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

Date of Notification (1)
6/2/2014

Name of Building Owner/Operator (2)
ORYTARY PREPATORY SCHOOL

Agencies Notified
- EPA
- DEP
- DOL
- DOH
- DCA

Type Notification
- Initial
- Amended
- Amendment #
- Emergency (including justification)
- Cancellation

Street Address
ONE BEVERLY ROAD

City, State, Zip Code
SUMMIT, NJ 07901

Name of Contact
ROBERT COSTELLO

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
ORYTARY PREPATORY SCHOOL

Type of Facility (4)
- School (K-12)
- Subchapter 8 (Other than K-12)
- Other (i.e., private & commercial buildings, homes, etc.)

Street Address
ONE BEVERLY ROAD

City (5)
SUMMIT

County Code (6)
UNION

Current Use (Prior if being demolished)

Name of Monitoring Firm Hired by Building Owner (8)
ENVIROVISION CONSULTANTS, INC.

Telephone No.
973-636-9145

Name of Abatement Contractor (9)
TWO BROTHERS CONTRACTING, INC.

Telephone No.
973-955-6700

License No.
00494

Start Date (10)
6/13/2014

Scheduled Completion Date (11)
2014

Occupancy Status During Abatement (Check Only One)

Scope of Work (Check All That Apply)
- ≥3 sf or ≥30 if
- ≥100 sf or ≥260 if
- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovetag Procedure
- Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM)
TO BE ABATED

Description of Asbestos-Containing Material (ACM)
(i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

Amount (Specify SF or LF)

Abatement Type
- Removal
- Repair
- Encapsulate
- Endorse

Name of Registered Waste Hauler
TWO BROTHERS CONTRACTING

City, State
CLIFTON, NJ

Completed by
VIVECA RAMOS

Title
PROJECT COORDINATOR

Signature

Date
6/2/2014

ASB-41 (R-06-08)

* Do not use this form for asbestos licensure exempted activities.
Date of Notification (1)  
June 2, 2014

Name of Building Owner/Operator (2)  
Cherry Hill Public Schools

Agencies Notified  
- EPA  
- DEP  
- DOL  
- DOH  
- DOA

Type Notification  
- Initial  
- Amended  
- Amendment #  
- Emergency (including justification)  
- Cancellation

Street Address  
45 Ranoldo Terrace

City, State, Zip Code  
Cherry Hill, NJ 08034

Name of Contact  
Tom Carter

Telephone Number  
(502) 239-0200

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)  
Woodcrest Elementary School

Street Address  
400 Cranford Rd

City (5)  
Cherry Hill

County (6)  
Camden

Square Feet  
20,000

Type of Facility (4)  
- School (K-12)  
- Subchapter 8 (Other than K-12)  
- Other (i.e. private & commercial buildings, homes, etc.)

# of Floors  
2

County Code (7)  
STATE USE ONLY

Current Use (Prior to being demolished)  
School

City, State, Zip Code  
Moorrostown, NJ 08057

Name of Monitoring Firm Hired by Building Owner (8)  
TTI Environmental, Inc.

ASCM No.  
Name of Abatement Contractor (9)  
Shade Environmental, LLC

Street Address  
1253 N. Church Street

City, State, Zip Code  
Moorrostown, NJ 08057

Telephone No.  
856-840-8800

Telephone No.  
856-755-0099

License No.  
00842

Project Manager for Monitoring Firm  
Jim Guiliaire

Name of OSHA Monitor  
EMSL

Start Date (10)  
June 20, 2014

Scheduled Completion Date (11)  
July 3, 2014

End Date (End of Abatement)

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)

- 23 sf or 23 ft
- 800 sf or 260 ft
- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exampled (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED

- In Facility (13)

Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)

- Yes  
- No  
- N/A

Description of Asbestos-Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)

- Amount (Specify SF or LF)

Boiler Room  
Boiler Breech Insulation  
50 SF  
x

Boiler Room  
Boiler Lagging  
50 SF  
x

Name of Registered Waste Hauler  
Freehold

NJDEP Waste Hauler ID No.  
22253

Cubic Yards of Waste  
20

Name of Registered Landfill  
Western Berks Community Landfill

City, State  
Mount Holly, New Jersey 08060

Disposal Date  
7/03/2014

City, State  
Birdsboro, PA 19508

Completed by  
Christina Lynch

Title  
Operations Manager

Signature  
Date  
June 2, 2014

* Do not use this form for asbestos licensure exempted activities.
Date of Notification (1)  
June 2, 2014

Name of Building Owner/Operator (2)  
Thomas Scanlan

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)  
Residence

Square Feet  
5,000

Type of Facility (4)  

Street Address  
128 Decatur Street  
Cape May, NJ 08204

# of Floors  
2

Other (i.e. private & commercial buildings, homes, etc.)

City (5)  
Cape May

Bldg. Age  
100

County Code (7)  

Current Use (Prior if being demolished)  
Residence

Name of Facility Where Abatement is Taking Place (3)  
Residence

County (6)  
Cape May

Name of Abatement Contractor (9)  
Shade Environmental, LLC

Name of Monitoring Firm Hired by Building Owner (6)  
ASCM No.

License No.  
00842

Management & Enviro. Consulting Services

Name of Abatement Contractor (9)  
Shade Environmental, LLC

Street Address  
P.O. Box 341

Telephone No.  
609-298-4070

City, State, Zip Code  
Chesterfield, NJ 08515

Telephone No.  
856-755-0099

Project Manager for Monitoring Firm  
Bill Weisgarber

License No.  
00842

Street Address  
623 Cutler Ave.

City, State, Zip Code  
Chesterfield, NJ 08515

City, State, Zip Code  
Maple Shade, NJ 08052

Start Date (10)  
June 17, 2014

Name of OSHA Monitor  
EMSL

Scheduled Completion Date (11)  
June 21, 2014

Occupancy Status During Abatement (Check Only One)  

Street Address  
107 Haddon Ave

Facility Closed/Vacated During Entire Period of Abatement

City, State, Zip Code  
Westmont, New Jersey 08108

Other – Describe: ____________________________

Scope of Work (Check All That Apply)  

Location of Asbestos-Containing Material (ACM)  

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM)</th>
<th>Location Normally Used Solely by Maintenance/Custodial Staff?</th>
<th>Description of Asbestos-Containing Material (ACM)</th>
<th>Amount</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basement</td>
<td>Yes</td>
<td>Insulation</td>
<td>50 SF</td>
<td>xxx</td>
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<tr>
<td>Basement</td>
<td>X</td>
<td>Tank Insulation</td>
<td>20 SF</td>
<td>xxx</td>
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<tr>
<td>Basement</td>
<td>X</td>
<td>Pipe Insulation</td>
<td>180 LF</td>
<td>xxx</td>
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</table>

Name of Registered Waste Hauler

Freehold

Cubic Yards of Waste  
3

Name of Registered Landfill  
Western Berks Community Landfill

NJDEP Waste Hauler ID No.  
22253

Disposal Date  
6/21/2014

City, State  
Mount Holly, New Jersey 08060

Name of Registered Landfill  
Western Berks Community Landfill

City, State  
Birdsboro, PA 19508

Completed by  
Christina Lynch

Title  
Operations Manager

Signature  
_________________  
Date  
June 2, 2014

* Do not use this form for asbestos licensure exempted activities.
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:69 and 12:120)

Date of Notification (1):
June 2, 2014

Name of Building Owner/Operator (2):
Cherry Hill Public Schools
Check # 1182

Agencies Notified Type of Notification
☐ EPA Initial
☐ DEP Amended
☐ DOL Amendment #
☐ DOH Emergency (Including Justification)
☐ DGA Cancellation

Name of Building Owner/Operator (2):
Cherry Hill Public Schools

Street Address:
45 Ranoldo Terrace

City, State, Zip Code:
Cherry Hill, NJ 08034

Name of Contact:
Tom Carter

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3):
Joseph Sharp Elementary School

Street Address:
300 Old Orchard Rd

City (5):
Cherry Hill

County (6):
Camden

County Code (?): (STATE USE ONLY)

Name of Monitoring Firm Hired by Building Owner (8):
TTI Environmental, Inc.

ASCM No.:

Name of Abatement Contractor (9):
Shade Environmental, LLC

Street Address:
1253 N. Church Street

City, State, Zip Code:
Moorestown, NJ 08057

Square Feet:
20,000

# of Floors:
2

Bldg. Age:
100

Current Use (Prior to being demolished):
School

Type of Facility (4):
☐ School (K-12)
☐ Subchapter 8 (Other than K-12)
☐ Other (i.e. private & commercial buildings, homes, etc.)

License No.:
00642

Name of OSHA Monitor:
EMSL

Street Address:
623 Cutler Ave.

City, State, Zip Code:
Maple Shade, NJ 08052

Project Manager for Monitoring Firm:
Jim Guilardi

Telephone No.:
856-840-8800

Telephone No.:
856-755-0099

Start Date (10):
July 21, 2014

Scheduled Completion Date (11):
August 1, 2014

Occupancy Status During Abatement (Check Only One):
☐ Facility Closed/Vacated During Entire Period of Abatement
☐ Other - Describe: None

Facility Abatement Performed Outside of Normal Facility Hours
☐ Yes
☐ No
☐ N/A

Scope of Work (Check All That Apply):
☒ Renovation
☒ Demolition
☒ Full Containment with Negative Pressure
☒ Mini-Enclosure
☒ Glovebag Procedure
☒ Non-Exempted () and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM)

Boiler Room

Boiler Room

TO BE ABATED

In Facility (13)

Yes

No

Boiler Breech Insulation

Boiler Lagging

Description of Asbestos Containing Material (ACM)

(i.e. thermal systems insulation, surfacing, VAC, or other miscellaneous)

Amount

100 SF

Specify

S

SF or LF

Removal

Abatement

Type

Repair

Endoscope

Endorse

Endorse

Approval

Endorse

Approval

Name of Registered Waste Hauler:
Freehold

NJDEP Waste Hauler ID No.:
22253

Cubic Yards of Waste:
40

Name of Registered Landfill:
Western Berks Community Landfill

City, State:
Mount Holly, New Jersey 08060

Disposal Date:
8/01/2014

City, State:
Birdsboro, PA 19508

Completed by:
Christina Lynch

Title:
Operations Manager

Signature:

Date:
June 2, 2014

ASB-41 (R-06-08)

* Do not use this form for asbestos licensure exempted activities.
State of New Jersey  
NOTIFICATION OF ASBESTOS ABATEMENT  
(Pursuant to NJAC 5:60 and 12:120)

**Name of Building Owner/Operator:** Cherry Hill Public Schools  
**Check #:** 1186

<table>
<thead>
<tr>
<th>Agencies Notified</th>
<th>Type Notification</th>
<th>Street Address</th>
<th>City, State, Zip Code</th>
<th>Name of Contact</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>EPA</td>
<td>Initial</td>
<td>45 Ranoldo Terrace</td>
<td>Cherry Hill, NJ 08034</td>
<td>Tom Carter</td>
<td></td>
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<tr>
<td>DEP</td>
<td>Amended</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>DOL</td>
<td>Amendment #</td>
<td></td>
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<td>DOH</td>
<td>Emergency (including justification)</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DCA</td>
<td>Cancellation</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**FACILITY INFORMATION**

**Name of Facility Where Abatement is Taking Place:** Russell Knight Elementary School  
**Street Address:** 140 Old Carriage Road  
**City (5):** Cherry Hill  
**County (6):** Camden  
**Square Feet:** 20,000  
**# of Floors:** 2  
**Bldg. Age:** 100  
**Current Use (Prior to being demolished):** School

**Name of Monitoring Firm Hired by Building Owner:** TTI Environmental, Inc.  
**ASCM No.:**  
**Name of Abatement Contractor:** Shade Environmental, LLC  
**Street Address:** 623 Cutler Ave.  
**City, State, Zip Code:** Maple Shade, NJ 08052  
**Telephone No.** 856-840-8800  
**License No.:** 00842

**Project Manager for Monitoring Firm:** Jim Guilliardi  
**Street Address:** 1253 N. Church Street  
**City, State, Zip Code:** Moorestown, NJ 08057  
**Telephone No.** 856-755-0099  
**Name of OSHA Monitor:** EMSL  
**Start Date (10):** July 7, 2014  
**Scheduled Completion Date (11):** July 18, 2014  
**Occupancy Status During Abatement (Check Only One):** X Facility Closed/Vacated During Entire Period of Abatement  
**Abatement Performed Outside of Normal Facility Hours:** x

**Scope of Work (Check All That Apply):**  

<table>
<thead>
<tr>
<th>Description</th>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility</th>
<th>Is Location Normally Used Solely by Maintenance/Custodial Staff?</th>
<th>Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAC, or other miscellaneous)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>X Renovation</td>
<td>Boiler Room</td>
<td>X Boyle Room</td>
<td>Boiler Lagging Insulation</td>
<td>100 SF</td>
<td></td>
</tr>
<tr>
<td>X Demolition</td>
<td>Boiler Room</td>
<td>X Boyle Room</td>
<td>Boiler Breach Insulation</td>
<td>100 SF</td>
<td></td>
</tr>
</tbody>
</table>

**Location of Asbestos-Containing Material (ACM):**  
- Boiler Room
- Boiler Room

**Name of Registered Waste Hauler:** Freehold  
**NJDEP Waste Hauler ID No.:** 22253  
**Cubic Yards of Waste:** 40  
**Name of Registered Landfill:** Western Berks Community Landfill  
**City, State:** Mount Holly, New Jersey 08060

