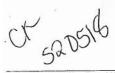
# State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

10//		i diodai	nt to NJAC 8:60 an	u 12.120)									
Date of Notification (1) 05/30/13		Name Khuk	Name of Building Owner/Operator (2) Khubani Enterprises										
Agencies Notified Type Notification		Street Address 2 Daniel Road											
EPA Initial Amended Amendment		City, State, Zip Code Fairfield, NJ, 07004											
DOH DCA Emergency (injustification)	including		Name of Contact Martin Katz										
Name of Facility Where Abatement is Taking	g Place (3)	FAC	CILITY INFORMAT	ION	Type of Facility	(4)	(	7_					
81 Two Bridges Street Address 81 Two Bridges Rd				School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, etc.)									
City (5) Fairfield					Square Feet 60,000	# of Floors 2							
County (6) Essex			y Code (7) E USE ONLY)		Current Use (Pri Abandoned	or if being demoli	shed)						
Name of Monitoring Firm Hired by Building C	Owner (8)	ASC	CM No.	Name of Indian	me of Abatement Contractor (9) dian Arrow Industries								
Street Address					***								
City, State, Zip Code				City, Sta Paters	y, State, Zip Code aterson,NJ,07514								
Project Manager for Monitoring Firm	Teleph	one No.	Telepho 973-6	ne No. 53-9652	License 1183	ense No. 33							
Start Date (10) 06/12/13						tries							
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire F				Street A	ddress roadway			2					
Facility Closed/Vacated During Entire P			1										
Abatement Performed Outside of Norm Other - Describe:	al Facility H	lours		City, Sta	ate, Zip Code son,NJ,0751	4	<u> </u>						
Other - Describe:	Rer Der	novation molition		City, Sta	Full Containm Mini-Enclosur Glovebag Pro	ent with Negative		cedur Abate	men				
Other – Describe:  Scope of Work (Check All That Apply)  ≥3 sf or ≥3 If	Is Lo No Used Maint Custoo	novation molition ocation rmally Solely by enance/ dial Staff?	Asbestos Cor (i.e. therma surfa other	City, Sta Paters	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte of aterial (ACM) insulation,	ent with Negative		cedur Abate					
Other – Describe:  Scope of Work (Check All That Apply)  ≥3 sf or ≥3 If ≥160 sf or ≥260 If  Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility	Is Le No Used Maint Custor (	novation molition ocation rmally Solely by tenance/ dial Staff?	Asbestos Cor (i.e. therma surfa other	City, Sta Paters	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte of aterial (ACM) insulation, , or	ent with Negative e cedure d (*) and Non-Frie  Amount (Specify	able Pro	cedur Abate Ty	emen pe				
Other Describe:	Is Le No Used Maint Custor (	novation molition ocation rmally Solely by enance/dial Staff? 12)	Asbestos Cor (i.e. therma surfa other	escription of taining Mail systems acing, VAT miscellane	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte of aterial (ACM) insulation, , or	ent with Negative e cedure d (*) and Non-Frie Amount (Specify SF or LF)	able Pro	cedur Abate Ty	emen pe				
Other Describe:	Is Le No Used Maint Custor (	novation molition ocation rmally Solely by enance/dial Staff? 12)	Asbestos Cor (i.e. therma surfa other Roc Waste Cubic D No. of Wa	city, Sta Paters  escription of ntaining Mail systems is acing, VAT miscellane	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte of atterial (ACM) insulation, or eous)	ent with Negative e cedure d (*) and Non-Frie Amount (Specify SF or LF)	Removal x	cedur Abate Ty	emen pe				
Other - Describe:  Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)  2nd Floor  Name of Registered Waste Hauler	Is Le No Used Maint Custor (	novation molition  cocation rmally Solely by renance/ dial Staff?  12)  No N/A  X  NJDEP  Hauler I	Asbestos Cor (i.e. therma surfa other  Roo  Waste D No.   Cubic of Waste 40	city, Sta Paters  escription of ntaining Manal systems is acing, VAT miscellane  ofing ACI	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte of atterial (ACM) insulation, or eous)	ent with Negative e cedure d (*) and Non-Fria  Amount (Specify SF or LF)  100 SF  Registered Land Management	Removal x	cedur Abate Ty	emen pe				

