08/01/2015 12:18 Two Brothers Contracting 20272

(FAX)973 956 88' 1

P.002/005

Frint Form

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Date of Notification (1) 8/1/2015	(315)				Building Owners		(2) VEMENT AU	THOR	ITY					
	ype Nollfics	iten		Street Ad 1 BER	GEN PLAZA,	4TH F	OOR			7 1	10	3		2
DEP DOL	Amandi	men; #			ts, Zip Code ENSACK, NJ I	07601		I V/V	VFR 0	7	DO	JUE	n	
DOH DCA	Justifica	incy (including tion) ation		Name of ROBE	Contact RTS. GARRIS	SON			Shor & Nu	hbh	111	THE		\exists
				FADI	LITY INFORMAT	ÓN				_				=
Name of Fecility Where Abe BERGEN REGIONAL							Type of Facility Behool (K-	12)						
arest Address 230 EAST RIDGEWO	OD AVE	NUE					Subchapte Other (i.e. sic.)	r ii (Oth Priveta i	orthan K-1 Scommen	ial b	lidir	gs, ho	mes	.
City (8) PARAMUS							Square Feet	* 5	Flog 8		Bld	g. Age		
County (6) BERGEN				County C	Code (7)	_	Current Use (Pr	for if bel	ng da nolla	had				
Name of Menitoring Firm HI BRINKERHOFF ENVI				ASCIM	No.		of Abstament Co			VG,	NC	,		٦
Sired Address 1805 ATLANTIC AVE	NUE	20				200 TO 100 TO 10	Address REELAND AV	/ENUE			Г			7
City, State, Zip Code MANSQUAN, NJ 0873	36					1	rtata, Zip Gode OWA, NJ 075	12						٦
Project Manager for Monitor				Talaphor	ns No.	Talepi	968-8700		CO 184				200	\neg
Start Date (10) 8/3/2015		50hedul		nelstion i	Date (11)	Nama	of OSHA Monito			_	-			7
Occupancy Status During A) inemerse	Check Only O	ne)				Address .				_	-		\dashv
Facility Closed/Vacates Abatement Performed Other - Describe:						City, 8	itata, Zip Coda			_	-			-
Scape of Work (Check All T	hat Apply)									-	-		100	\dashv
23 at or 23 if 2100 at or 2200 if			Ranova Damoilt				Full Containm MinhEnclosu Glovebag Pro Ngn-Exempte	ta cadure	-					
			Locat							T		batem: Typs	ine	
Location of Asbestos-Containing Me TO BE ABATE In Facility (13)	atarlal (ACA	A) Usi	Normal ad 3 ola aintana itodiai 1 (12)	iy by nee/ Staff?	Asbestos Con (l.e. therms surfi	ecription taining h l eystem ping, VA miscella	deteriel (ACM) o insulation, IT, or	(4	mourt Bosciy or La)			Repair		Enchasere
		Yes	No	N/A							4	,		
BOILER #	4	-	X	-	/WRAP	PIPE	ONLY)	-	30 LF	4	+	+	+	\dashv
	+			-	Trings	4 001	J1461)			+	+	+	+	\dashv
		+		 						-	+	+	+	\dashv
Name of Registered Weste	Hauler			JDEP W		Yards	Name o	Hegial	ared and	(1)			1	_
TWO BROTHERS CO	NTRACT	TING	11 01	laular ID 18743	2				NAGEM	EN.	G.	R.O.V	g.y	
TOTOWA, NJ		1 20			8/5/2	015	MOR		LE, PA	2015	_			
Completed by VIVECA RAMOS		PRO	JECT	COOF	RDINATOR	Signalan	vecak	den	100	3/1/:	016			

CK 20272

Date of Notification (1) 6/1/2015				e of Building C RGEN COU) 'EMENT AUT	HORIT	1				
Agencies Notified	Type Notification			et Address ERGEN PL	AZA, 4TH F	FLC	OOR		l.		-		
EPA DEP DOL	Initial Amended Amendment #_		City,	State, Zip Coo	ie								
⊠ DOH	Emergency (indiginal justification) Cancellation	cluding	UNITED BY 18 (1975)	e of Contact BERT S. G.	ARRISON			Telep	one Num	ber			
			F	ACILITY INFO	RMATION								
Name of Facility Where BERGEN REGION							Type of Facility (4 School (K-1:		17.10	e)			
Street Address 230 EAST RIDGEV	VOOD AVENUE						Subchapter Other (i.e. p				ings,	home	s,
City (5) PARAMUS						5	Square Feet	# of F	oors	BI	dg. A	ge	
County (6) BERGEN				nty Code (7) TE USE ONLY)		(Current Use (Pric	r if being	demolish	ed)			
Name of Monitoring Firm BRINKERHOFF EN			44.3553	SCM No.			f Abatement Con BROTHERS (ACTING	G, IN	С.		
Street Address 1805 ATLANTIC A	VENUE				100000000000000000000000000000000000000		ddress EELAND AVI	NUE					
City, State, Zip Code MANSQUAN, NJ 0					100000000000000000000000000000000000000		ate, Zip Code WA, NJ 0751	2					
Project Manager for Mor	nitoring Firm		1000000	phone No. 2-223-2225	Tele	pho	ne No. 156-8700		icense No	D.			
Start Date (10) 6/3/2015		Scheduled C		tion Date (11)	Nam	ne o	f OSHA Monitor E AS (9) ABO		0.0.				
Occupancy Status Durin		19899 01 189				00,V 800	ddress						
Facility Closed/Vac	cated During Entire Pened Outside of Norma	riod of Abat	tement				ate, Zip Code						
Scope of Work (Check A	All That Apply)								_	-51115			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			ovation olition				Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	edure				e	
		la La				_		172		_	250	ement	t
Locatio	n of		cation nally		Descripti	ion r	of				Ту	ре	
Asbestos-Containing TO BE AE In Fac (13)	g Material (ACM) BATED ility	Custodi (1	nance/ al Staff 2)	? Asbes	tos Containing thermal syste surfacing, \ other miscel	g Ma ems VAT	eterial (ACM) insulation, , or	(St	ount cify LF)	Removal	Repair	Encapsulate	Enclosure
-				J/A	DID	_	-		1.5				
BOILE	R #4	,	X	(V	PIPE VRAP & CL		ONLY)		LF	X			
Name of Registered Wa	aste Hauler		10000	EP Waste	Cubic Yards	S	Name of	Register	d Landfill				
TWO BROTHERS	CONTRACTING		Haule 1874	er ID No. 43	of Waste				GEME	NT G	6.R.C).W.	S.
City, State TOTOWA, NJ					Disposal Da 6/5/2015	ĺ	City, Stat MORR						
Completed by VIVECA RAMOS		Title PROJE	CT C	OORDINAT	OR Signat	ure	recuk	in	/ / / /	ite 1/201	15		

Date of Notification (1) 5/7/2015 CHECK#	2750				uilding Ov IOCESE						JUN	4	201	0	
Agencies Notified Type Notif	ication		1 100	treet Add	iress ton Aver	nue									
EPA Initial Amer			100		, Zip Code NJ 071										
DOH Eme	rgency (inc cation)	luding	1,000	lame of C	Contact allicierge					Telepl	ne Nun	nber			
DCA Cand	ellation		'	and the second			NI.			-				-	
Name of Facility Where Abatement	is Taking P	lace (3)		FACILI	TY INFOR	MAIIC	JN	Tvo	e of Facility (4						
CATHEDRAL BASILICA OF	THE SA	CRED	HEA	RT					School (K-12 Subchapter 8		100 V 15))			
Street Address 89 Ridge Street								×	Other (i.e. pr	vate & c	mmercia	al build	ings,	nome	s,
City (5) Newark, NJ 07104									uare Feet ,000	# of F	ors	1 0.00	dg. A)+	ge	
County (6)				County Co	ode (7) SE ONLY)				rrent Use (Prio	if being	iemolish	ned)			
ESSEX Name of Monitoring Firm Hired by E	Building Ow	mer (8)	Т,	ASCM				of A	batement Cont		FION			-0-11	-
Omega Environmental Servi	ces	1000000							VICES COF	PORA	IION				
Street Address 280 Huyler Street							Street 426		ress H STREET						
City, State, Zip Code Hackensack									, Zip Code NBERG, NJ	07093					
Project Manager for Monitoring Firm	n		- 1	Telephone			Teleph	none	No.		cense N	lo.			
		المحاديات عاديا		201-489					SHA Monitor		1014			-	
Start Date (10) May 11-2015	17763	/lay-18-		pletion D 5	rate (11)		EA S		[편집(1) [1] [1] [1] [1] [1] [1] [1] [1] [1] [1]						
Occupancy Status During Abateme	nt (Check (Only One)				Street								
Facility Closed/Vacated During Abatement Performed Outside Other – Describe: Starting at 3	of Normal	Facility H	atem	ent		_			, Zip Code						
Scope of Work (Check All That App	oly)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			nova moliti				2	K	Full Containme Mini-Enclosure Glovebag Proc Non-Exempted	edure	gative I			e	
		22-20		Т					Non-Exemples	() and	OII I IId	1		emen	t
			ocati ormal	2		220		_						ре	
Location of Asbestos-Containing Material (. TO BE ABATED In Facility (13)	ACM)	Used Mair Custo	Sole ntenar	ly by nce/		os Con thermal surfa		Mate ns ins AT, c		(Sr	unt cify LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A						76	-	-		(D)	
Boiler Room		Х					Insul				LF	X			
Boiler Room		Х		-		Trans	site ex	hau	ıst	14	SF	x			
Name of Registered Waste Hauler			100000	JDEP W		Cubic of Wa	Yards		Name of	W. C					
Freehold Carting Inc			11559	lauler ID 5939	NU.	tbd			GROW		Landf	ill			
City, State Freehold, NJ 07728						Dispo tbd	sal Date	e	City, Stat Morrisv		9				
Completed by Gina Salvador		Title Office	Mai	nager			Signatu	re (Bluas.	7 _	1 -	ate 5/7/20	15		

Check 7083

Date of Notification (1)		Name of	Building Owner/C	perator (2)		1	-	1			
5-29-2015			icant	Resi	den'	los	Du	El	lir	29	
Agencies Notified Type Notification Type Notification Initial Amended Amendment #		JIIV. Sta	32 WE		()					7	Z =
DOH Emergency (in justification) Cancellation	eludina	6 K	Eddon H Contact MCDor LITY INFORMATI	rald		Tele	hone Num	ibeN	00	30.	,
Name of Facility Where Abatement is Taking Vacant Reside	Place (3)		uel lina	Туре	of Facility 4)			E-10-181		
Street Address 1832 West High			t		Subchapte 8 Other (i.e. or etc.)	ivate 8	commercia	l build			es,
City (5) Haddon Heio		County (Code (7)	113	are Feet 350 ent Use (Pr or	1	Joors demolish	(oC OC	ge Y	s
Lamden	j	(STATE I	USE ONLY)	— F	Resid	en'	ial.		We	ill	na
Name of Monitoring Firm Hired by Building O Quality Environmental Concepts	wner (8)	None			atement Cont nvironment						7
Street Address 1053 North Tuckahoe Road				Street Addre 1053 Nor	ess th Tuckaho	e Ro	ıd				
City, State, Zip Code Williamstown, New Jersey 08094	÷				own, New	Jerse	08094				
Project Manager for Monitoring Firm Edward Knorr			29-1166	Telephone N 856-629-	1166		D1086).			
June 8,2015	Scheduled Con	1.1	2015		nvironme 1	al Co	cepts			•	
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire P		ent		Street Address 1053 Nor	ess th Tuckalic	e Ro	ıd				
Abatement Performed Outside of Normal Other – Describe:				City, State, 2 Williamst	Zip Code own, Nev	Jerse	08094				
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf	Renova	tion		E FI	ull Containn e	nt with	Vegative P	ressui	e		
2160 sf or ≥260 lf	Demolit	ion	64 V	M G	ini-Enclosure lovebag Prc co	edure					
2.	Is Locati	on		LI N	on-Exempte d	(*) and	Non-Friad	T	Abate	ement	
Location of Asbestos-Containing Material (ACM)	Normal Used Sole	y	De Asbestos Con	scription of	-1 (4 C4 D				Ту	ре	$\overline{}$
TO BE ABATED In Facility (13)	Maintenar Custodial S (12)		(i.e. thermal surfa	systems insu cing, VAT, or miscellaneous	lation,	(8	ecify or LF)	Removal	Repair	Encapsulate	Enclosure
Basement	100 110	V	Asbest	os ala	46	7	5SF	./			
DUDELICIE			exterio				704	V	-		
			Wrap	300	333111						
			1								
Name of Registered Waste Hauler Quality Environmental Concepts	Н	JDEP W auler ID 9710		Yards ste 4 CV	1		e co	ver	`U		
City, State Williamstown, New Jersey			Dispo	sal Date 6-11-15	City, State		3vill	e '	P	7	
Completed by Edward Knorr	Title Vice Presi	dent		Signature	vale	1 de	Da	5	2-	9-1	15

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ASS-41 (R-08-08)

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QUALITYENVIRONMENTAL

PAGE 03/05

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State of New Jersey NOTIFICATION OF ASSESTOS ASSETEMENT (Pursuant to NJAC 5:50 and 12:120) Date of Nothication (1) Name of Suliding Owner Operator (2) 05-25-2015 Timothua Mariorace Agencies Notified Type Nothication Street Aridress Initial DEP City, State, Zip Code Amended DOL Amendment # Wes Emergency (including DOH justification) Name of Contact DCA Concellation Timothy N Name of Recitly Where Absternent is Taking Piece (3) Type of Facility (4) Residential (Narcisi Street Address School (K-12) Subchapter 8 (O her than (-12) Other (i.e. privati & commi rotal buildings, hornes, Cily (5) Square Feet # of Floors Bidg. Age County (6) County Code (T) Current Use (Prior If 5 strip dem lehed) ouces Name of Abalament Contract (9) Name of Monitoring Firm Hired by Building Owner (8) ASCN NA Quality Environmental Concepts None Quality Environmental Concept Street Address Street Address 1053 North Tuckshoe Road 1053 North Tuckahos Road City, State, Zip Code City, State, Zip Code Williamstown, New Jersey 08094 Williamstown, New Jersey 080: Project Manager for Monitoring Firm Telaphone No. Telephone No. Licere No. Edward Knorr 856-629-1166 856-529-1188 0108 Stari Dale (10) Scheduled Completion Data (11) Name of OSHA Monker Quality Environmental Concept Occupancy Status During Absternant (Check Only One) Street Address Fedility Closed/Vacated During Entire Period of Abatement 1053 North Tuckahoe Road Abelement Performed Outside of Normal Facility Hours City, State, ZIp Code Other - Describe: Williamstown, New Jers by 0805 Scope of Work (Check All That Apply) ≥3 st or ≥3 if Renovation Fue Containment with Negath Pressure 2160 af or 2260 If Demolilion Mini-Enclosure Glovebag Procedure Non-Exampled (*) et d Non-Fi ibio Procedure is Location Abalement Asbestos-Containing Material (ACM)

IO SE ASATED Normally Type Description of Used Splay by Asbestos Containing Meterial (ACM) Maintenance/ mount Custodial Steff? (i.e. thermal systems insulation, S true In Facility surfacing, VAT, or (12) (13) other miscellaneous) Yes No NA Crowlabace shestes cloth was 9.5st on duct work AHIC vermiculite around himney Name of Registered Waste Healter NJDEP Wasto Cubic Yerds HARder ID No. Quality Environmental Concepts of Waste 19710 blouces ber l ш Disposal Dale City, State Williamstown, New Jersey 05-29-15 Dompleted by Title Signature Edward Knorr Vice President

Do not use this form for zabest is licens; a exempled activities.