**Complited by:** Christina Lynch  
**Title:** Operations Manager  
**Signature:** [Signature]  
**Date:** June 2, 2014

* Do not use this form for asbestos licensure exempted activities.
**NOTIFICATION OF ASBESTOS ABATEMENT**
(Pursuant to NJAC 8:60 and 12:120)

**Name of Building Owner/Operator (2)**
Cherry Hill Public Schools
Check # 1187

**Name of Contact**
Tom Carter

**Date of Notification (1)**
June 2, 2014

**Name of Facility Where Abatement is Taking Place (3)**
Henry Beck Middle School
950 Cropwell Rd
City (5)
Cherry Hill
County (6)
Camden

**Type of Facility (4)**
School (K-12)

**Square Feet**
20,000

**Number of Floors**
2

**Name of Monitoring Firm Hired by Building Owner (8)**
TTI Environmental, Inc.

**Street Address**
1253 N. Church Street
Moorestown, NJ 08057

**City, State, Zip Code**
City, State, Zip Code
Moorestown, NJ 08057

**Telephone No.**
856-840-8800

**License No.**
00842

**Start Date (10)**
June 20, 2014

**Occupancy Status During Abatement (Check Only One)**
Facility Closed/Vacated During Entire Period of Abatement

**Name of Abatement Contractor (9)**
Shade Environmental, LLC

**Street Address**
623 Cutler Ave.
City, State, Zip Code
Maple Shade, NJ 08052

**Telephone No.**
856-755-0099

**Name of OSHA Monitor**
EMSL

**Number of Abatement Tasks (11)**

---

**Location of Asbestos-Containing Material (ACM)**

<table>
<thead>
<tr>
<th>Location</th>
<th>Is Location Normally Used Solely by Maintenance/Custodial Staff?</th>
<th>Description of Asbestos-Containing Material (ACM)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boiler Room</td>
<td>X</td>
<td>Boiler Breech Insulation</td>
<td>200 SF</td>
<td>Full Containment with Negative Pressure</td>
</tr>
<tr>
<td>Boiler Room</td>
<td>X</td>
<td>Boiler Insulation</td>
<td>200 SF</td>
<td>Full Containment with Negative Pressure</td>
</tr>
</tbody>
</table>

**Name of Registered Waste Hauler**
Freehold

**City, State**
Mount Holly, New Jersey 08060

**Date of Disposal**
7/03/2014

**Name of Registered Landfill**
Western Berks Community Landfill

**City, State**
Birdsboro, PA 19508

**Completed by**
Christina Lynch

**Title**
Operations Manager

**Signature**
[Signature]

**Date**
June 2, 2014

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* Do not use this form for asbestos licensure exempted activities.
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1)  May 22, 2014
Name of Building Owner/Operator (2)  Jerry Grogg

Agencies Notified  EPA  [X]  DEP  [X]  DOL  [X]  DOH  [X]  DCA  [ ]
Type of Notification  Initial Notification  [ ]  Amended Notification
Amendment #:  [ ]
Emergency (including justification)  [X]  Cancellation

Name of Contact  Jerry Grogg
Telephone Number

Name of Facility Where Abatement is Taking Place (3)
Residence

Street Address  104 Ortley Avenue
City  Lavallette
County (6)  Ocean
County Code (7)  ASCM No.

Name of Monitoring Firm Hired by Building Owner (8)  N/A

Type of Facility (4)  [X]  School (k-12)
[ ]  Subchapter 8 (other than k-12)
[ ]  Other (i.e., private & commercial buildings, homes, etc.)
Square feet  1200 sf
# of Floors  1
Bldg. Age  60
Current Use (Prior if being demolished)  Residence

Name of Abatement Contractor (9)  Guardian Contracting, Inc.
Street Address  1889 Route 9, Unit 61
City, State, Zip Code  Toms River, New Jersey 08753-1271
Telephone Number  732-349-9932
License Number  00624
Name of OSHA Monitor  E.M.S.L. Analytical
Street Address  1056 Stelton Road
City, State, Zip Code  Piscataway, New Jersey 08854

Project Manager for Monitoring Firm
TelephoneNumber  732-349-9932
Scheduled Start Date (10)  5/23/14
Scheduled Completion Date (11)  5/26/14

Occupancy Status During Abatement (Check only one)
[ ]  Facility Closed/Vacated During Entire Period of Abatement
[ ]  Abatement Performed Outside of Normal Facility Hours
[X]  Other – Describe

Scope of Work (Check all that apply)
[ ]  >3 sf or >3 lf
[X]  >160 sf or >2600 lf
[ ]  Renovation
[ ]  Demolition

Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13)

Is Location Normally used Solely by Maintenance/Custodial Staff (12)
YES  NO  N/A

Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

Amount (Specify SF or LF)

Abatement Type
[ ]  FULL CONTAINMENT WITH NEGATIVE PRESSURE
[ ]  MINI-ENCLOSURE
[ ]  GLOVEBAG PROCEDURE
[X]  NON-EXEMPTED (*) AND NON-FRIABLE PROCEDURE

Amount of Asbestos-Containing Material (ACM)  1100 sf

Name of Registered Waste Hauler  Guardian Contracting, Inc.
NIDEP Waste Hauler ID No.  20223
Cubic Yards of Waste  3
Name of Registered Landfill  T.R.R.F.

City, State  Toms River, New Jersey
Disposal Date  5/27/14

Completed by (Print or Type) Nicholas Fernicola
Title  Project Manager
Signature  

City, State  Tullytown, Pennsylvania
Date  5/22/14

*Do not use this form for asbestos licensure exempted activities.
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1): 6-2-14
Name of Building Owner/Operator (2): JOHN VITALE

Agencies Notified:
- □ EPA
- □ DEP
- □ DOL
- □ DOH
- □ DCA

Type Notification:
- □ Initial
- □ Amended
- □ Emergency (Including Justification)
- □ Cancellation

Street Address:
60 BAY BREEZE DR
City, State, Zip Code:
TOMS RIVER, NJ 08753

Name of Contract:
ERIC PLACKIS

FACILITY INFORMATION

Type of Facility (4):
- □ School (K-12)
- □ Subchapter 8 (Other than K-12)
- □ Other (i.e., private & commercial buildings, homes, etc.)

Square Feet: 1100
# of Floors: 1
Block Age: 50
Current Use (Prior to being demolished): VACANT

Name of Facility Where Abatement is Taking Place (5):
60 BAY BREEZE DR
City (6):
TOMS RIVER NJ
County Code (7): OCEAN

Name of Contractor (8):
BRICK INDUSTRIES INC.

Name of asbestos-Containing Material (ACM) TO BE ABATED:
SLIDING

Name of Abatement Contractor (9):
BRICK INDUSTRIES INC.

Street Address:
145 NATICK TRAIL
City, State, Zip Code:
BRICK NJ 08720

License No.:
M2 898-7/499

Name of OSHA Monitor:

Scope of Work (Check all that apply):
- □ 500 sf or ≥200 sf
- □ 1000 sf or ≥280 sf
- □ Renovation
- □ Demolition
- □ Full Containment with Negative Pressure
- □ Mini-Enclosure
- □ Glovebag Procedure
- □ Non-Exempted (*) and Non-Frisable Procedure

Start Date (10): 6-11-14
Scheduled Completion Date (11): 6-12-14

Occupancy Status During Abatement (Check only one):
- □ Facility Closed/Vacated During Entire Period of Abatement
- □ Abatement Performed Outside of Normal Facility Hours

Project Manager for Monitoring Firm:

Telephone No.:

License No.:

Location of Asbestos-Containing Material (ACM) TO BE ABATED:
SLIDING

Description of Asbestos-Containing Material (ACM)
(Oct. 1987 System of Rating, 1992-97, or other miscellaneous):
TRANSITE

Amount (Specialty SF or LF):
1350

Name of Registered Waste Handler:
BRICK IND. INC.

Disposal Date:
6-19-14
City, State:
BRICK NJ 08720

Name of Registered Landfill:
G.R.O.W.S.

Completed By:
ERIC PLACKIS
Title: PRES.

*Do not use this form for asbestos liscensure exempted activities.
State of New Jersey - Notification of Asbestos Abatement
(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>May 29, 2014</th>
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<tbody>
<tr>
<td>Name of Building Owner/Operator (2)</td>
<td>Drew University</td>
</tr>
<tr>
<td>Street Address</td>
<td>36 Madison Avenue</td>
</tr>
<tr>
<td>City State Zip Code</td>
<td>Madison, NJ</td>
</tr>
<tr>
<td>Name of Contact</td>
<td>James Hall</td>
</tr>
</tbody>
</table>

**FACILITY INFORMATION**

| Name of Facility Where Abatement is Taking Place (3) | Drew University- Hall of Sciences |
| Street Address | 36 Madison Avenue |
| City (5) | Madison |
| County (6) | Morris |
| County Code (7) | (State Use Only) |
| ASCM No. | |
| Name of Contractor (9) | GREENWOOD ABATEMENT CONSULTANTS, INC. |
| Street Address | 268 MAIN STREET, Butler, NJ 07405 |

| Project Manager for Monitoring Firm | Michael Hoodak |
| Telephone Number | 609.298.5520 |
| Scheduled Start Date (10) | May 27, 2014 |
| Scheduled Completion Date (11) | August 30, 2014 |

**Occupancy Status During Abatement (Check only one)**
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours - Describe - Occupied
- Other - Describe: Phase #4 - 05.27.2014 to 08.30.2014

**Source of Work (Check all that apply)**
- ≥ 3 sf or ≥ 3 ft
- ≥ 160 sf or ≥ 260
- Renovation
- Demolition
- x Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- x Non-Exempted (*) and Non-Friable Procedure
- x Wrap & Cut

**Location of Asbestos-Containing Material (ACM) in Facility (13)**
- HS -3
- Hallway & Bathrooms
- Rms # S105 & S106
- 1st Fl. Area Adj
- Is Location Normally Used Solely by Maint./Custodial Staff (12) | YES | NO | NA |
- Description of Asbestos-Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscell.) | Spray On Fireproofing | Spray On Fireproofing | Spray On Fireproofing |
- VAT & Mastic | TSI |
- Amount (Specify SF or LF) | 1,100 sf | 1,000 sf | 2,300 sf |
- 140 ft | |

**Disposal Date**
- August 30, 2014

**Hauler #1)** GREENWOOD ABATEMENT Consultants, Inc. - Butler, NJ 07405
- NJ DEP # 129951 NY DEP #

**Hauler #2)** Newark Carting, Inc. - Newark, NJ 04509, NJ DEP # 19551
- Disposal Date | August 30, 2014
- City | Route 2, Box 88
- Bridgeport, WA | 360-842-2784
- 9000 Minerva Road | Waynesburg, OH
<table>
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<th>Completed by (Print or Type)</th>
<th>Title</th>
<th>Signature</th>
<th>Date</th>
</tr>
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<tbody>
<tr>
<td>Marin Graure</td>
<td>SENIOR PROJECT MANAGER</td>
<td>Marin Graure</td>
<td>May 29 2014</td>
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GAC # 2013-414 Amendments-Minor VAT Non-Friable Removal and Minor Wrap & Cut
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60-7 and 12:120-7)

Date of Notification (1)
5-22-14

Name of Building Owner/Operator (2)
Kevin Meyers

Agencies Notified
[X] EPA
[X] DOL
[X] DOH

Type Notification
[X] Initial Notification
[X] Amended Notification
[X] Emergency Notification
[X] Cancellation

Street Address
49 Northview Ave

City, State, Zip Code
Montclair, NJ, 07043

Name of Contact
Kevin Meyers

Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
Same as above

Street Address

City (5) Essex

County (6) (State Use Only)

Name of Monitoring Firm hired by Building Owner (8)
N/A

ASCN No.

Name of Abatement Contractor (9)
AZTECH MANAGEMENT, INC.

Street Address
86 Christopher St.

City, State, Zip Code
Montclair, NJ 07042

Telephone Number
(973) 744-8800

License Number
00371

Scheduled Start Date (10) 6-5-14

Sched. Completion Date (11) 6-6-14

Month Day Year
Month Day Year

Occuancy Status During Abatement (Check only one)

[X] Abatement Performed Outside of Normal Facility Hours - Describe: N/A

Other - Describe: N/A

Scope of Work (Check all that apply)

[X] 23 sf or 23 sf

[X] 160 sf or 260 sf

[X] Renovation

[X] Demolition

Full Containment with Negative Pressure

Mini-Enclosure

Glovebag Procedure

Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED

In Facility

(13)

Is Location Normally Used Solely By Maintenance/Custodial Staff (12)

Yes No N/A

Description of Asbestos-Containing Material (ACM)
(i.e., thermal systems insulation, surfacing, VAT, or other Miscellaneous)

Amount (Specify SF or Lf)

Abatement Type

Removal Repair Encapsulation Enclosure

Basement

Pipe Insulation

50 lf

Name of Registered Waste Hauler
AZTECH MANAGEMENT, INC.

NDEP Waste Hauler ID No.
17040

Cubic Yards of Waste
1.5

Name of Registered Landfill
G.R.O.W.S.

City, State
Montclair, NJ 07042

Disposal Date
6-9-14

City, State
Morrisville, PA 19067

Completed By (Print or Type)
Constantine Vivian

Title
President

Signature

Date
5-22-14
**State of New Jersey**
**NOTIFICATION OF ASBESTOS ABATEMENT**
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification: 5/30/14

Name of Building Owner/Operator: Dan Karlok

Agencies Notified:
- [X] EPA
- [X] DEP
- [X] DOL
- [X] DOH
- [ ] DCA

Type Notification: [X] Initial

Street Address: 15 Franklin Place
City, State, Zip Code: Montclair, NJ 07042

Amendment #: [ ]
Emergency (including justification): [ ]
Cancellation: [ ]

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place:
15 Franklin Place

City: Montclair
County: Essex

Current Use (Prior if being demolished):

Square Feet: 2200
# of Floors: 2
Bldg. Age: 80

Type of Facility:
- [x] Other (i.e., private & commercial buildings, houses, etc.)
- [ ] School (K-12)
- [ ] Subchapter B (Other than K-12)

Name of Monitoring Firm Hired by Building Owner:

ASCM No.: ASCM No.

