CI	heck	c No		36	f2	5
	E	(E		W	F

Date of Notification (1)					Nama	of Building	g Owner/Operator	(2)	177					
							ay, VP S&J El		actors Inclu	2.0	20	10		
July 25, 2016	T N	- 1151 21	1981		570.00, 150.00.00.0	Address	ay, VF 300 LI	ectrical conti	actors, 1160 [- / 3	CU	ID.		J. House
Agency Notified	Type No	otification			1000.00.00.000		ood Lane		i					
□ EPA	☑ Initia			-		tate, Zip (ASSEST	os co	ΝT	HŪ	Lo	
DOL Not required per State Peg. 10/2004	☐ Ame	nded ndment #			and the same				LIC	CENSI	VG	Motoday	er en en en	
⊠ DOL	0.0000	rgency (including	1				ns, NJ 07208		Tolophono Num	hor				-
⊠ DOH	justii	fication)				of Contac			Telephone Num	ibei				
□ DCA	☐ Cano	cellation			Maria	a Irigara	ay					_	_	_
The state of the s					FACI	LITY INF	ORMATION							
Name of Facility Where	Abatemer	nt is Taking Place	e (3)					Type of Facility	(4)					
N/A								☐ School (K-12))					
Street Address								☐ Subchapter 8	(Other than K-12					
642-644 Newark A	venue							homes, etc.)	vate & commercia					
City (5)								Square Feet	# of Floors	Bldg.	Age			
Elizabeth								6,000	3	100	+/-			
County (6)					County	Code (7) (STATE USE	Current Use (Pr	or if being demoli	ished)				
Union					ONLY)			Residential	House Slated	for D	em	olit	ior	1
Name of Monitoring Firm	Hired by	Building Owner	-	ASCM	No.		Name of Abaten	nent Contractor (9						
Saban Engineering				N/A	11.00.00.00		***************************************	toration Co.,						
Street Address	g Grou	р, пто.		14/14			Street Address	itoration co.,						-
And the second							223 Randoli	ah Avenue						
201 Stuyvesant Av	/neu	2.3300					City, State, Zip (_		\dashv
City, State, Zip Code														
Lyndhurst, NJ 070			T =	1 1			Clifton, NJ (77011	License No.					-
Project Manager for Mon	iitoring Fi	rm	100	elepho			Telephone No.							
Stephen Pharai					99-77	10	973-478-468	VE 1	00120			_		_
Start Date (10)		Scheduled Cor	- Jan - 1				Name of OSHA		Namelana I I I	_				
August 08, 2016		December						vironmental S	ervices, L.L.	U.				
Occupancy Status Durin	g Abatem	ent (Check only	one)	1			Street Address							
☑ Facility Closed/Vacate	ed During	Entire Period of	Aba	tement			13.50	Brook Avenue): 					_
☐ Abatement Performed	Outside	of Normal Facilit	у Но	urs			City, State, Zip (
☐ Other - Describe:							Lyndhurst,	NJ 07071					_	_
Scope of Work (Check al	II that app	oly)					☐ Full	Containment with	Negative Pressur	re				
≥ 3 sf or ≥ 3 If						ovation	☐ Mini	-Enclosure						
≥ 160 sf or ≥ 260 lf					⊠ Den	nolition		ebag Procedure -Exempted (*) and	Non-Friable Prod	cedure				
		T	v				2				Α	bate	mei	nt
				s Locat Normal								Ту	ре	
Location		. /		ed Sole			Description		A				_	
Asbestos-Containir TO BE A		al (ACM)		intena			stos Containing M ., thermal systems		Amount (Specify		Re	ъ	nca	Enc
IN Fac			,	Custod Staff?		(,,,	surfacing, VA	T, or	SF or LF)		Removal	Repair	ısqı	Enclosure
(13	3)			(12)			other miscellan	eous)			val	air	Encapsulate	ure
		-	#0.5	1	100000	1							(D	
Roof Yes No N/A							ing Material		280	0 sq ft	X			
Basement - Attic					X	Floor	r Tile		45	0 sq ft	X			
Basement					\forall	Ther	mal Systems	Insulation		90 In ft	X			
Dasement					/	111011	a. Oyotoo							
Name of Registered Wa	ste Haule	er	N.	JDEP V	Waste I	lauler	Cubic Yards of	Name of Regis	tered Landfill					
A STATE OF THE STA			3,500	No.			Waste							
B&N&K. Restorati	on Cor	npany, Inc.	1	2695			30	Minerva Er	nterprises, Inc	C.				
City, State							Disposal Date	City, State						
Clifton, NJ 07011							08/09/2016 - 08/31/2016	Waynesbu	rg, OH					
Completed by		Title					Signature	0111		Date				
G. Roger Woodma	an	Project Ma	nac	jer			1//	1/1/		7/25/	201	6		

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	500	150	1	10	10.0	
40. 1	1.7	1150	13-7	13	4	
4 1 1	11-	1577	1	11		

Date of Notification (1)					Building Ov	wner/Op	perator	(2)						7 !	
07-26-16			,	Jinco II	nc.					JUL	. 292	016	19.5	1/	
Agencies Notified	Type Notification		100	Street Ad 287 Ju	^{idress} lianneTer	rrace					OC ONE				
EPA DEP DOL	Initial Amended Amendment	# 1			te, Zip Code				ASI	コージェ	06 OUN DEMSIM	THUL	<u> </u>		
	Emergency (i	including			Contact					Tele	ephone Nur	nber			\neg
DOH DCA	justification) Cancellation			Rene J	linorio						***************************************				
				FACIL	LITY INFOR	RMATIC	NC								
Name of Facility Where Commercial Buildin		Place (3)						_	of Facility (4 School (K-12						
Street Address			77					П	Subchapter	8 (Othe					
522 - 524 59th St.									Other (i.e. poetc.)	rivate 8	commerci	al build	lings,	home	s,
City (5) West New York									re Feet	# of	Floors	В	ldg. A	ge	
County (6)				County C				Curre	ent Use (Pric	r if bei	ng demolisi	ned)	oct to the		
Hudson			(ISE ONLY)		_								
Name of Monitoring Firm N/A	n Hired by Building (Owner (8)		ASCM	No.				atement Con stracting L		(9)				
Street Address							Street	Addre	ss						
								7th S							
City, State, Zip Code							Unio	n City	Zip Code y NJ 0708	7					
Project Manager for Mor	nitoring Firm			Telephor	ne No.			hone N 216-9			License N 01206	lo.			
Start Date (10) 07-25-16		Scheduled 07-28-1		pletion [Date (11)				HA Monitor stracting L	LC					
Occupancy Status Durin	g Abatement (Chec	k Only One)				Street	Addre	SS				11.12 W		
Facility Closed/Vac	ated During Entire F	Period of Al	oatem	ent			522	7th S	t.						
	ned Outside of Norm					_ [2000		Zip Code y NJ 0708	7					
Scope of Work (Check A	All That Apply)						Offic	or Oit	y 140 07 00	-			-		
≥3 sf or ≥3 lf		Пв	novat	ion] F11	ıll Containme	ent with	Negative I	Pressu	re		
≥ 2160 sf or ≥260 lf		The state of the s	moliti					Mi Gl	ni-Enclosure ovebag Prod	e edure					
								No.	on-Exempted	1 (*) an	d Non-Frial	ole Pro	1000	e ement	
			ocatio	Patrice										pe	
Locatio Asbestos-Containing		Used	Solel	y by	Asbesto		scription aining N		I (ACM)	А	mount			Е	
TO BE AB	ATED	Mair Custo	itenar			hermal	system	s insul		(5	Specify	Rei	Z.	Encapsulate	Enc
In Faci (13)			(12)				cing, VA			SI	or LF)	Removal	Repair	psu	Enclosure
(,		Yes	No	N/A				,				<u>a</u>		ate	re
Roo	of		X			Roof	Mate	rials		44	00 SF	X			
Basem	X			Pipe	Insula	ation		6	0 LF	X					
Name of Registered Wa	ste Hauler		111,5050	JDEP W		Cubic			Name of	Registe	ered Landfil	I I			
Century Waste Serv	13656.33	auler ID 02401		of Was					source R	lecov	ery F	acili	ty		
City, State Elizabeth, NJ						Dispos 07-28	sal Date 3-16	9	City, State Tullytov		Α				
Completed by		Title				S	ignatur	e	111-			ate	10		
Jaime Delgado		Proj. N	Mana	iger.				1	P		0	7-26-	10		