Date of Notification (1) 04/27/15		/	T	Name o Infante	f Building e Assoc	Owner/o	Operator nc.	(2)		d						maret 1901 7
Agencies Notified	Type Notification			Street A									1/5			
EPA DEP X DOL	Initial Amended Amendment	# 2	F	City, Sta	ate, Zip C	ode		7.450								
⊠ DOH	Emergency (_		wood, N		rsey 07	450		Teler	ione	Numbe	r			
D DCA	Cancellation				nfantê					1 6161	JUITE					
Name of Facility Where	Abatement is Taking	g Place (3)		FAC	LITY INF	ORMAT	ION	Type o	of Facility (4)				- 100,000			
Toyota Building Street Address								☐ s	chool (K-12)						
1096 Route 17 Nor	th							x C	ubchapter 3 ther (i.e. pri	(Other vate &	han k	(-12) ercial b	uildi	ngs,	hom	es,
City (5) Ramsey, New Jerse	эу 07446							Square 10,00		# of F	ors		Blo 55	g. A	ge	
County (6) Bergen				County	Code (7) USE ONLY)		Curren	t Use (Prio	if being	demo	lished		_		
Name of Monitoring Firm	Hired by Building (Owner (8)		ASCN	10000		Name		Dealership		_					
N/A Street Address							Lilich	Corpo	oration	00.01 (0						
7	ř							Address McBrid	e Avenue	1						eses (
City, State, Zip Code							City, S Wood	tate, Zip	Code Park, NJ	7424						property of a second
Project Manager for Mon	Itoring Firm		T	Γelepho	ne No.		Teleph	one No.		T	cense					
Start Pate (10)		Scheduled			Date (11)		Name	of OSHA	A Monitor		1104	-				100m H -10 -1
6/8/15 Occupancy Status During	Abatement (Check	7/2	4/	15 ————————————————————————————————————					nmental							
X Facility Closed/Vaca	ated During Entire P	erind of Ah	stam	ent				Address Route	22 Wes							
Abatement Perform Other – Describe:	ed Outside of Norm	al Facility H	ours			_		tate, Zip	Code / Jersey ()	7083						
Scope of Work (Check Al	That Apply)					<u> </u>			- Cordey (7 000	-		-			
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	1		novat					Mini-	Containmer Enclosure ebag Proce		gativ	e Pres	sure			
		1-1-				-	×	Non-	Exempted	*) and I	on-Fr	iable P	10000			
Location	of		mally	/		De:	scription	of					AI	Ty	ment oe	
Asbestos-Containing TO BE ABA In Facili (13)	TED	Mainte Custod	enan	ce/	Asbes (i.e.	tos Cont thermal surfa	aining M systems cing, VA niscellan	laterial (/ insulati T. or	ACM) on,	(Spe	int lify LF)	Vellova) .	Repair	Encapsulate	Enclosure
		Yes	No	N/A				**************************************				l d		7	late	лſе
Lower R	oof	X			Roof	ing ma	terials	& flash	ning	4,50	SF	Х				
3	-											-	-			
												+	+	1		
Name of Registered Wast Lilich Corporation	e Hauler			DEP W		Cubic of Was			Name of Re			fill				
City, State				724		60			G.R.O.W.	S Lar	Ifill	ŧ				
Woodland Park, New	Jersey 07424	ϵ^i_{-i}		, Fi	ř	06/22	al Date /15		City, State Morrisvill	e, Pen	sylv	ania				
Completed by Momo Glavatovic		Title Vice Pre	esid	ent		S	ignature		AA			Date	10.			
		1.00 11		JIII.				0				06	U	115)	

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

U	F ASD	E21	23	AD.	AIL	
t to	NJAC	8:60	an	d 5	:16)	
					. [지수도] [17] [2] [2] [2] [2] [2] [2] [2]	t to NJAC 8:60 and 5:16)

Date of Notification (1)			Т	Name	of Building	Owner/Operator (2	2)				-		
06 / 01	, 15						3						
			- 1		Coeppl			111					
Agencies Notified Type N ☐ EPA	otification				Address					m. w' + q f			
▼ DOLWD					ivenue Av								
	endment #			1.5(2)	itate, Zip C								
	ergency (in	cluding			Orange, N			1=					
	ification)				of Contact			lelephi	ne Numbe	er			
☐ Car	cellation			Amy F	Koeppl			1					
				FAG	CILITY IN	FORMATION							
Name of Facility Where Abateme	nt is Taking	Place	(3)				Type of Facility	(4.)	.0				
Private house							School (K-12	()	16 4 0)				
Street Address							Subchapter 8 Other (i.e., p	r vate and	commerc	ial bui	ldinas		
37 Benvenue Avenue							homes, etc.)		Commore		.u.i.g.	61	
City (5)							Square Feet	# of F	ors	Bio	g. Ag	e	
West Orange, NJ 07052													
County (6)				Coun	ty Code (7) (STATE USE ONLY)	Current Use (Pr	ior if bein	demolish	ned)			
Essex					157. 158.07		7155						
Name of Monitoring Firm Hired b	y Building	Owner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)						
130						Gr Tech LLC	, ,						
Street Address						Street Address			-				-
						576 Valley Rd #	1283						
City, State, Zip Code	_					City, State, Zip C			A				-
5.ty, 5tate, 2.p 5555													
Project Manager for Monitoring F	irm		Tele	phone	No	Wayne, NJ 0747 Telephone No.	70	Licen	e No.				
Trojest Manager for Methicshing 1	0.00		1	phone	140.								
Start Date (10)	Scho	duled C	omnic	tion Do	ite (11)	973-638-1777 Name of OSHA N	Appitor	0112					
		9.1		_ ′ -	13	Envirovision Co	nsultants,Inc				2002/2005		
Occupancy Status During Abater						Street Address							
					oribo	20-21 Wagaraw		35E		73			
Time of Abatement:A	M- P	M/	PM	s - Des	AM	City, State, Zip C	ode						
						Fair Lawn, NJ 0							
Scope of Work (Check all that ap	ply)						o and decontaming tainment with New			press	ure		
		X R€	novati	on		Mini Eng	locuro						
☐ ≥ 160 sf or ≥260 lf		_	emolitic			Gloveba	a Procedure	ent with	Negative	Press	ure		
		-		200		☐ Non-Exe	empted (*) and No	r	Procedure	_	1	_	
			s Locat Norma							Aba	ateme	ent T	ype
Location of Asbestos-Containing Materia	(ACM)	10000	ed Sole		Ashe	Description of stos Containing Ma		An	ount	Re	Re	En	En
TO BE ABATED		1	intena			., thermal systems		0/35/	ecify	Remova	Repair	Encapsulate	Enclosure
IN Facility (13)		Cus	todial (12)	Stall?		surfacing, VAT		SIF	r LF)	val	-	sula	иге
(15)		Vaa	1	NI/A		other miscellane	eous)					ē	
	_	Yes	No	N/A						EN		_	
Basement		1		X	Duct ins	ulation		30 SF		\boxtimes	Ш	Ш	
		П	П	To						П	П	П	
	_	1][-	8. 	-] [1	분
			Ш			T-2	00				Ш	Ш	
Name of Registered Waste Haul	er		NJ	DEP Wast	e Hauler ID No.	Cubic Yards of Was	te Name of Regi	s ered La	dfill				
Gr Tech LLC				00337	85	TBD	T.R.R.F. Inc						
City, State						Disposal Date	City, State						
Wayne, NJ 07470						TBD	Tullytown, P	11					
Completed By (Print or Type)	Tit	le				Signature /	1 411 , 10 1111, 1	-	Da	te			
						//	Ic Wenad	0			11.5		
N.Jevtic ASB-41	Ov	vner				//ei	wer ad		06/	01/20	112		
MAY 11		* Do no	ot use i	his for	m for asbes	tos licensure exem	oted activities.						

CK 3466

Date of Notification (1) 06/01/15			1000		Building O ANAGE			(2)			Live		L	20	15	
Agencies Notified	Type Notification			treet Ad 2 DEN	dress	RT						2.11			,,,	
DEP DOL	Initial Amended Amendment		L	ÄKEV	e, Zip Cod /OOD, N		701		-1	7						G.
DOH DCA	justification) Cancellation	•	10000		Contact HOCHM	AN				Teleph	ne i	Numbe	er.			
		DI (0)		FACIL	ITY INFO	RMAT	ION	Tuna	of Facility (4							
Name of Facility Where	Abatement is Taking	Place (3)						-	School (K-12	5						
Street Address 528 E. LAKEWOOI	D AVENUE							×	Subchapter & Other (i.e. pr	Other th			uildi	ngs,	nome	s,
City (5) OCEAN GATE, NJ									e Feet	# of Flo	ırs		Blo	dg. Ag	ge	
County (6) OCEAN COUNTY				County C	ode (7) SE ONLY)			Currer	nt Use (Prior 1E	f being	emo	olished)			
Name of Monitoring Firm	n Hired by Building (Owner (8)		ASCM	No.				ement Cont							
Street Address								Addres	s DOVE CO	URT	*					
City, State, Zip Code									p Code DD, NJ 08	01	_					
Project Manager for Mor	nitoring Firm		Т	elephon	ne No.		Teleph	none No 668-9).	Li	ens 00	e No.				
Start Date (10) 06/04/15	4	Scheduled 06/04/15	Comp	pletion D	Date (11)				A Monitor	SIONA	S					
Occupancy Status Durin	ng Abatement (Chec	k Only One)						Addres			-			= = = = = = = = = = = = = = = = = = = =		
Abatement Perform	cated During Entire Fined Outside of Norm	Period of Aba al Facility H	ateme ours	ent			City, S	State, Zi	p Code		_					
Other - Describe:	All That Applied					= Vi	LAK	EWO	DD, NJ 08		_					
Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	чі тпас Арріу)	The same of the sa	novati nolitio				>	Min	Containme i-Enclosure		jati	ve Pre	ssur	е		
		- A1 - E1							n-Exempted		n-F	riable		2000	100	
		100000000000000000000000000000000000000	catio	200										Abate Ty		
Locatio Asbestos-Containing TO BE AE In Fac (13)	g Material (ACM) BATED ility	Used S Maint Custoo (Solely enan	y by ce/		os Co therm sur	escription ntaining I al system facing, VA miscella	Material s insula AT, or		Amo (Spe SF or	ify		Removal	Repair	Encapsulate	Enclosure
BASEM	IENT	Yes	INU	INA	F	PIPE	INSUL	ATION	1	70	F		X			
				24		-1-2-7										
Name of Registered Wa	aste Hauler		N.	JDEP W	/aste	Cub	ic Yards		Name of F	Registere	Lar	ndfill	- 3			
NEWARK CARTING			Ha	auler ID 509		99555	laste ARDS		IESI	3409						
City, State NEWARK, NJ							osal Date 04/15)	City, State BETHLI		A					
Completed by JOSEPH PERLSTE	EIN	Title OWNE	R				Signatur	е				Date 06/0		5		

NOTIFICATION OF ASBESTOS ABATEMENT

	(Pur	sua	nt t	o <u>N.</u>	J.A.	C. 8:60 and	12:120)	(1.2	# 28	17			
Date of Notification (1) 5/8/15						Owner / Operator		- Dei 11.0					80	
	ded R#2-6/1/15	C T	ity, S	State 8	ngtor Zip C er Nev	n Street ode v Jersey			11		2011 lepho		umb	er
	ellation	Н	arol	d Ba	ldwin					1				
		(0)		CILIT	Y INF	ORMATION								
Name of Facility Where Abateme Toms River Central Office	nt is Taking Plac	e (3)				Type of Facility School (N								
Street Address							ter 8 (Othe	er than K-1	12					
19 Washington Street						Other (i.e	e. private &	Floors	cia b		, hom g. Age		tc.)	
City (5)	County (6)	Соц	nty (Code (7)	37000	# 01	3		Diu	g. Agi	80		
Toms River	Ocean	Cou	rity C	ouc (,,,	Current Use (sl ed	(k		00		
Name of Monitoring Firm Hired b	v Building Owner	(8)		ASC	M No.			ntractor (9	9)					
TTI ENVIRONMENTAL, INC.	y Dunuing Owner	(0)		1.00	71111111	BRISTOL E	NVIRONI			:				
Street Address 1253 NORTH CHURCH STRE	=FT					Street Addres 1123 BEAVE		FT						
City, State & Zip Code						City, State & 2	Zip Code							
MOORESTOWN, NJ 08057 Project Manager for Monitoring F	irm IT	alant	one	Numb	ner .	BRISTOL, P			1 -6	ense Nur	nher			-
Harold Baldwin		56-8			JC1	215-788-604					0050	9		
Scheduled Start Date (10) 6/1/15	Scheduled Comp	letior 6/3/1		te (11))	Name of OSH BRISTOL E			II C	;				
Occupancy Status During Abater Facility Closed/Vacated [ateme	nt	Street Addres		ET						
Abatement Performed Ou		Hou	rs –	7am to	o 3pm	City, State & 2								
Describe: 5 PM - 1:30 Facility Occupied During	Abatement					BRISTOL, P	'A 19007				II.			
Scope of Work (Check all that ap	ply)							Containm	ne it	with Neg	gative	Pres	sure	3
≥3 sf or ≥3 If	1	\boxtimes		ovatio			Min	i-En closur	re		53			
≥160 sf ≥260 lf	1		Den	nolitio	n			ve Bag Pr n-Exempte			riable	Dro	ood:	ıro
Location of		ls L	ocati	ion	T	Description			_	ount		atem		
Asbestos-Containing	g 1			Jsed		Asbestos-Con Material (A0				ecify r LF)			m	
Material (ACM) TO BE ABATED	l V		lely l enan	ce or		(i.e., thermal sy	ystems) I	LF)	Ren	Re	Encapsulate	Enclsoure
in Facility (13)	C		dial 3 (12)	Staff?	**	insulation, surfactor or other miscella					Remova	Repair	sula	sour
(13)	Y		No	N/A		or other miscen	aricous)				-		te	0
Admin Ramp Area		X				Vat/Mast	ic		2 0	SF	\boxtimes			
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		┽	H	H							ዙ	H	H	ዙ
		5	H											
						12	T							
Name of Registered Waste Haule	er		100	DEP \		Cubic Yards of Waste	Name of	Reg stere	d .a	ndfill				
SERVICE TRANSPORT GRO	UP, INC.			990		3		A LAND	FL	L				
City, State NEW CASTLE, DE 19720						Disposal Date	City, Stat	e SBIJRG,	CH	44688				
Completed By (Print or Type) PATRICK T. DeCARO			Tit PF		MGR.	Signature	D.K	Har	0/	1	Date 5/8/1	5		

