1303-4614 Check #5307

Date of Notification	6/3/13							Owner / Operator Sewerage Con		sioners	***	<		6	j.
Agencies Notified EPA	Type Notific	ation		Stree	et A	ddre							V.		6,
DEP		al					Zip C						U	la-	
DOL	W	ended #					J 071							4	
☑ DOH	☐ Eme	ergency					ntact				T	elepho	ne N	umb	er
DCA		cellation		Anth	ion	y									
				FΑ	CII	LITY	/ INF	ORMATION	-						
Name of Facility W	here Abatem	ent is Taking P	lace (3					Type of Facili	ity (4)						
<b>PVSC Plant Wid</b>		3		•				School (I							
Street Address		4						Subchap	ter 8 (	Other than K-	-12)				
600 Wilson Aver	nue									ate & comme	rcial building	s, hom	es, e	tc.)	10
								Square Feet		# of Floors	BI	dg. Ag	е		
City (5)		County (6)	Co	unty	Co	de (	7)								
Newark		Essex						Current Use (	(Prior	if being demo	lished)				
							-	Plant							
Name of Monitoring Briggs Associat		by Building Ow	ner (8)		1	ASC	M No.	Name of Abar AbateTech,		t Contractor (	(9)	VANKS - TS		45-55000-0	
Street Address					-10-200	0		Street Addres	SS						
3 Crosswicks St	1301700011000							PO Box 25							
City, State & Zip C								City, State &							
Bordentown, NJ		_	T= 1		. N.	1-		Lumberton,			License No	ımhar			
Project Manager for Michael Hoodak	_	Firm	Telep				er	Telephone No 609-265-210			Licerise ivi	0052	g		
Scheduled Start Da		Scheduled Co	DECISION I	147157 1534151				Name of OSH		nitor		0002			
6/17/1:	200 (2) (2)	ocheduled Col	6/24		aic	(11)		EMSL Analy							
Occupancy Status		ement (Check o	nly on	e)			30 - 10 W II.	Street Addres							
Facility Clo	sed/Vacated	During Entire F	Period	of Ab	oate	emer	nt	108 Haddor	n Ave						
Abatement	Performed C	Outside of Norm	al Ho	urs –	7.0			City, State &	Zip Co	ode					
Describe:								Westmont,	NJ 0	8108					
- Comment	cupied During				2001			1							
Scope of Work (Ch	neck all that a	ipply)								Full Contain	mant with Ni	antivo	Dros	ouro	
N >0 -6>0	ır			Do		ıotio	n		H	Full Contain Mini-Enclose		gauve	ries	suie	ł
≥3 sf or ≥3			X			/atio litior			$\forall$	Glove Bag F		Cut &	Wra	n	
≥160 sf ≥26	50 II			De	1110	IIIIOI	1		Ħ	Non-Exempt					ıre
1	ocation of		le	Loca	ation	1		Description	Name of the last		Amount				
	stos-Containi	ng	Norr			877		Asbestos-Con			(Specify				71-
	iterial (ACM)	J	S	olely	by			Material (A			SF or LF)			ш	
	BE ABATED		Main			100000000000000000000000000000000000000		(i.e., thermal s				Ren	굕	าса	nc
	in Facility (13)		Cust	odiai (12)		an?		insulation, surfactor or other miscell				Remova	Repair	Encapsulate	Enclosure
	(13)		Yes	No		N/A		or other missen	anooc	.5,		<u>n</u>	,	ate	6
		- na ilie John ee ja o				_									
Old Sludge Pump								Floor tile & I		С	450 SF		닏	H	닏
Old Sludge Pump			X	Щ				Pipe Fittir	_		39 total	X	H	H	님
Old Sludge Pump	ing Station			Ш		4		Pipe Insula	ation		75 LF		H	H	H
			H	H		닉						ᇤ	H	H	H
			H	H		$\dashv$						ᆛ片	H	H	H
Name of Registere	d Masta Hai	lor	Ш		LIDI		Vaste	Cubic Yards	Nam	ne of Register	ed I andfill				
Name of Registere	u wasie nau	nei		1000			No.	of Waste	IVALI	ie of register	cu Lariaiii				
AbateTech, Inc.						1875		12	TRF	RF Landfill					
City, State Lumberton, NJ	-							Disposal Date 6/24/13		State ytown, PA	1137 - 11A				
Completed By (Prin	nt or Type)			Т	itle			Signature	1		Date				
Gwen Trumbetti	5. 1,760)			1.000		s. C	oord.	\$\frac{1}{\sqrt{\gamma}}	W			6/3/	13		

Date of Notification (1)	4/	13			Set	on Hall P	rep	ner/Operator ( 2813 J	2) UN -6 1 Joh MM	# 1305-4644	Chec	k i	#530	)6	
Agencies Notified  EPA	Type Notifica	ation				Address Northfie			- V AVI	<del>≦ 50 −−</del>					
☑ DOLWD ☑ DHSS	Amended Amendm					State, Zip C			- W. M. Troja	1.		Local			
☑ DCA	☐ Emergen	cy (includ	ding			st Orange	2000	J 07017		1	essa an number visco os				
(NJAC 5:23-8)	justificati  Cancellai					of Contact e Gallo				Telephone N	umber				
					FAG	CILITY IN	FOF	RMATION		-					
Name of Facility Where	Abatement is	Taking Pl	ace (	3)					Type of Facility				-1251		
Seton Hall Prep									School (K-12		′-12\				
Street Address	_								Other (i.e., p	rivate and com		bui	ilding	ıs,	
120 Northfield Av	е.								homes, etc.)			<b>D</b> 1	I A		
City (5) West Orange									Square Feet	# of Floors		BIO	lg. A	ge	
County (6)					Cour	ty Code /7	VCTA	TE USE ONLY)	Current Use (Pr	ior if boing don	acliched	١	-		
Essex					Cour	ity Code (7)	)(STA	TE OSE ONET)	Prep School		IOIISHEU	,			
Name of Monitoring Fir		ding Own	er (8	) [	ASCM	No.			ent Contractor (9)	)					
Omega Environm	ental							AbateTech, I	nc.						
Street Address							100000	eet Address	DO D 05						
280 Huylar Street			TOTAL		5 22			-	e. PO Box 25					77 9	
City, State, Zip Code South Hackensac	L N I 07606						1000	y, State, Zip Co .umberton, N							
Project Manager for Mo	The Control of the Co			Tele	phone	No		ephone No.	10 00040	License No					-
Geiser Fajardo	intoming i min				1-489			09-265-2107		00529	<b>.</b> □				
Start Date (10)	15	Schedule	d Cor				Nar	me of OSHA M	lonitor		-				_
_6_ / _17_	/ _13_	7	1	8	_ / _	13	E	MSL Analyt	ical						
Occupancy Status Duri	ng Abatement (	Check or	ly on	e)			Stre	eet Address	-						
☐ Facility Closed/Vaca							1	08 Haddon	Ave.						
Abatement Performe Time of Abatement:								, State, Zip Co Vestmont, N							
Scope of Work (Check	all that apply)						3								
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			Rend					☐ Mini-Enc	ainment with Ne losure g Procedure mpted (*) and No						
				ocat							1	Aba	atem	ent T	уре
Locatio Asbestos-Containin TO BE AB IN Fac (13)	g Material (ACM <u>BATED</u> cility	"	Jsed Main Custo	tena	ly by		, the	Description of Containing Makermal systems surfacing, VAT, her miscellane	terial (ACM) insulation, or	Amount (Specify SF or LF)	200	Removal	Repair	Encapsulate	Enclosure
D 440		-	es	No	N/A	O-ili	DI			600.65		7	П		
Room 140				$\boxtimes$		Ceiling		Carlo		600 SF		3			
Room 141			-	X		Ceiling				500 SF		-			
Room 143						Ceiling	Plas	ster		500 SF					
		□	] [[					- 12.			L		Ц	Ш	
Name of Registered Wa AbateTech, Inc.	aste Hauler			0.00	JDEP \ auler I[	COLUMN TO A PARTY OF THE PARTY	Cub	oic Yards of ste	Name of Regis						
					18750	)	1:			uiii			5-00-00		
City, State  Lumberton, NJ								posal Date /8/13	City, State Tullytown,	, PA					
Completed By (Print or	Type)	Title			tier et			Signature	1		Date			-	
Gwendolyn Trumb	Sometimes of the second	(2)571/253	ratio	ns (	Coordi	nator		Sì	ut		6	13	3/1	3	

ASB-41 MAY 11

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

Date of Notification (1)  6 / 3 /	13				of Buildin ton Hall F	g Owner/Operator ( Prep 2013	2) } <sub>_}{</sub> <b>/</b> Job	# 1305-4644	Check	#530	)4	
Agencies Notified Type Notifica  ☐ EPA ☐ Initial	ation				Address			# 1305-4644			-	
☑ DOLWD     ☑ Amended       ☑ DHSS     Amendment       ☐ DCA     ☐ Emergence	ent #1	ludin			State, Zip ( st Orang	Code je, NJ 07017	- LH; C	S A			***************************************	
DCA Emergence   Emergence   Emergence   Cancellat	on)	iuuiii	3		of Contac ce Gallo	ct .		Telephone Nur	mber			
				FA	CILITY IN	NFORMATION						
Name of Facility Where Abatement is T Seton Hall Prep Street Address 120 Northfield Ave.	aking	Place	(3)	W	#2		Type of Facility  School (K-12  Subchapter  Other (i.e., p homes, etc.)	2) 8 (Other than K-1 rivate and comm	12) ercial bu	ilding	js,	
City (5) West Orange							Square Feet	# of Floors	Bl	dg. A	ge	
County (6)				Cour	nty Code (7	7)(STATE USE ONLY)	Current Use (Pr	ior if being demo	lished)	2 11192		
Name of Monitoring Firm Hired by Build	ling Ov	wner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
Omega Environmental						AbateTech, li	nc.					
Street Address						Street Address						
280 Huylar Street						30 Maple Ave	. PO Box 25	and the second second				
City, State, Zip Code						City, State, Zip Co						
South Hackensack, NJ 07606						Lumberton, N	IJ 08048					
Project Manager for Monitoring Firm Geiser Fajardo			July College	phone )1-489		Telephone No. 609-265-2107		License No. 00529				
Start Date (10) S				tion Da	te (11) 13	Name of OSHA M EMSL Analyti						
Occupancy Status During Abatement (C  Facility Closed/Vacated During Entire				ment	419.50	Street Address	Ave.	3(4: 202 30)				
Abatement Performed Outside of No Time of Abatement:AM	rmal F	acilit	y Hour	s - Des	cribe AM	City, State, Zip Co Westmont, No	ode			= 10		
Scope of Work (Check all that apply)	/			-		Troounon, I			11 / 92			-
□ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf			novati molitic		/	☐ Mini-Enc ☐ Glovebag	Procedure	gative Pressure n-Friable Proced	lure			
			Locat						Ab	atem	ent T	уре
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	)	Use Ma	Norma ed Sole intena todial ( (12)	ely by nce/ Staff?		Description o estos Containing Ma e., thermal systems i surfacing, VAT, other miscellane	terial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Rm140,232,233,318,319,321,322,3	-	Yes	No 🖂	N/A	Double	Layer Floor tile	& Mastic	7,528 SF				
	-				-	Layer Floor tile 8		2,550 SF				
Rm 228,229,231	-				Single	Layer Floor tile o	k IVIASUC	2,330 31				
									П	П	П	П
Name of Registered Waste Hauler AbateTech, Inc.			N	JDEP V auler II	No.	Cubic Yards of Waste	Name of Regis		10	ш		<u> </u>
City, State Lumberton, NJ				18750		Disposal Date 7/5/13	City, State Tullytown,	PA			28	
Completed By (Print or Type) Gwendolyn Trumbetti	Title Op	erati	ons (	Coordi	nator	Signature	At .		Date (Q)	3/	13	
ASB-41 MAY 11					C. 10	tos licensure exemp	ted activities.					

#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT Check #5305 (Pursuant to <u>N.J.A.C.</u> 8:60 and 12:120)

1305-4646

Date of Notification	(1) 6/3/13	***************************************					Owner / Operato	r (2)		16 -6 -81.	7.			
Agencies Notified	Type Notific	ation			Addr		cioity		4	-6 AM 2				
⊠ EPA	Type Notine	ation					ge Ave.		6.7	"17 2				
DEP		ſ				& Zip C			678	2.1	٠,٢,			
☐ DOL		nded#					NJ 07079			Activity of				
□ DOH		rgency				ntact				() T	elepho	one N	lumb	er
DCA		cellation	L	eon	Vano	deme	leubroeke			100				
				FAC	CILIT	Y INF	ORMATION							
Name of Facility WI				)		B1 - 21 B3 X	Type of Facili							
Seton Hall Unive	rsity- A&S	Hall Steam L	ine				School (I							
Street Address									Other than K					
400 South Orang	je Ave.						Other (i.e						etc.)	
7.5		Io	10			/ <del>/</del> /	Square Feet		# of Floors	F .	dg. Ag			
City (5)		County (6)	Cou	inty C	Code (	(1)	10,000		1 2			90		
South Orange		Essex					Current Use (	(Prior i	t being demo	olisnea)				
N 614 3 4 4	Fire tiles di	D. Ildia - O.	(0)	_	TACC	CM No.	University Name of Aba	4	1 Cambrastan	(0)			_	
Name of Monitoring Omega Environn		by Building Own	ier (8)		ASC	JIVI INO.	AbateTech,			(9) 0 <b>0529</b>				
Street Address	iiciitai						Street Address			00020				
280 Huyler Stree	t						PO Box 25		Aug. 2					
City, State & Zip Co							City, State &							
South Hackensa							Lumberton							
Project Manager for	r Monitoring I	Firm	Telepl			oer	Telephone No			License No				
Geiser Fajardo	. (40)	0 1 1 1 1 0 1	201-4				609-265-210				005	29		
Scheduled Start Da 6/5/13	200000000000000000000000000000000000000	Scheduled Cor	npietioi 6/19/		e (11	)	Name of OSI EMSL Analy							
Occupancy Status I	During Abate	ment (Check o	nly one	)			Street Addres							
Facility Clos	sed/Vacated	During Entire P	eriod o	f Aba	ateme	nt	108 Haddor							
Abatement	Performed O	utside of Norm	al Hou	rs			City, State &							
Describe:							Westmont,	NJ 08	3108					
	upied During							-					-	
Scope of Work (Ch	eck all that a	pply)						П	Full Contain	ment with Ne	native	Pre	eeur	_
☐ ≥3 sf or ≥3	lf.		$\square$	Ren	ovatio	nn	80	H	Mini-Enclos		gauv	, , , ,	Jour	•
≥160 sf ≥26			H		nolitio			Ħ	Glove Bag I					
	, o 11		ш	20				Ħ		ted and Non-	Friabl	e Pro	cedu	ure
L	ocation of		ls L	ocati	ion		Description			Amount				
Asbes	tos-Containir	ng	Norm				Asbestos-Con	taining	1	(Specify	-			
	terial (ACM)			lely b			Material (A			SF or LF)	Z		밀	1
	BE ABATED n Facility		Maint Custo				(i.e., thermal si insulation, surfac				Remova	Repair	àps	Co
	(13)			(12)	Jian :		or other miscell				l val	쁰	Encapsulate	Enclosure
	( /		Yes	No	N/A	1							9	"
Exterior Steam L	ine						Transite P	Pipe		280 LF				
							F .							
							1					Ш		
Name of Registered	d Waste Hau	ler						Nam	e of Register	red Landfill				
AbataTach Inc				На	187	D No.	of Waste	TRR	F Landfill					
AbateTech, Inc.					107	30	Disposal Date	A STATE OF THE STATE OF	State		_		-	_
City, State Lumberton, NJ							6/19/13		ytown, PA					
Completed By (Prin	nt or Type)			Titl	le		Signature	-			Date			
Gwen Trumbe				1 45/03/10/93/1	ffice		(h	1+			6/3/	13		
				Co	ord		/ XII	101						

