12					
Street Address									☐ Subchapter 8 ☐ Other (i.e., p			ildino	10	
2400 Fair Lawn Ave	э.								homes, etc.)		riciciai bi	munig	,,	
City (5)				-					Square Feet	# of Floors	В	dg. A	ge	
Fair Lawn, NJ 0741	0								13,730	1		45+		
County (6)		M3		T	Coun	ty Code (7	7)(STA	TE USE ONLY)	Current Use (Pr	ior if being dem	olished)		021.02.00	
Bergen									Retail					
Name of Monitoring Firm	Hired by Build	ding Owner	(8)	AS	SCM	No.	Nai	me of Abateme	ent Contractor (9)					
Vertex					NA		Δ	Alliance Envi	ronmental Sys	stems				
Street Address							Stre	eet Address						
700 Turner Way							5	50 East Uni	on St.					
City, State, Zip Code								y, State, Zip Co						
Aston, PA 19014							V	Vest Cheste	r, PA 19382					11992-5
Project Manager for Mon	itoring Firm		Т	eleph	none l	No.	Tel	ephone No.		License No.	53			
Don Heim						-8902		10-701-9000		00508				
Start Date (10)	version of the	Scheduled					100000	me of OSHA M	Ionitor					
_8 / _7 /		9	′ –	29	- / -	_17	\ \	ertex/						-CI CO
Occupancy Status During	Abatement (Check only	one))			11.500,000,00	eet Address						
	☐ Facility Closed/Vacated During Entire Period of Al ☑ Abatement Performed Outside of Normal Facility I							00 Turner W						
Time of Abatement: 7				cribe		y, State, Zip Co								
		<u>0.00</u>			*//		Α	Aston, PA 19	014					
Scope of Work (Check al	I that apply)							⊠ Full Con	tainment with Nec	native Pressure				
≥3 sf or ≥3 lf				ration	1			Mini-Enc	losure	gative i ressure				
≥160 sf or ≥260 lf			emo	lition					g Procedure mpted (*) and No	n-Friable Proce	adure			
The second secon			sLo	catio	n	Г		ZZ TYON ZXO	mptou () una 140	11 1 114515 1 1000		atem	ent T	vne
Location	Location of							Description of	of			_	1	
Asbestos-Containing				olely				Containing Ma		Amount	em	Repair	nca	incl
TO BE ABA IN Facili		5-10	stodi	al Sta	35577	(1.6		ermal systems surfacing, VAT		(Specify SF or LF)	Remova	Ĩ.	Encapsulate	Enclosure
(13)		2)		-		her miscellane			-		late	.e		
	N	-	N/A	VAT										
Store Area	Store Area									2460 SF				
Store Area]		Glue D	ots			2460 SF				
Vacant Area]	\boxtimes	VAT				670 SF				
]										
Name of Registered Was	te Hauler			10000000		Waste	2331233	bic Yards of	Name of Regis	stered Landfill				
Richard Burns				100	uler II 9955	D No.	1 33	ste 0	Western B	erks Commu	inity Lai	ndfill		
City, State				1 1	5500			posal Date	City, State					
Phila., PA							Т	BD	Birdsboro	, PA				
Completed By (Print or T	ype)	Title	-					Signature			Date			
Mark Griffin	989 FE	Estim	ator					1.5						
A C D 44														

EDS17-164

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

Page 1 of 1

		(Pi	ursuant 1	to NJAC 8	3:60 and	12:120))	ch	eck #2	861					
Date of Notification (1) 7-19-2017				Building ((2)		ID) <u>E</u>	G	E		<u> </u>	
Agencies Notified Type Notificat	ion		Street Ad 266 Ea	ddress ast Main	Street					ļ.	and a second	2 !	8 2	117	and the same of the same of
EPA Initial Amended Amendm	ent #		-	te, Zip Co ey, NJ 0					-						
➤ DOH justificati DCA Cancella				Contact Sohacik					ŢŢ.	V.C.TY.	A hinh	27 (ON	TRO	L &
			FACII	LITY INFO	RMATI	ON							-		
Name of Facility Where Abatement is Ta Ramsey High School	aking Place (3	3)					Тур	e of Facility (School (K-1	2)		4.40				
Street Address 256 East Main Street								Subchapter Other (i.e. p etc.)	rivate 8	comm					s,
City (5) Ramsey	- III							iare Feet 000+	# of 2	Floors		1100	dg. A)+	ge	
County (6) Bergen			County C	Code (7) JSE ONLY)		_		rent Use (Prid hool	or if bei	ng demo	olishe	d)			
Name of Monitoring Firm Hired by Buildi Environmental Design, Inc	ing Owner (8)		ASCM	l No.				patement Con	tractor	(9)					
Street Address 5434 King Avenue, Suite 101						Street 140		ess burg Turn	oike						
City, State, Zip Code Pennsauken NJ 08109								Zip Code gdale, NJ 0	7403						
Project Manager for Monitoring Firm Tom Pruno			Telephor 856-61	ne No. 6-9516		Teleph 201-		No. -9725		Licens 0108)			
Start Date (10) 7/21/2017	Schedul 7/25/2		npletion [Date (11)				SHA Monitor p, Inc							
Occupancy Status During Abatement (C						Street	Addr		nika						
Facility Closed/Vacated During Ent Abatement Performed Outside of N Other – Describe:	ire Period of Normal Facility	Abaten y Hours	nent		_	City, S	state,	Zip Code gdale, NJ 0							
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demolit					N G	Mini-Enclosure Blovebag Prod							
	1 100	Locati Normal	27/2007						(//			3111411411	\$2550 D.Y	ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)) Use Ma Cus	ed Sole aintena stodial ((12)	ely by nce/ Staff?		tos Cont thermal surfa		Materi s insu T, or		(5	mount Specify For LF)		Removal	Repair	Encapsulate	Enclosure
Ond Ond El Davis O Cirla Bathra	Yes	No X	N/A	Pine	Incula	tion M	Iran	& Cut	2	5 LF		Х			
2nd&3rd Fl Boys & Girls Bathroo 2nd&3rd Fl Boys & Girls Bathroo		X													
Name of Registered Waste Hauler			JDEP W		Cubic			Name of	Registe	ered Lar	ndfill				
GL Group, Inc		0.2922	lauler ID 033034		of Was			Minerva							
City, State Bloomingdale, NJ					Dispos TBD	sal Date	!	City, Stat Waynes		ОН					
Completed by Elena Solakov	Title Pres	ident			S	Signature	e &	leru Stoll			Date 7-1	9-20)17		