Name of Abatement Contractor:
ABS Environmental Services, LLC

Street Address:
PO Box 463, 4 E Gate Drive

City, State, Zip Code:
Glenwood, NJ 07418

Project Manager for Monitoring Firm:

Telephone No.:
973-583-8500

License No.:
703

Start Date: 6/1/14
Scheduled Completion Date: 6/30/14

Occupancy Status During Abatement (Check Only One):
- [ ] Facility Closed/Vacated During Entire Period of Abatement
- [x] Abatement Performed Outside of Normal Facility Hours
- [ ] Other — Describe:

Scope of Work (Check All That Apply):
- [ ] 23 sq ft or <33 sq ft
- [ ] 300 sq ft or 2260 sq ft
- [x] Renovation
- [ ] Demolition

Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility:

<table>
<thead>
<tr>
<th>Location</th>
<th>Is Location Normally Used Solely by Maintenance/Custodial Staff?</th>
<th>Description of ACM (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>basement</td>
<td>[ ] Yes [x] No [ ] N/A</td>
<td>pipe insulation</td>
<td>60 LF</td>
<td>[x] Enclose</td>
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</tbody>
</table>

Name of Registered Waste Hauler:
Frechold Cartage

Cubic Yards of Waste:

Name of Registered Landfill:
GROWS

City, State:
Morrisville, PA

Disposal Date:
TBD

Completed by:
Andrew Scott Higgins
Title: President
Signature:

Date: 5/30/14

* Do not use this form for asbestos licensure exempted activities.
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12-120)

Date of Notification (1)
May 29, 2014

Agency Notified
☐ EPA
☐ DOL
☒ DHQ
☐ DCA

Type Notification
☐ Initial
☐ Amended
☒ Amendment #1
☐ Emergency (including justification)
☐ Cancellation

Name of Building Owner/Operator (2)
PA of NY & NJ, Port Newark Marine Terminal

Street Address
274 Kellogg Street

City, State, Zip Code
Port Newark, NJ 07114

Name of Contact
Ron Shaw

Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
Port Elizabeth

Street Address
Trench at Berth 14 on Export St. (Cross Street Marsh St.)

City (5)
Newark, NJ 07114

County (6)
Essex

County Code (7) (STATE USE ONLY)
N/A

Current Use (Prior if being demolished)
Under ground pipe

Name of Monitoring Firm Hired by Building Owner
PA of NY & NJ

ASCM No.
N/A

Name of Abatement Contractor (9)
B&N&K Restoration Co., Inc.

Street Address
223 Randolph Avenue

City, State, Zip Code
Clifton, NJ 07011

Project Manager for Monitoring Firm
Uday Mehta

Telephone No.
201-586-4881

Telephone No.
973-478-4681

License No.
00120

Name of OSHA Monitor
McCabe Environmental Services, L.L.C.

Street Address
464 Valley Brook Avenue

City, State, Zip Code
Lyndhurst, NJ 07071-1998

Start Date (10)
June 23, 2014

Scheduled Completion Date (11)
July 13, 2014

Occupancy Status During Abatement (Check only one)
☐ Facility Closed/Vacated During Entire Period of Abatement
☐ Abatement Performed Outside of Normal Facility Hours
☒ Other - Describe: Non friable exterior work

Scope of Work (Check all that apply)
☐ ≥ 3 sf or ≥ 3 ft
☒ ≥ 160 sf or ≥ 260 sf

☐ Renovation
☐ Demolition

☐ Full Containment with Negative Pressure
☐ Mini-Enclosure
☐ Gloves Bag Procedure
☒ Non-Exempted (*) and Non-Friable Procedure

Abatement Type

Location of Asbestos-Containing Material (ACM)
TO BE ABATED
IN FACILITY

Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)
Yes ☒ No ☒ N/A ☒

Description of Asbestos-Containing Material (ACM)
(i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)
Metal Pipe wrapped in tire paper

Cubic Yards of Waste
40

Name of Registered Landfill
Grand Central Sanitary Landfill

City, State
Clifton, NJ 07014

Disposal Date
06/01/14 - 06/30/14

City, State
Penn Argyl, PA

Name of Registered Waste Hauler
Two Brothers Contracting, Inc.

Waste Hauler ID No.
12695

Completed by
G. Roger Woodman

Title
Project Manager

Signature

Date
5/30/2014

* Do not use this form for asbestos licensure exempted activities.
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to N.J.A.C. 7:26-2.12)

Date of Notification (1)
06/02/14

Name of Building Owner/Operator (2)
LG Electronics

Agencies Notified
(X) EPA
( ) DEP
(X) DOL
(X) DOH
( ) DCA

Notification Type
(X) Initial Notification
( ) Amended Certification
( ) Cancelled

Street Address
920 Sylvan Avenue

City, State, Zip Code
Englewood Cliffs, NJ 07632

Name of Contact
Steven Yu
Tel. Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
LG Electronics

Street Address
111 Sylvan Avenue

City (5) County (5)
Engelwood Cliffs Bergen

County Code (7) (State Use Only)

Name of Monitoring Firm Hired by Bldg. Owner (8)
Omega Environmental Services, Inc.

ASCM No.

Name of Contractor (9)
Brandenburg Industrial Service Company

Street Address
2217 Spillman Dr

City, State, Zip Code
Bethlehem, Pennsylvania 18015

South Hackensack, NJ 07606

Project Manager for Monitoring Firm
Anton Rezin
Telephone Number
201-489-8700

Telephone Number
610-891-1800

License Number
00721

Occupancy Status During Abatement (Check only one)
( ) Facility Closed/Vacated During Entire Period of Abatement
( ) Abatement Performed Outside of Normal Facility Hours

Describe

Source of Work (Check all that apply)
( x) Demolition
( ) Renovation
( x) Large Proj. (>160 SF or >260 LF ACM)  ( ) SM Proj. (>25<160 SF or >10 <260 LF ACM)
( ) Minor Proj. (<25 SF or <10 LF ACM)
( x) Full Containment with Negative Pressure
( ) Mini-Enclosure
( ) Glovebag Procedure

Location of Asbestos-Containing Material (ACM) in
Facility (13)

Is Location Normally Used Solely by Maint./Custodial Staff (12)
YES NO NA

Description of ACM (i.e. thermal systems insulation, surfacing, VAT, or other materials)

Amount (Specify SF or LF)
4,000 LF

Abatement Type
x


Foundation Walls
X

Brick Façade
X

Name of Req. Waste Hauler
NJDEP Waste Hauler ID #
Brandenburg Industrial Serv Co 21838

Cubic Yards of Waste
1500cy

Name of Req. Landfill
IESI Bethlehem Landfill

City, State
Bethlehem, PA

Disp. Date
TBD

Completed by (Print or Type)
Jennifer Strobel
Title
Contract Administrator

Signature

Date
08/02/14

Mail to:
NJDEP-OSHW-BRRTP
401 E. State St., PO 414
Trenton, NJ 08625-0414

Telephone 609-984-6620

C: \WORD\MYDOC\VASBESTOS
9/13/00
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)
06 / 2 / 14

Name of Building Owner/Operator (2)
WASHINGTON TWP PUBLIC SCHOOL DISTRICT

Agencies Notified
☑ EPA
☑ DOLWD
☑ DHSS
☐ DCA
(NJAC 5:23-8)

Type Notification
☐ Initial
☐ Amended
☐ Amendment #1
☐ Emergency (including justification)
☐ Cancellation

Street Address
206 E. HOLLY AVE

City, State, Zip Code
SEWELL NJ 08080

Name of Contact

Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
WEDGWOOD ELEMENTARY

Street Address
236 HURFFVILLE ROAD

City (5)
SEWELL

County (6)
Gloucester

Type of Facility (4)
☑ School (K-12)
☐ Subchapter 8 (Other than K-12)
☐ Other (i.e., private and commercial buildings, homes, etc.)

Square Feet
>50,000

# of Floors
1

Bldg. Age
50

Current Use (Prior if being demolished)
SCHOOL

County Code (7)(STATE USE ONLY)

Name of Monitoring Firm Hired by Building Owner (8)
HORIZON ENVIRONMENTAL GRP., INC

ASCM No.
00073

Name of Abatement Contractor (9)
DELTA/BJDS, INC

Street Address
1345 INDUSTRIAL BLVD

City, State, Zip Code
SOUTHAMPTON, PA 18966

Name of OSHA Monitor
CRITERION LABS

Street Address
3370 PROGRESS DRIVE

City, State, Zip Code
BENSELA PA 19020

Occ. Status During Abatement (Check only one)
☐ Facility Closed/Vacated During Entire Period of Abatement
☐ Abatement Performed Outside of Normal Facility Hours - Describe

Time of Abatement: 7:00AM- PM11:00PM- AM

Scope of Work (Check all that apply)
☐ ≥3 sf or ≥3 if
☐ ≥160 sf or ≥260 if

☐ Renovation
☐ Demolition

☐ Full Containment with Negative Pressure
☐ Mini-Enclosure
☐ Glovebag Procedure
☐ Non-Exempted (a) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN FACILITY (13)

Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)
Yes ☒ No ☐ N/A ☐

Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

Amount (Specify SF or LF)

Abatement Type
☐ Removal
☐ Repair
☐ Encapsulate
☐ Enclosure

MECHANICAL ROOM

☐ ☐ ☐ PIPE FITTINGS (CUT AND WRAP) 50 LF

Name of Registered Waste Hauler
SERVICE TRANSPORT GROUP INC

NJDEP Waste Hauler ID No.
20990

Cubic Yards of Waste

Name of Registered Landfill
MINERVA LANDFILL

City, State
58 PYLES LANE, NEW CASTLE, DE 19720

Disposal Date

City, State
WAYNESBURG, OH 44688

Completed By (Print or Type)
DAMIAN LAVELLE

Title
PROJECT MGR.

Signature

Date
6/14/14

*M Do not use this form for asbestos licensure exempted activities.*
**NOTIFICATION OF ASBESTOS ABATEMENT**  
(Pursuant to NJAC 8:60 and 5:16)

**Date of Notification (1)**  
06 / 2 / 14

**Name of Building Owner/Operator (2)**  
WASHINGTON TWP PUBLIC SCHOOL DISTRICT

**Agencies Notified**  
- [x] EPA  
- [x] DOLWD  
- [ ] DHSS  
- [x] DCA (NJAC 5:23-8)

**Type Notification**  
- [x] Initial  
- [ ] Amended  
- [ ] Emergency (including justification)  
- [ ] Cancellation

**Street Address**  
206 E. HOLLY AVE

**City, State, Zip Code**  
SEWELL NJ 08080

**FACILITY INFORMATION**

**Name of Facility Where Abatement is Taking Place (3)**  
WEDGEWOOD ELEMENTARY

**Street Address**  
236 HURFFVILLE ROAD

**City (5)**  
SEWELL

**County (6)**  
Gloucester

**County Code (?)**  
(SATE USE ONLY)

**Square Feet**  
>50,000

**# of Floors**  
1

**Built Age**  
50

**Type of Facility (4)**  
- [x] School (K-12)
- [ ] Subchapter 8 (Other than K-12)
- [ ] Other (i.e., private and commercial buildings, homes, etc.)

**Name of Abatement Contractor (9)**  
DELA/BJDS, INC

**Name of Monitoring Firm Hired by Building Owner (8)**  
HORIZON ENVIRONMENTAL GRP., INC

**ASCM No.**  
00073

**License No.**  
00793

**Name of OSHA Monitor**  
CRITERION LABS

**Street Address**  
301 9TH STREET

**City, State, Zip Code**  
WEST DEPTFORD, NJ 08086

**Project Manager for Monitoring Firm**  
STEVE

**Telephone No.**  
856 848 0800

**Start Date (10)**  
6 / 16 / 14

**Scheduled Completion Date (11)**  
8 / 8 / 14

**Occupancy Status During Abatement**  
- [x] No Public Occupancy  
- [ ] Partial Closure  
- [ ] Full Closure  
- [ ] Closed and Vacated During Entire Period of Abatement  
- [ ] Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7:30AM-3:30PM: 0000 AM

**Scope of Work (Check all that apply)**  
- [ ] 230 sf or greater  
- [ ] 260 sf or greater  
- [ ] 280 sf or greater  
- [ ] Renovation  
- [ ] Demolition  
- [ ] Full Containment with Negative Pressure  
- [ ] Mini-Enclosure  
- [ ] Glovebag Procedure  
- [ ] Non-Exempted (7) and Non-Friable Procedure

**Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)**

**Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)**

**Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAC, or other miscellaneous)**

**Amount (S6 or LF)**  
50 LF

**Endorsement**  
- [x] Removal  
- [ ] Repair  
- [ ] Encapsulate  
- [ ] Enclose

**MECHANICAL ROOM**

**PIPE FITTINGS (CUT AND WRAP)**

**Name of Registered Waste Hauler**  
SERVICE TRANSPORT GROUP INC

**NUDEP Waste Hauler ID No.**  
20990

**Cubic Yards of Waste**  
MINERVA LANDFILL

**Name of Registered Landfill**  
WAYNESBURG, OH 44688

**Disposal Date**  
MAY 11

**Completed By (Print or Type)**  
DAMIAN LAVELLE

**Title**  
PROJECT MGR.

**Signature**  
DAMIAN LAVELLE

**MAY 11**

* Do not use this form for asbestos licensure exempted activities.
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

