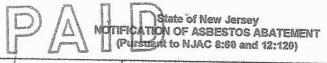


Ck# 1673

Date of Notification (1)				Name of	Building (	Owner/C	Operator	(2)		[pa	-		a 1	7 1	7.77	P
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Agencies Notified	Type Notification			Street A	ddress	-				111	7					
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Ch# 4333

Date of Notification (1)	clarto	***************************************		Nam	e of Building (	Wner/Operat	or (2)				
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Name of Facility Where A	batement is Tak	ing Place	(3)	W. P4	CHEST & SIMPLES	WOH AND	Type of Facili	fy (4)		-	
							☐ School (				
Street Address	4						□ Subchar	oter 8 (Other than K-	12)		
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City (5)	h. 0					************************	Square Feet	# of Floors	T	Bldg.	Age
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Oli Cot Magress						Street	Address	111			
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AL 100 NO 100 NO	rnat Apply)						0				
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Office Administrator

Bilyana Kulakovska

ASB-41

JUN 95

5/23/18

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Initial Non-Friable Pursuant to NJAC 8:60-7 and 12:120-7) Initial Non-Friable Notification / Check #: 7194

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Date of Notificatio			Name	or	Bull	ding	Owner,	Operaco				]_5	6	<u>s</u> U	Ţ	<u> </u>	
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	A OTIFICATION OF ASBESTOS ABATEMENT
U	FursusHT6/NJAC 8:60 and 12:120)

Date of Notification (1)  Street Address Agengies Notified  Name of Suilding Owner/Operator (2)  452 Lyons Ave LLC  Street Address Notified  Name of Street Address Agengies Notified  DOL  Emergency (including Justification) DOCA  Name of Contact  City, State, Zip Code Newark, NJ 07102  Name of Contact  Name of Facility Where Abatement is Taking Place (3)  Vacant Public School  Street Address 452-460 Lyons Ave  City (5) Nawark  County Code (7) (STATE USE ONLY)  Name of Monitoring Firm Hired by Building Owner (8) In/a  Street Address  ASCM No. In/a  Name of Abatement Contracting Inc  Street Address  ASC Palisade Ave  City, State, Zip Code In/a  Project Manager for Monitoring Firm In/a  Scheduled Completion Date (11)  Telephone No. In/a  Scheduled Completion Date (11)  Name of Occupancy Status During Abatement (Check Only One)  Street Address 360 Palisade Ave  Street Address  Agengies Notified  Street Address Agengies Notified  Street Address Agengies Notified  Street Address Agengies Notified  Street Address Agengies Notified  Street Address Agengies Notified Agengies Notified Agengies Notified  Street Address Agengies Notified Agengies Note Notified Agengies Notifi
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DOH DCA Justification   Name of Contact   Telephone Nember S CONTROL & LICENSING    Name of Facility Where Abatement is Taking Place (3)  Vacant Public School   School (K-12)   School (K-12)   Subchapter 8 (Other than K-12)   Other (I.e. private & commercial buildings, homes, etc.)   Cly (5)   Cly (6)   County Code (7)   Current Use (Prior if being demolished)    Essex   Rome of Monitoring Firm Hired by Building Owner (3)   ASCM No.   Name of Abatement Contractor (9)    In/a   School (K-12)   Subchapter 8 (Other than K-12)   Other (I.e. private & commercial buildings, homes, etc.)    County (6)   County Code (7)   Current Use (Prior if being demolished)    Essex   Rome of Monitoring Firm Hired by Building Owner (3)   ASCM No.   Name of Abatement Contractor (9)    In/a   Street Address   Street
Name of Facility Where Abatement is Taking Place (3)  Vacant Public School  Street Address  452-460 Lyons Ave  City (5)  Newark  County (6)  Essex  Name of Monitoring Firm Hired by Building Owner (3)  n/a  City, State, Zip Code  n/a  City, State, Zip Code  n/a  Project Manager for Monitoring Firm  Project Manager for Mon
Name of Facility Where Abatement is Taking Place (3)  Vacant Public School  Street Address  452-460 Lyons Ave  City (5) Newark  County (6) Essex  Name of Monitoring Firm Hired by Building Owner (8) n/a  City, Stats, Zip Code n/a  City, Stats, Zip Code n/a  Project Manager for Monitoring Firm n/a  Project Manager for Monitoring Firm n/a  Street Address  Type of Facility (4)  School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.)  Square Feet # of Floors Bldg. Age 25,000 3 50+  Current Use (Prior if being demolished) Residential House  Name of Monitoring Firm Hired by Building Owner (8) n/a  ASCM No. Name of Abatement Contractor (9) Harmony Contracting Inc  Street Address 360 Palisade Ave  City, State, Zip Code Garfield, NJ 07026  Telephone No. n/a 973460.6026 01255  Start Date (10) 6/7/18  Cocupancy Status During Abatement (Check Only One)  Street Address 360 Palisade Ave
Vacant Public School  Street Address 452-460 Lyons Ave  City (5) Newark  County (6) Essex  Name of Monitoring Firm Hired by Building Owner (3) n/a  Street Address n/a  City, State, Zip Code n/a  Project Manager for Monitoring Firm n/a  Telephone No. n/a  Telephone No. n/a  Telephone No. n/a  Telephone No. n/a  Street Address Start Date (10) 6/7/18  Cocupancy Status During Abatement (Check Only One)  Facility Closed/Vacated During Entire Period of Abatement  School (K-12) Subchapter 8 (Other than K-12) Other (I.e., private & commercial buildings, homas, etc.)  Subchapter 8 (Other than K-12) Other (I.e., private & commercial buildings, homas, etc.)  Square Fest # of Floors Bldg. Age  Current Use (Prior if being demolished) Residential House  Name of Abatement Contractor (9) Harmony Contracting Inc  Street Address 360 Palisade Ave  City, State, Zip Code Garfield, NJ 07026  Telephone No. N/a 973460.6026 01255
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Project Manager for Monitoring Firm Telephone No. 17elephone No. 1
n/a 973460.6026 01255  Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 6/7/18 7/20/18 Harmony Contracting Inc  Occupancy Status During Absternant (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Absternant 360 Palisade Ave
Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 6/7/18 7/20/18 Harmony Contracting Inc  Occupancy Status During Absternant (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Absternant 360 Palisade Ave
6/7/18 7/20/18 Harmony Centracting Inc  Occupancy Status During Abatement (Check Only One) Street Address  Facility Closed/Vacated During Entire Period of Abatement 360 Palisade Ave
Occupancy Status During Abatement (Check Only One)  Street Address  360 Palisade Ave
Facility Closed/Vacated During Entire Period of Abatement 360 Palisade Ave
radiily diosed/vacated burning Entire Pendul of Adatament
Abatement Performed Outside of Normal Facility Hours City, State, Zip Code
Other - Describs: SCHEDULED FOR DEMO Garfield, NJ 07026
Scope of Work (Check All That Apply)
☐ ≥3 sf or ≥3 lf ☐ Renovation ☐ Full Containment with Negative Pressure
≥160 sf or ≥260 lf
Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure
Anglament
is Ladation Type
Lised Solely by Description of
TO BE ABATED Meintenance/ (i.e. thermal systems insulation, (Specify 2 5 5 2
Ascestos-Containing Material (ACM)  TO BE ABATED  In Facility  (13)  Ascestos Containing Material (ACM)  Maintenance/ Custodial Staff? (I.e. thermal systems insulation, surfacing, VAT, or strong, VAT, or other miscellaneous)  Ascestos Containing Material (ACM)  Amount  (I.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)
al F late
Yes No N/A
1st & 2nd Floor X VAT 10,446 SF k
Basement Boiler Room X Pipe Fittings 200 k
Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste
Newark Carting 04509 TBD ISEI Landfill
City, State Disposal Date City, State
Newark, NJ TBD Bethlehem, PA
Completed by Title Signature Date
E. Oirovic Secretary E. Curina 5/29/18

Cubic Yards

Disposal Date

5/20/10 ON

Signature

4

of Waster

Hauler ID No.

04500

TIMA

Vice President

ASB-41 (R.08.08)

Completed by

City, State

Newark Carling Inc.

Newark, NJ 07105

Joseph Vocaturo

Donot use this form for astrastos licensura exempted activities.