CKOTY

Date of Notification (1) 6/3/13					Building (					2012				E
Agencies Notified	Type Notification		1	Street A	ddress arletonda	ale Ra	od			2013	<sup>(1)</sup> / <sub>2</sub> -6	191		
EPA DEP DOL	Initial Amended Amendment				te, Zip Coo		3			· · /			Ci,	Î
▼ DOH	Emergency (in justification)	ncluding	- 1		Contact				-	Telenhone N	lumber	J. 17.7	1137	
DCA	Cancellation			Steve						_		13		
Name of Facility Where	Abatement is Taking	Place (3)		FACI	LITY INFO	RMATI	ON	Type	of Facility (4)	-				
E.G. Hewitt School		riace (5)							2.00					
Street Address					***************************************				School (K-12) Subchapter 8	(Other than K	(-12)			
266 Sloatsburg Roa	ad								Other (i.e. privetc.)	vate & comme	ercial buil	dings	home	es,
City (5)									e Feet	# of Floors	E	Bldg. A	Age	
Ringwood										2				
County (6) Passaic					Code (7) JSE ONLY)		_	Currer	nt Use (Prior 5ch	if being demo	lished)			
Name of Monitoring Firm	Hired by Building O	wner (8)		ASCN	l No.		Name	of Abat	ement Contr	actor (9)			W	
Omega		****						Pow	-R-51	9VE	100			
Street Address 280 Huyler Street								Addres		Stree	+			
City, State, Zip Code				aer ee e					p Code	2/16	<u> </u>			
South Hackensack,	NJ 07606						BI	oom,	hield	NJ	07	00	3	
Project Manager for Mor Geiser Fajardo	nitoring Firm			Telephor	ne No. 189-8700	)	Teleph	one No	80-008	License	e No. 35	-7		
Start Date (10)		Schedule			and the second				A Monitor	0 ]	50	/_		
6/20/13		7/1/13					01 1	A 11						
Occupancy Status Durin							Street	Addres	s					
Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire P ned Outside of Norma	eriod of A al Facility	batem Hours	ent			City, S	tate, Zi <sub>l</sub>	p Code					
Scope of Work (Check A	II That Apply)			-				-				-	_	
≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf			enova emoliti				×	Min Glo	i-Enclosure vebag Proce	nt with Negativ dure (*) and Non-Fr			re	
	populari de la companya de la compan	le	Locati	on								Abat	emen	t
Location	n of	N	ormall	у		Des	scription	of			-	T)	/pe	
Asbestos-Containing	Material (ACM)		d Solel		Asbest	os Cont	taining M	aterial	(ACM)	Amount	1 77		g	т
TO BE AB		Custo	odial S	staff?	(i.e.	surfa	cing, VA	T, or	tion,	(Specify SF or LF)	Removal	Repair	cap	Enclosure
(13)	-		(12)			other n	niscellan	neous)			oval	air	Encapsulate	sure
		Yes	No	N/A									l e	
various locations ba	asement & 1st fl			Х		VA	T/mas	tic		939 sf	x			
						HVA	C gask	kets		12 sf	x			
					- 1	oiping	(wrap	& cut)		1096 If	x			
			500		f	ittings	(wrap	& cut)	Control of	146@	x			
Name of Registered Was			5.500	JDEP Wauler ID	(MM/500000)	Cubic of Was			F 8000 - 00 - 0	egistered Lan				
Atlas Disposal Option	ns		-0.000	3262	140.		5,000			entral or Tu	illytowr	l 		
City, State Dover, NJ	IV					Dispos	sal Date		City, State Pen Argy	/I or Tullyto	wn, PA			
Completed by		Title				S	Signature		111		Date			
Sharon Hendee		Sec/T	reas					21	lu/4	4	6/3/13			

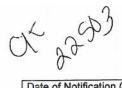
#### State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

2013-110

B & G proj. #: Date of Notification (1) Name of Building Owner/Operator (2) 0 6 / 0 3 / 1 3 Marie & Charles Bowling Type Notification Agencies Notified Street Address X EPA 38 East 35th Street Initial DEP City, State, Zip Code X DOL Amendment Bayonne, NJ 07002 Telephone Number Name of Contact X DOH Cancellation ☐ DCA Marie & Charles Bowling **FACILITY INFORMATION** Type of Facility (4) Name of facility where abatement is taking place (3) School (K - 12) Subchapter 8 (Other than K-12) Marie & Charles Bowling Other (Private/Commercial Street Address Bldgs./Homes, etc. 38 East 35th Street # of Floors Bldg. Age Square Feet County (6) County Code (7) City (5) Current Use (Prior if being demolished) (State use only) Hudson Bayonne Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Bldg. Owner (8) N/A B & G Restoration, Inc. Street Address Street Address 105 Ryerson Road City, State, Zip Code City, State, Zip Code Lincoln Park, NJ 07035 Telephone Number License Number Phone Number Project Manager for Monitoring Firm (973)696-6869 00378 Name of OSHA Monitor Sched, Completion Date (11) Scheduled Start Date (10) B & G Restoration, Inc. 06/13/2013 06/15/2013 Street Address 105 Ryerson Road Occupancy Status During Abatement (Check only one) Facility closed/vacated during entire period of abatement. City, State, Zip Code Abatement performed outside of normal facility hours-LincolnPark, NJ 07035 Describe: Other-Describe: Scope of Work (check all that apply) Full Containment w/negative pressure Glovebag procedure **X** Renovation ☐ Demolition Non-friable procedure Mini-enclosure ¥ ≥160 sf or ≥260 lf  $\square > 3 \text{ sf or } > 3 \text{ lf}$ Is location normally used solely E e Location of n by maintenance/custodial Amount n asbestos-containing Description of asbestos-containing m р C (Specify SF or staff(12) C material (ACM) material to be a abated in facility (13) Yes N/A No X 270 lf pipe insulation Basement 100 lf X X pipe insulation crawl space Name of Registered Landfill Cubic Yards of Waste NJDEP Hauler ID# Registered Waste Hauler Tullytown Resource & Recovery Center 19563 B & G Restoration, Inc. Disposal Date City, State City, State Tullytown, PA 06/17/2013 Lincoln Park, NJ Signature Completed by (Print or Type) Gordana Luna Title 06/03/2013 Secretary/Treasurer Gordana Luna



Date of Notification (1)							Owner/Operator (2	2)	730	218			
6/	5 /	13	_		Sove	reign Ba	ank, N.A.		-5-	(4) 			Mil
Agencies Notified	Type Notifica	ation			Street A	ddress					1/9 E		
⊠ EPA					1130	Berkshi	re Boulevard		* ///		-	? .	
□ DOLWD	☐ Amended				City, St	ate, Zip Co	ode		10.7	10.56-3		51	2
☑ DHSS	Amendm					missing,							
DCA (ALMO 5.00.0)	☐ Emergen justificati		uding	-	2000	of Contact			Telephone Numi	ber	4		$\neg$
(NJAC 5:23-8)	☐ Cancella	2000				n Peck				_			
	Cancella						CONTATION						$\dashv$
					FAC	ILII Y INI	FORMATION	T	4)				-
Name of Facility Where	Abatement is	Taking	Place (	(3)				Type of Facility (					
Sovereign Bank								School (K-12)	(Other than K-12	9			
Street Address								Other (i.e., pr	ivate and comme	rcial build	ings,		
1600 Corlies Avenu	ue							homes, etc.)					
City (5)		3W/		1		2 2 32	1	Square Feet	# of Floors	(3)	. Age		
Neptune								8,000	2	50	J		
County (6)					Count	y Code (7)	(STATE USE ONLY)	Current Use (Pri	or if being demolis	shed)	- 1834		
Monmouth													
Name of Monitoring Firm	Hired by Bui	Iding O	wner (8	3) [	ASCM N	10.	Name of Abateme	ent Contractor (9)					
Hillmann Consultii				'	6225	2	JVN Restora	tion Inc					
Street Address	.9						Street Address						
1600 Route 22 Eas	•						47 Foster Ro	ad					
					-		City, State, Zip C						-
City, State, Zip Code							Staten Island						
Union NJ 07083				17-1-	-b N			141 10000	License No.				_
Project Manager for Mor	nitoring Firm			100	phone N		Telephone No.	•	00774				
Brian Nemetz					32-616-	- Cartina - Ca	718-605-6256		00774				
Start Date (10)					tion Dat		Name of OSHA						
06 /15 /	13_	0	6_ /		<u> </u>	13	Testor Tech	Y'					
Occupancy Status Durin	ng Abatement	(Check	only o	ne)			Street Address						
☑ Facility Closed/Vaca	ted During En	tire Per	iod of	Abate	ment		10 59 Jackso	on Avenue					
☐ Abatement Performe	ed Outside of I	Normal	Facility	Hour	s - Des	cribe	City, State, Zip C	ode					
Time of Abatement:	AM	PN	A/	_PM-		AM.	LIC NY 1110	1					
Scope of Work (Check	all that apply)											117-	
Coope of Work (Grisan)	an anac app.y/							tainment with Neg	gative Pressure				
☐ ≥3 sf or ≥3 lf			☐ Re				☐ Mini-En	closure ag Procedure					
⊠ ≥160 sf or ≥260 lf			Пре	monus	JII			empted (*) and No	n-Friable Proced	ure			
			Is	Loca	tion					Aba	temen	nt Ty	pe
Locatio	n of		00000	Norma			Description			D	Z	ш	П
Asbestos-Containing		(M)		d Sol	ely by		stos Containing M		Amount (Specify	Removal	Repair	nca	Enclosure
TO BE A				Million Co.	Staff?	(1.€	e., thermal systems surfacing, VA		SF or LF)	ova	₹   ·	DSC	IIISCI
IN Fac				(12)			other miscellan			1-1		Encapsulate	ď
(17)	(3-20		Yes	No	N/A						$\dashv$		
Teller Area, SW Off	ice	7.0		$\boxtimes$		VAT/M	astic		500SF				
				-		VAT/Ma	notio		200SF			П	П
Break Room				Ø	ш	AMINA	45110		2000.		=	=	
												Ш	Ш
				П									
Name of Desistered M	octo Hauler	-	Г	_	NJDEP	Waste	Cubic Yards of	Name of Regi	stered Landfill				
Name of Registered W					Hauler I		Waste	G.R.O.W.S					
Global Waste Ind	ustries, inc.				NJ-22		6					1	
City, State							Disposal Date	City, State					
Hackettstown, NJ	ļ,						6/22/13	Morrisville		1			
Completed By (Print or	Type)	Title	е	-	-	ethic allaw ec	Signature	Paral	0	Date	1	7	
John Tardy	150 G	S	enior	Proj	ect Ma	nager	1 Te	1 arci	1	65	11:	3	
ASB-41					M.,		<del></del> /	<u> </u>	1		1		
700-41			Da ==		thin form	for achai	toe licensula even	nnted activities	į		105.0		



Agencies Notified  □ EPA □ Initial □ Amende □ Cancelle □ Cancelle □ Sovereign Bank □ Street Address □ 308 Main Street □ County (6)	d nent #_ ncy (inci ion) ation	luding		Street A 1130 City, Sta	ddress Berkshi ate, Zip Co missing,			Colonia A	12. V	ر ان		
☐ EPA ☐ Initial ☐ Amende ☐ Amende ☐ Amende ☐ Amende ☐ Emerge ☐ Justifica ☐ Cancelli  Name of Facility Where Abatement is Sovereign Bank  Street Address 308 Main Street  City (5) Asbury Park	d nent #_ ncy (inci ion) ation	luding		1130 City, Sta Wyor	Berkshi ate, Zip Co missing,	ode			% <sub>23,</sub>	<del>ر</del> ر		
☐ EPA ☐ Initial ☐ Amende ☐ Amende ☐ Amende ☐ Amende ☐ Emerge ☐ Justifica ☐ Cancelli  Name of Facility Where Abatement is Sovereign Bank  Street Address 308 Main Street  City (5)  Asbury Park	d nent #_ ncy (inci ion) ation	luding		City, Sta	ate, Zip Co missing,	ode	£,	Cons.	% <u>,⊃,</u> √	٧,		
□ DOLWD     □ Amende     □ Amende     □ Amende     □ Amende     □ Amende     □ Serverge     □ Serverge     □ Sovereign Bank     □ Street Address     □ Sovereign Street     □ Cancelle	nent #_ ncy (inc ion) ation	luding		Wyor	missing,			100,00	4	1/2		
Name of Facility Where Abatement is Sovereign Bank Street Address 308 Main Street City (5) Asbury Park	ncy (inclion) ation	luding		Wyor	missing,			4/2/34-23		14		
Name of Facility Where Abatement is Sovereign Bank Street Address 308 Main Street City (5) Asbury Park	ion) ation		+	MOREO MANAGE				Vigorio Grand				
Name of Facility Where Abatement is Sovereign Bank Street Address 308 Main Street City (5) Asbury Park	ation			Name o	+ Cantant			Telephone Number	ar /			
Name of Facility Where Abatement is Sovereign Bank Street Address 308 Main Street City (5) Asbury Park				_			ı	relephone reambe				
Sovereign Bank Street Address 308 Main Street City (5) Asbury Park	Taking				ın Peck				-	_		
Sovereign Bank Street Address 308 Main Street City (5) Asbury Park	Taking			FAC	LITY IN	FORMATION		8				
Street Address 308 Main Street City (5) Asbury Park		Place	(3)				Type of Facility (4	7				
308 Main Street City (5) Asbury Park							School (K-12)	(Other than K-12)				
City (5) Asbury Park				***************************************			Other (i.e., pri	vate and commerc	ial buil	dings	s.	
Asbury Park							homes, etc.)			-	ž.	
Asbury Park		11.75					Square Feet	# of Floors	Bldg	g. Ag	е	
							10,000	2	5	0		
County (6)				Count	v Code (7)	(STATE USE ONLY)		or if being demolish	ned)			
na a company and the				Count	y code (i)	(07/112 002 01/21)	- Committee Comm		0.000			
Monmouth				100111		No of Abotema	nt Contractor (0)		-			
Name of Monitoring Firm Hired by Bu	ilding O	wner (	3) /	ASCM N	COOC.	and the state of t	ent Contractor (9)					
Hillmann Consulting				62252	2	JVN Restora	tion inc					
Street Address						Street Address						
1600 Route 22 East						47 Foster Ro	ad					
City, State, Zip Code						City, State, Zip C	ode					
Union NJ 07083						Staten Island	I NY 10309					
Project Manager for Monitoring Firm		7	Tele	phone N	lo.	Telephone No.		License No.				
Brian Nemetz			1000	32-616-		718-605-6256	;	00774				
	School	uled C		tion Dat		Name of OSHA N	Monitor					1800
Start Date (10) 06 / 15 / 13				2_ / _		Testor Tech						
Occupancy Status During Abatemen	(Check	only o	ne)			Street Address			-411 E-00-0-1			
☐ Facility Closed/Vacated During El				ment		10 59 Jackso	n Avenue					
Abatement Performed Outside of	Mormal	Facility	v Hou	rs - Desi	cribe	City, State, Zip C						_
Time of Abatement:AM	PN	N/	PM-	. /	AM .	353						
			ma-			LIC NY 1110	1					
Scope of Work (Check all that apply)						☐ Full Cor	tainment with Neg	ative Pressure				
≥3 sf or ≥3 lf		☐ Re	novat	ion		☐ Mini-En		u				
⊠ ≥160 sf or ≥260 lf		☐ De	molitic	on		☐ Gloveba	g Procedure		22			
						⊠ Non-Exe	empted (*) and No	n-Friable Procedur		7000000000		
			Locat			4300			Aba	_	ent T	уре
Location of	SASSIES.	The state of the s	Norma	ely by		Description		Amount	Re	&	Ē	ᄪ
Asbestos-Containing Material (A	CM)		intena			estos Containing M e., thermal systems		(Specify	Removal	Repair	န္	Co
TO BE ABATED IN Facility		Cus		Staff?	(	surfacing, VA	Γ, or	SF or LF)	Va.	7	Encapsulate	Enclosure
(13)			(12)		4	other miscelland	eous)				ate	
		Yes	No					4 220CE			П	
Teller Area, SW Corner					VAT/M	astic		1,320SF				-
North Office Area, SW Corner					VAT/M	astic		1,320SF	×		Ш	
			П									
				1						П		
			<u> </u>	NJDEP \	Macia	Cubic Yards of	Name of Regis	stered Landfill				
Name of Pegistered Waste Hallier			1.0	Hauler II		Waste	G.R.O.W.S					
Name of Registered Waste Hauler		1.50		NJ-22		10		.,				
Global Waste Industries, Inc			1000	7770		Disposal Date	City, State					
						A Company of the Comp	Transport of the second second second					
Global Waste Industries, Inc						6/22/13	Morrisville	,PA				
Global Waste Industries, Inc City, State Hackettstown, NJ	Titl	e				6/22/13 Signature			ate	+	~	
Global Waste Industries, Inc	1000000		Proi	ect Ma	nager		Morrisville auC of	Da	ate 0	5   1	3	,