PD 15050

EMERGENCY NOTIFICATION

CIECK # 1UJ

State of New Jersey Notification of Asbestos Abatement

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

		I was a second						0.5		manual.		
Date of Notification (1) 06/01/15					Name of Building Owner/O Mr. Michael Dagostino	perator (2)		UV	14 -	_010		
Agencies Notified		Notification	Type		Street Address							
⊠ EPA		☑ Initial No	tification		Walnut Rd, City, State, Zip Code							
□ DCA		☐ Amended	5 #		Dover NJ							
⊠ DOL		⊠ Emerger	ncy notifi	cation (including	Name of Contact		T	lenh	one Nu	mher		
⊠ DEP		justification)					-	COL	OHE ING	HDG		
		☐ Cancelle			Uros Spasic							
⊠DOH		M Calicalia	u									
				FACILITY INF								
Name of Facility Where Aba	atement is T	aking Place	(3)		Type of Facility (4)							
Residential					☐ School (K-12)							
					☐ Subchapter 8 (other th	an K-12)						
Street Address												
20 Walnut Road					XOther (i.e. private & comm	nercial build	ina	ho	mae at	(1)		
						loors: 2						
City (5)	County (6)	***************************************	Count	v Code (7)	3q. reat. 1500 # Of F	10015. 4	D	. 19. /	nge. 12	,00		
Dover	The second secon	rris		Use Only)	0	deves to be a di						
Dover	1810	1113	Totale	USE OTHY	Current Use (prior if being	aemoii:inea)	: <u>F</u>	Vati	Resid	ence		
Name of Monitoring Firm H	ired by Bldg	. Owner (8)	ASCN	No.	Name of Contractor (9)					2		
N/A					BL Contracting Inc.							
Street Address		-			Street Address							
Otreet Address					5 Marguerite Lane							
					5 marguerite Lane							
0.4 0.4 7.4 0.4					City Chata ZinCada			-				
City, State, Zip Code					City State, ZipCode							
					Towaco, NJ 07082							
							-					
Project Manager for Monito	ring Firm	Telephone	Number		Telephone Number		L	ens	e Numb	er		
	A.A O.A C C C C C C C				973-901-0153		0	265				
Scheduled Start Date (10)		Scheduled	Complet	ion Date (11)	Name of OSHA Monitor			2000				
		06/03/2015		and a second sec	BL Contracting Inc.							
06/02/15		00,00,2010			DE COMMERCING MC							
Occupancy Status During A	hatamant (Chack only o	ral		Street Address			-				-
☑ Facility Closed/Vacated				nt	5 Marguerite Lane							
				111	5 Maryuerite Laire							
Abatement Performed O	utside of No	mai racility	nours -				-					
Describe					City, State, Zip Code							
□Other – Describe:					Towaco, NJ 07082							
Source of Work (Check all t	that applied				<u> </u>		-	-	80000			
Source of Work (Check all	trat apply;											
[9] > 2 of or > 2	ır			☐ Renovation	FT Min:	-Enclos ure						
				□ Demolition		ebag Froce	dim					
□ ≥ 160 sf or ≥	200 11			Demonition		Friable Pro						
					□ NOTE	-FIIADR FIO	cet	II e				
Location of Asbestos-	ls Lo	cation Norma	ally	Description of A	sbestos Containing Material	Amou	nt		Abatem	ent Typ	oe .	
Containing Material (ACM)	in Use	d Solely by		(ACM) (i.e. then	mal systems insulation,	(Speci	fy :	=				
Facility (13)	Mair	nt./Custodial S	Staff?	surfacing, VAT,		o LF)		1	Remove	Repair 1	Encap E	Enclose
	(12)			5				-				
	YES		NA									
Basement	1	1		Thermal System	n Insulation (pipe wrap)	1)0 LI	=	1	X	1	T	I
Dasement	1		1223	Thermal Oyster	in modicion (p.po map)	1,00 2.		1		avenue.		
-0.0						- 10	-	1	proces	-	-	-
2 nd Floor Pipe Chase	-		X	Thermal Syster	n Insulation (pipe wrap)	9 lf			X	1]
<u> </u>			-	-				+		-	-	
	ĺ							and desired				
Name of Reg. Waste Haule	<u>:</u> Γ	NJDEP Wa	ste Haul	er ID#	Cubic Yards of Waste		N	me	of Regis	stered L	andfill	
Waste Management of Penr		32604	and of the State o	and the second constraints			Ī	(.R.)	F			
and the second of the second									**			
					·	Disposal D	ate		10	City, Sta	te	
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									1	Julytow	,	
Completed by (Print or Type	e)	Title			Signature		T	te				
	<u>~1</u>	The second secon					=					
Nego vasuic		President										
Nedo Vasilic		President			New Ugeilie		5	6/1	5			

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						10		O1							
Date of Notification (1) 05/27/15				ame of Bu Sheree D		ner/Ope	erator (2)		J	IN 4	201	5		
Agencies Notified Type Notifi	ication			treet Addr		1									
× EPA × Initial			7 2200	Elliot F											
EPA Initial DEP Amer DOL Amer	nded ndment #	#		city, State, Califon, I	NJ, 078	30									
L Emer	rgency-(i	ncluding		lame of Co	3.5%					Telent	ine Numb	or			
	cation)			1-11-1-12-12-12-12-12-12-12-12-12-12-12-											
				FACILIT	Y INFOR	MATIO	N		= "" (4)						
Name of Facility Where Abatement is	s Taking	Place (3)							Facility (4)						
Sheree Dye							-	F SI	chool (K-12 ubchapter 8	(Other)	an K-12)				
Street Address 5 Elliot Farm Road							Ī	× Ot	her (i.e. pri	vate & c	mmercial	buildir	ngs, h	omes	S,
								Square		# of F	ors	Blo	lg. Ag	е	
City (5) Califon								22							
County (6)				County Co				Current	t Use (Prior	if being	lemolished	d)			
Hunterdon			(-	STATE US	E ONLY)		-								
Name of Monitoring Firm Hired by B	Building (Owner (8)		ASCM N	10.				ement Cont	actor (9					
5500 1								Abaten							
Street Address								Address	s Street Su	ite A4			20		
						-	500000000000000000000000000000000000000	tate, Zip	Control States						
City, State, Zip Code									en, NJ 0	'047					
Project Manager for Monitoring Firm	n		17	Telephone	No.	-	Teleph	none No		$\neg \neg$	cense No.				
Project Manager for Monitoring 1 in				*			201-	293-63	305	1	1223				
Start Date (10)		Scheduled	Com	pletion Da	ate (11)				A Monitor						
06/09/15		06/18/15	30,						CONSU	ING	LLC				
Occupancy Status During Abateme	nt (Chec	k Only One))			-		Address	S TE EAST	TITIS	107				
Facility Closed/Vacated During Abatement Performed Outside	g Entire	Period of Al	batem	ent		-		State, Zip			107				
Abatement Performed Outside Other – Describe:	of Norn	nal Facility I	Hours	ě		_	35.0		07083						
Scope of Work (Check All That App	oly)		275.014												
	,,,,	X R	enova	tion				Full	Containme	nt with !	egative Pr	essur	е		
≥3 sf or ≥3 lf ≥1.60 sf or ≥260 lf		E-manual Control	emolit				+	Min	i-Enclosure						
_													cedure	<u> </u>	
							3	Nor	-Exempted	(*) and	on-Friable	e Proc	0000.		t
	_		l ocati	on			3	Nor	n-Exempted	(*) and	on-Friable	1	Abate		
Location of		ls I	Locati	lly			scription	Nor	n-Exempted	(*) and		1			T
Location of Asbestos-Containing Material (ACM)	is I N Used		lly ely by	Asbesto	os Conta	scription	Nor n of Material	(ACM)	(*) and	ount		Abate Ty	ре	m m
Asbestos-Containing Material (A TO BE ABATED	ACM)	Is I N Used Mair	ormal d Sole ntena odial-S	lly ely by nce/ Staff?	Asbesto (i.e. t	os Conta thermal surfac	scription aining l system sing, V	n of Material ns insula AT, or	(ACM)	(*) and An (S)			Abate Ty	ре	Enclos
Asbestos-Containing Material (ACM)	Is I N Used Mair	ormal d Sole ntena	lly ely by nce/ Staff?	Asbesto (i.e. t	os Conta thermal	scription aining l system sing, V	n of Material ns insula AT, or	(ACM)	(*) and An (S)	ount ecify	1	Abate		Enclosure
Asbestos-Containing Material (<u>TO BE ABATED</u> In Facility	ACM)	Is I N Used Mair	ormal d Sole ntena odial-S	lly ely by nce/ Staff?	Asbesto (i.e. t	os Conta thermal surfac	scription aining l system sing, V	n of Material ns insula AT, or	(ACM)	An (S) SF	ount ecify r LF)		Abate Ty	ре	Enclosure
Asbestos-Containing Material (<u>TO BE ABATED</u> In Facility	ACM)	Is I N Usec Mair Custo	ormal d Sole ntena odial-9 (12)	lly ely by nce/ Staff?	(i.e. t	os Conta thermal surfac other m	scription aining l system sing, V niscella	n of Material ns insula AT, or	(ACM)	An (S) SF	ount ecify		Abate Ty	ре	Enclosure
Asbestos-Containing Material (TO BE ABATED In Facility (13)	ACM)	Is I N Usec Mair Custo	ormal d Sole ntena odial-9 (12)	lly ely by nce/ Staff?	(i.e. t	os Conta thermal surfac other m	scription aining l system sing, V niscella	n of Material ns insula AT, or ineous)	(ACM)	An (S) SF	ount ecify r LF)	Removal	Abate Ty	ре	Enclosure
Asbestos-Containing Material (TO BE ABATED In Facility (13)	ACM)	Is I N Usec Mair Custo	ormal d Sole ntena odial-9 (12)	lly ely by nce/ Staff?	(i.e. t	os Conta thermal surfac other m	scription aining l system sing, V niscella	n of Material ns insula AT, or ineous)	(ACM)	An (S) SF	ount ecify r LF)	Removal	Abate Ty	ре	Enclosure
Asbestos-Containing Material (TO BE ABATED In Facility (13)	ACM)	Is I N Usec Mair Custo	ormal d Sole ntena odial-9 (12)	lly ely by nce/ Staff?	(i.e. t	os Conta thermal surfac other m	scription aining l system sing, V niscella	n of Material ns insula AT, or ineous)	(ACM)	An (S) SF	ount ecify r LF)	Removal	Abate Ty	ре	Enclosure
Asbestos-Containing Material (A TO BE ABATED In Facility (13) Roof		Is I N Usec Mair Custo	ormal d Sole ntenal odial-9 (12)	lly ely by nce/ Staff?	(i.e. t	os Conta thermal surfac other m	scription aining l system sing, V niscella	n of Material is insula AT, or ineous)	(ACM) tion,	An (S ₁ SF	ount ecify r LF)	Removal	Abate Ty	ре	Enclosure
Asbestos-Containing Material (ATO BE ABATED In Facility (13) Roof Name of Registered Waste Hauler		Is I N Usec Mair Custo	ormal di Sole di Sole ntena odial - Si (12)	NJDEP Williams	Asb	os Conta thermal surfac other m	scription aining l system Sing, V/ niscella	n of Material is insula AT, or ineous)	(ACM) tion,	An (St SF 600	ount ecify r LF)	Removal	Abate Ty Repair	e Encapsulate	Enclosure
Asbestos-Containing Material (ATO BE ABATED In Facility (13) Roof Name of Registered Waste Hauler SAN TON SERVICES		Is I N Usec Mair Custo	ormal di Sole di Sole ntena odial - Si (12)	lly by nce/ Staff?	Asb	os Conta thermal surfac other m pestos Cubic of Was	scription aining lasystem sing, Whiscella Slate	n of Material is insula AT, or ineous)	(ACM) tion,	An (St SF 600	ount ecify r LF)	Removal	Abate Ty Repair	e Encapsulate	Enclosure
Asbestos-Containing Material (ATO BE ABATED In Facility (13) Roof Name of Registered Waste Hauler SAN TON SERVICES City, State		Is I N Usec Mair Custo	ormal di Sole di Sole ntena odial - Si (12)	NJDEP Williams	Asb	os Conta thermal surfac other m pestos Cubic of Was	scription aining l system Sing, V/ niscella	n of Material is insula AT, or ineous)	(ACM) tion,	An (St SF 600	ount ecify r LF)	Removal	Abate Ty Repair	e Encapsulate	Enclosure
Asbestos-Containing Material (ATO BE ABATED In Facility (13) Roof Name of Registered Waste Hauler SAN TON SERVICES City, State KENILWORTH, NJ		Is I N Usec Mair Custo	ormal di Sole di Sole ntena odial - S (12) No	NJDEP Williams	Asb	cos Contacted and Contacted an	scription aining lasystem sing, Whiscella Slate	Nor n of Material ns insula AT, or inneous)	(ACM) tion, Name of MEDO City, Sta	An (St SF 600	ount ecify rLF)	Removal x	Abate Ty Repair	e Encapsulate	Enclosure
Asbestos-Containing Material (ATO BE ABATED In Facility (13) Roof Name of Registered Waste Hauler SAN TON SERVICES City, State		Is I N Usec Main Custo	ormal disconsistent of the second of the sec	NJDEP Williams	Asb	cos Contacted and Contacted an	scription aining system sing, Whiscella Slate	Nor n of Material ns insula AT, or inneous)	(ACM) tion, Name of MEDO City, Sta	An (St SF 600	ount ecify rLF)	Removal	Abate Ty Repair	e Encapsulate	Enclosure