EDS17-164 Date of Notification (1) 7-19-2017					01 (GMT)		11 1		3 F	i F	TOM?	
Date of Notification (1)						- Ar	IID)	[5]				
Date of Notification (1)		NOT	FICATI (Pursus	State of New Jo ON OF ASBEST and to NJAC 8:80	OS ABAT	EMENT (2861J[Jf: 12	.8/	2017	7
7-15-ZV 1	_		Name	e of Building Own	ner/Operato	or (2)	Check	2801			7	_
Agencies Notified Type Notification	n		Stree	t Address			1 1	ASBES	TOS ICEN	CO	VTR	0
EPA Initial Amended Amendment			City,	East Main St Stale, Zip Code		_			1	1	<u> </u>	-
DOH Emergency justification	y (Indudi	ng		nsey, NJ 0744 of Contact	6		MAN.	CO E		'4 - r	<u> </u>	
DCA Cancallatio				Bohacik	4.50							
Name of Facility Where Abatement is Tak Ramsey High School	ng Place	(3)	FA	CILITY INFORM	ATION	Type of Facili	ly (4)	•			-	
Street Address		-		_		School (Subchar Other (i.e.	ter B (Ot	her than k	(-12)			
256 East Main Street City (5)						B1C.)	e. privete	& comme	ercial bu	_		
Ramsey County (6)				T.,		Square Faet 50,000+	2	f Floors		50+	. Age	0
Bergen			(STATI	Y Code (7)		School	Pilar if be	ing damp	lished)			
Name of Monitoring Firm Hired by Building Environmental Design, Inc	Owner (B)	ASC	M No.	Name GL C	of Abatement (ontracto	(9)	•/			
Street Address 5434 King Avenue, Suite 101	-		_		Street	Address Famburg Tu	enike					_
City, State, Zip Code Pennsauken NJ 08109					City, S	tate, Zip Code						_
Project Manager for Monitoring Firm Torn Pruno	Bloomingdale, NJ 07403 Bloomingdale, NJ 07403 Telephone No. Telephone No. License No. College								No.	_	_	_
Start Date (10) 7/21/2017	Telephone No. Telephone No. License No. License No. 201-710-9725 01084											_
Occupancy Status During Abatement (Chec						roup, Inc						
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norn Other - Describe:	Period of	Abater	rient		140 F	łamburg Tur	npike	_				
Other - Describe: Scope of Work (Check All That Apply)		,				ate, Zip Code mingdale, NJ	07403					
23 sf or ≥3 if ≥160 sf or ≥260 if	Full Contains Mini-Enclosu Glovebag Pr Non-Exempte	ra ocedure										
Location of		Locati Normal			Sin			11211 114	T	Abat	emen	t
를 가득하는 경우 기업을 보면 하는 것으로 함께 하는 것이 되었습니다. 그런 그런 그런 그런 보고 있는 것이 되었습니다. 그런	Ma	todial 8	ice/	Asbestos Co (l.e. iherm suri	escription intaining Mi al systems acing, VAT miscellane	elerisi (ACM) insulation. , or	(\$	nount pecify or LF)	Remova	Repair	Encapsulate	-
Asbesios-Containing Material (ACM) <u>TO BE ABATED</u> In Fadility (13)	-	No	N/A			-,			len	票.	ukale of the	1
TO BE ABATED In Facility (13)	Yas	11		Pipe Insu			25	LF	X			1
IO BE ABATEO In Facility (13) 2nd&3rd Fi Boys & Girls Bathrooms		X	3rd Fl Boys & Girls Bathrooms X Bine Eithing Mars B. Out									-
IO BE ABATED In Facility (13) 2nd&3rd Fi Boys & Girls Bathrooms		_		Pipe Fitt	ings Wra	p & Cut	8	LF	×			
In Facility (13) 2nd&3rd Fi Boys & Girls Bathrooms 2nd&3rd Fi Boys & Girls Bathrooms Name of Registered Waste Hauler		X	JOEP W	este Cubr	ings Wra				1			
IO BE ABATED In Facility (13) 2nd&3rd FI Boys & Girls Bathrooms 2nd&3rd FI Boys & Girls Bathrooms Name of Registered Waste Hauler GL Group, Inc.		X N.	JOEP W	asia Cubii	Yards		Register	LF ed Landhi	1			
In Facility (13) 2nd&3rd FI Boys & Girls Bathrooms 2nd&3rd FI Boys & Girls Bathrooms Name of Registered Waste Hauler		X N.	ular ID	asia Cubii No. of Wi TBD	C Yards axia	Name of	Register a	ed Landhi	1			