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D١	in	+ 1	-0	rr	n

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Date of Notification (1)					f Building C					1				20.00		
07-26-16					cle Comn	nercia	I Deve	lopme	ent, Inc.		JU	L	2 9	201	6	
Agencies Notified EPA	Type Notification		1.0	Street A 3822 F	^{ddress} River Roa	ad				L	SBEST	ros	S CC	NTE	101 -	1 2
DEP DOL	Amended Amendment				ite, Zip Cod Pleasant,		8742		L				NSI			
DOH DCA	instification (including	1.18		f Contact s Rome					Tele	phone I	Num	ber			
Name of Facility 1AB		51 /		FACI	LITY INFO	RMATI	ON									
Name of Facility Where Walgreens # 16034		g Place (3	3)						of Facility (School (K-1	(2)						
Street Address 1801 N Olden Ave.								1	Subchapter Other (i.e. p etc.)	8 (Othe orivate &	comme	(-12) ercia	build	lings,	home	es,
City (5) Ewing									re Feet	# of	Floors		В	ldg. A	ge	
County (6) Mercer					Code (7) USE ONLY)			Сигге	ent Use (Pri	or if beir	ig demo	lishe	ed)			
Name of Monitoring Firm	Hired by Building (Owner (8)		ASCN	No.				tement Cor tracting L		(9)					
Street Address							Street 522		7.7							
City, State, Zip Code									ip Code	. 7	-					
Project Manager for Mon	Τ.	Γelepho	ne No.		Teleph	none N		57	License							
Start Date (10)		Cabadul	ad Com	nlation	Date (11)		201 2	12, 1965, 500	603 HA Monitor		01206	3				
07-11-16		08-05-	16	pietion	Date (11)		Delfa	Con	tracting L							
Occupancy Status During							Street 522 7		N/AX							
Facility Closed/Vaca Abatement Perform Other – Describe:					(Application of the Application	_	City, S	tate, Z	ip Code / NJ 0708	37						
Scope of Work (Check A	Il That Apply)						01.110		,							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renovat Demoliti					Mir Glo	ll Containm ni-Enclosure ovebag Pro- n-Exempte	e cedure	-				3	
		Is	Location	on				- 110	T EXOTIPIE	u () uno	7101111	1001		Abate	ment	
Location		20,200	Normall d Solel				scription							Ту	pe	
Asbestos-Containing <u>TO BE AB</u> , In Facil (13)	ATED	Ma	intenan todial S (12)	ice/		hermal surfa	taining M systems cing, VA niscellar	s insula T, or		(S	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
Ground F	Floor	1.00	Х	1371		VA:	T+Mas	tic		7.2	00 SF		X			
Ground F	X				T+Mas	200.00			00 SF		X					
Roof			X			Roofir	ng Mate	erials			000 SF		X			

Name of Registered Was			0.000	JDEP W	10 TO		Yards		Name of	Register	ed Land	dfill			16	
Century Waste Serv	ices		01000000	auler ID 12401	NO.		60	11/2/	Tullyto		source	Re	COVE	ery F	acilit	ty
City, State Elizabeth, NJ							sal Date 29-16	16	City, Stat							
Completed by Jaime Delgado		Mana	ger.		S	Signature	A	2			Date 07-	e 25-1	16			

State of New Jersey - Notification of Asbestos Abatement

NO CF

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

Date of Notification (1) July 26, 2016					Name of Building Owner/O	Operator (2)	1			2212	
Agencies Notified		Notification			Street Address	-	1 :-	JUL	2.9	2016	
X EPA		EFFECTIVE STOPMENDAVI	Notifica		370 Southpointe Dr	. Suite 10	0				
DCA		PERSONAL PROPERTY AND ADMINISTRATION OF THE PERSON OF THE		ertification #1	City, State, Zip Code	5217	ĀS	SBESTO			S JC
x DOL		Postponed Emerg			Canonsburg, PA 15	031/	- Tolon	hone Nun	FNSI	NG	
X DEP		justific		ricidaling	Mr. Ryan Rodeheaver		Telepi	none Nun	ibei		
x DOH		☐ Cance			*						
				FACILITY INF				~			
Name of Facility Where Abate Medexpress	ement is Ta	king Place (3)			Type of Facility (4) School (K-12)						
Street Address					Subchapter 8 (other than	7.					
251 N. Broadway					Other (i.e. private & Sq. Feet: Unknown					vears	
<u>City (5)</u>	County (6			Code (7)			927		2004000	,	
Pennsville, NJ	Salem		(State	Use Only)	Current Use (prior if being	demolished):				
Name of Monitoring Firm Hire Environmental For			ASCM	No.	Name of Contractor (9)						
	ensics,	LLC			GREENWOOD ABAT	EMENT C	ONSU	LTANTS	S, INC		
Street Address					Street Address						
3 Clementon Way					511 MAIN STREET						
City, State, Zip Code Lawrenceville, NJ 08	26/12				City State, ZipCode Butler, NJ 07405						
		Telephone N	Number		Telephone Number		Licens	e Number			
Lance Berens	Project Manager for Monitoring Firm Lance Berens Telephone Number 609.495.4069										
Scheduled Start Date (10)		Scheduled C	Completio	on Date (11)	973-492-0477 Name of OSHA Monitor		0084	.0			
TBD		TBD			EMSL inc.						
Occupancy Status During A	batement	(Check only o	ne)		Street Address						
Facility Closed/Vacat					1056 Stelton Road						
Abatement Performed xDescribe – Vacan			ility Hour	'S -	City, State, Zip Code					_	
Other - Describe: S			durat	tion							
	m-6pm		,		Piscataway, NJ 088	354					
Source of Work (Check all that	at apply)										
≥ 3 sf or ≥ 3 l	f				ion	x Full Conta Mini-Enclo		with Nega	itive Pre	essure	
□≥ 160 sf or ≥ 2				Demolition	1011	Glovebag I		re			
						Non-Exem	pted (*)	and Non-l			dure
Location of Asbestos-Contain Material (ACM) in Facility (13)		ocation Normal ely by Maint./Cu			bestos Containing Material nal systems insulation, surfacio	ng, (Spec		Abateme			
		ff? (12)		VAT, or other mis		or LF)		Remove	Repair E	ncap E	Enclose
Vacant Space	115	5 110	NA X	VAT & Masti	ic	5,000) sf	X			
- addit opade				771 G WIGST		0,000		and a			
Name of Reg. Waste Hauler	0	NJDEP Was		rID#	Cubic Yards of Waste:			of Registe		dfill	
See Hauler Below # 1 &	2	See Below	/		40		1 00 977700	lowfill La D.W.S	natili		
							0.11.0	J. VV. O			
Hauler #1) Greenwood Abatement Consultants, Inc Butler, I					07405	Disposal Da			ty, State		
NJ DEP # 12561 NY DEP #						August '	12, 201		oute 2, E idgepor		
Hauler #2) Newark Carting, Inc Newark, NJ 04509, NJ DEP # 195									4-842-2		
Completed by (Print or Type)			Signature		Date						
Marin Graure		SENIOR P		CT	Marin Graur	e	July	y 26, 20	116		
		MANAGER	₹		- Constant alicano						