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<tr>
<th>Date of Notification (1)</th>
<th>Name of Building Owner/Operator (2)</th>
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<tr>
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<td>WASHINGTON TWP PUBLIC SCHOOL DISTRICT</td>
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<table>
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<tr>
<th>Agencies Notified</th>
<th>Type Notification</th>
<th>Name of Contact</th>
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<tr>
<td>☑ EPA</td>
<td>☑ Initial</td>
<td></td>
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<tr>
<td>☑ DOLWD</td>
<td>☑ Amended Amendment #1</td>
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<td>☑ DHSS</td>
<td>☑ Emergency (including justification)</td>
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<td>☑ DCA (NJAC 5:23-8)</td>
<td>☑ Cancellation</td>
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<table>
<thead>
<tr>
<th>Street Address</th>
<th>City, State, Zip Code</th>
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<tr>
<td>206 E. HOLLY AVE</td>
<td>SEWELL NJ 08080</td>
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<table>
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<tr>
<th>FACILITY INFORMATION</th>
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<tr>
<td>Name of Facility Where Abatement is Taking Place (3)</td>
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<td>WHITMAN ELEMENTARY SCHOOL</td>
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<td>827 WHITMAN SCHOOL DRIVE</td>
<td>TURNERSVILLE NJ 06080</td>
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<tbody>
<tr>
<td>Gloucester</td>
<td>☑ 856 848 0800</td>
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<thead>
<tr>
<th>Telephone No.</th>
<th>License No.</th>
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<tr>
<td>215 322-2900</td>
<td>00793</td>
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<tr>
<th>Square Feet</th>
<th># of Floors</th>
<th>Bldg. Age</th>
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<td>&gt;50,000</td>
<td>1</td>
<td>50</td>
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<thead>
<tr>
<th>Name of Monitoring Firm Hired by Building Owner (8)</th>
<th>Name of Abatement Contractor (9)</th>
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<tbody>
<tr>
<td>HORIZON ENVIRONMENTAL GRP., INC</td>
<td>DELTA/BJDS, INC</td>
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<table>
<thead>
<tr>
<th>Start Date (10)</th>
<th>Scheduled Completion Date (11)</th>
<th>Name of OSHA Monitor</th>
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<tbody>
<tr>
<td>6 / 16 / 14</td>
<td>8 / 8 / 14</td>
<td>CRITERION LABS</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Occupancy Status During Abatement (Check only one)</th>
</tr>
</thead>
<tbody>
<tr>
<td>☑ Facility Closed/Vacated During Entire Period of Abatement</td>
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<tr>
<td>☑ Abatement Performed Outside of Normal Facility Hours - Describe</td>
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<table>
<thead>
<tr>
<th>Scope of Work (Check all that apply)</th>
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<tbody>
<tr>
<td>☑ Full Containment with Negative Pressure</td>
</tr>
<tr>
<td>☑ Mini-Enclosure</td>
</tr>
<tr>
<td>☑ Glovebag Procedure</td>
</tr>
<tr>
<td>☑ Non-Exempted (*) and Non-Friable Procedure</td>
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</table>

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)</th>
</tr>
</thead>
<tbody>
<tr>
<td>PIPE FITTINGS (CUT AND WRAP) 30 LF</td>
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<table>
<thead>
<tr>
<th>Name of Registered Waste Hauler</th>
</tr>
</thead>
<tbody>
<tr>
<td>SERVICE TRANSPORT GROUP INC</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Cubic Yards of Waste</th>
<th>Name of Registered Landfill</th>
</tr>
</thead>
<tbody>
<tr>
<td>20990</td>
<td>MINERVA LANDFILL</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City, State</th>
</tr>
</thead>
<tbody>
<tr>
<td>58 PYLES LANE, NEW CASTLE, DE 19720</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Completed By (Print or Type)</th>
<th>Title</th>
<th>Signature</th>
</tr>
</thead>
</table>
| DAMIAN LAVELLE              | PROJECT MGR. | [Signature]

<table>
<thead>
<tr>
<th>Disposal Date</th>
<th>City, State</th>
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<tbody>
<tr>
<td>6-4-14</td>
<td>WAYNESBURG, OH 44688</td>
</tr>
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</table>

* Do not use this form for asbestos licensure exempted activities.
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>Name of Building Owner/Operator (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>06/2/14</td>
<td>WASHINGTON TWP PUBLIC SCHOOL DISTRICT</td>
</tr>
</tbody>
</table>

- Agencies Notified: EPA, DOLWD, DHSS, DCA (NJAC 5:23-8)
- Type Notification: Initial
- Street Address: 206 E. HOLLY AVE
- City, State, Zip Code: SEWELL NJ 08080
- Name of Contact: 
- Telephone Number: 

**FACILITY INFORMATION**

- Name of Facility Where Abatement is Taking Place (3): WHITMAN ELEMENTARY SCHOOL
- Street Address: 827 WHITMAN SCHOOL DRIVE
- City (5): TURNERSVILLE
- County Code (7): GLoucester
- Square Feet: >50,000
- # of Floors: 1
- Bldg. Age: 50

- Type of Facility (4): School (K-12)
- Other (i.e., private and commercial buildings, homes, etc.)
- Current Use (Prior if being demolished): SCHOOL

- Name of Monitoring Firm Hired by Building Owner (8): HORIZON ENVIRONMENTAL GRP., INC
- ASCM No.: 00073
- Name of Abatement Contractor (9): DELTA/BDJS, INC
- Street Address: 1345 INDUSTRIAL BLVD
- City, State, Zip Code: SOUTHAMPTON, PA 18966
- Telephone No.: 215 322-2900
- License No.: 00793
- Name of OSHA Monitor: CRITERION LABS
- Street Address: 3370 PROGRESS DRIVE
- City, State, Zip Code: BENSALEM PA 19020

- Start Date (10): 6/16/14
- Scheduled Completion Date (11): 8/8/14
- Scope of Work (Check all that apply):
  - ≥3 sf or ≥3 If
  - ≥160 sf or ≥260 If
  - Renovation
  - Demolition
  - Full Containment with Negative Pressure
  - Mini-Enclosure
  - Glovebag Procedure
  - Non-Exempted (*) and Non-Friable Procedure

- Location of Asbestos-Containing Material (ACM) TO BE ABATED:
  - IN Facility (13)
- Is Location Normally Used Solely by Maintenance/Custodial Staff? (12):
  - Yes
- Description of Asbestos Containing Material (ACM)
  - i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous
- Amount (Specify SF or LF):
  - PIPE FITTINGS (CUT AND WRAP): 30 LF

- Name of Registered Waste Hauler:
  - SERVICE TRANSPORT GROUP INC
- NJDEP Waste Hauler ID No.: 20990
- Cubic Yards of Waste:
- Name of Registered Landfill:
  - MINERVA LANDFILL
- City, State:
  - WAYNESBURG, OH 44688
- Disposal Date: 
- Name of Registered Waste Hauler:
  - SERVICE TRANSPORT GROUP INC
- NJDEP Waste Hauler ID No.: 20990
- Cubic Yards of Waste:
- Name of Registered Landfill:
  - MINERVA LANDFILL
- City, State:
  - WAYNESBURG, OH 44688
- Disposal Date: 
- Name of Registered Waste Hauler:
  - SERVICE TRANSPORT GROUP INC
- NJDEP Waste Hauler ID No.: 20990
- Cubic Yards of Waste:
- Name of Registered Landfill:
  - MINERVA LANDFILL
- City, State:
  - WAYNESBURG, OH 44688
- Disposal Date: 

- Completed By (Print or Type):
  - DAMIAN LAVELLE
- Title: PROJECT MGR.
- Signature: 
- Date: 6/2/14

*Do not use this form for asbestos licensure exempted activities.
Date of Notification (1) 6/2/14

Name of Building Owner/Operator (2) Russell Porowski Private Home

Agencies Notified
- EPA
- DEP
- DOL
- DOH
- DCA

Type Notification
- Initial
- Amended
- Amendment # ______
- Emergency (Including justification)

Street Address 469 Covered Bridge Road

City, State, Zip Code Cherry Hill NJ 08003

Name of Contact Russell

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3) Russell Porowski Private Home

Street Address 469 Covered Bridge Road

City (5) Cherry Hill NJ 08003

County (6) Camden  (STATE USE ONLY)

County Code (%) Current Use (Prior if being demolished)

Name of Monitoring Firm Hired by Building Owner (8) N/A

ASCM No. Name of Abatement Contractor (9) Pernaco Inc.

Street Address PO Box 329

City, State, Zip Code West Berlin NJ 08091

Project Manager for Monitoring Firm

Telephone No. Telephone No. 856-753-9800

License No. 00727

Start Date (10) 6/3/14

Scheduled Completion Date (11) 6/4/14

Name of OSHA Monitor Same

Occupancy Status During Abatement (Check Only One)

Facility Closed/Vacated During Entire Period of Abatement
Abatement Performed Outside of Normal Facility Hours
Other – Describe: Home owner will be Home

Scope of Work (Check All That Apply)

- ≥3 sft or ≥3 sf
- ≥160 sft or ≥360 sf
- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED

In Facility (13)

Location Normally Used Solely by Maintenance/Custodial Staff? (12)

Yes No N/A

Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAB, or other miscellaneous)

Amount (Specify SF or LF) 125 SF

Abatement Type

Removal

Repair

Encapsulation

Endorse

Name of Registered Waste Hauler United Container

NDEP Waste Hauler ID No. 22459

Cubic Yards of Waste 1

Name of Registered Landfill G.R.O.W.S.

Disposal Date 6/4/14

City, State Morrisville PA 19067

Completed by Anthony T Perna

Title President

Signature

Date 6/2/14

ASB-41 (R-05-08)

* Do not use this form for asbestos licensure exempted activities.
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification (1)
6/2/14

Name of Building Owner/Operator (2)
Curt & Cindy Allen Private Home

Agencies Notified
☐ EPA
☐ DEP
☐ DOL
☐ DOH
☐ DCA

Type Notification
☐ Initial
☐ Amended
☐ Amendment #
☐ Emergency (including justification)

Street Address
7515 Pleasure Avenue

City, State, Zip Code
Sea Isle City NJ 08243

Name of Contact
Shana

Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
Curt & Cindy Allen Private Home

Street Address
7515 Pleasure Avenue

City (5)
Sea Isle City NJ 08243

County Code (7)
Cape May

County Code (7) (STATE USE ONLY)

Type of Facility (4)
☐ School (K-12)
☐ Subchapter 8 (Other than K-12)
☐ Other (i.e. private & commercial buildings, homes, etc.)

Square Feet
1000+

# of Floors
2

Bldg. Age
35+

Current Use (Prior if being demolished)

Name of Monitoring Firm Hired by Building Owner (8)
N/A

ASCM No.

Name of Abatement Contractor (9)
Pernaco Inc.

Street Address
PO Box 329

City, State, Zip Code
West Berlin NJ 08091

Telephone No.
856-753-9600

License No.
00727

Project Manager for Monitoring Firm

Name of OSHA Monitor
Same

Start Date (10)
6/3/14

Scheduled Completion Date (11)
6/5/14

Occupancy Status During Abatement (Check Only One)
☐ Facility Closed/Vacated During Entire Period of Abatement
☐ Abatement Performed Outside of Normal Facility Hours
☐ Other – Describe: Home owner will be Home

Scope of Work (Check All That Apply)

☐ ≥3 sf or ≥3 lf
☐ >100 sf or ≥260 sf
☐ Renovation
☐ Demolition

Location of Asbestos-Containing Material (ACM)

LOCATION TO BE ABATED

In Facility

(13)

Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12)

Yes
No
N/A

Description of Asbestos Containing Material (ACM)
(i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)

Amount
550 SF

(Specify SF or LF)

Abatement Type
x

End Cap
x

End Seal

End Seal

Kitchen & Dinning Room
Floor tile

Full Containment with Negative Pressure
Mini-Enclosure
Glovebag Procedure
Non-Exempted (*) and Non-Friable Procedure

Name of Registered Waste Hauler
United Containers

NJDEP Waste Hauler ID No.
22459

Cubic Yards of Waste
3

Name of Registered Landfill
G.R.O.W.S.