CK 346 9

Project Manager for Monitoring Firm Telephone No. Size Address Size Addre	Date of Notification (1) 06/02/15			2,50			wner/Oper			NT		U	11	4 4	110		
DEP		_					MORE A	AVEI	NU	E					17		
Emergency (including)	DEP	Amended						ı									
Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12)	William III	justification)	cluding								Tele	pho	ie Nun	nber			
Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Street Address Type of Facility (4) Subchapter 8 to their it in K-12) Subchapter 8 to their it in K-12 Subchapter 8 to their it in K-1	LI DOA	Carrocalation			FACIL	ITY INFO	RMATION		_								
Subchapter 8 (Other the No. 12 other (Le. priv. at 8 & co. 1	Name of Facility Where	Abatement is Taking	Place (3)						Тур	pe of Facility	(4)						
Age																	
May															inas,	nome	s,
County (6)	149 EAST HAND A	VENUE								etc.)					-		
CAPE MAY COUNTY	CONTROL OF THE PROPERTY OF THE								Sq	uare Feet	# 01	FIC	rs	BI	ag. A	ge	
Name of Monitoring Firm Hired by Building Owner (8)		TY						_			ior f bei	ng (molish	ned)			
AAA LEAD PROFESSIONA S	Comment of the commen		vner (8)		ASCM	No.	- N	lame	of A	Abatement Co	ntractor	(9)	_				
City, State, Zip Code	Name of Monitoring 1 mi	Trinoc by Bulloning of						1000-000			ESSIO	NA	S				
Project Manager for Monitoring Firm	Street Address						100				OURT						
Telephone No. Telephone No. Telephone No. Telephone No. Taylor Telephone No. Taylor Telephone No. Taylor Telephone No. Taylor Taylor Telephone No. Taylor Taylor Telephone No. Taylor Taylor Taylor Telephone No. Taylor Taylor Taylor Telephone No. Taylor Taylo	City, State, Zip Code										08701						
Start Date (10)	Project Manager for Mo	nitoring Firm		1	Telephon	e No.						- 7		0.			
O6/12/15 O6/12/15 O6/12/15 O6/12/15 AAA LEAD PROFESSIONA S Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Scope of Work (Check All That Apply) Scope of Work (Check All That Apply) ≥3 sf or ≥3 if	7307 - 8900							eres.		5. A90 E		12	00				
Facility Closed/Vacated During Entire Period of Abatement Abatement Promed Outside of Normal Facility Hours Other – Describe: City, State, Zip Code LAKEWOOD, NJ 08 '01					pletion D	Date (11)	1,000					NA	S				
Abatement Performed Outside of Normal Facility Hours Other – Describe: Scope of Work (Check All That Apply)	Occupancy Status Durin	ng Abatement (Check	Only One)							OLIDI	_					
City State Name of Registered Waste Hauler Name of Registered by Title Name of Registered waste Name of Registered Name of Registered waste Name of Registered waste Name of R	➤ Facility Closed/Vac	cated During Entire Pe	eriod of Al	oatem	ent						UNKI						
Salid of 23 if Salid of 260 if Renovation Demolition Renovation Renovation Renovation Demolition Renovation Renova	Abatement Perform Other – Describe:	ned Outside of Norma	il Facility I	Hours							08''01						
≥ 160 sf or ≥260 If ≥ 2160 sf or ≥260 sf or ≥260 If ≥ 2160 sf or ≥260 s	Scope of Work (Check /	All That Apply)						72.2	200								
Asbestos-Containing Material (ACM) Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A EXTERIOR EXTERIOR EXTERIOR INTERIOR	The second of th		-					F				n Ne	jative l	Pressu	e		
Location of Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A EXTERIOR EXTERIOR INTERIOR INTERIOR INTERIOR Name of Registered Waste Hauler NEWARK CARTING City, State NEWARK, NJ Completed by Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) SFor JP Abatement Type Abatement	≥160 sf or ≥260 lf		× De	emoliti	on					Glovebag Pr	oce dure						
St. Location Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A								>	<u> </u>	Non-Exempt	ed *) ar	id N	n-Frial	ole Pro			_
Location of Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) For it is a possible of the property of the pro			0.6762645		7200						*						L
Maintenance/ Custodial Staff? (12) Maintenance/ City Stafe (13) Maintenance/ City State (13) Maintenance/ City St						Ashest				erial (ACM)		Ama	nt			m	
Yes No N/A SIDING 5000 SF X	Asbestos-Containing TO BE AB	g Material (ACM) BATED	1 232 1 231				thermal sy	ystem	is in	sulation,	(Spe	ify	Re	R	nca	Enc
Yes No N/A SIDING 5000 SF X		5000 M	Cusio		otali :						S	10	_F)	Mov	epai	psul	losu
EXTERIOR INTERIOR INTERI	(13	,	Yes	No	N/A									<u>a</u>		ate	Ге
INTERIOR INTERI	EXTER	RIOR					SII	ONIC	3		-			Х			
INTERIOR INTERIOR Name of Registered Waste Hauler NEWARK CARTING City, State NEWARK, NJ Completed by INTERIOR MASTIC Cubic Yards of Waste 30 YARDS Disposal Date 06/12/15 Signature Date 100/100/15	EXTER	RIOR					- Carriera		1G			_		X			
Name of Registered Waste Hauler NEWARK CARTING City, State NEWARK, NJ Completed by NJDEP Waste Hauler ID No. 04509 Cubic Yards of Waste 30 YARDS Cubic Yards of Waste 1ESI City, State Disposal Date 06/12/15 BETHLE HEM F Date	INTER	RIOR					Т	ILE						X			
NEWARK CARTING Hauler ID No. 0f Waste 30 YARDS City, State NEWARK, NJ Completed by Title Disposal Date 06/12/15 Disposal Date 06/12/15 Signature Date 06/00/45	INTER	RIOR				C and the composition of the contract of the c	MA	STI	С	and the same	7.58			25000			
NEWARK CARTING 04509 30 YARDS Disposal Date 06/12/15 Completed by Title Disposal Date 06/12/15 Signature Date 06/00045	Name of Registered Wa	aste Hauler		0.00			CONTRACTOR DESIGNATION				of Regist	ere	Landfi	II			
NEWARK, NJ Completed by Title Date Date Date	NEWARK CARTIN	G	4			NO.	30 YAF	RDS									
Completed by							The second secon		е			M F	A				
		EIN	100000000000000000000000000000000000000	ER			Sig	natur	re						15		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)			Name	of Building	g Owner/Operator (2	2)						
05 /28 /	15		Tra	nsformat	tion Life Church			H	4 2	015		
Agencies Notified Type Notifica	tion		Street	Address								
⊠ EPA ⊠ Initial			190	Valley B	Blvd.							
□ DOLWD □ Amended			City, S	State, Zip C	Code							
□ DHSS Amendme	-	_	Wo	od Ridge	e, NJ 07075				-			
DCA Emergence (NJAC 5:23-8) Emergence justification		ig	Name	of Contac	t		Telephon	Numb	er			
☐ Cancellati	2.110		Jar	nes Arm	oriester							
			FΔ	CILITY IN	IFORMATION			-				
Name of Facility Where Abatement is T	aking Plac	e (3)	17	OILITT III	II OKIMATION	Type of Facility ((A)					
Transformation Life church	uning i lux	<i>(</i> 0 <i>)</i>				School (K-12	7.0		*			
Street Address						☐ Subchapter 8	(Cither tha	K-12)				
190 Valley Boulevard						Other (i.e., pr	ivate and c	mmerc	ial bu	ilding	js,	
City (5)						homes, etc.)	# af		DI	J = 0		
Wood Ridge						Square Feet	# of Flo	S	DI	dg. A	ge	
County (6)			Cour	ati Cada /7	WOTATE LICE ON W	O						
			Cour	nty Code (/	()(STATE USE ONLY)	Current Use (Pri	or r being	emolisr	iea)			
Bergen		(0)				church						
Name of Monitoring Firm Hired by Build	ling Owne	(8)	ASCM	No.	Name of Abateme	10.7						
Detail Associates					Lilich Corpor	ation			J			
Street Address					Street Address							
300 Grand Ave					606 McBride							
City, State, Zip Code					City, State, Zip Co							
Englewood, NJ 07631					Woodland Pa	rk, NJ 07424						
Project Manager for Monitoring Firm			phone		Telephone No.		License	Vo.				
Stephen Jaraczewski		20	01-569	-6708	973-225-8400		0110	d				
T I	cheduled	982		1000	Name of OSHA M	lonitor						
06 /09 /15	06	/ _ 13	_ / .	15_	J&S Environ	nental Labs						
Occupancy Status During Abatement (C	Check only	one)			Street Address							_
☐ Facility Closed/Vacated During Entir					2333 Route 2	2 West						
Abatement Performed Outside of No	rmal Faci	ity Hou	s - Des	scribe	City, State, Zip Co	ode						
Time of Abatement: 7AM-3:30PM/_	PM-		AM		Union, NJ 07							
Scope of Work (Check all that apply)	-				12 WRAP							
D >2 of oc > 2 If	K-7 -				□ Full Cdnf	ainment with Neg	ati re Pres	ıre				
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		enovati emolitic			☐ Mini-Enc ☑ Gloveba							
		on iona			☐ Non-Exe	mpted (*) and No	n-Friable P	cedure	€			
		ls Locat							Ab	atem	ent T	уре
Location of	. 116	Norma sed Sole		14.00040000	Description of					_		T .
Asbestos-Containing Material (ACM TO BE ABATED	' N	laintena	nce/	Asbe	estos Containing Ma e., thermal systems	terial (ACM)	Amoi (Spec		Removal	Repair	пса	nclo
IN Facility	Cu	stodial	Staff?	(surfacing, VAT		SF or		oval	7	Encapsulate	Enclosure
(13)	-	(12)		-	other miscellane	ous)					ate	(D
	Yes	-	N/A									
children's church				pipe ins	sulation		750	If				
service area				pipe ins	sulation		75					
hallway		\boxtimes		pipe ins	sulation		24					
recreation room		\boxtimes		pipe ins	sulation		400	F				
Name of Registered Waste Hauler		- 50	JDEP '		Cubic Yards of	Name of Regis	tered Land	II			-	
Lilich Corporation		, 1	1872		Waste	G.R.O.W.S	La ndfill					
City, State			1012	*	Disposal Date	City, State		-				
Woodland Park, NJ					n/a	Morrisville	PA					
Completed By (Print or Type)	Title				Signature		TOWNS OF	Dat	Δ			
Momo Glavatovic	vice p	resida	nt		Gigitature	AL		Dat	٠ ^	10	11.	
ASB-41	Aice h	. colub			(07	oxe	111	7
MAY 11	* Do no	ot use th	is form	for aches	tos licensure exemn	ated activities				A(1)	t	

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

State of New Jersey

		N		CATION	OF ASBE	ESTOS A			CA	cocl		3	9-	35	- 1
Date of Notification (1) 6/1/15			100	Name of Leo Le	Building (Owner/O	perator (2	2)					, .		
Agencies Notified	Type Notification			Street Ac 219 Cy	idress press D	rive					JUN		4 2	015	
X EPA DEP X DOL	Initial Amended Amendment	#			te, Zip Co a, NJ 0										
DOH DCA	Emergency justification) Cancellation	,		Name of Leo	Contact			-		Talanh	no M				
	_			FACIL	ITY INFO	DRMATIC	ON								
Name of Facility Where house	Abatement is Takin	ig Place (3)							of Facility (4 School (K-12	550					3 L 70 C
Street Address 2084 Pleasant Park	kway							×	Subchapter (Other (i.e. pretc.)	8 (Other t			dings,	home	es,
City (5) Union		6 4					100		re Feet	# of Flo	ors	11 813	ldg. A	ge	
County (6) Union		Access to		County C	ode (7) ISE ONLY			Curre	nt Use (Prio	r if being	emolish	ed)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCM	No.				tement Cont						
Street Address					1000011100 000 00		Street A	ddres							
City, State, Zip Code	***************************************						City, Sta	ate, Z	ip Code , NJ 0741						
Project Manager for Mor	itoring Firm		1	Telephor	ne No.		Telepho	ne N	0.	Li	ense No),			
Start Date (10) 6/17/15		Schedule		pletion [Date (11)		Name o	f OSH	HA Monitor						
Occupancy Status Durin	a Abatement (Chec	ck Only One	9)				Street A	ddres	SS		-		_		
Facility Closed/Vac Abatement Perform	ated During Entire led Outside of Norr	Period of A	batem	ent				21127407407	ip Code						
Other - Describe:															
Scope of Work (Check A	II That Apply)	- Contraction	enova						I Containme		ative P	ressu	re		
× ≥160 sf or ≥260 lf			emoliti	on			×		ni-Enclosure ovebag Proc						
								No	n-Exempted	(*) and N	n-Friabl	e Pro			
Location		N	Locati	у		Des	scription of	of					Abate Ty	ement pe	
Asbestos-Containing TO BE AB In Faci (13)	ATED lity	Maii Custo	d Sole ntenar odial S (12)	taff?		thermal surfac	aining Ma systems cing, VAT niscellane	insula , or		Amo (Spe SF or	ify	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A										Œ.	
basem	ent			X		pipe	insulati	on		85	F	х			
Name of Registered Was	ste Hauler		0.000	JDEP W		Cubic			Name of F	Registered	Landfill				
Freehold Cartage				auler ID 5939	No.	of Was	MPCCC		Cumber		dfill				
City, State Freehold, NJ						TBD	sal Date		City, State Newbur						

Completed by A. Scott Higgins

Title

President

Signature

Date

6/1/15

		1		CATION	OF ASBEST	TOS ABAT		TI -	111		1,		12	9:	2/
Date of Notification (1) 6/1/15					f Building Ow e DuBarro	ner/Operal	tor (2)					Z	505) (_	X
Agencies Notified EPA	Type Notification X Initial			Street A 124 Cl	ddress lover Stree					P. C.	N	int-	201	J	
DEP X DOL	Amended Amendment				ate, Zip Code e, NJ 072										
DOH DCA	Emergency (i justification) Cancellation	ncluding			f Contact e Dubarro				Telent	ino	Nium	hor			
				FACI	LITY INFORI	MATION									
Name of Facility Where A	Abatement is Taking	Place (3	3)				Ту	pe of Facility (School (K-1	1673 5 72						
Street Address 124 Clover Street							×	Subchapter Other (i.e. petc.)					dings,	home	es,
City (5) Roselle							10000	uare Feet	# of FI	ors		B 6	ldg. A	ge	
County (6) Union					Code (7) USE ONLY)		Cu	ırrent Use (Pri	or if being	em	olishe	ed)			
Name of Monitoring Firm	Hired by Building C	wner (8))	ASCN	И No.	7 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3		batement Cor vironmenta			LC				
Street Address							et Add Box	iress 483, 4 E G	a e Driv						
City, State, Zip Code								, Zip Code od, NJ 074	18						
Project Manager for Mon	itoring Firm	13		Telepho	ne No.	100000000000000000000000000000000000000	ephone 3-764	No. -2276	100	ens 3	se No	,			
Start Date (10) 6/13/15		Schedul 6/30/1		npletion	Date (11)	Nan	ne of C	SHA Monitor							
Occupancy Status During	g Abatement (Check	Only O	ne)			Stre	et Add	Iress		-					
	ated During Entire P led Outside of Norm work in basement					City	, State	, Zip Code		-					
Scope of Work (Check A	II That Apply)		120000							-			-		
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		-	Renova Demolit				×	Full Containm Mini-Enclosure Glovebag Pro- Non-Exempte	e ce dure					e	
		Is	s Locati	on									Abate	ement	
Location Asbestos-Containing TO BE AB/	Material (ACM) ATED	Use Ma	Normal ed Sole aintenar stodial S (12)	ly by nce/	(i.e. the	ermal syste surfacing,	g Mate ems ins VAT, o	r	Amo (Spe SF or	ify		Remova	Repair	e Encapsulate	Enclosure
(13)		Yes	No	N/A	01	ther miscel	ianeou	is)				val	air	ulate	ure
baseme	ent			Х	I	pipe insu	latior	ı	8 L			x			
										-					
											131			277	
Name of Registered Was Freehold Cartage	ste Hauler		Н	JDEP Wauler ID	No. o	Cubic Yards of Waste 0	S	Average Comment	Registered n Berks						
City, State Freehold NJ	8 14			1		Disposal Da	ate	City, Stat							
Completed by A. Scott Higgins		Title Pres	ident			Signat	ure	lin			Dat 6/1	e /15			