CIC# (69118	NOT	IFIC/	ATIOI ursua	N OF nt to	NJAC 8	STOS Al 3:60 and	5:10)		NT	· 6 F 1	\\// [r			
Date of Notification (1)	27 / 17			Nam	e of Bi	uilding Ov VILLE S	wner/Oper	ator (2)	ICT		<u> </u>	W L			
Agencies Notified	Type Notification				et Add						JUL 28	2017]][
⊠ EPA	☐ Initial			100		IRCH ST					**************************************		1	+	-
☑ DOLWD		4				, Zip Code				1 4	CONTRACTOR OF THE PARTY	CONTRACTOR OF THE PARTY OF THE	_		
□ DOH	Amendment #	3300	a				NJ 08070				LISTON CO		8	+	7
☐ DCA (NJAC 5:23-8)	justification)	loiddiii	9	1000000		Contact			3°.		il district the second		-	_	-
				F	ACILI	ITY INFO	ORMATIC	NC		(A)					-
Name of Facility Where	Abatement is Takin	g Plac	e (3)							of Facility (4)					
PENNSVILLE HIGH	SCHOOL								T 0	chool (K-12) ubchapter 8 (C	ther than K-12)				
Street Address		- 1-								ther (i.e., priva	te and commer	cial buildi	ngs,		
110 S BROADWAY	,									omes, etc.)	# of Floors	Bldg.	Age		
City (5)										are Feet 60,000	1	75			
PENNSVILLE								011110			if being demolis	hed)			
County (6)				С	ounty (Code (7)(S	STATE USE	ONLY)		CHOOL	il being dome.	2017CM			
SALEM								\hat-		ontractor (9)					
Name of Monitoring Firm	n Hired by Building	Owne	er (8)	ASC	CM No	.	DELTA								
HEALTH AND SAF	ETY SERVICES	5							, 1140	,					
Street Address							Street Add		RIA	L BLVD					
318 12 TH STREET							City, State								
City, State, Zip Code							SOLITI	HAMP	TON.	PA 18966					
HAMMONTON, N.					NI-		Telephon				License No.				
Project Manager for Mo	onitoring Firm		1		one No		215 32		0		00783				
AL OSWALD				10000	704-8		Name of			or					
Start Date (10) 6 / 13	/ _17	88	_ / _	31	n Date	(,	CRITE	RION							-
Occupancy Status Dur	ing Abatement (Ch	nly one	9)	90/74 T		Street Ad	TREE	r RO	ΔD						
☐ Facility Closed/Vac	ated During Entire	Period nal Fa	of At	ateme Hours -	Desci	ribe	City, Stat	te, Zip (Code						
Time of Abatement	:: <u>/</u> AMPW/2	1:30PI	M	AN	1			ALEM							_
Scope of Work (Check ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	(all that apply)	Ren	ovation olition	1		무	Mini-E	nclosu	cocodure	ative Pressure n-Friable Proced	dure				
△ ≥100 31 01 <u>−</u> 200 11					- 1		Ц	NOTE	KOITIP	(00 ()		Ab	atem	ent T	уре
Asbestos-Containi TO BE /	tion of ing Material (ACM) ABATED acility 13)		Used Mair	ocation or mally solely or tenan odial S	y by ce/ taff?	Asbe (i.e	estos Cont e., thermal	scription taining I I systen cing, V niscella	Materi ns ins AT, or	ulation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
			Yes	No 🖂	N/A	FLOOF	R TILE (F	PLEAS	E SE	E	12 SF				
ADMINISTRATION						ATTAC	VING CC				12				
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ADMINISTRATION				25	_	The second second	ITTINGS				24 SF				
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Name of Registered SERVICE TRAN	Waste Hauler ISPORT GRP		Fig.	H	auler I 2099	D No.	Waste				LANDFILL		70 - 0		
City, State	E NEW CASTLE	DE 1	9720								BURG, OH 44	1688 T Date			
Completed By (Print	or Type)	Title	120		IANA	GER	S	ignatur M		hel f	BARON_	7-0	27	-2	01

ASB-41 JAN 13

		2nd FLOOR LIBRARY	NURSES OFFICE	COMMUNICATION ROOM	BACK ENTRANCE BY ELEVATOR	1ST FL VICE PRINCIPLES OFFICE	1ST FL PRINCIPLES OFFICE CLOSET	LIBRARY CLOSET	ADMINISTRATION AREA	IN FACILITY	OF CONTAINING ACM)
×	×	×	×	×	×	×	×	×	×	YES NO N/A	IS LOCATION NORMALLY USED SOLEY BY MAINTENANCE/ CUSTODIAL STAFF?
		TRANSITE	PIPE (CUT AND WRAP)	PIPE (CUT AND WRAP)	PIPE (CUT AND WRAP)	PIPE (CUT AND WRAP)	PIPE (CUT AND WRAP)	DUCT WITH BLACK MASTIC (CUT AND WRAP)	EXTERIOR CAULK		DESCRIPTION OF ASBESTOS CONTAING MATERIAL (ACM) (IE, THERMAL SYSTEMS INSULATION SURFACING, VAT, OR OTHER MISCELLANEOUS)
		65 SF	5LF	5LF	12 LF	10 LF	10 LF	40SF	24 LF		SPECIFY SF OR LF
	+	×	×	×	×	×	×	×	×		REMOVAL
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		NTROL NG	000								