City, State
Elm NJ

Disposal Date
6/5/14

City, State
Morrison PA 19067

Completed by
Anthony T Perna

Title
President

Signature

Date
6/2/14

* Do not use this form for asbestos license exempted activities.
# State of New Jersey
**NOTIFICATION OF ASBESTOS ABATEMENT**
(Pursuant to NJAC 8:50 and 12-120)

## Date of Notification (1)
5/30/14

## Name of Building Owner/Operator (2)
Jane Boone Private Home

### Agencies Notified
- [X] EPA
- [X] DEP
- [ ] DOL
- [X] DOH
- [ ] DCA

### Type Notification
- [ ] Initial
- [X] Amended
- [X] Amendment # [ ]
- [X] Emergency (including justification)
- [ ] Cancellation

## Street Address
45 Charles Blvd

## City, State, Zip Code
Manahawkin NJ 08050

### Name of Contact
Jane

### Telephone Number
908-959-5665

## FACILITY INFORMATION

### Name of Facility Where Abatement is Taking Place (3)
Jane Boone Private Home

### Street Address
45 Charles Blvd

### City (5)
Manahawkin NJ 08050

### Square Feet
1000

### # of Floors
1

### Bldg. Age
35+

### County Code (7) (STATE USE ONLY)

### Current Use (Prior if being demolished)
Home

### Name of Monitoring Firm Hired by Building Owner (5)
N/A

### ASCM No.

### Name of Abatement Contractor (9)
Pernaco Inc.

### Street Address
PO Box 329

### City, State, Zip Code
West Berlin 08091

### Telephone No.
856-753-9800

### License No.
00727

### Start Date (10)
6/2/14

### Scheduled Completion Date (11)
6/4/14

### Name of OSHA Monitor
Same

### Occupancy Status During Abatement (Check Only One)
- [X] Facility Closed/Vacated During Entire Period of Abatement
- [ ] Abatement Performed Outside of Normal Facility Hours
- [ ] Other – Describe:

### Scope of Work (Check All That Apply)
- [X] ≥ 23 sf or ≥ 23 If
- [X] ≥ 160 sf or ≥ 260 If
- [ ] Renovation
- [X] Demolition
- [ ] Full Containment with Negative Pressure
- [ ] Mini-Enclosure
- [ ] Glovebag Procedure
- [ ] Non-Exempted (*) and Non-Friable Procedure

### Location of Asbestos-Containing Material (ACM) TO BE ABATED

#### In Facility (13)

<table>
<thead>
<tr>
<th>Exterior Siding</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>x</td>
</tr>
</tbody>
</table>

### Is Location Normally Used Solely by Maintenance/Custodial Staff? (14)
- [ ] Yes
- [X] No
- [ ] N/A

### Description of Asbestos Containing Material (ACM)
(i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)

### Amount (Specify SF or LF)

### Abatement Type

| Exterior Siding
<table>
<thead>
<tr>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1000SF</td>
</tr>
</tbody>
</table>

## Name of Registered Waste Hauler
United Containers

### NJDEP Waste Hauler ID No.
22459

### Cubic Yards of Waste
3

### Name of Registered Landfill
G.R.O.W.S

### City, State
Morrisville PA 19067

### Disposal Date
6/4/14

### Completed by
Anthony T Perna

### Title
President

### Signature

### Date
5/30/14

---

*Do not use this form for asbestos licensure exempted activities.*
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1): June 2, 2014

Name of Building Owner / Operator (2):
Pat Nickel

Agency Notified:
- DOL
- DOH
- DCA

Type of Notification:
- Initial
- Amended

Street Address:
427 Lincoln Avenue

City, State & Zip Code:
Avon-by-the-Sea, NJ 07717

Name of Contact:
Pat Nickel

Facility Information

Name of Facility Where Abatement is Taking Place (3):
Residence

Street Address:
427 Lincoln Avenue

City (5):
Avon-by-the-Sea

County (6):
Monmouth

County Code (7):
USE ONLY

Name of Monitoring Firm Hired by Building Owner (8):
N/A

ASCM No.:

Type of Facility (4):

- School (K-12)
- Subchapter 8 (Other than K-12)
- Other (i.e., private & commercial buildings, home, etc.)

Square Feet:
1,100

# of Floors:
2

Bldg. Age:
70 years

Current Use (Prior if being demolished):
Residence

Name of Abatement Contractor (9):
Synatech, Inc.

Street Address:
829 Radio Road

City, State & Zip Code:
Little Egg Harbor, NJ 08087

Name of OSHA Monitor:
Synatech, Inc.

Project Manager for Monitoring Firm:

Telephone Number:
609-296-6916

License Number:
00817

Scheduled Start Date (10):
June 12, 2014

Scheduled Completion Date (11):
July 17, 2014

Occupancy Status During Abatement (Check only one):
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Hours
- Other – Describe:

Scope of Work (Check all that apply):
- ≥3 sf or ≥ 50 If
- ≥160 sf or ≥260 If
- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted() and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED:
IN Facility (13)

Is Location Normally Used Solely by Maintenance or Custodial Staff? (12):
Yes

No
N/A

Description of Asbestos-Containing Material (ACM):
(i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)

Amount (Specify SF or LF):
300 SF

Abatement Type:
X

Right Side of Guest House; Lower Roof Area

X

Vermiculite Insulation

Name of Registered Waste Hauler:
Synatech, Inc

NJDEP Waste Hauler ID No.:
27429

Cubic Yards of Waste:
4

Name of Registered Landfill:
Grows Landfill

City, State:
Little Egg Harbor, NJ

Disposal Date:
July 18, 2014

City, State:
Morrisville, PA

Completed By:
Diane Aloia

Title:
Executive Administrator

Signature:
[Signature]

Date:
June 2, 2014

*Do not use this form for asbestos licensure exempted activities.
**State of New Jersey**

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

**Date of Notice: 05/31/14**

<table>
<thead>
<tr>
<th>Agencies Notified</th>
<th>Name of Building Owner / Operator (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>X EPA</td>
<td>Daisy Guerrero</td>
</tr>
<tr>
<td>X DEP</td>
<td></td>
</tr>
<tr>
<td>X DOL</td>
<td></td>
</tr>
<tr>
<td>X DOH</td>
<td></td>
</tr>
<tr>
<td>DCA</td>
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<table>
<thead>
<tr>
<th>Type Notification</th>
<th>Street Address</th>
<th>City, State &amp; Zip Code</th>
<th>Name of Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Notification</td>
<td>746 Clifton Avenue</td>
<td>Newark, NJ 07106</td>
<td>Daisy Guerrero</td>
</tr>
<tr>
<td>Initial Notification</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Amended Notification</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Cancellation</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**FACILITY INFORMATION**

<table>
<thead>
<tr>
<th>Name of Facility Where Abatement is Taking Place (3)</th>
<th>Type of Facility (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residence</td>
<td>School (K-12)</td>
</tr>
<tr>
<td></td>
<td>Subchapter 8 (Other than K-12)</td>
</tr>
<tr>
<td></td>
<td>Other (i.e., private &amp; commercial buildings, homes, etc.)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Square Feet</th>
<th># of Floors</th>
<th>Bldg. Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>2,000</td>
<td>2</td>
<td>80+</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Current Use (Prior if being demolished)</th>
<th>Name of Abatement Contractor (9)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residence</td>
<td>Global Abatement Services, LLC</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>City, State &amp; Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>64 Broad Street</td>
<td>Matawan, NJ 07747</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Project Manager for Monitoring Firm</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tom Geiger</td>
<td>732-290-2217</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Scheduled Start Date (10)</th>
<th>Scheduled Completion Date (11)</th>
</tr>
</thead>
<tbody>
<tr>
<td>6/10/14</td>
<td>6/10/14</td>
</tr>
</tbody>
</table>

**Occupancy Status During Abatement:**
- X Area Isolated During Abatement
- Street Address: 443 Schoolhouse Road
- City, State & Zip Code: Monroe Township, NJ 08831
- Name of OSHA Monitor: Global Abatement Services, LLC
- Street Address: 443 Schoolhouse Road
- City, State & Zip Code: Monroe Township, NJ 08831

<table>
<thead>
<tr>
<th>Scope of Work (Check all that apply)</th>
<th>Full Containment with Negative Pressure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Demolition</td>
<td>Mini-Enclosure</td>
</tr>
<tr>
<td>Renovation</td>
<td>X Glovebag Procedure</td>
</tr>
<tr>
<td>Large Project</td>
<td>Other: Non-friable</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility</th>
<th>Is Location Normally Used Solely by Maintenance or Custodial Staff?</th>
<th>Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT or other miscellaneous)</th>
<th>Amount (Specify Square Feet or Linear Feet)</th>
<th>Abatement Type (Specify: Removal, Repair, Encapsulation or Enclosure)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basement</td>
<td>N/A</td>
<td>TSI</td>
<td>5 LF</td>
<td>Removal</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Registered Waste Hauler</th>
<th>Cu. Yds. of Waste</th>
<th>Name of Registered Landfill</th>
</tr>
</thead>
<tbody>
<tr>
<td>Freehold Cartage</td>
<td>1</td>
<td>TRRF</td>
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<table>
<thead>
<tr>
<th>City, State</th>
<th>Disposal Date</th>
<th>City, State</th>
</tr>
</thead>
<tbody>
<tr>
<td>Freehold, NJ</td>
<td>6/11/14</td>
<td>Tullytown, PA</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Completed By (Print or Type)</th>
<th>Title</th>
<th>Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dominick Tringali</td>
<td>Project Manager</td>
<td>Dominick Tringali</td>
</tr>
</tbody>
</table>

| ASB-41 JUN 95 G4667          | Date | |
|------------------------------|------||
| 5/31/14                      |      | |
**NOTIFICATION OF ASBESTOS ABATEMENT**
(Pursuant to NJAC 8:60-7 and 12:120-7)

<table>
<thead>
<tr>
<th>Date of Notice</th>
<th>05/31/14</th>
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</table>

<table>
<thead>
<tr>
<th>Agencies Notified</th>
<th>Name of Building Owner / Operator</th>
</tr>
</thead>
<tbody>
<tr>
<td>EPA, DEP, DOL, DOH, DCA</td>
<td>Sandra Robinson</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Type Notification</th>
<th>Street Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Notification</td>
<td>52 Richelieu Ave</td>
</tr>
<tr>
<td>Initial Notification</td>
<td>Newark, NJ 07106</td>
</tr>
<tr>
<td>Amended Notification</td>
<td></td>
</tr>
<tr>
<td>Cancellation</td>
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<td>Subchapter 8 (Other than K-12)</td>
</tr>
<tr>
<td></td>
<td>Other (i.e., private &amp; commercial buildings, homes, etc.)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City</th>
<th>County</th>
<th>County Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Newark</td>
<td>Essex</td>
<td>Essex</td>
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</table>

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<tr>
<th>Square Feet</th>
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<tbody>
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<tr>
<th>Current Use (Prior to being demolished)</th>
<th>Name of Abatement Contractor</th>
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<tbody>
<tr>
<td>Residence</td>
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<th>Street Address</th>
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<td>64 Broad Street</td>
<td>Matawan, NJ 07747</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Telephone Number</th>
<th>License Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>732-290-2217</td>
<td>0045</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Project Manager for Monitoring Firm</th>
<th>Telephone Number</th>
<th>License Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tom Geiger</td>
<td>732-605-9062</td>
<td>00714</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Occupancy Status During Abatement</th>
<th>Name of OSHA Monitor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility Closed/Vacated During Entire Period of Abatement Performed Outside of Normal Facility Hours - Describe:</td>
<td>Global Abatement Services, LLC</td>
</tr>
<tr>
<td>X Area Isolated During Abatement</td>
<td></td>
</tr>
<tr>
<td>Other - Describe:</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Scope of Work (Check all that apply)</th>
<th>Full Containment with Negative Pressure</th>
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</thead>
<tbody>
<tr>
<td>Demolition</td>
<td>Mini-Enclosure</td>
</tr>
<tr>
<td>X Renovation</td>
<td>X Glovebag Procedure</td>
</tr>
<tr>
<td>Large Project</td>
<td>Other: Non-friable</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility</th>
<th>Is Location Normally Used Solely by Maintenance or Custodial Staff?</th>
<th>Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAC or other miscellaneous)</th>
<th>Amount (Specify Square Feet or Linear Feet)</th>
<th>Abatement Type (Specify: Removal, Repair, Encapsulation or Enclosure)</th>
</tr>
</thead>
<tbody>
<tr>
<td>[13]</td>
<td>[12]</td>
<td>[10]</td>
<td>[9]</td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Basement</th>
<th>TSI</th>
<th>15 LF</th>
<th>Removal</th>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Name of Registered Waste Hauler</th>
<th>NJDEP Waste Hauler ID #</th>
<th>Cu. Yds. of Waste</th>
<th>Name of Registered Landfill</th>
</tr>
</thead>
<tbody>
<tr>
<td>Freehold Cartage</td>
<td>18693</td>
<td>1</td>
<td>TRRF</td>
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<table>
<thead>
<tr>
<th>City, State</th>
<th>Disposal Date</th>
<th>Name of Registered Landfill</th>
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<tbody>
<tr>
<td>Freehold, NJ</td>
<td>6/11/14</td>
<td>Tullytown, Pa</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Completed By (Print or Type)</th>
<th>Title</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dominick Tringali</td>
<td>Project Manager</td>
<td>Dominick Tringali</td>
<td>5/31/14</td>
</tr>
</tbody>
</table>

ASB-41 JUN 95 G4867
**State of New Jersey**
**NOTIFICATION OF ASBESTOS ABATEMENT**
(Pursuant to NJAC 8:80 and 12:120)

**Date of Notification (1)** 6-3-14

**Name of Building Owner/Operator (2)**
D. Villace, Construction

**Street Address**
2376 South Ave
Scotch Plains NJ 07076

**City, State, Zip Code**

**Name of Contact**
Don Villace

**FACILITY INFORMATION**

**Name of Facility Where Abatement is Taking Place (3)**
Single Family Dwelling Vacant

**Street Address**
47 Woodbrook Circle

**City (5)**
Westfield NJ 07090

**County (6)**
Union

**Name of Monitoring Firm Hired by Building Owner (8)**
EPC Technologies

**ASCM No.**
N/A

**Name of Abatement Contractor (9)**
EPC Technologies Inc.

**Street Address**
P.O. Box 337

**City, State, Zip Code**
New Egypt, NJ 08533

**Name of OSHA Monitor (11)**
EPC Technologies Inc.

**Street Address**
P.O. Box 337

**City, State, Zip Code**
New Egypt NJ 08533

**Start Date (10)**
6-14-14

**Scheduled Completion Date (11)**
6-14-14

**Occupancy Status During Abatement (Check Only One)**
Facility Closed/ Vacated During Entire Period of Abatement

**Scope of Work (Check All That Apply)**
□ Renovation

**Location of Asbestos-Containing Material (ACM)**

<table>
<thead>
<tr>
<th>Location of ACM</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
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</thead>
<tbody>
<tr>
<td>Kitchen</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Basement</td>
<td></td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Description of ACM (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Floor Tiles 150 SF k</td>
</tr>
<tr>
<td>Floor Tiles 200 SF k</td>
</tr>
</tbody>
</table>