State of New Jersey

	N		CATION	OF ASBES	STOS A			TOL	1.0			13	30	13	34	0
Date of Notification (1) 6/1/15		- 9	Name of Bryan F	Building O	wner/Op	perator	(2)		~~~			-				
Agencies Notified Type Notification		1 1	Street Ad 58 Mid	ldress wood Av	enue			2 16	-	UN	4	20	15			
X EPA DEP Amended X DOL	#		City, Stat Allenda	e, Zip Cod ale, NJ	le					_						-
□ Emergency □ justification) □ DCA □ Cancellation		11.0	Name of Bryan F						Tel	enh.	ne Ni	ımhe	r		v	
			FACIL	ITY INFO	RMATIC	ON			0							
Name of Facility Where Abatement is Takin	ng Place (3)						Ту	oe of Facility (4 School (K-1)								
Street Address 58 Midwood Avenue							×	Subchapter Other (i.e. p etc.)					uildi	ngs,	home	∋s,
City (5) Allendale			10				-200	uare Feet	# 0	f Flc	rs		BI6 64	dg. A	ge	
County (6) Bergen			County C	Code (7) ISE ONLY)			Cu	rrent Use (Pric	or f bei	ng (molis	shed)				
Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	No.				batement Con vironmental			, LL	C				
Street Address						Street PO E		ress 483, 4 E G	ate D	rive						
City, State, Zip Code			-			City, S	tate	, Zip Code od, NJ 0741		-	* =					
Project Manager for Monitoring Firm		1	Telephor	ne No.		Teleph	none		-	Li 7(ense	No.				
Start Date (10) 6/17/15	Schedule		npletion [Date (11)		200000000000000000000000000000000000000	# 16.5 V. (1-2-1)	SHA Monitor		_				,		
Occupancy Status During Abatement (Che	ck Only On	e)				Street	Add	Iress			-			_		
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe: work in basement					_	City, S	state	, Zip Code				-11				
Scope of Work (Check All That Apply)							_			-	-					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolit				×	1	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	e ce lure						e	
	Is	Locati	on					Troil Example	<u> </u>					Abate	emen	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normali d Sole intenar odial S (12)	ly by nce/		os Cont thermal surfac		Mate s ins		(Amo Spe F or	fy		Removal	Repair	e Encapsulate	Enclosure
3.32	Yes	No	N/A										<u>a</u>		ate	re
basement		Х		boile	r insula	atio	n	6	30 5	F	x					
							_		_	_	-		_			-
										-	-	1				
Name of Registered Waste Hauler Freehold Cartage		Н	IJDEP W lauler ID 5939	0.000, 240,0000	Cubic of Was 10	Yards ste		Name of Wester	000 2000							
City, State Freehold NJ					Dispos TBD	sal Date		City, Stat Birdsbo		4						
Completed by A. Scott Higgins	Title Presi	dent			S	Signature	e	hr			1 0	Date 6/1/	15			

		N		CATION	OF ASBE	STOS	ABATE		Γ .	ako.	0	1		j -	39	3/
Date of Notification (1) 6/1/15				Name of Martin	Building C Sotto	Owner/C	perator	(2)			IU	N	4	2015		
Agencies Notified	Type Notification	w0:	- 1	Street Ac 17 Holl	idress ywood <i>F</i>	Avenu	е									
EPA DEP DOL	Amended Amendment				te, Zip Coo air, NJ 0								=			
DOH DCA	justification) Cancellation		1.00	Name of Martin	Contact Sotto					Teleph	ne l	Numl	oer		TR. 495	
				FACIL	LITY INFO	RMATI	ON ·									
Name of Facility Where A house Street Address	Abatement is Takin	g Place (3)			1/2			Тур	e of Facility (School (K-1 Subchapter	2)	an k	<-12\				
17 Hollywood Aven	ue							×	Other (i.e. petc.)	orivate & co	nme	ercial	build			s,
City (5) Montclair								210		# of Flo			60	dg. A	ge 	
County (6) Essex				County C	Code (7) USE ONLY)			Cur	rent Use (Pri	or f being (emo	olishe	ed)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCM	1 No.				patement Cor vironmenta		, L	LC				
Street Address								Box 4	483, 4 E G	ate Drive						
City, State, Zip Code							10000000		Zip Code d, NJ 074	18						
Project Manager for Mor	nitoring Firm	•	Telephor	ne No.		Teleph 973-		No. -2276	Li 7(e No	•				
Start Date (10) 6/12/15		Schedule 6/30/15		pletion [Date (11)		Name	of O	SHA Monitor							
Occupancy Status Durin	g Abatement (Che	ck Only On	e)				Street	Addr	ess							
Facility Closed/Vac Abatement Perform Other – Describe:	ned Outside of Norr						City, S	State,	Zip Code		_			0		
Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	All That Apply)	_	enova emoliti				>	\ \ \ \ \ \	ull Containm Mini-Enclosure Blovebag Pro Non-Exempte	e ce ture			e Pro	cedur		
Location	n of	1	Locati	ly		De	scription	n of							ement pe	
Asbestos-Containing <u>TO BE AB</u> In Faci (13)	ATED lity	Ma	d Sole intenar odial S (12)	nce/ Staff?		therma surfa	taining N I system icing, VA miscella	s ins		Amo (Spe SF or	ify		Removal	Repair	Encapsulate	Enclosure
crawl sp	nace	No	N/A X		pipe	insula	ation		20	F		x				
orawi si	5466					Pipo					_					
			1000			10::	V			District		AE!!				
Name of Registered Wa Freehold Cartage	ste Hauler		Н	IJDEP W lauler ID 5939		of Wa	: Yards iste			Registered n Berks						
City, State Freehold, NJ						Dispo	sal Date	9	City, Star Birdsbo							
Completed by A. Scott Higgins		Title Presi	dent				Signatur	e	er			Dat 6/1	e /15			

State of New Jersey

		N			OF ASBE	521027				201		13	93	33	4
Date of Notification (1) 6/1/15					Building 0								, ,		
	pe Notification			Street Ac 133 Su	ddress Immit Av	venue					100			214	
× EPA × DEP × DOL	Initial Amended Amendment #_				te, Zip Co										
≥ DOH	Emergency (ind justification) Cancellation	cluding		Name of Julie M	Contact	eon				Telenho	ne Niun	nhar			
	•			FACIL	ITY INFO	RMATI	ON					-1-4			
Name of Facility Where Aba Basement Storage Un		Place (3)					Тур	e of Facility (4 School (K-12						
Street Address 133 Summit Avenue								×	Subchapter Other (i.e. pretc.)				dings,	home	es,
City (5) Summit								Squ 210	are Feet	# of Flo	rs	102336	ldg. A	.ge	
County (6) Essex				County C	Code (7) ISE ONLY)			Cur	rent Use (Prio	r i being c	molish	ned)			×
Name of Monitoring Firm Hir	red by Building Ow	ner (8)		ASCM	No.				oatement Con vironmental		LLC				
Street Address							Street PO E		ress 483, 4 E Ga	at a Drive					
City, State, Zip Code							City, S	tate,	Zip Code od, NJ 0741						
Project Manager for Monitor			Telephor	ne No.		Teleph	none			ense N	0.				
Start Date (10) 6/11/15	- 22	chedule		mpletion [Date (11)		7.7		SHA Monitor						
Occupancy Status During Al		CONTRACTO COS	-				Street	Addr	ess						
Facility Closed/Vacated	d During Entire Pe	riod of A	Abaten												
Abatement Performed Other – Describe: work	k in basement	Facility	Hours	S			City, S	itate,	Zip Code						
Scope of Work (Check All Ti	hat Apply)						-	-							
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			Renova Demoli				×	N	ull Containme Mini-Enclosure Blovebag Proc		ative F	ressu	ге		
								-	lon-Exempted		1-Friab	le Pro	cedur	е	
Location of			Locat	537573500		Do	scription	of						ement /pe	
Asbestos-Containing Ma TO BE ABATE In Facility (13)	iterial (ACM)	Ма	d Sole intena todial ((12)	nce/ Staff?		tos Con thermal surfa		Materi s insu T, or		Amou (Spec SF or	fy	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A								_		te	to
basement units 16,20A	1,22,33,35,40			Х		pipe	insula	tion		18 L	=	x			
				-											
			-							_					
Name of Registered Waste	Hauler			JUEP W	laste	Cubic	Yards	175	Name of F	Registered	andfill		V		
Freehold Cartage	T I Gallon		H	Hauler ID 5939		of Wa			1 1000000 000	Berks I					
City, State Freehold NJ						Dispo TBD	sal Date		City, State Birdsbo					50	
Completed by A. Scott Higgins	Title Presi	dent			5	Signature	· /	D/		1000000	ite 1/15				

		٨			OF ASBE to NJAC 8				(Po	loc.	1	13	93	30	
Date of Notification (1) 6/1/15					Building C Hicks)wner/C	perator	(2)					3		
Agencies Notified	Type Notification			Street Ad 17 Hill	ddress Street					JUN	4	2015			
EPA DEP DOL	Initial Amended Amendment	#			te, Zip Coo						-				
DOH DCA	Emergency (justification) Cancellation	including			Contact Hicks			1)		Telenh	10 Niur	nhor			
				FACII	LITY INFO	RMATI	ON								
Name of Facility Where	Abatement is Takin	g Place (3)						of Facility (4 School (K-1)						
Street Address 17 Hill Street								×	Subchapter Other (i.e. p etc.)				lings,	home	es,
City (5) Morristown									re Feet	# of Flo	rs	6 6	ldg. A 2	ge	
County (6) Morris					Code (7) JSE ONLY)		_	Curre	ent Use (Pric	or if being c	molish	ned)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	1 No.				atement Con ronmental		LLC				
Street Address								Addre Box 4	ss 83, 4 E G	at a Drive					
City, State, Zip Code	******								Zip Code d, NJ 0741	8					
Project Manager for Mor	1	Telephor	ne No.		2537-51000	none N 764-2		Lic 70	nse N	0.					
Start Date (10) 6/19/15		Schedule 6/30/1		pletion [Date (11)		Name	of OS	HA Monitor		-				
Occupancy Status Durin	g Abatement (Chec	k Only Or	ne)				Street	Addre	ess						
Facility Closed/Vac Abatement Perform	ned Outside of Norn						City, S	State, Z	Zip Code		-				
× Other – Describe:			20			_			337						
Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	NI That Apply)	Personal Control	Renova Demoliti					Mi Gl	ull Containme ini-Enclosure ovebag Proc on-Exempted	ecure				e	
Landin			Locati	8 11		Do	scription	. of						ement pe	į.
Location Asbestos-Containing TO BE AB In Faci (13)	n Material (ACM) ATED lity	Ma	ed Solel iintenar todial S (12)	ice/		os Con therma surfa		Materia is insul AT, or		(Spec SF or	fy	Removal	Repair	Encapsulate	Enclosure
hasam	ont	Tes	140	X		4	uctwo	rk		120	F	x			
Dasein	basement						uctwo	I.K				^			
Name of Registered Wa	ste Hauler		IN	JDEP W	/aste	Cubic	Yards		Name of	Re gistered	andfil				
Freehold Cartage			Н	auler ID 5939		of Wa			0.0000000000000000000000000000000000000	n 3erks I					
City, State Freehold NJ						Dispo TBD	sal Date		City, State Birdsbo						
Completed by A. Scott Higgins		Title Pres	ident			3	Signatur				3.250	ate /1/15			

Print Form

CKleil

Date of Notification (1) 6/1/2015					Building Owner/ Foglietta	Operator	(2)						
Agencies Notified	Type Notification	Ų5		reet Add	dress ruce Avenue				001				
EPA DEP DOL	Initial Amended Amendment #		Cit	ty, State	e, Zip Code wr, NJ 08031								
DOH DCA	Emergency (in justification) Cancellation	ciuaing		7.53	Contact Ricco	×		Talan	one Numb	PEL			
				FACIL	ITY INFORMAT	TON							
Name of Facility Where Residence	Abatement is Taking	Place (3)				,	Type of Facility (4)					
Street Address 128 Spruce Avenue	9			115	(E)	100-0 to 0 -010	Subchapter Other (i.e. pretc.)	(Other vate & (nan K-12) mmercial	build	ngs,	nome	s,
City (5) Bellmawr		ing:				3	Square Feet	# of F	ors	Bl	dg. A	je	
County (6) Camden					ode (7) SE ONLY)		Current Use (Prio Vacant	if being	demolishe	ed)			
Name of Monitoring Fim	n Hired by Building O	wner (8)	1	ASCM	No.		of Abatement Con o Construction			×			
Street Address		7 2				Street	Address Creek Road				-		\neg
City, State, Zip Code					43	City, S	State, Zip Code		-				
Project Manager for Mo	nitoring Firm		Te	elephor	ne No.	Telep	nawr, NJ 0803' hone No.	T	icense No				
							466.6452		1204				
Start Date (10) 6/11/2015	- 1	7/10/20	970 50 50 50 50	letion [Date (11)	7(0)707760	of OSHA Monitor rew Ricco			8			
Occupancy Status Durin	ng Abatement (Check	Only One)					Address						
Facility Closed/Vac	cated During Entire P	eriod of Aba	iteme	nt			creek Road			-7.			
Abatement Perform Other – Describe:	ned Outside of Norma	al Facility H	ours			100000000000000000000000000000000000000	State, Zip Code mawr, NJ 0803	I					
Scope of Work (Check	All That Apply)												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			ovatio nolitio				Full Containme Mini-Enclosure Glovebag Proc	edure					575
		Т	-			<u>E</u>	Non-Exempted	(*) and	1011-FIIADI		Abate		
			mally	A 10							Ту		
Asbestos-Containin TO BE AF In Fac (13	g Material (ACM) BATED sility	Used S Maint Custod	Solely enand lial St 12)	by ce/ aff?	Asbestos Co (i.e. therm sur		Material (ACM) ns insulation, AT, or	(SI	ount ecify r LF)	Removal	Repair	Encapsulate	Enclosure
Exter	rior	Yes	No	N/A	Tra	ansite S	idina	190) SF	x			
LAIG	iioi	++	\dashv	Λ.,		arione c	ding		-				
parameter and									-				
-	++	-	•		*								
Name of Registered Wa	aste Hauler		NJ	DEP W	/aste Cut	ic Yards	Name of	Register	d Landfill				
Ricco Construction			0.00	uler ID 28909		Vaste 15	Salem						
City, State Bellmawr, NJ				9 X	Dis	oosal Dat TBD	e City, Stat Alloway						
Completed by Andrew Ricco		Title Owner			-	Signation	re President /1	his	Da		201	5	

			N		CATION	te of New J OF ASBES to NJAC 8:6	TOS	ABATE			Cl	20	al.		1.	30	30
Date of Notification (1 6/1/15)			1000		Building Ow amphier	/ner/C	perator	(2)			U	UK		4 20	ijF,	
Agencies Notified	Type Notifica	ation		100	Street Ac 5 Good	^{idress} dwin Terra	ace								2,9,0		
EPA DEP DOL	Initial Amende				3000	te, Zip Code ood, NJ						31.	1	ī.,			
DOH DCA	Emerge justifica	ition)	cluding	1 1		Contact amphier					Telepho	ie l	Numh	er			
					FACII	LITY INFOR	MATI	ON									
Name of Facility Whe Street Address 5 Goodwin Terra		Taking I	Place (3)							of Facility (4 School (K-12 Subchapter (Other (i.e. pr	2) 3 (Other th			build	ings,	home	s,
City (5) Westwood										etc.) re Feet)	# of Flo	rs		BI 56	dg. A	ge	
County (6) Hudson						Code (7) USE ONLY)			Curre	ent Use (Prio	r i being d	mo	olishe	d)			
Name of Monitoring F	Firm Hired by Buil	ding Ov	wner (8)		ASCN	1 No.				atement Contronmental		, L	LC				
Street Address								100000000000000000000000000000000000000	Addre Box 4	ss 83, 4 E Ga	ate Drive	Ī					
City, State, Zip Code	3-1								ip Code I, NJ 0741	18							
Project Manager for I	Monitoring Firm			Telepho	ne No.		U 5500000000000000000000000000000000000	none N 764-2		Lic 70	0.000	e No.					
Start Date (10) 6/10/15			Schedule 5/30/15		pletion l	Date (11)		Name	of OS	HA Monitor	135						
Occupancy Status D	uring Abatement	(Check	Only On	e)				Street	Addre	ss							
	Vacated During E formed Outside of e:						<u> </u>	City, S	State, Z	Zip Code		_					
Scope of Work (Chec	ck All That Apply)																
≥3 sf or ≥3 lf × ≥160 sf or ≥260	If			enova emolit]] 2	Mi GI	III Containme ni-Enclosure ovebag Proc on-Exempted	ec ure					Э	
				Locati								8).			Abate		
Asbestos-Contain TO BE In F	ation of ning Material (AC ABATED Facility 13)	M)	Use Ma	Normal d Sole intenar todial S (12)	ly by nce/		s Con nerma surfa	escription taining I I system icing, VA miscella	Materia is insul AT, or	ation,	Amou (Spec SF or	fy.		Removal	Repair	Encapsulate	Enclosure
haa	ement	Yes	No	N/A		nine	insula	ation		100	F		x		tb		
Das			X		hihe	iliSula	ation		100								
Name of Registered Freehold Cartage				H	IJDEP W lauler ID	No.	of Wa	Yards iste		40000	Registered						
City, State	*		3000 E30	1:	5939			sal Date	3	City, State	9	-11	110				
Freehold, NJ			Title				TBD		·a	Newbur	g PA		Dat				
Completed by A. Scott Higgins			Signatur	1				10000	/15		,,						