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) JUL 28 2017 Notification (1) PENNSVILLE SCHOOL DISTRIC 17 1 7 Street Address Type Notification Agencies Notified STOS CONTROL & 30 CHURCH STREET ☐ Initial **⊠** EPA EMEMBING City, State, Zip Code **⊠** DOLWD Amendment #3 PENNSVILLE NJ 08070 ⊠ DOH ☐ Emergency (including Telephone Number ☐ DCA Name of Contact justification) (NJAC 5:23-8) ☐ Cancellation FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) PENNSVILLE HIGH SCHOOL Subchapter 8 (Other than K-12) Other (i.e., private and commercial buildings, Street Address homes, etc.) 110 S BROADWAY # of Floors Bldg. Age Square Feet City (5) 75 >50.000 PENNSVILLE County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) County (6) SCHOOL SALEM Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) DELTA/BJDS, INC HEALTH AND SAFETY SERVICES Street Address Street Address 1345 INDUSTRIAL BLVD 318 12TH STREET City, State, Zip Code City, State, Zip Code SOUTHAMPTON, PA 18966 HAMMONTON, NJ 08037 License No. Telephone No. Telephone No. Project Manager for Monitoring Firm 00783 215 322-2900 609 704-8850 AL OSWALD Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) CRITERION LABS 8 / 31 / 17 6 / 13 / 17 Occupancy Status During Abatement (Check only one) Street Address 400 STREET ROAD ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: 7AM-____PM/4:30PM-BENSALEM PA 19020 Scope of Work (Check all that apply) ☐ Mini-Enclosure □ Renovation $\square \ge 3$ sf or ≥ 3 lf ☐ Glovebag Procedure ☐ Demolition ☐ Non-Exempted (*) and Non-Friable Procedure ≥160 sf or ≥260 lf Abatement Type Is Location Encapsulate Enclosure Repair Description of Remova Normally Location of Amount Asbestos Containing Material (ACM) Used Solely by Asbestos-Containing Material (ACM) (Specify (i.e., thermal systems insulation, Maintenance/ TO BE ABATED SF or LF) Custodial Staff? surfacing, VAT, or IN Facility other miscellaneous) (12)(13)Yes No N/A FLOOR TILE (PLEASE SEE X 12 SF \boxtimes П П ADMINISTRATION AREA ATTACH M 12 SHELVING CONVECTORS \boxtimes П ADMINISTRATION AREA \boxtimes SELECTIVE FLOOR TILE BY UV'S 108 SF X П ADMINISTRATION AREA 24 SF M П ACM FITTINGS (ASSUMED) П X ADMINISTRATION AREA Name of Registered Landfill Cubic Yards of NJDEP Waste Name of Registered Waste Hauler MINERVA LANDFILL Waste Hauler ID No. SERVICE TRANSPORT GRP 20990 City, State Disposal Date WAYNESBURG, OH 44688 City, State 58 PYLES LANE NEW CASTLE DE 19720 Date Signature Completed By (Print or Type)

ASB-41 **JAN 13**

MICHAEL PARSON

PROJECT MANAGER

7-14-2017

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

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b017					×	
	[9]	X	5LF	PIPE (CUT AND WRAP)	×	NURSES OFFICE
		×	5LF	PIPE (CUT AND WRAP)	×	COMMUNICATION ROOM
		×	12 LF	PIPE (CUT AND WRAP)	×	BACK ENTRANCE BY ELEVATOR
		×	10 LF	PIPE (CUT AND WRAP)	×	1ST FL VICE PRINCIPLES OFFICE
	-	×	10 LF	PIPE (CUT AND WRAP)	×	1ST FL PRINCIPLES OFFICE CLOSET
		×	40SF	DUCT WITH BLACK MASTIC (CUT AND WRAP)	×	LIBRARY CLOSET
	+	×	24 LF	EXTERIOR CAULK	×	ADMINISTRATION AREA
					CUSTODIAL STAFF?	IN FACILITY
			SPECIFY SF OR LF	DESCRIPTION OF ASBESTOS CONTAING MATERIAL (ACM) (IE, THERMAL SYSTEMS INSULATION SURFACING, VAT, OR OTHER MISCELLANEOUS)		DF CONTAINING ACM)