D&S Proj. #: 2013

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

Date of Notification	. (1)		Name of	Building Owr	ner	/Operator (2)	-		- 2	8/2 //		-						
10 15 1/13 10	1(1)			NNE SHEA		, ,				7	" -5 g	d as						
Agencies Notified	Type Notificat	ion	Street Add		1						- 1		76					
☐ EPA	Initial			T MAIN S	ודי	REET				Ć.,	7							
☐ DEP	Amended Amendment #:			e, Zip Code	ICED I			- 11. j.ly	7									
DOL	Emergency		FARMINGDALE, NJ 07727										60					
<b>⋈</b> DOH	(including	1	Name of Contact Telephone Number															
	justification)		OV VO	ADID OUT					1									
DCA	Cancellation		SUZA	NNE SHE	A						1	=						
				FAC	CIL	ITY INFORMA	TION					7114						
Name of facility w	here abatement i	s taking	place (3)						Type of	Facility Scho	(4) ol (K - 12)							
SUZANNE SH	HEA									=	hapter 8 (O	ther th	an K-	12)				
Street Address											(Private/Co		rcial					
5 WEST MAI	N STREET								Square	e Feet	# of Floor		Blo	lg. A	ge			
City (5)		Co	ounty (6)			T	Cour	ity Code (7)										
• , .							(Stat	e use only)	Curre	nt Use (F	Prior if being	dem						
FARMINGDA			JOMMON	JTH					<u> </u>	/6\								
Name of Monitoria	ng Firm Hired by	Bldg. Ov	vner (8)		1	ASCM No.	- 11	Name of Abatement										
							4	D & S RESTOR Street Address	ATION,	INC.								
Street Address																		
City, State, Zip Coo	3.							20 California A City, State, Zip Code										
City, State, Zip Coo	ue							Paterson, NJ 07										
Project Manager fo	or Monitoring Firm	,		Phone Num	he	<u> </u>		Telephone Number	7303		License	Numb	er					
Project Manager it	or wormoning r in			r none run	ibe	•		973-345-8020				1169						
		Ical	and Comp	ation Data /	11)			Name of OSHA Mor	itor									
Start Date (10)		Scr	nea. Compi	letion Date (	11)			D & S Restoration, Inc.										
06/13/13			/28/13				_	Street Address										
Occupancy Status			MANAGED SOUTH					20 California A	venue									
	ed/vacated during performed outside							City, State, Zip Code				100000						
Describe:			iai iaciiity ii	louis-			-11	D. ATTO	7502									
	ribe: NORMAL I		er make				<u>- 11</u>	Paterson, NJ 07										
Scope of Work (c	<u> </u>	2327							Full Cont Mini-encl		w/negative	press	ure					
$\times$ >3 sf or >3 l	<sup>†</sup> ⊠	Renova	ation					X	Glovebag		ure							
≥160 sf or ≥	260 If	Demoli	ition								) and Non-	_	proc	edure				
Location of			ation norma intenance/	lly used sole	ely							R e	R	E n	E			
asbestos-co material (ac		staff(1		Dusiodiai	_	Description material (		bestos-containing	100	Amount (Specify	SF or	m	р	c	n			
abated in fa		Yes	No	N/A		materiai (i	ACIVI)			LF)		o v	a	a p	Ľ			
					_	DIDE DIGII	T A TEL	OM	260	LET		e	4	<u></u>	<del> </del>			
Basement		<u> </u>			╝	PIPE INSU	LAII	ON	200	LFT			片	片	쓔			
			4		4							片	H	片	ዙ			
		-			4		_		_			╁┼	H	片	片			
		-	-		4							H	님	片	卅			
Registered Waste	Hauler	IN	JDEP Haul	ler ID#	믭	ibic Yards of V	Vaste	Name of Registered	d Landfill			Ш	ш		1			
D & S RESTOR	RATION, INC.		13506	CI IDII		YDS		TULLYTOWN,	RESOU	RCE R	ECOVER	Y						
City, State				Disposal				City, State										
PATERSON, 1	NJ 07503			06/14/	/13			TULLYTOWN	, PA									
Completed by (Pri		Title	m m m			Signature					Date 05/30	/2012	2					
BOGDAN JOI	LDZIC		IDENT	em for ask		s licensure exe	mntad	activities			03/30	2013						
ASB-41		Do not	use this fo	iiii ioi aspes	5105	a ilocitante ext	mpted	aonvinos.										



#### NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 7:26-2.12)

Date of Notification (1) 06/04/2013				Name of Building Owner/Operator (2) Exxon-Mobil Technology Corp									
Agencies Notified		Notification '	Туре		Street Address								
		001-18-111	··· · · · · · · · · · · · · · · · · ·		Street Address  600 Billingsport Road								
(X) EPA		(X) Initial No ( ) Amende		on	600 Billingsport Road								
(X) DOL (X) DOH		( ) Cancelle		OH	City, State, Zip Code Paulsboro, NJ 08066								
() DCA					Paulsboro, NJ	08066		· 1415	110	State			
					Name of Conta	act		Tel. No	umber				
					Bill Nelson				-		-		
		1: 5! "	,	FACILITY IN		. (4)							
Name of Facility Where Ab	atement is Ta	aking Place (	3)		Type of Facility ( ) School (K-1)								
Exxon-Mobil Technology					( ) Subchapter		an K-12)						
Street Address					(X) Other (i.e.	private & co	ommercial bldg	gs., hom	es, etc.				
<u>Olicot / Idaroso</u>								10 100					
600 Billingsport Road					Sq. Feet8	3,660	# of Floors	1					
City (5)	County (6)		County C		Bldg. Age 89	1							
Paulsboro	Gloucester		(State Us	e Only)	Current Use (p		demolished)	R&D	. Admin				
Name of Monitoring Firm F	dired by Blda	Owner (8)	ASCM No	,	Carrotti Coo (p		Name of Co						
Name of Monitoring Firm	illed by blug.	Owner (o)	NOOWING	<u>.</u>		10	NCM Demol			diation, I	_P		
Environmental Manageme	nt Internation	al					, was enter the shall all the transfer recent		30 14 10 00 00 00 00 00 00 00 00 00 00 00 00	******************	2850		
Street Address					Street Address								
					395 Turner Ind	lustrial Way	′						
34 East Germantown Pike													
City, State, Zip Code					City State, ZipCode Aston, PA 19014								
East Norriton, Pa 19401					7667,177,10011								
Project Manager for Monito	orina Firm	Telephone I	Number		Telephone Nur	mber		Licens	e Numb	er		1	
Ray Giordano 610-277-0405					484-480-8931			01066					
Scheduled Start Date (10)	5)	Scheduled (	Completion	Date (11)	Name of OSH	The second secon							
07/09/2013 Occupancy Status During	Abatamant (C	07/11/2013	۵)		EMSL Analytical Street Address								
( ) Facility Closed/Vacated	Abatement (C	e Period of A	batement		dieer Addiess								
(X)Abatement Performed (					107 Haddon Ave								
		-90			City, State, Zip Code								
Describe_segregated area	i, no other tra	des			Westmont, NJ	08108							
Other Describe													
Other - Describe - Source of Work (Check all	that apply)												
Source of Work (Check all	triat apply]												
( ) Demolition (X) Rend	ovation												
(X) Large Proj. >160 SF of	or >260 LF A	CM) ( )M Pro	oj. (>25<160	) SF or >10 <26	OLFACM) (	) Minor Pro	j. (<25 SF or <b>∙</b>	<10 LF /	ACM)				
(X ) Full Containment with				Description of	vebag Procedur		Specify SF or	I E)	Abata	ment Ty			
Location of Asbestos- Containing Material (ACM)	ls Loca	ation Normally by Maint./Cu	/ Usea	thermal system		Amount (	Specify SF of	LI)	Abate	inent ry	DE		
Facility (13)	Staff?		stodiai	surfacing, VAT					0.000				
. 20 (10)	YES	NO	NA	miscell.)	Power of the Accessories				Rem.	Rep.	Encap I	Enclose	
Guard Shack Bldg. 30		X		VAT/Mastic		664 SF			X				
								4				-	
											-	-	
		L NUDED W	-t- Havlani	D#	Cubia Varda o	f Masta		Name	of Reg.	Landfill			
Name of Reg. Waste Haul	<u>ler</u>	NJDEP Wa 20990	ste Hauler I	<u>U#</u>	Cubic Yards of 1 cyds	vvaste			al Landf				
Service Transport Group		20990			1 GydS								
City, State							Disp. Date		1	City, Sta	te		
							07/12/2013		1	mperial	PA		
New Castle, DE			11/2000-00-00-00-00-00-00-00-00-00-00-00-00		T = -		L	Dete					
Completed by (Print or Ty)	pe)	<u>Title</u>			Signature	ĺ		Date 06/04/	2012				
Puscell Vinc		Project Mar	nager		11		1	00/04/	2013				
Russell King													