**Amount (Specify SF or LF)**

<table>
<thead>
<tr>
<th>Amount (Specify SF or LF)</th>
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</thead>
<tbody>
<tr>
<td>150 SF k</td>
</tr>
<tr>
<td>200 SF k</td>
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</table>

**Abatement Type**

<table>
<thead>
<tr>
<th>Abatement Type</th>
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</thead>
<tbody>
<tr>
<td>Removal</td>
</tr>
<tr>
<td>Repair</td>
</tr>
<tr>
<td>Encapsulate</td>
</tr>
<tr>
<td>Enclosure</td>
</tr>
</tbody>
</table>

**Name of Registered Waste Hauler**
EPC Technologies

**NJDEP Waste Hauler ID No.**
17000

**Cubic Yards of Waste**
2

**Name of Registered Landfill**
Waste Management of PA

**Disposal Date**
6-14-14

**City, State**
Moonrisville PA

**Completed by**
Steve Schenker

**Title**
President

**Signature**

*Do not use this form for asbestos licensure exempted activities.*
# State of New Jersey
## NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:129)

**Date of Notification (1):** 06/01/2014  
**Name of Building Owner/Operator (2):** Wayne BOE

<table>
<thead>
<tr>
<th>Agencies Notified</th>
<th>Type Notification</th>
<th>Name of Contact</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>EPA</td>
<td>Initial</td>
<td>John De. Maso</td>
<td></td>
</tr>
<tr>
<td>DOH</td>
<td>Amendment #</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DOL</td>
<td>Emergency (including justification)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DEP</td>
<td>Cancellation</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Street Address:** 50 Nellis Drive  
**City, State, Zip Code:** Wayne, NJ 07470

---

## FACILITY INFORMATION

**Name of Facility Where Abatement is Taking Place (3):** High School

**High School:**
- **Street Address:** 50 Nellis Drive  
- **City:** Wayne, NJ  
- **County Code (7):** Passaic Code  
- **Current Use (Prior if being demolished):**

**Type of Facility (4):**
- School (K-12)
- Subchapter 8 (Other than K-12)
- Other (i.e. private & commercial buildings, homes, etc.)

**Square Feet:**

**# of Floors:**

**Bldg. Age:**

---

**Name of Monitoring Firm Hired by Building Owner (8):** RAMM

**Ramm:**
- **Street Address:** 77 Notting Ph Road  
- **City, State, Zip Code:** Fair Lawn

**Project Manager for Monitoring Firm:** Rodger Headrick
- **Telephone No.:** (201) 475-9880

**Start Date (10):** 06/13/2014  
**Scheduled Completion Date (11):** 06/15/2014

**Name of Abatement Contractor (9):** Nick Restoration LLC

**Street Address:** 72 Brookside Rd  
**City, State, Zip Code:** Randolph NJ 07869

**Telephone No.:** 973-933-2550  
**License No.:** 01133

**Name of OSHA Monitor:** J&S Environmental

**Street Address:** 2333 RT 22  
**City, State, Zip Code:** Union, NJ 07083

---

**Occupancy Status During Abatement (Check Only One):**
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours
- Other – Describe: 3pm-11pm

**Scope of Work (Check All That Apply):**
- [X] 23 sf or 23 sq ft  
- [ ] >160 sf or >260 sq ft
- [ ] Renovation
- [X] Demolition
- [X] Full Containment with Negative Pressure
- [ ] Mini-Enclosure
- [ ] Glovebag Procedure
- [ ] Non-Exempted (*) and Non-Friable Procedure

**Location of Asbestos-Containing Material (ACM) TO BE ABBATED:**  
**In Facility (13):**

- **Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12):**
  - Yes
  - No
  - N/A

**Description of Asbestos-Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous):** TSI wrap & cure

**Amount (Specify SF or LF):** 30 LF

**Abatement Type:**
- [X] Removal
  - [ ] Repair
  - [ ] Encapsulate
  - [ ] Endorse

---

**Name of Registered Waste Hauler:** NJDEP Waste Hauler ID No. 0033782

**Cubic Yards of Waste:** TBD  
**Name of Registered Landfill:** G.R.O.W.S

**City, State:** Randolph, NJ 07869  
**Disposal Date:** TBD  
**City:** Tullytown, PA  
**Date:** TBD

---

**Completed by:**
- [ ] Elvira Mrsa
  - **Title:** President
  - **Signature:**

**Date:** 06/01/2014
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60-7 and 12:120-7)

Date of Notification: 05/13/14

Name of Building Owner/Operator: Newark Public Schools

Street Address: 2 Cedar Street

City, State, Zip Code: Newark, NJ 07102

Name of Contact: Douglas Bland, Bus. Admin.

Telephone Number: 

Name of Facility Where Abatement is Taking Place:

Chancellor Avenue School

321 Chancellor Avenue

Newark, NJ 07112

County (5): Essex

CITY: Newark

Name of Monitoring Firm Hired by Building Owner:

TTI Environmental, Inc.

Address: 1253 North Church Street

City, State, Zip Code: Clifton, NJ 07013

Name of Abatement Contractor:

Four Strong Builders, Inc.

Street Address: 180 Sargeant Avenue

City, State, Zip Code: Clifton, NJ 07013

License Number: 097-614-0377

Project Manager for Monitoring Firm:

Jim Guiliardi

Phone Number: 856-840-8800

Scheduled Start Date: 06/13/14

Scheduled Completion Date: 06/13/14

Occupancy Status During Abatement:

Facility Closed/Vacated During Entire Period of Abatement

Abatement Performed Outside of Normal Facility Hours:

Other: 

Scope of Work:

[ ] Demolition

[ ] 3200 sq ft of 33 sf

[ ] 1600 sq ft of 1600 sf

[X] Renovation

[X] Full Containment with Negative Pressure

[X] Mini-Enclosure

[X] Glovebag Procedure

[X] Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED:

RM UN-14; RM UN-15; RM 001 & RM 003

Location Normally Used:

Pipe Insulation

Location Normally Used:

Material (ACM) (i.e., thermal systems, surfacing, V.A.T., or other miscellaneous):

Amount (Specify SF or LF):

Abatement Type:

REM P 275 LF 7/14

Name of Registered Waste Hauler:

Four Strong Builders, Inc.

Waste Hauler ID No.:

12609

Cubic Yards of Waste:

Name of Registered Landfill:

Tullytown, PA

Disposal Date:

5/30/14

Bilyana Kulakovska

Office Administrator

ASB-11

JUN 95

Signature:

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

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>6/2/14</th>
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<td>Agencies Notified</td>
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<tr>
<td>EPA</td>
<td>Initial</td>
</tr>
<tr>
<td>DEP</td>
<td>Amended</td>
</tr>
<tr>
<td>DOH</td>
<td>Amendment</td>
</tr>
<tr>
<td>DCA</td>
<td>Cancellation</td>
</tr>
<tr>
<td>Name of Building Owner/Operator (2)</td>
<td>National Park Board Of Education</td>
</tr>
<tr>
<td>Street Address</td>
<td>775 Tanyard Road</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Woodbury Heights NJ 08097</td>
</tr>
<tr>
<td>Name of Contact</td>
<td>Donna Contrevo</td>
</tr>
<tr>
<td>Telephone Number</td>
<td></td>
</tr>
</tbody>
</table>

**FACILITY INFORMATION**

| Name of Facility Where Abatement is Taking Place (3) | National Park Elementary School |
| City (5)                                             | 516 Lakehurst Ave. |
| National Park NJ 08063                               |        |
| County (6)                                           | Gloucester |
| Name of Monitoring Firm Hired by Building Owner (8) | Horizon Environmental Group, Inc. |
| ASCM No.                                             | 00073   |
| Name of Abatement Contractor (9)                    | Pernico Inc. |
| Street Address                                      | PO Box 316 |
| City, State, Zip Code                               | Thorofare NJ 08086 |
| Project Manager for Monitoring Firm                 | Steve Flanigan |
| Telephone No.                                       | 856-848-0800 |
| Start Date (10)                                     | 6/20/14 |
| Scheduled Completion Date (11)                      | 6/22/14 |
| Occupancy Status During Abatement (Check Only One)  |        |
| Facility Closed/Vacated During Entire Period of Abatement |        |
| Abatement Performed Outside of Normal Facility Hours |        |
| Other – Describe: After 3 PM Friday and Week End and Work |        |

**Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)**

<table>
<thead>
<tr>
<th>Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
<th>Amount (Specify SF or LF)</th>
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<tbody>
<tr>
<td>1955 section Girls bathroom</td>
<td>Pipe insulation 20 LF</td>
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<tr>
<td>1955 Section Faculty bathroom</td>
<td>Pipe Insulation 10 LF</td>
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**Name of Registered Waste Hauler**

<table>
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<th>Name of Registered Waste Hauler</th>
<th>United Containers</th>
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<tbody>
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<td>22459</td>
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<td>Cubic Yards of Waste</td>
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**Name of Registered Landfill**

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<th>G.R.O.W.S.</th>
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**Disposal Date**

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**City, State**

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<th>Elm NJ</th>
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**City**

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<tr>
<th>Morrisville PA 19067</th>
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**Completed by**

<table>
<thead>
<tr>
<th>Anthony T Perna</th>
</tr>
</thead>
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**Title**

<table>
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<th>President</th>
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</table>

**Signature**

<p>| |</p>
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**Date**

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<thead>
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</table>

*Do not use this form for asbestos licensure exempted activities.*
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1) 06 / 02 / 14

Name of Building Owner/Operator (2) Debbie Post

Agencies Notified

- EPA
- DOLWD
- DHSS
- DCA (NJAC 5:23-8)

Type Notification

- Initial
- Amended
- Amendment # 1
- Emergency (including justification)
- Cancellation

Street Address

14 Millstone Drive

City, State, Zip Code

Livingston, NJ 07039

Name of Contact Debbie Post

Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)

Private home

14 Millstone Drive

City (5)

Livingston, NJ 07039

County (6)

Essex

County Code (7) (STATE USE ONLY)

Current Use (Prior if being demolished)

Type of Facility (4)

- School (K-12)
- Subchapter 8 (Other than K-12)
- Other (i.e., private and commercial buildings, homes, etc.)

Square Feet # of Floors Blgd. Age

Name of Monitoring Firm Hired by Building Owner (8)

ASCM No.

Gr Tech LLC

Name of Abatement Contractor (9)

Street Address

576 Valley Rd #283

City, State, Zip Code

Wayne, NJ 07470

Telephone No.

797-638-1777

License No.

01127

Name of OSHA Monitor

Envirosystems Consultants, Inc

Street Address

20-21 Wagawor Road, Bldg. # 34A

City, State, Zip Code

Fair Lawn, NJ 07410

Start Date (10) 06 / 02 / 14

Scheduled Completion Date (11) 06 / 03 / 14

Scope of Work (Check all that apply)

- > 3 sf or > 31 ft
- 150 sf or > 250 ft
- Renovation
- Demolition

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (12)

Is Location Normally Used Solely by Maintenance/Custodial Staff? (13)

Yes No N/A

Name of Registered Waste Hauler Gr Tech LLC

NJDEF Waste Hauler ID No. 0033785

Cubic Yards of Waste TBD

Name of Registered Landfill T.R.R.F. Inc

Disposal Date TBD

City, State

Wayne, NJ 07470

Completed By (Print or Type) N. Jevtic

Title Owner

AS-41

MAY 11

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

Signature

Date 06/02/2014
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60-7 and 12:120-7)

Date of Notification (1)
5-27-14

Agencies Notified
[X] EPA
[X] DOL
[X] DOH
[X] DCA

Type Notification
[X] Initial Notification
[ ] Amended Notification
[ ] Emergency
[ ] Cancellation

Name of Building Owner/Operator (2)
Keth Schillari

Street Address
53 Elm Street

City, State, Zip Code
North Arlington, NJ, 07031

Name of Contact
Keth Schillari

Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
Same as above

City
County
County Code
1500

Name of Monitoring Firm hired by Building Owner (8)
N/A

ASCN No.

Name of Abatement Contractor (9)
AZTECH MANAGEMENT, Inc.

Street Address
86 Christopher St.

City, State, Zip Code
Montclair, NJ 07042

License Number
00371

Square Feet
# of Floors
Bldg. Age
1500
2
65

Current Use (Prior if being demolished)

Project Manager for Monitoring Firm
N/A

Telephone Number
(973) 744-8800

Name of OSHA Monitor
N/A

Occupancy Status During Abatement (Check only one)
[X] Facility Closed/Vacated During Entire Period of Abatement

[X] Abatement Performed Outside of Normal Facility Hours - Describe: Off Hours

\[other\] - Describe: Other Occupancy

Scope of Work (Check all that apply)
[X] Location of Asbestos-Containing Material (ACM) TO BE ABATED

[X] Renovation

[X] Demolition

Description of Asbestos-Containing Material (ACM)
(i.e., thermal systems insulation, surfacing, VLT, or other miscellaneous)

Amount
(Specify SF or LF)

Abatement Type

Location Normally Used Solely By Maintenance/Custodial Staff

Yes
No
N/A

Location

Basement

Pipe Insulation

120 LF

[X] Full Containment with Negative Pressure

[X] Mini-Enclosure

[X] Glovebag Procedure

[X] Non-Friable Procedure

Name of Registered Waste Hauler
AZTECH MANAGEMENT, INC.

Waste Hauler ID No.
17040

Cubic Yards
1.5

Name of Registered Landfill
G.R.O.W.S.