GAC # 2016-576- Amendment # 1- Postponed by owner- Tentative start date: 1st week of August 2016

State of New Jersey - Notification of Asbestos Abatement

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) Date of Notification (1) July 22, 2016 Medexpress Agencies Notified Notification Type Street Address Initial Notification 370 Southpointe Dr. Suite 100 X EPA ■Amended Certification City, State, Zip Code DCA ASPESTOS CONTROL & ■ Emergency (including Canonsburg, PA 15317 x DOL justification) Name of Contact Telephone Number X DEP Mr. Ryan Rodeheaver □ Cancelled x DOH FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) Medexpress School (K-12) ☐Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) 251 N. Broadway Sq. Feet: Unknown # of Floors: 1 Bldg. Age: 70 years City (5) County (6) County Code (7) (State Use Only) Current Use (prior if being demolished): Pennsville, NJ Salem Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) Environmental Forensics, LLC GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 Clementon Way 511 MAIN STREET City, State, Zip Code City State, ZipCode Butler, NJ 07405 Lawrenceville, NJ 08648 License Number Project Manager for Monitoring Firm Telephone Number Telephone Number Lance Berens 609.495.4069 00840 973-492-0477 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor July 26, 2016 August 12, 2016 EMSL inc. Street Address Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement 1056 Stelton Road Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code xDescribe - Vacant Retail Space Other - Describe: Space vacant during duration Piscataway, NJ 08854 7am-6pm Source of Work (Check all that apply) x Full Containment with Negative Pressure ■ Renovation Mini-Enclosure > 3 sf or > 3 lf □ > 160 sf or > 260 Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type (Specify SF (ACM) (i.e. thermal systems insulation, surfacing, Material (ACM) in Facility (13) Solely by Maint./Custodial Remove Repair Encap Enclose Staff? (12) VAT, or other miscell.) or LF) NO YES X VAT & Mastic 5.000 sf X Vacant Space Name of Registered Landfill NJDEP Waste Hauler ID # Cubic Yards of Waste: Name of Reg. Waste Hauler Meadowfill Landfill See Hauler Below # 1 & 2 See Below 40 G.R.O.W.S City, State Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date Route 2. Box 68 August 12, 2016 NJ DEP # 12561 NY DEP # Bridgeport, WVA Hauler #2) Newark Carting, Inc. - Newark, NJ 04509, NJ DEP # 19551

Marin Graure

304-842-2784

July 22, 2016

Marin Graure

Completed by (Print or Type)

SENIOR PROJECT

MANAGER

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7) GAC Project # 060-16 Name of Building Owner/Operator (2) Date of Notification (1) RUTGERS, THE STATE UNIVERSITY OF NJ2016 July 26, 2016 Notification Type Agencies Notified ENVIRONMENTAL HEALTH & SAFETY DEPT. ■ Initial Notification X EPA 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUSOL & Amended Notification #3 -X DCA new start and completion dates City, State, Zip Code X DOL PISCATAWAY, NJ 08854 ■ Emergency (including Tolonhana Number ☑ DEP- No Longer REQUIRED Name of Contact justification) X DOH MICHAEL SMITH, ENV. ■Cancelled **HEALTH & SAFETY** FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) **NEWELL CENTRAL HEATING PLANT, BLDG# 6280** ☐ School (K-12) Subchapter 8 (other than K-12) Street Address ☐ Other (i.e. private & commercial buildings, homes, etc.) **DOUGLASS CAMPUS** Sq. Feet: N/A # of Floors: 1 Bldg. Age: 60+ years County (6) County Code (7) (State Use Only) **NEW BRUNSWICK** Current Use (prior if being demolished): HEATING PLANT MIDDLESEX Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC 0098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 268 MAIN STREET City State, ZipCode City, State, Zip Code BUTLER, NJ 07405 BURLINGTON, NJ 08016 Telephone Number License Number Project Manager for Monitoring Firm Telephone Number **BRIAN KEARNY** 609-386-8800 00840 973-492-0477 Scheduled Completion Date (11) Name of OSHA Monitor Scheduled Start Date (10) 07/29/16 08/07/16 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD ■Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe XOther - Describe: SUB 8 Occupied Schedule: 3PM - 12 MID (24 HOURS & WEEKENDS AS NEEDED) FAIRLAWN, NJ Scope of Work (Check all that apply) Full Containment with Negative Pressure $\square \ge 3 \text{ sf or } \ge 3 \text{ lf}$ **X**Renovation ■ Mini-Enclosure ■ Glovebag Procedure / Wrap & Cut X > 160 sf or > 260 lf ■ Demolition ■ Non-Exempted (*) and Non-Friable Procedure Abatement Type Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount (Specify SF Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, Material (ACM) in Facility (13) Remove Repair Encap Enclose Staff? (12) or LF) VAT, or other miscell.) YES NO NA BOILER ROOM X TSI - FLU DUCT/EQUIP 400 SF X INSULATION BOILER ROOM 150 LF X X TSI - PIPE INSULATION

Name of Registered Landfill Name of Reg. Waste Hauler NJDEP Waste Hauler ID # 40 CY Cubic Yards of Waste: G.R.O.W.S. North Landfill See Hauler Below #1 & 2 See Below Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State 100 New Ford Mill 08/07/2016 NJDEP # 12561 Rd. Morrisville, Pa Hauler #2) Newark Carting, Inc., Newark, NJ 04509 19067 NJ DEP # 4509 215-736-1700 Date Signature Completed by (Print or Type)