		The second second second		TION	OF ASE	ew Jersey BESTOS ABA 8:8:60 and 12:	CONTROL OF		28)		,	
Date of Notification (1)				Name Th	of Buildir	ng Owner/Operato	r(2) ockton Co	ollege of			0	
6-5-13 Agency Notified	Type Notification			Street	Address				- a '	7 / 1 7 / 1	70	- 1
<b>X</b> EPA	💆 Initial					a King F	arris Dr	ive		140		
KDEP DOL	Amended Amendment #			Ga, S	tate, Zip 110Wa	Code Ay, NJ 08	205				1	1/2
KDOH KDCA	☐ Emergency (inclusion) ☐ Cancellation	uding			of Conta	ct Hamm		Telephone Num	nber		-	
	_ Carlochadon			FAC	ILITY INF	ORMATION					1.00	
lame of Facility Where	Abatement is Taking I	Place (3	3)				Type of Facilit	y (4)				
Stockton Col Freet Address 101 Vera Ki				gs				8 (Other than K-12	than K-12) ommercial buildings,			
City (5)							homes, etc			ı. Age		
Galloway							20,000	3	1 -	-10	0	
County (6)						) (STATE USE		Prior if being demoli				
Atlantic				ONLY	)			building	ſ			
ame of Monitoring Firm Finog Envi	Hired by Building Ow ronmental	vner	ASC	И No.	9		nent Contractor	(9) ental Serv	rice	s,	Inc	Ξ.
Street Address 617 Stokes	Road, Suit	e 4-	318			Street Address 2251 F1	caley St	reet				
ity, State, Zip Code Medford, NJ	08055		-9/150-740-01	<del>*************************************</del>		City, State, Zip Philade	Code lphia, P	A 19137				
roject Manager for Mon Mark Rubine				phone No. Telephone No. License No. 8-715-2211 215-533-5155 01166								
tart Date (10) 6 - 14 - 13	Scheduled 6-21-		etion Da	ate (11)		Name of OSHA Finog E	Monitor nvironme	ntal				
Occupancy Status During I Facility Closed/Vacate I Abatement Performed I Other – Describe: OU	d During Entire Perio Outside of Normal Fa tside remo	d of Aba	atemen	rt		City, State, Zip		, Suite 4	-318	8		
Scope of Work (Check al □ ≥ 3 sf or ≥ 3 lf ☑≥ 160 sf or ≥ 260 lf	Il that apply)				ovation nolition	☐ Mini ☐ Glov	-Enclosure rebag Procedure	h Negative Pressur				
		1	s Local							0.00000	teme ype	
Locatio Asbestos-Containing TO BE AB IN Fac (13)	g Material (ACM) BATED illity	M	Norma ed Sole aintena Custod Staff' (12)	ely by ance/ lial ?		Description stos Containing M ,, thermal systems surfacing, VA other miscellan	aterial (ACM) insulation, T, or	Amount (Specify SF or LF)		Removal	m	Т
roof b c f	inga	Yes	No	N/A	200.0	E dwadaa		10sf		++	+	+
roof b & f w	ıngs			+	roo	f drains		1001		x	+	-
		-	+-		-					++-	+	
			1				A-600 - 600				+	
ame of Registered Was		17.0000	JDEP \	Vaste F	lauler	Cubic Yards of Waste	A & L S	stered Landfill Salvage				_
City, State Morrisville,						Disposal Date	City, State Libson	, ОН	Date			
Completed by Jennifer Niv	ven Dir. c	of O	pera	atio	ns	Signature	( The	_	Date 6 - 5	-13		

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

B & G proj. #: 2013-97E

Check # 5931

	×		**	*** Amer	iaea # i									
Date of Notification			ne of Buildi eminary		Operator (2)		2813 JUN -6	6H 2	o Ea					
10 15 1/13 11	Type Notification		et Address		CHOWAI		1	11111	<del>- 75</del>					
Agencies Notified  EPA	Type Nouncation													
DEP	Initial	11	20 Albar											-
▼ DOF	<b>★</b> Amendme	nt City	, State, Zip New Brut	nswick, N	NJ 08901				Telephor	a Numh	er			_
DOH	2000	Nan	ne of Conta	act		71			releprior	ic realist	· ·			
☐ DCA	☐ Cancellation	on	Merissa	Buczny										=
				FACIL	ITY INFORMA	ATION								
Name of facility w	here abatement is t	aking plac	e (3)					Type	of Facility Scho	(4) ol (K - 1:	2)			
Vacant Buildi								آ ا	Subc	hapter 8	(Other th	an K-	12)	
									X Other	(Private	/Comme	cial		
Street Address							1	-		./Homes		Blo	g. Age	e
89-91 Colleg	je Avenue							Squa	re Feet	#0111	0013		3 3	
City (5)		Count	y (6)			G15186G154	ty Code (7)	Curr	ent Use (	Prior if be	eina dem	olishe	d)	
ED-03-18-01-02-18-1	dala N.I. 00001	Mide	dlesex			(State	e use only)		dential		·			
	vick, NJ 08901	11/1/20/20		<del></del>	ASCM No.	<del></del>	Name of Abatement							
Name of Monitori	ing Firm Hired by Bl	ag. Owner	(0)		AGOIN NO.	- 11	B & G Restorat					5.50		
the second secon	Berger Group, Ir	10.	- Contracting or 14 miles			<b></b>  -	Street Address							
Street Address							105 Ryerson F	Road						
	nble Avenue						City, State, Zip Code						500	
City, State, Zip Co Morristown	ode , NJ 07960						Lincoln Park,	NJ 07	035					
	for Monitoring Firm		1800	one Numb			Telephone Number (973)696-686	39		Licer	oo378	ei		
Craig Napo			97	3-407-10	000		Name of OSHA Mon		-					
Scheduled Start I		Sched.	Completio	on Date (1			B & G Restora		nc					
05/28/2013		08/0	3/2013				Street Address							
	s During Abatemen	(Check o	nly one)				105 Ryerson F	Road						
DE Encility clos	sed/vacated during	entire perio	od of abate	ment.			City, State, Zip Code	9						
Abatement	performed outside	of normal 1	acility hou	rs-				11070	25					
Describe:_ Other-Describe	cribe.					=	LincolnPark, N	43 070	30					1.7.
	(check all that apply	)												
Demolition		Renovatio	n			X F	full Containment w/ne	egative	pressure		ovebag p			
		≥160 sf or	>260 If			M I	Mini-enclosure			X No	on-friable		dure	
>3 sf or >3	5 m ET :		n normally	used solel	y		***************************************			***************************************	. R	R	E n	E
Location of asbestos-		by mainte	enance/cus	stodial		tion of a	sbestos-containing		Amoun	it Ty SF or	m	p	C	n
material to	be	staff(12)	Γ	Т	material	I (ACM)		- 1	LF)	, 0. 0.	O V	l a	a D	L
abated in	facility (13)	Yes	No	N/A			SHEET AND THE REST OF THE REST				e	1	1	+
Enclosed por	ches			X			lintel caulking		7 If		X	뷰	牉	+
Enclosed por				×			caulking (brown)	)	20 lf		X	片	#	+
Exterior throu				X			v caulking		800 lf		X	井	묶	十
2nd fl bedroo			0.00-0.00	X			esive floor tile		160 sf		X	井	岩	十
Canopy Roof				X	caulk on	flashir	ng / built up roofir	ng _	50 lf / :	200 81			1-1	1
Registered Was	te Hauler	NJD	EP Hauler	ID#	Cubic Yards o 20	or vvaste	Name of Registere Tullytown	Resou	 .rce & F	Recove	ry Cen	er		20
B & G Resto	ration, Inc.		19563	Disposal	17772000		City, State							
City, State	Ŀ N.I.			5/2	8/13 - 8/3/1	3	Tullytowr	n, PA						v
Lincoln Par		Title		<u>L</u>	Signature		Gordana Luna			-	ate 05/21/2	012		
Completed by (I	una	Secreta	ary/Treas	surer			Gordana Luna				05/31/2	.013		

From: B & G Restoration, Inc., 105 Ryerson Road, Lincoln Park, NJ 07035

Attachment to Amended 10-day notification (Amendment #1 dated May 31, 2013)

Re: 89-91 College Avenue, New Brunswick, NJ 08901

All of the following materials shall be removed.

Location of asbestos- containing material to be abated in facility	Is location normally used solely by maintenance/custodial staff	Description of asbestos- containing material (ACM)	cify SF or LF)	Кетоме
,			1	
		1000x	1	Vec
Vitchons	N/A	Floor tile and mastic	K	531
NICHEIIS	21/2	Computitions material at # 30 SF	-	Yes
Boiler room	N/A	K	()	
K		metal hood of boiler		

Completed by:		ature:
Complet	Title:	Signature:_

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

Check # 5910 2013-97E B & G proj. #: 2813 JUN -6 200 Name of Building Owner/Operator (2) Date of Notification (1) Seminary Urban Renewal 0 15 1/1 13 1/11 13 1 Street Address Type Notification Agencies Notified 120 Albany Street X EPA Initial City, State, Zip Code DEP New Brunswick, NJ 08901 Amendment Telephone Number X DOL Name of Contact X DOH Cancellation Merissa Buczny ☐ DCA FACILITY INFORMATION Type of Facility (4) School (K - 12) Name of facility where abatement is taking place (3) Subchapter 8 (Other than K-12) Other (Private/Commercial Vacant Building Bldgs./Homes, etc. Bldg. Age Square Feet | # of Floors Street Address 89-91 College Avenue County Code (7) Current Use (Prior if being demolished) County (6) (State use only) City (5) residential ousing Middlesex New Brunswick, NJ 08901 Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Bldg. Owner (8) B & G Restoration, Inc. The Louis Berger Group, Inc. Street Address 105 Ryerson Road Street Address City, State, Zip Code 412 Mt Kemble Avenue Lincoln Park, NJ 07035 City, State, Zip Code License Number Morristown, NJ 07960 Telephone Number 00378 Phone Number (973)696-6869 Project Manager for Monitoring Firm 973-407-1000 Name of OSHA Monitor Craig Napolitano Sched. Completion Date (11) B & G Restoration, Inc. Scheduled Start Date (10) Street Address 08/03/2013 105 Ryerson Road 05/28/2013 Occupancy Status During Abatement (Check only one) City, State, Zip Code Facility closed/vacated during entire period of abatement. Abatement performed outside of normal facility hours-LincolnPark, NJ 07035 Describe: Other-Describe: Glovebag procedure Scope of Work (check all that apply) Full Containment w/negative pressure Non-friable procedure Renovation Demolition Mini-enclosure Ε ≥160 sf or ≥260 lf E  $\square > 3 \text{ sf or } > 3 \text{ lf}$ е n Is location normally used solely n Amount m C Description of asbestos-containing by maintenance/custodial (Specify SF or C 0 Location of a L asbestos-containing (F) staff(12) material (ACM) p material to be N/A No abated in facility (13) Yes X 7 If interior window lintel caulking 20 lf interior window caulking (brown) Enclosed porches 800 If Enclosed porch of 91 exterior window caulking 12x12 self adhesive floor tile 160 sf Exterior throughout 50 If / 250 sf × caulk on flashing / built up roofing 2nd fl bedroom in 91 Name of Registered Landfill Cubic Yards of Waste Tullytown Resource & Recovery Center Canopy Roofs NJDEP Hauler ID# Registered Waste Hauler 20 19563 B & G Restoration, Inc. Disposal Date Tullytown, PA 5/28/13 - 8/3/13 City, State Date Gordana Luna Lincoln Park, NJ 05/13/2013 Signature Completed by (Print or Type) Secretary/Treasurer Gordana Luna

# State of NJ

B & G proj. #:

2013-97D

Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7) \*\*\*\*\* Amended #1 \*\*\*\*\*

	Check # 5930				_
V -8	AM 2:50				
À.					
	17				
	Telephone Number	30, 43	- 151 - 161 - 161		
		=			<del>-</del> .
Тур	e of Facility (4) School (K - 12) Subchapter 8 (Oth	nme		2)	
Sq	Bldgs./Homes, etc		Bldg	g. Age	_
re	urrent Use (Prior if being	dem	olished	1)	_
Contr ion,	actor (9) Inc.				
Road					
NJ (	7035				
	License 00	Num 378			
nitor ition,	Inc.				
Road					
∍ NJ 07	7035				
egativ	re pressure 🗶 Glovel				
	Amount (Specify SF or LF)	Remove	a i r	Encap	E n c L
	250 sf	X		무	H
	200 ef	1130	1 1 1	CI I	