City, State
Montclair, NJ 07042

Disposal Date
6-16-14

City, State
Morrisville, PA 19067

Completed By (Print or Type)
Constantine Vivian

Title
President

Signature

Date
5-27-14
State of NJ  
Notification of Asbestos Abatement  
(Pursuant to NJAC 8:60-7 and 12:120-7)

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>Name of Building Owner/Operator (2)</th>
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</thead>
<tbody>
<tr>
<td>06/14/2014</td>
<td>Church of Sacred Heart</td>
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</table>

<table>
<thead>
<tr>
<th>Agencies Notified</th>
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<th>Name of Contact</th>
</tr>
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<tbody>
<tr>
<td>EPA</td>
<td>Initial Amendment</td>
<td>Chris Tomlan</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>FACILITY INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of facility where abatement is taking place (3)</td>
</tr>
<tr>
<td>Main School North Side of the Building</td>
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<table>
<thead>
<tr>
<th>Street Address</th>
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<tbody>
<tr>
<td>1060-1066 South Orange Avenue</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>City (5)</th>
<th>County (6)</th>
<th>County Code (7) (State use only)</th>
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<tbody>
<tr>
<td>Newark</td>
<td>Essex</td>
<td></td>
</tr>
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<table>
<thead>
<tr>
<th>Name of Monitoring Firm Hired by Bldg. Owner (8)</th>
<th>ASCM No.</th>
</tr>
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<tbody>
<tr>
<td>Whitman Companies</td>
<td>00110</td>
</tr>
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<table>
<thead>
<tr>
<th>Type of Facility (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>School (K - 12)</td>
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</table>

<table>
<thead>
<tr>
<th>Square Feet</th>
<th># of Floors</th>
<th>Bldg. Age</th>
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<tbody>
<tr>
<td>16,000 sf</td>
<td>03</td>
<td>50</td>
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<table>
<thead>
<tr>
<th>Name of Abatement Contractor (9)</th>
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</thead>
<tbody>
<tr>
<td>Paragon Contracting, Inc.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>590 River Rd.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>City, State, Zip Code</th>
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<tbody>
<tr>
<td>Clifton, NJ 07014</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Telephone Number</th>
<th>License Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>(973) 614-1600</td>
<td>00748</td>
</tr>
</tbody>
</table>

Name of OSHA Monitor: Paragon Contracting, Inc.

<table>
<thead>
<tr>
<th>Phone Number</th>
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<tbody>
<tr>
<td>732-390-5858</td>
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<table>
<thead>
<tr>
<th>Name of Site Manager</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kevin Lovely</td>
</tr>
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<table>
<thead>
<tr>
<th>Scheduled Start Date (10)</th>
<th>Sched. Completion Date (11)</th>
</tr>
</thead>
<tbody>
<tr>
<td>06/13/2014</td>
<td>06/18/2014</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Occupancy Status During Abatement (Check only one)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility closed/vacated during entire period of abatement.</td>
</tr>
<tr>
<td>Abatement performed outside of normal facility hours:</td>
</tr>
<tr>
<td>Describe: After 5:00 PM</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Scope of Work (check all that apply)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Demolition</td>
</tr>
<tr>
<td>□</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Location of asbestos-containing material to be abated in facility (13)</th>
</tr>
</thead>
<tbody>
<tr>
<td>North Side Lower Stair well</td>
</tr>
<tr>
<td>North Side Lower Stair well</td>
</tr>
<tr>
<td>North Side Lower Stair well</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Registered Waste Hauler</th>
</tr>
</thead>
<tbody>
<tr>
<td>Paragon Contracting, Inc.</td>
</tr>
<tr>
<td>NUDEP Hauler ID# 22161</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Cubic Yards of Waste</th>
<th>Name of Registered Landfill</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 cyds</td>
<td>Tullytown/GROWS</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City, State</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clifton, NJ 07014</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Disposal Date</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>TBD</td>
<td>06/02/2014</td>
</tr>
</tbody>
</table>

Completed by (Print or Type) Goran Lazevski  
Title: President  
Signature:  
Date: 06/02/2014
STATE OF NEW JERSEY
NOTIFICATION OF ASBESTOS ABATEMENT
(PURSUANT TO NJAC 8:60-7 AND 12:120-7)

Date of Notification (1)
05 / 03 / 14

Name of Building Owner / Operator (2)
VERIZON

Agencies Notified
☐ EPA
☐ DOH
☐ DOL

Type of Notification
☐ Initial
☐ Amended
☐ Amendment #
☐ Emergency w/justification
☐ Cancellation

City, State, Zip Code
Edison, NJ

Name of Contact
ALEX BAYLOR

Street Address
1883 Lincoln Ave

Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement Is Taking Place (3)
Verizon

County Code (7)
Middlesex

Square Feet
40,000

Type of Facility (4)
☐ School (K-12)
☐ Subchapter 8 (Other than K-12)
☐ Other (i.e., private & commercial bldgs., homes, etc.)

City (5)
Edison

# of Floors
2

Building Age
40+

County (6)

New Jersey

Current Use (Prior if being demolished)

Name of Monitoring Firm Hired by Bldg. Owner (8)
USA Environmental Management Inc.

ASCM NO

Name of Abatement Contractor (9)
LVI DEMOLITION SERVICES INC

Street Address
6436 Enterprise Avenue

City, State, Zip Code
Philadelphia, PA 19153

Telephone Number
215-365-5810

EAST HANOVER, NJ 07936

Project Mgr. For Monitoring Firm
MARK JENKINS

License Number
860

Scheduled Start Date (10)
06 / 17 / 14

Telephone Number
973-772-3660

Sched. Completion Date (11)
06 / 30 / 14

Name of OSHA Monitor
LVI DEMOLITION SERVICES INC

Occupancy Status During Abatement (Check Only 1)
☐ Facility Closed/Vacated During Entire Period of
☐ Abatement
☐ Abatement Performed Outside of Normal Facility
☐ Hours - Describe: 6:00PM-1:30 AM MON-FRI

Scope of Work (Check All That Apply)
☐ Demolition
☐ >3sf or >3lf
☐ ≥160 sf or ≥260 lf
☐ Renovation
☐ Full Containment with Negative Pressure
☐ Mini - Enclosure
☐ Glovebag Procedure
☐ Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos Containing
Material (ACM) TO BE ABATED

Is Location Normally Used Solely by Maintenance/ Custodial Staff (12)

Description of Asbestos - Containing Material (ACM)
(i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

Amount (Specify SF or LF)

Abatement Type

Location of Asbestos Containing Material (ACM)
TO BE ABATED

BASEMENT BOILER ROOM
YES NO N/A

BREACHING

100 SF

REMOVAL

BASEMENT BOILER ROOM

BOILER ROPE

9 SF

REPAIR

BASEMENT BOILER ROOM

PIPE

100 LF

ENCAPSULATION

BASEMENT BOILER ROOM

VIBRATION CLOTH

4 SF

NON-FRIABLE ( )

Name of Registered Waste Hauler
NEWARK CARTING

NJ DEP Waste Hauler ID No. 4509

Cubic Yards of Waste

Name of Registered Landfill GROWS

City, State
NEWARK, NJ

Disposal Date

City, State
MORRISVILLE, PA

Completed by (Print or Type)
STEVEN STILES

Title
PROJECT MANAGER

Signature

Date
06/03/14

ASB-41
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1)
05/26/14

Name of Building Owner/Operator (2)
Archdiocese of Newark

Agencies Notified

[x] EPA
[ ] DEP
[ ] DOL
[ ] DOH
[ ] DCA

Type Notification
[ ] Initial
[ ] Amended
[ ] Amendment #
[ ] Emergency (including justification)
[ ] Cancellation

Street Address
171 Clifton Ave.
City, State, Zip Code
Newark, NJ 07104

Name of Contact
Tom McCue
Telephone Number

Name of Facility Where Abatement Is Taking Place (3)
Queen of Angels School

Street Address
44 Irvine Turner Blvd.

City (5)
Newark

County (6)
Essex

Type of Facility (4)
[ ] School (K-12)
[ ] Subchapter 8 (Other than K-12)
[ ] Other (i.e. private & commercial buildings, homes, etc.)

Square Feet
30,000

# of Floors
3

Bldg. Age
50+

Current Use (Prior if being demolished)
School

Name of Monitoring Firm Hired by Building Owner (5)
N/A

ASCM No.

Name of Abatement Contractor (9)
Lesco Services Inc.

Street Address
156 Maple Ave.

City, State, Zip Code
Wallingford, NJ 07057

Project Manager for Monitoring Firm

Telephone No.
973-406-7341

License No.
01107

Start Date (10)
06/09/14

Scheduled Completion Date (11)
06/22/14

Name of OSHA Monitor
Leslaw Nalodka

Occupancy Status During Abatement (Check Only One)

[x] Facility Closed/Vacated During Entire Period of Abatement
[ ] Abatement Performed Outside of Normal Facility Hours
[ ] Other – Describe:

Scope of Work (Check All That Apply)

[ ] ≥ 3 sf or ≥ 33 ft²
[ ] ≥ 160 sf or ≥ 280 ft²
[ ] Renovation
[ ] Demolition
[ ] Full Containment with Negative Pressure
[ ] Mini-Enclosure
[ ] Glovebag Procedure
[ ] Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM)

TO BE ABATED
In Facility

Location Normally Used Solely by Maintenance/Custodial Staff? (12)

Yes No N/A

boiler room

boiler insulation

420sf.

[x]

cafeteria

pipe insulation

35lf.

[x]

roof

roofing material

982sf.

[x]

[x]

[x]

Name of Registered Waste Hauler
Newark Carting Inc.

NJDEP Waste Hauler ID No.
05409

Cubic Yards of Waste
150

Name of Registered Landfill
G.R.O.W.S

City, State
Wallingford, NJ

Disposal Date
06/23/14

City, State
Morrisville, PA

Name of Registered Landfill

Completed by
Leslaw Nalodka

Title
President

Signature

Date
05/26/14

* Do not use this form for asbestos licensure exempted activities.
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 5:66 and 12:120)

Date of Notification (1) 6/2/14
Name of Building Owner/Operator (2) MARGARET INSOLERA

Agencies Notified
- EPA
- DEP
- DOL
- DOH
- DCA

Type Notification
- Initial
- Amended
- Amendment #
- Emergency (including justification)
- Cancellation

Street Address
85 OZONE AVE.

City, State, Zip Code
CEDAR GROVE, NJ, 07009

Name of Contact
MICHAEL HAAG
Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
INSOLERA

Street Address
85 OZONE AVE

City (5)
CEDAR GROVE

County (6)
ESSEX

Square Feet
1650

# of Floors
2

Bldg. Age
60

Current Use (Prior if being demolished)
RES.

Name of Monitoring Firm Hired by Building Owner (8)
A & W Environmental

Name of Abatement Contractor (9)
A. Mac Contracting Inc.

Street Address
105 Lowell Road

City, State, Zip Code
Glen Rock, N.J. 07452

Project Manager for Monitoring Firm
Telephone No.
201-262-5841

License No.
001956

Start Date (10)
6/3/14

Scheduled Completion Date (11)
6/16/14

Name of OSHA Monitor
Omega Environmental Services Inc.

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)

- 23 sf or <311
- >=100 sf or =250 sf

- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED

<table>
<thead>
<tr>
<th>Location</th>
<th>ACM in Facility</th>
<th>Is Location Normally Used Solely by Maintenance/Custodial Staff?</th>
<th>Description of Asbestos-Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT or other miscellaneous)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basement</td>
<td>X</td>
<td>No</td>
<td>VAT</td>
<td>322.55</td>
<td>Removal</td>
</tr>
</tbody>
</table>

Name of Registered Hauler
Rovic Transport

NJDEP Waste Hauler ID No.
20785

Cubic Yards of Waste
1

Name of Registered Landfill
IESI PA Bethlehem Landfill Corp.

City, State
Bethlehem, PA, 18015

Disposal Date
6/2/14

Completed by
R. McDonald
Title
President

Signature

Date 6/2/14

* Do not use this form for asbestos licensure exempted activities.
State of NJ
Notification of Asbestos Abatement
(Pursuant to NJAC 8:60-7 and 12:120-7)

Date of Notification (1)
06/14/2014

Name of Building Owner/Operator (2)
Faisal Jamal

Street Address
2 Pittsfield Court

City, State, Zip Code
Livingston, NJ 07039

Name of Contact
Faisal Jamal

FACILITY INFORMATION

Name of facility where abatement is taking place (3)
Faisal Jamal

Type of Facility (4)

Other (Private/Commercial Bldgs./Homes, etc.)

Square Feet

# of Floors

Bldg. Age

occupancy Status During Abatement (Check only one)
Facility closed/vacated during entire period of abatement.
Abatement performed outside of normal facility hours.

Description:

Other-Describe:

Scope of Work (check all that apply)
Demolition

>3 sf or >3 ft

160 sf or >260 ft

Removal

Full Containment w/ negative pressure

Glovebag procedure

Mini-enclosure

Non-removable procedure

License Number

0378

Name of Abatement Contractor (9)
B & G Restoration, Inc.

Street Address
105 Ryerson Road

City, State, Zip Code
Lincoln Park, NJ 07035

Name of OSHA Monitor
B & G Restoration, Inc.

Street Address
105 Ryerson Road

City, State, Zip Code
Lincoln Park, NJ 07035

Location of asbestos-containing material to be abated in facility (13)

Location normally used solely by maintenance/custodial staff (12)

Description of asbestos-containing material (ACM)

Amount (Specify SF or LF)

Removal

Encapsulation

Enclosure

Registered Waste Hauler
B & G Restoration, Inc.