Completed by (Print or Type)
RAYMOND C. PEDALINO
SENIOR PROJECT
MANAGER

Signature
Raymand C. Pedalino
July 26, 2016

CK 158				to NJAC				[[7]	EG	E		7 [Ī
Date of Notification (1) 07/26/2016				f Building lin Juliet		Operator	(2)						
Agencies Notified Type Notification			Street A	ddress				- U t	JUL	-20	20	18	
X EPA X Initial			607 S	omerset	Street	t							-
DEP Amended		1	City, Sta	ate, Zip Co	ode			1 7	SBEST	JS O	TI	ROL	<u> </u>
X DOL Amendment		_	Frankl	lin Towr	ship, N	NJ 0887	73		!.!:	75		101	\$40
Emergency (justification) DCA Cancellation	nciuaing		Name of	f Contact				Tel	ephone Nu	umber		-	
DCA Cancellation			Joe D	ePascal	e								
Name of Facility William Alexander 11 Table		2)	FACI	LITY INFO	ORMATI	ON							
Name of Facility Where Abatement is Taking	Place (3)					Type of Facil	ity (4)					
Street Address 607 Somerset Street							School Subcha Other (i. etc.)	oter 8 (Oth	er than K- & commerc	12) cial buil	dings	, hom	es,
City (5)							Square Feet	# 0	f Floors	100	Bldg. A	-	
Franklin Township							8014	1			-/-45		
County (6)			County (Code (7) USE ONLY	1		Current Use		ing demolis	shed)			-0-10
Somerset			5)				repair gara						
Name of Monitoring Firm Hired by Building C Environmental Consulting Inc	wner (8)	ASCN	I No.			of Abatement ON Environ						
Street Address			*			Street	Address						
2002 Renaissance Blvd, Suite 110						150 (Glenwood [rive					
City, State, Zip Code							ate, Zip Code						
King of Prussia							nington Cro	ssing, Pa	A 18977				
Project Manager for Monitoring Firm			Telephor				one No.		License	No.		72-92	4.1
Richard Werner				79-7070			313-7427		01225				
Start Date (10) 8/9/2016	8/15/2		npletion [Date (11)		1910/95/05 0000	of OSHA Mon	tor					
Occupancy Status During Abatement (Check						same							
	1857/1					Street	Address						
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe:	eriod of al Facilit	Abater y Hour	nent s			City, St	ate, Zip Code		10-0-1-1-1				
Scope of Work (Check All That Apply)	-												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	X	Renova Demoli	ation tion		<u>(i)</u>	×	Full Contai Mini-Enclos Glovebag F Non-Exem	oure Procedure				e	
	Is	Locat	ion								100	ement	
Location of		Norma			Des	scription	of			-	1)	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole aintena todial ((12)	nce/		thermal surface			(5	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A									te	
Front office areas			Х			tile/ma		36	89 SF	Х			
Second Floor apartment bathroom			Х		Linole	eum/ma	stic	2	7 SF	x			
Front service bays			×		Expar	nsion c	aulk	25	50 LF	х			
Middle Storage/office area			X		Lin	noleum		10	00 SF	x			
Name of Registered Waste Hauler		N	JDEP W	aste	Cubic '				red Landfi	5/9/			
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State of New Jersey

Disposal Date

Signature

TBD

Title

V.P.

City, State

Paterson NJ

Completed by

Goran Igev

07/20/16

City, State

Morrisville PA

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMEN

(Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) LJH Landscaping July 26, 2016 Street Address Agencies Notified Type of Notification 23 Waterline Road [x] EPA Initial Notification ASBESTOS CONTROL & Amended Notification DEP City, State, Zip Code LICENSING Amendment # DOL Toms River, NJ 08753 [X] Emergency (including [x] DOH justification) Telephone Number Name of Contact] DCA Cancellation Larry Hanneman FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Residence School (k-12) Subchapter 8 (other than k-12) Street Address Other (i.e., private & commercial buildings, homes, etc.) Bldg. Age # of Floors City County (6) County Code (7) Square feet (STATE USE ONLY) 65 1500 sf Current Use (Prior if being demolished) Ocean Gate Ocean Residence Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Guardian Contracting, Inc. Guardian Contracting, Inc. Street Address Street Address 1889 Route 9, Unit 61 1889 Rte. 9, Unit 61 City, State, Zip Code City, State, Zip Code Toms River, New Jersey 08755-1271 Toms River, NJ 08755 Telephone Number Telephone Number License Number Project Manager for Monitoring Firm 732-349-9932 00624 732-349-9932 Nicholas Fernicola Scheduled Completion Date (11) Name of OSHA Monitor Scheduled Start Date (10) 7/27/16 E.M.S.L. Analytical 7/26/16 Occupancy Status During Abatement (Check only one) Street Address 1056 Stelton Road Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe Piscataway, New Jersey 08854 [x]Full Containment with Negative Pressure Scope of Work (Check all that apply) Mini-Enclosure Glovebag Procedure [x] >3 sf or ≥3 lf [X] Renovation ≥160 sf or ≥260 lf Demolition Non-Exempted (*) and Non-Friable Procedure Abatement Type Description of Is Location Asbestos-Containing Amount Normally used Location of E E N N Material (ACM) (Specify SF Asbestos-Containing Material (ACM) Solely by C C P M Maintenance/Custodial (i.e., thermal systems or LF) A A L TO BE ABATED 0 P in facility Staff insulation, surfacing, 0 V S S R (12)VAT, or (13)U IJ other miscellaneous) A R YES NO N/A L E 150 sf X Asbestos duct wrap Basement X Cubic Yards of Waste Name of Registered Landfill Name of Registered Waste Hauler NJDEP Waste Hauler ID No. T.R.R.F. 20223 Guardian Contracting, Inc. Disposal Date City, State City, State 7/28/16 Tullytown, Pennsylvania/ Toms River, New Jersey Date Completed by (Print or Type) Title Signature 7/26/2016 Nicholas Fernicola Project Manager *Do not use this form for asbestos licensure exempted activities.

CK 6762203572)

Date of Notification (1) 07/25/2016				Name of John F	Building (Owner/O	perator	(2)		Jl	JL 2 9	9 20	16		
Agencies Notified EPA DEP DOL	Type Notification Initial	#			te, Zip Co		0		LA		TOS C		ROL	&	
× DOH DCA	Emergency (justification) Cancellation	including	1		Contact					Tele	phone Ni	umber			
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City (5) Maplewood								Square N/A		# of N/A	Floors		3ldg. / N/A	\ge	
County (6) Essex					Code (7) JSE ONLY)		_	Current House	Use (Prior	if bein	g demoli	shed)			
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Project Manager for Mon			Γelephor				ione No. 345-868	35		License 01311	No.				
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Completed by Oliver Hegedis		Title Proje	ct Ma	nager		S	ignature				1 2	Date 07/25/	2016	**(

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Page	Date of Notification (1) 07/25/2016						Owner/Op	perator	(2)			JUL	2 9 2	2016	.1	
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Other (i.e. private & commercial buildings, homes, etc.) Square Feet																
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Union STATE USE ONL*)										re Feet	100000		1 100	121630	ige	
D&S Abatement, Inc. Street Address Street Address 11 Rosengren Avenue City, State, Zip Code Totowa, NJ 07512 Telephone No. 973-345-8685 01311 Start Date (10) 08/06/2016 Scheduled Completion Date (11) 08/06/2016 Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Periomed Outside of Normal Facility Hours Other – Describe: Occupied Other – Describe: Occupied Totowa, NJ 07512 Renovation Demofition Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (1) and Non-Friable Procedure Asbestos-Containing Material (ACM) 10 BE ABATED In Facility (13) Is Location Normally Used Solely by Maintenance/ Custoidial Staft? (12) Yes No N/A Garage X Duct Insulation 75 SF X Name of Registered Landfill Waste Management of PA Date Tible Totowa, NJ Completed by Tible Direct Manager Tible Totowa, NJ Completed by Tible Totowa, NJ Completed by Tible Totowa, NJ Completed by Tible Totowa, NJ Totowa, NJ Tible Tible Totowa, NJ Tible Tible Tible Totowa, NJ Tible Totowa, NJ Tible Tible Totowa, NJ)	_			or if be	ing demol	ished)			
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Oliver Hegedis Project Manager 07/25/2016	Completed by		Title					gnatuté	1/1	/			Date			
ASB-41 (R-06-08) Do not use this form for asbestos licensure exempted activities.	Oliver Hegedis		100000000000000000000000000000000000000	ect M	anager			#	//			1.39		2016		
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	unty (6) nion					Code (7) USE ONLY			Current House	Use (Prior	r if bein	g demo	lished)			
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	rt Date (10) /09/2016		Schedul 08/10/		pletion	Date (11)		100000000000000000000000000000000000000	of OSHA	Monitor nent, Inc							
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	npleted by er Hegedis		Title Proje	ect Ma	nager		5	Signature	d	_			Date 07/25	5/20	016		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Print Form

