MO 69504577989

Date of Notification (1)			Building (Owner	/Operator	r (2)		2	975							
07/24/15				Gary F						e j	113 . 11	j n				
1,000	Notification		- 1	Street Ar 172 W	ddress Ivy Lan	е					15.4		,	W s	1- 00	
X DEP X DOL	Initial Amended Amendment #				te, Zip Coo		31								4,3 6	,
X DOH	Emergency (ir justification) Cancellation	ncluding		Name of	Contact					Tele	phone	Numl	ber		-/_	
				FACI	LITY INFO	RMA	TION									2000
Name of Facility Where Abatem Gary Hodge	nent is Taking	Place (3)						Ту	pe of Facility (4	100						
Street Address 172 W Ivy Lane								×	Subchapter Other (i.e. p	8 (Othe				lings,	home	es,
City (5) Englewood					17		Octobra de la constanta de la	Sq	etc.) juare Feet	# of	Floors		В	ldg. A	ge	
County (6) Bergen County				County (Code (7) USE ONLY)			Cu	urrent Use (Prio	r if beir	ng demo	olishe	ed)			
Name of Monitoring Firm Hired	by Building O	wner (8)		ASCM	No.	****			Abatement Con atement	tractor	(9)					
Street Address							Stree 100		dress 7th Street Su	uite A	4					
City, State, Zip Code			2-1-1-1				18000		e, Zip Code Bergen, NJ 0	7047						
Project Manager for Monitoring	oject Manager for Monitoring Firm						Telep	hone			Licens 0122					
Start Date (10) 08/05/15	d Com	pletion (Date (11)		Name	e of C	OSHA Monitor	I TINO								
Occupancy Status During Abate	ement (Check	Only On	e)				Street					. 1 1 2 2 2 2 2		ORIGINAL SECTION OF THE SECTION OF T		
Facility Closed/Vacated Du Abatement Performed Out									OUTE EAST	SUIT	ΓΕ 107	7				
Other – Describe:		-11							NJ 07083							
Scope of Work (Check All That	Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emoliti					×	Full Containme Mini-Enclosure Glovebag Proc Non-Exempted	edure					0	
		ls	Locati	on					Non-Exempled	() and	THOIL	Tiable	, 1 10	Abate	ement	
Location of		l N	ormall Sole	y	500 MA 550		escription	n of				-		Ту	ре	
Asbestos-Containing Materi TO BE ABATED In Facility	al (ACM)	Mai	ntenar odial S (12)	nce/	Asbest (i.e.	therm sur	al system facing, V	ns ins AT, o	or	(S	nount pecify or LF)		Remova	Repair	Encapsulate	Enclosure
(13)		Yes	No	N/A		othe	r miscella	ineoi	19)				oval	음.	sulate	sure
Basement							TSI			9	0 LF		x			
Name of Registered Waste Hau	ller		1.5.3	JDEP Wauler ID		740000000	ic Yards /aste		Name of F							
SAN TON SERVICES	100			2430					MEDOV		CHES	CC	MM	ISIC	N	
City, State KENILWORTH, NJ			5000			Disp	osal Date	е	City, State KEARN							
Completed by Bryan Parra		Title Proje	ct Ma	anager			Signatur	re				Date 07/	e 24/1	5		

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Late of Nutification (1)	127/15	+13	Haili		-THTECH		TING OUL 3		15	
Agencies Notified	Type Notification		Stree	et Address						
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2 00r 22 0eb 2 0bv	Amended		City	State, Zip				-		
₹ DOF	Amendment #		July.		REEN FIE	= L N N) ,	5.			
_ 00n	Emergency (in justification)	cluding	Name	e of Conta			Telephone Num	her		
= 004	Cancellation		Name	1	uce BREL	. 4 . 1	1 Total Total			
	1.					70.0				
			I, FA	CILITY IN	FORMATION					
Name of Facility Where		Place (3)				Type of Facility	(4)			
LES	STENCE					School (K-1		-		
Siteet Address							8 (Other than K-1 private & commerci		inas	
126	00 HARIO	MG	HW	Υ		homes, etc				
1. 15			-			Square Feet	# of Figors		ig Ag	
BU	DNIA VIST	TA -	TWI	2		1500		_ _	0	
Jounty (6)			Cou	nty Code (7) (STATE	Current Use (P	nor if being demoli	shed		
ATL	BRTIC		USE	ONLY)		VA	CANT			
hank of Moniforing Fin		wner	ASCM	No.	Name of Abatem	nent Contractor (9)			
Statement of management and	U/A				V	EMCO I	NC.			
Street Address					Street Address		75.			
Silder Modifess					369	S, S PRUC	E DUT.			
					City, State, Zip C					
: State Zip Code					Mai	PLE SHA	DEINIJ	, 060	: 5- 2	-
		T To	ephone	No	Telephone No.		License No			
Froject Manage: for Mo	onitoring Fimi	1,6	epriorie	140		9-0472	004	44		
Stan Date (10)	/ Sched	uled Compl	etion Da	ate (11)	Name of OSHA	JEPH KI	EMM			
8/6/	115 0	/13	/ (
Docupand, Status Duri					Street Address	C C 0,	204=200.	5.70		
☑ Facility Closed Vaca	ated Dunng Entire Per	10d of Abat	ement			-	700.			
Abatement Performe	ed Outside of Normal	Facility Hou	urs		City, State, Zip C	Code	41		- V	(,
[] Other - Describe						40 LF 2	HODE, N.	٠,		
Supplied Visik (Check	all that apply)				□ EII Co.	ntainment with No	agalius Pressure			
- The state of the	-97-A374	Renova	lim		Mini-En		syauve riensuit			
2.5 5 0 2 1 H 2.1 50 5 1 Ot 2 2 H		Demais			☐ Gloveba	ao Procedure				
1 30 7 0 200 0					□ Non-Ex	empted (*) and N	on-Friable Proced		kbarer	
		Is Local						1.	1 (1)	
•		Normal Used Sole			Description o	ſ		-	1 1	
Location Asbestos-Containing	Majenal (ACM)	Maintena	nce/	Asbes	sios Containing Ma	terial (ACM)	Amoun'			÷ ~
TO BE ABA		Custod		(ı e	, thermal systems surfacing, VAT	insulation,	(Specity SF or LF)	1 8	E	4 1 1
IN Faalr		Staff (12)			other miscellane	ous)	3. 3. 2.	Removal	Repair	ta itraat.
١٤٢.	-	(12)		-				=		
		YES NO	N/A							
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51D1	INU		+/-	-						
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rame of Registered Wa	asie Hauler		NIDEP		Cubic Yards	Name of Reg	gistered Landfill			
/	·		Hauler I		of Waste	A.(1.U, A,	-0.000	1714-2714	
KLames	INC,		1/4	04_	Disposal Date	City, State				
Car State	(NT			Ui3pusai Date	PLE	OSANTVIL	LF	W.	7.
MAPLE	SHADE,	17,7			100000					
Exmplered By	Title	, , , ,	0		Signature	1- 1CP-	Date	77.	115)
JOSEPH	(LEMM)				-1-			7		
		-			V					

Date of Notification (1) July 28, 2015			Building ant Pres		7-1	20.05		Ch	eck # 22	68					
Agencies Notified	Type Notification	C. 11		Street A	ddress						110		- U		
EPA	× Initial				arkway A		9								
DEP X DOL	Amended Amendment		_		te, Zip Co n, NJ 08										
ĭ DOH	Emergency justification)				Contact					Tel	ephone Nu	umber			
DCA DCA	Cancellation	10			erite Dy										
Name of Facility Where	Abatement is Takir	g Place (3)	FACI	LITY INFO	DRMATI	ON	Type	of Facility (4)					
Covenant Presbyte			,						School (K-12						
Street Address									Subchapter 8	(Oth				ook assess	
471 Parkway Aven	ue						35 Q		Other (i.e. pr etc.)	ivate	s commerc	ciai bui	aings	, nom	es,
City (5) Trenton								5,00	re Feet 00	# 0	f Floors	1	3ldg. / 75	Age	
County (6)	1990		-	County (Code (7)			N	ent Use (Prior		ng demolis				
ivlercer				(STATE I	JSE ONLY,			Chu	irch						
Name of Monitoring Firm PARS Environment		Owner (8)		ASCN	1 No.				atement Cont vironment						
Street Address 500 Horizon Drive,	Suite 540							Addre	ss r Avenue						
City, State, Zip Code					-		City, S	State, Z	ip Code	and a second					
Robbinsville, NJ 08 Project Manager for Mor				Telepho	no No				ade, NJ 08	052	I :	Ma			
Firoz Jan	iitoring (iiiii		609-89	90-7277		270000000000000000000000000000000000000	none N 755-0			License 00842	NO.				
Start Date (10) August 5, 2015		Schedule August			Date (11)				HA Monitor alytical, Inc).	2%				
Occupancy Status Durin	g Abatement (Ched	ck Only On	ie)					Addre				6		15010	
Facility Closed/Vac							7.000.000		e 130 North	1	X	Ž.			
Abatement Perform Other – Describe:		nal Facility	Hours	5					ip Code son, NJ 08	077					
Scope of Work (Check A	All That Apply)						Ciriri	allilli	5011, 143 00	1077		-			
≥3 sf or ≥3 If		× R	enova	tion] Fu	II Containmer	nt with	Negative	Pressu	ıre		
≥160 sf or ≥260 lf			emolit	ion			×	Mi	ni-Enclosure ovebag Proce		1000 T 4 70 T 10 T 1				
									n-Exempted		d Non-Fria	ble Pro	cedu	е	
		100	Locati											ement /pe	t
Location Asbestos-Containing			Vormal d Sole	775	Achae	De: tos Cont	scription		LACM	. ^	mount		T	100.00	
TO BE AB	ATED :		intena odial S			thermal	system	s insul		(8	Specify	Re	R	Enca	Enc
In Faci (13)			(12)				cing, VA niscellar			Si	or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A								=		ate	ē
Throughout E	Throughout Basement XX					Pipe	Insula	ation		1(00 LF		Х		
Name of Registered Was	ste Hauler		[N	JDEP W	lasta	Cubic	Varde		Name of R	egists	red Lands	31			
Freehold Cartage	oto i laulei		Н	lauler ID 2265		of Was			Cumberl				II		
City, State		ille some				Dispos	sal Date		City, State	, D^				V - C 1 100	
Freehold, NJ Completed by Title						8/10/2	2.5 200 mm mm/m		Newburg	J, ΡΑ		ate			
Christina Lynch							ignatura A	Dr	20	_		/28/2	015		

Date of Notification (1) July 28, 2015				Building C		perator	(2)	Che	ck # 2269					
Agencies Notified	Type Notification			Street Ad	ddress hird-Ave	enue.	3401	1						
EPA DEP DOL	Initial Amended Amendment	#		City, Sta	te, Zip Coo Deptford,	ie		01						
X DOH DCA	justification) Cancellation	including		Name of	Contact Ahlzadel				Tel	ephone Nun	ber			
				FACII	LITY INFO	RMATI	ON							
Name of Facility Where A	Abatement is Takin	g Place (3)					Type of Facil School (15 186					
Street Address 1792 Third Avenue	Street									er than K-12 & commercia		dings,	home	es,
City (5) West Deptford						: : : - : - : - : - : - : - :		Square Feet 800	# o 2	f Floors	7	ldg. A 5	ge	
County (6) Gloucester				County (Code (7) JSE ONLY)		_	Current Use Residence	•	ing demolish	ed)			
Name of Monitoring Firm Management & Env				ASCM	l No.			of Abatement de Environm						
Street Address PO Box 341								Address Cutler Aven	ue			***************************************		3.02000
City, State, Zip Code Chesterfield, NJ 08	515							tate, Zip Code e Shade, N						
Project Manager for Mor Bill Weisgarber	ect Manager for Monitoring Firm Weisgarber						Teleph	none No. 755-0099		License N	0.			
Start Date (10) August 7, 2015		ed Con		Date (11)			of OSHA Mon L Analytical	270						
Occupancy Status Durin	g Abatement (Chec	•						Address	1					
× Facility Closed/Vac		15		nent			200 1	Route 130 N	North					
Abatement Perform Other – Describe:						_	5-100 0 505 HJB	itate, Zip Code aminson, N						
Scope of Work (Check A	II That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	Renova Demolit				×	Mini-Enclo	sure Procedure	n Negative P				
			750 AX						pted (*) an	d Non-Friab	le Pro	70 KG	e ment	
1 December 1	Dominion of the Control of the Contr	187	Locati Vormal	(T.1.10%)		-						Ту		
Location Asbestos-Containing TO BE AB In Facil (13)	Material (ACM) ATED iity	Use Ma	d Sole intenar todial S (12)	ly by nce/		os Cont thermal surfa		Material (ACM) s insulation, T, or	(3	mount Specify F or LF)	Remova	Repair	Encapsulate	Enclosure
(10)		Yes	No	N/A		other n	inscensi	10003)			/al	=	ilate	ıre
Heater R	Room		XXX			In	sulatio	n	3	30 SF	Х			
Name of Registered Win	ste Hauler		H	IJDEP W lauler ID 2265	MAN SERVICE	Oubic of Was	Yards ste			ered Landfill County La		II		
City, State Freehold, NJ		N+1	10,				sal Date 2015		State burg, PA	\ \				
Completed by Christina Lynch		Title Oper	ation	s Mana	ger	8	1	and	20	Da	te 28/20	015	<i>-</i>	

NO CK

D. L (N-1)(1-1)(1-1)				ner/Operator (2)							
Date of Notification (1)							LOGIES INC.				_
7 / 27 /15 Agencies Notified Type Notifica	tion				t Addr	ess I AVENUE	EAST				
EPA Initial N	lotificatio ed Notific		#7	City,	State,	Zip Code	ERSEY 07016				
X DOH On Hold	BENCY N				e of Co	ontact SMITH		Telephone N	lumber	22	
			FAC	ILITY INFO	RMAT	TION	I=	(4)			
Name of Facility Where Abatement is Ta	aking Pla	ce (3)					Type of Facility School (K-	12)	- K 10)		
ERICSSON LABS								r 8 (Other tha orivate & com		s., ho	mes, e
Street Address							Square Feet 70,000	# of Floor	'S	Bldg. 44	3250
1 ERICSSON DRIVE City (5) County	(6)			Coun	ity Co	de (7)	Current Use (Pri		molished		
City (5) County MIDDLESEX MIDDL						ONLY)	COMMERCIAL			,	
Name of Monitoring Firm Hired by Build	ding Owr	ner (8)			AS	SCM No.	Name of Abater		0.500.5	ION	
ENVIRONMENTAL TACTICS INC. Street Address						17	Street Address	VIENTAL CO	TONAT	ION	
64 BROAD STREET							313 SPOOK RO	CK ROAD			
City, State, Zip Code						£1	City, State, Zip C				
MATAWAN, I	NEW JEF			Number		48	SUFFERN, NEV	A STATE OF S	icense N	lumbe	or .
Project Manager for Monitoring Firm THOMAS GEIGER			90-22				845-369-7500		160	· ·	,
Expected Start Date (10)											
7 / 17 / 15 . Month Day Year	Me	7 onth	/	27/ Day		15 Year	QUALITY ENVIR	RONMENTAL	-		
Occupancy Status During Abatement (Ch	2011/03/03	5.05.45.00		Day		1001	Street Address				
Facility Closed/Vacated During					.42.23		1376 ROUTE 9	W			
Abatement Performed Outside X Other - Describe Monday-Satu						m-3:30pm	City, State, Zip C	Code NGERS FALI	_S. NY 1	2590	
Scope of Work (Check all that apply)					Х	Full Cont	ainment with Neg				
Demolition	Reno	ovation	1			Mini-Enclo					
>3SF OR LF X >160 SF OR					X		Procedure le Procedure				
Location of		Locati		44 225		iption of As					nt Type
Asbestos-containing	9,000,000	mally u				ning Materia Thermal sy:		Amount (Specify		REF	
Material (ACM) TO BE ABATED		olely b nt/Cust	1700	ir		on, surfaci		SF or LF		REPAIR	16
in Facility (13)	S	Staff (1	2)			er miscella			P	~	NCLOSURE
	Yes	No	N/A		No. of Control of Control				- 1	╀	m
2ND FLOOR -NORTH EAST AREA	_	-	Х	VAT & MA				10,000 SF	X	+	-
BASEMENT- BREAK ROOM	-		X	VAT & MA				525 SF	X	+	-
2ND FLOOR NORTHEAST AREA			X	PIPE FITT				70 LF	X	+	-
1ST FLOOR MER ROOM 3-1	-		Х	PIPE FITT	reprocessors			4 LF	X	-	-
1ST FLOOR MER 1	-		X	PIPE FITT				14 LF	X	+	-
1st FLOOR MER 1	X ,	PIPE FITT	INGS			10 LF	X	+	-		
ADDITION TO SCOPE:	-	-	V	\/A= 0	OTIO			060.05	×	+	+-
BASEMENT- BREAK ROOM	_	-	X	VAT & MA				260 SF	X	+	
BASEMENT- BREAK ROOM CORRIDOR Name of Registered Waste Hauler		EP Wa	X	PIPE FITT		Vaste	Name of Registe	30 LF ered Landfill			
DJM TRANSPORT , LLC		er ID N 26981	Vo.	ouble Full	80		GROWS LANDI				
City, State. KEARNEY, NEW JERSEY					Date 2015		City, State	PA	-		/
	itle				Signa	ature /			Date /-	77	/11
BENJAMIN SANCHEZ	IRECTO	R OF	OPER	ATIONS			1100		1/2	1/	11

NOCK State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) ERICSSON TECHNOLOGIES INC. Date of Notification (1) Street Address /15 530 SOUTH AVENUE EAST Type Notification Agencies Notified City, State, Zip Code Initial Notification **EPA** Amended Notification #6 CRANFORD, NEW JERSEY 07016 DEP Cancellation DOL Telephone Number DOH On Hold Name of Contact RICHARD SMITH DCA EMERGENCY N **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Subchapter 8 (Other than K-12) **ERICSSON LABS** Other (ie. private & commol. bldgs., homes, et-Square Feet # of Floors Bldg. Age Street Address 70,000 1 ERICSSON DRIVE Current Use (Prior if being demolished) County Code (7) City (5) County (6) COMMERCIAL OFFICE MIDDLESEX (STATE USE ONLY) MIDDLESEX Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. PAR ENVIRONMENTAL CORPORATION ENVIRONMENTAL TACTICS INC. 17 Street Address Street Address 313 SPOOK ROCK ROAD 64 BROAD STREET City, State, Zip Code City, State, Zip Code SUFFERN, NEW YORK 10901 MATAWAN, NEW JERSEY 07747 Telephone Number License Number Project Manager for Monitoring Firm Telephone Number 460 732-290-2217 845-369-7500 THOMAS GEIGER Sched. Completion Date (11) Name of OSHA Monitor Expected : Start Date (10) 30/ QUALITY ENVIRONMENTAL 15 /15 9/ Year Month Day Month Day Year Street Address Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement 1376 ROUTE 9 W Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe Monday-Saturday 5pm-1am/Saturday & Sunday 7am-3:30pm City, State, Zip Code WAPPINGERS FALLS, NY 12590 Full Containment with Negative Pressure Scope of Work (Check all that apply) Mini-Enclos, Demolition Renovation Glovebag Procedure >3SF OR LF Non-Friable Procedure >160 SF OR Abatement Type Description of Asbestos-Is Location Location of Containing Material (ACM) Amount normally used Asbestos-containing REMOVAL REPAIR ENCLOS solely by (ie. Thermal systems (Specify Material (ACM) TO BE ABATED Maint/Custodial insulation, surfacing, VAT, SF or LF) Staff (12) or other miscellaneous) in Facility (13) URE Yes No N/A 10,000 SF VAT & MASTIC X 2ND FLOOR -NORTH EAST AREA X 525 SF X VAT & MASTIC BASEMENT- BREAK ROOM X X 70 LF PIPE FITTINGS 2ND FLOOR NORTHEAST AREA 4 LF X X PIPE FITTINGS 1ST FLOOR MER ROOM 3-1 14 LF X PIPE FITTINGS 1ST FLOOR MER 1 X 10 LF PIPE FITTINGS 1st FLOOR MER 1 ADDITION TO SCOPE: X 260 SF VAT & MASTIC X BASEMENT- BREAK ROOM

X

NJDEP Waste

Hauler ID No.