Name : Registered Landnik

Pen A gyl PA 08702

City, 81 8

Orneu Y

Gran: Cantral Sanitary Landfill

Date

5/25/18

2H4847		N	TO	IFIC (P	ATTO)	IOF AS	BESTOS ABAT AG 8:60 and 5:1	EMENT	DE	G [	<u> </u>		7 [	
Date of Notification (1)				- 5	Name	of Buildin	g Owner/Operator (	2)		18 141				-111
		18	_		owner	tt Andre				JUN -	- 1	201	8	1
	pe Notifica	ation	200		Stree	t Address						PER PROPRIES	principal de la constante de l	
	Initial								ASE	BESTOS LICE	00	NTR	OL8	4
⊠ DOH	Amended				City, S	State, Zip	Code		The second secon	LIVE	INSI	C. C	-	New Processing
	Amendme Emergend		udina		Cib	olo, TX	78108							
(NJAC 5:23-8)	justificatio		uaing	l		of Contac			Telephor	a Numh	or	-		
	Cancellati				1 0000	tt Andrey			relephon	ie ivaiiii				
							NFORMATION		-				-	-
Name of Facility Where Abat	tement is T	aking F	Place	(3)				Type of Facility	(4)				100	
Residence								School (K-1	2)					
Street Address								Subchapter	8 (Other tha	an K-12)				
								Other (i.e., phomes, etc.		commerc	ial bu	ııldıng	gs,	
City (5)								Square Feet	# of Flor	ore	BI	dg. A	ne	
Moorestown								2,200	3	013		ag. A 80	ge	
County (6)					Cour	ety Code (	)(STATE USE ONLY)			da as a liab		00		
Burlington					Cour	ity Code (i	MOTATE OSE ONLY	Current Use (P	rior it being i	aemolisr	lea)			
Name of Monitoring Firm Hire	ad by Build	lina Ou	mor /	0)	ACCM	Ma	[N	Residence						
III was a second of the second					ASCM	No.	Name of Abateme							
Management & Enviro	. Consult	ing S	ervic	es				onmental, LLC	;					
Street Address							Street Address							
PO Box 341				2-1			623 Cutler Av							
City, State, Zip Code							City, State, Zip Co	ode						
Chesterfield, NJ 08515							Maple Shade	NJ 08052						
Project Manager for Monitoria	ng Firm			Tele	phone	No.	Telephone No.		License	No.				
Bill Weisgarber				60	09-298	-4070	856-755-0099		0084	2				
Start Date (10)	S	chedul	ed Co	omple	tion Da	te (11)	Name of OSHA M	onitor						
					_ / .	18	EMSL Analyti	cal, Inc.						
Occupancy Status During Ab							Street Address							
☐ Facility Closed/Vacated D							200 Route 13	0 North						
Abatement Performed Ou Time of Abatement:	tside of No	rmal Fa	acility	Hour	s - Des	cribe	City, State, Zip Co	de						
Time of Abatement.	AIVI	FIVI/_		_PIVI-		AIVI	Cinnaminson	, NJ 08077						
Scope of Work (Check all tha	it apply)						⊠ Full Cont	ainment with Neo	native Press	ure			102111110	
≥3 sf or ≥3 lf		$\boxtimes$	- D.	novati			☐ Mini-Encl	osure	gativo i ross	dic				
≥160 sf or ≥260 lf		L	] Der	molitic	on		Glovebag	Procedure	- F-1-1-1- D					
			la.	Locat	1	T	☐ Non-Exer	mpted (*) and No	n-Friable Pi	rocedure				
Location of			2.5	lorma			D				Ab	ateme	ent Ty	уре
Asbestos-Containing Mate	erial (ACM)			d Sole		Asbe	Description of stos Containing Mat		Amou	int	Rei	Repair	Enc	En
TO BE ABATED	2			ntena	nce/ Staff?		., thermal systems i	nsulation,	(Spec	ify	Removal	oair	ap	Enclosure
IN Facility (13)			Cust	(12)	Stail!		surfacing, VAT, other miscellaned		SF or I	LF)	<u>a</u>		Encapsulate	ure
(10)		,	res	No	N/A		other miscellaned	ous)					te	
Basement				$\boxtimes$		Flue Pa	cking		2 SF	=		П	П	
Crawlspace		Г	7	$\boxtimes$	П	Pipe Ins	sulation		20 L	F				П
•			_		1=	· · · po · · · ·			20 L	-				
			4								Ш	Ш	Ш	
N (D. 14 114 1 11		_   L		Ц										
Name of Registered Waste H	auler			325	JDEP V auler ID		Cubic Yards of Waste	Name of Regis		ill				
Freehold Cartage				17	15939		vvaste 1	Fairless La	andfill					
City, State							Disposal Date	City, State					-	
Freehold, NJ							06/11/2018	Morrisville	, PA					
Completed By (Print or Type)		Title	-				Signature			Date	1			
Christina Lynch		Vice	e Pre	side	nt of C	Operation	1/-/		)	100000000000000000000000000000000000000		2 1	d	





CK 4629

D		l Na	ame of F	Suilding Owner/Op	erator (2)	)			-		-	-
Date of Notification (1) 5/29/18		146				LADYS .	4/4	ヨと即る	3) [		$\mathbb{W}$	1
Agencies Notified Type Notification		St	reet Add	ress		,		K				
□ EPA Initial		C	try State	, Zip Code					N -	- 1	2018	
DEP		_   .	1 =	O 11 4	N	5.0760	5				2016	
☐ Emergency (ir	cluding	N	ame of C				Tele	phone Number	-	-		are statues
DOH justification)  DCA Cancellation			MR.	KA DEN	MAN			A131300				\$
			FACIL	ITY INFORMAT	ION	Type of Facility (4)	10000	No Service Control	te dell'elle	elit trimbower		-
Name of Facility Where Abatement is Taking Pl		10	2	IAN								
ESTATE OF GLA	042	HIC	CIP	IAIO		☐ School (K-12 ☐ Subchapter 8	(Other)	than K-12)	****	ll.		
Street Address				***		Other (i.e. pri	vate &	commercial bu				)
City (5)				"		Square Feet	1	Floors		g. Ag		
LEONIA			**	1		2000	1 ,	Z	1	7:	27	$\dashv$
County (6)			ounty C	ode (7) SE ONLY)		Current Use (Prior		ENCE				Ì
BERGEN	(8)		ASCM		Name	of Abatement Contra						$\dashv$
Name of Monitoring Firm Hired by Building Ov	vilci (ð)		AUCIVI	110.							12.55	
Street Address					Street	t Removal Address	<u> </u>	-				
Succi Addiess					450	South Ri	ver	Street				_
City, State, Zip Code						State, Zip Code						
5 to a	2					kensack,	NJ (	07601 License No.			-	$\dashv$
Project Manager for Monitoring Firm		T	elephon	e No.		none No.			,			
	Scheduled (	21	otion Do	to (11)	201 Name	- 329 - 7444 of OSHA Monitor		00388	5			
Start Date (10) 6/15/18			6/1		1	ga Enviro	nmai	ntal				
Occupancy Status During Abatement (Check O			_/		Street	Address						
Facility Closed/Vacated During Entire Per	iod of Abater	ment				Huyler S	tre	et				_
Abatement Performed Outside of Normal	Facility Hour	BM			1000000	State, Zip Code	•		77	0.0		
					Sou	th Hacken	sac.	k, NJ (	1/6	Ub		
Scope of Work (Check All That Apply)			St.			☐ _Full Containme	nt with	Negative Press	ure			
≥3 sf or ≥3 lf □ >160 sf or ≥260 lf		novation molitic				Mini-Enclosure		•				
					23	☐ Glovebag Proce ☐ Non-Exempted	(*) and	Non-Friable P	rocedi	ıre		
	Ie I	Locatio	nn.								ement pe	
Location of	No	ormall	y	Г	escriptio	n of				-,	Pe	
Asbestos-Containing Material (ACM)		Solely ntenan		Asbestos Co	ntaining l	Material (ACM) ulation, surfacing,		Amount Specify	Re	æ	Enc	En
TO BE ABATED In Facility	Custo	odial S (12)	taff?	053 (6)	VAT. o	οr	S	F or LF)	Remova	Repair	Encapsulate	Enclosure
(13)				othe	r miscella	aneous)			al	-	ate	re
	Yes	No	N/A					00.5	×		-	_
BASEHENT			X	THERMAL	· NSJ:	LATION		90LF	/			
									_		_	
							72					
Name of Registered Waste Hauler			JDEP W		ic Yards /aste	Name of	Registe	red Landfill				
Dank Dansen 1 To-		H	1 7 1	Andrew General	21	/zcysMine	rva	Enter	ori	ses	3,	LLC
Best Removal Inc City, State				Disp	osal Date	City, Star	te					
Hackensack, NJ 07601					6/18		esb	urg, 0	I 4	468	38_	
Completed by	Title				Signatu	te Holina	جس	Da	5  	20	118	
J. Maiorano	Est	ima	ator		/	( ) ( )			-1		11 0	
ACD A1 (P.06.08)						* Do not use this fo	rm for	asbestos licens	ıre exe	empte	d activ	ities.

P	A No	THIC	TION	te of New Jersey OF ASBESTOS A o NJAC 8:60 and	BATEM 12:120)	MENT	(	CK 46	28			
	, u u	L-		1111 0 -/0-			1 Ind	TERF	1	W	ETI	7
Date of Notification (1) \$ \langle 29 \rangle 18	7	Na	me of B	wilding Owner(Ope		REID			u 		7	
Agencies Notified Type Notificati	ion	Str	eet Add	ress				JUN - 1	21	)18	1	
□ EPA ☑ Initial							111	1 0011	L	710	1	-4
□ DEP □ Amended	I	Ci	ty, State	, Zip Code		15	10	1116		WTTOWNS		
DOL Amendm	ent # cy (including	-		RAMSE	7 2	いて.		ASSESTOR C	THO	ROL	8.	- 1
DOH Emergence justification		Na	me of C	ontact 15. RE	1.		010000000	Telephone Number	SING	ì		- 11
□ DCA □ Cancellat	tion		/							-		-
			FACIL	TTY INFORMAT	ION	Type of Faci	lity (4)					
Name of Facility Where Abatement is Taki	ng Place (3)	~				<i>.</i>						1
	HET KE	215	>			C Subcha	(K-12) pter 8 (C	Other than K-12)				
Street Address						Other (	i.e. priva	ate & commercial but	ilding	s, hom	es, etc	:.)
				"	-	Square Feet		# of Floors	Blo	lg. Ag	8	
City (5)						190	0	Z	1	9	45	
KAMSEY		10	1 7	-d- (7)		Current Use	(Prior if	being demolished)				
County (6) BERGEN	,		ounty Co	SE ONLY)				ENCE				
			ASCM	No	Name	of Abatement						$\neg$
Name of Monitoring Firm Hired by Buildin	ng Owner (8)		ABCIVI	140.								
			-			Remo:	val	Inc.				
Street Address							Riv	er Street				
						state, Zip Code		CI DELCCE				
City, State, Zip Code					100			J 07601				
		Ιπ	elephone	» No		ione No.	, 11	License No.				
Project Manager for Monitoring Firm		1	erepriorie	C 140.			, , ,	00388				1
(10)	Scheduled	Comple	tion Dat	te (11)	Name	- 329 - 7	nitor	1 00.700	.003.			
Start Date (10)	The second section of the second		5/1			ga Env		mantal				
Occupancy Status During Abatement (Che	ck Only One)	-1.	2/.		Street	Address		шенсал				
2006-0017 mm007000 00 00 00 00 00 00 00 00 00 00 00		ment			280	Huyle	r St	reet				
☐ Facility Closed/Vacated During Entire ☐ Abatement Performed Outside of No	rmal Facility Hou	IS A.				State, Zip Cod						
Other - Describe: 8 LOO AM	70 5:0	DYII			Sou	th Hac	kens	ack, NJ C	76	06		
Scope of Work (Check All That Apply)												
>3 sf or >3 lf	P Re	enovatio	on		1	□ Full Con	tainment	with Negative Press	ure			
☐ ≥160 sf or ≥260 lf		emolitic			4		losure	ira				
SECURE APPLICATION OF THE SECURE AND THE SECURE APPLICATION OF T						☐ Glovebar ☐ Non-Exe	mpted (*	) and Non-Friable P	rocedi	ure		
			_								ment	ĺ
	255	Locatio formally			escription	n of				Ту	pe	$\vdash$
Location of Asbestos-Containing Material (ACM	D Use	d Solely	by	Ashestos Con	taining N	Material (ACN	()	Amount			- E	(F)
TO BE ABATED	IVIA	intenano odial St		(i.e. thermal sys	tems inst VAT, o		ing,	(Specify SF or LF)	Remova	Repair	cap	nclo
In Facility (13)		(12)		other	miscella	meous)		51 51 7	oval	air	Encapsulate	Enclosure
(13)	Yes	No	N/A								6	
	res	NO			4	10	,	100 LF	×			
BASEMENT			7	THERMAL	1150	LATIO	2	100 0	/	-		
			-	<del>                                     </del>								
		1 37	IDEP W	lacte Cubi	c Yards	Na	me of R	egistered Landfill				
Name of Registered Waste Hauler			auler ID		aste 1	—		578				
Best Removal Inc			1710	09			iner	va Enteri	ori	ses	ــــــــــــــــــــــــــــــــــــــ	LLC
City, State				Disp	osal Date	1.0	ty, State					
Hackensack, NJ 076	01				0/15		ayne	sburg, OF		468	18	
Completed by	Title				Signatu	re 0 . '~	که دم.	2	<1	29	1,8	
J. Maiorano	Est	ima	tor		X	1000			-1	- 1	1.1 0	
ASB-41 (R-06-08)						* Do not use	this form	n for asbestos licensu	ıre ex	empte	d activ	rities.