1-		NOT	TFICATIO	State of I ON OF At nt to NJA	SBESTO	SABATE	MENT 0)	(a)	EG	E	İt	V	E 1
Date of Notification (1) 7/26/16			Name The	of Buildin Salvatio	ng Owner	/Operator	r (2)		JU		9 2	<u>ノ</u> 016	26
Agencies Notified Type Notificati	on			t Address West N		ad							
DEP Amended Amended	ent#		City, S	State, Zip t Nyack	Code				ASSEST		SUN EDV)L &
□ DOH □ DCA □ Emergen- □ justificatio □ Cancellat	n)	ng	Name	of Conta	ct			Te	elephone N	lumbe	er		
Nigge of Facility Lea				CILITY IN	•	TION							
Name of Facility Where Abatement is Ta Street Address 438 Mulberry Street	king Place	(3)					Type of Facilit School (K Subchapt Other (i.e etc.)	(-12) ler 8 (Oth	ner than K & comme	-12) rcial b	uilding	s, ho	mes,
City (5) Trenton							Square Feet 3000	# 0	of Floors		Bldg.	Age	Page 1
County (6) Mercer				Code (7			Current Use (F	rior if be	ing demol	ished)			
Name of Monitoring Firm Hired by Buildin	g Owner (8)	ASC	CM No.		Name ABS	of Abatement C Environment	ontractor	r (9) rices, LL				
Street Address	ity, State, Zip Code						Address ox 483, 4 E						
200						tate, Zip Code wood, NJ 07	418					and the first of the second	
Project Manager for Monitoring Firm			Telepho	one No.		Teleph	one No. 764-2276		License	No.			
Start Date (10) 8/5/16	10/5/	16	mpletion	Date (11)		of OSHA Monito	r	1.00				
Occupancy Status During Abatement (Che	ck Only C	ne)				Street /	Address						
Facility Closed/Vacated During Entire Abatement Performed Outside of Not Other – Describe:	Period of mal Facili	Abate ty Hour	ment rs			City, St.	ate, Zip Code				-	-	· · · · · ·
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greate floor - real staircase		X		pipe	e fittings	8		10	×				
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Name of Registered Waste Hauler Freehold Cartage		JDEP Wa		Cubic Y		Name of I	Registere	ed Landfill			na termen		
City, State		5939		TBD		Westerr	n Berks	Landfill					
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Date of Notification (1) 7/11/16 & 7/26/16				Name	of Buildin	g Owr	ner/Operato	or (2)			<u>(C</u>	L 2) a	20	16	
Agencies Notified	Type Notification	1		1	t Address	0118	110111		-	<u>U : </u>	JU	L C	J	LU		
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Name of Facility Where	Abatement is Takin	ng Place	(3)	FA	CILITY IN	FORN	IATION	Type	of Facility	(4)						
Temple Beth Shalo	om		*****					П	School (K-	(A) (B)						
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Essex				(STATE	E USE ONL	y) _		Julia	011 000 (11	ioi ii belli	g demo	лынеи).			
Name of Monitoring Firm	Hired by Building	Owner (8)	ASC	CM No.		Name ABS	of Aba Envi	atement Co ronmenta	Contractor (9) ental Services, LLC						
Street Address								Addre Box 4		E Gate Drive						
City, State, Zip Code						City, S	City, State, Zip Code									
Project Manager for Mon	itoring Firm		Talast	>1				I, NJ 074	18							
VA 1944	morning i min			Telephone No. Telephone No. 973-764-2276						License No. 703						
Start Date (10) 7/20/16 & 8/4/16		9/30/1	6	mpletion Date (11) Name of OSHA Monit					HA Monitor							
Occupancy Status During	g Abatement (Chec	k Only O	ne)	Street Address					SS							
Facility Closed/Vaca Abatement Performe X Other - Describe:	ated During Entire I ed Outside of Norm	Period of nal Facility	Abater y Hour	ment rs City, State, Zip Code												
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≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	1973. 3469			Mini-Encl					ii-Enclosure vebag Prod	ontainment with Negative Pressure nclosure pag Procedure exempted (*) and Non-Friable Procedure						
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Location Asbestos-Containing I	of		Normal d Sole			I	Description	of						Тур	e	
TO BE ABA In Facilit (13)	TED	Ma	intena todial S (12)	nce/	Asbes (i.e.	therm	ontaining Mal nal systems facing, VAT r miscelland	insula I, or	eterial (ACM) A insulation, (S , or SF		ount ecify r LF)	Kemoval		Repair	Encapsulate	Enclosure
3980x-70-000		Yes	No	N/A								<u>m</u>			late	IГе
mezzani	ne			Х		р	ipe fitting	S		8 L	F	×	-	+		
ground flo	oor			X		р	ipe fitting	IS		8 L	.F	x	+			
ground floor (driv	ground floor (driveway side)					sulat	ion & ma	stic o	n foam	80 3	SF	x	+			
	ground floor (east side)				foam in	sulat	ion & ma	stic o	n foam	80 9		x	+	+		
1.07				JDEP Wauler ID	/aste	Cub	ic Yards		Name of F							-
15					No.	of W	/aste)		Western							
City, State reehold NJ					Disposal Date City			City, State Birdsboro, PA								
Completed by Coott Higgins	ed by Title						Signature			-, 1 /		ate	6 6	710	614	
\$270 A			SALAN MARKET	Ne Al							1	/11/1	0 8	x //2	0/1	0