Date of Notification (1)				perator (2)		ال 1913 	M-6	800 0						
Agencies Notified   Type Notification		minary L	Jrban Re	enewal		** 3-5-		MIT A	<del>50</del>		_===			_
EPA   Initial	1	20 Albany	y Street			€€ /	mi		0.1		_			-
☐ DEP	City.	State, Zip	Code	10 7. 10 10 THE				1977	•					
DOL Amendment	N	ew Brun	swick, N	J 08901	12.00			Telephor	e Num	her	-			
DOH _		e of Contac	ct					releption	ic ruii					
☐ DCA ☐ Cancellation	'    N	/lerissa B	Buczny							=				_
			FACILI	TY INFORMA	TION									
Name of facility where abatement is ta	king place	(3)					Туре	of Facility	(4) ol (K -	12)				2
	ung p	,								8 (Other t	han	K-12	2)	÷
Vacant Building							l i	Other	(Privat	te/Comm				
Street Address							0-10	Bldgs re Feet	./Home			Bldg	Age	
85-87 College Avenue						ty Codo (7)	Squa	ile Leer	# 01 1	10010			7 7	
City (5)	County	(6)				ty Code (7) e use only)	Curr	ent Use (	Prior if	being der	noli	shed	)	
New Brunswick, NJ 08901	Midd	lesex			2.5			dential	housi	ng				
Name of Monitoring Firm Hired by Bld	g. Owner (	(8)		ASCM No.	$\neg \sqcap$	Name of Abatemen	t Contrac	tor (9)						
The Louis Berger Group, Inc	3.				_	B & G Restora	ation, In	C.				_		
Street Address						Street Address 105 Ryerson	Road							
412 Mt Kemble Avenue	74H===					City, State, Zip Code					_			
City, State, Zip Code		***************************************				Lincoln Park	, NJ 07	035						
Morristown, NJ 07960		I Pho	ne Numbe	r		Telephone Number			Lio	ense Nur		ſ		Y
Project Manager for Monitoring Firm		1.000	3-407-100			(973)696-68				00378	3	_		
Craig Napolitano	Isched		n Date (11)			Name of OSHA Mo		20						
Scheduled Start Date (10)	0.500	3/2013	11 2010 (11)			B & G Restor	ation, n	10.			-		i en en en	
05/28/2013						105 Ryerson	Road							
Occupancy Status During Abatement    Facility closed/vacated during e	(Check on	ily one) d of abater	ment.		- 11	City, State, Zip Coo								2000
Abatement performed outside o	f normal fa	acility hours	S-					25						
Describe:					=	LincolnPark,	NJ 070	35			_	_	÷	=
Scope of Work (check all that apply)						12			E .	<b>.</b>				
Demolition	Renovation	1				ull Containment w/r	negative	pressure	_	Glovebag Non-friab				
Application of the control of the co	160 sf or ≥	≥260 lf			X I	Mini-enclosure			X	Non-man		R	E	
	Is location	normally u	used solely			500.5 ***		Amoun	ıt	е		е	n	E n
asbestos-containing	by mainter staff(12)	nance/cust	lodiai	Descript material	ion of a	sbestos-containing		(Specif		r o		p a	c a	C
material to be abated in facility (13)	Yes	No	N/A	material	(, 10.11)			LF)		V e		i	Р.	
			X	floor tile o	r linol	eum		250 sf		[2	-			
85 College Ave kitchen			×	floor tile o				200 sf		[2		ᆜ	닏	뷰
87 College Ave chen			X	roofing m	embra	ane *		200 sf-	*	[2	_	片	부	쓔
Porch Roof  Balcony Exterior	===		X	tar on cor		*		72 sf	*		_	屵	井	품
1st flr living room & kitchen			X	pipe insul		Name of Registe	red Land	155 lf	A		1		ш,	1-
Registered Waste Hauler	INJDE	EP Hauler 9563	ID# C	ubic Yards of	vvaste	Tullytown	n Resor	urce & F	Recov	erv Cer	nter			
B & G Restoration, Inc.			Disposal D	Date		City, State								
City, State Lincoln Park, NJ			5/28	/13 - 8/3/13	3	Tullytow			Ti	Date				
Completed by (Print or Type) Gordana Luna	Title Secreta	ry/Treas	urer	Signature		Gordana Lun	a			05/31/	20	13	no. Salad fart	1 -

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

B & G proj. #: 2013-97D

Check # 5909

Date of Notification (1)	N	ame of Build	ding Owne	er/Operator (2)	13 11	M -6 AM 2:51						
0 15 1/1 13 1/1 13	_		-	Renewal		M1 61 31	2			_	-	
Agencies Notified Type Notification	on St	reet Addres 120 Alba	11521	et	47							
DEP Amendm		ty, State, Z New Bru	15	NJ 08901								
▼ DOH		ame of Cont	tact				Telephon	e Number				
☐ DCA ☐ Cancella	ion	Merissa	Buczny								_	
			FACI	ILITY INFORM	OITA	4						
Name of facility where abatement is	taking pla	ce (3)					Type of Facility (	4) I (K - 12)				
Vacant Building								apter 8 (Of	ther ti	nan K	-12)	
Street Address					770			Private/Co Homes, et		rcial		
85-87 College Avenue								# of Floor	_	BI	dg. Ag	ge
City (5)	Cour	ity (6)			115-65	inty Code (7)				_		
New Brunswick, NJ 08901	Mic	ldlesex			(Sta	ate use only)	Current Use (P residential h		dem	olish	∌d)	
Name of Monitoring Firm Hired by E		er (8)		ASCM No.		Name of Abatement	Contractor (9)					
The Louis Berger Group, I	nc.					B & G Restorat	ion, Inc.					
Street Address 412 Mt Kemble Avenue						105 Ryerson R	Road		7			
City, State, Zip Code					-	City, State, Zip Code	NU 07005					
Morristown, NJ 07960						Lincoln Park,	NJ 07035	License	Mirror	0.		
Project Manager for Monitoring Firm		10.00	one Numb 3-407-10			Telephone Number (973)696-686	9		378	<b>1</b>		
Craig Napolitano	10-bad	. Completio		01180801		Name of OSHA Mon						
Scheduled Start Date (10)		. Completio 3/2013	n Date (1	1)		B & G Restorat	ion, Inc.				4	
05/28/2013 Occupancy Status During Abatemen					_	Street Address 105 Ryerson R	oad					
Facility closed/vacated during			nent.			City, State, Zip Code						
Abatement performed outside	of normal	facility hours	S-									
Describe:					=	LincolnPark, N.	J 07035					
Scope of Work (check all that apply	)				_						ALCO HISTORY	
▼ Demolition	Renovatio	n				Full Containment w/neg	gative pressure	Gloveb	٠.			
>3 sf or >3 lf	160 sf or	-			<u>П</u>	Mini-enclosure	l	Non-fri	able	oroce		
Location of		normally un nance/cust			. n of o	sbestos-containing	Amount		e m	e	n	E
asbestos-containing material to be	staff(12)			material (			(Specify S	For	0	p a	a	C
abated in facility (13)	Yes	No	N/A				",		v e	i r	p .	<u> </u>
85 College Ave kitchen			×	floor tile or			250 sf		X			早
87 College Ave chen			X	floor tile or	linol	eum	200 sf		X	H	<u> </u>	ዙ
									井	屵	+	岩
					-				片	Ħ	古	古
Registered Waste Hauler		P Hauler II 9563	)# C	ubic Yards of V	Vaste	California and Califo	Landfill Resource & Rec	over C	onto			
B & G Restoration, Inc. City, State		Company of the Compan	Disposal D			City, State		OVELV C	ente			_
Lincoln Park, NJ				/13 - 8/3/13		Tullytown,	PA				,	
Completed by (Print or Type) Gordana Luna	Title Secretai	y/Treasu	rer	Signature		Gordana Luna		Date 05/1:	3/20	13		



of Notification (1)			Bella	Cleani	g Owner/Ong and C	arting.		13 00	<u>5.6</u>	500			$\dashv$	
0-2013 ncies Notified	Type Notification		Street /	Address spect \$	St.		21.3			M 2:30	`		_	
EPA DEP	Initial Amended	1	City S	tate. Zip		50		e 1.11	4/4	J. Ass				
DOL	Amendment #_ Emergency (inc justification)	luding	Name	of Conta	ict				Telep	hone Numbe	<u> </u>			
DOH DCA	Cancellation				NFORMAT	ION			43					1
esidential.	e Abatement is Taking F	Place (3)					☐ Sc	Facility (4 hool (K-1 bchapter her (i.e. p	2)	than K-12) commercial t	ouildings	, hom	es,	
reet Address 3 Elliot Place							Square	c.)	# of	Floors	Bldg. /			1
ty (5) Sutherford NJ.	2				(7)		2500 Curren	t Use (Pri	1 ior if beir	ng demolished				1
ounty (6)			(STA	nty Code	ONLY)		ne of Abate							1
Bergen ame of Monitoring	Firm Hired by Building O	wner (8)	AS	SCM No.		Gr	een Env	ironmer	ntal Se	rvices.				4
Street Address						Stre 23	eet Addres 5 Virgini	s a Ave.						
City, State, Zip Code	9					Cit	y, State, Zi ersey City	p Code y NJ. 07	7304					
			Tele	ephone l	No.	Te	lephone No 01-333-8	0.		License No 01174	),			15.000
Project Manager for	Monitoring 1	Scheduled	Comple	etion Dat	e (11)	Na	me of OSI	HA Monite	or					
Start Date (10) 6-3-13		6-5-13				St	ioterra S reet Addre	ss	·					
	During Abatement (Chec	Derind of Ah	atemer	nt		100	O.Box							
Facility Close Abatement Po Other – Desc	d/Vacated During Entire	mal Facility F	lours			l	Jnion NJ	. 08841						
	neck All That Apply)		enovatio	on	8		l N	lini-Fnclo	sure	ith Negative	Pressure	ř.		
≥3 \$f of ≥3 if ≥160 sf or ≥2	60 If	X De	emolitio	n			× N	lovebag lon-Exem	Procedu pted (*)	re and Non-Fria	ble Proc	edure		
		Is	Locatio	n							-	Abate Ty	Henr	
Ashestos-Col	ocation of otalining Material (ACM) BE ABATED In Facility (13)	Used Mai	d Solely ntenan odial S (12)	y by	(i.e. th	s Contai ermal s surfaci	ription of ning Mater ystems ins ng, VAT, o scellaneou	rulation,		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	-
	gr (49))	Yes	No	N/A		Debris	Clean u	p.	_	2500SF	, X			1
En	tire Property	-	×	-					1		-	-	-	+
		_									+	-	+	1
	orod Waste Hauler			NJDEP V	Vaste	Cubic of Wa				egistered Lan				
Rovic Transp	ered Waste Hauler port.		2	Hauler ID 20785	, INU.	500	sal Date	Cit	v. State					
1	100					6-5-1	3	Be	etlahan	ı P.A	Date			_
City, State Riverdale N.	J.	Title					Signature				5-30-	2011	<	

Date of Notification (1)	)		100		Building O	wner/Oper	rator (2)	-070	48/3	1.11100					
June 3, 2013					inicozzi		Check # 5	0878		CONT.	·6 ,				
Agencies Notified	Type Notification			Street Ad 305 E.	<sub>dress</sub> Maple A	venue				JUM.		7 1	2,	So	
EPA DEP DOL	Amended Amendment #				e, Zip Cod antville, N		9		3.0	4468,		2			
DOH DCA	Emergency (ir justification) Cancellation	ncluding	100	Name of Fred M	Contact inicozzi		0.00		Telepl	none Nu	mber				
N DON		-		FACIL	ITY INFO	RMATION						_			
Holy Rosary Scho	re Abatement is Taking ool	Place (3)					× so	f Facility (4) chool (K-12) ubchapter 8	)	than K-1	12)				
Street Address 99 Burnt Mill Roa	ıd			820			or et	ther (i.e. pri	vate & c	ommero	cial build				•
City (5) Cherry Hill							Square 10,00	0	# of F		1	10g. 00	Age	,	
County (6) Camden				County C	Code (7) USE ONLY)		- Curren	t Use (Prior oi	if being	demolis	shed)		*	000	
Name of Monitoring F Westchester Env	irm Hired by Building O	wner (8)		ASCM	No.		Name of Abate Shade Envi								
Street Address 307 North Walnu							Street Address 623 Cutler								
City, State, Zip Code West Chester, PA							City, State, Zip Maple Shad		8052						
Project Manager for M	Project Manager for Monitoring Firm Matt Abraham				ne No. 31-7545		Telephone No 856-755-00			License	No.				
					Date (11)		Name of OSH					3,50	_		
Start Date (10) June 17, 2013		July 17			Date (11)		EMSL								
Occupancy Status Du	uring Abatement (Check	Only On	ie)				Street Address 107 Haddo								
Facility Closed/\ Abatement Performance Other – Describe	/acated During Entire Pormed Outside of Norme:	eriod of A al Facility	Abater Hour	nent s			City, State, Zip Westmont,	Code	rsey	08108			_		
Scope of Work (Chec	k All That Apply)										5				
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260</li> </ul>		Darwoon Co.	Renova Demoli				Min	Containme i-Enclosure vebag Proc i-Exempted	edure				lure		
				-			INOI	I-Exempled	( ) and	14011111				nent	Ø.
		0.75	Loca Norma				· · · · •					_	Тур	e	_
Asbestos-Contair TO BE In F	ation of ning Material (ACM) <u>ABATED</u> acility 13)	Use Ma Cus	ed Sole intena todial (12)	ely by ance/ Staff?	Asbes (i.e.	tos Contai thermal s surfacii	cription of ining Material ystems insula ng, VAT, or scellaneous)	(ACM)	An (S)	nount becify or LF)	Removal	ropan	Dengir	Encapsulate	Liciosuic
		Yes	No	N/A				1000	20	5 SF	XXX	+	$\dashv$	-	
	m #1 and #2		XXX		Boil		ation and R	cope		-	XXX	+	+		-
Boiler	XXX				nsulation			0 LF	XXX	-	$\dashv$				
Boiler Roo	m #1 and #2		XXX		-		g Insulatio	n		5 SF	XXX	+	+		$\vdash$
Four Rooms	XXX		ļ		nd Mastic	Name of	0.550	63 SF		1					
Name of Registered Freehold		NJDEP V Hauler ID 22253		Oubic Y of Wast 100	e	Grows I	Landfil								
City, State Mount Holly, Nev	v Jersey 08060		***		Disposa 7/17/2		City, State Tullytov		١.						
Completed by Christina Lynch	ratio	ns Man	ager	89	Spature H	De			Date June	3, 2	201	3			

<sup>\*</sup> Do not use this form for asbestos licensure exempted activities.