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



Date of Notification	(1) 5/25/18 ype Notification	on	Name of	Building Owr	ner / Operator (2)		E	) E I	VER
Agencies Notified			Street Ad				7		
X EPA	Emer	gency Notifica		uuless			11	14: 4 6	
DEP		Notification	MINISTER CONTROL	te & Zip Code			ال ال	1N - 1 2	018 14
X DOL		nded Notificati		ld, NJ 0709			ĺ		and the second
X DOH	The State of the S	ellation	Name of		0		AODEC		77.004 01
DCA	Cano	Challott		acometti			ASBES	Lielepho	ne Wumber
				LITY INFOR	MATION	Linearone	Autorior de Carlos		
Name of Facility WI			lace (3)		Type of Facility (4)				
_	Vacan	t Residence	9		School (K-12)				
Street Address					Subchapter 8 (	Other than K	(-12)		
					X Other (i.e., priv			dings, hom	es, etc.
					Square Feet	# of Floors		Bldg. Age	
City (5)		County (6)	County Cod	le (7)	2,800	2		3-3-	50
Westfie	ld	Union		10	Current Use (Prior i				-00
					Residential	g doing	morriou)		
Name of Monitoring	Firm Hired by	Building Ow	ner (8) A		lame of Abatemen	t Contractor	(9)		
Environmental T	actics, Inc.	9		139440	Global Abateme				
Street Address					Street Address		,		
64 Broad Street				4	43 Schoolhous	e Road			
City, State & Zip Co					City, State & Zip Co				
Matawan, NJ 077					Monroe Townshi		1		
Project Manager for	Monitoring Fi	rm	Telephone Nu		elephone Number			Number	
Tom Geiger			732-290-221		32-605-9062			0071	4
Scheduled Start Dat	te (10)	Scheduled Cor	mpletion Date (1	11) N	lame of OSHA Mor	nitor			
6/9/18			6/18/18	G	Blobal Abatemer	nt Services	, LLC		
Occupancy Status D	oring Abatem	ent (Check or	nly one)		treet Address				
X Facility Clos	ed/vacated D	uring Entire P	eriod of Abaten		43 Schoolhouse				
Abatement i	Performed Ou	tside of Norm	al Facility Hours		ity, State & Zip Co				
Other - Desc	Area Isolate cribe:	ed During A	batement	Į.v.	lonroe Townshi	p, NJ 0883	1		
Scope of Work (Che	ck all that app	oly)							
Demolition		X Renovat	ion		X Full Conf	tainment with	Magative	Droceuro	
Large Project	ot .	200000000000000000000000000000000000000			Mini-Enc		rvegative	riessuie	
	3 SF or ≥ 3 l	LF ACM				g Procedure			
	≥ 160 SF or ≥					Non-friable			
Lo	cation of		Is Location	T	Description of		mount	Abata	ment Type
	os-Containing		Normally Used	d As	bestos-Containing	. 322	Specify		y: Removal,
	erial (ACM)		Solely by		Material (ACM)		are Feet		ncapsulation
	E ABATED		Maintenance of	60. In 1887/17	., thermal systems		or		nclosure)
in	Facility		Custodial Staff		ation, surfacing, VA		ear Feet)		,
	(13)		(12)	or o	ther miscellaneous	5)			
	Attic		N/A	Vern	niculite insulation	on 60	00 SF	Rei	moval
(5)							Selection of the select		
Name of Registered Freehold Cart			NJDEP Waste	Hauler ID # 393	Cu. Yds. of Wa			stered Lan	dfill
City, State			100		Disposal Date	TRF	State		
Trenton, NJ					6/18/18		State ytown, F	<b>D</b> a	
Completed By (Print	or Type)	Title			Signature	, iuii	y town, r	d	IData
Dominick Tring		Pres.				Suiza con all			Date
, 15.5051 <b>1</b>	- H - 10 - 10 - 10 - 10 - 10 - 10 - 10 -				Dominick T	rıngali			5/25/18
SB-41 JUN 95 G46	67								

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



Date of Notification (1) 5/25/1 Type Notific		Name InSit	e of Building te Real Est	Owner	/ Operator (2)	ME	CEIVEI
Agencies Notified			t Address	aro LL	. •	112/1	
	mergency Notific	ation 1400	16th Stree			IIIII .	1 0040
	itial Notification	City,	State & Zip (	Code			UN 1 2018 L
	mended Notificat	ion Oak	Brook, IL 6	0523			-de-initial
	ancellation	Name	e of Contact			ACDE	S-felephone Number
DCA		Mich	elle Sadler	•		ASDE	L6304611799121
			CILITY INF	ORM	ATION	Commenced plant and discount of the control	
Name of Facility Where Abate	ement is Taking Facant Building	Place (3)		Тур	oe of Facility (4)		
Street Address	acant banding			-	School (K-12)	- H K 40V	
	incoln Highwa	ay			Subchapter 8 (Other Other (i.e., private 8)	& commercial bui	
City (5)	County (6)	County	Code (7)	_Squ	A STATE OF THE PROPERTY OF THE	f Floors	Bldg. Age
Edison	Middlesex	County	Code (7)		1,800	1	50
					rent Use (Prior if bei	ng demolished)	
Name of Monitoring Firm Hire	d by Building Ow	ner (8)	ASCM No.		ne of Abatement Cor	ntractor (9)	
ECS Mid Atlantic					bal Abatement S	ervices, LLC	
Street Address				Stre	eet Address		
Executive Drive					Schoolhouse Ro	ad	
City, State & Zip Code Moorestown, NJ 08057					, State & Zip Code		
Project Manager for Monitoring	- F:	T=			nroe Township, N		
Bean Barnes	g Firm	Telephone 609-832-3			ephone Number	License	e Number
Scheduled Start Date (10)	Scheduled Co				-605-9062		00714
6/9/18		6/18/18	e (11)		ne of OSHA Monitor bal Abatement Se	ervices, LLC	
Occupancy Status During Aba	tement (Check o	nly one)		Stre	et Address		
X Facility Closed/Vacate	d During Entire F	Period of Aba	tement	443	Schoolhouse Ro	ad	
Abatement Performed	Outside of Norm	al Facility Ho	ours -	City,	, State & Zip Code		
Describe: Area Iso Other - Describe:	lated During A	batement		Mor	nroe Township, N	J 08831	
Scope of Work (Check all that	annly)						
X Demolition	Renovat	ion			V F. II O /- !		<u></u>
X Large Project	rtenovat	1011			X Full Containm Mini-Enclosur		e Pressure
Quantity is ≥ 3 SF or ≥	3 LF ACM				Glovebag Pro	~	
X Quantity is ≥ 160 SF of	or ≥ 260 LF ACM					-friable	
Location of		Is Location	on	D	escription of	Amount	Abotement Turn
Asbestos-Contain		Normally U			stos-Containing	(Specify	Abatement Type (Specify: Removal,
Material (ACM)	)	Solely b	У	Ma	aterial (ACM)	Square Feet	
TO BE ABATED in Facility	<u>)</u>	Maintenand		(i.e., t	hermal systems	or	or Enclosure)
(13)		Custodial S		rsulatio	on, surfacing, VAT	Linear Feet)	
(10)		(12)		or otne	er miscellaneous)		
Deli Ar	ea	N/A		Joir	nt Compund	2,200 SF	Removal
Deli Area		N/A			VAT	900 SF	Removal
Roof		N/A			pase tar paper	30 SF	Removal
ame of Registered Waste Had Freehold Carting	uler		ste Hauler ID	#	Cu. Yds. of Waste		istered Landfill
ity, State			18693		Disposal Data	TRRF	
Trenton, NJ					Disposal Date 6/18/18	City, State Tullytown,	D <sub>2</sub>
ompleted Du (Drint - T )	Title		-			runytown,	
ompleted by (Print or Type)	11110				SIGNATURE		
ompleted By (Print or Type) <b>Dominick Tringali</b>	Pres.				Signature  Dominick Tring	ral;	Date 5/25/18