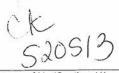
					- 1/
Notification of Demolition or	Renovation(continue	ed)			
X. Description of Planned Demolitio			e Used:	Removal and D	isposal of 664 sf
of VAT/Mastic from connecting roor	ns within Building 30 Guar	rd Shack			
					11/
XI. Description of Engineering Cont					
Demolition or Renovation Site: R	egulate work area, negative	e pressure en	closure witl	h decontaminati	on unit, wet
material, and double bag.					
XII. Waste Transporter#1 Service Ti	ransport Group				
Address: 58 Pyles Lane					
City: New Castle	County: New Castle		State: DE	Zip: 19720	
Contact: Randy Bridges			Telephone: 3	02-778-5930	
Waste Transporter#2 Same as #	1			The second of th	
Address					n
City Imperial	County		State	Zip	
Contact			Telephone		
XIII. Waste Disposal Site Imperial L	andfill		EPA Certifica	tion Number: PAD98	7285624
Address: 11 Boggs Road					
City: Imperial	County: Allegheny		State: PA	Zip: 15126	
Contact: Brent Bowker			Telephone: 7	24-695-0900	
XIV. If the Demolition was Ordered b	ov a Government Agency, F	Please Identif	v the Agenc	v Below:	
Name	,	Title			
Authority		Lines			
Date of Order (MM/DD/YY)		Date Ordered to	Begin (MM/DD	)/YY)	
XV. For Emergency Renovations:					
DATE and HOUR of Emergency: (MM/DD/YY)		(HH:MM)			
Description of SUDDEN, UNEXPECTED EVENT		[(TITE.WIN)			
	546				
Explanation of how the Event caused unsafe co	nditions, or a serious disruption of	industrial operation	ons		
XVI. Description of Procedures to B	e Followed in the Event tha	t Unexpected	Asbestos i	is Found, or tha	t Previously Non-
Fiable Asbestos Material Becomes (		아시 맛집에 있었어요? 그렇게 되었다.			병기 경기 가지 않는 아이를 하는 것이 되었다.
alert generator					
XVII. I Certify that an Individual, Trai	inad in the Provisions of th	is Population	(ANCED D	ert 61 Subnart I	M) Will be On-
Site During the Demolition or Renov			VACCES - VA. 116	70 1000 000	
this Person will be Available for Ins		18.8일 - 19.1일 일본 개국 (14.7)			
	2 NO.	1 -			
		10		(Data) 06/04/42	
		of Owner/Operator)		(Date) 06/04/13	
XVIII. I Certify that the Above Inform	ation is Correct				

(Signature of Owner/Operator)