CK # 2664

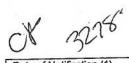
Date of Notification (1) 06/03/13					uilding Ow d Kathe				28	13 JU,	7-6 A	<del>~</del> >.	8		
ngonolog (Textille)	Type Notification			treet Addi 70 Hud	ress son Ave	enue			a sir y	Ŋ.,			ग्र		
EPA DEP  DOL	Initial Amended Amendment #				Zip Code					42 5/	GENTA.	$\mathbb{R}^{n}$	i.		
DOH DCA	Emergency (in justification)  Cancellation	ncluding		ame of C Catherin	ontact e Graw	ehr				Telep	hone Num	ber			
_ box	- Janonian			FACILIT	TY INFOR	RMATIO	N								
Name of Facility Where A Residential Property		Place (3)						Sc.	Facility (4 hool (K-12 behapter 8	2) 8 (Other	than K-12	)			
Street Address 270 Hudson Avenue	•							Ott etc	her (i.e. pr :.)	ivate &	commercia	l buildir	ngs, h		
City (5) Norwood	140							Square 2,000	+	2		50			
County (6) Bergen				County Co STATE US	de (7) E ONLY)		_				g demolish	eu)			
Name of Monitoring Firm	Hired by Building (	Owner (8)		ASCM 1	No.				ment Con ntracting						
Street Address								Address Sargea	nt Aven	ue					
City, State, Zip Code					<u> </u>			tate, Zip on, NJ (							
Project Manager for Mor	itoring Firm			Telephone	e No.			none No. 689-62			License N 01099	0.		5	
Start Date (10) 06/13/13		Scheduled 06/14/13		pletion D	ate (11)		Name J&S	of OSHA	A Monitor nmental	Labor	atories L	LC			
Occupancy Status Durin		k Only One	:)					Address Route	22 Wes	st					
Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire I ned Outside of Norm	Period of Al nal Facility I	Hours	ent		_	2.5	State, Zip on, NJ (							
Scope of Work (Check A  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	All That Apply)	General Co.	enova emolit				E	Mini	Containm -Enclosure vebag Pro	е	Negative F	Pressur	е		
2 <del>70.70.</del>	Sci. 82							Non	-Exempte	d (*) and	d Non-Frial				
		100	Locat			_							Abate Ty	pe	
Locatio Asbestos-Containin TO BE AF In Fac (13	g Material (ACM) BATED ility	Used Mai	ntena	ely by nce/ Staff?	Asbest (i.e.	tos Cont thermal surfa	systen	Material ns insula	(ACM) tion,	(5	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
Bassa		Yes	No	N/A X		Pipe	Insul	ation		1:	20 LF	x			$\vdash$
Baser	nent			^		1 100	, ,,,,,,,,								F
Name of Registered W	aste Hauler			NJDEP W Hauler ID		Cubic of Wa	Yards		098900000000000000000000000000000000000		ered Landfi	III			
Pyramid Contracting	g Corp.			32613	INU.	1			G.R.O City, Sta		inc.				
City, State Clifton, New Jersey	/					06/1		n	Morris	ville, F	ennsylva	ania Date			
Completed by Dimo Golcev	ν.	Title Gene	eral N	Vlanger			Signatu		14	K		06/03/	13		
ASB-41 (R-06-08)					ü	6	J <sub>D</sub>	not use t	this form fo	or asbes	stos licensu	ire exe	mpted	l activ	<i>i</i> ities

CR# 2463

Date of Notification (1) 06/03/13					Building th McNi		perator	(2)	2013 JUN	'~6	fil o	r.	JH	a	90
Agencies Notified	Type Notification		1 3	Street Ad	ddress noe Bro	ok Parl	kwav	4	jui.		70 1 Z	<del>\$()</del>			
EPA DEP DOL	Initial Amended Amendment Emergency		_ [	City, Stat Summi	te, Zip Co it, NJ 07	de			\$ (. r.		ephone Nu	II.			
DOH DCA	justification) Cancellation		0.00		th McNi	el		-	•	161	epriorie ivu	illibei			
Name of Facility Where	Abatement is Takin	g Place (3)		FACIL	LITY INFO	ORMATI	ON	Type	of Facility (4	4)					
Residential Proper									School (K-1	2)			***		
Street Address 22 Old Salem Roa	d							×	Subchapter Other (i.e. p				dings,	home	es,
City (5)			1001				-		etc.) re Feet	# 0	f Floors	E	ildg. A	ge	-
West Orange			-1.6	Saunta C	Pada (7)			1,90		2	na damalia		0+		
County (6) Essex		Y		County C STATE U	ise only			Curre	ent Use (Prio	or it bei	ng aemolis	inea)			
Name of Monitoring Fire	m Hired by Building (	Owner (8)		ASCM	No.				tement Con Contracting						
Street Address							4700000000	Addres Sarge	ss eant Aven	ue					
City, State, Zip Code									ip Code I 07013						
Project Manager for Mo	nitoring Firm		1	elephor	ne No.		Teleph	none N 689-6	0.		License 1	No.			
Start Date (10) 06/14/13		Scheduled 06/15/13		pletion [	Date (11)		Name	of OSH	HA Monitor onmental	Labo	l	LLC			
Occupancy Status Durin	ng Abatement (Chec	k Only One	)			-		Addres							
Facility Closed/Vac Abatement Perforr Other – Describe:	cated During Entire I med Outside of Nom	Period of Ab nal Facility H	atemo	ent			City, S	state, Z	te 22 Wes ip Code 07081	T					
Scope of Work (Check	All That Apply)						Office	11, 140	07001						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			novat moliti				×	Mir Glo	I Containme ni-Enclosure ovebag Proc n-Exempted	edure				A	
		ls L	ocatio	on.									Abate	ement	
Location Asbestos-Containing		No Used	rmally Solely		Aches	De tos Conf	scription		(ACM)	Δ	mount	-	Ty		
TO BE AB In Fac (13	BATED cility	Custo	tenan dial S (12)	WARRIED /	(i.e.	thermal surfa	system cing, VA niscellar	s insula T, or	ation,	(5	Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A										ě	
Basen	nent			X		Pipe	Insula	ition		18	85 LF	Х			
Name of Registered Wa	aste Hauler		l N.	JDEP W	aste	Cubic	Yards		Name of F	Registe	ered Landfil				
Pyramid Contractin			Ha	auler ID	8451859	of Wa			G.R.O.V	· · · · · · · · · · · · · · · · · · ·					
City, State Clifton, New Jersey			1-7			Dispos 06/14	sal Date	n	City, State		ennsylva	nia			
Completed by Dimo Golcev		Title Genera	al M	anger		S	Signature	/	1/.	le	//	ate 6/03/	13		
Dillio Golcev		Genera	ai ivič	anger	*	Ц,	H	N	4	-/	/   0	0/03/	-		
ASB-41 (R-06-08)						C	* Do no	ot use t	his form for	asbest	tos licensur	re exen	npted	activit	ties.

Freigency \*

Date of Notification (1)			Nai	me of Buil	ding Ownerin (Priva	er/Oper	ator (2) ome)	28/3	?	1-6-4		50/01/20		
6/2/13 Agencies Notified	Type Notification		Str	eet Addre	ss			di e		11.	2:5	()		
EPA DEP DOL	Initial Amended Amendment #_		Cit	y, State, Z anahaw	zip Code kin NJ 0	8050		Ġ.			1			
DOH DCA	Emergency (indiginal justification)  Cancellation	cluding	M	me of Cor ike					Tele	phone Numbe	er 			-
	Abatement is Taking I hate Home)	Place (3)		FACILITY	Y INFORM	IATION	Type of Su	her (i.e. pri	(Othe	er than K-12) commercial	building	gs, ho	mes,	
8 Richard Dr.							Square 1000	Feet +	1.5		35 -	. Age +		
Manahawkin NJ 0 County (6)	8050		C	ounty Coo	de (7) ONLY)		Home	)		ng demolishe	d)			
Ocean  Name of Monitoring Fi N/A	rm Hired by Building O	wner (8)	1	ASCM N	0.		Name of Abate Pernaco In	c	ractor	(9)		•		
Street Address							Street Address PO Box 32	9						_
City, State, Zip Code							City, State, Zip West Berlin	NJ 080	91	I IV No				_
Project Manager for M			elephone			Telephone No 856-753-98	300		License No 00727	). 			_	
Start Date (10) 6/2/13							Name of OSH Same Street Address							_
E Classic		Period of Abnal Facility H	atem				City, State, Z		ent w	ith Negative F	Pressur	e		
≥3 \$1 01 23 11 ≥160 sf or ≥260	) If		molit					wahaa Dro	coduir	e and Non-Friat	ole Prod	Abate	ement	
Asbestos-Contai TO BE In	ation of ining Material (ACM) <u>E ABATED</u> Facility (13)	No Used Mair	ntena odial (12)	lly ely by ance/ Staff?	Asbest (i.e.	os Con therma surfa	scription of taining Materia I systems insu icing, VAT, or miscellaneous	lation,		Amount (Specify SF or LF)	Removal	Repair	e Encapsulate	Enclosure
Exter	ior Siding	Yes	No	N/A X		Exte	erior Siding			1400 SF	x			
Extor								-						
				-						الاسمال	SIL			
Name of Registered	d Waste Hauler			NJDEP V Hauler ID	Vaste No.	Cubi of W	c Yards aste	G.R.C		istered Landf				
United Containe	ers			22459		3 Disp	osal Date	City, St	ate					
City, State Elm NJ		1				6/3/		Morri	sville	100	Date			
Completed by Anthony T Pern	na	Title Pres	ider	nt				<			6/2/13			



Date of Notification (1) 6/2/13		Nar J	me of Bu	uilding Owne M Curley I	r/Operator ( Private Ho	2) ome	¢	ेक्	1.34				
Agencies Notified Type Notifica	tion		eet Addr 5 w 17	ess th Street			*		Ç	18			
EPA Initial Amende Amendr		City	y, State,	Zip Code tom NJ 08	3008						1		
□ DOH     □ DCA     □ Cancelle		5333	me of C	ontact				Tele	phone Num	ber	4.		
			FACILI	TY INFORM.	ATION	Type of I	acility (4)						$\dashv$
Name of Facility Where Abatement is 1 James M Curley Private Home Street Address	Faking Place (3)					Sch	ool (K-12)	(Othe	r than K-12 commercia	!) al buildir	gs, h	omes,	
255 w 17th Street						Oth etc.	)		Floors		g. Ag		$\dashv$
City (5) Ship Bottom NJ 08008						1000+		2	ng demolish	35-	+		_
County (6) Ocean			ounty Co	ode (7) E ONLY) _		Home	Use (Prior	II Deli	ig derrionsi	ieu)			
Name of Monitoring Firm Hired by Buil	ding Owner (8)	1	ASCM I	No.		of Abaten		ractor	(9)				
N/A						Address							
Street Address						30x 329				15			
City, State, Zip Code			- 16 - 1		City, S Wes	State, Zip st Berlin	Code NJ 0809	91					
Project Manager for Monitoring Firm		Te	elephon	e No.		hone No. -753-980	00		License N 00727	10.			
Start Date (10) 6/13/13	Scheduled 6/20/13	Comp	oletion D	ate (11)	Name	of OSHA	Monitor		¥8				
Occupancy Status During Abatement	(Check Only One)		-		Stree	t Address							
Facility Closed/Vacated During B Abatement Performed Outside of Other – Describe:	Entire Period of Ab	ateme	ent		City,	State, Zip	Code						
Scope of Work (Check All That Apply	)		-										
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novati				Mini-	Enclosure	e cedure	h Negative			е	
, s						NON	-Exemple	1 / / 0.	id Nort i ile		Abate	ement	
Location of Asbestos-Containing Material (Adams    TO BE ABATED In Facility (13)	CM) Used Mair Custo	ocation ocatio	y y by nce/ staff?	(i.e. th	Description Descri	Material of the main material of the material	(ACM) ion,		Amount (Specify SF or LF)	Removal	Repair	e Encapsulate	Enclosure
	Yes	No	N/A	-	Exterior S	Sidina		-	600 Sf	x			
Exterior Siding			X		LATERIOR	Jiding				1	$\vdash$		
					-			-		_			
			+	-									
Name of Registered Waste Hauler		1000	JDEP V lauler ID	3000 000 000 000 000 000 000 000 000 00	Cubic Yard	S			tered Land	Ifill			
United Containers			2459		3	ato	G.R.O					-	
City, State Elm NJ					Disposal Da 6/20/13				PA 19067				
Completed by Anthony T Perna	Title Presi	dent			Signa	ure				Date 6/2/13			



# or 37

Date of Notification (1) 6/2/13				Building Moulder				2011					56.0			
Agencies Notified	Type Notification	1000	+	Street A		-		-			9 7,7					
EPA DEP DOL	Initial Amended Amendment	:#		City, Sta	te, Zip Co Grove	ode					1 1,		€`			
DOH DCA	Emergency justification) Cancellation	(including			Contact					Te	lephone I	Numb	er			
	Carlocitation				LITY INFO	OPMAT	ION							-		
Name of Facility Where Janet Moulder Priving Street Address		ig Place (3)		TAOI		JAMAT	ION .		of Facility (4) School (K-12) Subchapter 8	) (Oti					307	
267 South Broad S	Street							التبنية	Other (i.e. pri			ercial		-23		es,
Penns Grove NJ 0	8069							1000		2	of Floors		3	ldg. A 5+	.ge	9
County (6) Salem				County (	Code (7) ISE ONLY	)		Curre	nt Use (Prior	if be	eing demo	lishe	d)			
Name of Monitoring Fir	m Hired by Building	Owner (8)		ASCM	l No.		Gentale 27 (10) 100	of Aba	tement Contr	racto	r (9)					
Street Address					-		Street	Addres	SS	-						
City, State, Zip Code								State, Z	ip Code						7.00	20-76
	.,			Telephor			Wes	t Berli	n NJ 0809	1						
	Project Manager for Monitoring Firm						The state of the s	none N 753-9			00727					
Start Date (10) 6/15/13		Schedule 6/16/13		npletion (	Date (11)		Name same		HA Monitor							A
Occupancy Status Duri	ng Abatement (Che	ck Only One	∌)		-		Street	Addres	SS			1				
Abatement Perform	cated During Entire med Outside of Norr home owner will be	nal Facility	batem	nent			City, S	state, Z	ip Code							
Scope of Work (Check	All That Apply)											0010001				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Service Co.	enova emolit				×	Mir	l Containmer ni-Enclosure ovebag Proce n-Exempted	edure					e	
	*	ls I	_ocati	ion,											emen	t
Locatic Asbestos-Containin TO BE Al In Fac (13	g Material (ACM) BATED cility	Used	ormal I Sole ntenai odial S (12) No	ly by nce/		tos Con therma surfa	scription taining N I systems cing, VA miscellar	Material s insula T, or			Amount (Specify SF or LF)		Removal	Repair	e Encapsulate	Enclosure
Baser	nent		100000	x		Pipe	Insula	ation			15 LF		x			
		-								-						
Name of Registered Wa	aste Hauler		TN	JDEP W	aste	Cubic	Yards		Name of R	eais	tered Lan	dfill	_			
United Containers			Н	lauler ID 2459		of Wa			G.R.O.W							
City, State Elm NJ				Dispo 6/17/	sal Date		City, State Morrisvill	le P	A 1906	7						
Completed by Anthony T Perna		Title Presic	lent		TITLE 11. WILLIAM		Signature	0	l			Date				
, , , , , , ,												-,-			- 5	