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

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Date of Notification (1)	12 / _ 1	17						OOL DIST	RICTD					
Agencies Notified EPA	Type Notificatio	n		1	treet A	ddress	STRE	ET	Secretary Secret	UL 28 20	17	IJ		
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DOH	Amendment	TV2 20 (20) (20) (4)		-	PENN	SVILLE	NJ 0	8070	ASBLES	STOS CONTI	TOL &			_
DCA	☐ Emergency justification)		ig	N	lame of	Contact				Telephone Num	ber			
(NJAC 5:23-8)	☐ Cancellation									The second secon	-			
		- X			FACI	LITY IN	ORM	ATION						
Name of Facility Where	Abatement is Tak	ing Plac	ce (3)						Type of Facility (
PENNSVILLE HIGH	H SCHOOL		305						School (K-12) Subchapter 8	Other than K-12	2)			
Street Address									Other (i.e., pri	ivate and comme	ercial buil	dings.		
110 S BROADWAY	(homes, etc.)					_
City (5)									Square Feet	# of Floors	1	g. Age	9	
PENNSVILLE									>50,000	1	7	3	55263	_
County (6)				1	County	/ Code (7)	(STATE	USE ONLY)		or if being demol	isnea)			
SALEM									SCHOOL					_
Name of Monitoring Fire	m Hired by Buildin	g Owne	r (8)	A	SCM N	0.			ent Contractor (9)					
HEALTH AND SAF	ETY SERVICE	S						LTA/BJDS	S, INC					-
Street Address			5380.0					t Address						
318 12 TH STREET									RIAL BLVD					_
City, State, Zip Code								State, Zip C						
HAMMONTON, N.	08037								TON, PA 18966					-
Project Manager for Mo			T	elep	hone N	lo.		hone No.		License No.				
AL OSWALD					704-		70.000	5 322-2900	According to the contract of t	00763				
Start Date (10)		heduled						e of OSHA						
6 / 13	/ _17	8	/_	31	_ / _	17_	in the state of	RITERION	LAB5					_
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T Facility Closed Vac	ated During Entire	Period	of Ab	atem	ent			0 STREET						
Abetement Perform	ed Outside of Non	mal Fac	ility F	lours	- Desc	nbe		State, Zip C						
	Time of Abatement: <u>7</u> AMPM/ <u>4:30</u> PM Scope of Work (Check all that apply)								550					
Scope of Work (Check	all triat apply)								ntainment with Ne	gative Pressure				
≥3 sf or ≥3 lf ≥3 sf or ≥3 lf			Reno	vatio	n n			Cloveh:	an Procedure		i			
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IN Fa		C		dial S (12)	Staff?			ırfacing, VA er miscellar		SF ULLE)	=		Encapsulate	ro
(13	3)	Y		No.	N/A		Out	er misconar	10000)					
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ADMINISTRATION]						ILE BY UV'S	108 SF		-		
ADMINISTRATION]			1		GS (ASSU	JMED)	24 SF pistered Landfill				
Name of Registered V					JDEP V		Was	ic Yards of ste	- 1000000000000000000000000000000000000	LANDFILL				
SERVICE TRANS	SPORT GRP				20990		-	nearl Data	City, State					
City, State 58 PYLES LANE	NEW CASTLE	DE 197	720				Dist	oosal Date		BURG, OH 44	688			
Completed By (Print o		Title					-	Signature	0 01		Date	~	~	,,-,
MICHAEL PARSO			JEC	TM	ANAC	SER		Me	chaelt	aram	7-1	2-	do	111

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S LOCATION RMALLY SOLEY BY TENANCE/	YES NO N/A	LIBRARY CLOSE:	X	X	X	×	×	×	×	×	
LOCATION OF ASBESTOS-CONTAINING MATERIAL (ACM) TO BE ABATED IN FACILITY	ADMINISTRATION AREA	LIBRARY CLOSET	* 1ST-FL-PRINCIPLES OFFICERCEOSET	LST-HUVIGE PRINCIPLES OFFICE	" BACKENTRANCE BY ELEVATOR	E4	en en			8	

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Date of Notification (1) 6 / 19	17	_						RICTIO		WE	In		
Agencies Notified Type Not	ification		-	Street A	ddress			and I					
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(NJAC 5:23-8) justific					·			<u></u>	THE STREET			L	_
				FAC	ILITY INF	FORMA	TION	Type of Facility	r (A)				-
Name of Facility Where Abatement		Place (3)					School (K-1					
PENNSVILLE HIGH SCHOO	L							T Subchanter	8 (Other than K-1)	2)			
Street Address								Other (i.e.,	private and comme	ercial buil	dings	,	
110 S BROADWAY								homes, etc	# of Floors	Ride	g. Ag	9	\dashv
City (5)								Square Feet	1	7		Ĭ	
PENNSVILLE								>50,000					-
County (6)				Count	y Code (7)	(STATE U	ISE ONLY)		rior if being demo	iisiieu)			
SALEM								SCHOOL					-
Name of Monitoring Firm Hired by I	Building Ov	mer (8) = A	SCM N	10.			ent Contractor (9)				
HEALTH AND SAFETY SER	VICES					The second second	TA/BJDS	i, INC	0				
Street Address						1	Address						
318 12 TH STREET						1345	INDUST	RIAL BLVD					
City, State, Zip Code		-				City, St	ate, Zip Co	ode					
HAMMONTON, NJ 08037						sou	THAMP	TON, PA 1896	66				
Project Manager for Monitoring Firm	n		Teler	phone N	lo.	Teleph	one No.		License No.				
AL OSWALD	55			9 704-		215	322-2900)	00783				
Start Date (10)	Schedu	iled Co	molet	ion Dat	e (11)	Name	of OSHA N	Monitor					
6 / 13 / 17	8					CRIT	TERION !	LABS					
						Street	Address						
Occupancy Status During Abateme	Entire Peri	od of A	hafer	nent			STREET	ROAD					
Facility Closed/Vacated During	Facility Closed/Vacated During Entire Period of A Abatement Performed Outside of Normal Facility						tate, Zip C						
Time of Abatement 7AM	Abatement Performed Outside of Normal Facility Time of Abatement: 7AMPM/4:30PM							PA 19020					
Scope of Work (Check all that appl	у)						7 F.// Co-	toinmont with N	legative Pressure				
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Asbestos-Containing Material (TO BE ABATED	ACM)	Ma	intena	nce/	(i.e	e., therm	al systems	s insulation,	(Specify	Removal	air	apsi	Enclosure
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Name of Registered Waste Hauler			400	NJDEP !			Yards of		egistered Landfill				
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City, State 58 PYLES LANE NEW CAS	TLE DE 1	19720				Dispo	sal Date	City, State WAYNE	SBURG, OH 44	688			
	Title					1 5	Signature)	Date	27.00		
Completed By (Print or Type) MICHAEL PARSON	1 0.000.0		CT N	IANAC	BER	1	Mr	Quelt	Coson	16-	19-	20	217