State of New Jersey

	N			OF ASBE				(Tu	loo.	1	13	9-	36	Ĺ
Date of Notification (1) 6/1/15			Name of Bonnie	Building O Hicks	wner/C	perator	(2)			JUI	4	20	5	
Agencies Notified Type Notification		100	Street Ad 17 Hill											
EPA Initial Amended Amendment		1		te, Zip Cod own, NJ							11			
➤ DOH Justification) DCA Cancellation		1000	Name of Bonnie						Telepho	ne Nu	mber			
			FACIL	LITY INFO	RMATI	ON								
Name of Facility Where Abatement is Takin Street Address 17 Hill Street	g Place (3)						Тур	e of Facility (School (K-1 Subchapter Other (i.e. p	2) 8 Other th			dings,	home	es,
City (5) Morristown								etc.) lare Feet	# of Flo	rs	B 6	ldg. A	ge	
County (6)			County C	Code (7)				rent Use (Prid		molis				
Morris	0					- Name	- £ ^ L	-410	-1(0)					
Name of Monitoring Firm Hired by Building	Owner (8)		ASCM	I NO.		ABS	Env	ratement Cor vironmenta		, LL.C				
Street Address						Street PO B		ess 483, 4 E G	ate Drive					
City, State, Zip Code					P. S.		Zip Code d, NJ 0741	18						
Project Manager for Monitoring Firm		Telephor	ne No.		Teleph 973-		No. -2276	Lic 70	inse N	10.				
Start Date (10) 6/19/15	Schedule 6/30/15		npletion [Date (11)		Name	of OS	SHA Monitor						
Occupancy Status During Abatement (Chec	k Only On	e)				Street	Addr	ess				-		
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr Other – Describe: work in basement						City, S	tate,	Zip Code						
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	enova emolit				×	N	full Containme fini-Enclosure Blovebag Prod Ion-Exempted	e cec ure			10.75.01 	_	
	1	Locati					1 1	ion-Exempled	o () and ive	1-FIIA	ble Pro		ement	
Location of Asbestos-Containing Material (ACM)	Used	lormal d Sole	ly ly by	Asbest		scription		ial (ACM)	Amou	nt.		Ty	pe	
TO BE ABATED In Facility (13)		ntenar odial S (12)			thermal surfa	l systems cing, VA miscellar	s insu T, or	ulation,	(Spec SF or		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A										Ф	
basement		X		d	uctwor	k		120	F	x				
										·				
7														
Name of Registered Waste Hauler Freehold Cartage		Н	JDEP W auler ID 5939	1000000000	Cubic of Wa	Yards ste			Registered n Berks L					
City, State Freehold NJ						sal Date		City, Stat						
Completed by A. Scott Higgins	Title Presi	dent				Signature	6	u-		1 1 2 2	ate /1/15			



& Energency &

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

CK: 6883

Date of Notification (1) 6/1/15					Building C				ome		JUN		2.	15		
Agencies Notified	Type Notification		1 8	treet Ac							-					
EPA DEP	Initial				hanlon A											
DEP X DOL	Amended Amendment	#			te, Zip Code NJ 087											
☑ DOH	Emergency (i	ncluding	-		Contact					Tele	hone	Numb	er			
DCA	Cancellation		1	ravis						4						
Name of Facility Where	Abatament is Taking	Dlace (3)		FACIL	ITY INFO	RMAT	ION	Type	of Facility	4)						
Charles Wunnenbe					2			-	950.0	00						
Street Address		•			6			Ī	School (K- I Subchapte	8 (Othe						
297 O'hanlon Ave.								×	Other (i.e. : etc.)	rivate &	comme	ercial	build	ings,	home	es,
City (5)								.50	are Feet		loors			dg. A	ge	
Bayville NJ 08721 County (6)				`ounty C	ode (7)			100	ent Use (Pr	1	dome	linho		5+		
Ocean					ISE ONLY)			hon		or ii beli	g demo	nisne	۱)			
Name of Monitoring Firm	Hired by Building C	Owner (8)		ASCM	No.		Name	of Aba	atement Co	ntractor	9)					
N/A		500					Pern	aco l	lnc.					٠		
Street Address							Street	Addre								
City, State, Zip Code				-					Zip Code							
				elephor			Wes	t Ber	lin NJ 080	91						
Project Manager for Mor	roject Manager for Monitoring Firm						Teleph 856-				Licens					
Start Date (10)		Scheduled	Com	pletion [Date (11)				HA Monitor		00121					
6/2/15		6/3/15			X1000401-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		Sam	e e					1,700			
Occupancy Status Durin	g Abatement (Chec	k Only One)					Street	Addre	ess							
	ated During Entire F ned Outside of Norm			ent			City, S	State, 2	Zip Code		-					
Scope of Work (Check A	II That Apply)										_					
23 sf or ≥3 lf		☐ Rer	novati	ion] Fi	ıll Containnı	ent with	Vegativ	ve Pre	essur	e		
≥160 sf or ≥260 lf		Principles	nolitio					M	ini-Enclosu	е	.ogua					
							>		lovebag Pro on-Exempte		Non-F	riable	Pro	cedur	е	
			ocatio											_	ment	
Location Asbestos-Containing		No Used	rmally Solely		Ashaat		escription		al (ACM)	٨	ount	ŀ		, ,	pe	
TO BE AB	ATED	Maint Custoo		N. 1200		therma	al system	s insu		(5	ecify		Re	R	Enca	Enc
In Faci (13)		111,250,000,000,000,000	(12)	ian:			acing, VA miscellar)	SF	or LF)		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A				0.000	(av				<u>a</u>	7	ate	re e
on slab und	er house			х		-	Floor til	e		6(SF		x			
							12.70					-				
		+									_			1000		
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Name of Registered Wa	ame of Registered Waste Hauler						c Yards		Name o	Registe	ed Lan	dfill				
United Containers				auler ID 459	No.	of W 2	aste		G.R.O							
City, State Elm NJ						Disp	osal Date 15)	City, Stat		1906	7				
Completed by		Title					Signatur	en /	7			Date				
Anthony T Perna	27							X				6/1	15			



Emergence

Date of Notification (1) 6/1/15					Owner/Operato								
553	e Notification			et Address W 18th St	reet				U,I	+ 21,	15		
DEP DOL	Amended Amendment			State, Zip Co Bottom N									
DOH DCA	Emergency (justification) Cancellation	including	Name Bob	e of Contact			2	Tele	hone Nun				
			FA	ACILITY INFO	RMATION								
Name of Facility Where Abate Bob Bonesteel Private		g Place (3)					of Facility 4 school (K- 12	8					
Street Address 311 W 18th Street		3				×	tc.)				dings,	home	es,
City (5) Ship Bottom NJ 08008							e Feet	# of	loors		ldg. A 5+	ge	
County (6) Ocean				nty Code (7) TE USE ONLY)		Currer	nt Use (Pro	r if bei	demolish	ned)			
Name of Monitoring Firm Hire	ed by Building	Owner (8)	AS	SCM No.		e of Abat naco In	ement Con	tractor	3)				
Street Address						et Address Box 32	50						
City, State, Zip Code					City,	State, Zip	<u> </u>	91					
Project Manager for Monitorin	ng Firm		Telep	ohone No.	Tele	phone No 5-753-98			License N	0.			
Start Date (10) 6/2/15		Scheduled 6/4/15	Completi	on Date (11)		e of OSH	A Monitor		70727	2			
	stament /Chas					et Addres							-
Occupancy Status During Ab Facility Closed/Vacated Abatement Performed C	During Entire	Period of Ab	atement			State, Zip							
Other – Describe:					_								
Scope of Work (Check All Th ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	at Apply)		novation molition	2		Min Glo	Containn e i-Enclosu e vebag Pro		Negative F	ressu'	re		
						× Nor	-Exempte d	(*) an	Non-Friat	le Pro	Nestre Pro-		
		11230000	ocation									ement rpe	1
Location of Asbestos-Containing Mat TO BE ABATE In Facility (13)		Used Maint Custoo	rmally Solely by tenance/ dial Staff? (12)	Asbes	Description tos Containing thermal system surfacing, V other miscell	Material ms insula /AT, or		(8	ount ecify or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No N	/A								(D	
Exterior Sidir	ng		×	(Exterior S	Siding		14	0 SF	х			
	-												
Name of Registered Waste F	lauler		3772 (C-2) (C-2)	P Waste r ID No.	Cubic Yards of Waste		Name o	0000	ed Landfil				
United Containers			22459		3		G.R.O \						
City, State Elm NJ					Disposal Da 6/4/15		City, State Morris /		19067				
Completed by Anthony T Perna		Title Preside	ent		Signato	Ire!	7		1	ite 1/15			

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Total International				(Pun	event	to NJAC	2 8:60) and 5:16)	16	丛	E-12	4	D	77	0
DEIS OF WOTIFICER LOND JUN	34, PI	464:	56	1	Veria		Dune	r/Operetor (2	2)		1:	U.	-	1	7	
Agencies Notified Type	Nothiceth	0h	-	1	Street A	Didmes				-		1 31	DOM:	-	-	-
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DCA (NJAC 5:23-8)	imergency ustification	(Induc	gn(E	-		f Contact	200.0			VIII. Stellen				. [.]	_	1
	demoelletb					Baylor					Telephi	is Number		-		-
					FAC	ILITY IN	FORM	MOITA								\neg
Name of Facility Where Abate	ment is Ta	king Pi	ece (3)						of Fedilly (
Vertzon									□ Sc	hool (K-12 bohépler B						- (
Strant Address									5 80	her (i.e., pr	(Other I	En K-12)	_1			
115 Mountain Avenue									he	mes, etc.)	ARES MUI	Gurmera	EI DUI	อเกอูธ	1	
Chy (5)										re Feet	I # of F	lóf8	TBide	s. Age		-
Wast Field									6,0	00	2		5	-		
County (8)			-		Coun	y Code (7)	(STATE	URE ONLY)	Curre	ni Usa (Pri	of if bein	demolish	ed)	_		\neg
Union										-			82			
Name of Monitoring Firm Hink	by Buildin	ng Own	ner (8)	SCM P	40.	Nami	of Abelem	bal Co	htreator (8)		_	-	V.	_	-
TTI Enviornmental								N Restora								
Street Address				_			Stree	r Address					_	_		_
1253 North Church Stre	et							Foeter Ro	a d							
City, State, Zip Code			_			-		Siale, Zip C	-							_
Mogrestown, NJ 05057							37.03	sten island		0356						
Project Manager for Monitorin	g Firm	-	1	Tele	phone I	No.		ohone No.			Lirear	B No.				_
Harold Baldwin	•					2-6742		8-505-6256	3		00					
Start Date (10)	l Sx	chedula	ad Co				1	e of OSHA			20	-		_		_
08 / 04 / 1					_ / _		0.0000000	etor Tech								
Occupancy Status During Abi	itement (D	heck o	nly of	18)			Street	nt Address	-					-	-	
☑ Facility Closed/Vecated Di							10	59 Jeckso	n Avi	snue						
Abstament Performed Out	side of No	musi Fe	clity	Hour	s - Das	crbe		State, Zip C								
Time of Absternent: EAM-	BPM/	PM-	_	_AM				C NY 1110								
Scope of Work (Chack all the	épply)			_				- 111 1110						_		_
D		_	W					Full Cor	ntalnme	ent with Ne	salive P	MENIG				
⊠ ≥3 m² or ≥3 l/ □ ≥160 af or ≥280 l/			Dar	tavor	on on			Mini-En	akosum na Prad	edure:						
The second secon								Non-Ex	emploo	(") and No	n-Frishi	Propedun	4			
Lacation of				Local										ateme	nt T	/P6
Asbestos-Containing Meio	erial (ACM)	,	Use	Soll	My by	Asbe	enton C	Description Containing M		(ACM)	A	lount	P	27	1	5
TO BE ABATED				ntena	steff?	(Le	s., that	mal systems	i Insula	tion,	(5	Mecify	Remova	Rupair	1	Enclosus
IN Facility (13)	1		Cust	(12)				urfacing, VA er miscellan			8	of LF)	1		epital solution	Berri
(10)		,	Yes	No	-	1	O.M.	AL MAGRITU	SORE						8	_
Basement					×	Pipe in	mulat	ion			,	2LF	×			D
Power Room		_											X	F		F
		_				+	_							H	7	
				1	_	-							-	무		_
Marine of Bookstone Miles	muler			Ц.		16/2-1-	16.0	la Vastis 32	7.51	ma 24 5.	110 00 00 0	- J bu		旦		
Name of Registered Weste H Newark Carting	in net				JOEP Leuist I		Wes	le Yards of		me of Rag 3.R.O.W.		no till				
					NJ-51		1		3		n 100.					
City, State	**						1 2	possi Date		y, State	. 0.1					
Hackettatown, NJ							\$	08/15		Marrievill	e,PA		-			
Completed By (Print or Type)	i.	Title		200				Signature	1	m		Da		_	07	
Ignatius Marraccino		Pro	pjeat	Mer	reger			1 La	A	114	ve.		6 -	-3	-1	5
ASE-41			-	-				A	* -	200						

Jun 3 2115 12: 4pm P001/001 State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) (**Langle Control of the control of th