Title · *

26981

DIRECTOR OF OPERATIONS

BASEMENT- BREAK ROOM CORRIDOR

Name of Registered Waste Hauler

KEARNEY, NEW JERSEY

Completed by (Print or Type)

BENJAMIN SANCHEZ

DJM TRANSPORT, LLC

City, State

PIPE FITTINGS

Disposal Date

1/16-5/30/2015

Cubic Yards of Waste

80

Signature

30 LF

Date

Name of Registered Landfill

GROWS LANDFILL

MORRISVILLE, PA

City 79 fafe

NOCK 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) ERICSSON TECHNOLOGIES INC. /15 Street Address Type Notification Agencies Notified 530 SOUTH AVENUE EAST EPA Initial Notification City, State, Zip Code DEP Amended Notification CRANFORD, NEW JERSEY 07016 DOL Cancellation DOH On Hold #5 Name of Contact Telephone Number DCA EMERGENCY N RICHARD SMITH **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) **ERICSSON LABS** Subchapter 8 (Other than K-12) Other (ie. private & commol. bldgs., homes, et Street Address Square Feet # of Floors Bldg. Age 1 ERICSSON DRIVE 70,000 2 City (5) County (6) County Code (7) Current Use (Prior if being demolished) MIDDLESEX MIDDLESEX (STATE USE ONLY) COMMERCIAL OFFICE Name of Monitoring Firm Hired by Building Owner (8) Name of Abatement Contractor (9) ASCM No. ENVIRONMENTAL TACTICS INC

					•	1.7	IL YU EIN NUONI		III OILA		
Street Address										11.11.10 SQL NO	
								CK ROAD			
								Market Ma			
AN, NEV	N JEF	RSEY	07747	7					01		
		Tele	phone	Number					0.000	Numb	per
		732-	290-2:	217							
	Sche				11)			Monitor	100		
					,	15			î		
	Mo			Day		Year	GOALITT LIVII	IONIVILIVIA	_		
(Check	only o	one)					Street Address				
uring En	ntire P	eriod	of Aba	atement			1376 ROUTE 9	W			
side of	Norm	al Fac	cility H	ours - Desci	ribe:						
Saturda	y 5pm	n-1am	/Satur	rday & Sund	lay 7a	m-3:30pm	City, State, Zip C	Code			772-717
						•				2590	
	1							gative Press	ure		
X	Rend	ovatio	n								
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								1000 miles		R	E
	Comment State		2. 5 1	l in				3.000.000.000	, §	PA	15
	1000							SF OI LI) \{	D	SC
-	_			1	01 011	or miooona	110000)	N.	-		ENCLOSURE
			Х	VAT & MAS	STIC		F	10,000 SF	X	1	1
			Х	VAT & MAS	STIC			525 SF	X	\top	
			X	PIPE FITTI	NGS			70 LF	Х		
		-	X	PIPE FITTI	NGS			4 LF	Х		
			X	PIPE FITTI	NGS			14 LF	X		1
										1	1
			X	PIPE FITTI	NGS			10 LF	X	\top	
	NJDE	P Wa	aste	Cubic Yard	s of V	Vaste	Name of Registe	red Landfill			
					80						
26981											
City, State KEARNEY, NEW JERSEY							City, State) /	77			
		-71		1/16-5/30/2	015	` -Æ	MORRISVILLE	FA _		2	_
_					Signa	ature /			Date	1/2	rlK
Title											
	CTOF	ROF	OPER	ATIONS		/	100/) [7	10	1/15
	CTOF	ROF	OPER	ATIONS		_/	1000)	5	10	///
	CTOF	ROF	OPER	ATIONS		1	000		5,	10	///
	(Check uring Er	Scho Mo (Check only ouring Entire Pisside of Norm Saturday 5pm X Reno X Reno NJDE Haule	Sched. Co Month (Check only one) uring Entire Period side of Normal Fac Saturday 5pm-1am X Renovation Is Locat normally solely Maint/Cus Staff (1 Yes No NJDEP Wa Hauler ID N	Telephone 732-290-2 Sched. Comple 9 / Month (Check only one) uring Entire Period of Ab. side of Normal Facility H Saturday 5pm-1am/Satur X Renovation Is Location normally used solely by Maint/Custodial Staff (12) Yes No N/A X X X X X NJDEP Waste Hauler ID No.	9 / 30/ Month Day (Check only one) uring Entire Period of Abatement side of Normal Facility Hours - Desc Saturday 5pm-1am/Saturday & Sund X Renovation Is Location normally used solely by Maint/Custodial Staff (12) Yes No N/A X VAT & MA: X PIPE FITTI	Telephone Number 732-290-2217 Sched. Completion Date (11) 9 / 30/ Month Day (Check only one) uring Entire Period of Abatement side of Normal Facility Hours - Describe: Saturday 5pm-1am/Saturday & Sunday 7a X Renovation Is Location normally used solely by Maint/Custodial Staff (12) Yes No N/A X VAT & MASTIC X VAT & MASTIC X PIPE FITTINGS	Telephone Number 732-290-2217 Sched. Completion Date (11) 9 / 30/ 15 Month Day Year (Check only one) uring Entire Period of Abatement side of Normal Facility Hours - Describe: Saturday 5pm-1am/Saturday & Sunday 7am-3:30pm X Renovation Is Location normally used solely by Maint/Custodial Staff (12) Yes No N/A X VAT & MASTIC X PIPE FITTINGS Disposal Date	AN, NEW JERSEY 07747 Telephone Number 732-290-2217 Sched. Completion Date (11) 9 / 30/ 15 OUALITY ENVIR 45-369-7500 Sched. Completion Date (11) 9 / 30/ 15 OUALITY ENVIR 45-369-7500 Sched. Completion Date (11) 9 / 30/ 15 OUALITY ENVIR 45-369-7500 Sched. Completion Date (11) 9 / 30/ 15 OUALITY ENVIR 45-369-7500 Sched. Completion Date (11) 9 / 30/ 15 OUALITY ENVIR 45-369-7500 Sched. Completion Date (11) 9 / 30/ 15 OUALITY ENVIR 45-369-7500 Sched. Completion Date (11) 9 / 345-369-7500 Sched. Completion Date (11) 9 / 3	AN, NEW JERSEY 07747 Telephone Number 732-290-2217 Sched. Completion Date (11) 9 / 30/ 15 Month Day Year (Check only one) Uring Entire Period of Abatement side of Normal Facility Hours - Describe: Saturday 5pm-1am/Saturday & Sunday 7am-3:30pm Is Location normally used solely by (ie. Thermal systems (Specific Non-Friable Procedure Non-Friable Procedure Non-Friable Procedure Non-Friable Procedure Staff (12) Yes No N/A X VAT & MASTIC 10,000 SF X PIPE FITTINGS 10 LF NJDEP Waste Hauler ID No. 26981 Disposal Date (City, State) City, State, Zip Code WAPPINGERS FALE (ACM) Amount (Specific Non-Friable Procedure) Full Containment with Negative Press Mini-Encles, Glovebag Procedure Non-Friable Pro	State Address Street Address Str	AN, NEW JERSEY 07747 Telephone Number T

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

		(ruis	uarit it	1 NJAC 8.00-7 and 12.120					
D				Name of Building (ERICSSON TECHN)			
Date of Notification (1)									-
5 / 19 /15 Agencies Notified Type Notification	n :			Street Address 530 SOUTH AVENU	IE EAST				
EPA Initial No			#A	City, State, Zip Code CRANFORD, NEW					
X DOL Cancellati		ation	н¬г	OTDANI OND, NEW	0211021 07010				
X DOH On Hold				Name of Contact		Telephone N	umber		
DCA EMERGE	NCY N			RICHARD SMITH					
			FAC	ILITY INFORMATION					
Name of Facility Where Abatement is Tak	ing Pla	ce (3)		Type of Facility				
					School (K-		16.40)		
ERICSSON LABS						er 8 (Other that private & comr		e ho	mac a
Street Address					Square Feet	# of Floors		Bldg. A	
1 ERICSSON DRIVE					70,000	2		44	
City (5) County (6	6)	-		County Code (7)	Current Use (Pri	or if being den	nolished)		
MIDDLESEX MIDDLES				(STATE USE ONLY)	COMMERCIAL				
Name of Monitoring Firm Hired by Buildin	ng Own	er (8)	ASCM No.	Name of Abates				
ENVIRONMENTAL TACTICS INC.				17	PAR ENVIRONI	MENTAL COR	PORATI	ON	
Street Address					Street Address	OK DOAD			
64 BROAD STREET					313 SPOOK RC City, State, Zip (
City, State, Zip Code MATAWAN, NE	-W.IFP	SFY	07747		SUFFERN, NEV		1		
Project Manager for Monitoring Firm	. ** 0 = 1			Number	Telephone Num		icense N	umbe	г
THOMAS GEIGER		Ch North Co	290-22		845-369-7500		60		
Expected Start Date (10)	Sche	d. Co	mplet	ion Date (11)	Name of OSHA	Monitor			
5 / 20 / /15			1	30/ 15	QUALITY ENVI	RONMENTAL			
Month Day Year		nth		Day Year	0				
Occupancy Status During Abatement (Chec Facility Closed/Vacated During B			of Abo	tomont	Street Address 1376 ROUTE 9	1/1/			
Abatement Performed Outside of					10/01/00/23	**			
X Other - Describe Monday-Saturd					n City, State, Zip	Code			
The state of the s						NGERS FALL		2590	
Scope of Work (Check all that apply)	7-				ntainment with Ne	gative Pressu	re		
Demolition X >3SF OR LF	Reno	vatio	n	X Gloveba	g Procedure				
X >160 SF OR					able Procedure				
Location of	Is	Loca	tion	Description of	Asbestos-		Aba	temer	nt Type
Asbestos-containing			used	Containing Mate		Amount	R	RE	EZ
Material (ACM)	1,500 851	olely	20 W	(ie. Thermal:		(Specify	10	REPAIR	ENCLOSURE
TO BE ABATED in Facility (13)	11250012500	it/Cus itaff (todial	insulation, surfa or other misce		SF or LF)	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	D	SC
in racinty (13)	Yes		N/A	or other misse	na roodo)		1		JRE
2ND FLOOR -NORTH EAST AREA			X	VAT & MASTIC		10,000 SF	X		
BASEMENT- BREAK ROOM	+		X	VAT & MASTIC		525 SF	X		
	+					70 LF	X		
2ND FLOOR NORTHEAST AREA	+		X	PIPE FITTINGS					
1ST FLOOR MER ROOM 3-1	+	-	X	PIPE FITTINGS		4 LF	X	+	
1ST FLOOR MER 1		-	X	PIPE FITTINGS	¥	14 LF	X	+	
ADDITION TO SCOPE:	+-	-	-			-		+	
1st FLOOR MER 1		_	X	PIPE FITTINGS		10 LF	X	+	
					Ter 7=	1.1			
	_				Mama of Pogict	orod Landfill			
Name of Registered Waste Hauler	NJDE			Cubic Yards of Waste	Name of Regist				
Name of Registered Waste Hauler DJM TRANSPORT , LLC	Haul	er ID	No.	Cubic Yards of Waste 80	GROWS LAND				
DJM TRANSPORT , LLC	Haul		No.	80	GROWS LAND				
DJM TRANSPORT , LLC City, State	Haul	er ID	No.		7.0	FILL			
DJM TRANSPORT , LLC City, State KEARNEY, NEW JERSEN Completed by (Print or Type)	Haule	er ID 2698	No.	80 Disposal Date	GROWS LAND	PA PA	oat€ /	101	/16

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Agencies Notified Type Notification EPA DEP Amended Notification City, State, Zip Code CRANFORD, NEW JERSEY 07016 Cancellation Name of Contact RICHARD SMITH FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) ERICSSON LABS Street Address 1 ERICSSON DRIVE Street Address Street Address Square Feet # of Floors Bldg. Age 1 ERICSSON DRIVE	Date of Notification (1)					e of Building Ow	mer/Operator (2)		40.4	Thomas	-
Agencies Notified											
BPA							FACT				
DCA	EPA Initial No	tification Notification			City,	State, Zip Code	Constitution of the Consti		117		
Name of Facility Where Abatement is Taking Place (3) ERIOSSON LABS ERIOSSON LABS Steef Address Search Feet For Floors Bidg, Age City (6) MDDLESEX MDDLESEX (STATE USE ONLY) Name of Monitoring Firm Hired by Building Owner (8) ENVIRONMENTAL TACTICS INC. STORE ADDRESS STEEF ADDRESS STORE ADDRESS			#3					Telephone N	Number		
School (K-12) Subspace (Other than K-12) Subspace (Other than K-12) Street Address ERICSSON DRIVE County (S) County Code (7) Current Use (Prior is being demolished) MIDDLESEX COUNTY Code (7) Current Use (Prior is being demolished) MIDDLESEX COUNTY Code (7) Current Use (Prior is being demolished) MIDDLESEX COUNTY Code (7) Current Use (Prior is being demolished) MIDDLESEX COMMERCIAL OFFICE COMMERCIAL OFFICE COMMERCIAL OFFICE COMMERCIAL OFFICE COMMERCIAL OFFICE Commercial Contractor (9) PAR ENVIRONMENTAL TACTICS INC. 17 SASCM NO. Name of Abattement Contractor (9) PAR ENVIRONMENTAL CORPORATION Street Address Street Addre			7.5	FAC	ILITY INFO	RMATION					
Street Address Square Feet For Floors Bildy Age Feet		ng Place	(3)				School (K-	12)	14.40		
Street Address	ERICSSON LABS		3.5							hom	es etc
Capt (6)	Street Address										
MiDDLESEX	1 ERICSSON DRIVE						70,000	2		44	
Abatement Type Facility (1) Sched. Completion Date (11) Street Address Street A									molished)		
State		g Owner	(8)							ON	97
City, State, Zip Code MATAWAN, NEW JERSEY 07747 Project Manager for Monitoring Firm Telephone Number Telephonum Telephone Number Telephone Number Telephone Number Telephone N	Street Address						Street Address			20/01/01	
MATAWAN, NEW JERSEY 07747 SUFFERN, NEW YORK 10901	Manager memory grant to a light committee and the										
THOMAS GEIGER		EW JER	SEY 0	7747					01		
Expected State Date (10)	Project Manager for Monitoring Firm		Teleph	one N	Number		Telephone Numb	er	License N	umbe	
Month Day Year Month Day Material (Check only one) Street Address 1376 ROUTE 9 W Street Address 1376 ROUTE 9 W Machine Preformed Outside of Normal Facility Hours - Describe: WAPPINGERS FALLS, NY 12590 WAPPINGERS FALLS, NY	THOMAS GEIGER		732-29	90-22	17		845-369-7500		460		
Month Day Year Month Day Year Street Address		Sche			255						
Occupancy Status During Abatement (Check only one) Facility Closed/Vacaded During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: (X) Other - Describe: Monday-Saturday 5pm-1am/Saturday & Sunday 7am-3:30pm Demolition		Ma					QUALITY ENVIR	RONMENTAL	-		
Scope of Work (Check all that apply) Demolition 33SF OR LF X >160 SF OR Location of Asbestos-containing Material (ACM) TO BE ABATED in Facility (13) 2ND FLOOR -NORTH EAST AREA BASEMENT- BREAK ROOM ADDITION TO SCOPE: Scope of Work (Check all that apply) WAPPINGERS FALLS, NY 12590 X Full Containment with Negative Pressure Mini-Enclos, X Glovebag Procedure Non-Friable Procedure N	Occupancy Status During Abatement (Check Facility Closed/Vacated During E Abatement Performed Outside of	only one ntire Peri Normal I) od of A acility	Hours	nent s - Describe	e:	1376 ROUTE 9	508			
Asbestos-containing Material (ACM) Amount (Specify Solely by Maint/Custodial Staff (12) Yes No N/A 2ND FLOOR -NORTH EAST AREA X VAT & MASTIC 10,000 SF X BASEMENT- BREAK ROOM X VAT & MASTIC 525 SF X 1ST FLOOR MER ROOM 3-1 X PIPE FITTINGS 4LF X ADDITION TO SCOPE: 1ST FLOOR MER 1 X PIPE FITTINGS 14 LF X 2ND FLOOR NORTHEAST AREA X PIPE FITTINGS 14 LF X Name of Registered Waste Hauler DJM TRANSPORT , LLC 6981 NJDEP Waste Hauler DJM TRANSPORT , LLC 56981 Disposal Date KEARNEY, NEW JERSEY Completed by (Print or Type) Title Signature Signature Pixel Pixel Containing Material (ACM) Amount (Specify MOV) Amount (Demolition X >3SF OR LF	Renov	vation		12 ×	Mini-Enclo X Glovebag I Non-Friabl	inment with Neg s , Procedure e Procedure			2590	
in Facility (13) Staff (12) Yes No N/A 2ND FLOOR -NORTH EAST AREA X VAT & MASTIC 10,000 SF X BASEMENT- BREAK ROOM X VAT & MASTIC 1525 SF X 1ST FLOOR MER ROOM 3-1 X PIPE FITTINGS 4 LF X ADDITION TO SCOPE: 1ST FLOOR MER 1 X PIPE FITTINGS 14 LF X 2ND FLOOR NORTHEAST AREA X PIPE FITTINGS 14 LF X 2ND FLOOR NORTHEAST AREA X PIPE FITTINGS 70 LF X Name of Registered Waste Hauler DJM TRANSPORT , LLC Name of Registered Waste Hauler DJM TRANSPORT , LLC City, State KEARNEY, NEW JERSEY Completed by (Print or Type) Title Signature Date of Registered Disposal Date Signature Date of Registered Disposal Date Signature Date of Registered Date o				200 marsh					_		
in Facility (13) Staff (12) Yes No N/A 2ND FLOOR -NORTH EAST AREA X VAT & MASTIC 10,000 SF X BASEMENT- BREAK ROOM X VAT & MASTIC 1525 SF X 1ST FLOOR MER ROOM 3-1 X PIPE FITTINGS 4 LF X ADDITION TO SCOPE: 1ST FLOOR MER 1 X PIPE FITTINGS 14 LF X 2ND FLOOR NORTHEAST AREA X PIPE FITTINGS 14 LF X 2ND FLOOR NORTHEAST AREA X PIPE FITTINGS 70 LF X Name of Registered Waste Hauler DJM TRANSPORT , LLC Name of Registered Waste Hauler DJM TRANSPORT , LLC City, State KEARNEY, NEW JERSEY Completed by (Print or Type) Title Signature Date of Registered Disposal Date Signature Date of Registered Disposal Date Signature Date of Registered Date o	Material (ACM)	s	olely by	/		(ie. Thermal sys	stems	(Specif	X REMO	REPAI	ENCLO
2ND FLOOR -NORTH EAST AREA X VAT & MASTIC BASEMENT- BREAK ROOM X VAT & MASTIC 525 SF X 1ST FLOOR MER ROOM 3-1 X PIPE FITTINGS 4 LF X ADDITION TO SCOPE: 1ST FLOOR MER 1 X PIPE FITTINGS 14 LF X 2ND FLOOR NORTHEAST AREA X PIPE FITTINGS 70 LF X Name of Registered Waste Hauler DJM TRANSPORT , LLC City, State KEARNEY, NEW JERSEY Completed by (Print or Type) Title 10,000 SF X VAT & MASTIC 10,000 SF X ALF ALF ALF ALF ALF ALF ALF		S	taff (12	2)				3F OI LI	VAL	Z Z	SURE
1ST FLOOR MER ROOM 3-1 ADDITION TO SCOPE: 1ST FLOOR MER 1 X PIPE FITTINGS 14 LF X 2ND FLOOR NORTHEAST AREA X PIPE FITTINGS 14 LF X 2ND FLOOR NORTHEAST AREA X PIPE FITTINGS 70 LF X Name of Registered Waste Hauler DJM TRANSPORT, LLC Hauler ID No. 26981 City, State KEARNEY, NEW JERSEY Completed by (Print or Type) Title X PIPE FITTINGS 14 LF X PIPE FITTINGS 16 LF X PIPE FITTINGS 16 LF X PIPE FITTINGS 16 LF X PIPE FITTINGS 17 LF X PIPE FITTINGS 18 LF X PIPE FITTINGS 19 LF X PIPE FITTINGS 10 LF X PIPE F	2ND FLOOR -NORTH EAST AREA		,	Х	VAT & MA	STIC		10,000 SF	X		
ADDITION TO SCOPE: 1ST FLOOR MER 1 X PIPE FITTINGS 14 LF X 2ND FLOOR NORTHEAST AREA X PIPE FITTINGS 70 LF X Name of Registered Waste Hauler DJM TRANSPORT, LLC Hauler ID No. 26981 City, State KEARNEY, NEW JERSEY Completed by (Print or Type) Title NJDEP Waste Cubic Yards of Waste 80 GROWS LANDFILL GROWS LANDFILL Signature Date Q Signature	BASEMENT- BREAK ROOM		,	Х	VAT & MA	STIC		525 SF	X	-	
1ST FLOOR MER 1 X PIPE FITTINGS 14 LF X 2ND FLOOR NORTHEAST AREA X PIPE FITTINGS 70 LF X Name of Registered Waste Hauler DJM TRANSPORT , LLC Hauler ID No. 26981 Disposal Date KEARNEY, NEW JERSEY Completed by (Print or Type) Title Signature NAME of Registered Landfill GROWS LANDFILL Name of Registered Landfill GROWS LANDFILL Disposal Date 1/16-5/30/2015 MARRISVILLE, PA Date Q / 5	1ST FLOOR MER ROOM 3-1			Х	PIPE FITT	INGS		4 LF	X	-	
2ND FLOOR NORTHEAST AREA X PIPE FITTINGS 70 LF X Name of Registered Waste Hauler DJM TRANSPORT, LLC City, State KEARNEY, NEW JERSEY Completed by (Print or Type) Title X PIPE FITTINGS 70 LF X Name of Registered Landfill GROWS LANDFILL City State Lity State MARRISVILLE, PA Date Q Signature Date Date Date Signature Date Q Signature Date S	ADDITION TO SCOPE:										
Name of Registered Waste Hauler DJM TRANSPORT , LLC City, State KEARNEY, NEW JERSEY Completed by (Print or Type) NJDEP Waste Cubic Yards of Waste 80 GROWS LANDFILL GROWS LANDFILL 6ity, State 1/16-5/30/2015 MARRISVILE, PA Date 9/5	1ST FLOOR MER 1			X	PIPE FITT	INGS		14 LF	Х		
DJM TRANSPORT , LLC Hauler ID No. 80 GROWS LANDFILL 26981 City, State KEARNEY, NEW JERSEY Completed by (Print or Type) Title Bignature Date 9 / 5	2ND FLOOR NORTHEAST AREA			Х	PIPE FITT	INGS		70 LF	X	+	
DJM TRANSPORT , LLC Hauler ID No. 80 GROWS LANDFILL 26981 City, State KEARNEY, NEW JERSEY Completed by (Print or Type) Title Bignature Date 9 / 5										+	
KEARNEY, NEW JERSEY Completed by (Print or Type) Title Signature Date 9/5	DJM TRANSPORT, LLC		er ID No	pretent 1	Cubic Yard		GROWS LAND				
Completed by (Print or Type) Title Signature Date 9/15								PA	1	9.4	, _
	Completed by (Print or Type)		05.0	,0==			MON		Date /	91	15