CK 1426	0	ı			OF ASB to NJAC				Į.	[2]	G Pa Fr		Ñ.		
Date of Notification (1) JULY 28, 2016				Name of ERIN	f Building MULLN	Owner/0	Operator	(2)		1.7.		5 U	19	Į.	
Agencies Notified	Type Notification			Street A	ddress						JUL 2	9	2016		-
DEP DOL	Initial Amended Amendment Emergency	including		WEST	ate, Zip Cα ΓFIELD, f Contact		090			AS	BESTOS LIÇE	CON	ITRO)L &	
DOH DCA	justification) Cancellation				H RAPL	JANO				1					
Name of Facility Where		g Place (3	3)	FACI	LITY INF	ORMATI	ON	Туре	of Facility	(4)					
MULLMAN PROPE	ERTY							\ <u>\</u>	School (K- Subchapte Other (i.e. etc.)	r 8 (Othe			dings,	hom	es,
City (5) WESTFIELD									are Feet 00 SF	# of 2	Floors		8ldg. <i>A</i> 1980		
County (6) UNION					Code (7) USE ONLY)			ent Use (Pri SIDENCE		ng demolisi	ned)			
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCN	/ No.				atement Co Touch As			ent C	Corp.	,Inc.	5
Street Address							Street 17 T		ess pson Stre	et					
City, State, Zip Code									Zip Code ng Branch	n, NJ 0	7764				
Project Manager for Mor N/A	nitoring Firm			Telepho	ne No.		Teleph 732.	none N 222.8			License N 00040	0.			
Start Date (10) AUG.8, 2016		Schedul AUG.			Date (11)		Name N/A	of OS	HA Monitor						
Occupancy Status Durin	g Abatement (Chec	k Only Or	ne)				Street	Addre	ss						
Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire I ned Outside of Norm	Period of an all Facility	Abaten y Hours	nent s			City, S	state, Z	Zip Code						
Scope of Work (Check A	All That Apply)							-							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Commence of the last of the la	Renova Demolit				Ž	Mi	II Containm ni-Enclosur ovebag Pro	e cedure	::::::::::::::::::::::::::::::::::::::				
		Is	Locat	ion				_ INC	n-Exempte	o (*) and	Non-Friat	ne Pro	Abate	emen	t
Location Asbestos-Containing TO BE AB In Facil (13)	Material (ACM) <u>ATED</u> lity	Use Ma	Normal ed Sole iintena todial ((12)	ely by nce/		tos Cont thermal surfa		Materia s insul .T, or	ation,	(S	mount pecify or LF)	Removal	Repair	e Encapsulate	Enclosure
BASEM	FNT	Yes	No	N/A X			VAT			55	0 SF	X		CD .	
D/ (CEV)							7/11					Α			
Name of Registered Was Finishing Touch Asb		nt Corp.	пle	JUDEP W Hauler ID 2058		of Was 2 Cy			TRRF	LAND	red Landfill FILL				
City, State WEST LONG BRAN	NCH, NJ 07764					8/10/	sal Date 16		City, Stat	YTOW	N, PA				
Completed by JOSEPH P. MILLER	?	Title PRE	SIDE	ENT		S	gnature		Dle		Da 7.	te /28/1	6		
						(7 1								

CHECK # 5897

Date of Notification (1) 07-25-16				f Building ort Auth						E	G	5		V [5,11	
Agencies Notified Type Notification			Street A Newa	ddress rk Libert	y Inter	nationa	l Air	rport, Blo	dg. 125	, Cent	ral Te	rmi	nal./	rea	A CONTRACTOR	
EPA Initial Amended Amendment:				ate, Zip Co rk, NJ 07						1	1111	2 3	1 2	<u> </u>		
Emergency (i justification) DCA Emergency (i justification) Cancellation	ncluding			f Contact A. Volpe			. 0		Te	eplon	:Num	@rC	ON	RO	. &	
			FACI	LITY INFO	DRMAT	ION										
Name of Facility Where Abatement is Taking Newark Liberty International Airport		3)					Тур	e of Facili								
Street Address							Н	School (I Subchap	ter 8 (Otl				Water Steel	\$20 CASES		
3 Brewster Road							×	Other (i.e etc.)	e. private	& comr	nercial	build	dings	home	es,	
City (5) Newark								are Feet 0,000	# (of Floors	S	9000	ldg. A 8 yrs	_		
County (6) Essex				Code (7) USE ONLY,				rent Use (port	Prior if be	ing den	nolishe	ed)				
Name of Monitoring Firm Hired by Building C The Port Authority of NY & NJ	wner (8)		ASCN N/A	/ No.				eatement (Environ								
Street Address 241 Erie Street							Address Broad Street									
City, State, Zip Code Jersey City, NJ 07310							City, State, Zip Code Carlstadt, NJ 07072									
Project Manager for Monitoring Firm Ralph Campione	Telephone No. 973-622-0800					hone No. License No. -939-6565 00756										
Start Date (10) 08-08-16	Schedul 09-08-		completion Date (11) Name of OSHA Monitor Even-Air Inc.						or							
Occupancy Status During Abatement (Check	Only Or	ne)				Street A	Addr	ess								
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm. Other – Describe: Abatement will be co	al Facility	/ Hours	City, State, Zip Code							101						
Scope of Work (Check All That Apply)			Long Island City, I							101						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoliti				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure					ıre					
	Is	Location	on					опъхопр	100 () 41	14011	- Hubic		Abate	ement		
Location of		Normalled Solei				scription					-		Ту	pe		
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma Cus	intenar todial S (12)	ice/ staff?		Containing Material (ACN mal systems insulation, urfacing, VAT, or ner miscellaneous)			(Amount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure		
Exterior: North Manifold Fuel Lines	Yes	No	N/A X	Tar	Overe	ed Pipe	Inei	ulation	-	250		x		5000		
Exterior: Building 120 Fuel Lines			X	100000		ed Pipe		702 (202 SOURCE)		85		x	e mare			
Exterior: T A Fuel Intersection			X			ed Pipe			+	166	-	x				
Ext.: Terminal A 1 Fuel Connection			X			ed Pipe				302		x			-	
Name of Registered Waste Hauler		N.	JDEP W			Yards			of Regist	SOMEON	ndfill	-				
ATC, Inc. / JBT (50071) Hauler ID No. 24310					Cubic Yards Name of Registered Landfill of Waste TBD Minerva Enterprises											
City, State Shirley, NY / Bronx, NY					Dispo TBD	sal Date		City, Si Wayn	tate iesburg	, OH 4	14688	82				
Completed by Raymond Kinsella	eted by Title															

Title Of Project: Newark Liberty International Airport Additional Materials / Floors

Pg. 2

Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)	Is Location Normally Used Solely by Maintenance or Custodial Staff? (12)	Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)	Amount (Specify Square Feet or Linear Feet)	Abatement Type (Specify: Removal, Repair, Encapsulation or Enclosure)
Ext.: Terminal A2 Fuel Connection	N/A	Tar Covered Pipe Insulation	82	Removal
Ext.: Terminal A3 Fuel Connection	N/A	Tar Covered Pipe Insulation	100	Removal
Exterior: Main Connection	N/A	Tar Covered Pipe Insulation	1136	Removal