Date of Notification (1) 6/2/13			Na E	me of Bi	uilding Owr niewski P	ner/Op rivate	erator (2 e Home	<b>2)</b> <b>9</b> 7,377	trus						
	Type Notification			reet Add Dory		117.72			11117-6	A)	140				
EPA DEP X DOL	Initial Amended Amendment #		Ci	ty, State ittle Eg	Zip Code g Harbor	NJ 0	8087				10.				
DOH DCA	Emergency (ir justification) Cancellation	cluding	Na E	ame of C	ontact					Teler	hone Numb	oe <u>r</u>			
			_	FACILI	TY INFOR	MATIC	ON		- 314 (4)						$\dashv$
Name of Facility Where Al Ed Wisniewski Priva Street Address	patement is Taking te Home	Place (3)						Sch Sul	Facility (4) nool (K-12) ochapter 8	) L (Other	r than K-12) commercia	huildin	ae h	omas	
30 Dory Drive								Oth etc Square	.) _		Floors		g. Ag		_
City (5) Little Egg Harbor NJ	08087	102						1000+		1		35-			_
County (6) Ocean			C	ounty Co	ode (7) SE ONLY)			Home			g demolishe	=u) 			
Name of Monitoring Firm	Hired by Building C	wner (8)	_	ASCM	No.			of Abater aco Inc	ment Cont	ractor	(9)				
N/A Street Address								Address lox 329	)						
City, State, Zip Code							City, S	tate, Zip		01				_	
98.340 <del>F</del> 460.10 1004000.000 1.111	Project Manager for Monitoring Firm						Teleph	one No.			License N	0.			
Project Manager for mon							753-98	00 A Monitor		00727					
Start Date (10) 6/14/13		Scheduled 6/21/13	Com	pletion L	ate (11)		same		- Wioriitor						
Occupancy Status During	g Abatement (Chec	k Only One)				70. == 0. =	Street	Address							
Facility Closed/Vac Abatement Perform Other – Describe:	ed Outside of Norn	Period of Abanal Facility H	atem	ent		_	City, S	State, Zip	Code						
Scope of Work (Check A	II That Apply)						_	_							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	nova molit	737747				Mini	-Enclosure	e cedure	n Negative I			е	
			10					14011	-Excinpto	0 ( ) = .			Abate	ement	
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ocati rmal										Ту	pe	
Locatio Asbestos-Containing TO BE AB In Fac (13)	g Material (ACM) BATED ility	Used Main Custo	Sole	ly by nce/	Asbest (i.e.	os Cor therma surf	escription ntaining al systen acing, V miscella	Material ns insula AT, or	(ACM) tion,		Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A		Evt	erior S	idina		1	200 Sf	x			
Exterior	+		X	-		floor ti				100 SF	x				
through	++		+^			- 28000									
Name of Registered W	aste Hauler			NJDEP V Hauler II	Vaste No.		ic Yards /aste		The Automotive and the		tered Landf	16			
United Containers						3	osal Da	to	G.R.O				-		-
City, State Elm NJ						6/6/	/13		Morris	ville F	PA 19067	Date	-		_
Completed by Anthony T Perna		Title Presi	den	t			Signati	ILE 1				6/2/13			

\* Emergency \* NOTI

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

CF 3279

Date of Notification (1) 6/2/13					uilding Ov Killian F			2)	<b>N</b> 3. //-		<u> </u>	a yayanı				
	Type Notification		100000000000000000000000000000000000000	reet Add 22 Ros	ress sewood a	av				5	12.					
EPA DEP DOL	Initial Amended Amendment #				, Zip Code y Twp N		21	ě			17					
☑ DOH DCA	Emergency (in justification)  Cancellation	ncluding	513	ame of C	Contact		100 Auto			Tel	ephone Nu	ımbeı	-			
		Place (2)		FACILI	TY INFOR	MATI	ON	Type of	f Facility (4)	,						
Name of Facility Where A Michael Killian Priva	ate Home	Place (3)						☐ So	chool (K-12	)	er than K-1	12)				
Street Address 222 Rosewood av								X O	ther (i.e. pr	ivate	& commerc	cial b				i, 
City (5) Berkeley Twp NJ 08	3721							Square 1000-	۲	1	f Floors		35-	g. Ag +	е	
County (6) Ocean			C	County Co	ode (7) SE ONLY)			Curren	t Use (Prio	r if be	ing demoli	shed)	V			
Name of Monitoring Firm N/A	Hired by Building (	Owner (8)	-	ASCM	No.		100000000000000000000000000000000000000	of Abate	ement Conf	racto	r (9)					
Street Address							1 7 11 7 11 1	Address 3ox 32	53							
City, State, Zip Code				- <del>////</del>				tate, Zir t Berlir	Code	91	-					
Project Manager for Mon	Project Manager for Monitoring Firm						Teleph	none No 753-98	·	ment Association	License 00727	No.				
Start Date (10)	Start Date (10) Schedule							of OSH	A Monitor	-						
6/3/13 Occupancy Status Durin	a Abatement (Cher	6/6/13	)		w			Addres	s							
Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire	Period of Ab	atem	ent		_	City, S	State, Zi	p Code		***************************************					
Scope of Work (Check A	All That Apply)	-								-34 (1.82)						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			nova moliti					Min Glo	Containmoni-Enclosure vebag Proceedings	e cedure	е				9	
		ls l	ocati	on						17.			1701		ment	
Locatio Asbestos-Containing TO BE AE In Fac (13)	g Material (ACM) BATED ility	Used Mair Custo	ormal Sole ntenar odial S (12)	ly ly by		os Cor therma surf	escription ntaining al system facing, Var miscella	Material ns insula AT, or			Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure
Exterior	Siding	Yes	No	X		Ext	terior S	idina			1000 Sf	-	ĸ			
Exterior	Exterior Siding							- 3				-				
			+-													
						- 100							5.00			
Name of Registered Wa	aste Hauler			NJDEP V Hauler ID		100000000000000000000000000000000000000	ic Yards /aste				stered Lan	dfill				es <del>. alt</del> .
United Containers				2459		2	E703970000		G.R.O		•					
City, State Elm NJ							osal Dat		City, Sta Morris		PA 1906					
Completed by Anthony T Perna		dent				Signatu	re				Date	/13				



Date of Notification (1) 6/2/13	N	lame Eva	of Bui	lding Own yderman	er/Ope Priva	rator (2 te Ho	2) ome		<i>(9/3</i>	No.				
Agencies Notified Type Notification	10.77		Addre					p <sup>2</sup>	1,07-	Ų ,		÷.	?	
EPA Initial Amended Amendment #_	0	City, S Man	State, i	Zip Code /kin NJ 0	8050	V								
DOH justification)	1 3	Name	of Co	ntact		77.			Tele	phone Number	r			
DCA Cancellation		FA	CILIT	Y INFORM	IATION	1								-
Name of Facility Where Abatement is Taking Place (3) Evan Snyderman Private Home Street Address		7.000					Sch	Facility (4) nool (K-12) ochapter 8	(Othe	r than K-12) commercial t	wildin	as h	nmes.	
39 Ronnie Dr						_	Oth etc.	.)		Floors		g. Age		$\dashv$
City (5) Manahawkin NJ 08050		_		1. (7)			1000+		1 if bei	ng demolished	35-	Ε		-
County (6)			nty Coo	e (/) EONLY) _		_	Home	030 (1110)		3		- 0.0wie/1240		
Ocean  Name of Monitoring Firm Hired by Building Owner (8)		AS	SCM N	lo.			of Abater aco Inc	ment Cont	ractor	(9)			600000	
N/A Street Address		_				5.00	Address 3ox 329							
· ·							tate, Zip							
City, State, Zip Code						Wes	t Berlin	NJ 080	91	License No.				
Project Manager for Monitoring Firm		Tele	phone	No.		856-	none No. 753-98			00727				
Start Date (10) Schedule 6/14/13 6/21/13		mple	tion Da	ate (11)		Name sam		Monitor						
Occupancy Status During Abatement (Check Only Or	e)					Street	Address							
Facility Closed/Vacated During Entire Period of Abatement Performed Outside of Normal Facility Other – Describe:	Abater Hour	ment rs			-	City, S	State, Zip	Code						
Scope of Work (Check All That Apply)							_					_		
	Renov Demol						Mini	-Enclosure	e cedure	th Negative Presented			9	
				· · · · · · · · · · · · · · · · · · ·								Abate	ement pe	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Norma ed So ainten stodia (12	iely inance i Star 2)	oy e/ ff?	(i.e. t	os Cont hermal surfa	syster cing, V	on of Material ns insula AT, or aneous)	(ACM) tion,		Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Yes	No	-	N/A		F.de	rior C	idina			1200 Sf	x	-	-	-
Exterior Siding	-	-	х		EXTE	nor S	Siding					-	-	
	-	+							-					
	-	+									1			
Name of Registered Waste Hauler	1	10115	DEP W	(1)(1)(5)(5)(5)(7)(1)		Yards	1	1		stered Landfill			ale a series	
United Containers		Hat 224	uler ID 159	No.	of Wa			G.R.O	ng er ee				-2111	
City, State					Dispo 6/6/1	osal Da 13	ite	City, Sta Morris	ville	PA 19067				
Completed by Title	side	nt				Signat	ure (		_		ate /2/13	E .		

### ch mas

of Notification (1)			Name	of Buildi	ing Owner/O er Private	perator (: Home	2) 23,	12. 11 m						
/13 ncies Notified Type Notification		+	Street	Address hirly L	S		4 ,		()	11 2:3	()			
EPA Initial			City S	State, Zir	o Code					- Ju				
Amendmen	t#	[			in NJ 080				Telep	hone Numbe	r			1
DOH DOH Cancellation	)		Sco								•			-
DOA			FA	ACILITY	INFORMAT	ION	Type of Fa	cility (4)						٦
me of Facility Where Abatement is Tak cott Seider Private Home eet Address	ing Place (	3)					School Subcl	ol (K-12)	10460	r than K-12) commercial l	ouildings	s, hon	nes,	
Shirly Ln.							Square Fe	et	# of	Floors	Bldg.	Age		200
y (5) anahawkin NJ 08050							1000+	(D.)	1 -	ag demolishe				
ounty (6)	-		Cou (STA	nty Code	e (7) ONLY)		Home			ng demolishe	-, 			
cean	na Owner (8	8)	TA	SCM No	).	Name	e of Abateme	ent Cont	ractor	(9)		٠		
ame of Monitoring Firm Hired by Buildin	ig Omnor (	-/					naco Inc							
treet Address							et Address Box 329							_
A					-	City,	State, Zip C	ode						
ity, State, Zip Code						We	st Berlin N	1J 080	91	1				-
roject Manager for Monitoring Firm			Tel	lephone	No.	Tele 856	phone No. 3-753-980	0		License No 00727	). 			
Start Date (10)	Sched	duled	Comple	etion Da	te (11)	Nam	ne of OSHA	Monitor	3633					
					W 0.00 Sec. 1-0.000-	001	ma							
6/14/13	6/21	/13				sar						-		
6/14/13 Occupancy Status During Abatement (G	Check Only	/13 One)					me eet Address							_
	Check Only	/13 One)	atemer			Stre		Code						
6/14/13 Decupancy Status During Abatement (Control of the Control	Check Only	/13 One)	atemer			Stre	eet Address			ith Negative	Pressure			
Facility Closed/Vacated During Er Abatement Performed Outside of Other – Describe:  Scope of Work (Check All That Apply)	Check Only atire Period Normal Fac	/13 One) of Aba cility H	atemer	nt on		Stre	y, State, Zip	Containm	re	ith Negative I	Pressure	2		
6/14/13 Decupancy Status During Abatement (Control of the Control	Check Only	/13 One) of Aba cility H	atemer	nt on		Stre	r, State, Zip	Containn	re scedur	re				
6/14/13 Decupancy Status During Abatement (Control of the Control	Check Only atire Period Normal Fac	/13 One) of Aba cility H	atemer	nt on		Stre	r, State, Zip	Containn	re scedur		ble Proc	edure Abate	ment	
6/14/13 Decupancy Status During Abatement (Control of the Control	Check Only atire Period Normal Fac	One) of Abacility H	atemer lours novatio	on on		Stre	eet Address  y, State, Zip  Full C  Mini- Glov  Non-	Containn	re scedur	re	ble Proc	edure	ment	
6/14/13 Decupancy Status During Abatement (Control of the Control	Check Only utire Period Normal Fac	One) of Abacility H Re De Is I	atemer lours novation	on on yn y y by	Asbestos (i.e. the	City  Descript Containi crmal sys	r, State, Zip	Containm Enclosu ebag Pro Exempte	re scedur	re	ble Proc	edure Abate	ment	Γ
Facility Closed/Vacated During Er Abatement Performed Outside of Other – Describe:  Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Location of Asbestos-Containing Material (AC TO BE ABATED In Facility	Check Only titre Period Normal Fac	One) of Abacility H Re De Is I	atemer lours novation molition ormally if Solely intenan modial S	on o	Asbestos (i.e. the	Descript Containing Co	Full (Mini-Glov Non-otion of ng Material (stems insulat y, VAT, or cellaneous)	Containm Enclosu ebag Pro Exempte	re scedur	re and Non-Fria Amount (Specify	ble Proc	edure Abate Ty	ment pe	Γ
Facility Closed/Vacated During Er Abatement Performed Outside of Other – Describe:  Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Location of Asbestos-Containing Material (AC TO BE ABATED In Facility	Check Only titre Period Normal Fac	/13 One) of Abbility H Re De	atemer lours enovation cocation cormally if Solely intenan odial S' (12)	on on y y y by ce/ taff?	Asbestos (i.e. the	Descrip Containi ermal sys surfacing ther misc	Full of Mini-Glov Non-otion of mg Material (stems insulat y, VAT, or cellaneous)	Containm Enclosu ebag Pro Exempte	re scedur	Amount (Specify SF or LF)	Removal	edure Abate Ty	ment pe	Γ
Facility Closed/Vacated During Er Abatement Performed Outside of Other – Describe:  Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Location of Asbestos-Containing Material (AC TO BE ABATED In Facility (13)	Check Only titre Period Normal Fac	/13 One) of Abbility H Re De	atemer lours enovation cocation cormally if Solely intenan odial S' (12)	on o	Asbestos (i.e. the	Descrip Containi ermal sys surfacing ther misc	Full (Mini-Glov Non-otion of ng Material (stems insulat y, VAT, or cellaneous)	Containm Enclosu ebag Pro Exempte	re scedur	Amount (Specify SF or LF)	Removal x	edure Abate Ty	ment pe	Γ
Facility Closed/Vacated During En Abatement Performed Outside of Other – Describe:  Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Location of Asbestos-Containing Material (AC TO BE ABATED In Facility (13)  Exterior Siding	Check Only titre Period Normal Fac	/13 One) of Abbility H Re De	atemer lours enovation cocation cormally if Solely intenan odial S' (12)	on on y y y by ce/ taff?	Asbestos (i.e. the	Descrip Containi ermal sys surfacing ther misc	Full of Mini-Glov Non-otion of mg Material (stems insulat y, VAT, or cellaneous)	Containm Enclosu ebag Pro Exempte	re scedur	Amount (Specify SF or LF)	Removal x	edure Abate Ty	ment pe	Γ
Facility Closed/Vacated During En Abatement Performed Outside of Other – Describe:  Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Location of Asbestos-Containing Material (AC TO BE ABATED In Facility (13)  Exterior Siding	Check Only titre Period Normal Fac	/13 One) of Abbility H Re De	atemer lours novation molition cocation ormally if Solely intenan indial Si (12)	on on y by coel taff?	Asbestos (i.e. the	Descript Containing The miscontaining The miscon	Full C Mini- Glov Non- otion of ng Material ( stems insulat J, VAT, or cellaneous)	Containm Enclosur Ebag Pro Exempte (ACM)	re ocedured (*) a	Amount (Specify SF or LF)	Removal x	edure Abate Ty	ment pe	Γ
Facility Closed/Vacated During En Abatement Performed Outside of Other – Describe:  Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Location of Asbestos-Containing Material (AC TO BE ABATED In Facility (13)  Exterior Siding	Check Only titre Period Normal Fac	/13 One) of Abbility H Re De	atemer lours  novation continuo continu	on o	Asbestos (i.e. the	Description Containing Thermison Exterior floor	Full C Mini- Glov Non- otion of ng Material ( stems insulat y, VAT, or sellaneous)	Containm Enclosule bag Pro Exempte (ACM) ion,	of Re	Amount (Specify SF or LF)  1200 Sf 400 SF	Removal x	edure Abate Ty	ment pe	Γ
Facility Closed/Vacated During En Abatement Performed Outside of Other – Describe:  Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Location of Asbestos-Containing Material (AC TO BE ABATED In Facility (13)  Exterior Siding through out	Check Only titre Period Normal Fac	/13 One) of Abbility H Re De	atemer lours  novation cocation ormally 1 Solely ntenan odial S (12) No	on on y by coel taff?	Asbestos (i.e. the	Description Containing Thermis of Waster 3	Full C Mini-Glov Non-otion of ng Material (stems insulate, VAT, or cellaneous)  or Siding or tile	Containm Enclosur ebag Pro Exempts (ACM) ion,	of Re-	Amount (Specify SF or LF)  1200 Sf 400 SF	Removal x	edure Abate Ty	ment pe	Γ
Facility Closed/Vacated During En Abatement Performed Outside of Other – Describe:  Scope of Work (Check All That Apply)  ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf  Location of Asbestos-Containing Material (AC TO BE ABATED In Facility (13)  Exterior Siding through out  Name of Registered Waste Hauler	Check Only titre Period Normal Fac	/13 One) of Abbility H Re De	atemer lours  novation cocation ormally 1 Solely ntenan odial S (12) No	on o	Asbestos (i.e. the	Descript Containing Exterior floor Cubic Ya of Waste 3 Disposa 6/6/13	Full C Mini-Glov Non-otion of ng Material (stems insulate, VAT, or cellaneous)  or Siding or tile	Containm Enclosur ebag Pro Exempts (ACM) ion,	of Re-	Amount (Specify SF or LF)  1200 Sf 400 SF	Removal x	Repair	ment pe	