EPA	/15				Name of Building C	wner/Operator (2	2)			
Agencies Notified Type	/15				ERICSSON TECHN	OLOGIES INC.				V.
EPA					Street Address					
	Notification	1		-	530 SOUTH AVENU	IF FAST		_ :		
DEP V	Initial Not	ificatio	on		City, State, Zip Code					
X DOL	Amended	Notific		‡2	CRANFORD, NEW					
X DOH	Cancellation On Hold	on			Name of Contact					
	EMERGE	NCYN	11		RICHARD SMITH		Telephone Nur	mber		
			2	FACI	LITY INFORMATION		-			
Name of Facility Where Abateme	nt is Takin	g Plac	ce (3)		200000000000000000000000000000000000000	Type of Facilit	ty (4)		-	_
12:0						School (F				
ERICSSON LABS					8		ter 8 (Other than F	(-12)		
Street Address						X Other (ie.	private & commo	l. blágs		
1 ERICSSON DRIVE						Square Feet	# of Floors		Bldg	
A1. (5)	County (6)			County Code (7)	70,000	2			14
MIDDLESEX	MIDDLES	EX			(STATE USE ONLY)	COMMERCIAL	rior if being demol	ished)		
Name of Monitoring Firm Hired b			er (8)		ASCM No.		ement Contracto	r (Q)		
ENVIRONMENTAL TACTICS INC.			200 JP/64 W		17	PAR ENVIRON	IMENTAL CORP	ORAT	ION	
Street Address						Street Address	*			_
64 BROAD STREET City, State, Zip Code						313 SPOOK R				
The second secon	WAN, NE	W.IFF	RSEV 07	747		City, State, Zip				
Project Manager for Monitoring Firm		VVOLI	Telepho		umber	Telephone Num	W YORK 10901			
THOMAS GEIGER			732-290			845-369-7500		ense N	umbe	er
Expected State Date (10)		Sche			n Date (11)	Name of OSHA	Monitor 460)		
1 / 16 /	/15		5 /		30/ 15	QUALITY ENVI				
Month Day Ye		Mc	onth		Day Year	and the second	- Int			
Occupancy Status During Abatemen Facility Closed/Vacated	t (Check o	nly one	e)	note-	ant	Street Address				
Abatement Performed O	utside of N	ormal	Facility F	Jours	- Describe	1376 ROUTE 9	VV			
X Other - Describe: Monda	y-Saturday	5pm-	1am/Sat	urday	& Sunday 7am-3:30pm	City, State, Zip (Code			
		8 35			9000	WAPE	PINGERS FALLS.	NY 12	2590	
Scope of Work (Check all that apply) Demolition	_	10-			X Full Con	tainment with Neg	gative Pressure			
>3SF OR LF	[X	Reno	vation		Mini-Encl					
X >160 SF OR					X Glovebag	Procedure le Procedure				
Location of		ls	Location		Description of A		T	1		- 83
Asbestos-containing			mally use		Containing Mater		Amount		teme	
Material (ACM)		s	olely by		(ie. Thermal sy		(Specify	REMOVAL	REPAIR	ENCLOSUKE
TO BE ABATED			t/Custod	lial	insulation, surfact	ng, VAT,	SF or LF)	10/	AIF	10
in Facility (13)			taff (12)		or other miscella			AL AL	1	00
		Yes	No N	A			-			7
2ND FLOOR -NORTH EAST AREA			X	V	AT & MASTIC		10,000 SF	X		
BASEMENT- BREAK ROOM			X	V	AT & MASTIC		525 SF	X		T
ST FLOOR MER ROOM 3-1										
O. FEOOR MILIT ROOM 3-1			X	12	IPE FITTINGS		4 LF	X	-	1
ADDITION TO SCOPE:				1				1	+	-
ST FLOOR MER 1			X	P	PE FITTINGS		1415	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
			1				14 LF	X	+	-
2ND FLOOR NORTHEAST AREA			X	P	PE FITTINGS		70 LF	X		
				_		2		-	+	-
		T		T				1	1	1
		NIDE	P Macta	10	thio Varde -FIME-1-	[N	1		1	-
Jame of Registered Waste Hauler		Haule	P Waste r ID No.	C	ubic Yards of Waste 80	Name of Registe				
lame of Registered Waste Hauler DJM TRANSPORT , LLC Sity, State	-	Haule				GROWS LAND	FILL			
Name of Registered Waste Hauler DJM TRANSPORT , LLC City, State (EARNEY, NEW JERSEY Completed by (Print or Type)	Title	Haule	r ID No.	Di	80		FILL	/	/	

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Date of Notification (1)		Name of Building Ov	vner/Operator (2)			
(3/1).		ERICSSON TECHNO	DLOGIES INC.			
1 / 29 /15		Street Address			1	-216
Agencies Notified Type Notif	ication	530 SOUTH AVENUE	EAST			
DEP X Ame	al Notification ended Notification #1 cellation	City, State, Zip Code CRANFORD, NEW J	ERSEY 07016			
	ERGENCY N	Name of Contact RICHARD SMITH		Telenhone N	Jumher	
Name of Facility Where Abatement is	Taking Place (2)	CILITY INFORMATION	I= .=			
manic of a denty Princie Abatement is	raking riace (3)		Type of Facility School (K-			
ERICSSON LABS			Subchapte	r 8 (Other tha	n K-12)	h
Street Address 1 ERICSSON DRIVE			Square Feet 70,000	# of Floor		, homes, etc.) Bldg. Age 44
City (5) Cou	inty (6)	County Code (7)	Current Use (Pric	1	nolished)	44
MIDDLESEX	DLESEX	(STATE USE ONLY)	COMMERCIAL		nonancaj	
Name of Monitoring Firm Hired by Bu ENVIRONMENTAL TACTICS INC.	ilding Owner (8)	ASCM No.	Name of Abatem PAR ENVIRONM			ON.
Street Address			Street Address			
64 BROAD STREET			313 SPOOK RO			
City, State, Zip Code	N, NEW JERSEY 07747		City, State, Zip C			
Project Manager for Monitoring Firm	Telephone I		SUFFERN, NEW Telephone Numb		n License Ni	Imhor
THOMAS GEIGER	732-290-22		845-369-7500		460	attinet
Expected State Date (10)	Sched. Complet		Name of OSHA		400	
1 / 16 / /15 Month Day Year	5 /	30/ 15	QUALITY ENVIR			
Occupancy Status During Abatement (Cl Facility Closed/Vacated During	ng Entire Period of Abater		Street Address 1376 ROUTE 9 \	N		
Abatement Performed Outsid X Other - Describe: MON	de of Normal Facility Hour NDAY -SATURDAY 5PM		City, State, Zip C			
Scope of Work (Check all that apply) Demolition >3SF OR LF	X Renovation	X Full Conta Mini-Enclo Glovebag I	ainment with Nega s ,	NGERS FALI ative Pressui	LS, NY 12 re	590
X >160 SF OR			e Procedure			
Location of	Is Location	Description of As	bestos-		Aha	tement Type
Asbestos-containing	normally used	Containing Materia		Amount		R E
Material (ACM)	solely by	(ie. Thermal sys		(Specify		ENCLOS
TO BE ABATED in Facility (13)	Maint/Custodial	insulation, surfacir		SF or LF) \	R OS
	Yes No N/A	or other miscella	neous)		AL	SURE
2ND FLOOR -NORTH EAST AREA	x	VAT & MASTIC		10,000 SF	X	
BASEMENT- BREAK ROOM	X	VAT & MASTIC		525 SF	X	
1ST FLOOR MER ROOM 3-1	X	PIPE FITTINGS		4 LF	X	
				1	1	
					-	
					_	
					-	+
Name of Registered Waste Hauler DJM TRANSPORT , LLC	NJDEP Waste Hauler ID No. 26981	Cubic Yards of Waste 80	Name of Register GROWS LANDF			
City, State KEARNEY, NEW JERSEY		Disposal Date 1/16-5/30/2015	City)State/ MORRISVILLE, I	PA		
Completed by (Print or Type)	Title	Signature	Z/X		Date / /	0/15
BENJAMIN SANCHEZ	DIRECTOR OF OPERA	ATIONS /	/)X()		110	9/10

·NOCR 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) ERICSSON TECHNOLOGIES INC. 1 /15 Street Address Agencies Notified Type Notification 530 SOUTH AVENUE EAST Initial Notification City, State, Zip Code DEP Amended Notification CRANFORD, NEW JERSEY 07016 DOL Cancellation DOH On Hold Name of Contact DCA Telephone Number EMERGENCY N RICHARD SMITH FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) **ERICSSON LABS** Subchapter 8 (Other than K-12) Other (ie. private & commol. bidgs., homes, etc.) Street Address 1 ERICSSON DRIVE Square Feet # of Floors Blda, Age 70.000 City (5) 2 MA County (6) County Code (7) MIDDLESEX Current Use (Prior if being demolished) MIDDLESEX (STATE USE ONLY) Name of Monitoring Firm Hired by Building Owner (8) COMMERCIAL OFFICE ASCM No. Name of Abatement Contractor (9) ENVIRONMENTAL TACTICS INC. 17 PAR ENVIRONMENTAL CORPORATION Street Address Street Address 64 BROAD STREET 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code MATAWAN, NEW JERSEY 07747 SUFFERN, NEW YORK 10901 Project Manager for Monitoring Firm Telephone Number Telephone Number THOMAS GEIGER License Number 732-290-2217 845-369-7500 Expected State Date (10) 460 Sched. Completion Date (11) Name of OSHA Monitor 16 / /15 5/ 30/ 15 QUALITY ENVIRONMENTAL Month Day Year Month Day Year Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: 1376 ROUTE 9 W Other - Describe: MONDAY-FRIDAY 5PM-1AM City, State, Zip Code WAPPINGERS FALLS, NY 12590 Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Renovation Mini-Enclos. >3SF OR LF Glovebag Procedure >160 SF OR Non-Friable Procedure Location of Is Location Description of Asbestos-Asbestos-containing Abatement Type normally used Containing Material (ACM) Amount Material (ACM) REMOVAL REPAIR ENCLOSURE solely by (ie. Thermal systems (Specify TO BE ABATED Maint/Custodial insulation, surfacing, VAT. SF or LF) in Facility (13) Staff (12) or other miscellaneous) Yes No N/A VAT & MASTIC 10,000 SF VAT & MASTIC 525 SF X

2ND FLOOR -NORTH EAST AREA BASEMENT- BREAK ROOM Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Waste Name of Registered Landfill DJM TRANSPORT, LLC Hauler ID No. GROWS LANDFILL 26981 City, State Disposal Date KEARNEY, NEW JERSEY 1/16-5/30/2015 MORRISVILLE PAT Completed by (Print or Type) Signature BENJAMIN SANCHEZ DIRECTOR OF OPERATIONS

State of New Jersey - Notification of Asbestos Abatement

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

Date of Notification (1) July 27, 2015					Name of Building Owner New Jersey Turnp		ritv	UL 9 - 2015
Agencies Notified		Notification Initi		fication	Street Address Administrative Bui			reet
X EPA		□Amende	ed Certi	fication	City, State, Zip Code	<u> </u>		
DCA x DOL		□ Emerg	ency (i	ncluding	Woodbridge, NJ			
X DEP		justific			Name of Contact		Telephon	e Number
xDOH		□ Cance			C/O Mr. Chris Chrys, Pl	KF Mark III,		
				FACILITY INF				
Name of Facility Where Abate			-		Type of Facility (4)			
NJTPK Interchange #	# 10 – Ex	kterior Tre	nch		☐ School (K-12) ☐ Subchapter 8 (other tha	n K 12\		
Street Address					Other (i.e. private &		uildinas ho	mas atc.\
Interchange # 10					Sq. Feet: Unknown			
City (5) Edison	County (6			Code (7) Use Only)	Trench			
Edison	wiidaie	SCA			Current Use (prior if bein	g demolished):	
Name of Monitoring Firm Hire	d by Bldg.	Owner (8)	ASCM	No.	Name of Contractor (9)			
AECOM					GREENWOOD ABA	TEMENT C	ONSIILT	ANTS INC
Street Address					Street Address	TEMERTO	ONOCLI	Aiti o, iito.
30 Knightsbridge Ro	ad, Suit	e 520			511 MAIN STREET			
City, State, Zip Code					City State, ZipCode			
Piscataway, NJ 0885	54				Butler, NJ 07405			
Project Manager for Monitorin	<u>ıg Firm</u>	Telephone N	<u>lumber</u>		Telephone Number		License N	umber
					973-492-0477		00840	
Scheduled Start Date (10)		Scheduled C			Name of OSHA Monitor			20
August 10,2015		August 3	0,201	5	EMSL inc.			
Occupancy Status During A	batement	(Check only or	ne)		Street Address			
Facility Closed/Vacate								
Abatement Performed Describe	d Outside o	of Normal Faci	ility Hour	rs -	1056 Stelton Road City, State, Zip Code			
Other – Describe: 7a	m-7pm							
					Piscataway, NJ 08	8854		
Source of Work (Check all that	at apply)							
2.6	•			_				Negative Pressure
≥ 3 sf or ≥ 3 l				Renovation		Mini-Enclo		
□≥ 160 sf or ≥ 2	260			Demolition		Glovebag F		d New Esiable December
Location of Asbestos-Contain	ina Is La	ocation Normal	lv Used	Description of Asi	bestos Containing Material	X Non-Exem		d Non-Friable Procedure patement Type
Material (ACM) in Facility (13)	11.00	ly by Maint./Cu			nal systems insulation, surfac		y SF	And the second s
	Staf YES	f? (12) S NO	NA	VAT, or other mis	cell.)	or LF)	Re	move Repair Encap Enclose
Exterior Transh	1	J NO		Ashastas Tu	ansite Conduit	4.000		1
Exterior Trench				Aspestos II	ansite Conduit	1,000	LF X	'
Name of Reg. Waste Hauler NJDEP Waste Hauler ID #				ID#	Cubic Yards of Waste:	Name of Reg	istered Land	lilit
See Hauler Below # 1 &	2	See Below	1		100	GROWS	-North I	andfill Falls Twp.
								sville PA
Hauler #1) Greenwood			ants, In	c. – Butler, NJ (07405	Disposal Da		City, State
NJ DEP # 12			Dela	MA NIDED# 104	01 # 20000/633/2117	August 3	0, 2015	Falls TWP, Bucks Cty, PA
Hauler #2) STG Inc. 58 P	yies Lane	, New Castle	Delawa	He-NJDEP # A90	01 # 20990/5W211/			50000
Completed by (Print or Type) Title					Signature		Date	
Marin Graure						aromun	July 27	, 2015
	100	MANAGER		5549	Marin Grau	re	,	# 0000 TO \$6.700
010 11 2015 505								

SIECHY)

Date of Notification (1) 7/29/15					f Building			(2)		17)	1 4	115				
Agencies Notified	Type Netification			-	f New B	runswi	CK									
	Type Notification		1 8	Street A 78 Ba	yard St											
× EPA × DEP × DOL	Amended Amendmen	t #			ite, Zip Co Brunswic		08901									
DOH DCA	Emergency justification) Cancellation		1		f Contact					Tel	ephone N	umber				
□ bcx	Caricellation	1			LITY INF	DMATI	ON									
Name of Facility Where D+R Canal	Abatement is Takir	ng Place (3)		FAGI	LIIIINE	JRIMATI	ON	Тур	e of Facility (4)						12	
Street Address 1050 George Stree	et							×	School (K-12 Subchapter 8 Other (i.e. pri	(Oth			ildin	gs, i	nome	es,
City (5) New Brunswick								_	etc.) are Feet	# 0	f Floors	1	Bldg 50+		je	
County (6)					Code (7)	1		Cum	rent Use (Prior		ing demoli	shed)	301			
Middlesex		0 (0)							mp station							
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCN	/ No.				lation Co., I		(9)					
Street Address							Street 95 M		ess rose Road							
City, State, Zip Code									Zip Code ck, N.J. 077	722						
Project Manager for Mo	nitoring Firm		7	elepho	ne No.		Teleph	hone I	No.		License	No.			- 10-0	
Start Date (10)		Cabadulad		-1-4: 1	Data (44)				-1757		00029					
8/7/15		Scheduled 8/12/15	Com	pietion	Date (11)		Name	of OS	SHA Monitor							
Occupancy Status Durir	ng Abatement (Che	ck Only One)					Street	Addre	ess							
Facility Closed/Vac Abatement Perform Other – Describe:				ent			City, S	State,	Zip Code		 		-			
Scope of Work (Check A																
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	ш тистфыу)		ovati				×	∃ M G	ull Containmer lini-Enclosure llovebag Proce on-Exempted	dure				lure		
		ls Lo	catic	n.						/			12000		nent	
Locatio	n of	Nor	mally	/		De	scription	n of				_	_	Тур	е	
Asbestos-Containing TO BE AB In Faci (13)	BATED	Used S Mainte Custod	enan	ce/		tos Cont thermal surfa	taining N	Materia s insu T, or		(5	mount Specify F or LF)	Removal	Vabail		Encapsulate	Enclosure
		Yes 1	No	N/A								1			œ l	
root	f		X	1	lashing	g on ch	nimn	ey	2	25 sf	×	-	-			
												-	+	+		
Name of Registered Wa	ste Hauler		N	IDEP W	lacto	Cubic	Yards		Name of D	ogict-	arod Lend	SII.				
Ace Insulation Co.,			Ha	uler ID 1086		of Was			Name of Re	eyiste	sieu Landi	nili				
City, State Colts Neck, New Je	rsev					Dispos 8/12/	sal Date		City, State Easton,,	PA						
Completed by Title						1	Signature	9	1		1	Date				
Bree McGuire		Secreta	Secretary Treasurer					1	1			7/29/1	5			

GK# 5718

Date of Notification (1) 7/29/15					Building New B			(2)					10		
Agencies Notified	Type Notification		-	Street A		unswi	UN.						7.		
					yard St										
× EPA × DEP			-	City, Sta	ite, Zip Co	de									
× DOL	Amendment Emergency		-	New E	Brunswic	k, NJ (08901								
X DOH	justification)				f Contact					Tal	anhone Nii	mher			
☐ DCA	Cancellation	Ľ		Chris	LITY INIT	DALATI	ON			-					
Name of Facility Where	Abatement is Takin	g Place (3)		FACI	LITY INFO	JKWAII	ON	Туре	of Facility (4	.)					
Weston's Mill									School (K-12						
Street Address									Subchapter	8 (Oth			di	h	
1 Edgebrook Rd								100	Other (i.e. pr etc.)	ivate	s commerc	iai bui	aings	, nom	es,
City (5) New Brunswick									e Feet	3500	Floors	1 2	Bldg. /	Age	
County (6)				County	Code (7)	-		2000	nt Use (Prio	1	na domolia	- 18	50+	G	
Middlesex					USE ONLY			100	p station	i ii bei	ng demons	neu)			
Name of Monitoring Firm	Hired by Building	Owner (8)	- 4	ASCN	No.		Name	of Aba	tement Conf	tractor	(9)				
									tion Co.,	Inc.					
Street Address								Addres Iontro	se Road						
City, State, Zip Code									p Code						
Project Manager for Mor	itorina Firm			Talaaba	no No				k, N.J. 07	722		1-			
Project Manager for Mor	illoring Firm		ĺ	Telepho	ne No.			none No 294-1			License I	NO.			
Start Date (10) 8/7/15		Scheduled 8/12/15		npletion	Date (11)		Name	of OSF	IA Monitor						
Occupancy Status Durin	g Abatement (Chec	k Only One	2)				Street	Addres	SS						
Facility Closed/Vac	ated During Entire	Period of Al	oatem	nent											
Abatement Perform X Other – Describe:		nal Facility I	Hours				City, S	State, Zi	p Code						
Scope of Work (Check A	ш тпат Арргу)	I					_	7	60-600 - 6000						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		and the same of th	enova emolit				E		Containme i-Enclosure	nt with	Negative	Pressu	ıre		
		_					×		vebag Procen- Exempted		d Non Erio	olo Dre	voodu.		
		le l	ocati	00				1001	I-Exempled	() all	u INOII-FIIA	Die Fic		emen	t
Location	ı of	No	ormal	ly		De	scription	n of					Т	уре	
Asbestos-Containing	Material (ACM)	Used Mair	Sole			tos Cont	aining N	/laterial			mount			ш	
TO BE AB In Facil		Custo		Staff?	(I.e.	thermal surfa	system: cing, VA		tion,		Specify or LF)	Remova	Repair	псар	inclo
(13)			(12)				niscellar					oval	pair	Encapsulate	Enclosure
		Yes	No	N/A										te	
roof				X		fl	ashing	1			50 sf	X			
roof				Х		roofir	ng mat	erial		3	00sf	X			
Name of Registered Was	ste Hauler		9.75	JDEP Wauler ID		Cubic			Name of R	Registe	red Landfi	1			
Ace Insulation Co., I	nc.		Land Tricking S	2086	140.	of Was	orc.		Chrins						
City, State Colts Neck, New Jer	rsev					Dispos 8/12/	sal Date		City, State Easton,,						
Completed by	Josy	Title					ignature		Lasion,	FA	In	ate		- 110	
Bree McGuire		I Disperse	tary	Treasu	ırer	"	72	u.	1/			/29/1	5		
							1-3	-0	V						