Date of Notification (1)			_	-	frimmer a	& Dullallan	A	, ,	1/7	0	T	\supseteq	15	0
6 /	3 /	16	r	1			Owner/Operator (2	2)						
_					Verla	ton	*		#Ali	PROMET	ĬI I		7	
Agencies Notified	Type Not	lication		ľ	Street /	ddreas			100	1th & Sc	nior Se	rvice	12	-
Ø EPA	Intitial Intitial				115	Mountair	1 Avenue	(NJ De)	roi He	IIII OL SE	5	11 41410	-	
☑ DOLWD ☑ DHSS	Amen				City, St	elto, Zip Ca	nde	- (=	=	agnatuce)			-	
□ DCA	Emen	dmont #_	Le salta a		Wes	t Fleid, N	IJ	1 1	1-1	1	17	2:66	G	
(NJAC 5;23-8)	lustific	ation)	gnipui	1		of Contact		ाञ्चार ई	21500	Ti	me! Li		=1	_
	Cance					Baylor			TOISPIL	le tantifo	er			
			-			-			_					
Name of Hardin Mihoto	Nh1	i- Y-lib	61	/nı	FAC	ILITY IN	FORMATION							
Name of Facility Where A	40BIGWEUR	is laking	Place	(3)				Type of Facility (1)					
			us av	9			792	☐ School (K-12)						1
Street Address						***************************************		Subchapter 8 (Other (I.e., pro	Other t	an K-12)	del buil	-11		1
115 Mountain Aven	IUE							horries, etc.)	ETE SIL	DOM: NO.	ani dini	diußa'	b):	- 1
City (6)								Square Feet	非ofF	ons	Blde	J. Age	_	-
West Floid								8,000	2	-1-	5		•	
County (6)					Count	V Code (7)	(STATE USE ONLY)	Current Use (Prin	- STORY	domella				
Union						Q = 0 4 2 11 1	(CIFIE OOL SHEIT	Conent one (File)	() DEIII	Deltidis	neg)			
Name of Monitoring Firm	Hirad by F	Auddling C	wrner f	8\	ASCM N	da	Name of Abeteur	ent Contractor (9)						
TTI Enviornmental		- Allania	11101	"	ABCIVI I	40,		CO. C.						
Street Address							JVN Restora	tion inc				1200		
1253 North Church	D44			4			Street Address							
	andor						47 Foster Ro							
City, State, Zip Code							Cily, State, Zip C							
Moorestown, NJ 08					85		Staten Island	9 NY 10309						
Project Manager for Mor	itoring Flir	ก		Tele	phone	Vo,	Telephone No.		Licen	D.No.		_		-
Harold Baldwin		,		(9	08) 81:	2-6742	718-605-6256	5	00	74				
Start Date (10)		Sched	ulad C	omple	Ilon Dat	e (11)	Name of OSHA N	Monitar						
_06 / 04 /	15			The second little	1		Testor Tech							
Occupancy Status Durin	n Ahstamo	1												
☑ Facility Closed/Vacat							Street Address	No hada a da ★ MMCCOM finde C. (1) 27 he/was enfo						
Absternant Performer	d Outside d	of Normal	Eachly	- Frem	ment - Dari	nellan	10 59 Јаскво							1
Time of Abatement:	BAM-BPM	PI	n e cont	AM.	B = DHH	CLIDE	City, State, Zip C							
							LIC NY 1110	1						
Scope of Work (Chack a	il that appl	у)												
≥3 sf or ≥3 lf			XI Re	noval	กก		☐ Full Cor	ntainment with Net	ative Pr	26UFB				
160 af or ≥260 If			⊠ Re □ De	molille	on.		☑ Glavebs	n Procedure						
							☐ Non-Exe	empted (") and Nor	-Friable	Procedu	re			
			1	Loca							Aba	teme	nt T	/De
Location Asbestos-Conteining	Alleriania /	A CRAS		Norma		١.,	Description						-	
TO BE AB	ATED	m(CIVI)	Ma	intene	ince/	ASDE	istos Containing M ., thermal systems	aterial (ACM)		ount	em	Repair	E C	and a
IN Faci	lity		Cus		Steff?	1,0	auriocing, VAT			Bolfy or LF)	Removal	확	DE	Enclosure
(13)			V	(12)	10000000	-	olher miscellan				-		Encapsulate	40
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Basomont					X	Pipe in	sulation		1	LF			П	
Power Room	20.00				×									_
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Name of Registered Wa	ste Hauler			1-1	JUDEP	Vaste	Cubic Yards of	Name of Regis	torod I	adem.		Щ		Ц
Newark Carting				F	douler li	D No.	Waste	10 00		i um				
	-				NJ-56		1	G.R.D.W,S	, inc.					
City, State							Disposal Data	City, State	35390					
Hackettstown, NJ							6/06/15	Morrisville	PA					
Completed By (Print or		Title	9				Signature	, 0-		ID	ate	_		_
Ignatius Marracoin	10	F	rojec	t War	ager		e la	Mille				-3-	11	-
A8841							90		Lacota		W.	7	2	,
MAY 11		- 1	Do no	use t	his form	for asbes	itos Ilcensuro exen	npted ectivities.						

CK= 24596

Date of Notification (1)					Name	of Building	g Owner/	Operator (2)	1 0 1	- 1 Jn	- /	_	1	(
6/	3 /	15				izon	9		-/						
Agencies Notified	Type Notifica	tion		_	Street	Address					*				
⊠ EPA					115	Mountai	in Aven	ue							
⊠ DOLWD	Amended				City, S	tate, Zip C	Code				. 				
⊠ DHSS	Amendme	_			Wes	st Field, I	NJ								
☐ DCA (NJAC 5:23-8)		cy (inc in)	luaing			of Contac				Γelepho	e Numbe	er			
(☐ Cancellati				Ale	x Baylor						56			60
					EAC	CILITY IN	IEO DM	MOLTA							
Name of Facility Where	Abatement is T	akina	Diago	/3)	FAC	>ILII I IIV	IFORIVIA	ATION	Type of Facility (4						-
Verizon	Abatement is T	aning	riace	(3)					School (K-12)	d.					
Street Address									Subchapter 8	Other th	in K-12)				
115 Mountain Aver	nue								Other (i.e., priv			ial bu	ilding	s,	
City (5)									Square Feet	# of Fl	are	Blo	dg. Ag	10	
West Field									8,000	2	J13		50 50	,0	
County (6)					Coun	ty Code (7)(STATE (JSE ONLY)	Current Use (Prio	if being	demolish	ned)			_
Union						,		•		•					
Name of Monitoring Firm	n Hired by Build	lina Ov	wner (8)	ASCM	No.	Name	of Abateme	ent Contractor (9)		-		-		_
TTI Enviornmental				-/			0.000000	Restora							
Street Address	et Address							Address			-	-			
	of Address 53 North Church Street							oster Ro	ad						
	53 North Church Street State, Zip Code							tate, Zip C							
Moorestown, NJ 0	8057							50-000-0000000000000000000000000000000	I NY 10309						
Project Manager for Mor				Tolo	phone	No		one No.	1141 10303	Licens	No	-			
Harold Baldwin	illoning Film			250				-605-6256		Postal Control					
	1.0	\ a a a a	1-10	-		2-6742				007	4				_
Start Date (10)				93	tion Da			of OSHA N	ionitor						
06 /04 /					<u> </u>	15_	1000000	tor Tech							
Occupancy Status Durin					- 25			Address							
☐ Facility Closed/Vacat									n Avenue						
Abatement Performe Time of Abatement:					s - Des	cribe	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	tate, Zip Co NY 11101							
Scope of Work (Check a	31 11 11 11 11						LIC	NT TITU				2000-20			
			_						tainment with Nega	tive Pre	sure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			⊠ Re □ De					☐ Mini-End	closure g Procedure						
				TTO THE	J.11		Ĺ	Non-Exe	mpted (*) and Non-	Friable	rocedure	Э			
				Local								Ab	atem	ent T	уре
Location	VI (45)	, l		Norma	lly ely by	A 2 6 2 5		escription of				Z,	D.	Щ	Ш
Asbestos-Containing TO BE AB		"	Ma	intena	ince/				insulation,	(Sp	unt	Remova	Repair	Encapsulate	Enclosure
IN Faci	lity		Cus		Staff?		surf	acing, VAT	, or		LF)	val	_	Insc	sure
(13)			Yes	(12) No	N/A	1	other	miscellane	eous)					ate	
Basement				П		Pipe In	sulatio	n		12	.F		П	П	П
Power Room						1 100 111		<u> </u>							
r ower room			<u> </u>								-				
Name of Desisters (14)	ata Haviss		Ш	Щ	LIDED	Mest-	0.5.	Vasala -f	Nome of Decision	red la	EII			Ш	
Name of Registered Wa Newark Carting	iste Hauler			1000	IJDEP I lauler II		Waste	Yards of	Name of Registe G.R.O.W.S.,		ITIII				
					NJ-56	66	1	-15.							
City, State Hackettstown, NJ							Dispos 6/06	al Date	City, State Morrisville,	PA					
S	T	man							morrisvine,						
Completed By (Print or	STS11 20	Title					S	ignature	1 m		Dat		2	21	
Ignatius Marraccin	10	Pr	oject	ivian	ager		C	yn	MI Umi	in		6 -	2	1)

ASB-41 MAY 11

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

UK 757 1

Date of Notification (1)				wner/Oper								
05/29/15				Board of I	-UU	Cattori		-				
Agencies Notified Type Notification EPA Initial		Street A 225 G	aaress Ienwild A	venue			dul	4	2015			
DEP Amended		F10	ite, Zip Coo			11 12						
DOL Amendment #_ Emergency (inc		Bloom	ingdale,	NJ 07403	3	is .						
DOH justification)	auding	Name o	f Contact				Telet	ione Nur	nher			
DOH justification) Cancellation		Georg	e Hagl				1					
		FACI	LITY INFO	RMATION								
Name of Facility Where Abatement is Taking F	Place (3)				1	Type of Facility (4)					
Walter T. Bergen School					_	School (K-1		F 10 de				
Street Address						Subchapter Other (i.e. p				dinas	home	es.
225 Glenwild Avenue						etc.)				323		
City (5)						Square Feet	# of F	pors		ildg. A	\ge	
Bloomingdale						60,000	2			30		
County (6)			Code (7)	West on Carachara		Current Use (Pri	or if being	demolish	ned)			
Passaic			USE ONLY)			School						
Name of Monitoring Firm Hired by Building Ov		ASC		33 32323		of Abatement Cor						
R.K. Occpational&Environmental An	alysis,Inc	. 0090)			Construction	ik Rest	ration,	inc.			
Street Address						Address	_					1
403 St. James Avenue						Route 46 Ste 3	30					
City, State, Zip Code				1		ate, Zip Code						
Phillipsburg, NJ 08865						wa, NJ 07512						
Project Manager for Monitoring Firm		Telepho		1		one No.		icense N	0.			
Patrick D. McGuinness			54 6316			256 7010	I	0666				
	cheduled C	ompletion	Date (11)			of OSHA Monitor Construction	Doné	rotion	Ino	Y		
	7/09/15						IX NESE	ration,	HIU.			
Occupancy Status During Abatement (Check	Only One)	82		1	2000	Address Route 46 Ste 3	2					1
Facility Closed/Vacated During Entire Pe	riod of Abat	ement										
Abatement Performed Outside of Normal Other – Describe:	racility Ho	urs			San Share	ate, Zip Code						1
				_ !	Oto	wa, NJ 07512	-					
Scope of Work (Check All That Apply)	promite and the second				T	1			_			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Constant	vation olition			XXX	Full Containme Mini-Enclosure		egative F	ressu	ire		1
2 100 St 01 2200 II	L Delli	Julion			X		cedure					
			r			Non-Exempte	d (*) and	Ion-Friat	le Pro			
	Is Loc										ement /pe	t
Location of	Norn			Descrip					-	T .	I	\Box
Asbestos-Containing Material (ACM)	Used S Mainte					aterial (ACM)		unt	77		En	m
TO BE ABATED In Facility	Custodia	505)((i.e.	tnermai sys surfacing		insulation, T. or		cify LF)	Rem	Repair	cap	nclo
(13)	(1:	2)		other misc					Remova	air	Encapsulate	Enclosure
	Yes N	o N/A									te	9
Boiler Room	x		В	reeching	Ins	ulation	23!	SF	X			
Boiler Room	x			TS	SI		12	LF	X			
									-	_		
Name of Davidson of Marke Hayler		NJDEP V	Vasta	Cubic Yar	rde	Name of	Register	d Landfil				
Name of Registered Waste Hauler Bako Construction & Restoration, Inc.		Hauler ID		of Waste	40	1	W.S. Ir					
		20889		TBD	Date		5 (7 550)					
City, State				Disposal I	Date	City, Stat	ille, PA					
Totowa, NJ	and				-4			10	ate			
Completed by	Title	b. I = = = = -		Sign	ature	1	~ -	1	ate 5/29	15		
Goran Kojic	Project	Manage				from v	X		0120			

CK 1573

Date of Notification (1) 05/29/15	E				Building (ingdale i				tion			100				127	
Agencies Notified	Type Notification			Street Ad 225 Gl	idress enwild A	venue						Us	SITE OF	_		1.0	
EPA DEP DOL	Amended Amendment #		- 1		te, Zip Coi ingdale,		403			-							
▼ DOH ▼ DCA	Emergency (in justification) Cancellation	ncluding		Name of George	Contact e Hagl		9-3,			T	Teleph	ne l	Numbe	Γ			
				FACIL	LITY INFO	RMATK	ON							-			
Name of Facility Where A Martha B. Day Scho		Place (3)						Ty	pe of Facility School (K-								
Street Address 225 Rafkind Road	****								Subchapte Other (i.e. etc.)	r8 (uild	ings,	home	es,
City (5) Bloomingdale									juare Feet 0,000	4	# of Flo	rs		Ble 63	dg. A	ge	
County (6) Passaic				County C	Code (7) ISE ONLY)				irrent Use (Pr	ior if	being (mo	olished)			
Name of Monitoring Firm R.K. Occupational&			.Inc.	ASCM 0090					Abatement Co				n. Inc	· · ·			
Street Address 403 St. James Ave.				1			Street	Add				-					
City, State, Zip Code Phillipsburg, NJ 088	illipsburg, NJ 08865								, Zip Code NJ 07512			-					
Project Manager for Mon	hillipsburg, NJ 08865 oject Manager for Monitoring Firm atrick D. McGuinness						Teleph	none			E03333	inse	e No.				
Start Date (10) 06/23/15		Schedule: 06/30/1:	d Com		4 6316 Date (11)		Name	of C	OSHA Monitor			*					
										OX .	163101	LIO	11, 1110	··			
Occupancy Status During						ĺ	Street 265 I		iress ute 46 Ste	3D							1
Facility Closed/Vaca Abatement Perform Other – Describe:	ated During Entire Pe ed Outside of Norma					_	City, S	tate	, Zip Code , NJ 07512			_					
Scope of Work (Check A	II That Apply)								- Combain - Combain			_					\neg
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emoliti				XIXIX		Full Containn Mini-Enclosul Glovebag Pro Non-Exempte	re ocecu	ıre					9	
		lel	ocati							1			T		1100 1 50	ment	
Location	of	No	ormall	y		Das	cription	of							Ту	pe	
Asbestos-Containing TO BE ABA In Facili (13)	Material (ACM) ATED		Soleintenar dial S (12)	ice/		os Conta thermal surfac	aining N	late s ins T, o			Amo (Spe SF or	y		Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A												90	
Boiler Ro	oom	Х			В	reechi		ula	tion	<u></u>	200	1	X				
Boiler Ro		X					TSI	102.000		<u> </u>	545		X	-			
Boiler Room		X					TSI			<u></u>	60 l		X	-			
Boiler Room Ele		X					TSI				85 L		X				
Name of Registered Was	ste Hauler		78 200	JDEP W auler ID		Cubic of Was			Name of	STATE OF THE PARTY.		.an	dfill				
Bako Construction &	Restoration, Inc).		889	140.	TBD	sic .		G.R.O		S Inc.	2					
City, State Totowa, NJ						Dispos TBD	al Date		City, Sta Morris		, PA						
Completed by		Title	4 8 4 -			S	ignature	K	× ×	V	200	1	Date 05/2	0/1	5		
Goran Kojic	~~~	Projec	it ivia	nager				\leq	7		- X	-	0012	011			