### State of New Jersey NOTIFICATION OF ASSESTOS ABO

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

Check #2311

Date of Notification	(1)			Na	ame o	of Buil	ding	Owner / Operat	or (2)		Tr	7 [	C	E		/ E	3 5
	05/25/2018					de K			(-)				9	_ط_	U L	1 (=	-
Agencies Notified	Type Notifica	ation	-1.671.5			Addre					111	7		Opt on			
⊠ EPA □ DEP	☑ Initial	r:		0:4	- C	-1-0	7:- 0	)				Ш	JUI	V − 1	20	18	
□ DOL	☐ Initial					ate &		ode (, NJ 08901									a Company
☑ DOH		rgency				of Con		K, NJ 00901			- Inner	AS	BEA	elepho	GNN	ROLL	Sr
DCA		ellation		100		de K						710	المراسم وساء	etebut	#1 <del>6</del> 11	шию	81
								ODELLTION			(STEDERS)	THE REPORT OF THE PERSON					
Name of Facility Wh	nere Ahateme	ent is Taking P	lace	(3)	FACI	ILIIY	INF	ORMATION Type of Fac	lity (A)								
Residence	ioro / ibatorrit	one is raking i	lacc	(0)				School									
Street Address									, T	Other tha	an K-	12)					
								Other (i					ilding	s, hom	ies, e	etc.)	
								Square Feet		# of Flo	ors		BI	dg. Ag	е		10.7
City (5)		County (6)	C	oun	ity Co	ode (7	)	2016			3				50+		
New Brunswick		Middlesex						Current Use		f being d	lemol	ished)					
								Residence									
Name of Monitoring	Firm Hired b	y Building Owr	ner (8	3)		ASC	ΛNo.					9)					
Street Address								Alpha Env		ental, L	LC						
Street Address								Street Addre									
City, State & Zip Co	de							City, State &		de	-						-
								Trenton, N									
Project Manager for	Monitoring F	irm	Tele	pho	one N	lumbe	er	Telephone N	lumber			Licens	se Nu	ımber			
								609-847-29						0122	22		
Scheduled Start Dat 06/03/201		Scheduled Cor 06/05/2018	nplet	ion	Date	(11)		Name of OS EMSL Ana		nitor							
Occupancy Status D	Ouring Abater	ment (Check or	nly or	ne)				Street Addre									
		During Entire P						200 Route									
Describe:	Performed Ou	utside of Norma	al H	ours	s – 7a	am to	3pm	City, State &									
Facility Occu	inied During	Abatement						Cinnamins	on, N	J 08077							
Scope of Work (Che													-	-			
	an trut ap	P-37							П	Full Con	ntainm	nent wi	ith Ne	gative	Pres	sure	
≥3 sf or ≥3 lf			$\boxtimes$	F	Renov	vation				Mini-End	closur	re					
≥160 sf ≥260	) If				Demo	lition			$\boxtimes$	Glove B	ag Pr	ocedu	res				
										Non-Exe	empte	ed and	Non-	Friable	Pro	cedu	re
	cation of				catior			Descriptio	n of			Amour		Aba	ateme	ent T	уре
	os-Containing erial (ACM)	9			lly Us			Asbestos-Cor Material (A				(Specif SF or L					
	E ABATED				nance			(i.e., thermal s		.		or of L	.୮)	Re	D	Encapsulate	Enc
in	Facility		Cus		al Sta	aff?	i	nsulation, surfa	cing, V	AT				Remova	Repair	psc	Enclsoure
	(13)		Voo		2) lo   N	N/A		or other miscel	laneous	s)				/al	=	late	ure
			Yes		200	W/A	60EE	D:						K			
Basement			Ш	2				Pipe insul	ation		1201	f			Ш		Ш
Name of Registered	Waste Haule	er						Cubic Yards	Name	e of Regi	stere	d Land	Ifill				
ALPHA ENVIRON	MENTAL			- 1		er ID 3 <b>333</b> (	- 0	of Waste	Grov	vs Land	fill						
City, State								Disposal Date	City,								$\neg$
Trenton, NJ								various		isville,	ΡΔ						
Completed By (Print	or Type)				Title			Signature	1011	.5 1110,				Date			-
Rod Richardson	71-7				Proj	ect		Rod Richardson						5/25	/20	18	
				- 1		ager								0,20		. •	

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Ch Le 117	Ĥ	NOTIF	ICATION	ate of New LOE ASB LO NUAC	E\$10	SABATE	MENT 0)			JUN		<u>u</u>			
Date of Notification (1) 5/29/18				f Building Financ			r (2)							- Comments	
Agencies Notified Type Notification		-	Street A	ddress				-	AS	BEST	OS C	ONTI	ROL	St.	
EPA   Initial   Amended		-		lifton Av		ite 19		L	NEWS COLUMN	Lil	CEN	OHAC.	Antennania co	male more	
➤ DOL — Amendment	-	_		rood, NJ		01									
X Emergency justification)  DCA Cancellatior				f Contact raham					Telepho 732-6						
				LITY INFO	ORMA	TION									
Name of Facility Where Abatement is Takir	ng Place (3	3)						of Facility (4							
Street Address								School (K-1: Subchapter	8 (Other th			dia	h		
City (5)					-			Other (i.e. p						es, 	
City (5) East Orange							170	re Feet O	# of Flo	ors	1	3ldg. A	ge		
County (6) Essex				Code (7) USE ONLY	)		Curre	ent Use (Pric	or if being d	emolish	hed)				
Name of Monitoring Firm Hired by Building	Owner (8)		ASCN	Λ No.		Name		atement Con	tractor (9)						
Ctroot Address								D PROFE	SSIONA	LS					
Street Address							Addre	ss DOVE CO	DURT						
City, State, Zip Code								Cip Code OD, NJ 08	2701						
Project Manager for Monitoring Firm			Telepho	ne No.			hone N			ense N	lo.				
							668-9		12	00	****				
Start Date (10) 5/30/18	5/31/1		npletion !	Date (11)		- 13 - 14 - 15 - 15 - 15 - 15 - 15 - 15 - 15		HA Monitor  D PROFE	ESSIONALS						
Occupancy Status During Abatement (Chec		100					Addre								
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe:	Period of a	Abaten y Hours	nent s			City, S	State, Z	DOVE CO (ip Code OD, NJ 08			5-02				
Scope of Work (Check All That Apply)	24717.676					1		•							
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf or ≥260 lf</li></ul>		Renova Demolif				2	Mi Gl	II Containme ni-Enclosure ovebag Proc on-Exempted	edure				Α.		
	14	Locat						III Excilipted	( ) and ivo	ni i nac	7.0 1 10	Abate	ement pe		
Location of Asbestos-Containing Material (ACM)	Use	Normal ed Sole sintena	ly by	Asbes		Description ontaining it		i (ACM)	Amou	nt		1			
TO BE ABATED In Facility (13)	100000000000000000000000000000000000000	todial (		(i.e.	sur	al system facing, VA r miscella	AT, or		(Spec SF or I		Remova	Repair	Encapsulate	Enclosure	
(15)	Yes	No	N/A		othe	iniscella	neous)				val	=	ılate	ure	
INTERIOR					Pip	e Insula	ation		20 L	F	x				
Name of Registered Waste Hauler			JDEP W	/aste	Cuh	ic Yards		Name of F	Registered	Landfill					
NEWARK CARTING		1	lauler ID 4509		1000	/aste		IESI	-55.00		200				
City, State					Disp	osal Date	9	City, State		^					
NEWARK, NJ Completed by	Title				3/3	1/18 Signature	e	BEIHL	EHEM PA		ate				
JOSEPH PERLSTEIN	1WO	NER													

Ch3410	94	N	том	IFIC (P	OTT	VOP AS	BESTOS ABA AC 8:60 and 5:1	TEMENT 6)			$\mathbb{V}$		D)
Date of Notification (1)					Name	e of Buildir	g Owner/Operator	(2)	LI JUN -	1 21	018	-	2
/	/	18	_		Dis	santis Co	ontracting, LLC		1 3	41	9	4	No.
Agencies Notified	Type Notific	ation			Stree	t Address			ASBESTOS	CONT	BOI	2.	
⊠ EPA	☐ Initial				31	3 Halyard	Road		LICE	ISING		, OL	
☑ DOLWD	☐ Amende	-				State, Zip			7 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -	STATE OF LABOUR DATE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TO THE	Carrier Control	ADMINISTS.	Service C
☑ DOH ☐ DCA	Amendm	Section of the second		8	153		h, NJ 08751						
(NJAC 5:23-8)			uaing	9		e of Contac			Telephone Num	hor		_	
	☐ Cancella				Fra	ank Disar	ntis		732-749-600				
									732-749-000	19			
Name of Facility Where	Ahatement is	Takina D	Place	(2)	ГА	CILITY	NFORMATION	T=	7.0				
Residence	, routernent is	raking r	lace	(3)				Type of Facility					
Street Address								School (K-1	2) 8 (Other than K-12	٥١			
Officer Address								Other (i.e., phomes, etc.	private and comme	rcial bu	uilding	gs,	
City (5)								Square Feet	# of Floors	BI	ldg. A	ge	
Seaside Heights								2000	2		65	-	
County (6)					Cou	nty Code (	7)(STATE USE ONLY)	Current Use (P	rior if being demoli	1			
Ocean								Residence		/			
Name of Monitoring Fire	m Hired by Build	ding Ow	ner (	(8)	ASCM	No.	Name of Abatem	ent Contractor (9	)				
N/A								ntracting, Inc.					
Street Address							Street Address						
							1889 Route 9	Unit 61					
City, State, Zip Code		APPLICATION OF THE PERSON					City, State, Zip C				-		
								New Jersey 08	2755				
Project Manager for Mo	nitorina Firm			Tel	ephone	No	Telephone No.	New Jersey U					
				101	prioric	140.	732-349-9932	,	License No.				
Start Date (10)		Schedule	ad C	omple	etion Do	to (11)	Name of OSHA N		00624				
05 /30	/ _18_	05	_ /	_3		18	E.M.S.L. Ana						
Occupancy Status Durin							Street Address				MIL-MI		
☐ Facility Closed/Vaca	ted During Entir	re Perio	d of	Abate	ment		1056 Stelton						
☐ Abatement Performe Time of Abatement:	ed Outside of No	ormal Fa	acility	/ Hou	rs - Des		City, State, Zip Co	ode					
				_PIVI		AM	Piscataway,	New Jersey 08	854				
Scope of Work (Check a	all that apply)												
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf or ≥260 lf</li></ul>				novat moliti			☐ Mini-End	g Procedure	gative Pressure on-Friable Procedu	re			
				Loca							atem	ent T	vpe
Locatio		.		lorma	illy ely by		Description of				_		
Asbestos-Containing TO BE AB		1)		intena		Asbe	stos Containing Ma	iterial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
IN Fac			Cust		Staff?	(1.6	<ul> <li>thermal systems surfacing, VAT</li> </ul>		(Specify SF or LF)	ova	=	psu	nso
(13)		-	. 1	(12)	1		other miscellane		,	-		llate	9
exterior			es	No	N/A					_		9.55	
- ALCTIO						aspesto	os siding		500 sf				Ш
		L			Ш								
Name of Registered Wa				1,000	IJDEP \		Cubic Yards of	Name of Regis	stered Landfill				
Guardian Contract	ing, Inc.				lauler II 20223		Waste 3	T.R.R.F.					
City, State							Disposal Date	City, State					
Toms River, New J	lersey						05/31/18		Pennsylvania				
Completed By (Print or 1	Гуре)	Title					Signature		1	ite	1	- 1	
Nicholas Fernicola		Proj	iect	Man	ager		3,3,1	_ /	1	//	- J	ali	