JUL 2 9 2016

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Date of Notification (1)			N	ame of	Building (Owner/Operator (2)	BTC	116			
7	126/16		-					SPTS 25	2016			-
Agency Notified	Type Notification		S	treet A	ddress	ULLES	TARIE	_	6			
□ EPA	@ Initial		-	l	8 D	JULIES	Drave	EDECTOR OF	ONTO	N!		
DEP	☐ Amended Amendment#		0	aly, Sta	te, Zip Co	i) T A	15 27	SBESTOS CO	UNITE	1		
Z DOL	Emergency (includ	ing	_		Contact	21. 1		Telephone Name	hor			
Z DOH	justification)				BAU	EV.						
DCA	☐ Cancellation					RMATION						-
		- /64		FACIL	II T IRPOR	TOTAL STORE	Type of Facility	(4)				
Name of Facility Where							75 (2)					
DUHOUT	TEVRACE.	AV	13	1-10			School (K-12)) (Other than K-12)	, -			
Street Address	- 1	22 (2011)		500		: .	Differ (i.e. pri	vate & commercia	l buildings	s,		
18 D.	JLLES DA	NE					homes, etc.) Square Feet	# of Floors	Bldg. A	ae		
City (5) .	1-1-		- /	7		·	7000 .		68		5	
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County (6)	- 1		- 1	OUTING ONLY)	Code (7) (STATE USE		DENCE A				
						Name of Abatem			.,	10.00	-	_
Name of Monitoring Fire	m Hired by Building Own	ier .	ASCM I	NO.	- 1							
(8)						Best Ren Street Address	noval in	C			-	
Street Address							h Diron	C+				
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City, State, Zip Code						Hackensa		07601				
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Project Manager for Me	onsoning ram	16	ephon	e No.		201-329-	7444 -	00388				
Start Date (10)	Scheduled	Complet	ion Dat	2 (11)	-	Name of OSHA I						
8/5/16	8	18	16			Omega H	Chvironm	ental				
	ing Abatement (Check o	nly one)	, -			Street Address						
5354455600 p511	ted During Entire Period			51		.280 Hu	ıyler St					
☐ Abatement Performs	ed Outside of Normal Fa	citity Ho	UTS	204	Γ	City, State, Zip C						
E Other - Describe: &	3:00 PH_10 2:	22 KI	4			S. Had	ckensack	,N.J. 07	600			_
Scope of Work (Check	all that apply)					-Zi Full (Containment with	Negative Pressur	e			
Ø23 stor≥3 #					ovation	Z Mini-	Enclosure ebag Procedure		O*			
☐ ≥ 160 sf or ≥ 260 ff				□ Dem	ONDOR	□ Non-	Exempted (") an	d Non-Friable Proc	cedure			
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			Normali			D	-e	1			1	T
	tion of ing Material (ACM)		ed Sole		Asbes	Description of tos Containing Ma	atterial (ACMI)	Amount	Ī	2	_	Encapsulate
TO BE	ABATED		Custodi	al	fie.	thermal systems surfacing, VAT	insulation.	(Specify SF or LF)		em	Rophir	adac
	facility . 13)	1	(12)			other miscellan				Removal	=	ula l
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Best Rem	laste Hauler		No.	Vaste I	fauler	Waste 3 e 7	W 80 80		ises	,	LI	ıC
Best Rem	daste Hauler oval Inc	IE	No. 17		fauler	Waste	Minerv City, State		,446			ıC
Best Ren Cay, State Hackensa	laste Hauler	IE	No. 17		fauler	Waste 3 e7 Disposal Date 8 9 1 6 Signature /	Minerv Cmy, State Wayne	a Enterpr	, 446	88		
Best Rem	ck , N.J. 0	7601	No. 17	109		Waste 3 e7 Disposal Date 8 9 1 6 Signature /	Minerv City, State Wayne	a Enterpr	, 446	88		

Check# 2949

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

GAC Project # 060-16 Date of Notification (1) Name of Building Owner/Operator (2) July 26, 2016 RUTGERS, THE STATE UNIVERSITY OF NJ Agencies Notified Notification Type Street Address ENVIRONMENTAL HEALTH & SAFETY DEPT. 2016 ☑Initial Notification DEPA ☐ Amended Notification # 27 ROAD 1, BLDG 4086, LIVINGSTON CAMPUS DDCA ■ Emergency (including City, State, Zip Code ASBESTOS CONTROL & X DOL PISCATAWAY, NJ 08854 justification) LICENSING ☑ DEP- No Longer REQUIRED Telephone Number Name of Contact □Cancelled X DOH MICHAEL SMITH, ENV. **HEALTH & SAFETY** FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) MEDICAL SCIENCE, BLDG# 7257 School (K-12) ☐Subchapter 8 (other than K-12) Street Address ■ Other (i.e. private & commercial buildings, homes, etc.) RBHS NEWARK CAMPUS Sq. Feet: N/A # of Floors: 8 Bldg. Age: 70+ years County (6) County Code (7) **NEWARK** (State Use Only) **ESSEX** Current Use (prior if being demolished): ACADEMIC Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC 0098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 268 MAIN STREET City, State, Zip Code City State, ZipCode BURLINGTON, NJ 08016 BUTLER, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number **BRIAN KEARNY** 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 08/05/16 08/08/16 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☑Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD ☐ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe ☑Other - Describe: Schedule: 5PM - 5AM (24 HOURS & WEEKENDS AS NEEDED) FAIRLAWN, NJ Scope of Work (Check all that apply) ■ Full Containment with Negative Pressure □ > 3 sf or > 3 If □ Renovation ■ Mini-Enclosure ≥ 160 sf or > 260 lf ☐ Demolition ☐ Glovebag Procedure / Wrap & Cut Non-Exempted (*) and Non-Friable Procedure Description of Asbestos Containing Material Location of Asbestos-Containing Is Location Normally Used Amount Abatement Type Material (ACM) in Facility (13) Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Remove Repair Encap Enclose Staff? (12) VAT, or other miscell.) or LF) YES NO NA C638 X VAT 300 SF X Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Name of Registered Landfill Cubic Yards of Waste: 15 CY See Hauler Below #1 & 2 See Below G.R.O.W.S. North Landfill Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City. State 100 New Ford Mill NJDEP # 12561 08/08/2016 Hauler #2) Newark Carting, Inc., Newark, NJ 04509 Rd. Morrisville, Pa 19067 NJ DEP# 4509 215-736-1700 Completed by (Print or Type) Date RAYMOND C. PEDALINO SENIOR PROJECT July 26, 2016 Raymand C. Pedalino MANAGER