CK 1112

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

Date of Notification (1) 07/25//5		AN:	DRE	JS	JA	NSONS					6	
Agencies Notified Type Notification		Street Ad	ddress			AVE	()	JL S		1015		
EPA Initial Amended Amendment #				Nevino -		0760		i				
Emergency (ir justification) DCA Emergency (ir justification) Cancellation	ncluding	Name of	Contact 2 C OS				Telephone	Numb	oer ·			
DCA Garicenation			LITY INFO									
Name of Facility Where Abatement is Taking	Place (3)	FACIL	LITT HATC	TRIVIALITY	214	Type of Facility ((4)					
ANDREJS ESTATE					F	School (K-1						
Street Address							8 (Other than	K-12)				
73 GLENWOOD A	VE				all-tipes	Other (i.e.	orivate & comm	nercial	build	ings,	home	es,
73 G200 11 5 5 17	-					etc.) Square Feet	# of Floors		BI	dg. A	ne.	
City (5) LEONIA	*					1930	2		1	3/		
County (6) BERGEN	12	County C	Code (7) USE ONLY)		_ '	Current Use (Pri	or if being dem う <i>e</i> ょ/でも		d)			
Name of Monitoring Firm Hired by Building O	wner (8)	ASCIV	No.		Name o	f Abatement Co	ntractor (9)			,		
						JAN AR	ROW IN	100	157	RI	GS	0
Street Address					Street A	ddress	7.					
City, State, Zip Code					City, Sta	ete, Zip Code ERSON	NJ,07	15	וכ			
Project Manager for Monitoring Firm		Telephor	ne No.		Telepho	ne No. 65336	52 Licens	se No.	,			
Start Date (10)	Scheduled Co	mpletion I	Date (11)		Name o	f OSHA Monitor	,					
07-07-15		08-	10		Street A	2AN 15	<i></i>					-
Occupancy Status During Abatement (Check						MILL S	T.					
Facility Closed/Vacated During Entire Policy Abatement Performed Outside of Normal	eriod of Abate al Facility Hou	ment rs				ate, Zip Code		コゴ	20	,		
Other - Describe:					PHT	GRSON	INO, C	790	-			
Scope of Work (Check All That Apply)									1			
≥3 sf or ≥3 lf	M Renov				H	Full Containm / Mini-Enclosur	ent with Negati e	ive Pr	essur	e		
≥160 sf or ≥260 lf	Demo	IILIOIT				Glovebag Pro	cedure		120	100		
						Non-Exempte	d (*) and Non-F	Friable				
	Is Loca	ition								Abate Ty		
Location of	Norma Used Sol				cription of							
Asbestos-Containing Material (ACM)	Mainten	50 050				aterial (ACM) insulation,	Amount (Specify		Z	-	Enc	四
TO BE ABATED In Facility	Custodial		(1.0.		ing, VAT		SF or LF)		Removal	Repair	aps	Enclosure
(13)	(12))		other m	niscellane	eous)			val	air	Encapsulate	sure
	Yes No	N/A		3							е	
BASEMENT	V			7.	Si		2004	F	V			
24 0 04 01							D(00 10					
		-						-		-		
										-		
								1511				
Name of Registered Waste Hauler ATLANTIC CARTING		NJDEP W Hauler ID		of Was			Registered La		5			
City. State	8	() - 6			al Date					P	<i>A</i> .	
CHYNE, NO	Telo			1	ignature	11/1	460/					
Completed by GORAN IGEV	Title SE C.K	CTA	24	٥	ignatule 1	Af		07	12	35/	115	>



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

OF 25/15		Name o	0BE7	Owner/Op RTA	perator (2)	RSCH					- 17	
Agencies Notified Type Notification		Street A		MiL	FOR:	D TEX	2.	JUL	3	201	5	
DEP Amended Amendment		City Sta	ata Zin C	ode		J. 07						
DOH justification) DCA Cancellation		Name of	f Contact	5701			Telephon	e Num	per_		- ^	
		FACI	ILITY INF	ORMATIC	N			-				-
Name of Facility Where Abatement is Takin ROBERTH'S HOP Street Address 1384 MILFOR 2	ME				F	School (K- Subchapte Other (i.e.	12) r 8 (Other than	n K-12 mercia) al build	dings	, hom	es,
City (5) TEAMECK						etc.) quare Feet	# of Floor	'S	В	ldg. A		
County (6) BERGEN			Code (7) USE ONLY	2		urrent Use (Pr	ior if being der		ed)	5 (
Name of Monitoring Firm Hired by Building	Owner (8)	ASCN	И No.			Abatement Co	ntractor (9)		.57	011	 2c	
Street Address					Street Ad			00	511	V	ر د	W
City, State, Zip Code					City Stat	e, Zip Code		128	7/			
Project Manager for Monitoring Firm		Telepho	ne No.		Talanhan		Line	01-	Vi			
Start Date (10) 07/10/15	Scheduled C	Completion	Date (11)		Name of	OSHA Monitor	- 120			-2-2200		
Occupancy Status During Abatement (Chec	150	tement			Street Ad	dress N/LL S	T.					
Abatement Performed Outside of Norr Other – Describe:				_	City, State	e, Zip Code ENSON	, NJ, 0	775	701			
Scope of Work (Check All That Apply)												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Comments.	ovation olition				Mini-Enclosur Glovebag Pro					0	
	Is Loc					14011-Exemple	G () and 14011	1 Habit		Abate	ement pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used S Mainte Custodia (1	olely by nance/ al Staff?		tos Conta thermal s surfaci		erial (ACM) sulation, or	Amount (Specify SF or LF	, `	Remova	Repair	Encapsulate	Enclosure
BASENENT	Yes N	o N/A		1/0	7		100	c F			te	Ф
BASENENT				V A	1	*	200	<i>3</i> ~	V			
,												
Name of Registered Waste Hauler ATLANTIC CARTI	VG	NJDEP W Hauler ID	No.		30	G.,	Registered La		-			
City, State WAYNE, NJ					30	City, Stat	TULL)	170	DU	IN	, Po	A
Completed by GORAN IGEV	Title 560	C-R 676	ARY	Sig	nature	bff.		Date 07	1/2	5/	115	_
					-	00				* *		

NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1)		Name of Building	Owner/Ope	rator (2)				-	
July 28, 2015				& Segal		2	13	-5	7
[] DEP [] Ame [x] DOL Ame [x] DOH [] Emer	al Notification ended Notification endment # rgency (including	Street Address City, State, Zip Co	de	outh Street	Jii		2 0 0 0		
I DCA	fication) cellation	Name of Contact Fred I	Zimal:	Т	elephone Number			(()	
Name of Facility Where Abatement is Taking	Place (3)	CILITY INFORM	IATION	Type of Facility (4)					
Murray Hill Apart				[]	School (k-12)				
Street Address 48 South Gate Ro	ad			[] [x]	Subchapter 8 (oth Other (i.e., prival homes, etc.)				dings,
City	County (6)	County Code (7)		Square feet	# of Floors	Bld	g. Age		
New Providence	Union	(STATE USE ONL	Y)	10,000 sf Current Use (Prior if	2		(50	
				Apartm	haran and an an arm and a second)			
Name of Monitoring Firm Hired by Building		ASCM No.	Name of	Abatement Contractor ((9)				
Guardian Contract Street Address	ting, Inc.		Street Ac		n Contracting,	Inc.			
1889 Rte. 9, Unit	61		Succi Ac		oute 9, Unit 61				
City, State, Zip Code	0.7.5.5		City, Stat	te, Zip Code				estaurouro	
Toms River, NJ 08 Project Manager for Monitoring Firm	8 / 3 3 Telephone Number		Telephon	Toms R	iver, New Jers			271	
Nicholas Fernicola	7321-349-9932		732-34		00624	umber			
Scheduled Start Date (10) 8/10/15	Scheduled Complete	tion Date (11)	Name of	OSHA Monitor					
Occupancy Status During Abatement (Check of X) Facility Closed/Vacated [] Abatement Performed (8/28/15 only one) d During Entire Period of Abo Outside of Normal Facility H		Street Ad	ldress	elton Road				
Other – Describe					vay, New Jerse	y 088	54		
Scope of Work (Check all that apply) $ \begin{bmatrix}] & >3 \text{ sf or } \ge 3 \text{ lf} \\ [X] & \ge 160 \text{ sf or } \ge 260 \text{ lf} \end{bmatrix} $	[X] Renov		[] [x] [x]	Full Containment of Mini-Enclosure Glovebag Procedur Non-Exempted (*)	re		ıre		
						Abat	ement '	Type	
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	Ash N (i.e. inst	Description pestos-Con faterial (A , thermal s plation, sur VAT, o er miscella	taining CM) systems facing, r	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E
Garage	X	Asbestos pipe	insulation	1	1125 lf	Х			
Storage room	X	Asbestos pipe	insulatior	1	75 lf	Х			
Laundry room	X	Asbestos pipe	insulation	1	75 lf	Х			
NCD . ' . IW									
Name of Registered Waste Hauler Guardian Contracting, Inc.	NJDEP Waste Hauler 20223		rds of Waste	Name of Registere T.R.R.F.	ed Landfill				
City, State Toms River, New Jersey	Dispo 8/31	sal Date /1.5	City, Sta						
Completed by (Print or Type) Nicholas Fernicola	Title Project Manager	Signature	holi	- July compy yailla		Date 7/28	3/2015	;	

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

NOTIFICATION OF ASBESTOS ABATEMENT

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

r							-				13	
Date of Notification (1)	July 28, 2015				Name of Building (rator (2) & Segal	(#)	フ ー	130	é 0	
Agencies Notified [x] EPA [] DEP [x] DOL	Amen Amen	Notifica ded Not dment #	ification		Street Address City, State, Zip Coc	e	outh Street	- JULS		4915		
[x] DOH			ncluding			WIGHT						
[] DCA		cation) clation			Name of Contact Fred K	imak		Telephone Number				
				FAC	CILITY INFORM	ATION					V. V	
Name of Facility Where A	batement is Taking urray Hill Aparti						Type of Facility (4)	School (k-12) Subchapter 8 (oth	er than	k-12)		
Street Address 48	South Gate Roa	ıd					[x]	Other (i.e., private homes, etc.)			al build	ings,
City		Count	y (6)		County Code (7) (STATE USE ONL)	7)	Square feet 10,000 sf	# of Floors	Bldg	. Age	0	
New Provid	ence	Unic	n		(STATE OSE ONE	.,	Current Use (Prior i				0	
			****				Apartn					
Name of Monitoring Firm	Hired by Building (ardian Contract				ASCM No.	Name of	Abatement Contractor	an Contracting,	Inc.			
Street Address	arear and states					Street A	ddress	Route 9, Unit 61	mo.			
City, State, Zip Code	89 Rte. 9, Unit (01				City, Sta	ite, Zip Code	***			320 - W	
То	ms River, NJ 08	3755				2307		River, New Jerse		755-12	271	
Project Manager for Moni Nicholas Fer			Telephone 7321-34				ne Number 19-9932	License N 00624	umber			
Scheduled Start Date (10) 8/10/15				Complet	ion Date (11)		OSHA Monitor	L. Analytical				
Occupancy Status During	Abatement (Check		:)			Street A	ddress					
	cility Closed/Vacated						1056 S	Stelton Road				
	atement Performed (ner – Describe	Outside	of Normal F	acility H	ours	City, Sta	nte, Zip Code Piscata	away, New Jerse	y 088	54		
Scope of Work (Check all	that apply)					[Full Containmen	t with Negative Pres	sure			-
16 00.00] Mini-Enclosure					
L 2	sf or ≥3 lf		[x]	Renova		[x	5		Droods	iro.		1
[x] ≥10	60 sf or ≥260 lf		[]	Demol	ition	L	J Non-Exempted (*) and Non-Friable l	Toceat			
									Abat	ement	Туре	
Location	o.f		Is Location Is Location		Λ.	Descripti bestos-Co		Amount	R	R	E	Е
Asbestos-Containing 1			Solely b			Material ((Specify SF	E M	E P	N C	N C
TO BE ABA		Mair	ntenance/C	-	(i.e	., thermal	systems	or LF)	O	A	A	L
in facili	ty		Staff		ins	ulation, s			v	I R	PS	S
(13)			(12)		-41	VAT, er miscel			A	K	U	U
		YES	S NO	N/A	Ou.	iei iiiiseei	ianeous)		L		L E	R E
Garage			X	1	Asbestos pipe	insulati	on	1875 lf	X			
Storage room			X		Asbestos pipe	insulati	on	75 lf	X			
Laundry room			X		Asbestos pipe			75 lf	X			
Name of Registered Wast	e Hauler Contracting, Inc.		NJDEP Wa	ste Haule	r ID No. Cubic Y	ards of Wa	ste Name of Regis T.R.R.F.	tered Landfill				
City, State				Dispo	osal Date	City, S	State					
	r, New Jersey	Title		8/31		Tully	town, Pennsylvan	ia /	Date			
Completed by (Print or Ty Nicholas Fe		(0.000000	ect Mana	ger	Signature	ich	of te	1		8/201	5	

NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1)			Name of Deliving	0 /0	(2)					
July 28, 2015			Name of Building		& Segal	HII o s	2	73	6/	
[] DEP [] Amer	tion I Notification Inded Notification Inded Motification	n	Street Address City, State, Zip Co	de	outh Street					
[X] DOH [] Emer	gency (includin	g		Morri	stown, NJ 07962					
DUA	ication) ellation		Name of Contact Fred 1	Kimak		Telephone Number		^		
		FΔ	L CILITY INFORM	IATION				******		
Name of Facility Where Abatement is Taking Murray Hill Apart		IN	CILITI IN ORW	IATION	Type of Facility (4) School (k-12)				
Street Address 48 South Gate Roa	ad				[] [x]	Subchapter 8 (ot Other (i.e., priva homes, etc.)		500	ial buil	dings,
City	County (6)		County Code (7) (STATE USE ONL	V)	Square feet	# of Floors	Bldg	g. Age		
New Providence	Union		(STATE OSE ONE	1)		if being demolished ments)	(50	
Name of Monitoring Firm Hired by Building			ASCM No.	Name of	Abatement Contracto	or (9)				
Guardian Contract Street Address				Street A	ddress	lian Contracting,				
1889 Rte. 9, Unit (City, Sta	te, Zip Code	Route 9, Unit 61			-	
Toms River, NJ 08 Project Manager for Monitoring Firm		none Number		Talanha	Toms ne Number	River, New Jers		755-1	271	
Nicholas Fernicola	300000 (CO)	-349-9932		00000000000000000000000000000000000000	9-9932	00624	umber			
Scheduled Start Date (10) 8/10/15		uled Complet 28/15	tion Date (11)		OSHA Monitor	S.L. Analytical				
Occupancy Status During Abatement (Check	A THE STATE OF THE			Street A	ddress					
[X] Facility Closed/Vacated [] Abatement Performed 0					1056	Stelton Road				
Other – Describe	Juiside of North	iai raciity fi	ours	City, Sta	te, Zip Code Piscat	taway, New Jerse	ey 088	54		
Scope of Work (Check all that apply)				[]	Full Containme	nt with Negative Pres	sure			
[] -2.6216	r	1 -		[]		•				
[] >3 sf or ≥3 lf [X] ≥160 sf or ≥260 lf	[X	Renov Demol		[x]		dure (*) and Non-Friable l	Procedu	TO.		
		, Dome.			Tron-Exempted	() and Hon-Thable				
	Is Lo	netic-		D			Abat	ement	Туре	
Location of		ly used		Description Destoration		Amount	R	R	E	E
Asbestos-Containing Material (ACM)	Sole	ly by	l l	Material (A	ACM)	(Specify SF	E M	E P	N C	N C
TO BE ABATED	Maintenanc		- N	., thermal		or LF)	O	Α	A	L
in facility (13)	(1	aff 2)	ins	ulation, su VAT, o			v	I R	PS	O S
(13)	(1	-)	oth	er miscell			A		U	U
-	YES NO	N/A			•		L		LE	R
Garage	X		Asbestos pipe	insulatio	n	875 lf	X			
Storage room	X		Asbestos pipe	insulatio	n	75 lf	Х			
Laundry room	X		Asbestos pipe	insulatio	n	75 lf	Х			
9										
Name of Registered Waste Hauler Guardian Contracting, Inc.	NJDEP	Waste Haule	r ID No. Cubic Ya	ards of Was		tered Landfill				
City, State			sal Date	City, St					-	
Toms River, New Jersey	mi i	8/31			own, Pennsylvan	ia				
Completed by (Print or Type) Nicholas Fernicola	Title Project Ma	nager	Signature	-1.1	141	f	Date 7/28	3/201:	5	



Date of Notification (1)			1 1		Building C		perator	(2)	W. The state of th								
07/28/2015				Robert	T Heale	ey Sr.				823		194		10.00	č		
	Notification		9 9	Street Ad 573 Ea	idress ayerstow	n Roa	ad					-					
	Initial Amended				te, Zip Coo						27.97				V. 1705-200.		
DOL _	Amendment #		_	Lumbe	rton, NJ	0804	8										
	Emergency (i justification)	ncluding		Name of Contact Telephone Number													
	Cancellation			Aron G	Severs												
				FACIL	ITY INFO	RMATI	ON										
Name of Facility Where Abater	nent is Taking	Place (3)						Ty	ype of Faci	ility (4)							
A Better Lumberton									School		/O41	- 41 17	40)				
Street Address 111-121 Municipal Drive	:						42	×	Other (er than K comme		build	ings,	home	es,
City (5)		=======================================						So	duare Feet		# of	Floors		В	dg. A	ge	
Lumberton								1	0,000		1				0+	Ü	
County (6)				County C				C	urrent Use	(Prior i	if beir	ng demo	lishe	4)			
Burlington				(STATE U	ISE ONLY)			fo	ormer pri	ivate s	scho	ol					
Name of Monitoring Firm Hired		Wner (8)		ASCM	No.				Abatement								
Indoor Environmental Co	oncept						ELC	10:	N Enviror	nment	al, li	nc					
Street Address						-51	Street		(B)								
286 Sunset Road							1.00	0.00	enwood	TORSE PROTECT							
City, State, Zip Code							0		e, Zip Code		, D/	1207	7				
Barrington, NJ	F:			Talaabaa	- N-		Teleph		ngton Cro	JSSIIIQ	,	License					-
Project Manager for Monitoring Michael Menz	ı Firm			Telephor 856-62	28-6020		100		0-6356			01225					
Start Date (10)		Schedule		pletion [Date (11)		Name	of (OSHA Mor	nitor	-						
8/11/15		9/18/20					sam	e									
Occupancy Status During Abat	ement (Check	Only On	e)				Street	Ad	Idress								
Facility Closed/Vacated D Abatement Performed Ou Other – Describe:							City, S	State	e, Zip Cod	e			<u></u>				
Scope of Work (Check All That	Apply)								A +								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	0.20/50	-	enova emolit						Full Conta Mini-Enclo Glovebag Non-Exer	osure Proced	dure					e	
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		1,0,00	Locati Iormal	32703.40		D-									Ту	ре	
Location of Asbestos-Containing Mater	rial (ACM)	Use	d Sole	ly by		os Con		Mate	erial (ACM)	A	mount				ш	_
TO BE ABATED		100000000	ntenar odial S	F-75.573.6	(i.e.		system		nsulation,			pecify or LF)		Remova	Re	Encapsulate	Enclosure
In Facility (13)			(12)				miscella:				Ol	OI LI)		ova	Repair	Jusc	uso
		Yes	No	N/A										필		ate	ſe
Attached				x*1		Α	ttache	ed			Atta	ached		x*2			
*1 applies to all loca	ations				*2	appli	es to a	III A	ACMs								
Name of Bogistared Wests Us	ulor		NI	JDEP W	laste	Cubio	Yards		Mam	a of Do	adieto	red Land	HEU				
Name of Registered Waste Ha			. H	auler ID	No.	of Wa						rprises					
Service Transport Group			S	W 211	7	TBD			10105.4-1010		Lille	prises	•				
City, State New Castle, DE 19720						Dispo	sal Date	9	9503	State ynesb	ourg.	ОН					
Completed by		Title															
Elizabeth Gosek		Presi	dent														