**Project Manager** 

CKE 5105



7	E	C	E		WPrife	Form
1		JUN	_	1	2018	

Date of Notification <sub>1</sub> (1)		11	Vame o	f Building Owne	er/Operato	r (2)					$ \tilde{n}$
5/32/18		Į	B	E64	ha p	ruch /			nggan non		omptonic -
Agencies Notified Type Notification		15	Street A	ddress	May 1	1109	ASBES	TOS	CON	TRO	L&
- t		4	1,50	- C D	ne n	- 51.4	<u> </u>	LICE	ISIN	G	
M, EPA M Initial		1	70		- X	6 20.1	C. C.				
DEP Amended		15		te, Zip Code		C	1061				1
DOL Amendment #		-	HIGH	ilac pe	ak,	NJ 08	904				1
DOH justification)	iciuung		Varue o	f Contact			Telephone Nur	mber			
DCA Cancellation		all the	10	ned			730936	57X	N		ì
			FACI	LITY INFORM	ATION		1100100		90	-	-
Name of Facility Where Abatement is Taking	Place (3)		17101			Type of Facili	iv (4)	-			
Rage Property							5				1
Street Address						School (		21			- 1
Sireer Address	8650 V437						iter 8 (Other than K-12 e. private & commercia		Sonif	home	100
57) Back Aug	Bu. 10	din	x #	4		etc.)	o- private de commercia	AS EDIGINA	go.	1107110	٠,
City (5)	-	(	)	,		Square Feet	# of Floors	8	ldg. A	ge	
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County (6)		To	County (	Code (7)		1 1/	Prior if being demolish	9 7	20		-
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Name of Monitoring Firm Hired by Building O			1 ACCE	4 81-	[ Dlane	1775	- Tes.do	CK			
Name of workoning ram rates by building o	wher (o)		ASCA	ING.	Name	e of Abatement (	Contractor (9)	_			
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Street Address					Stree	t Address					-
					19	) Wonth	SORd				1
City, State, Zip Code				**************************************	City, S	State, Zip Code	- till				
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Project Manager for Monitoring Firm		1 7	elephor	ac Ma	Tolon	hone No.	Lipense N	, 0	<u></u>		-
r toject manager for monitoring i ann		1	elehilo:	15 110.	1		CO CO CO	· · · ·			disease as
		-				+29417	1 1 000	of			
Start Date (10)	Scheduled	Com	pletion I	<u>D</u> ate (11)	Name	of OSHA Monit	or				
(17-11)	Ula	21	110	_							1
Occupancy Status During Abatement (Check	Only One	)	7		Stree	t Address					-
Facility Closed/Vacated During Entire Po	ariad of Ah	afam	ant		å å						1
Abatement Performed Outside of Norma			Citt		City	State, Zip Code					
	1-70				Jany,	542.0, E.p 0030					4
Scope of Work (Check All That Apply)									-		-
Scope of Work (Check All That Apply)					-						
L ≥3 sf or ≥3 lf		novati			1		ment with Negative P	ressur	е		i
SL ≥160 sf or ≥260 lf	LI Der	molitic	H		5	Mini-Enclos					
					(ta)	Glovebag P	rocedure Ited (*) and Non-Friab	la Don	radus	2	4
							led ( ) and work had	1		ment	$\neg$
	25000000	ocatio						1		pe	1
Location of	Used	rmally Solely			Descriptio				1		
Asbestos-Containing Material (ACM)		tenan				Material (ACM)	Amount	-		m	m
TO BE ABATED In Facility	Custo		taff?		nai system rfacing, Vi	is insulation, AT or	(Specify SF or LF)	lon	70	Cel	nol
(13)		(12)			er miscella		0. 0.21	Remova	Repair	Encapsulate	Enclosure
	Yes	No	NI/A				j	0	7	ate	6
	165	14U	N/A				1,			- !	
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J. Z. 1	4	0.00		11		Ì	1	1		1	
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Name of Registered Waste Hauler		l M	DEP W	aste 1 Cut	oic Yards	Nama	I of Registered Landfill			1	
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City, State		1/	00)		posal Date						
and I ack No				1				17			To the same of
Completed by	Title				Signature	11100	C.S. He, P.	to			
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Bre Morne	Secre	CL	1/20	ive-	15	UN		1	30/	10	

#### Ch 1384

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

DECE

JUN - 1 2018

01110							CHECK#	1384		UUI	4	1 (	110
Date of Notification (1)					Name of Bu	ilding Ow	ner/Operator (2)						
5/30/2018					THE PENN	NINGTO	N SCHOOL		AS	BEST	ros c	CONT	ROI
Agencies Notified	Type Notific	ation			Street Addre	ess			7.0			SING	
□ EPA	x Initial				112 W. DE	LAWAR	E AVENUE		Committee and Co	total sample an	and the same	The same of the same	THE PROPERTY.
☐ DEP	☐ Amend	led Am	nendme	ent #	City, State, 2								
☑ DOL	☐ Emerge	ency (i	includin	g	PENNING								
□ DOH	justifica	ation)		(A)	Name of Co		00554			Tale	nhone	e Num	her
X DCA	☐ Cancel	lation			MIKE HU					200000			Dei
					FACILITY IN		TION			609	-847-5	5336	
Name of Facility Where Ab	atement is T	aking	Place (	3)	FACILITY III	IFORIVIA	ATION	T	tite (4)				
THE PENNINGTON SC				٥,				Type of Fac					
Street Address	HOOL (OL	D IVIA	MIN)					School					
	(IDALICIO)								apter 8 (Oth			200	
112 W. DELAWARE AV	ENUE							Other (	i.e., private				
City (5)								Square Fee	t	# of	Floors	Bldg	. Age
PENNINGTON,NJ					-								
County					County Code	e (7) (S7	ATE USE ONLY	AIRPORT					
MERCER													
Name of Monitoring Firm H	ired by Build	ing Ov	vner (8)		ASCM No.	Name o	of Abatement Con	tractor (9)				75-2-7-	
ENVIRONMENTAL CO	NNECTION	N, INC	C.		46427	CREA	M RIDGE ENVI	RONMENT	AL INC.				
Street Address						Street A			I I I I I I I I I I I I I I I I I I I				
120 N. WARREN STREE	ET					15 BL A	CK FOREST R	OAD					
							ate, Zip Code	OAD			-		
TRENTON, NJ 08608							LTON, NJ 0869	•					
Project Manager for Monito	ring Firm	Teler	phone N	Jo.		Telepho		1		11.			
	9		392-42			Maria de la compansa del la compansa de la compansa				0.3947.030	nse N	0.	
Start Date (10)		1		7.77	ion Date (11)	609-890				006	76		
6/18/2018		10000000		omplet	ion Date (11)		f OSHA Monitor						
Occupancy Status During A	hatament /C		2018	- \		MECS							
					0.000-1410	Street A							
☐ Facility Closed/Vacate						P.O. B0							
Abatement performed of			nours 5	PM-2 A	M	2 3 2 x (C) - x (C)	ate, Zip Code						
OTHER: ESSENTIAL F		_				CROSS	SWICKS, N.J. 0						
Scope of Work (Check all the	nat apply)							☐ Full Cor	ntainment w	vith Ne	egative	e Pres	sure
$\geq$ 3 sf or $\geq$ 3 lf					X Renov	ation		☐ Mini-En	closure				
≥ 160 sf or ≥ 260 lf					☐ Demolit	ion		☐ Gloveba	ag Procedu	re			
								`⊠ Non-Ex	empted (*)	& Nor	-Friab	le Pro	cedu
		I:	s Locat	ion								Туре	
Location of Asbestos-Co	ontaining		rmally I				stos Containing				Г	1	
Material (ACM) TO BE A	BATED In		Solely I				thermal systems	Amount (Sp		Re	Z.	Encapsulate	Enclosure
Facility (13)			enance LStaff?	/Custo			, VAT, or other	LF	-)	Remova	Repair	psi	los
		Yes	No	N/A	1 '	niscellan	eous)			val	=	ulat	ure
STAIRWELL			~		NFVAT			41 C E		1		(D)	
OFFICE/PIPE CHASE			×			ATION	(WDAD e	41 S.F.		X	_		
OTTOGETH E CHASE			1		PIPE INSUI	LATION	(WRAP &	14 L.F.		X			
			-		CUT)								
Name of Registered Waste	Hauler				NJDEP Waste		In the Vent						
or registered waste	raulei				Hauler ID No.		Cubic Yards of Waste	Name of Re	gistered Lai	ndfill			
J VINCH & SONS					100062PA4		1 YD	Grows Lan	dfill				
City, State					-0000#1 A4		Disposal Date		127/03/03				
TRENTON, NJ 08638							U	CITY, STAT					
Completed By		Title				Cime -t	6/20/2018	Morrisville.	PA	1-			
ACCUSACION NO DE PORTA DE COMPONIO DE C				-		Signatur	9 . 1 1	.05	Л	Date			
DAVID D'ANDREA		PRES	SIDEN	1		1	ave I	Mai	idea	5/30/	2018		
ASB-41						, -	1	100					