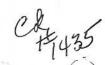
Cht 1437

# State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120) Name of Building Owner / Operator (2)

Date of Notification	(1)					uning C	Milei / Operator	(2)	113				1
200	5/29/2013		-		ence								$\dashv$
Agencies Notified	Type Notific	ation	100		Addres				and the				1
			100		vid D			*# £				-	-
☐ DEP	☐ Initia				tate &								
DOL	☐ Ame						J 08505		ITe	lephor	na Ni	ımhe	r
□ DOH		rgency			of Con				116	epiloi	16 141	IIIIDC	"
☐ DCA	Cand	cellation	F	aul l	Dengl	er						[	
				FAC	CILITY	INF	ORMATION						
Name of Facility W	here Ahatem	ent is Taking Pl	ace (3				Type of Facility	y (4)					
Residence	nore / watern	cite to reading	۵) دی	,			School (K						
Street Address							☐ Subchapt	er 8 (Other tha	n K-12)				1
83 David Drive							Other (i.e.	private & com	mercial buildings	s, hom	es, e	tc.)	
99 David Dilac							Square Feet	# of Floo		ig. Age			
Oit. (F)		County (6)	Col	inty (	Code (7	7)	1000		1	- B	50		1
City (5)			100	arity C	ouc (	,	Current Use (F	Prior if being de	emolished)				
Manahawkin		Ocean					Residential	nor it boiling as	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
		1 2 2 2	(0)		TACC	M No.		mont Contrac	tor (0)				
Name of Monitorin	g Firm Hired	by Building Owr	ier (8)		ASC	IVI INO.	Alpha Envir						
				-			Street Address		IVICES				_
Street Address							2129 Route						
							City, State & Z						
City, State & Zip C	ode						Hamilton, N						
	- Manufacture	F:	Tolon	hono	Numb	or	Telephone Nu		License Nu	ımber			
Project Manager fo	or Monitoring	runi	Leich	110116	Numb	CI	609-847-295		2.00.100 711	0109	1		
O. L. J. Jad Clark D	oto (40)	Scheduled Cor	nnlotic	n Da	to (11)		Name of OSH					W.F.	
Scheduled Start D 6/7//210		6/13/2013	ilbieuc	ni Da	le (11)		EMSL Analy						
Occupancy Status			nhr one	10			Street Address				- 170		
	Duiling Abaca need/Vacated	During Entire P	Period	of Aba	atemer	nt	107 Haddon						
		Outside of Norm					City, State & Z						
Describe:	i i ciloiilica c	Judaide of Homi	ui 110	410	7 (3111 10	, op	Westmont, i	3					
	cupied During	Abatament					Westinone,	40 00 100					
Scope of Work (Cl													
Scope of work (Ci	ICCK all triat a	ibbià)						☐ Full Con	tainment with Ne	gative	Pres	ssure	
	If			Rer	novatio	n		Mini-End					
≥160 sf ≥2			X	1.5.15.55.5	nolition			Glove B	ag Procedures				
M 2100 31 22	.00 11			50.	nonuo.	•			empted and Non-	Erioble	Dro	code	ro
							Description		Amount			ent T	
	Location of		10000	Locat	Used		Asbestos-Cont		(Specify	700	1	T	ypc
	stos-Containi aterial (ACM)			olely			Material (AC		SF or LF)	_		ш	l m
	BE ABATED				ice or		(i.e., thermal sy		038171 NAC 023101	Remova	교	Encapsulate	Enclsoure
	in Facility				Staff?		insulation, surfac	ing, VAT	1/	l ou	Repair	bsu	Sot
	(13)			(12)			or other miscella	aneous)		20	=	ate	120
			Yes	No	N/A								
Exterior			П	M	П	7.77	siding		1000sf	X			
			_	_									
Name of Registere	ed Waste Hau	ıler		N.	DEP V	Vaste	Cubic Yards	Name of Reg	istered Landfill	3 - 13 10 20 1			
l l				Ha	auler ID	No.	of Waste						
ALPHA ENVIRO	NMENTAL			00	03333	30	4	Grows Land	dfill				
City, State						-	Disposal Date	City, State					5000
									2200				
Trenton, NJ							6/15/2013	Morrisville,	PA				
Completed By (Pri				Tit			Signature	1	1	Date			1
Rod Richardson	1			Pr	oject		1	10	////	5/29	/20	13	
				Ma	anage	r	1 1 miles	//	Kla	1			
L					-		40						



Date of Notification	(1)		P	Vame	of Bui	lding (	Owner / Operator	(2)			الهاوي				
	5/29/2013				dence					7 2000					
Agencies Notified EPA	Type Notifica	ation	1 7		Addre	Croconia.	ne		er with	-15/12					
☐ DEP					State &										
□ DOL	Amer Amer						J 08505				1= .		- 51		
□ DOH		gency			of Co						Tele	phor	ie Ni	umbe	31
☐ DCA	Canc	ellation		Paul	Deng	ler					1-				
	J			FA	CILIT	Y INF	ORMATION							-0-20	
Name of Facility W Residence	here Abateme	ent is Taking Pl	lace (3	3)			Type of Facilit								
Street Address							Subchap							1 120	
33 Lynn Ann							Other (i.e							tc.)	
							Square Feet	1	of Floor	S	Bldg.	Age			
City (5)		County (6)	Co	unty	Code (	7)	1000			1			50		
Manahawkin		Ocean					Current Use (	encorre monteces acres	being de	molished)					
-							Residential								
Name of Monitoring	Firm Hired b	y Building Owr	ner (8)		ASC	M No.	Name of Abat Alpha Envir								
Street Address							Street Addres								
							2129 Route	NAME OF TAXABLE PARTY.	-						
City, State & Zip Co							City, State & Z Hamilton, N	IJ 0861							
Project Manager fo	r Monitoring F	Firm	Telep	ohone	Numb	er	Telephone Nu 609-847-295		C-475-1 000-C-7 7 7 1 1	License		ber 109	1		
Scheduled Start Da 6/7//210	2000 %	Scheduled Cor 6/13/2013	npletio	on Da	ite (11)		Name of OSH EMSL Analy		itor			72.			
Occupancy Status	During Abate	ment (Check or During Entire P	nly on	e) of Ab	ateme	nt	Street Addres	SS							
		utside of Norm							le						
Describe:	cupied During					•	Westmont,								
Scope of Work (Ch			-												
	se.			Da		_		the same of the sa	-ull Conta Viini-Encl	ainment with	i Nega	itive	Pres	sure	<u> </u>
23 sf or ≥3  ≥160 sf ≥20			닖		novatio molitio					osure g Procedure					
≥160 sf ≥20	ט וו		$\boxtimes$	Dei	HOHUOI	1							722	80	
								-		npted and N					
	ocation of stos-Containing			Local	iion Used		Description Asbestos-Conf			Amount (Specify		ADa	teme	ent i	ype
	terial (ACM)	ig .		olely			Material (AC			SF or LF				m	_
	BE ABATED				nce or		(i.e., thermal sy			0. 0	<b>'</b>	Remova	ਨ੍ਹ	nca	Enclsoure
	in Facility		Cust		Staff?		insulation, surfac	ing, VA				ig	Repair	psc	Sol
	(13)			(12)			or other miscella	aneous)	)		1	8	=	Encapsulate	ē
			Yes	No	N/A						$\dashv$	K/	_		-
Exterior							siding		1	.000sf			Ц	Ц	
Name of Registere	d Waste Hau	ler			JDEP V auler IC		Cubic Yards of Waste	Name	of Regis	tered Landfi	II				
ALPHA ENVIRO	NMENTAL			00	03333	30	4	Grow	s Landf	ill					
City, State							Disposal Date	City, S	itate						
Trenton, NJ							6/15/2013	Morris	sville, P	Α					
Completed By (Pring Rod Richardson				Tit			Signature	1		1	- D	ate			
Nou Richardson					oject anage	r	To a		1	Kh	5	129	201	13	



Date of Notification	(1)		N	ame c	of Buildi	ing O	wner / Operator	(2)				1	
	5/29/2013	*	C	S Bu	ilders	LLC		-612 JUN -5	100 000		<del></del>		
Agencies Notified  EPA	Type Notific		5	45 Be	eckett	Rd -	Suite 204		e. 20.		:=1		
□ DEP	☐ Initia	al			tate & Z				Note that				1
DOL .		ended	S	wede	esboro	NJ	08085				- 51		-1
□ DOH	☐ Eme	ergency	N	ame o	of Conta	act			1	Telephon	e N	-	Г
DCA		cellation	R	on S	molsk	is			1				
				FAC	ILITY	INFO	RMATION						
Name of Facility W	here Abaten	nent is Taking P	lace (3)				Type of Facility						
Vacant Building			27. 8				School (K-						
Street Address							Subchapte	er 8 (Other tha	n K-12)			- \	
7025 Colonial H	wy						Other (i.e.			gs, nome	es, et	G.)	
	•						Square Feet	# of Floo	rs t	3ldg. Age			
City (5)		County (6)	Cor	inty C	ode (7)		3000		1		70		
Pennsauken		Camden					Current Use (P	Prior if being de	emolished)		d		
Name of Monitorin	g Firm Hired	by Building Ow	ner (8)		ASCN	No.	Name of Abate						
Street Address				1.			Street Address 2129 Rt 33			•			
City, State & Zip C	ode						City, State & Z			11.5 %			
Project Manager fo	ect Manager for Monitoring Firm  eduled Start Date (10) Scheduled				Numbe	er	Telephone Nu 215-295-100	mber	License I	Number 0109	1		
8 ( 185 - 1854)	eduled Start Date (10) Scheduled				to (11)		Name of OSH			0.00	-		
6/11/20	124, 13, 13, 14, 15				te (11)		EMSL Analy	tical					
Occupancy Status Facility Cle	During Aba	tement (Check of d During Entire	only one Period	e) of Aba	atemen	t	Street Address 107 Haddon	Avenue			-		
Abatement Describe:	t Performed	Outside of Norm	nal Ho	ırs —	7am to	3pm	City, State & Z Westmont, I						
		ng Abatement											
Scope of Work (C										Na matica	Dros		en.
					22				tainment with	negative	Pies	sure	8
≥3 sf or ≥3	3 If		$\boxtimes$		novation			Mini-En		9			
≥160 sf ≥2	260 If		$\boxtimes$	Der	molition				ag Procedures		_		
									empted and No				
	Location of			Locat			Description		Amount (Specify	Aba	atem	ent i	ype
	estos-Contai				Used		Asbestos-Cont Material (AC		SF or LF)			m	١.,
	laterial (ACM D BE ABATE			olely	nce or		(i.e., thermal sy		,	Remova	교	Encapsulate	Encisoure
1	in Facility	<u>.u</u>			Staff?	į	insulation, surfac	ing, VAT		Von	Repair	DSU	Soc
	(13)			(12)			or other miscella	aneous)		<u> 00</u>	-	ate	3
	10.00		Yes	No	N/A					F2	<del> </del>		-
Throughout				X			VAT		900sf				Ш
N	and Manta !!	oulor		INI.	IDEP V	Vaste	Cubic Yards	Name of Rec	istered Landfil				
Name of Register				H	auler ID 033330	No.	of Waste	Grows Lan	80				
ALPHA ENVIRO	ONMENTA	L		lut	UJJJJU		Disposal Date	City, State		<del></del>			0.028
City, State							06/16/2013	Morrisville,	PΔ	2.5			
Trenton	100			1	M-			1 alor i is ville,		Date			
Completed By (P Rod Richardso				100	itle M		Signature	111		5/2		13	
							A a	te 1	Rola	1			