TABLE 2 SURVEYED MAY, 2012 ASBESTOS CONTAINING MATERIAL INVENTORY B3

111 MUNICIPAL DRIVE LUMBERRTON, NEW JERSEY RMG PROJECT # 05-28-12

SAMPLE NO.	LOCATION - SUSPECT MATERIAL	ESTIMATED QUANTITY
N/A	GYM - PIPE INSULATION ASSUMED	18 LF
N/A	GYM WALLS AND C EILINGS - TRANSITE	2,900 SF
N/A	GYM - 9" BY 9" FLOOR TILE WITH MASTIC	3,080 SF
N/A	GYM - EXTERIOR WINDOW CAULK	200 LF
N/A	SHOP – SCATTERED THROUGHOUT – 9"BY 9" FLOOR TILE	480 SF
N/A	SHOP - HALLWAY 12" BY 12" FLOOR TILE	1,200 SF
N/A	SHOP ROOM - TRANSITE	600 SF
N/A	SHOP THROUGHOUT MASTIC ASSOCIATED WITH 12" BY 12" FLOOR TILE AND 9" BY 9" FLOORTILE	2,500 SF

TABLE 2 ASBESTOS CONTAINING MATERIAL INVENTORY 111 MUNICIPAL DRIVE

LUMBERRTON, NEW JERSEY RMG PROJECT # 090114

SAMPLE NO.	LOCATION - SUSPECT MATERIAL	ESTIMATED QUANTITY
0819-49,50	ROOF - ROLLED ON/SILVER PAINT	8,848 SF
0820-58	9 BY 9 FLOOR TILE WITH MASTIC UNDER TILE AND CARPET	8,848 SF
0820-58	VARIOUS TILES AND CARPET ABOVE THE 9" BY 9" TILE	8,848 SF
0820-64	TRANSITE	2,208 SF
0820-71	DOOR - CAULK	ALL
0820-73,74	WINDOW CAULK	ALL

TABLE 2 ASBESTOS CONTAINING MATERIAL INVENTORY B1 EAST 111 MUNICIPAL DRIVE LUMBERRTON, NEW JERSEY RMG PROJECT # 090114

SAMPLE NO.	LOCATION - SUSPECT MATERIAL	ESTIMATED QUANTITY
0819-33A	WINDOW CAULK	ALL
0819-35	DOOR CAULK	ALL
0819-38	BOILER ROOM - FLUE PACKING	ALL
0819-39	BOILER ROOM - CEILING - TRANSITE	100 SF
0819-40,44,45	CAFATERIA – 9 BY 9 WITH MASTIC BELOW OTHER TILE OF 1,770 SF	2,109 SF
	CAFATERIA - 12" BY 12" ABOVE 9" BY 9"	1,770 SF
0819-46	KITCHEN CEILING - TRANSITE	810 SF
0819-47,48	CAFATERIA - CEILING - SR-JCMPD	1,348 SF
0819-49,50	ROOF - ROLLED ON/SILVER PAINT	2,109

TABLE 2 ASBESTOS CONTAINING MATERIAL INVENTORY B1 WEST 111 MUNICIPAL DRIVE LUMBERRTON, NEW JERSEY RMG PROJECT # 090114

SAMPLE NO.	LOCATION - SUSPECT MATERIAL	ESTIMATED QUANTITY
0819-04	WINDOW GLAZING	Metal Windows only
0819-06	DOOR CAULK	ALL
0819-09	CHIMNEY PACKING - TRANSITE	4 SF
0819-10,11,12	ROOF - FLAT ROLLED ON/FLASHING	5,092 SF
0819-20	9 BY 9 FLOOR TILE WITH MASTIC-UNDER OTHER TILE AND CARPET	5,092 (2X)SF
0819-23	CEILING MATERIAL - /J-CMPD	225 SF
0819-30	TRANSITE	1,506 SF

TABLE 2 ASBESTOS CONTAINING MATERIAL INVENTORY 121 MUNICIPAL DRIVE LUMBERRTON, NEW JERSEY RMG PROJECT # 090114

SAMPLE NO.	LOCATION - SUSPECT MATERIAL	ESTIMATED QUANTITY
0804-05	BLDG #1 - WINDOW GLAZING	ALL WINDOWS
0804-08	BLDG #1 - ROOF - TRANSITE	135 SF
0804-13	BLDG #2 - REST ROOM - TILE MASTIC	40 SF
0804-14	BLDG #2 - 9 BY 9 GREEN FLOOR TILE	40 SF
0804-15	BLDG #2 BARN DOOR CAULK -WHITE/BLACK/PINK	20 LF
0804-20,21,22	BLDG #2 HVAC ROOM - DUCT INSULATION TROWELED ON	170 SF
	ACPI BEHIND DUCT INSULATION	18 LF
0804-23	BLDG #2 HVAC ROOM - PIPE FITTING	ALL FITTINGS
0804-28	BLDG #3 CONCRETE FLOOR - MASTIC	160 SF
0804-35	BLDG #3 FOYER TILE - RED	8 SF
0804-36	BLDG #3 FOYER TILE - MASTIC	8 SF
0804-45	BLDG #3 JOINT COMPOUND	295 SF

NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1)				Nome of Dec	11.11	210	(2)				W.		
7/28/15				Name of Bui	liaing (A STATE OF THE PARTY OF THE PAR	rator (2) Mile Nor	th, LLC	JUL 2	7	33	2	
	l Notific	cation etification		Street Addre			horage D	rive					
[X] Emer		including		City, State, Z	Zip Cod		River, N	J 08753					
	fication) cellation			Name of Cor		unningha	m	Т	Telephone Number				
			FAG	CILITY INF	ORM	ATION							
Name of Facility Where Abatement is Taking Residence	Place (3	3)					Type of	Facility (4)	School (k-12)				
Street Address 4 Anchorage Drive	e							[] [x]	Subchapter 8 (o Other (i.e., priva homes, etc.)				dings,
City	Coun	ty (6)		County Code (STATE USE	(7) ONLY)	Square f	eet 00 sf	# of Floors	Bld	g. Age	80	
Toms River	Ocea	an							being demolished)		30	
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCM No.		Name of	Abatement	Contractor		Inc			
Street Address	3					Street Ad	ldress		oute 9, Unit 61		8		
City, State, Zip Code						City, Stat	te, Zip Cod	e		0-1-0-0	755 1	271	
Project Manager for Monitoring Firm	Number			Telephon 732-34	e Number	TOMS	License 1 00624			2/1			
Scheduled Start Date (10) 7/29/15		Scheduled 0 7/30/1		ion Date (11)			OSHA Mo		L. Analytical				
Occupancy Status During Abatement (Check of X] Facility Closed/Vacated			d of Abo	tement		Street Ad	ldress		telton Road				
[] Abatement Performed						City, Stat	te, Zip Code	10 (S. 40 (S))))))))))))))))))))))))))))))))))))					0
Other – Describe									way, New Jers	ey 088	354		
Scope of Work (Check all that apply)						[]		ontainment Enclosure	with Negative Pre-	ssure			
[] >3 sf or ≥3 lf		[]	Renova			[]		bag Procedu	ire				
[X] ≥160 sf or ≥260 lf		[x]	Demol	ition		[x]	Non-E	exempted (*) and Non-Friable	Procedi	ure		
		T. T	505		-					Aba	tement	Туре	
Location of	1	Is Location Normally us				Descriptio estos-Con			Amount	R	R	Е	Е
Asbestos-Containing Material (ACM)		Solely by			M	laterial (A	.CM)		(Specify SF	E M	E P	N C	N C
TO BE ABATED in facility	Main	tenance/Cu Staff	istodial			thermal s			or LF)	O	A	A	L
(13)		(12)			insu	lation, sur VAT, o				v	I R	PS	S
*****		()			othe	r miscella				A	1	U	U
8 8 2	N/A							L		L E	R E		
Exterior		Asbestos	siding	3			1200 sf	X					
Name of Registered Waste Hauler		NJDEP Waste	a Unite	ID No. 1 C.	hio 37	de ecur	. 15.	- 6D	17 100				
Guardian Contracting, Inc.	l r		е нашег 0223		bic Yar 3	ds of Wast		e of Register R.R.F.	red Landfill				
City, State				sal Date /	-	City, Sta	te	4	,				
Toms River, New Jersey Completed by (Print or Type)	Title			8// /5 Signature		Tullyto	own, Pen	nsylvania	1	Date		-	
Nicholas Fernicola		ct Manage	er) Signature	\ c	Obel	_	+1/	1	1200,000	8/201:	5	

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

NOTIFICATION OF ASBESTOS ABATEMENT

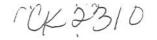
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1)	July 28, 2015				Name of I	Building C	wner/Oper Baysid		(2) Iarine Const	ruction	-	7	3.	5 3	2
Agencies Notified [x] EPA [] DEP	[] Amer	l Notificat nded Noti	fication		Street Add			dsal	ll Street		772 5				
[x] DOL	520 1 22 STATE STATE	ndment #_ gency (in	Yes Need		City, State	s, z.ip Cou		own	, NJ 08758						
[] DCA	justif	ication) ellation			Name of 0	Contact Adam				Telepho	one Number				
				FACI	LITY IN	FORM	ATION								
	patement is Taking sidence	Place (3)	0					Ту	pe of Facility (4	Scho	ool (k-12) chapter 8 (oth	41	l- 12\		
Street Address	Cedar Road								[x]	Othe	er (i.e., privat es, etc.)			al build	lings,
City		County	(6)		County Co. (STATE U		2	Sq	uare feet 1000 sf	# 0	of Floors	Bldg	g. Age	0	
Bayville		Ocean						Cu	rrent Use (Prio	000	demolished)				
Name of Monitoring Firm 1		Owner (8)			ASCM No.		Name of	Abat	ement Contract	tor (9)		T			
Street Address	1				Street Ad	dress	S		ntracting,	inc.					
City, State, Zip Code					City, Stat	e, Zi		Route	9, Unit 61						
Project Manager for Monito	oring Firm	Number			Telephon		Toms	s River,	New Jers		755-1	271			
77 (27)	oring rinn		35 000				732-349	9-99	932		License N 00624	umber			
Scheduled Start Date (10) 7/28/15			Scheduled 7/30/1		n Date (11))	Name of	OSH	IA Monitor E. M	S I. An	alytical				
[] Abai	lity Closed/Vacated tement Performed (d During I	Entire Perio	od of Abate			Street Ad City, State		s 1056	Stelton					
[] Othe	er – Describe						,,	•		itaway,	New Jerse	y 088	54		
Scope of Work (Check all t	hat apply)						[]		Full Containme		Vegative Pres	sure			
	f or ≥3 lf) sf or ≥260 lf	11	[] [x]	Renovati Demoliti			[] [x]		Glovebag Proce Non-Exempted		Non-Friable I	Procedu	ire		
												Abat	ement '	Гуре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) Is Location Normally used Solely by Maintenance/Custod Staff (12) YES NO N/						Asb M (i.e., insu	Description estos-Con laterial (A , thermal s lation, sur VAT, o er miscella	taini CM) syste rfacii r	ing) ems ng,	(S	Amount pecify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E
Exterior		Asbest	os sidin	g			10	00 sf	X						
		-								_					
Name of Registered Waste Guardian Co.	te Hauler I 0223	D No.	Cubic Yar	ds of Waste	e	Name of Regi T.R.R.F.		ndfill		L					
City, State Toms River,	850. 850			Disposa 7/3 1/1		The state of the s	City, Sta		Pennsylvar	CERLETTER.					
Completed by (Print or Type Nicholas Ferr	e)	er	Signature	e \/	7 Lullytt	JWII,	,r.cinisyivar	па	/	Date 7/28					
		* 17	w	i1 · · · ·	C 1	. 5.	11	,	11						

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

CK# 25241

Date of Notification (1) 07/27/15				Building Coolleg				52.00			L 3		n di	7	
Agencies Notified Type Notification		S	Street Ac											-	
		C	City, Stat	e, Zip Coo h, NJ 07	ie										
□ Emergency (ir justification) □ DCA □ Cancellation	ncluding	1000		Contact niel Con	nelly				Tele	phone N	umber				
			FACIL	ITY INFO	RMA	TION			-						
Name of Facility Where Abatement is Taking RCNJ - Academic Building	Place (3)							of Facility (4) School (K-12	2)						
Street Address 505 Ramapo Valley Road							×	Subchapter 8 Other (i.e. pri etc.)				lding	js, l	nome	s,
City (5) Mahwah							Squa	re Feet	# of 2 +	Floors	125	Bldg 50 -		je	
County (6) Bergen			County C	ode (7) ISE ONLY)	-		Curre	nt Use (Prior	r if beir	ng demoli	shed)				
Name of Monitoring Firm Hired by Building O USA Environmental Management, I			ASCM	No.				tement Cont acting & E			l Con	sul	ing	, Ind	Э.
Street Address 344 West State Street						9334 533	Addres Rout								
City, State, Zip Code Trenton, NJ 08618								ip Code J 07470							
Project Manager for Monitoring Firm Mr. William Weisgarber			elephor	ne No. 6-8101			none N 628-9			License 00408	No.				
Start Date (10)	Scheduled (08/10/15	Comp	pletion [Date (11)				HA Monitor	ıltants	s. Inc.	65				
Occupancy Status During Abatement (Check	Only One)					W 100 Miles	Addres	ment promise		•					-
Facility Closed/Vacated During Entire Pe	8 8	teme	ent			1 1 2 2 2 2 2 2 2		garaw Roa	ad, Bl	dg. #34	Α				
Abatement Performed Outside of Normal Other – Describe:			5111		_			ip Code , NJ 07410	0						
Scope of Work (Check All That Apply)		- 44.5						•					_		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	X Ren		1000				Mir	I Containment ni-Enclosure ovebag Proce	edure						
						Ľ	No.	n-Exempted	(*) and	d Non-Fri	able Pr	1522		ment	
	Is Lo											AL	Typ		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used S Mainte Custodi	olely	y by ce/		os Co therm surf	escriptior ntaining N al system facing, VA miscellar	Material s insula AT, or		(S	mount pecify or LF)	Removal	Loban	Donair	Encapsulate	Enclosure
G Wing - Penthouse	Yes N	lo	N/A		Flo	or Cove	erina		1:	5 SF	X	+	-	W.	
		-					3				-	+	+		
												+	+		
											-	+	-	_	
Name of Registered Waste Hauler		NI	IDEP W	acto	Cuk	c Yards		Name of R	onist-	rod l and	611				
J.R. Contracting & Environmental Co	onsul., Inc	На	auler ID 819		of W			Grand C							
City, State Wayne, New Jersey					Disp	osal Date		City, State Pen Arg		ennsylva	ania				
Completed by Jerry Bijelonic	Title Project	Mar	nager			Signature	e a				Date 07/27	15			



July 24, 2015					Building Auto Gro		perator	(2)			uul 3				
Agencies Notified	Type Notification			Street A 955 Ro	ddress oute 9 N	orth									
DEP DOL	Initial Amended Amendment	#_1			te, Zip Co Amboy		379								
× DOH	Emergency justification)		_	Name of	Contact					I Tel	enhone Nu	mber			
☐ DCA	Cancellation				O'Hare	DMAT	ON			1.					
Name of Facility Where		g Place (3)	FACI	LITINE	JRIVIATI	ON	Туре	e of Facility ((4)					
DCH Brunswick To	yota			-5-71					School (K-1						
Street Address 1504 US Highway	1							×	Subchapter Other (i.e. petc.)				dings,	home	es,
City (5) North Brunswick								Squi 326	are Feet	# or 2	f Floors	В	ldg. A	ge	
County (6) Middlesex					Code (7) USE ONLY,			Curr	rent Use (Pri	or if bei	ng demolis	hed)			
Name of Monitoring Firm		Owner (8)		ASCN	l No.			of Ab	atement Cor			- 1730			
Sky Environmental	Services Inc.								truction Co	orpora	tion				
Street Address 140 Boulevard							100000000000000000000000000000000000000	Wato	chung Ave	nue					
City, State, Zip Code Mountain Lakes, N.	J 07046						100 to 100 miles		Zip Code ange, NJ (7052					
Project Manager for Mor Leonid Shereshevs				Telepho 973-58	ne No. 38-4821		Teleph 973-		No. 2900		License N 01231	10.			
Start Date (10) July 20, 2015		Schedule			Date (11)	**	(1000 PM)		SHA Monitor er Laborato		Global Inc).			
Occupancy Status Durin	g Abatement (Chec		You-nothern				Street	Addre	ess						
Facility Closed/Vac	ated During Entire	Period of A	bater	nent			2000-2012-2000-2		Cary Stree	et					
Abatement Perform Other – Describe:		nal Facility	Hour	S		_	30000		Zip Code d, VA. 232	220					
Scope of Work (Check A	II That Apply)	-		500			-	7	Moses dictor	09 1000	800 200 1				
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			enova emoli				×	M G	ull Containm lini-Enclosur lovebag Pro on-Exempte	e cedure				· A	
		Is	Locat	ion					on Exemple	u () an	d Notificial		Abate	ement	
Location		N	lorma d Sole	lly	25.00		scription						Ty	ре Г	1
Asbestos-Containing TO BE AB		Mai	intena	nce/		tos Cont thermal			al (ACM) lation.		mount Specify	ير		Enc	四
In Facil		Cust	(12)	Staff?		surfa	cing, VA niscellar	T, or	27		or LF)	Remova	Repair	Encapsulate	Enclosure
(10)		Yes	No	N/A		oulet 1	moochar	10000	,			/al	=	ilate	лге
Roofir	ng		X			го	ofing to	ar		10	00SF	X			
											X				
Name of Registered Was			17,000	JDEP W		Cubic of Wa	Yards		Name of	Registe	ered Landfil	ı			
Be Construction Cor	poration			aulei ID	.10.	OI VVa	-		Tullyto	wn Fa	cility				
City, State West Orange, NJ 07	052					Dispos	sal Date		City, Stat		4				
Completed by		Title				S	jonature		a He	//		ate	2015		
Barbara Reed		Presid	aent			//	Bill	rec	a Kl	ed .	0	7/24/2	2015		

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

					and 12:120-7)			1			
Date of Notification	1 (1)		Name of Buil Ben Was		Owner/Operator	(2)					
7-28-15					ııaıı						
Agencies Notified	Type Notificat	ion	Street Addre		whom Monne		1	Li			
[]EPA	[X]Initial Notificat		44 Whit	ting	gham Terra	ice					
[]DEP		cion	City, State,								
[X]DOL	[]Amended Notificat	tion	Millbur	n, N	7,07041						
[X] DOH	10.100000000000000000000000000000000000		Name of Cont	act		Telephor	ne Number				
[]DCA	[]EMERGENCY		Ben Was	sem	nan	1					
	[]Cancellat:	ion									
Name of Facility Whe	are Abstement i	e Tabir	The Way To Angel	ITY I	NFORMATION	Type of Facil	its (4)				
Same as above		S IGNII	ig Flace (5)								
	00					[]School []Subchap	ter 8 (Othe	er than	K-12	2)	
Street Addres						[X]Other (i.e., priva	ate & c	ommer	-	
							uildings, h				
City (5	c	ounty ((6) Essex	Cou	nty Code (7)	Square Feet	# of Floo		.dg. 89	Age	
5251 (5				10000000	ATE USE ONLY)	Current Use (hed))
	1										
Name of Monitoring E	Firm hired by B	uilding	ASCM No.	_	Name of Abate	ment Contracto	r (9)				
Owner (8) N/A					AZTECH M	IANAGEMENT	, Inc.				
Street Address					Street Addres	s					
					86 Chris	topher St					
City, State, Zip Coo	de				City, State,	Zip Code					
					Montclai	r, NJ 070	42				
Project Manager for	Monitoring Fir	m Tel	Lephone Numbe	er	Telephone Num	ber		License	Numl	per	
	*	N/	'A		(973)744	-8800		0037	1		
Scheduled Start Date	e (10) Sched	. Compl	Letion Date	(11)	Name of OSHA	Monitor					
8-6-15		8-7	7-15		N/A						
Month Day Y Occupancy Status Dur	ear Mon		only one)		Street Addres						
[X] Facility Clo					Street Addres	S					
of Abatemen []Abatement Pe		of No	rmal Facilit	v	City, State,	Zin Codo					
Hours - Desc	ribe: «OffHours	Descri	pt»	1	City, State,	Zip code					
[]other - Desc			Descript»								
Scope of Work (Check	c all that appl	у)			[] []	Containment wi	th Negative	a Prace	ire		
[X]≥3 sf or	≥3 lf	[2	X]Renovation			Enclosure	. ar nogaczy				
[]≥160 sf o	or ≥260 lf	1]Demolition		1700 T. B.	bag Procedure Tiable Procedu	ire.				
			Is.		[][(0]] [220220 2200000		Aba	teme	nt 7	lype
Location			ocation ormally		Description		Amount	R	_	E	E
Asbestos-Cor Material	0.0000000000000000 00 00		Used Solely		Asbestos-Con Material ((Specify	E	R	CA	C
TO BE AB			y Main- enance/		(i.e., thermal	N. 57	SF or	O	PA	PS	0
In Facil			stodial aff (12)		sulation, surformers or other misce.		LF)	A	I R	ŭ	UR
		Yes	No N/A				000 Maria (2000 Maria)	- 1			E
Furnace room,		1	X	Pip	e insulat	ion	21 lf	X			
and closet in	basement								-		
						I-	L				
Name of Registered V			DEP Waste auler ID No.		oic Yards Waste 1.5	Name of Regi		dfill			
AZTECH MANAG	PRIPHT, INC		7040	0		G.R.O.W.	J.		7.5		
City, State	07040			1 1 1 1 1 1 1 1	sposal Date	City, State	11	1004			
Montclair, NJ	0/042			٤	3-10-15	Morrisvi	TIE, PA	. тэо() /		
Completed By (Print	or Type) Titl	.e			Signature	1		Date			
Constantine V	ivian Pre	eside	ent		(1 V)	(16,00			8-1	.5	
					1 01	UNN		2011		-undir	