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Ch 4374		NOTIF	CATION	to NUAC 8	STOS ABATI	eo/	NT		G	E	<u>U</u>	<u> </u>
Date of Notification (1) 05/30/2018			Name of Spring	f Building O gfield Pub	wner/Operato	or (2)	1		JUN	- '	20	018
Agencies Notified Type Notifi			Street A 139 M	ddress Iountain A	lve			AS	BEST	OS C	ONT	ROL
DEP Amen	nded ndment#			ate, Zip Cod gfield Tow	e nship, NJ (	0708	31	of Chartelegan gustoman many	L	<u>OEM</u>	HVG	Maran Maria
DOH   justific	gency (including cation) ellation			f Contact m Knorr				Telephone N 973-376-		ext.12	39	
			FACI	LITY INFO	RMATION							
Name of Facility Where Abatement is Jonathan Dayton High School	s Taking Place ( ol/Springfield	3) HS				Ту	pe of Facility (4					
Street Address 139 Mountain Ave.					***************************************	Ě		) 3 (Other than K ivate & comme		ildings	, hom	es,
City (5) Springfield	N - W				-	1000000	uare Feet 00000	# of Floors 2		Bldg. A	Age	
County (6) Union				Code (7) USE ONLY)			irrent Use (Prior igh School	if being demo	lished)			
Name of Monitoring Firm Hired by Bu Envirovision Consultants, Inc			ASCN 0007				batement Controls		n, Inc.			
Street Address 20-21 Wagaraw Road, Bldg.	35 E				Stree 265		iress oute 46 Suite	3D				
City, State, Zip Code Fair Lawn, NJ 07410							, Zip Code NJ 07512		-	*****		
Project Manager for Monitoring Firm Guillermo M. Morales			Telepho 973-63	ne No. 36-9145	1 1000000000000000000000000000000000000	hone -256	No. 3-7010	License 0666	No.			
Start Date (10) 06/08/2018	Schedul 06/10/			Date (11)	5 C.		OSHA Monitor Onstruction &	Restoration	n, Inc.			
Occupancy Status During Abatement			****		Stree			00			-	
Facility Closed/Vacated During I Abatement Performed Outside o Other – Describe:	Entire Period of a portion of Normal Facility	Abater / Hour	nent s	************	City,	State	oute 46 Suite , Zip Code NJ 07512					
Scope of Work (Check All That Apply	)				1000		110 07012					
≥3 sf or ≥3 If ≥160 sf or ≥260 If	mont	Renova Demoli			2		Full Containmer Mini-Enclosure Glovebag Proce Non-Exempted	dure			·o.	
		Locat	335025HI )			***************************************		y and Holling		Abat	emen	t
Location of Asbestos-Containing Material (AC	M) Use	Vorma d Sole	ly by	Ashesto	Descriptions Containing		rial (ACM)	Amount		1	/pe	Γ
TO BE ABATED In Facility (13)	Ma	intena todial ( (12)		(i.e. th	nermal system surfacing, V/ other miscella	ns ins AT, o	ulation, r	(Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A						a		ate	Ге
Room G-2		X		Term	al System	Insu	lation	16 LF	X			
Name of Registered Waste Hauler			IJDEP W	laste	Cubic Yards		Name of P	egistered Land	fill			
Bako Construction & Restorati	ion, Inc.	F	lauler ID 0889	No.	of Waste 10			n Resource		ery F	acili	ty
City, State Otowa, NJ			terror and a second	- 1	Disposal Date 06/11/2018		City, State Tullytown	n, PA				
Completed by Damir Valievac	Title	ect M	enager		Signatur		del.		Date	10010		

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Ch 4372		NOTII (1	11	OF ASB	1 3 5	1 1	"	Т		<u>E</u> (	C	<u>E</u> [	$\mathbb{V}$	
Date of Notification (1) 05/30/2018			Mahw Mahw	of Building vah Boar	nd Of Ec	p <del>drator</del> lucati	(2) on			J	JN	- 1	201	8
Agencies Notified Type Notification				Address dge Roa	ad .			***************************************						
EPA Initial Amended			City, Sta	ate, Zip Co	ode					ASBE	STOS	S CO	VTR	DL &
DOL Amendment Emergency	(including			/ah, NJ ( of Contact					T=1		Marganes .		- The Contraction	and the same
DOH justification) DCA Cancellation				Van Den						one Nui 357-58				
Name of Facility Where Abatement is Takin	g Place (	3)	FAC	ILITY INF	ORMATIC	N	Tyn	e of Facility (4	\					
Mahwah High School Building 7	ig i iuoc (	<b>-</b> ,					l yp	School (K-12						
Street Address 60 Ridge Road					111			Subchapter 8 Other (i.e. pretc.)	Other t	han K-1: ommerci	2) ial bui	ldings	, hom	es,
City (5) Mahwah						ē	500	are Feet 00	# of Flo	oors	- 1	Bldg. A	\ge	
County (6) Bergen			(STATE	Code (7) USE ONLY	)	_	Hig	rent Use (Prior gh School		demolisi	hed)			
Name of Monitoring Firm Hired by Building RKO Environmental Analysis, Inc	Owner (8	)	0008	M No. 90				patement Cont enstruction 8		ration,	Inc.			
Street Address 401 St. James Avenue							A Ro	ute 46 Suite	e 3D					
City, State, Zip Code Phillipsburg, NJ 08865				-				Zip Code NJ 07512						
Project Manager for Monitoring Firm Jonathan Gilbert			Telepho 908-4	ne No. 54-6316	6	Teleph 973-		No. -7010		cense N 666	0.			
Start Date (10) 06/16/2018	Schedul 06/17/			Date (11)				SHA Monitor nstruction 8	Restor	ration,	Inc.			
Occupancy Status During Abatement (Chec						Street 265		ess ute 46 Suite	30					
Facility Closed/Vacated During Entire Abatement Performed Outside of Norm Other – Describe:	Period of and Facility	Abatei y Hour	ment s		_	City, S	tate,	Zip Code NJ 07512						
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	(Insertent)	Renov Demol				Ž	M	ull Containmer lini-Enclosure ilovebag Proce on-Exempted	dure				•	
	4	Loca							7 2112 11	***************************************		Abate	ement	:
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Norma ed Sole intena todial (12)	ely by ince/ Staff?		Desc stos Conta thermal s surfaci other mi	ystem: ng, VA	fateria s insu T, or	lation,	Amor (Spec SF or	ify	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A			- 100 (100 - 100 -					al		late	re
Building 7 Mech. Room	X			ipe Fittir				27 Elb	ows	X				
Building 7 Store Room	Building / Store Hoom							ion	12 Elb	ows	Х	-		
lame of Registered Waste Hauler		<u></u>	NJDEP W	facto	] O. W Y	'm wala				1				
Bako Construction & Restoration, Ir	nc.	1	Hauler ID 20889		of Wast			Name of R				ery F	acili	ty
City, State otowa, NJ					Disposa 06/18/			City, State Tullytown	n, PA					
Completed by Damir Valievac	Title Proje	ect M	anager			nature		N. la		Da		2010		

Ch 150	3		NOTIF (F	CATIO	tate of Ne	ESTOS	ABATE	MEN	ıT			G		V Pr	FINE E
Date of Notification (1) 5/30/18					of Building		Operator	(2)		TU	1	JUN	- 1	2018	3
Agencies Notified	Type Notification			Street A		9				-				IN COLUMN TO THE PARTY OF THE P	
ĭ EPA	☐ Initial										ASB	ESTO:	SCO	NTRO	)L&
DEP  DOL	Amended Amendmen	t #		The state of the s	ate, Zip C vale, NJ					Leann	AND THE PERSON NAMED OF STREET	METALOR SHIP OF NAME OF	denoch-attent	Comprision of the last	Participation
□ DOH	<ul><li>Emergency justification)</li></ul>			Name o	of Contact					Te	lenhone N	Jumher			_
DCA	Cancellation	1			a Jelling	<u> </u>									
Name of Facility Where A	batement is Takir	ng Place (	3)	FAC	ILITY INF	ORMAT	ION	Тур	pe of Facility (4	4)					
Residential Home									School (K-1	2)					
Street Address								×	Subchapter Other (i.e. p etc.)	8 (Oth rivate	er than K & comme	-12) rcial bu	ilding	s, hom	es,
City (5) Montvale								31	uare Feet 00	2	f Floors		Bldg. 65+/		
County (6) Bergen				(STATE	Code (7) USE ONLY	)	_	Re	rrent Use (Pricesidential H	ome		ished)			
Name of Monitoring Firm Project Manager	Hired by Building	Owner (8	)	ASC	M No.				batement Con es Abateme		(9)				
Street Address							Street		ress //idland Ave						
City, State, Zip Code							City, S	tate,	Zip Code						
Project Manager for Monit	toring Firm		-	Telepho	ne No.		Teleph		Brook, NJ 0 No.	7663	License	No.			
Start Date (10)		Cabadul	od Co	malatica	Data (dd)				-3184		01305				
6/6/18		6/10/1		npietion	Date (11)		Name	of O	SHA Monitor						
Occupancy Status During	Abatement (Chec	k Only O	ne)				Street	Addr	ess						
Facility Closed/Vacat Abatement Performe Other – Describe: 8	d Outside of Norn	Period of nal Facility	Abater y Hour	ment s			City, S	tate,	Zip Code						
Scope of Work (Check All	That Apply)							10.00							
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf			Renova Demoli				×	N G	full Containme Mini-Enclosure Blovebag Proci Ion-Exempted	edure				re	
Location			Locat Norma										Aba	tement	t
Location of Asbestos-Containing Machine Asbestos-Containin	Material (ACM) TED	Use Ma	ed Sole intena todial ( (12)	ely by nce/		tos Cont thermal surfa	scription aining M systems cing, VA niscellan	lateri s insu T, or		(5	mount Specify F or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A										ate	6
Baseme	nt	Х				VAT			39	96 SF	x				
												+	+		
Name of David															
Name of Registered Waste All Stages Abatement			H	IJDEP W lauler ID 036592	No.	Cubic of Was 3			Name of R				ndfill		
City, State Saddle Brook, NJ						Dispos	al Date		City, State Pen Arg		Δ				
Completed by Richard Cristofol		Title Pres	ident				ignature		1		_ [	Date 5/30/1	8		