(Date) 06/04/13

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

Date of Notification (1) 6/4/2013			Name of Building Owner/Operator (2) IMTT - Bayonne							177	-	,			
Agencies Notified	Type Notification			Street A 250 Ea	ddress ast 22nd	Street	t	7	613 JU	''' -5 <i>j</i>	.; p:	611			
EPA DEP DOL	Initial Amended Amendment	#007		City, State, Zip Code Bayonne, New Jersey 07002											
2005	Emergency ( justification)	including			f Contact		<u> </u>	Telephone Number							
X DOH X DCA	Cancellation			Aubre	y Hotard	l	-0.000		7			L (			
Name of Facility Where	Abatament is Takin	a Place /2	· ·	FACI	LITY INFO	ORMATI	ON	Type of Facility	(A)						
IMTT - Bayonne	Abatement is Takin	y riace (c	')					100009							
Street Address								School (K-		er than K-1	2)				
250 East 22nd Stre	eet							Other (i.e. etc.)	private 8	& commerci	al build	dings,	hom	es,	
City (5) Bayonne, New Jers		7000	William			Square Feet	# of	Floors	Bldg. Age 30+						
County (6) Hudson		,			Code (7) USE ONLY	)		Current Use (Pr	ior if bei	ng demolis	ned)		-		
Name of Monitoring Firm Envirovision Consu		Owner (8)	•	ASCN 0007				of Abatement Co lations, Inc.	ntractor	(9)		11			
Street Address 20-21 Wagaraw Ro	and Pida 34A			J	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>			Address Edwards Ave		<del>//*//////////////////////////////////</del>					
City, State, Zip Code	Jau, Blug. 34A						_ 0000000000000000000000000000000000000	State, Zip Code							
Fair Lawn, New Je	rsey 07410						Hara								
Project Manager for Monitoring Firm Guillermo Morales					ne No. 36-9145		1990 PG 1897	none No. 733-5033	License N 01120						
Start Date (10) 6/7/2013	Start Date (10) Scheduled Com							me of OSHA Monitor nvirovision Consultants, Inc.							
	a Abstement (Chec	A STATE OF THE STA	-00 <del>-</del> 00					Address	ullanis,	, INC.					
Occupancy Status During Abatement (Check Only One)  Facility Closed/Vacated During Entire Period of Abater								-21 Wagaraw Road, Bldg. 34A							
Abatement Perform Other – Describe:	ned Outside of Norm	al Facility	Hours	urs City, State, Zip Code Fair Lawn, New Jersey 07410											
Scope of Work (Check A	All That Apply)						· un		nocy o	7410					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		pirements	Renova Pemolit				×	Full Containm Mini-Enclosus Glovebag Pro Non-Exempte	re ocedure	92 <del>5</del> 2			e		
		1000	Locati				<del></del>				Abatement Type				
Location			lormal d Sole		Ashas		scription					1 9		П	
Asbestos-Containing TO BE AB	ATED	Ma	intenar	nce/		thermal	system	flaterial (ACM) s insulation,	(S	mount specify	₽.	20	Enc	m	
In Faci (13)		J	(12)	Zuii :			cing, VA niscellar		SF	or LF)	Remova	Repair	Encapsulate	Enclosure	
		Yes	No	N/A							8	-	ate	re	
Tank 4	001		Х			Surfa	ace Ma	astic	1	50 sf	Х				
		-									-				
							**************************************				<u> </u>				
Name of Registered Wa	ste Hauler			JDEP W		Cubic		Name of	Registe	red Landfill					
Freehold Cartage				auler ID -2265	NO.	of Was		IESI							
City, State Dunmore, PA						Dispos 6/30/2	al Date 2013	City, Sta Bethlel		Α					
Completed by Aubrey Hotard		Title Corp	orate	Safety	Directo		ignature		OK	Da 6/-	te 4/201	3			
ASB-41 (R-06-08)							* Do no	ot use this form fo	r asbesto	os licensure	e exem	pted	activit	ties.	



### NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to <u>N.J.A.C.</u> 7:26-2.12)

Date of Notification (1)					Name of Building Owner/Operator (2)									
00/04/0040	0/04/0042						AT&T 7813							
06/01/2013 Agencies Notified		Notification	Type		Street Address		2813 July 5 A							
Agencies Notified		Notification	1400		<u>Outcorridation</u>	20						M7 2		
( ) EPA		(X) Initial No			200 Laurel Ave		A2-8A09			2 19 1 2	ILLI			
(X) DOL		( ) Amende		on	City, State, Zip	Code			10	80 1				
(X) DOH		( ) Cancelle	d								16/214	Star I		
( ) DCA					Middletown, N					-		1111		
					Name of ContactTel. Number									
				FACILITY IN	Jeff Onori									
Name of Facility Where Aba	tement is T	aking Place (	3)	PACILIT IN	Type of Facility	v (4)								
Name of Facility Where Aba	atement is i	aking riace (	71		( ) School (K-									
AT&T					() Subchapte	r 8 (other th	an K-12)							
Street Address					(X) Other (i.e.	private & co	ommercial bldg	gs., hom	es, etc.					
					0 5 1 000		4-4-1							
1300 Whitehorse Road	o			1 (7)	Sq. Feet300	0,000	# OT FIG	oors	4	T. (2)				
	County (6)		County C		Bldg. Age 50	)+								
Hamilton	Atlantic		(State Us	e Only)	Current Use (p		demolished)	phone	co.			_		
Name of Monitoring Firm Hi	ired by Blda	Owner (8)	ASCM No	).			Name of Cor							
Name of Workering 1 mm 1	ilou by blug	. 0111101 107	1.0011.11	4			NCM Demol			liation, I	_P			
ATC Associates														
Street Address					Street Address									
					404 N. Berry S	Street								
3 Terri Lane					Oit Otala Zia	C-1-								
City, State, Zip Code					City State, ZipCode Brea, CA 92821									
Burlington, NJ					Diea, CA 3202	-1								
Project Manager for Monito	ring Firm	Telephone N	umber		Telephone Nu	mber		License Number						
John Lutz		609-386-880			484-480-8931			01066						
								<u> </u>						
Scheduled Start Date (10)		Scheduled C	ompletion L	Date (11)	Name of OSHA Monitor EMSL Analytical									
06/18/2013 Occupancy Status During A	hatament //	06/18/2013	0)		Street Address									
(X ) Facility Closed/Vacated					<u>olicotriudioso</u>									
( ) Abatement Performed C					107 Haddon A	ve								
* 4		AT 81 N			City, State, Zir			With the S		CEL WEST	Mile Sall			
Describe_in segregated are	ea				Westmont, NJ	08108								
Other Describe														
Other - Describe - Source of Work (Check all t	that apply)													
Source of Work (Check all I	пат арріу ј													
( ) Demolition (X) Renov	vation													
( ) Large Proj. (>160 SF or	>260 LF AG	CM) (X)SM Pro	oj. (>25<16	0 SF or >10 <26	0 LF ACM) (	) Minor Pro	oj. (<25 SF or	<10 LF	ACM)					
(X) Full Containment with				sure () Gl	ovebag Procedu	ire								
Location of Asbestos-		ation Normally		Description of		Amount (	Specify SF or	LF)	Abater	ment Ty	<u>pe</u>			
Containing Material (ACM)		by Maint./Cus	stodiai	thermal system surfacing, VAT										
Facility (13)	Staff?	NO NO	NA	miscell.)	, or other				Rem.	Rep.	Encap	<u>Enclose</u>		
2 <sup>nd</sup> Floor Turbine Room	X	140	11/1	Soundproofing	Panels	80 SF	SF		Х		T			
2 Tion Tarbine Room	- 1													
										1				
Name of Reg. Waste Haule	er	NJDEP Wa	ste Hauler I	D#	Cubic Yards o	f Waste			of Reg.					
		20990			1			Miner	a Landf	ill				
Service Transport Group, Ir	nc.	L					I Dian Data	L		Situ Cto	to			
City, State							Disp. Date 06/18/2013			City, Sta Navnes	i <u>te</u> burg, O⊢	f		
New Castle, DE							00/10/2013			. uyiios	July, OI			
Completed by (Print or Typ	e)	Title			Signature			Date						
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