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AMOUNT SPECIFY SF OR LF		24LF	Additional property of the second			÷			
DESCRIPTION OF ASBESTOS CONTAING MATERIAL (ACM) (IE, THERMAL SYSTEMS INSULATION SURFACING, VAT, OR OTHER MISCELLANEOUS)		EXTERIOR CAULK							
IS LOCATION NORMALLY USED SOLEY BY MAINTENANCE/ CUSTODIAL STAFF?	YES NO M/A						- Control of the Cont		
LOCATION OF ASBESTOS-CONTAINING MATERIAL (ACM) TO BE ABATED IN FACILITY		ADMINISTRATION AREA							

JAN 13

0974-0	0			- 1	Nomeo	f Duilding	Owner/Operator (2)	7 (6) (F ² []	NA F	2 17	1/2	
Date of Notification (1) 5 /	31 /	17	_				SCHOOL DIST			<u>W</u> E			
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					FAC	ILITY IN	FORMATION	Type of Facility (4	IV.				-
Name of Facility Where A		iking F	Place (3)				School (K-12)					
PENNSVILLE HIGH	SCHOOL		-					Cubchanter 8	(Other than K-12)	ial build	linac		
Street Address								☐ Other (i.e., pri homes, etc.)	vate and commerc	אמו טטווג	ii iyo		
110 S BROADWAY								Square Feet	# of Floors	Bidg	. Age		
City (5)								>50,000	1	75	5		
PENNSVILLE				-	Count	v Code (7)	(STATE USE ONLY)	Current Use (Pric	or if being demolist	ned)			
County (6) SALEM						, (,		SCHOOL					
Name of Monitoring Firm	Hired by Buildi	ng Ov	vner (8	3) 1	ASCM N	No.	Name of Abateme	ent Contractor (9)					
PENNONI ASSOCIA	TES, INC				102		DELTA/BJDS	, INC					_
Street Address							Street Address						
515 GROVE STREE	T SUITE B						1345 INDUST						
City, State, Zip Code							City, State, Zip C						
HADDON HEIGHTS	, NJ 08035							TON, PA 18966	Li No	42-12			
Project Manager for Mon	toring Firm				phone N		Telephone No.	c.	License No.				
Alan Lloyd				856	656	-2875	215 322-2900		00703				-
Start Date (10)					tion Dat		Name of OSHA N						
6 / 13 /					_ / _	11	Street Address						
Occupancy Status During	Abatement (C	check	only o	ne)	m ont		400 STREET	ROAD					
☐ Facility Closed/Vacate	ent Performed Outside of Normal Facility Hours - Describe City, State, Zip Code												
Time of Abatement: 7	ement Performed Outside of Normal Facility I e of Abatement: 7AMPM/4:30PM						BENSALEM						
Scope of Work (Check al	I that apply)						M Full Cor	ntainment with Neg	ative Pressure				
☐ ≥3 sf or ≥3 lf			⊠ Re	novati	ion ·		☐ Mini-En	closure					
≥3 \$1 61 ≥5 11 ≥160 \$f or ≥260 If			☐ De	molitic	on		☐ Gloveba	ag Procedure empted (*) and No	n-Friable Procedu	ire			
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Asbestos-Containing)		d Sole intens	ely by	Asbe	estos Containing M e., thermal systems	aterial (ACM)	Amount (Specify	Removal	Repair	cap	Enclosure
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			Yes	No	N/A	FLOOR	R TILE (PLEASE	SEE	12 SF				
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City, State		- 12			2099	0	Disposal Date	City, State					
58 PYLES LANE N	EW CASTLE	DE 1	9720					WAYNES	BURG, OH 4468				
Completed By (Print or 7		Title				1 00	Signature	0 00	1 /	Date	1		
MICHAEL PARSON		PI	ROJE	CT	JANAC	3ER	Mhc	hall fans	en CDV	5/3	1/2	01	
ASB-41 IAN 13		*	Do not	use t	this form	n for asbe:	stos licensure exe	mpted activities.	I	18	225		

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IS LOCATION NORMALLY	OSED SOLET BY MAINTENANCE/ CUSTODIAL STAFF?	NO N/A	×							
IS L	MAINTENANCE/ CUSTODIAL STAI	YES								
LOCATION OF ASBESTOS-CONTAINING MATERIAL (ACM)			ADMINISTRATION AREA							

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STATE OF NEW JERSEY
NOTIFICATION OF ASBESTOS ABATEMENT
(PURSUANT TO NJAC 8:60-7 AND 12:120-7