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Date of Notification (1) 5/30/18			Name	of Buildin	g Owner					JUN	-1	2018	or a constant	-
Agencies Notified  Type Notificatio	n			Address	2-1				ASB	ESTO:	S CON	ITRO G	L&	
DEP Amended Amendmen Emergency justification Cancellation	y (including	g	Old 7	tate, Zip ( Tappan, of Contac awrence	NJ 076	675			Telephone	Numbe	ſ	encend standards		
Name of Facility Where Abatement is Tak	ing Place	(2)	FAC	ILITY IN	FORMAT	ION	-	.=						
Residential Home	ing Place (	(3)					Ту	pe of Facility (						
Street Address							×	School (K-1 Subchapter Other (i.e. p etc.)	12) 8 (Other than orivate & comm	K-12) ercial b	uildings	s, hom	es,	
City (5) Old Tappan							26	uare Feet 00	# of Floors		Bldg. 65+/			
County (6) Bergen			(STATE	Code (7) USE ONL	n		Re	esidential H		olished)				
Name of Monitoring Firm Hired by Building Project Manager	Owner (8	)	ASC	M No.				batement Cor es Abateme						
Street Address						Street 280		ress ⁄lidland Ave	€.					
City, State, Zip Code								Zip Code Brook, NJ 0	7663					
Project Manager for Monitoring Firm			Telepho	one No.		Teleph 201-		No. -3184	Licens 0130					
Start Date (10) 6/8/18	6/12/1	8	mpletion	Date (11)	)	Name	of O	SHA Monitor						
Occupancy Status During Abatement (Che						Street	Addr	ess				-//		
Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other – Describe: 8 A.M to 4 P.M	Period of a	Abaten y Hours	nent		<u> </u>	City, S	tate,	Zip Code						
Scope of Work (Check All That Apply)													-	
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		Renova Demolit				×	M	lini-Enclosure lovebag Proc	ent with Negativ edure (*) and Non-Fr			ro.		
	Is	Locati	on				,	on Exempled	( ) and Non-11	lable F1	Abat	ement		
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TO BE ABATED In Facility (13)	55607 160	intenar todial S (12)	Staff?		thermal. surfac		insu T, or	li li	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure	
Basement	No X	N/A			VAT			210 SF	×		Ю			
								210 01						
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Name of Registered Waste Hauler All Stages Abatement		H	JDEP Wauler ID 036592	No.	Cubic of Was			N CONTRACT ATTEND	Registered Land Central Sanit		ndfill			
City, State Saddle Brook, NJ						al Date		City, State Pen Arg		250				
Completed by Richard Cristofol	Title Presi	dent				gnature	M	1///	/	Date 5/30/1	8			

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Ch 1504				tate of N N OF ASE t to NJAC	BESTOS			) iT					$\underline{\mathbb{V}}$	3
Date of Notification (1)				of Building		Operator	r (2)			j Jl	- Nt	12	018	
5/30/18				Corriga	ın									1
Agencies Notified Type Notification			Street A	Address						ASBE	STOS	CON	FROI	2
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DEP Amended  Amendmen	t #			ate, Zip C ont, NJ (							ar pendicular service	2000		
	(including		100-200-200-200-2	of Contact			_		To	enhone N	l		-	
DOH justification)  DCA Cancellation				Corriga					ı ie	ennone v	II imnor			
				ILITY INF		ION			_					
Name of Facility Where Abatement is Takir	ng Place (	3)					Ту	pe of Facility (	(4)					
Residential Home	_91-91-91							School (K-1	12)					
Street Address								Subchapter	8 (Oth					
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City (5)								uare Feet	# 0	f Floors		Bldg. /	Age	
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County (6)				Code (7) USE ONLY	^		11,000	rrent Use (Pri		ng demol	ished)			
Bergen	- 10				'			esidential F						
Name of Monitoring Firm Hired by Building Project Manager	Owner (8)		ASC	M No.		100000		batement Cor		(9)				
Street Address								es Abatem	ent					
Street Address						Street		ress ⁄Iidland Ave	_					
City, State, Zip Code								Zip Code	J.					
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Project Manager for Monitoring Firm			Telepho	ne No.		Teleph			77 000	License	No			
						100		-3184		01305				
Start Date (10)	Schedul	ed Cor	mpletion	Date (11)		Name	of O	SHA Monitor			3			
6/1/18	6/4/18													
Occupancy Status During Abatement (Chec	k Only Or	ne)				Street	Addı	ress						
Facility Closed/Vacated During Entire Abatement Performed Outside of Norn  Other – Describe: 8 A.M. to 4 P.M	Period of A	Abater Hour	nent s			City, S	tate,	Zip Code						
Scope of Work (Check All That Apply)					_									
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≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	≥ F	Renova Demoli				Ê	, N	ull Containme lini-Enclosure Blovebag Proc Ion-Exempted	edure				P	
	Is	Locat	ion										ement	
Location of	1	Vorma	lly		De	scription	of					Ту	ре	
Asbestos-Containing Material (ACM)  TO BE ABATED	Ma	d Sole	nce/		tos Cont	aining M	lateri	al (ACM)		mount	1_		ш	_
In Facility	Cust	odial S	Staff?	(i.e.	surfac	systems cing, VA	insu T. or	lation,		pecify or LF)	Remova	Repair	Encapsulate	Enclosure
(13)		(12)				niscellan					lova	pair	sula	osur
	Yes	No	N/A								-		ate	0
Basement		х				VAT			40	4 SF	×			
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News (De in 1997)														
Name of Registered Waste Hauler		0.00	JDEP W auler ID		Cubic of Was			Name of F	3			November 1		
All Stages Abatement		200,000	036592		3	,,,,		Grand (	Centra	I Sanita	ry Lar	ndfill		
City, State					Dispos	al Date		City, State	;					-
Saddle Brook, NJ					TBD			Pen Arg		1				
Completed by	Title				S	ignature		111	11		ate			
Richard Cristofol	Presi	dent					11	// /	/		5/30/1	8		

(Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 31/18 Rutgers, The State University of New Agencies Notified Type Notification Street Address 74 Street 1603, Building 4116 EPA Initial DEP Amended City, State, Zip Code × DOL Amendment # Piscataway, NJ 08854-8036 Emergency (including × DOH Name of Contact ASBERTOS NUMPEROL & 848-445-2550; justification) DCA Cancellation Michael Smith **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Labor Education Center School (K-12) Street Address Subchapter 8 (Other than K-12) 50 Labor Center Way Other (i.e. private & commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age New Brunswick 12.000 50+ County (6) County Code (7) Current Use (Prior if being demolished) Middlesex (STATE USE ONLY) Labor Education Center Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) ATC Group Services ecoservices, LLC Street Address Street Address 3 Terri Lane, Suite 4 - 5 303 B National Road City, State, Zip Code City, State, Zip Code Burlington, NJ Exton, PA 19341 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Brian Kearney 609-386-8800 484-872-8884 01161 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 5/23/18 **EMSL** Occupancy Status During Abatement (Check Only One) Street Address 200 Route 130 Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: 4 pm - 12 am Cinnaminson, NJ Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 If Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Abatement Is Location Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED Encapsulate (i.e. thermal systems insulation, Enclosure (Specify Remova Repair Custodial Staff? In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Bldg. 6109, Basement, Chase X Pipe fitting insulation\* 110 LF X Bldg. 6109, Floor 1 X Pipe fitting insulation\* 110 LF X \*cut and wrap procedure

Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. Waste Management of NJ of Waste **GROWS Landfill** 20 City, State Disposal Date City, State Trenton, NJ TBD Morrisville, PA Completed by Title Signature Date Jack Bally Sr. Project Manager 31/18

ASB-41 (R-06-08)

Do not use this form for accessos licensure exempted activities.