CK 3177

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

				(Pu	ırsua	nt to NJ	AC 8:	:60 and 5:1	6)		<u> </u>	<u>B</u>	<u>U</u>		5.,	
Date of Notification (1)	7				Name	e of Buildin	ng Ow	ner/Operator ((2)							
_ 7 /	25 /	16						yterian Chu			JUL	29	20	16		
Agencies Notified	Type Notific	ation	77		Stree	t Address				1 - 1	100,000,000				1/h	
⊠ EPA						2 E. Mant	tua A	venue					-		1	
□ DOLWD	☐ Amende					State, Zip		Veride		ASE	EST C	15 (3) 15 (3)	DIVE	301	_ Ö.	
⊠ DOH	Amendm	The second second	_			enonah, N		090	- 24			21.12	9.173			
DCA (NJAC 5:23-8)	☐ Emerger justificat		ing			e of Contac	130.00			Telephoi	no Nium	hor				
(110/10/3.20-0)	☐ Cancella				10.935/Stationed	ck Hart	-	1 2		releption	ne muni	Dei				
					FA	CILITY IN	NFOF	RMATION								
Name of Facility Where	Abatement is	Taking Pla	ce (3	5)					Type of Facility	(4)			-			
Memorial Presbyte	rian Church	า							School (K-1							
Street Address									Subchapter	8 (Other th	an K-12)				
202 E. Mantua Ave	nue								homes, etc.		ivate and commercial buildings,					
City (5)									Square Feet	# of Flo	ors	B	dg. A	ne.		
Wenonah									20,000	2		-12	80	90		
County (6)					Cou	nty Code (7)(STA	TE USE ONLY)	Current Use (P	rior if being	demolis	shed)				
Gloucester									Church	3		0.				
Name of Monitoring Firm	Hired by Buil	ding Owne	er (8)		ASCM	No.	Nar	ne of Abatem	ent Contractor (9)						
Mgmt. & Environm	ental Consu	ılting Ser	vice	s					onmental, LLC							
Street Address							Stre	eet Address								
PO Box 341							6	23 Cutler A	venue							
City, State, Zip Code							City	, State, Zip C	ode							
Chesterfield, NJ 08	515						IV	laple Shade	NJ 08052							
Project Manager for Mon	itoring Firm		T	Tele	phone	No.	Tele	ephone No.		License	No.			1-0-/		
Bill Weisgarber				60	9-298	3-4070	8	56-755-0099	0084	00842						
Start Date (10)		Scheduled	Com	plet	tion Da	ate (11)	Nan	ne of OSHA N								
08 /22 /	16	08	1_	26	_ /	16	E	MSL Analyt	ical, Inc.							
Occupancy Status During	g Abatement (Check onl	y one)			Stre	et Address				-	-			
□ Facility Closed/Vacate							20	00 Route 13	0 North							
Abatement Performed	d Outside of N	ormal Fac	lity H	our	s - Des	scribe	City	, State, Zip Co	ode							
Time of Abatement: _	AM	PM/	F	PМ		_AM	С	innaminsor	n, NJ 08077							
Scope of Work (Check al	I that apply)						-									
≥3 sf or ≥3 If		M	Reno	vatio	on			☐ Full Cont ☐ Mini-Enc		th Negative Pressure						
≥160 sf or ≥260 lf			Demo						Procedure							
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1000			Is Lo					220 200 200				Ab	ateme	ent T	уре	
Location Asbestos-Containing		n U			ly by	Ashe	etne (Description of Containing Ma	9	Amoi	unt	Re	Re	En	En	
TO BE ABA	TED	P	lainte	-	200000000000000000000000000000000000000		., ther	mal systems	insulation,	(Spec		Removal	Repair	cap	clos	
IN Facili (13)	ty			12)	Staff?			urfacing, VAT, er miscellane		SF or	LF)	/a		Encapsulate	Enclosure	
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Freehold Cartage	to i ladioi			Ha	auler II	O No.	Was		100	of Registered Landfill nberland County Landfill						
City, State			-		15939	7	5 Disp	osal Date	City, State							
Freehold, NJ							3/26/2016	Newburg,	PA							
Completed By (Print or Type) Title							T	Signature			Da	te			_	
Christina Lynch								() Shah	(0)	7/2/11						
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ASB-41 JAN 13

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

07/25/2016 12:30

CK 3171	P	H	IOTI	7 (300.00)			BESTOS ABAT AC 8:60 and 5:1		L. see	JUL	2 9	20	16
Date of Notification (1)	22 /	16				of Bulldin	g Owner/Operator ((2)	ASBI	ESTO:	S C	- 15	त्रिंग
Agancies Natified	Type Natifica	allon'			Street	Address		1.1 (a)		-	16.	1	
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(NJAC 5:23-8)	LI Cancellat				1		erana (Com		1.0.0	2.7			
	☐ Canoellat	lipli				hael Wo	FORMATION	1 1000		_	_	0	
Name of Facility Where	Abatamant la T	FULL S	Diaca	121	PA	CILITY	AFORMATION	Type of Facility	(4)		-	_	
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Street Address			-	_				- Subchapter	Other than K-	12)			
	Estati							Olher (I.e., p		marcial bi	allding	JI,	
1 Medford Less Wi	ny			_				homes, etc.		75.			-
City (B)								Square Feet	d of Floore	1	dg. A	96	
Medford								10,000	1		80		
County (8)					Саш	nty Code (7)(STATE USE UNLY)	Current Use (Pr	for it being demo	olluhed)			
Burlington	14								Community				
Name of Monitoring Firm	Hirad by Build	ding Ow	VMBF (8)	ASCM	No.		ent Contractor (9)			- 15 to 15		
Mgmt & Environm	ental Consul	Iting S	iervi	COB				onmental, LLC					
Street Address							Street Address						25,022,039,039
PO Box 341	owner contracts 1.7						823 Cutler A					- 1	
Chy, State, Zip Code	2000000000						City. State, Zip C						
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Project Manager for Mor	illoring Firm				ephane 09-298		Telephone No.	a	License No.				
Bill Weisgarber	10	Schedu	last C			-	Name of OBHA		, 1 000-22		_		
					1 /		EMSL Analy						
Occupancy Slatus Durin					4411(1)	110011	Street Address			*			
Fecility Closed Nacet	ed During Entir	re Perio	od of	Abate	ment		200 Route 13	10 North					
Abatement Performer Time of Abatement:	d Outside of No AM	omal F PM/	nellit	Hou_PM	ra - Del	AM	City, Sizie, Zip C		7				
Scope of Work (Chack a	Il that apply)												-
	, , , , ,			10				tainment with No	gative Pressure				
≥3 of or ≥3 if ⇒160 of or ≥250 if			Re De					g Procedure					
		Sinc.			1		☐ Nan-Exe	empled (*) and No	n-Friable Proce	dure			
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	e of Notification (1)			1000		Building C			(2)	1	Ult						- ; ;
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Sco	pe of Work (Check Al	That Apply)															
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S) 13								×		lovebag Prod lon-Exempted		d Non-Fri	iahle	Prod	edur	<u> </u>	
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Date of Notification (1) 7/26/16			100		Building C hip of W	Owner/Operato Vall	r (2)			5 6	7	3 1	W	5	
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				· FACIL	LITY INFO	RMATION									
Name of Facility Where		Place (3)				Ty	pe of Facility	(4)						
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Street Address							X	Subchapte Other (i.e.				build	ings,	nome	s,
1900 Baileys Corn	er Ra						-	etc.)	1 # 04	Floors			da A	10	
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Name of Monitoring Firm	n Hired by Building C	wner (8)		ASCM	No.	The second of the		Abatement C		35000					
n/a.				n/a		1 535599		ny Contrac	cting ind	· 					
Street Address						10.70		ldress alisade Ave							
n/a								e, Zip Code							
City, State, Zip Code						- S		d, NJ 0702	26						
Project Manager for Mo	nitoring Firm			Telephor	ne No.			e No.		Licens	e No				_
n/a				n/a		- ANSESSE		0.6026		0125	5				
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7/27/16		8/2/16			XC X=X	Ha	rmo	ny Contrac	cting Ind	2					
Occupancy Status Durin	ng Abatement (Check	Only Or	ne)					ldress							
	cated During Entire P					10000		alisade Ave	9						
Abatement Perform Other – Describe:	ned Outside of Norm	al Facility	/ Hours					e, Zip Code Id, NJ 0702	26						
Scope of Work (Check A	All That Apply)						11101	10, 140 07 02							
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Name of Registered Wa	iste Hauler		l N	JDEP W	/aste	Cubic Yards		Name	of Registe	ered I ar	ndfill		Market	Second Second	
The same and the s	iste i lautei		H	lauler ID	No.	of Waste		TBD	o. 1 togisti						
Weigle Trucking			S	W2912	2	TBD									
City, State Linden, PA						Disposal Da	te	City, S	tate						
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Tina Caporino		0.000000	retary			Time	Con	(boine		v	7/2	26/1	6		