Date of Notification (/				Name of Building Owner / Operator (2) RUSSO DEVELOPMENT INC.											
$\frac{06}{20}$	/															
Agencies Notified	Type of No	tifica	tion		Commence of the Commence of	MERCE BLV	D		<u></u> 图 1 -	11-11	1/ 1					
☑ EPA		Initial	I			, Zip Code		11	Dootland							
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✓ DOH ✓ DOL	17 97		ndment #	i1_ / justification		e of Contact TelepHone Number 201 / INICK TUCCI										
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		F	ACILITY INFORMATION													
Name of Facility Whe		ent is	Taking F	Place (3)		Type of Fac	cility (4)	-	11:11			11.				
FORMER MERCK UN	IION						School (K-	12)		JUL	28 2	2017 i j				
Street Address				-		_		r 8 (Other th	an K-12)							
1011 MORRIS AVE							Other (I.e.,	private & cones, etc.)	nmercial	1.0775	The second	177.747 2 (1				
							3-,	, ,								
City (5)	County (6)			County Code (7)	Square Fee		# Of Floors		Building	Age.	<u> </u>				
UNION	UNION					12,5		being demo	lished)		40	+				
						OFFICE / P			iisiicu)		-10					
Name of Monitoring	Firm Hired	by Blo	dg. Owne	er (8)	ASCM NO											
		•														
EHI								ACTING GR	OUP, INC							
Street Address 655 WEST SHORE T	DΔII					Street Add	ress									
City, State, Zip Code						32 Williams	Parkwav									
SPARTA, NJ 07871						City, State,										
Project Mngr. For Mo	onitoring Fi	rm		Telephone Nu	mber											
WILLIAM KIERBIL				973-729-5649		East Hanov	-	36								
Sheduled Start Date	' /	Sche	2000	letetion Date (1	/				License I	Number						
07_//05	$/-\frac{17}{}$	-	12 /		17	973-884	1-8682	00860								
Occupancy Status D	uring Abate	ment	(Check	Only 1)			Name of OSHA Monitor									
				ire Period of				ACTING GR	OUP, INC							
Abatemen	- Carlotte - 100					Street Add	ress									
		d Out	side of N	lormal Facility		22 14/:11:0-00	Darlovav									
Hours - Describe:						32 Williams City, State,										
☑ Other - De	scribe	7.007	AIVI-3.30 I	<u> </u>		East Hanov		36								
Scope of Work (Che	ck All That	Apply)	***************************************		4										
						F C 4-3		h Nagativa [Oronouro							
☐ Demolitio ☐ >3sf or >3	6.5		$\overline{\checkmark}$	Renovation												
☑ ≥160 sf or					H	Glovebag I										
					~	Non-Exempted (*) and Non-Friable Procedure										
									Abota	of Tues						
Location o Asbestos Conta		10	ls cation	٨٥	Descript bestos - C				Abateme R	lit Type	E	lΕ				
ASDESIOS CONT	aiiiiig	12/20/	rmally	l As	Material			Amount	E	R	N	N				
TO BE ABAT	ED	5.50000	Jsed		e., thermal	l systems		(Specify	М	E	С	C				
in Facility			olely	200 0.00	17. T. C.	facing, VAT		SF or LF)	0	P	A	L				
(13)			Main-	or	other misc	ellaneous)			V A	A	P	o s				
		3333743	nance/ stodial						L	R	U	U				
			aff (12)	[_		L	R				
			NO N/A													
U6				VAT MASTIC				370 SF	7							
U6			V	VAT				2,100 SF	V		1-					
U6		-		CAULK LAB TOP				415 LF 40 SF	7	 	1 1					
U6 Name of Registered	Waste Hau	Downer .		NJDEP Waste	Cubic	Name of R	The state of the s									
NEWARK CARTING		0.50		Hauler ID No.	Yards	I.E.S.I.	ar a national(ZigiZ									
				4509	of Waste											
City, State	and the second s				Disposal	City. State	M DA 404	05								
NEWARK, NJ					Date	BETHLEHE	IVI, PA 181	UU								
Completed by (Print	or Type)			Title		'	Signature	,	1/0		Date					
	11-11										1					
Steve Stiles				Project Manage	er		1	Zeur/s		\sim)7/27/17				
ASB-41			ALC CONTRACT				/	/								

Location of Asbestos Containing TO BE ABATED in Facility (13)	Is Location Normally Used Solely by Maintenance/ Custodial Staff (12)	Description of Asbestos - Containing Material (ACM) (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abateme R E M O V A L	R E P A	E N C A P S U L	E N C L O S U R
	YES NO N/A		510 SF	7	$+$ \Box		
^	HIDIT	ROOF FLASHING		7	H	1 1	
6		PIPE & FITTING	407 LF	-	1 1	1	
6		DUCT MASTIC	500 SF	7	+ +	-	
6						-	1
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STATE OF NEW JERSEY

NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NJAC 8:60-7 AND 12:120-7 Name of Building Owner / Operator (2) Date of Notification (1) RUSSO DEVELOPMENT INC. 20 17 Street Address JUL 28 2017 570 COMMERCE BLVD Type of Notification Agencies Notified City, State, Zip Code Initial **EPA** CARLSTADT, NJ 07072 Amended DEP Telephone Number Name of Contact Amendment #_ DOH DOMINICK TUCCI Emergency w/ justification DOL Cancellation **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) FORMER MERCK UNION School (K-12) Subchapter 8 (Other than K-12) Street Address Other (I.e., private & cmmercial 1 1011 MORRIS AVE bldgs., homes, etc.) **Building Age** # Of Floors Square Feet County Code (7) County (6) City (5) 13,200 UNION UNION 40 + Current Use (Prior if being demolished) OFFICE / PRODUCTION ASCM NO Name of Monitoring Firm Hired by Bldg. Owner (8) NORTHSTAR CONTRACTING GROUP, INC. Street Address Street Address 655 WEST SHORE TRAIL 32 Williams Parkway City, State, Zip Code City, State, Zip Code SPARTA, NJ 07871 Telephone Number Project Mngr. For Monitoring Firm East Hanover, NJ 07936 973-729-5649 WILLIAM KIERBIL License Number Telephone Number Sched. Completetion Date (11) Sheduled Start Date (10) 12 05 07 00860 973-884-8682 Name of OSHA Monitor Occupancy Status During Abatement (Check Only 1) NORTHSTAR CONTRACTING GROUP, INC. Facility Closed/Vacated During Entire Period of Street Address Abatement Performed Outside of Normal Facility П 32 Williams Parkway Hours - Describe: City, State, Zip Code Other - Describe: ___ 7:00 AM-3:30 PM East Hanover, NJ 07936 Scope of Work (Check All That Apply) Full Containment with Negative Pressure Renovation Demolition Mini - Enclosure ≥3sf or_>3lf Glovebag Procedure ≥160 sf or ≥260 lf Non-Exempted (*) and Non-Friable Procedure 7 Abatement Type Description of Location of R Asbestos - Containing Location Asbestos Containing N E Amount R Material (ACM) Normally C M E (Specify (I.e., thermal systems Used TO BE ABATED P L SF or LF) 0 insulation, surfacing, VAT, Solely in Facility 0 V A or other miscellaneous) by Main-(13)S S A tenance/ U R U Custodial R Staff (12) ES OD CA 60 SF LAB TOP 7 U10 1,650 LF 1 CAULK U10 5 SF **ROOF TAR** V U10 6,385 SF ROOF FLASHING U10 Name of Registered Landfill Name of Registered Waste Haule NJDEP Waste Cubic Hauler ID No. Yards I.E.S.I. NEWARK CARTING 4509 of Waste Disposal City. State City, State BETHLEHEM, PA 18105 Date NEWARK, NJ Date Signature Title Completed by (Print or Type) OPR 07/27/17 Project Manager Steve Stiles

Location of Aspestos Containing TO BE ABATED in Facility (13)	Is Location Normally Used Solely by Maintenance/ Custodial Staff (12)	Description of Asbestos - Containing Material (ACM) (I.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abateme R E M O V A L	R E P A I R	E N C A P S U L	E N C L O S U R
	YES NO N/A		40.15	N			
1110	日同日	PIPE & FITTINGS	40 LF	7	1 7		
		TANK INSULATION	320 SF		1	1 1	
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	- 					+ +	+ =
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CKFF 8349

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

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e of Notification (1) $\frac{1}{2}$		Name of Building Owner/Operator (2) PSE&G JUL 2 8 2017									IJ		+				
encies Notified Type No	otification		Street Address 4000 HADLEY ROAD										1				
	Initial City, State							Zin Code									
DCI Ar	nendment # nergency (inclu	iding	1	SOUTH PLAINFIELD, NJ 07080													
DOH ju	stification) ancellation		ING	Doug	a me (GAR	Ri	TY							1		
	at in Taking Dis	ace (3)		FACILIT	Y INFORM	ATION	Тур	e of Fa	cility (4)								
me of Facility Where Abateme		200 (0)					니뮤		ol (K-12) napter 8	Mha	r than K-12)						
ant Address				T05	ET		卤	Other etc.)	(i.e. pri	vate &	commercial bi			nes,			
2 ND ST. 4	MIONE	-0 É	<u> </u>	IRC	21		Sq	uare Fe	et //	# of	Floors N/A		Age	Ĵ			
HOBOKEN	٥			ounty Co	do (7)		Cu		e (Prior	if bein	g demolished)	Vice-	17				
Hudso			(5	STATE US	EONLY) _				N	PA				_	_		
ame of Monitoring Firm Hired I	y Building Owr	ner (8)	1	ASCM N	10.	Nar	me of A	bateme	ent Contr TEMS	OF A	(9) AMERICA						
NVIRONMENTAL TAC	rics			0045	-	Str	eet Add	iress									
treet Address 4 BROAD STREET							396 WHITEHEAD AVE. City, State, Zip Code										
ity, State, Zip Code						S	OUTH	RIVE	R, NJ	0888	2						
MATAWAN, NJ 07747 Project Manager for Monitoring Firm				Telephone No.			Telephone No. License No. 732-432-8350 01111										
TOM GEIGER				732-290-2217 led Completion Date (11)				Name of OSHA Monitor									
Start Date (10) Schedule 8				36/2017				UNIQUE SYSTEMS OF AMERICA Street Address									
Occupancy Status During Abat	ement (Check	Only One))			3	reet Ad 96 WI	HITEH	IEAD A	AVE.					_		
Facility Closed/Vacated D Abatement Performed Ou	uring Entire Pe tside of Norma	riod of Ab I Facility F	Hours	nent	PATORS	Ci	ity, Stat	e, Zip C	ode ER, No	1 088	82						
Other - Describe: <u>Ou1</u>	DOORS - N	tess.	SAK	1 0 1	1014	= 5	50011	n Kivi	_11,140		<u> </u>						
Scope of Work (Check All Tha	(Apply)	-	enova				A	Full C	ontainm	ent wit	h Negative Pr	essure	•				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Demolition				Mini-Enclosure Glovebag Procedure Non-Exempted (*) and No				e nd Non-Friable	n-Friable Procedure					
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Asbestos-Containing Material (ACM)			Used Solely by Asbestos Co				Description of ontaining Material (ACM) nal systems insulation,				Amount		-Ti				
										(Specify SF or LF)		Removal	Repair	Encapsulate			
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(,		Yes No N/															
OUTDOORS IN STREET			X		TR	ite PipE		É	120 LP								
UNI DUUNG TIE						11 - 12-									-		
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A State of Market	lauler			NJDEP \	/ //aste	Cubic Y					istered Landfill						
Name of Registered Waste H WASTE MANAGEMEN				Hauler II 1125	O No.	of Wast	20	2			IORTH				_		
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