A.		0 0 1	
1	eck	11/	(23
/ 1	O POR	14	1 counts
0		1 6	

Date of Notification (1) 7/28/15					Building (lidated E						.1711	97.15		e . i-		
Agencies Notified	Type Notification			Street A 26 Lav	ddress v Drive,	Suite	В					5-	- 10-	0-11		
EPA DEP X DOL	Initial Amended Amendment		-	City, Sta	ite, Zip Co	de					7					
DOH DCA	Emergency (justification) Cancellation			Name of Ira Fin	f Contact ger					Telep	ohone N	lumbe	г			
	_			FACI	LITY INFO	DRMAT	ION			-				2012-2		
Name of Facility Where house	Abatement is Takin	g Place (3	5)						of Facility (4)							
Street Address 2252 Evans Street									School (K-12 Subchapter 8 Other (i.e. pri etc.)	(Other			uild	ings,	home	es,
City (5) Rahway									e Feet	# of F	loors		BI 67	dg. A	ge	
County (6) Union					Code (7) USE ONLY			Currer	nt Use (Prior	if being	g demol	lished)			
Name of Monitoring Firm	Hired by Building (Owner (8)		ASCN	ΛNo.				ement Contro							
Street Address							The State of the S	Addres Box 48	s 33, 4 E Ga	te Driv	ve					
City, State, Zip Code							City, S	State, Zi								
Project Manager for Mor	nitoring Firm		Telepho	ne No.		Teleph	none No 764-22).		License	No.					
Start Date (10) 7/31/15		Schedule 8/30/15		npletion	Date (11)				IA Monitor		3					
Occupancy Status Durin	g Abatement (Chec	29000000000 440					Street	Addres	S							-
Facility Closed/Vac Abatement Perform	ated During Entire F	Period of A	Abatem	nent				State, Zi			-					
Other - Describe:						_	J., 0	, (0, 0, 0,								
Scope of Work (Check A	II That Apply)															
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			Renova Demolit				×	Min Glo	Containmer i-Enclosure vebag Proce	edure						
		T	50 00	e.				_ Nor	n-Exempted	(*) and	Non-Fri	iable F			e ement	
			Locati Vormal											Ту		1
Location Asbestos-Containing TO BE AB In Facil (13)	Material (ACM) ATED ity	Use Ma	d Sole intenar todial S (12)	ly by nce/		tos Cor therma surfa	escription taining N I system: acing, VA miscellar	Material s insula T, or		(Sp	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
dining ro	oom .	1.50		X		ceil	ing plas	ster		144	4 SF	×	9	_		
first floor ba				X			ing plas				SF	x				
first floor be		Х		ceil	ing plas	ster		144	4 SF	x						
											8					
Name of Registered Was	ste Hauler		40.8	JDEP W			Yards		Name of R	egistere	ed Land	fill				
Freehold Cartage				auler ID 5939	No.	TBD			Western		s Land	lfill	-1-71-7			
City, State Freehold NJ						Dispo	sal Date		City, State Birdsbor							
Completed by A. Scott Higgins		Title Presi	dent				Signature (1	~			Date 7/28	15			

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

Date of Notification	(1)	1			Charles -	mer/Operator		12 1				
7-28-15			Jef	frey	Kus	chner Lav	₹					
Agencies Notified	Type Notificati	on	Street	Addre	ess			1211		- / -	-	
[]EPA	[X] Initial		180	Gle	n Ri	dge Ave.						
[]DEP	Notificati	on	City,	State,	Zip Co	ode						
[X]DOL	[]Amended		Mon	tcla	ir,N	J,07042						
5 - 125 - 25	Notificati			f Cont	1//	*	Telephon	a Number				
[X]DOH	[]EMERGENCY			rge			rerephon	e number				
[]DCA	[]Cancellation	on	000	-90	220211							
	1			FACII	LITY IN	FORMATION						
Name of Facility Whe	re Abatement is	Takir	ng Plac	ce (3)			Type of Facil:	ity (4)				
Same as above							[]School	(K-12)				
Street Addres								ter 8 (Other				
Street Addres							(F) (F) (F)	i.e., privat uildings, ho				
							Square Feet	# of Floor	s Bl	dg.	Age	
City (5	Cor	inty ((6) Esse	≥x		cy Code (7)	11 -					
					(STAT	TE USE ONLY)	Current Use (Prior if bei	ng der	nolis	hed))
					1							
Name of Monitoring F	'irm hired by Bu	ilding	ASC	M No.	P		ment Contractor					
Owner (8) N/A						AZTECH N	MANAGEMENT	, Inc.				
Street Address						Street Addres						
						86 Chris	stopher St	-				
City, State, Zip Cod	le					City, State,	Zip Code					
						Montclai	Lr, NJ 070	42				
Project Manager for	Monitoring Firm	Tel	Lephone	e Numbe	er	Telephone Num	ber	Li	cense	Numb	er	
	ä	N/	A			(973) 744	1-8800	1	0037	1		
Scheduled Start Date	(10) Sched.	Compl	Letion	Date	(11)	Name of OSHA	Monitor	4 0				
8-11-15		8-1	2-15	5	þ	A/N						
Month Day You Occupancy Status Dur	ear Mont		ay	Year								
	sed/Vacated Duri					Street Addres	S					
of Abatemen		of No	1 T									
	rformed Outside ribe:«OffHours I			acilit	-Y	City, State,	Zip Code					
[]other - Desc	ribe: «Other Occu	pancy	Descr	ript»								
Scope of Work (Check	all that apply)								50.000		
[X]>3 sf or	>3 1f	[2	XlReno	vation	19		Containment wi Enclosure	th Negative	Press	ire		
[]≥160 sf o				lition		[X]Glove	ebag Procedure					
1			Is			[]Non-I	Friable Procedu	re	Aha	teme	nt 1	Prope
Location	of		ocatio			Descripti	on of			T	E	E
Asbestos-Con			Used	- I		Asbestos-Cor		Amount	R	RE	C	C
Material TO BE AB		В	Solely y Mair	i-,	(Material i.e., therma		(Specify SF or	M	PA	A P	O
In Facil	ity	Ct	enance istodi	al		ulation, surf		LF)	V	I	S	S
(13)		Yes	aff (1	2) N/A	01	r other misce	ellaneous)		L	R	L	R
Basement			-	X	Pipe	Insulat	cion	15 lf	X			
												-
Name of Registered W	Waste Hauler	NJ	DEP W	aste	Cubi	c Yards	Name of Regi	stered Landf	ill	1		
AZTECH MANAG		На	uler :	ID No.	0.0000000000000000000000000000000000000	Waste 1.5	G.R.O.W.					
City, State		1	7040		Dier	oosal Date	City, State					
Montclair, NJ	07042				1000	-12-15	Morrisvi	lle, PA	1906	57		
	(5)											
Completed By (Print	Marie Commence			·	1111	Signature	7		Date			
Constantine V	ıvıan Pre	side	ent			[[1]/	11160-		7-2	8-1	.5	

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

Date of Notification	(1)		100 miles			Owner/Operato	r (2)			-				
7-27-15			Pat	ıline	Hov	ward								
Agencies Notified	Type Notificat	ion	Stree	t Addre	ss				1 30			r		
[]EPA	[X] Initial		466	6 Les	lie	Street								
[]DEP	Notificat	ion	City,	State,	Zip	Code								
[X]DOL	[]Amended		Nev	wark,	NJ,	07112								
[X]DOH	Notificat	lon	Name	of Cont	act			Telephon	e Number					
[]DCA	[]EMERGENCY			ıline		ward								
[]Dun	[]Cancellati	ion												
				FACII	ITY I	NFORMATION								
Name of Facility Whe		s Taki	ng Pla	ace (3)			Type	of Facili	ity (4)					
Same as above							1000]School						
Street Addres									ter 8 (Othe L.e., priva					
						<i>(i)</i>			ildings,					
							Squar	re Feet	# of Flo	ors	Blo	dg.	Age	
City (5	C	ounty	(6) Ess	sex		nty Code (7) ATE USE ONLY)								
					,,,,,		Curre	ent Use (I	Prior if b	eing	dem	olis	hed))
Name of Monitoring H	Nime himsel has D		~ 3.00	CM No.	J	Name of Abat		'antroata	. (0)	_				
Owner (8)	errm mrred by b	ullalli	g AS	AM NO.		AZTECH I								
N/A Street Address						Street Addre			, 1110.					
Street Address						86 Chri		er St						
City Chata Ria Ca									•					
City, State, Zip Coo	ie					Montcla			12					
		-								F:		37		-54
Project Manager for	Monitoring Fir		/A	ne Numbe	er	Telephone Nu (973) 74		0.0		Lice)37		er	
G 1 - 1 - 1 - 1 - 1 - 1 - D - 1	(10) 0-1-1	1000	98.5000	D-1-	/111						, , ,	_		
Scheduled Start Date 8-12-15	s (10) Sched	8-13		Date	(11)	Name of OSHA	Monito	or						
	ear Mon		Day	Year		21/22								
Occupancy Status Dur						Street Addre	ss							
[X]Facility Clo of Abatemen		ing Ei	icire	Period										
[]Abatement Pe				Facilit	Y	City, State,	Zip Co	ode						
[]other - Desc	ribe: «OffHours ribe: «Other Occ			ript»										
Scope of Work (Check	all that appl	у)												
fr:1>0 - 6			**1 m						th Negativ	e Pr	essu	ire		
[X]>3 sf or []>160 sf				ovation olition		[X]Min [X]Glov		rocedure						
						[]Non-	Friable	e Procedu	re		1			
Location	n of		Is ocati			Descripti	on of				Aba	teme	nt 1	Fype
Asbestos-Cor	ntaining	1	Tormal Used			Asbestos-Co	ntainir	ng	Amount		R	R	NC	N C
Material TO BE AB		E	Solel y Mai			Material (i.e., therma		oms	(Specif SF or		M	E	AP	L O
In Facil		t	enanc ustodi	e/	in	sulation, sur		100000000000000000000000000000000000000	LF)		V	A	S	S
(13)		St	aff (12)		or other misc	ellaned	ous)			A L	R	L	R
Basement		Yes	No	N/A X	Dir	e Insula	tion		20 lf		X		•	E
Dabonich		-	-	X		ler	01011		18 SF		X			_
				-	202				10 01		-		-	-
Name of Registered V	Waste Hauler	N.	JDEP W	l Naste	Cul	oic Yards	Name	of Regi	stered Lan	dfil	1			
AZTECH MANAG		H	auler	ID No.	1.00	Waste 1.5	13 1000	R.O.W.						
City, State	e. account occasions of the comment	1	7040	,	Die	sposal Date	Cit	, State						
Montclair, NJ	07042				10000000	3-14-15	100000000000000000000000000000000000000		lle, PA	1	906	7		
						- consumer described				- av ==0				
Completed By (Print					. 27 (1999)	Signatur	e			1 2 3	ate			
Constantine V	ivian Pre	side	ent			C	liuc	~			7-2	27-	15	<u> </u>



July 23, 2015					Building			(2)								
Agencies Notified	Type Notification			Street A	ddress ospect	Street			× ×		UUL	Í				
EPA DEP DOL	Initial Amended Amendment	#			ite, Zip Co											
□ DOH DCA	Emergency justification) Cancellation				f Contact n Larkin		75			Tele	ephone	Num	oer			
					LITY INFO		ON			-			-		-	
Name of Facility Where	Abatement is Takir	g Place (3	3)	17101		- Tan 111	-	Тур	e of Facility (4))						
The Village School									School (K-12		122					
Street Address 100 Prospect Stree	t							×	Subchapter 8 Other (i.e. pri etc.)					lings,	home	es,
City (5) Waldwick									uare Feet 000	# of 2	Floors		7	ldg. A 5	ge	=
County (6) Bergen				County (Code (7) USE ONLY)			rrent Use (Prior	if bei	ng dem	olishe	ed)			
Name of Monitoring Firm Sky Environmental		Owner (8)		ASCN 0035					batement Contraction Cor							
Street Address				10000			Street	Add	ress							
140 Boulevard City, State, Zip Code									chung Aven Zip Code	ue						
Mountain Lakes, No Project Manager for Mon				Telepho	no No				ange, NJ 07	052	1:	- NI-				
Leonid Shereshevs				973-58	38-4821		501000	669	-2900		Licens 0123		•			
Start Date (10) July 29, 2015		Schedule July 31			Date (11)				SHA Monitor er Laborator	ies C	alobal	Inc.				
Occupancy Status Durin	-	-					Street									
Facility Closed/Vac Abatement Perform	ed Outside of Norr	Period of A	Abater / Hour	nent s					Cary Street Zip Code							
Scope of Work (Check A							Rich	mor	nd, VA. 2322	20						
Scope of Work (Check A	ш тпас Арргу)	X =	Renova	ation			Г	٦.	Full Containmer	st with	Noneti	vo Dr				
× ≥160 sf or ≥260 lf			Demoli				E	1	Mini-Enclosure Glovebag Proce		Negau	ve Pi	essui	е		
									Non-Exempted		d Non-F	riable	Pro	cedur	е	
		1000	Locat												ement pe	
Location Asbestos-Containing		Use	ed Sole	ely by	Asbes		scription taining N		rial (ACM)	А	mount					
TO BE AB	ATED		iintena todial			thermal		s ins	ulation,	(S	Specify or LF)		Rer	Re	nca	Enc
(13)	ity		(12)				niscellar			SI	UI LF)		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A					SI .						ate	O)
Mechanica	l Room	-	X	-		Pipe	Insula	tion	1	5	OLF		X			
			-													
													-			
Name of Registered Was			5.53	NJDEP W Hauler ID		Cubic of Wa	Yards		Name of R	egiste	red Lar	ndfill				
Be Construction Cor	poration			iaulei ID	NO.	Oi wa	316		Tullytown	n Fac	cility					
City, State West Orange, NJ 07	052				Dispos	sal Date		City, State Tullytowr	n, PA	4						
Completed by Barbara Reed		Title Presi	ident			S	ignature	he	ua No	Ted	1	Date 07/		015		

CK4233

Date of Notification (1) 7/29/15				Name	of Building	g Owner/	Operato	r (2)			JUL	Ġ		· de		
Agencies Notified	Type Notification	1			den Shij Address	pyard a	nd Ma	ritime	e Museun	n	00,	U		5.5		
□ EPA	X Initial				-1912 B	roadwa	ay									
DEP X DOL	Amended Amendmen	. 44			tate, Zip C									-	-	
Freed	Emergency	(includin	g		den, NJ											
DOH DCA	justification Cancellatio			113300000000000000000000000000000000000	of Contac eslie W	-				Tele	ephone	Nur	nber			
Name of Facility Where	Abatament is Taki	on Diana	(0)	FAC	ILITY INI	FORMAT	ION					_		-	-	
Camden Shipyard	and Maritime N	luseum	(3)					Тур	e of Facility							
Street Address								H	School (K- Subchapte	12) er 8 (Othe	er than	K-12	2)			
1910-1912 Broadw	ay							×	Other (i.e. etc.)	private 8	comm	erci	al bui	ldings	, hon	nes,
City (5) Camden								1	are Feet		Floors			Bldg.	Age	
County (6)				County	Code (7)				000	2			1	÷06		
Camden				(STATE	USE ONL	y)		Mu	rent Use (Pr seum	Tor IT beir	ng dem	olish	ed)			
Name of Monitoring Firm AET	Hired by Building	Owner (8)	ASC	M No.		Name	of Ab	atement Co	ntractor	(9)				-	
Street Address							Street		ces, LLC							
28 N Pennell Road									_{ess} ncoln Higi	hway, §	Suite 5	500				
City, State, Zip Code Media, PA 19063							City, S	State, 2	Zip Code							
Project Manager for Mon	itorina Firm		-	Telepho	na Ma				19341							
Eric Sutherland	g			91-0114	1	Teleph 484-				Licens 0116).				
Start Date (10) 8/10/15	***	Schedul 8/14/1		mpletion	Date (11))	Name EMS		SHA Monitor					-		-
Occupancy Status During	Abatement (Chec		_				Street	-	200							
Facility Closed/Vaca Abatement Performe	ed Outside of Norn	nal Facilit	Abate	ment rs			200 1	Route	e 130 Nor Zip Code	th						
Other - Describe: A	II work in segregate	ed areas				_			son, NJ							
Scope of Work (Check Al	i inat Apply)	×					_	7								-
≥160 sf or ≥260 lf		Contraction of the last of the	Renova Demoli				×	I Mi	ill Containm	ent with I	Negativ	e Pr	essu	re		
							×	- U	ovebag Pro	cedure	Non-Er	riable	Dro	oodur	_	
			Loca						- Zaompio	a () and	NOTE	lavit		Abate	emen	t
Location Asbestos-Containing			Norma		Ashaa	Des	scription	of		9210			-	Ту	ре	
TO BE ABA	TED		intena todial	ince/ Staff?	(i.e.	tos Cont thermal	systems	insul	ation,		nount pecify		ZD.	77	Enc	g
(13)	j		(12)			surfac other m	cing, VA	T, or eous)		SF	or LF)		Remova	Repair	Encapsulate	Enclosure
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Name of Registered Waste ecoservices, LLC	e Hauler		1 22	IJDEP W lauler ID		Cubic `of Was			Name of I			Ifill				
City, State						4			Grows I	andfill						
Exton, PA						Dispos TBD	al Date		City, State				*			
Completed by					gnature		Morrisvi	iie, PA		Data						
Jack Bally		Sr. Pı	oject	Manag	ger				Sally	(D)		Date 7/29	9/15			

Date of Notification (1)			_		Na	me o	of Building	Owner/Operator (2)			9 +a - a		
7 /	27 /	15			100			Property Manage		ruction	nn).	_		1-5
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Name of Facility Where A	Abatement is 7	Taking	Place	(3)					Type of Facility	(4)				
Residential House									School (K-12		40)		200,	
Street Address					P. S. S.				Other (i.e., p	3 (Other than K-	12) nercial l	nuilding	15	
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Name of Monitoring Firm	Hired by Build	ding C	wner	(8)	ASC	CM N	lo.	Name of Abateme	ent Contractor (9)	(11-11-11-11-11-11-11-11-11-11-11-11-11-				
Bio Terra Solutions	3							ALL PRO MA	NAGEMENT L	LC				
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Union, NJ								Garfield, NJ	07026					
Project Manager for Mon	itoring Firm			Te	lepho	ne N	0.	Telephone No.	\$1.00 SC 10 PK	License No.				-
Rick Eustaquio				1	973-4	94-3	3762	973-928-4888		1188				
Start Date (10)	5	Sched	uled C	omp	letion	Date	(11)	Name of OSHA M	Ionitor					_
7 /21 /			9/				3.00	ALL PRO MA	NAGEMENT LI	LC				
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Scope of Work (Check all	I that apply)							Carriera, 140	01020				_	
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△ ≥ 100 Si 0i ≥200 li			△ De	IIIOII	uon			☐ Glovebag	g Procedure mpted (*) and No	n-Friable Proced	lure			
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Newark Carting					Haule		No.	Waste	IESI Landfi					
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Raymond Blum	124	Pr	oject	Mai	nagei	•		Coll		_	7/	27/	15	'