NJDEP Hauler ID# 19563

Cubic Yards of Waste

1

Name of Registered Landfill
Tulltown Resource & Recovery Center

City, State
Lincoln Park, NJ 07035

Disposal Date
06/16/2014

Completed by (Print or Type)
Gordana Luna

Title
Secretary/Treasurer

Signature
Gordana Luna

Date
06/02/2014
State of NJ  
Notification of Asbestos Abatement  
(Pursuant to NJAC 8:60-7 and 12:120-7)  
*** SUBCHAPTER 8 ***  
Check # 6664  

Date of Notification (1)  
10/16/11  

Name of Building Owner/Operator (2)  
The Village School  

Agencies Notified  
- EPA  
- DOL  
- DCA  

Type Notification  
- Initial  
- Amendment  
- On hold  
- Cancellation  

Street Address  
100 West Prospect Street  

City, State, Zip Code  
Waldwick, NJ 07463  

Name of Contact  
Marilyn Larkin, Director  

Telephone Number  

FACILITY INFORMATION  

Name of facility where abatement is taking place (3)  
The Village School  

Street Address  
100 West Prospect Street  

City (6)  
Waldwick, NJ 07463  

County (6)  
Bergen  

County Code (7)  
(State use only)  

Type of Facility (4)  
- School (K - 12)  
- Subchapter 8 (Other than K-12)  
- Other (Private/Commercial  
  Bldgs./Homes, etc.)  

Square Feet  
# of Floors  
Bldg. Age  

Current Use (Prior if being demolished)  
residential housing  

Name of Monitoring Firm Hired by Bldg. Owner (8)  
EnviroVision  

ASCM No.  
0079  

Name of Abatement Contractor (9)  
B & G Restoration, Inc.  

Street Address  
105 Ryerson Road  

City, State, Zip Code  
Lincoln Park, NJ 07035  

Telephone Number  
(973)696-6869  

License Number  
00378  

Name of OSHA Monitor  
B & G Restoration, Inc.  

Street Address  
105 Ryerson Road  

City, State, Zip Code  
Lincoln Park, NJ 07035  

Scope of Work (check all that apply)  
- Demolition  
- Renovation  

- Full Containment w/ negative pressure  
- Gloves/Bag procedure  
- Mini-enclosure  
- Non-friable procedure  

Location of asbestos-containing material to be abated in facility (13)  

Location normally used solely by maintenance/custodial staff(12)  

- Yes  
- No  
- N/A  

Description of asbestos-containing material (ACM)  

Amount (Specify SF or LF)  

Removal  
Repair  
Encapsulation  

Old Gymnasium  

Old Gymnasium above  

- ceiling plaster  
- pipe insulation  

- 3100 sf  
- 300 ft  

Registered Waste Hauler  
B & G Restoration, Inc.  

NJDEP Hauler ID#  
19563  

Cubic Yards of Waste  
25 yards  

Name of Registered Landfill  
Tullytown Resource & Recovery Center  
Tullytown, PA  

Disposal Date  
06/18/14 - 07/01/14  

Name of Registered Landfill  
Tullytown Resource & Recovery Center  
Tullytown, PA  

Completed by (Print or Type)  
Gordana Luna  

Title  
Secretary/Treasurer  

Signature  

Date  
06/02/2014
State of NJ  
Notification of Asbestos Abatement  
(Pursuant to NJAC 8:60-7 and 12:120-7)  

Check # 6565  

Date of Notification (1)  

Agencies Notified  
☐ EPA  
☐ DEP  
☒ DOL  
☐ DOH  
☐ DCA  

Type Notification  
☐ Initial  
☐ Amendment  
☐ Cancellation  

Name of Building Owner/Operator (2)  
Betty Jane & Victor Petriccione  

Street Address  
155 Bathurst Avenue  

City, State, Zip Code  
North Arlington, NJ 07031  

Name of Contact  
Betty Jane & Victor Petriccione  

Telephone Number  
2  

FACILITY INFORMATION  

Name of facility where abatement is taking place (3)  
Betty Jane & Victor Petriccione  

Street Address  
155 Bathurst Avenue  

City (5)  
North Arlington  
County (6)  
Bergen  
County Code (7) (State use only)  

Name of Monitoring Firm Hired by Bldg. Owner (8)  
N/A  

ASCM No.  

Name of Abatement Contractor (9)  
B & G Restoration, Inc.  

Street Address  
105 Ryerson Road  

City, State, Zip Code  
Lincoln Park, NJ 07035  

License Number  
0378  

Type of Facility (4)  
☐ School (K - 12)  
☐ Subchapter B (Other than K-12)  
☒ Other (Private/Commercial Bldgs./Homes, etc.)  

Square Feet  

# of Floors  

Bldg. Age  

Current Use (Prior if being demolished)  
Residential  

Occupancy Status During Abatement (Check only one)  
☒ Facility closed/vacated during entire period of abatement.  
☐ Abatement performed outside of normal facility hours—Describe:  
☐ Other—Describe:  

Scope of Work (check all that apply)  
☐ Demolition  
☒ Renovation  
☐ Full Containment Winegative pressure  
☒ Glovebag procedure  
☐ Non-Friable procedure  

Location of asbestos-containing material to be abated in facility (13)  

<table>
<thead>
<tr>
<th>Area</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
<th>Description of asbestos-containing material (ACM)</th>
<th>Amount (Specify SF or LF)</th>
<th>R E M O V E</th>
<th>R E P A I R</th>
<th>E N C A P</th>
<th>E N C L</th>
</tr>
</thead>
<tbody>
<tr>
<td>basement</td>
<td></td>
<td>X</td>
<td></td>
<td>Pipe insulation</td>
<td>40</td>
<td>☒</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Registered Waste Hauler  
B & G Restoration, Inc.  
NJDEP Hauler ID#  
19563  

Cubic Yards of Waste  
1  

Name of Registered Landfill  
Tullytown Resource & Recovery Center  

Disposal Date  
06/13/2014  

City, State  
Lincoln Park, NJ 07035  

Date  
06/02/2014  

Completed by (Print or Type)  
Gordana Luna  
Title  
Secretary/Treasurer  
Signature  

Gordana Luna  
Date  
06/02/2014
State of NJ
Notification of Asbestos Abatement
(Pursuant to NJAC 8:60-7 and 12:120-7)
Check #6563

Date of Notification (1)
10/16/2014

Name of Building Owner/Operator (2)
College Avenue Redevelopment Associates LLC

Street Address
120 Albany Street
City, State, Zip Code
New Brunswick, NJ 08901
Name of Contact
David Christiansen

Agencies Notified

[ ] EPA
[ ] DEP
[ ] DOL
[ ] DOH
[ ] DCA

Type Notification
[ ] Initial

FACILITY INFORMATION

Name of facility where abatement is taking place (3)
Vacant Building
Street Address
8 Bishop Place
City (5)
New Brunswick, NJ 08901
County (6)
Middlesex

Name of Monitoring Firm Hired by Bldg. Owner (8)
The Louis Berger Group, Inc.

Name of Abatement Contractor (9)
B & G Restoration, Inc.

Street Address
105 Ryerson Road
City, State, Zip Code
Lincoln Park, NJ 07035

Square Feet

# of Floors

Bldg. Age

Current Use (Prior if being demolished)
residential housing

Type of Facility (4)
[ ] School (K - 12)
[ ] Subchapter 8 (Other than K-12)
[ ] Other (Private/Commercial Bidgs/Homes, etc.)

Name of Monitoring Manager for Monitoring Firm
Craig Napolitano
Phone Number
973-407-1000

Scheduled Start Date (10)
06/16/2014

Occupancy Status During Abatement (Check only one):
[ ] Facility closed/Vacated during entire period of abatement.
[ ] Abatement performed outside of normal facility hours.
Describe:

Other-Describe:

Scope of Work (check all that apply)
[ ] Demolition
[ ] Renovation
[ ] Full Containment w/negative pressure
[ ] Glovebag procedure
[ ] >3 sf or >3 If
[ ] 250 sf or >250 If
[ ] Mini-enclosure
[ ] Non-frangible procedure

Location of asbestos-containing material to be abated in facility (13)

Is location normally used solely by maintenance/custodial staff? (12)

[ ] Yes
[ ] No
[ ] N/A

Description of asbestos-containing material (ACM)

Amount (Specify SF or LF)

Removal

Repair

Encapsulation

Name of Registered Landfill
Tullytown Resource & Recovery Center

City, State
Lincoln Park, NJ

Disposal Date
06/18/14 - 07/01/14

Registered Waste Hauler
B & G Restoration, Inc.
NJDEP Hauler ID#
19563

Cubic Yards of Waste
5 yards

Name of Registered Landfill
Tullytown Resource & Recovery Center

City, State
Lincoln Park, NJ

Completed by (Print or Type)
Gordana Luna
Title
Secretary/Treasurer
Date
06/02/2014
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1) 6 / 02 / 14

Name of Building Owner/Operator (2) Plainfield YMVA

Agencies Notified
☐ EPA
☐ DOLWD
☐ DHSS
☐ DCA (NJAC 5:23-8)

Type Notification
☐ initial
☐ Amended
☐ Amendment #
☐ Emergency (including justification)
☐ Cancellation

Street Address
518 Watchung Avenue

City, State, Zip Code
Plainfield, NJ 07060

Name of Contact
Revenell Williams

Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
Plainfield YMCA

Type of Facility (4)
☐ School (K-12)
☐ Subchapter 8 (Other than K-12)
☐ Other (i.e., private and commercial buildings, homes, etc.)

Street Address
518 Watchung Avenue

City (5)
Plainfield

Square Feet
50,000

County (6)
Middlesex

County Code (7)/STATE USE ONLY
YMCA

Current Use (Prior to being demolished)

County Code (7)/STATE USE ONLY
YMCA

Name of Monitoring Firm Hired by Building Owner (8)
Health & Safety Services, Inc

ASCN No.
00117

Name of Abatement Contractor (9)
Superior Abatement Inc

Street Address
318 12th Street

City, State, Zip Code
Hammonton NJ 08037

Source Code

Project Manager for Monitoring Firm
Jim Proctor

Telephone No.
(609) 704-8850

License No.
00411

Start Date (10)
06 / 12 / 14

Scheduled Completion Date (11)
06 / 13 / 14

Name of OSHA Monitor
Superior Abatement Inc

Street Address
2 Henderson Drive

City, State, Zip Code
West Caldwell, NJ 07006

Scope of Work (Check all that apply)
☐ ≥23 sf or ≥3 If
☐ ≥160 sf or ≥260 If
☐ Renovation
☐ Demolition
☐ Full Containment with Negative Pressure
☐ Mini-Enclosure
☐ Glovebag Procedure
☐ Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM)

IN Facility (13)

Yes No N/A

Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)

Description of Asbestos-Containing Material (ACM)

(i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

Amount
SPECIFY
SF or LF

Abatement Type
Removal Encapsulation

Yes No N/A

Ground Level Storage Room
VAT and Mastic
50 SF
☐ ☐ ☐

Gym
Pipe Insulation
3 LF
☐ ☐ ☐

Name of Registered Waste Hauler Service Transport Group, Inc

NJDEP Waste Hauler ID No.
NJDEF Landfill

Cubic Yards of SW2117 Waste
3

Name of Registered Landfill
Minerva Landfill

City, State
New Castle, DE

Disposal Date
6/13/14

City, State
Waynesburgh, OH

Completed By (Print or Type)
Title
President

Signature

Date
6-2-14

* Do not use this form for asbestos licensure exempted activities.
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)
05 / 4 / 14

Name of Building Owner/Operator (2)
PENNsville SCHOOL DISTRICT

Agencies Notified
☑ EPA
☑ DOLWD
☑ DHSS
☑ DCA
(NJAC 5:23-8)

Type Notification
☑ Initial
☑ Amended
Amendment #
☑ Emergency (including justification)
☑ Cancellation

Street Address
30 CHURCH ROAD

City, State, Zip Code
PENNsville NJ 08070

Name of Contact

Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
PENNsville MEMORIAL HIGH SCHOOL

Street Address
110 SOUTH BROADWAY

City (5)
PENNsville

County (6)
SALEM

County Code (7)(STATE USE ONLY)

Name of Monitoring Firm Hired by Building Owner (8)
HORIZON ENVIRONMENTAL GRP., INC

Name of Abatement Contractor (9)
DELTA/BJDS, INC

Street Address
P.O. Box 316

City, State, Zip Code
WEST DEPTFORD, NJ 08086

Project Manager for Monitoring Firm
David Flanagan

Telephone No.
856 948 0000

License No.
215 322-2900

Name of OSHA Monitor
CRITERION LABS

Street Address
3370 PROGRESS DRIVE

City, State, Zip Code
BENSalem PA 19020

Scope of Work (Check all that apply)
☑ ≥3 sf or ≥3 If
☑ ≥160 sf or ≥260 If

☐ Renovation
☐ Demolition

☐ Full Containment with Negative Pressure
☐ Mini-Enclosure
☐ Glovebag Procedure
☐ Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)

Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)
Yes ☑ No ☑ N/A ☑

Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

Amount
Specify
SF or LF

Abatement Type
Removal ☑ Repair ☑ Encapsulate ☑ Enclosure ☑

CRAWL SPACE
☐ ☑ ☑ PIPE FITTINGS (CUT AND WRAP) 180LF ☑ ☑ ☑ ☑

STORM WATER CRAWL SPACE
☐ ☑ ☑ (31)SECTIONS OF 16SF FL TILE 496 ☑ ☑ ☑ ☑

Name of Registered Waste Hauler
SERVICE TRANSPORT GROUP INC

Cubic Yards of Waste
CUBIC YARDS

Name of Registered Landfill
MINERVIA LANDFILL

City, State
WAYNESBURG, OH 44688

Disposal Date

Completed By (Print or Type)
DAMIAN LAVELLE

Title
PROJECT MGR.

Signature

Date 6/4/14

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