mo 9293051514

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

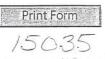
Date of Notification (1) 05/29/15			1000		Building Ov man Che		erator (2	2)				[153		/ 1	· · · · · · · · · · · · · · · · · · ·	
Agencies Notified	Type Notification		10000	treet Add	dress erdonk A	venue						U V I			- 12	
EPA DEP DOL	Initial Amended Amendment Emergency (. F	Marie Contraction Contraction	e, Zip Code ood NY Contact					Tele	ph	ne Numb	er			
X DOH X DCA	justification) Cancellation		N	/IR Zalr	man Che	ein										
				FACILI	ITY INFOR	RMATION		T	F106-74		_					
Name of Facility Where N/A	Abatement is Taking	g Place (3)							Facility (4)							
N/A Street Address									thool (K-12) bchapter 8		r t	an K-12)				
738 Schuyler Aven	iue						Ì		her (i.e. pr				buildi	ngs, l	nome	s,
City (5) Lyndhurst NJ 0703	31				3.00. 311 2031			Square 20000		# of 3	Fli	ors	50 50	ig. Aç	je	
County (6) Bergen				County Co	ode (7) SE ONLY)		- 1		Use (Prior house	r if beir	ng	emolishe	d)			
Name of Monitoring Fire	n Hired by Building	Owner (8)		ASCM	No.		Name o	f Abate	ment Cont	ractor	(9)	-				
Divine Environmer									nt Contra	acting	C	rporati	on			
Street Address 358 Broadway							Street A 51 Be		Terrace)						
City, State, Zip Code Newark NJ							City, Sta Irving		Code J 07111							
Project Manager for Mo				elephon			Telepho	one No.				ense No				
Chinyelu Oraegbu Start Date (10)	riairi	Scheduled						500000000000000000000000000000000000000	A Monitor		2					
06/10/2015		12/30/20		protion -			JLC E	Enviro	nmental	Inc						
Occupancy Status Duri	ng Abatement (Che	ck Only One))				Street A		s oth Stree	٥.						
Facility Closed/Va Abatement Perfor Other – Describe:	cated During Entire med Outside of Norr	Period of Ab nal Facility F	atem	ent			City, St	ate, Zip						\$6		
Scope of Work (Check										•						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Bassacon S.	novat moliti				×	Mini	Containme -Enclosure /ebag Prod -Exempted	e cedure					e	
			0000000				-	14011	-Exemptor	. / /	0 1			Abate	ement	1
1		U. HERRIST	ocation or mall	23337-0		Des	cription	of						Ту	ре	_
Locati Asbestos-Containir TO BE A In Fa (13	ng Material (ACM) BATED cility	Custo	tenar	nce/	Asbest (i.e.	os Conta thermal s	aining M systems sing, VA	laterial s insulat T, or	(ACM) tion,	(Sp	unt cify LF)	Removal	Repair	Encapsulate	Enclosure
	*	Yes	No	N/A							_					
first f	loor			х		(A) (B)	insula					LF	х			
2nd f	floor			Х		rrugate						SF	х			
boiler	boiler room					e and t	tank in	rsulati	on		_	LF	Х			
2nd floor	duct room			X			insula	tion				LF	х			
Name of Registered W	/aste Hauler			IJDEP W		Cubic `of Was			Name of							
Newark Carting Inc	C		100	506	140.	40			Tully to		eī	Cility				
City, State	t NT					Dispos	al Date		City, Stat		Α					
Completed by Chika Onwukaife		Title Projec	et ma	anager		S	ignature		- 1	M	1	05	te 5/29/2	2015	;	
							-		1/	11						

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

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

B & G proj. #:	2015-103		(P				and 12:120-7)	<u>C</u>	eck #	7242		Î		
Date of Notification		11	ame of Build Daniel Ch		r/Operator (2)			*	C	JUH.	4 21	15		
Agencies Notified EPA DEP	Type Notification		reet Address 18 Fairmo	ount Ave	enue									
X DOL	Amendm	ent	ty, State, Zip Montclair	, NJ 070)42			LTO	ahana	e Number				
DOH DCA	Cancella Cancella	3030	me of Conta						priorie	s Number				
				FACIL	LITY INFORM	IOITA	N							
Name of facility will Daniel Chorn Street Address		tak <mark>i</mark> ng pla	ce (3)				7.2		chool ubcha ther (4) (K - 12) apter 8 (O Private/C Homes, e	omme		12)	
18 Fairmount	t Avenue							Square F				Blo	ig. Ag	e
City (5) Montclair, N.	J 07042	Cour	ty (6) sex			10000	unty Code (7) ate use only)	Current U		rior if bein	g dem	olishe	ed)	
Name of Monitorin		Bldg. Owne	er (8)	T	ASCM No.	-	Name of Abatement							
n/a	,						B & G Restorat	ion, Inc.						
Street Address							Street Address 105 Ryerson F	Road						
City, State, Zip Coo	de		i			-	City, State, Zip Code							E STATE OF
only, orano, mp oo							Lincoln Park,	NJ 27035						
Project Manager fo	or Monitoring Firm	3	Pho	ne Numbe	er		Telephone Number (973)696-686			License 00	Numb	per		
Scheduled Start Da	ate (10)	Sched	. Completion	n Date (11)	_	Name of OSHA Mor B & G Restora							
06/11/2015		06/	11/2015				Street Address		-					
Occupancy Status							105 Ryerson F							
Abatement p Describe:	ed/vacated during performed putside	entire peri	od of abaten facility hours	nent. S-		_	City, State, Zip Code LincolnPark, N							
Other-Descr		()				_								
☐ Demolition	X	Renovation > 160 sf or					Full Containment w/ne Mini-enclosure	gative press	re [Glove Non-f				
Location of asbestos-comaterial to be abated in fa	entaining pe	Is locatio	n normally usenance/custo				asbestos-containing		unt cify S	SF or	Remov	Repai	E n c a p	E n c L
basement				X	pipe insul	lation		101	-		e X			
Dasement														
											#	H	H	H
											H	ዙ		屵
Registered Waste B & G Restora	Hauler ation, Inc.		EP Hauler II 19563)# C	ubic Yards of	Waste	Tullytowr	d Landfill Resource	& R	ecovery	Cen	ter		
City, State Lincoln Park,	N.I			Disposal D	ate 12/2015		City, State Tullytown	PA						
Completed by (Pri	nt or Type)	Title Secreta	rv/Treasu		Signature		Gordana Luna			Date 06/0	1/20	15		

CK 1099



Date of Notification (1)					Building C Road V		perator	(2)						-			
Agencies Notified	Type Notification			Street Ad			-	-							+1.4	į.	07.3
Therein			"		wnship	Line Ro	d.							Ú			
EPA DEP DOL	Initial Amended				e, Zip Coo						_	_	-				
▼ DOL	Amendment :				, PA 19	067											
□ DOH	justification)	Holdding	1 1	lame of	Contact Felice												
DCA	Cancellation		,		ITY INFO	DREATIO	N.						-				
Name of Facility Where	Abatement is Taking	Place (3)		FACIL	111 INFO	RIVIATIO	JN	Ту	pe of F	acility (4)		-	-				
Former Lucent Trai	ining Center								Sch	ool (K-12)							
Street Address										chapter 8 er (i.e. pri					linge	home	20
353 Carter Rd.								×	etc.)							55,
City (5) Hopewell	cases - je							505/01/	quare F 75,00		# of	Flo	rs		idg. A 00	ge	
County (6)				County C						Jse (Prior							
Mercer			(STATE U	ISE ONLY)		_	1		g center			or 18	year	S		
Name of Monitoring Firm	n Hired by Building C	Owner (8)		ASCM 0002						nent Contr ironmen			me l	20			
AET Street Address				0002			Street			IIOIIIIEII	131 3	yst	1115, 1	10.	0-2		
28 N. Pennell Rd.							550	Eas	st Un	ion St.							
City, State, Zip Code Media, PA 19063	a, PA 19063								e, Zip (heste	Code er, PA 19	382						1
Project Manager for Mo	ject Manager for Monitoring Firm						Telepi				•	100000	ense N	٥.			
	Houseknect								1-900			00	508				
6/15/15		10/15/1		ipietion L	Jate (11)		AET		USHA	Monitor							
Occupancy Status Durin	ng Abatement (Chec	k Only On	e)						Idress	11 D-1							
	art Date (10) /15/15 Scupancy Status During Abatement (Check Only Or									II Rd.							
Other – Describe:		iai Facility	Hours						e, Zip (PA 1								
Scope of Work (Check /	All That Apply)																
≥3 sf or ≥3 lf			enova				2	×		ontainmer	ı with	n Ne	ative F	ressu	re		
≥160 sf or ≥260 lf		X D	emoliti	ion					Glove	Enclosure bag Proce							
		1					<u>L</u>	_	Non-E	Exempted	(*) an	d N	n-Friab	le Pro		e emen	t
			Locati Iormall	0.000		-										/pe	
Location Asbestos-Containing		Use	d Sole	ly by	Asbes	tos Cont	scription aining I			CM)	Д	moi	nt			П	
TO BE AB			odial S		(i.e.	thermal	system cing, VA	ns in	nsulatio or	n,		Spe F or		Remova	Repair	Encapsulate	Enclosure
(13)			(12)				niscella						,	iova	pair	sula	Sur
		Yes	No	N/A												te	
Basement mec	hanical room			X		boile	er pac	kin	g		(6 S		X			
Basement cer	nter building			X		VA	T/Mas	stic	;		15,	50(SF	X			
First Floor cer		Х		VA	T/Mas	stic	;		2	2,2()	X					
Guest v	Guest wings					VA	T/Mas	stic	;		-	1,60)	X			
Name of Registered Wa	aste Hauler		100000	JDEP W auler ID		1 10 10 10 10 10 10 10 10 10 10 10 10 10	Yards		1	Name of R	e giste	ered	andfill				
Mercer Group						of Was	ste		1	Grows L	andf	ill					
City, State	y, State						sal Date	3		City, State			24				
Trenton, NJ		Title	-24			ongoi	110	2/	1	alls To	115	TH)	T Da	fo			
Completed by Robert M. Casciato		Title Presi	dent			1	ignatur	1	1	X				ie 5/19/2	2015		
						n	7	11	1/	1		_			_		_

Location of Asbestos-Containing Material (ACM)	100	Location	200	Description of Asbestos Containing Material (ACM)	Amo (Spe	1	А	batem Type		
TO BE ABATED In Facility (13)	Ma	Solely b intenar todial S (12)	ice/	(i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	SF o		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A				-		ite	0
Guest rooms			X	Mastic on condensate pans	1 800 S	?	X		Ť	
Basement electric room			X	Transite Board	1) SF		X			
Window panels guest rooms			X	Transite Board	7 000 S	7	X			
Tennis Courts			X	1/8" wear surface	37,000	F	X			

JU 4 2015

			NOTIFICATI	ON OF AS	EW JERSEY BESTOS ABATEMEN	IT O	reck	#	24	(/_)	
Data of Natification	(4)		(PURSUAN	The second secon	C 8:60-7 AND 12:120- Building Owner / Ope	A STATE OF THE PARTY OF THE PAR	FILE	1:1:	U T	70%	_
Date of Notification 06 / 03	/ 15				ATES INVESTORS 52			E 5			
/	/			Street Add			The state of the s				
Agencies Notified	Type of No				MILL ROAD						
☐ EPA DEP	V	Initial Amended			e, Zip Code M, PA 19044					2.010	
☑ DOH	-	Amendment		Name of C			Telepho	e Numb	er	-	
☑ DOL		Emergency was	Shor However 110	BRUCE W				1			
	broad		FA	ACILITY IN	FORMATION						
Name of Facility Wh		ent is Taking I	Place (3)		Type of Facility (4)						
				64	School (F						
Street Address 3109 BERGENLNE	AVE				☑ Other (I.e.)	ter 8 (Other ., private &					
G't- (5)	10		C	77\		# Of Floor		Buildin	να Λαο		
City (5) UNION CITY	County (6))	County Code ((7)	Square Feet 5,000	# OI FIOOI	5	Bulluli	ig Age		
					Current Use (Prior in	being dem	o ished)		50-	÷	
Name of Monitoring	Firm Hired	by Bldg. Owne	er (8)	ASCM NO		-					
		5. .	2007000				E0115 11				
EFI GLOBAL Street Address					NORTHSTAR CONT Street Address	RACTING G	ROUP. IN	٥.			
187 BALLARDVALE	STREET				Street Address						
City, State, Zip Cod	е				32 Williams Parkway						
WILMINGTON, MA	1887				City, State, Zip Code	9					
Project Mngr. For M	lonitoring F	irm	Telephone Nu 978-688-3736	mber	East Hanover, NJ 07	136					
SEAN CASSIDY Sheduled Start Date	(10)	Sched Comp	letetion Date (1	1)	Telephone Number	330	License	lumber			_
06 //22	/ 15	06	23 /	15	Totopilotio italiiaa						
//	/	/	/		973-884-8682		L		00860		
Occupancy Status I					Name of OSHA Mon NORTHSTAR CONT		DOLID IN				
Facility C		ted During Ent	ire Period of		Street Address	RACTING G	ROUP. II	٥.			
The second secon		ed Outside of N	ormal Facility		Olicet Address						
	9990	6:00 Pm to 2;0		9	32 Williams Parkway	9					
☑ Other - D	escribe:				City, State, Zip Code						
Scope of Work (Che	ck All That	Apply)			East Hanover, NJ 07	J36					
Scope of Work (One	CK All Illat	~bbiy)									
☐ Demolitie		V	Renovation		Full Containment w	th Negative	Pressur				
≥3sf or ≥					Mini - Enclosure						
☐ ≥160 sf o	r ≥260 II			~	Glovebag Procedure Non-Exempted (*) as		b e Proce	dure			
			v								
Location		ls		Descripti			bateme	nt Type		I-	
Asbestos Con	taining	Location Normally	As	bestos - C Material (Amount	R E	R	E	E N	
TO BE ABA	TED	Used	(1.	e., thermal		(Specify	M	E	C	c	
in Facilit		Solely	insu	lation, surf	facing, VAT,	SF or LF)	0	P	A	L	
(13)		by Main-	ore	other misc	ellaneous)		V	A	P	o s	
		tenance/ Custodial					A L	I R	S	Ü	
		Staff (12)					_		L	R	
		YES NO N/A									
BASEMENT			PIPE & FITTIN	G		10 LF	V				
								-	+ +		
						 		H	H	一片	
Name of Registered NEWARK CARTING		ler	NJDEP Waste Hauler ID No.	Yards	Name of Registered I.E.S.I.	Landfill					
City, State			4509	of Waste Disposal	City. State						
NEWARK, NJ				Date	BETHLEHEM, PA 18	105					

Signature

Date

06/03/15

Steven Stiles

Completed by (Print or Type)

Title

Project Manager