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Date of Notification (1)				Name	of Buildin	g Owner/Operator ((2)			1		-
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City (5)							Square Feet	# of Floors	В	ldg. A	ge	
Woodbridge, NJ 07095												
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Name of Monitoring Firm Hired by Bui	lding Ov	wner (8	3)	ASCM	No.	Name of Abateme	ent Contractor (9)					
Bio Terra Solutions						ALL PRO MA	NAGEMENT L	LC				
Street Address						Street Address						-11014
P.O. Box 1224						27 Outwater	Lane					
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Union, NJ						Garfield, NJ	07026					
Project Manager for Monitoring Firm			Tele	phone	No.	Telephone No.		License No.				
Rick Eustaquio			9	73-494	-3762	973-928-4888	1	1188				
	Schedu	led Co	mple	tion Da	te (11)	Name of OSHA N	lonitor	A.I				
				3_ / _	15_	ALL PRO MA	NAGEMENT L	LC				
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Abatement Performed Outside of N Time of Abatement:AM	ormal F	acility	Hou	s - Des	cribe	City, State, Zip Co	ode					
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Scope of Work (Check all that apply)						П г о						
≥3 sf or ≥3 lf		Ren	ovati	on		☐ Mini-Enc	ainment with Neg	gative Pressure				
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TO BE ABATED				nce/ Staff?		., thermal systems	insulation,	(Specify	Removal	Repair	cap	Enclosure
IN Facility (13)			(12)	otun:		surfacing, VAT, other miscellane		SF or LF)	/al		Encapsulate	ure
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Exterior of House] [\boxtimes	Transite	Siding		4,000 SF	\boxtimes		\boxtimes	
Upper Level Kitchen]			\boxtimes	Pebble	Floor Tile		140 SF	\boxtimes		\boxtimes	
Lower Level Utitilty Room & Clo	set [\boxtimes	White F	loor Tile		60 SF			\boxtimes	\boxtimes
Name of Registered Waste Hauler			1 1	JDEP V		Cubic Yards of	Name of Regis	tered Landfill			// T	
Newark Carting			H	auler IE 04509	Page Action (Carlotte)	Waste As Needed	IESI Landf					
City, State				J 7003		Disposal Date	City, State				174	
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Date of Notification (1)						ding Owner/Operat				-/		
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	otification	on			est Addres				1	- 7	2007 :	
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Woodbridge, NJ 07095				18			Square Fast	# of Floors		Blog.	Age	
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Bio Terra Solutions			***			ALL DEC V	MANAGEMENT	9)				
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P.O. Box 1224				32//								
Dity, State, Zip Code		_				27 Outwate						
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Project Manager for Monitoring Pirr	n .		TY	lephoni	h/a	Garrield, N.	07028	<u></u>				172
Rick Sustaquio					4-3762	Telephone No.		License No.	-			_
Start Date (10)	18 obe	dulad	Domel	Allen D	sts (11)	973-925-486		11.98				
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Newark, NJ

Raymond Blum

Completed By (Print or Type)

page 2 07/16/2015 20:07 (FAX) P.003/012 State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:80 and 5:18) Date of Notlineston (1) Name of Building Owner/Operator (2) 17 15 Division of Property Management & Construction Aganoles Notified Type Notification Strael Address EPA Initial IX 20 W. State Street, 3rd Fir. S DOLWO ☐ Amended MOD E City, State, Zip Code Amendment # D DCA Emergency (including justification) Trenton, NJ 03606 (NJAC 5:23-8) Name of Contact Telephone Numb Cancellation Rick Ferrers FACILITY INFORMATION Name of Pacility Where Abetement is Taking Piece (3) Type of Facility (4) Residential House School (K-12)
Subchapter 5 (Other than K-12)
Other (i.e., private and commercial buildings, Straet Addraga 880 Lewis Streat homes, etc.) City (8) Square Feet # of Floors Woodbridge, NJ 07085 Bidg. Age County (8) County Code (7)(STATE USE CALLY) | Current Use (Prior If being demolished) Middlesex Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Bio Tarra Solutions ALL PRO MANAGEMENT LLC. Street Address Street Address P.O. Box 1224 27 Outweter Lane City, State, Zip Code City, State, Zip Code Union, NJ Garffeld, NJ 07026 Project Menager for Monitoring Firm Talaphone No. Talaphona No. License No. Rick Eustaquio 973-484-3762 973-928-4888 1188 Start Data (10) Schaduled Completion Date (11) Name of OSHA Monitor 7 / 31 / 9 / 23 / 15 15 ALL PRO MANAGEMENT LLC Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 27 Outwater Lane Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Goda Time of Absternant: ____AM-_ PWV_ Garffeld, NJ 07026 Full Containment with Negative Pressure
Mini-Enclosure
Glovebes Pressure Scope of Work (Check all that apply) 23 af or ≥3 |1 ≥ 160 af or ≥280 |1 Renovation
Demoifion Glovebag Procedure Non-Exempted (*) and Non-Frieble Procedure la Location Abatement Type Normally Location of Description of . Asbesics-Containing Material (ACM) Used Salaty by Asbestos Containing Material (ACM) Maintenance/ Amount TO BE ABATED (i.e., thermal systems insulation, (Specify IN Fadlity Custodial Staff? surfacing, VAT. or SF or LF) (12) other miscellensous) Yea No NA Parch X Window Glazing 20 SF 23 X Exterior of House X Transite Siding 3.000 SF X Ø Name of Registered Wasta Heuler NJDEP Waste Cubio Yerds of Name of Registered Landilli Newark Carting Hauler ID No. Wasta IESI Landfill 04509 As Needed Disposal Data

* Do not use this form for sebestos licensure exempted sotivities.

Project Manager

TRO

Signature

Cliv. State

Sothlehem, PA

Date

7-16-15

P.004/012

CK 1175

NOTIFICATION OF ASBESTOS ABATEMENT

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Date of Notification (1)	17 /	-		Na	ma of Bull	ding Owner/Operato of Property Mana	× (2)	1	<u>بننا</u>	1	-	
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City (3)				187		- 11	LIMITED 6	·/	-1 500000	- Callett	Mai.	3
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Bio Terra Solutions	•	<u>.</u> , .	. 1-1	1	n NO.	Name of Abaten	nent Contractor (9) .				
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City, State, Zip Code		-				27 Outwater Olly, State, Zp C						
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Project Manager for Month	oring Firm		Tre	laphone	No.	Telaphone No.	07025				-568	
Rick Eustaquio					4-3762	973-928-428		· License No),	10 100		. Selleni
Start Date (10)	8ch	eduled			ste (11)	Name of OSHA		1188				
7 / _21_ /	15	9	1 _3	3 /	15		NAGEMENT	110				
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IN Facility (13)		GUS	(12)	Staff?	1	TAV goloshus	10	(Specify SF or LF)	3	1	9	DBC
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City (8)							I IVVIII SO, DI	D.)		- At this	S.OLEI	Pulla	ngs,	
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Middlesex						7,002 0712	7 Gutrent Use (Prior ;	r baing i	demok	ished)		
Nems of Monitoring Firm Bio Terra Solutions	Hired by Bulldli	ng Owns	f (8)	ASC	M No.	Name of Abata	ment Contractor (10					_	_
Street Address						ALL PRO N	MANAGEMENT	110						
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Raymond Blum

A49-41 JAW 13

07/18/2015 20:08 (FAX) P.008/012 CK 1176 State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:80 and 5:18) Date of Notification (1) Name of Building Owner/Operator (2) 7 15 Division of Property Management & Construction Agendes Nothed Type Notilication Bireal Address EPA Minitial & 20 W. State Street, 3rd Fir. ₩ DOLWO Amended Ø DOH City, Stale, Zip Goda # InembnemA D DCA Emergency (including Tranton, NJ 08608 (NJAC 5:23-8) justification) Name of Contact Cancellation Talephona Number Rick Ferrara FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Fadility (4) Residential House ☐ 8 chool (K-12) Street Address Subchapter 6 (Other than K-12)

Other (i.s., private and commercial buildings, 581 Watson Ava. Olly (5) homes, etc.) Square Feet Woodbridge, NJ 07098 W of Floors Bldg. Aga County (8) County Code (7)(STATE USE ONLY) Current Use (Prior If being demolished) Middlesex Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abstement Contractor (9)
ALL PRO MANAGEMENT LLC 510 Tarra Solutions Street Address Street Address P.O. Box 1224 27 Outwater Lans City, State, Zip Code . City, State, Zip Code Union, NJ Garrield, NJ 07028 Project Manager for Monitoring Firm elephone Nà. Telaphone No. Rick Eustraulo License No. 873-494-3782 979-928-4898 Start Date (10) 1158 Scheduled Completion Deta (11) Name of OBHA Monitor 7 / 21 / 15 9 / 23 / 15 ALL PRO MANAGEMENT LLC Occupancy Status buring Abatement (Check only one) Street Address S Facility Closed/Vacated During Entire Period of Absternant Abatement Performed Outside of Normal Facility Hours - Oceanibe 27 Outwater Lane City, State, Zip Code Time of Abatement: ____AM-__ __PM/ Garfield, NJ 07028 Scope of Work (Check all that apply) Euli Containment with Negative Pressure
Mini-Enclosure
Giovebag Procedure
Non-Exempted (*) and Non-Friable Procedure ☐ ≥3 af or ≥3 if ☑ ≥160 af or ≥280 if Renovation Demolition la Location Normally Loostian of Abatement Type Asbestos Containing Material (ACM) Used Sciely by Description of Asbastos Containing Material (ACM) Removal Rapair **Encapeutate** Enclosure Maintenance TO BE ABATED Amount (i.e., thermal systems insulation, IN Facility (Specify SF or LF) Custodial Staff? surfacing, VAT, or (13) (12) Other miscalisneous) Yes No NA Interior - Throughout X Spackling seeon. w/Drywall 5,610 AF X X Upper Level Kitchen X Pabble Floor Tile 140 85 X Lower Level Utility Room & Closet X White Floor Tile 86 8F N Exterior of House \Box X Transite Siding 4.000 SF X 0 Name of Registered Weste Hauler \Box NJDEP Weste Qublo Yards of Name of Registered Landill Newark Carting Hauler ID No. Waste IESI Landfill 04509 As Needed Dispossi Oata City. Stale City, State Newark, NJ THO Bethlehem, PA Completed By (Print or Type)

Project Manager

Signalum

7-16-15

Do not use this form for asbestos licensure exempted activities.

(FAX)

P.008/012

CK 1175

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

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Dracinty Closedy/Jacate Abatement Performed Time of Abatement: Dope of Work (Check all ≥3 af or ≥3 if ≥160 af or ≥280 if	d During Entire P Outside of Norm AM- that apply)	eriod o	Abala V Hou PM Bnovati amolik Locat Norma	can ion	AM	27 Outwater L City, State, Zip Co Garriald, NJ (Full Conta Mini-Encis Othersbag Non-Exem	de 07028 Nament with Ne 0284's Procedure Procedure noted (*) and No			
Time of Abstement Check all	od During Entire P Outside of Norra	eriod o	Abata by Hou PM snovati amotik	rs - De	AM	27 Outwater L City, Stale, Zip Co Garrield, NJ (or or other states of the stat			
Time of Abstement Check all	od During Entire P Outside of Norra	eriod o Bi Pacili PM/	Abata by Hou PM	rs - De	AM	27 Outwater L City, Stale, Zip Co Garrield, NJ (or or other states of the stat			
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Abatement Performed Time of Abatement:	od During Entire P Outside of Norra	erlod o	Abala		AM	27 Outwater L City, Stale, Zip Co	de			
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A FRONITY Closed/Vacate	d Dudge Philes a	melad							-	designation of the last
		CIC ANNU	Onal			Street Address				
Occumancy Sfetus Nuts	Absterner (75)	44	1_2		18	ALL PRO MA	NAGEMENT	LLG		
7 / 21 /	16	DDINDS Q	Compl	stion D	ata (11)	Name of OSHA M				
Start Date (10)		-d.7	9	78-49	4-3762	973-925-4888		1188		
Rick Eustaquio	noing rim	25		aphone		Telaphone No.		License No.		
Project Manager for Moni	Hoslaw III			-		Garffeld, NJ				
Union, NJ						City, State, Zip C				
City, State, Zip Code		10			Matter of the Committee	27 Outwater	Lane			
F.O. Box 1224						Strael Address	- Transmitti			•
Blo Terra Splutions Street Address	1					ALL PRO MA	NAGEMENT	(*)		
Nema of Monitoring Firm	hired by Bulldin	DWN	r (8)	ASCI	M Na.	Name of Abatem	ant Contractor	ral .		
Middlasax						The state of the s	CUITANT USS (Prior II being demo	ollahad)	
County (8)				Co	unty Code	(7) (STATE WE ONLY)	Cuttant Line			
Woodbridge, NJ 0	17096			- 51		E.E	odneta 1.98f	# of Floors	Bldg	. Age
City (8)				;		世級	Squere Feet			
36 Sewaren Ave							Q Other (I.e.	er 8 (Other than K- private and comm	nerolal bull	dings.
Street Address				-		1.10	3 subchapt	•12) or 8 (Other than L.	12\	
Residential House)			23.		1 6	Type of Feel			- 5
Name of Facility Where	Abstement is To	king Pl	PC8 (3)	<u> </u>	70.011	INTOKINE ION	18-12-		Ç	
						INFORMATION				175
	☐ Cancalletto	n			lick Farre		** * *	Telephone N	nuper	· 73- v-
(NJAC 8:23-8)	Justification	1)	aud	Na	mu of Con	ad .				1
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	Type Notice	llan		Sh	set Addres		Soutestire GO	ristruction	1	ï
⊠ EPA	1 V. La . 3 L II			1	Division o	of Property Mana	Gament & Co	mala sta	1	3
Agendes Notified		15			and of Sulf	ang Owner/Operato	101		- 4	
Ø EPA		15		Na	me of Bull	7		<u> </u>	3 1	

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

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Data of Natification (4)					- N	(5 ""					1	384	<u> </u>
Date of Notification (1)	27 /	15			Name	of Building	g Owner/Operator (2)	······································				
					DIV	ISION OF I	Property Manage	ement & Cons	truction 15 JU	L 31	AM	۶.	1 9
Agencies Notified EPA	Type Notific	ation			Street	Address						~	1 /
⊠ DOLWD	☐ Initial ☐ Amended	4					Street, 3rd Flr.		ASSES & I	103 /	n.	TO	~ ·
⊠ DOH	Amendm	<u> </u>			(0.5	State, Zip C			ă !_	ICEM	VIII	11/1	JL.
DCA				1		nton, NJ				2.17	2155	3	
(NJAC 5:23-8)	justificati		-		Name	of Contac	t		Telephone Nu	mber			
	☐ Cancella	tion			Ric	k Ferrera	l						
					FA	CILITY IN	IFORMATION				-		
Name of Facility Where A	batement is	Taking	Place	(3)				Type of Facility	(4)				
Residential House								School (K-12					
Street Address								Subchapter	8 (Other than K- rivate and comm	12)	iildin		
52 Claire Avenue								homes, etc.)		ierciai bi	ullaling	J S,	
City (5)								Square Feet	# of Floors	В	dg. A	ge	
Woodbridge, NJ 07	095							9574					
County (6)					Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demo	olished)			
Middlesex													
Name of Monitoring Firm	Hired by Buil	ding O	wner ((8)	ASCM	No.	Name of Abateme	ent Contractor (9)	N.				
Bio Terra Solutions							ALL PRO MA	NAGEMENT L	LC				
Street Address							Street Address						
P.O. Box 1224							27 Outwater I	Lane					
City, State, Zip Code							City, State, Zip Co	ode					
Union, NJ							Garfield, NJ						
Project Manager for Monit	oring Firm			Tele	phone	No.	Telephone No.		License No.				
Rick Eustaquio			05	91	73-494	-3762	973-928-4888		1188				
Start Date (10)		Schedu	ıled C	omple	tion Da	te (11)	Name of OSHA M	lonitor					
7 / _21 /						15	ALL PRO MA	NAGEMENT L	LC				
Occupancy Status During	Abatement (Check	only c	ne)			Street Address						
☐ Facility Closed/Vacated					ment		27 Outwater I	ane					
☐ Abatement Performed	Outside of N	ormal f	acility	/ Hou	rs - Des	cribe	City, State, Zip Co			- Walt			
Time of Abatement:	AM	PM	/	_PM-		AM	Garfield, NJ						
Scope of Work (Check all	that apply)						- Carnota, No	0.020					
								ainment with Neg	gative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			☐ Re 図 De				☐ Mini-Encl	702					
			Z De	Honde)II		☐ Glovebag ☑ Non-Exe	mpted (*) and No	n-Friable Proced	dure			
				Locat							atem	ent T	vpe
Location of				lorma	lly elv bv		Description o			-	1		1
Asbestos-Containing N TO BE ABAT		1)		intena	, ,		stos Containing Mar ., thermal systems i		Amount (Specify	emi	Repair	nca	nclo
IN Facility			Cust		Staff?	(1.0	surfacing, VAT,	or	SF or LF)	Removal	=	Encapsulate	Enclosure
(13)			Vaa	(12) No	A1/A	1	other miscellane	ous)	200 50000000			late	G.
1 st FI - Kitchen & Bedr			Yes		N/A								_
	oom Close	-					os Flooring & Ma		240 SF				
Exterior & Basement							/ Glazing/ Caulki		300 SF		Ш		
Interior - Throughout						Texture	d Ceiling Materia	al	2,850 SF			\boxtimes	\boxtimes
				Ц									
Name of Registered Waste	e Hauler			2570	JDEP \		Cubic Yards of	Name of Regis					
Newark Carting					04509	2	Waste As Needed	IESI Landf	ill				
City, State							Disposal Date	City, State					
Newark, NJ							TBD	Bethlehem	, PA				
Completed By (Print or Typ	oe)	Title					Signature		Tr	Date		1	
Raymond Blum	9,890	Pro	oject	Mana	ager		101/	-	_	7/2	7	10	
		1		AND THE STREET	-			- , -		- 1 1	-1	16	

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

PECCHE.