Ch 21195	)		NC	TIF	(Purpu	ON OF A	New Jersey SBESTOS AB JAC 8:60 and 5	:16)	DE	CE		$\mathbb{V}$	E
Date of Notification (1)  5/ /	21 /		18			me of Build Rowan Un	ing Owner/Operato	or (2)	11110	JUN -	1-	2018	
K7	Type Notif ⊠ Initial	ficatio	n			eet Address	a Hill Road		ASB	ESTOS LICEI			)L &
	Amend	led							Land of the land o		-Uniconstitu	un company	THE RESERVE
□ DHSS	Amend			_	1	, State, Zip							
□ DCA (NJAC 5:23-8)	☐ Emerge justifica	ency (	includ	ing		ne of Conta	NJ. 08028						
	☐ Cancell					ack Glass			Telephone 1 856-2564		7,17,5		
					F	ACILITY	NFORMATION		1				
Name of Facility Where Aba	atement is	Taki	ng Pla	ce (3)			Oranization	Type of Facility	(4)				
Mimosa Hall								School (K-1)					
Street Address								── ☐ Subchapter	8 (Other than I	(-12)			
201 Mullica Hill Road								Other (i.e., phomes, etc.)	rivate and com	nmercial	buildi	ngs,	
City (5)								Square Feet	# of Floors	Ti	Bldg.	Age	
Glassboro								10,800	2	1	+/-	0.1115-1010	
County (6)					Co	unty Code	(7)(STATE USE ONLY	Current Use (Pr	ior if being den	nolished)			
Gloucester								Vacant	ioi ii boing den	ionsnea			
Name of Monitoring Firm Hi		ilding	Owne	r (8)	ASCI	VI No.	Name of Abater	nent Contractor (9)	7				
Pars Environmental S	ervices							nmental Manag					
Street Address					_		Street Address	innerital Mariag	ement, Inc.				
500 Horizon Drive #54	10												
City, State, Zip Code					-			rise Avenue					
Hamilton Township N.	1 08691						City, State, Zip (				5000		
Project Manager for Monitori				1-			Philadelphia	a, PA 19153					
Rafael Torres	ing Filli			1	lephone		Telephone No.		License No.				
Start Date (10)	1.	0.1				0-7277	215-365-581		1156				
6_ / _ 11 / ·	18					ate (11) 18	Name of OSHA						
					.5_ /		USA Enviror	nmental Manage	ement, Inc				
Occupancy Status During Ab	atement (	Chec	k only	one)			Street Address		1.0				
☐ Abatement Performed Out	uring Enti	ire Pe	riod of	Abat	ement	120	8436 Enterp	rise Avenue					
Time of Abatement: 7:00	AM-11:0	OPM	racili	Ty Hoi	ırs - De		City, State, Zip C	ode		Periller Line de			
		0, 10,				M	Philadelphia	, PA 19153					
Scope of Work (Check all that	it apply)												
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>			⊠ Re	enova emolit			☐ Mini-End	tainment with Negrosure g Procedure empted (*) and Non		duro			
				Loca					Table 1 100e		-1-		
Location of Asbestos-Containing Mate	n=i=1 / 0 00 0	• `		Norma	ally ely by		Description of	of			atem	_	_
TO BE ABATED		1)	Ma	inten	ance/	Asbe	stos Containing Ma	iterial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
IN Facility			Cus		Staff?	(1.6	, thermal systems surfacing, VAT	insulation,	(Specify	lova	air	aps	losi
(13)			28	(12)	1	4	other miscellane		SF or LF)	<u>m</u>		ula	ure
Room 227		-	Yes	No	N/A							le	
		-				rioor II	le Non-Friable		800 SF				
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						_							
Name of Registered Waste Ha	auler				JDEP I		Cubic Yards of	Name of Registe	red Landell		Ш	Ц	П
Service Transport					lauler II		Waste 30	Minerva Lan					
City, State		e cui le Cons					Disposal Date	City, State			_		-
New Castle De.							6/25/18	Waynesburg	Pa.				
Completed By (Print or Type)		Title					Signature	7					
Kevin Meldrum		Pr	oject	Mana	ager		Januare	Melde		Date	5	1	-



## State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT Pursuant to NJAC 8:60 and 12:120) CK 6783

Date of Notification (1) 5/23/18				f Building C			(2)		_						
Agencies Notified Type Notification			Street A		101	110			15	7 [	: C	F	1	W	F
⊠ EPA ☑ Initial										小	1 6		3 U	U	
DEP  Amended				ite, Zip Coo				71	11	ì	631		_	2016	
DOL Amendment Emergency (				ity NJ 0	8008			!		Ц	JU	۱ -	- 1	2018	
DOH justification)		0.1	Name of Jeff	f Contact					Tolo	nha	. N1				Charles Co.
DCA Cancellation		_	en programme	LITY INFO	DMATI	ON			1	_AD	BES				18
Name of Facility Where Abatement is Taking	g Place (3)		FACI	LITTINFO	KINATI	ON	Тур	e of Facility (4)	) Livenson		L	ICE	VSIN	G	-
Jeff Wild Private Home Street Address								School (K-12			14.40				
Street Address							K	Subchapter 8 Other (i.e. pri					dings,	home	es,
City (5)								etc.) are Feet	# of	Floors		TR	ldg. A	ne	
Surf City NJ 08008								00+	2	. 10010		0.55	5+	go	
County (6)				Code (7)			Cur	rent Use (Prior	if beir	ng dem	nolishe	ed)			$\neg$
Ocean				JSE ONLY)				use							
Name of Monitoring Firm Hired by Building ( N/A	Owner (8)		ASCN	1 No.		Name Perr		patement Contr	actor	(9)					
Street Address						Street									
						PO									
City, State, Zip Code						City, S	tate,	Zip Code							
						Wes	t Be	rlin NJ 0809	91						
Project Manager for Monitoring Firm			Telephor	ne No.		Teleph 856-		No. -9800		Licens					
Start Date (10)	Scheduled	Com	pletion [	Date (11)		1000		SHA Monitor					- 100	-	
6/1/18	6/7/18					Sam	ie								
Occupancy Status During Abatement (Chec	k Only One	<del>!</del> )				Street	Addr	ess							
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm	eriod of Al	atem	ent			City S	toto	Zip Code		040-111	V 20115-X			115 min	
Other – Describe:	an i domity i	iodio			_	City, S	iaie,	Zip Code							
Scope of Work (Check All That Apply)										-		-	5000	-	$\neg$
≥3 sf or ≥3 lf	☐ Re	novat	ion				F	ull Containmen	t with	Negati	ive Pr	essur	e		
≥160 sf or ≥260 lf	X De	moliti	on					lini-Enclosure lovebag Proce	dura						
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Location of Asbestos-Containing Material (ACM)	Used	Sole!	y by	Ashesio		scription		ai (ACM)	Ar	nount			.,		
TO BE ABATED	Main	itenan dial S			hermal	systems	s insu		(S	pecify		Re	Z	Ence	Enc
In Facility (13)		(12)				cing, VA		()	SF	or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A									a	-	ate	re
Exterior Siding			х		Exte	rior Sic	ding		160	00 SF		х			
				1		<u> </u>				===	*****				
									1-112-6-73						
Name of Registered Waste Hauler		11/2/2019	JDEP W	23 F25 10 10 10 10 10 10 10 10 10 10 10 10 10	Cubic			Name of Re	egister	ed Lar	ndfill				
United Roll Off			auler ID 1 2459	No.	of Was			G.R.O.W	/.S.						
City, State	2				Dispos	al Date		City, State			NIE-9				
Elm NJ	T				6/7/18	24		Morrisvil	le PA	190		1502			
Completed by Anthony T Perna	Title Presid	lent			S	ignature	1				5/2	3/18	3		

102503459798	7	NOTI	ursuan	NOE AS	BESTOS C 8.60 an	ABATE 10 12:12	MENT 0)	IIK			O. WINGS	E-sir-jej-moue	And the first state of the stat
Date of Notification (1) June 1, 2018			Name 111 V	of Buildin	g Owner/egton stre	Operator eet Rea	(2) alty LLC		JUN	<del>  -1</del>	20	18	
Agencies Notified Type Notifica	tion			Address				-	ASBEST	0.00	ONT	ROL	2
EPA Initial Amende	ad.			Nashing		eet			L	IDENS	ING	10%	
X DOL Amendr	nent#		Pater		Joue								
■ DOH justificat	ncy (includin ion)	ig		of Contac	t				lephone N				
DCA Cancella	ation		312-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	Drost	EODMAT.	ION		20	148181	01			
Name of Facility Where Abatement is T	aking Place	(3)	FAC	ALITI IN	ORMAI	ION	Type of Facility	/ (4)					
111 Washington Street Realty   Street Address	LLC						School (K		8 999				
111 Washington Street							X Other (i.e	er 8 (Oth . private	er than K- & commer	12) cial bui	dings	, hom	es,
City (5)							etc.) Square Feet		f Floors		Bldg. /		
Paterson							12000	4		2	204	.5-	
County (6) Passaic				Code (7) USE ONL	y)		Current Use (P Vacant	rior if bei	ng demoli	shed)			
Name of Monitoring Firm Hired by Build Enviro-Pro Unitd Corp.	ing Owner (8	3)	ASCI	M No.			of Abatement C Environment		(9)	<del></del>			
Street Address 262 West 38th Street, Suite 60°							Address Vest 37th Sti	eet, Su	ite 303				
City, State, Zip Code New York NY 10018						City, St	tate, Zip Code York NY 100						
Project Manager for Monitoring Firm Yevgeniy Golubchik			Telepho	ne No.		Teleph	one No. 436936		License	No.			
Start Date (10)			npletion	Date (11)			of OSHA Monito	r	01043	-			
June 18, 2018 Occupancy Status During Abatement (C	1		2, 201	8			Analytical						
Facility Closed/Vacated During Ent							<sup>Address</sup> Vest 36th Str	eet Gr	ound flo	or - 10	1		
Abatement Performed Outside of N	ormal Facilit	y Hours	S		_	City, St	ate, Zip Code York, NY 100						
Scope of Work (Check All That Apply)							1011, 141 100	,,,,					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	- Desiration of the last of th	Renova Demolit				×	Full Containn Mini-Enclosu Glovebag Pro Non-Exempte	re ocedure				e	
		s Locati									Abate	ement	t
Location of Asbestos-Containing Material (ACM)	Us	Normal ed Sole	ly by	Ashes	Des	cription	of aterial (ACM)				l y	ре	
TO BE ABATED In Facility	IVI	aintena stodial S		(i.e.	thermal:	systems sing, VAT	insulation,	(S	nount pecify	Re	, D	Encapsulate	Enc
(13)		(12)			other m	iscellane	eous)	55	or LF)	Remova	Repair	psula	Enclosure
	Yes	No	N/A							=		ate	·e
Main Roof		X		Ro	of & Fla	ashing	Material	4	400	x			
Middle Roof		X		Ro	of & Fla	shing	Material	4	200	x			
Lower Roof		Х		Ro	of & Fla	shing	Material	1	900	x			
Name of Registered Waste Hauler			IDED	11-									
Waste Management		Н	JDEP W auler ID 3750		of Was		G.R.W		red Landfil dfill	I			
City, State Canden, NJ					Disposa 7/10/2		City, Sta Tullyto						
Completed by	Title	1121	A RI	armer	Sig	gnáture	1001111	/		ate /	ac 11	1.0	