Date of Notification (1)			V		Nam	e of Buildin	g Owner/Operator (2)			28.4		
7 /	27 /	15			Di	vision of	g Owner/Operator (Property Manage	ement & Cons	Maction				
Agencies Notified	Type Notific	ation			Stree	t Address			A19 OF 31	AH F		7	
⊠ EPA	☐ Initial	ution					Street, 3rd Flr.	A	Sartos		-	f	
☑ DOLWD		d				State, Zip (& LICENS & LICENS	1721 -	C tal		
☑ DOH	Amendm					enton, NJ			or LICE#3	INC	19L		
DCA	⊠ Emergen		cluding	3		e of Contac	The second secon						
(NJAC 5:23-8)	justificati Cancella					ck Ferrera			Telephone Num	ber			
	Odilocila	LIOII	_										
Name of Facility Add			-	151	FA	CILITY IN	FORMATION						
Name of Facility Where A	batement is	Taking	Place	(3)				Type of Facility					
Residential House								School (K-1)	2) 8 (Other than K-12))			
Street Address								Other (i.e., p	rivate and comme	rcial b	uildin	qs,	
84 Claire Avenue								homes, etc.					
City (5)	020027000							Square Feet	# of Floors	В	ldg. A	ge	
Woodbridge, NJ 07	095												
County (6)					Cou	nty Code (7	7)(STATE USE ONLY)	Current Use (P	ior if being demoli	shed)	333E 87		
Middlesex													
Name of Monitoring Firm		ding C	wner	(8)	ASCN	No.	Name of Abateme	ent Contractor (9)				
Bio Terra Solutions							ALL PRO MA	NAGEMENT L	LC				
Street Address					•		Street Address						
P.O. Box 1224							27 Outwater	Lane					
City, State, Zip Code							City, State, Zip Co	ode					
Union, NJ							Garfield, NJ	07026					
Project Manager for Moni	toring Firm	5.		Te	lephone	No.	Telephone No.		License No.				
Rick Eustaquio				1	973-49	1-3762	973-928-4888		1188				
Start Date (10)	5	Sched	uled C	omp	letion D	ate (11)	Name of OSHA M	lonitor					
_ 7 / _21 /	15	{	9 /	_ 2	23_ /	15	ALL PRO MA	NAGEMENT L	LC				
Occupancy Status During	Abatement (Check	only	ne)			Street Address					_	
☐ Facility Closed/Vacate			100	88	ement		27 Outwater I	ane					
☐ Abatement Performed	Outside of No	ormal	Facilit	у Но	urs - De	scribe	City, State, Zip Co						
Time of Abatement:	AM	PN	Λ/	_PI	Λ	_AM ·	Garfield, NJ						
Scope of Work (Check all	that apply)						- Jannora, no						
	112/				-000			ainment with Ne	gative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			☐ Re ☑ De	nova	ition		☐ Mini-Enc	losure g Procedure					
			EZ De	mon	loli			mpted (*) and No	n-Friable Procedu	re			
					ation						atem	ent T	vne
Location		.		Norm	ally lely by		Description o				T	T	1
Asbestos-Containing N TO BE ABA	viaterial (ACN TED	1)			ance/		stos Containing Ma ., thermal systems i		Amount (Specify	em	Repair	nce	ncl
IN Facilit			Cus		Staff?	(1.0	surfacing, VAT,		SF or LF)	Removal	=	psu	Enclosure
(13)		ł	V	(12	7 100000	-	other miscellane		Address Pathyllogical # 15			Encapsulate	9
and =1 =1			Yes	No						_		,,,	
2 nd FI - Throughout			Ш			Floor T	ile		500 SF			\boxtimes	\boxtimes
Basement					\boxtimes	Flue Pa	cking		5 SF	\boxtimes		\boxtimes	\boxtimes
Interior - Throughout						Pipe Ins	sulation		154 LF				
									_				
Name of Registered Wast	e Hauler			Т	NJDEP	Waste	Cubic Yards of	Name of Regis	stered Landfill				
Newark Carting					Hauler I		Waste	IESI Landf	ill				
City, State					0450	5	As Needed Disposal Date	City, State		-		-	
Newark, NJ							TBD	Bethlehem	, PA	٨			
Completed By (Print or Ty	pe)	Title					Signature		-	ite /		1	
Raymond Blum		55550		Mai	nager		737)1()) // / .		7/~) ¬	110	1
			,,,,,,,							1	_ (10	

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

M. Commercial

Date of Notification (1)				Name	of Building	Owner/Operator (2	2)	00			W	
	15			Div	ision of F	g Owner/Operator (2 Property Manage	ement & Const	ruction JUL	31	制	c. ,	_
Agencies Notified Type Notif	cation			Street	Address			ASACAS		***	1	1
☐ Initial	0002			20	W. State	Street, 3rd Flr.		AsaEsta 2 Lio	73 m	1217		
☑ DOLWD ☑ Amend ☑ DOH Amend	ed ment #1	1		City, S	State, Zip C	Code		2 110	EN.	1	161	
□ DCA Emerg		_	1	Tre	nton, NJ	08608				110		
(NJAC 5:23-8) justific		oraamig	,	Name	of Contac	t		Telephone Num	ber			1
☐ Cance	ation			Ric	k Ferrera							
				FA	CILITY IN	FORMATION	21.					
Name of Facility Where Abatement i	Taking	Place	(3)				Type of Facility ((4)				
Residential House							School (K-12		2)			
Street Address								(Other than K-12 rivate and comme		ildino	S	
87 Claire Avenue							homes, etc.)					
City (5)							Square Feet	# of Floors	BI	dg. A	ge	
Woodbridge, NJ 07095												
County (6)	88			Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demoli	shed)		9209	
Middlesex												
Name of Monitoring Firm Hired by B	ilding (Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
Bio Terra Solutions						ALL PRO MA	NAGEMENT LI	LC				
Street Address						Street Address						
P.O. Box 1224						27 Outwater	Lane					
City, State, Zip Code						City, State, Zip Co	ode					
Union, NJ						Garfield, NJ	07026					
Project Manager for Monitoring Firm			Tele	phone	No.	Telephone No.	=1=3893	License No.				-
Rick Eustaquio			9	73-494	-3762	973-928-4888		1188				
Start Date (10)	Sched	luled C	omple	tion Da	ite (11)	Name of OSHA M	lonitor					
7 /21 /15		9 /	_ 2:	3_ /	15	ALL PRO MA	NAGEMENT LI	_C				
Occupancy Status During Abatemen	(Check	c only o	one)			Street Address						
☐ Facility Closed/Vacated During E				ment		27 Outwater I	Lane					
☐ Abatement Performed Outside of	Normal	Facilit	y Hou	rs - Des		City, State, Zip Co						
Time of Abatement:AM	PI	Λ/	PM		AM	Garfield, NJ						
Scope of Work (Check all that apply)			100			,						
□ >3 of or >3 W				8			ainment with Neg	ative Pressure				
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		☐ Re	novat moliti			☐ Mini-Enc	losure g Procedure					
				***			mpted (*) and Nor	n-Friable Procedu	ıre			
			Loca						Ab	atem	ent T	уре
Location of	-B. #\		Norma	ely by	A-h-	Description o	2		_Z	Z,	Ш	m
Asbestos-Containing Material (A0 TO BE ABATED	ivi)	Ma	intena	nce/		stos Containing Ma ., thermal systems		Amount (Specify	Removal	Repair	ıcai	ıclo
IN Facility		Cus	todial (12)	Staff?	,	surfacing, VAT,	or	SF or LF)	val	-	Encapsulate	Enclosure
(13)		Yes	No	N/A	1	other miscellane	ous)				ate	
Roof					Flashin	g Tar		25 SF				П
1 st FI - Kitchen					Mastic	3		25 SF		П		
Name of Registered Waste Hauler		_	N	JDEP 1		Cubic Yards of	Name of Regis	tered Landfill			_	-
Newark Carting			70.0	lauler II	D No.	Waste As Needed	IESI Landfi					
City, State		V		0 4000		Disposal Date	City, State					
Newark, NJ	40					TBD	Bethlehem	, PA	,	8		
Completed By (Print or Type)	Title	1				Signature	n i.	Da	ate /	-/	11	
Raymond Blum	P	roject	Man	ager		1 0	LV	7	7/2	-7/	11	

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

Pit Comme

Date of Notification (1)	1922			Name	of Building	g Owner/Operator (: Property Manage	2)	Onte	-	-	Э	
	15	_		Div	rision of F	Property Manage	ement & Const	ruction JUL :	? / A	4 -		
Agencies Notified Type Notified	cation			Street	t Address				· B	7 5	11	-
⊠ EPA ☐ Initial				20	W. State	Street, 3rd FIr.		ASHESTO & LID	n 1 1	41 9		
☑ DOLWD ☑ Amende ☑ DOH Amende				City, S	State, Zip C	Code		16 L10	100	10	WL	-
□ DCA □ Emerge		ludina		Tre	nton, NJ	08608		•	+ 1 ± 1 1 ± 1	7.5		
(NJAC 5:23-8) justificat		idanig		Name	of Contac	t		Telephone Nur	nber			
☐ Cancella	ation			Ric	k Ferrera	1		000				
				FA	CILITY IN	IFORMATION			7			
Name of Facility Where Abatement is	Taking	Place (3)				Type of Facility	(4)				
Residential House							School (K-12					
Street Address							Subchapter 8	(Other than K-1	2)			
102 Crampton Avenue							homes, etc.)	ivate and comm	ercial bi	uildin	gs,	
City (5)							Square Feet	# of Floors	В	ldg. A	ge	-
Woodbridge, NJ 07095						=		- CS C				
County (6)				Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demol	ished)			
Middlesex						7.0						
Name of Monitoring Firm Hired by Bui	Iding Ov	vner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
Bio Terra Solutions						ALL PRO MA	NAGEMENT L	LC				
Street Address				1		Street Address						
P.O. Box 1224						27 Outwater I	Lane					
City, State, Zip Code						City, State, Zip Co	ode					
Union, NJ						Garfield, NJ						
Project Manager for Monitoring Firm			Tele	phone	No.	Telephone No.		License No.			Net second	
Rick Eustaquio			9	73-494	-3762	973-928-4888		1188				
Start Date (10)	Schedu	led Co	mple	tion Da	ite (11)	Name of OSHA M	onitor		-			
7 / _21_ / _15_	9	_ / .	23	3_/_	15_	ALL PRO MA	NAGEMENT LI	_C				
Occupancy Status During Abatement						Street Address						-
☐ Facility Closed/Vacated During Ent						27 Outwater I	_ane					
Abatement Performed Outside of N	lormal F	acility	Hou	rs - Des	cribe	City, State, Zip Co	ode				-	
Time of Abatement:AM	PIVI/		PIVI-		AM	Garfield, NJ	07026					
Scope of Work (Check all that apply)												
≥3 sf or ≥3 If	Г	Ren	ovati	ion		☐ Full Cont☐ Mini-Encl	ainment with Neg	ative Pressure				
≥160 sf or ≥260 lf	Ď	☑ Dem	olitio	on		☐ Glovebag	Procedure					
				• Property of	T	Non-Exer Non-Exer	mpted (*) and Nor	n-Friable Proced	ıre			
Location of			ocat orma			Б			Ab	atem	ent T	ype
Asbestos-Containing Material (ACN	M)	Used	Sole	ely by	Asbes	Description of stos Containing Mat		Amount	Re	Re	四	E
TO BE ABATED				nce/ Staff?		., thermal systems i	nsulation,	(Specify	Remova	Repair	cap	clos
IN Facility (13)			(12)	Otan:		surfacing, VAT, other miscellaned		SF or LF)	/al		Encapsulate	Enclosure
		Yes	No	N/A		other misochanet	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				ite	
1 st FI - Throughout					Asbesto	os Flooring & Ma	astic	100 SF				\boxtimes
Roof	1				Flashing	g Tar		25 SF				П
Exterior - Sidewall		7 1			Transite			1,500 SF				
			=					1,000 01				
Name of Registered Waste Hauler			IN	JDEP V		Cubic Yards of	Name of Regist	ered Landfill		ш	ш	
Newark Carting				auler II	O No.	Waste	IESI Landfi					
City, State				04509)	As Needed Disposal Date	City, State					
Newark, NJ						TBD .	Bethlehem,	ΡΔ	,			
Completed By (Print or Type)	Title					\sim \sim	- Camerielli,				1	
Raymond Blum		ject N	/lan-	ager		Signature		_ 0	ate /		11	-
ACD 44	Fic	Ject N	iali	ager			~ W		1	-1	1 1)

No CI		144	J 1 11				.C 8:60 and 5:16			1	A Constitution		
Date of Notification (1)					Name	of Building	Owner/Operator (2)			-		
	27 /	15			Div	ision of F	g Owner/Operator (; Property Manage	ement & Const	ruction 1 31	Eta			
Agencies Notified	Type Notific	ation			Street	Address			- 07	hii !	5: 1	7	
⊠ EPA	☐ Initial						Street, 3rd FIr.	f at	udEsino.				
☑ DOLWD					City, S	State, Zip C	Code		& HOFE	17/11	Hist		
□ DCA	⊠ Emergen		dina		Tre	nton, NJ	08608		- 'V- 14.	443	- 2		
(NJAC 5:23-8)	justificati		unig		Name	of Contact	ŧ		Telephone Nun	nber			
	☐ Cancella				Ric	k Ferrera	U						
					FA	CILITY IN	FORMATION						
Name of Facility Where A	batement is	Faking P	lace	(3)				Type of Facility	(4)				
Residential House								School (K-12	2)				
Street Address									8 (Other than K-1				
572 Bamford Ave								homes, etc.)	rivate and comme	ercial bu	ıılaıng	JS,	
City (5)				- 21.20				Square Feet	# of Floors	Bl	dg. A	ge	
Woodbridge, NJ 07	095												
County (6)					Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demol	ished)			
Middlesex													
Name of Monitoring Firm		ding Owr	ner (8	3)	ASCM	No.	Name of Abateme	٠,,					
Bio Terra Solutions								NAGEMENT L	LC			y 222	
Street Address							Street Address						
P.O. Box 1224 City, State, Zip Code							27 Outwater I						
Union, NJ							City, State, Zip Co						
Project Manager for Moni	torina Firm			T-1-		N1-	Garfield, NJ	07026					
Rick Eustaquio	toring Firm				phone		Telephone No.		License No.				
Start Date (10)		Sahadı da	4.0-		73-494		973-928-4888		1188				
/		Schedule a		500		15	Name of OSHA M						
					_ ′ -			NAGEMENT L	LC				
Occupancy Status During Status During				0.00			Street Address						
☐ Abatement Performed						crihe	27 Outwater I						
Time of Abatement: _							City, State, Zip Co Garfield, NJ						
Scope of Work (Check all	that apply)						Garrierd, NJ	07026					
	triat apply)						☐ Full Cont	ainment with Neg	ative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 				ovati			☐ Mini-Encl	losure					
△ 2100 St Of 2200 II			Den	IOIILIC	m			Procedure mpted (*) and No	n-Friable Procedu	ıre			
				_ocat							atem	ent Ty	vpe
Location		.		orma	lly ely by		Description of			-	_		
Asbestos-Containing N TO BE ABA		1)		itena		100000000000000000000000000000000000000	stos Containing Mat , thermal systems i	The state of the s	Amount (Specify	Remova	Repair	Encapsulate	Enclosure
IN Facilit			Custo		Staff?	(1.0.	surfacing, VAT,	or	SF or LF)	ova	=	psu	unsc
(13)		_	es	(12) No	N/A	1	other miscellaned	ous)		_		late	G,
Interior - Throughout						Asbesto	os Flooring & Ma	estic	1,850 SF				
2nd FI-Interior Walls			1			Mastic			1,000 SF				
2 nd FI-Bathroom		Г	-			Wallnan	er Adhesive	-	25 SF				
			-			Wanpap	oei Adilesive		25 51				
Name of Registered Wast	e Haulor		ı		JDEP V	Monto	Cubia Vasda of	Mana of Dania	td 1 d611			Ш	Ш
Newark Carting	e riaulei			1500	auler IC	100000000000000000000000000000000000000	Cubic Yards of Waste	Name of Regis					
City, State					04509)	As Needed Disposal Date						
Newark, NJ							TBD	City, State Bethlehem	PΔ				
Completed By (Print or Ty	ne)	Title		-	-			Detriletiett		1		1	
Raymond Blum	pe)	Proje	act "	11000	1005		Signature	\ ,	D	ate /	-	/10	,
. wymona bium		Fioje		vidíli	ger		1 W	$\sim 1/\sim$	✓	11.	1 //	#	

NO CR			NOT				BESTOS ABAT C 8:60 and 5:1		12	** 1	ī	102	
Date of Notification (1)	27 /	15			Name	of Building	g Owner/Operator (Property Manage	2) ement & Cons	truction III	31	E I	* .	
Agencies Notified EPA	Type Notific	ation			Street	Address	Street, 3rd Fir.		45-2017	97	AM.	5: j	Ĩ
⊠ DOLWD			2			State, Zip C			\$ 1.15.	10	77 + 7	F. G.	į.
☑ DOH ☐ DCA	Amendm Emergen	_	_	,		nton, NJ				. 14.	3	- 4	2
(NJAC 5:23-8)	justificati		Cidding	3	Name	of Contac	t		Telephone Numl	ber			-
	☐ Cancella	tion			Ric	k Ferrera	ı						
					FA	CILITY IN	FORMATION						
Name of Facility Where A	batement is	Taking	Place	(3)				Type of Facility	(4)				
Residential House								School (K-1					
Street Address									8 (Other than K-12 private and commer		ilding	15	
605 Bamford Ave								homes, etc.		olai bi	anding	,,,	
City (5)								Square Feet	# of Floors	BI	dg. A	ge	
Woodbridge, NJ 07	7095												
County (6)					Cour	nty Code (7)(STATE USE ONLY)	Current Use (P	rior if being demolis	hed)			
Middlesex	11. 11. 5			(0)									
Name of Monitoring Firm Bio Terra Solutions	<u>-</u>	aing C	wner	(8)	ASCM	No.	Name of Abateme		5				
Street Address								NAGEMENT	LC				
P.O. Box 1224							Street Address 27 Outwater	Lawa					
City, State, Zip Code							City, State, Zip Co	- A-1-1-3			100001	_	
Union, NJ							Garfield, NJ						
Project Manager for Moni	toring Firm				phone		Telephone No.		License No.				
Rick Eustaquio					3-494		973-928-4888		1188				
Start Date (10)7 //						te (11) 15	Name of OSHA M	lonitor NAGEMENT L	LC				
Occupancy Status During	Abatement (Check	only	one)			Street Address						
☐ Facility Closed/Vacate	d During Enti	re Per	riod of	Abate	ment		27 Outwater	Lane					
Abatement Performed	Outside of No	ormal	Facility	y Hour	s - Des	cribe	City, State, Zip Co	ode				5	
Time of Abatement:		PIN	/1/	_PIVI-		AM	Garfield, NJ	07026					
Scope of Work (Check all	that apply)						☐ Full Cont	tainment with Ne	gative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 				novati			☐ Mini-Enc	losure g Procedure					
— = :: -: ::			2 00	inontic					on-Friable Procedur	e			
the controller decisions				Locat						Ab	atem	ent Ty	уре
Location Asbestos-Containing N		1)		Norma d Sole		Asha	Description o stos Containing Ma		Amount	20	R	Ш	ш
TO BE ABA	TED	"	Ma	intena	nce/		, thermal systems		(Specify	Remova	Repair	ıcap	nclos
IN Facilit (13)	У		Cus	todial ((12)	stan?		surfacing, VAT, other miscellane		SF or LF)	val	_	Encapsulate	Enclosure
(13)			Yes	No	N/A		other miscellane	ous)				ate	
1 st FI - Bedroom 1					\boxtimes	Mastic a	assoc. w/Wood	Paneling	200 SF				
1st FI - Bathroom					\boxtimes	Pipe Wr	ap		50 LF	\boxtimes			\boxtimes
Interior - Throughout					\boxtimes	Asbesto	os Flooring & Ma	astic	1,100 SF	\boxtimes		\boxtimes	\boxtimes
Name of Registered Wast	e Hauler			1000	JDEP V	-00000	Cubic Yards of	Name of Regis	stered Landfill				
Newark Carting				H	auler II 04509		Waste As Needed	IESI Landi	fill				
City, State							Disposal Date	City, State					
Newark, NJ							TBD	Bethlehem	n, PA	A			
Completed By (Print or Ty	pe)	Title					Signature		Da	te /			
Raymond Blum		Pr	oject	Mana	ger			LU	\sim	1/2	7/	11	_

Date of Notification (1)					Name of Building Owner/Operator (2)									
	15	5		Div	Name of Building Owner/Operator (2) Division of Property Management & Construction All 6: 17									
Agencies Notified Type Notification														
	☐ Initial				Street Address 20 W. State Street, 3rd Fir.									
	⊠ Amended				City, State, Zip Code									
	Amendment #1 Semendency (including					Trenton, NJ 08608								
					e of Contac			Telephone Number						
☐ Cancellation					k Ferrera		Totophone Number							
				FA	CILITY IN	IFORMATION								
Name of Facility Where Abatement	e (3)				Type of Facility ((4)								
Residential House							☐ School (K-12)							
Street Address		Subchapter 8 (Other than K-12)												
634 Bamford Ave						Other (i.e., private and commercial buildings, homes, etc.)								
City (5)						Square Feet # of Floors Bldg. Age								
Woodbridge, NJ 07095														
County (6)					nty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demo	lished)					
Middlesex						0.00								
Name of Monitoring Firm Hired by Building Owner (8) AS					SCM No. Name of Abatement Contractor (9)									
Bio Terra Solutions						ALL PRO MANAGEMENT LLC								
Street Address						Street Address								
P.O. Box 1224						27 Outwater Lane								
City, State, Zip Code						City, State, Zip Code								
Union, NJ						Garfield, NJ 07026								
Project Manager for Monitoring Firm Telephone No.						Telephone No. License No.								
					1-3762	973-928-4888		1188						
Start Date (10) Scheduled Completion						Name of OSHA M		1100						
						ALL PRO MANAGEMENT LLC								
Occupancy Status During Abatement (Check only one)						Street Address								
☐ Facility Closed/Vacated During Entire Period of Abatement						27 Outwater Lane								
☐ Abatement Performed Outside of Normal Facility Hours					- Describe City, State, Zip Code									
Time of Abatement:AMPM/PM					AM Garfield, NJ 07026									
Scope of Work (Check all that apply)						Garriera, No	07020							
☐ ≥3 sf or >3 lf ☐ Renovation					Full Containment with Negative Pressure									
□ ≥3 sf or ≥3 lf □ Renovation □ ≥160 sf or ≥260 lf □ Demolition														
	351/53/152	50 to 10	Non-Exempted (*) and Non-Friable Procedure											
I ocation of Normal						100000			Ab	Abatement Type				
Location of Asbestos-Containing Material (ACM)				ely by	Achor	Description of			Z,	Z	m	т		
TO BE ABATED Mair				ance/		estos Containing Material (ACM) e., thermal systems insulation, surfacing, VAT, or		Amount (Specify	Removal	Repair	Encapsulate	Enclosure		
ii t dointy			todial (12)	Staff?				SF or LF)	oval	=	nsd	Sur		
(13)		Yes	No	N/A	,	other miscellaned	ous)				late	o o		
Interior - Throughout				×	1	os Flooring & Ma	estic	205 SF		\vdash				
1 st FI - Hallway						er Adhesive	35110	200 SF						
1 st FI - Bathroom					Wall Tile Adhesive			125 SF		H				
					Wan III	Adriesive		125 5						
				JDEP I	Naste	Cubic Yards of	Name of Booist	arad Landell			Ш	Ш		
Newark Carting Ha					DEP Waste Cubic Yards of Name of Registered Landfill Uler ID No. Waste IESI Landfill									
City, State				04509	4509 As Needed									
Newark, NJ						Disposal Date TBD	City, State Bethlehem,	PA						
Completed By (Print or Type) Title						- $ -$					1			
Raymond Blum	Project Manager					797 W	Signature Date							
jona Diam								_	1/2	-11	11			