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

Date of Notification (1)	34 20 2012				Name of	Building	Owner/Oper	rator (	2)	à.	, _				
*	May 30, 2013						DMBe	Kus C	Construcțio	13 111	11 2	_/	/ 5	>	
Agencies Notified  [X] EPA		Notifica			Street A	ddress	45 Hur	nt Lai	ne		~6 AM	€: 5	/>		
[ ] DEP [x] DOL	1 1	ided Noti: idment #_	lication		City, Sta	ite, Zip Coo		an N	IJ 08558				•		
[] = ==		gency (in	cluding		272		SKIIIII	an, 1	13 06556	m-tt-	igni:	- 7			
[x] DOH [] DCA	1000	cation) ellation			Name of	Contact Dave				Telepho	ne Number		_		
				FACI	LITY I	NFORM	ATION		31						
Name of Facility Where A		g Place (3	)					Тур	e of Facility (4		-1 (1-12)				
Res	sidence								[ ]		ol (k-12) hapter 8 (otl	her thai	n k12)		
Street Address	West Pompan	o Way							[x]	Other	r (i.e., privates, etc.)			ial buil	dings,
City		County	(6)		County C	Code (7) USE ONL	v)	Squ	are feet	# 01	Floors	Bldg	g. Age		
Toms River	Twp.	Ocean	i		(SIAIE	USE ONL	1)	Curi	rent Use (Prior Resid	57.50	demolished)	)			
Name of Monitoring Firm	Hired by Building	Owner (8	3)		ASCM N	0.	Name of	Abate	ment Contract						-
N/A									Guard	dian Co	ntracting,	Inc.			
Street Address							Street Ad	ldress	1889	Route 9	), Unit 61				
City, State, Zip Code					-1		City, Stat	te, Zip	Code		New Jers	ey 08'	755-12	271	
Project Manager for Moni	toring Firm		Telephone N	lumber			Telephon 732-349	9-993	32		License N 00624	lumber			
Scheduled Start Date (10) 5/31/13			Scheduled C 6/3/13	ompletio	on Date (	11)	Name of	OSHA	A Monitor E.M.S	S.L. An	alytical				
Occupancy Status During [ x ] Fac	Abatement (Check ility Closed/Vacate			d of Aba	ntement		Street Ad	ldress	1056	Stelton	Road				
	tement Performed er – Describe	Outside o	f Normal Fa	cility Ho	ours		City, Stat	te, Zip		taway, 1	New Jerse	y 088	354		
C CWl- (Charle all	that annie)			-190752			[ ]	F	full Containme	ent with N	Jegative Pre	ssure			
Scope of Work (Check all	tnat apply)						ii		Mini-Enclosure		reguirre x re				
[ ] >3 s	of or ≥3 lf		[ ]	Renovat	ion		[ ]		Glovebag Proc			200 88			
[x] ≥16	0 sf or ≥260 lf		[ x ]	Demolit	ion		[x]	N	Non-Exempted	(*) and 1	Non-Friable	Proced	ure		
												Aba	tement	Туре	
Location	o.£		Is Location ormally use				Descriptio pestos-Con		nσ		Mount	R	R E	E	E
Asbestos-Containing N	23.127	IN	Solely by	,u			Material (A			(SI	ecify SF	E M	P	N C	N C
TO BE ABA	TED	Maint	enance/Cus	todial			, thermal				or LF)	0	A	A P	L
in facilit	у		Staff (12)			ins	ulation, sur VAT, o		ıg,			V	R	S	s
(13)			(12)			oth	er miscella		ıs)			A		U	U
		YES	NO	N/A								L		L E	R E
Exterior			Х		Asbe	stos debi	is					Х			
												_	_		-
													-		-
						0.11	1 000	. 1	Name -CD - 1	atom d T -	ndfill				
Name of Registered Waste Guardian Co	Hauler ontracting, Inc.	N	JDEP Waste 20	Hauler 223	ID No.	Cubic Y	ards of Wast	ie	Name of Regi T.R.R.F.	stered La	indiiii				
City, State	New Jersey			Dispos 6/4/13			City, St	ate own.	Pennsylvai	nia	,				
Completed by (Print or Ty	pe)	Title			Signat	ure /	1	/	//		1	Date		2	
Nicholas Fer	nicola		t Manage			Y	in	01	10			3/3	0/201		
		*D	o not use th	nis form	for asb	estos lice	nsure exem	pted	activities.						

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

Date of Notification (1) May 30, 2013		Name of Building		erator (2) li Homes 29/2	. Ch	21	7	7 0	 L
	tion I Notification nded Notification	Street Address		Mantoloking Road	°° ≥°	- 74			
[x] DOL Amer	ndment # gency (including	City, State, Zip C		, New Jersey 0872	3	50			
I I DCA	ication) ellation	Name of Contact Rich	Zarrilli	r	elephone Number	~	Λ	-1	
<u> </u>	FA	CILITY INFORM	AATION			-	-		
Name of Facility Where Abatement is Taking Residence				Type of Facility (4)	School (k-12)	J. 41	1.12)		-
Street Address 138 Newark Avenu	ue			[x]	Subchapter 8 (or Other (i.e., priva homes, etc.)		0.00	ial bui	ldings,
City	County (6)	County Code (7) (STATE USE ONI	.Y)	Square feet 800 sf	# of Floors	Bldg	, Age	50	
Lavallette	Ocean			Current Use (Prior if Resider		)			
Name of Monitoring Firm Hired by Building N/A	Owner (8)	ASCM No.	Name of	Abatement Contractor		Inc.			
Street Address		- La consenio	Street A	ddress	oute 9, Unit 61				
City, State, Zip Code	-		City, Sta	ite, Zip Code	iver, New Jers		755-1	271	
Project Manager for Monitoring Firm	Telephone Numb	er		ne Number 9-9932	License N 00624		33-1.	2/1	
Scheduled Start Date (10) 5/31/13	Scheduled Compl	letion Date (11)		OSHA Monitor	L. Analytical				
Occupancy Status During Abatement (Check		Abatement	Street A	ddress	elton Road				
	Outside of Normal Facility		City, Sta	te, Zip Code Piscatav	way, New Jerse	y 088:	54		
Scope of Work (Check all that apply)		-8	[ ]	Full Containment Mini-Enclosure	with Negative Pro	ssure			
[ ] >3 sf or ≥3 lf [ x ] ≥160 sf or ≥260 lf		vation olition	[ x ]	Glovebag Procedu Non-Exempted (*		Procedu	re		
						Abate	ement '	Type	
Location of Asbestos-Containing Material (ACM)  TO BE ABATED in facility (13)	Is Location Normally used Solely by Maintenance/Custodia Staff (12)  YES NO N/A	As l (i.e ins	Description bestos-Con Material (A., thermal sulation, sur VAT, of er miscella	ntaining LCM) systems rfacing, or	Amount (Specify SF or LF)	R E M O V	R E P A I R	E N C A P S U L	E N C L O S U R
Exterior	X X	Asbestos sidir		2300	250 sf	L X		Е	Е
Exterior	^	Asbestos sidii	ıg		230 81	A			
Name of Registered Waste Hauler Guardian Contracting, Inc.	NJDEP Waste Haule	er ID No.   Cubic Ya	ırds of Wast	e Name of Register	ed Landfill				
City, State Toms River, New Jersey		osal Date	City, Sta						
Completed by (Print or Type)	Title Project Manager	Signature	hor	The ter	1	Date 5/30/	/2013		

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

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

Date of Notification (1)  May 30, 2013				Name o	f Building (		rator (2) Constru	action	2813	Ż.	フィ	j	
Agencies Notified Type of Notifica  [ x ] EPA [ ] Initial	Residence  15 East Shell Way  County (6)  River Twp. Ocean  In Firm Hired by Building Owner (8)  N/A  de  or Monitoring Firm Telephon  ate (10) Schedule (31/13 During Abatement (Check only one) Facility Closed/Vacated During Entire Per Abatement Performed Outside of Normal Other – Describe						merican	a Court	2013		5	11/2	: 50
[x] DOL Amen	District and Section	luding		City, St	ate, ZipCoo		River, N	NJ 08753		-/65			4
[x] DOH justifi	cation)			Name o	f Contact Sean C	Carter		r	elephone Number				
			FAC	ILITY I	NFORM	ATION							
Name of Facility Where Abatement is Taking Residence	g Place (3)				1275		Type of	f Facility (4) [ ] [ ]	School (k-12) Subchapter 8 (ot	her tha	n k12)		
Street Address 15 East Shell Way								[x]	Other (i.e., priva homes, etc.)			ial buil	dings,
City	County	(6)		County ( (\$TATE	Code (7) USE ONL	Y) .		00 sf	# of Floors		g. Age	0	
Toms River Twp.	Ocean					7	Current	Use (Prior i Resider	f being demolished	)			
Name of Monitoring Firm Hired by Building	Owner (8)	)		ASCM N	lo.	Name of	Abateme	nt Contracto		Inc			
Street Address						Street Ac	ldress		oute 9, Unit 61	11101			
City, State, Zip Code		-				City, Sta	te, Zip Co	ode	River, New Jers	ev. 08	755-1	271	
Project Manager for Monitoring Firm	T	elephone l	Number			Telephor 732-34	ne Numbe 9-9932		License N 00624			2/1	
Scheduled Start Date (10) 5/31/13	5/3 1/13 cy Status During Abatement (Check only one)			on Date (	11)	Name of	OSHA M		L. Analytical				
Occupancy Status During Abatement (Check  [ X ] Facility Closed/Vacate	d During I	Entire Perio			•	Street Ac	ldress te, Zip Co	1056 S	telton Road			*	
Other – Describe								Piscata	way, New Jerse	y 088	354		4
Scope of Work (Check all that apply)						[ ]		Containmen i-Enclosure	t with Negative Pre	ssure			
[ ] >3 sf or ≥3 lf [ x ] ≥160 sf or ≥260 lf		[ ] [x]	Renovat Demolit			[ ] [x]		ebag Proced -Exempted (	ure *) and Non-Friable	Proced	ure		
										Aba	tement	Туре	
Location of Asbestos-Containing Material (ACM)  TO BE ABATED in facility  (13)	No	s Location rmally us Solely by nance/Cu Staff (12)	sed		Ast N (i.e. inst	Description Destos-Cor Material (A , thermal sillation, su VAT, cor er miscella	taining (CM) systems rfacing, or		Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E
Exterior		X		Asbe	stos sidin	g			650 sf	X	_		
											-		
											-		
	1 277	DED W	. 771	IDMa	Cubic Va	rda of Wood	la Na	ne of Degiste	ered Landfill				
Name of Registered Waste Hauler Guardian Contracting, Inc.	NJ	DEP Waste 20	e Hauler 0223	ID No.	Cubic Ya	rds of Wast		ne of Registr	ned Landilli				
City, State			Dispos	al Date		City, St	ate	nnsylvani	2				
Toms River, New Jersey Completed by (Print or Type) Nicholas Fernicola	Title Project	Manage	6/4/13 er	Signat	ure	(hi	V.	- P		Date 5/3	0/201	3	

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

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

r v.		Name of Building	Owner/Oper	rator (2)	73	×.			
Date of Notification (1) May 30, 2013		Name of Building	DnA D	emolition	ch	217	48	3	
A LIM	Notification	Street Address		Camplain Road	4	0	M,	),	
[x] DOL Amend	led Notification Iment # ency (including	City, State, Zip C	Hillsbo	orough, NJ 0884		) 1977:		<u></u>	
[ x ] DOH	ation) Ilation		nio Dimuz	io	Telephone Number		·.		
	FA	ACILITY INFORM	MATION						
Name of Facility Where Abatement is Taking Residence	Place (3)			Type of Facility (4	School (k-12) Subchapter 8 (other	er than k	12)		
Street Address 1914 Winding Bro	ok Way			[x]	Other (i.e., private homes, etc.)			buildi	ngs,
City	County (6)	County Code (7) (STATE USE ON	LY)	Square feet 2500 sf	# of Floors	Bldg. A	80		
Scotch Plains	Union			Resid					
Name of Monitoring Firm Hired by Building	Owner (8)	ASCM No.	Name of	Abatement Contrac Guar	tor (9) dian Contracting, l	Inc.			
N/A Street Address			Street A	ddress 1889	Route 9, Unit 61				
City, State, Zip Code			City, Sta	ate, Zip Code Toms	s River, New Jerse	y 0875	5-127	1	
Project Manager for Monitoring Firm	Telephone Num	ber		ne Number 19-9932	License No 00624	umber			
Scheduled Start Date (10)	Scheduled Com 05/30/13	pletion Date (11)		f OSHA Monitor	S.L. Analytical				
[ ] Abatement Performed		ity Hours	Street A	1056	Stelton Road ntaway, New Jerse	y 0885	4		
Scope of Work (Check all that apply) $ \begin{bmatrix}                                   $	1 1	enovation emolition		Mini-Enclosur Glovebag Pro			e		
						Abate	ment T	ype	
Location of Asbestos-Containing Material (ACM)  TO BE ABATED in facility (13)	Is Location Normally used Solely by Maintenance/Custo Staff (12) YES NO N	dial	Descript Asbestos-Co Material (i.e., thermal insulation, s VAT other misce	ontaining (ACM) al systems surfacing, , or	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L	E N C L O S U R E
Basement	X	Asbestos p	ipe insulat	ion	30 lf	X			$\vdash$
									-
	NJDEP Waste I	Jouler ID No.   Cubi	c Yards of W	aste Name of Re	egistered Landfill	لــــــــــــــــــــــــــــــــــــــ		App. 1920	
Name of Registered Waste Hauler Guardian Contracting, Inc	. 202	23	3	T.R.R.I					
City, State Toms River, New Jersey		Disposal Date , 05/31/13 Signature	Tull	lytown, Pennsylv	vania	Date 5/20	)/2013		
Completed by (Print or Type) Nicholas Fernicola	Project Manager	\ \ /	licensure es	tempted activities.	1	3/30	// 2013		
	*Do not use thi	is form for asvestos	itelianie ex	P					

\* Emergency \*

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

CK 3274

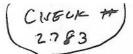
		T 51		ilding O	201/02	orator (2)			2015		20			
Date of Notification (1) 5/31/13	-38	G	eorge S	uilding Owi Simonka	(Priv	ate Hor	me)		<del>88</del> 13 (	1/1/2 C =		94		
Agencies Notified Type Notification			reet Addr	ess ng Beacl	h Blv	d				. J	Ý <sub>2</sub> .	Α.		
EPA Initial		11		Zip Code					4	712 - 22	<u> </u>	नेट्र		
EPA Initial Amended Amendment #		L	ong Be	ach Twp	NJ C	8008				44.77	78.			_
Emergency (I	nciuaing	1	ame of C	ontact					Tele	phone Number				
DOH justification)  Cancellation		G	eorge	TY INFOR	MATIC	N N					_=_			
Name of Facility Where Abatement is Taking	Place (3)		FACILI	TIMPOR	MATIC	7	Type of	Facility (4	)					
George Simonka (Private Home)						[	Sch	nool (K-12	?) R (Othe	er than K-12)				
Street Address							Oth	er (i.e. pr	ivate 8	commercial	ouildin	gs, h	omes	•
5504 Long Beach Blvd					_		etc Square I		# of	Floors		g. Ag	е	
City (5) Long Beach Twp NJ 08008							1000+		2		35	+		
County (6)		C	ounty Co	ide (7)			Current Home	Use (Prio	r if bei	ng demolished	d)			
Ocean		100						ment Con	tractor	(9)				_
Name of Monitoring Firm Hired by Building ( N/A	Owner (8)		ASCM I	NO.			co Inc		.,	(-)		٠		
Street Address	<del></del>						Address							
1							ox 329							
City, State, Zip Code	× **					City, St	ate, Zip Berlin	NJ 080	91					
- List - Landaina Firm		- [ ]	elephon	e No.	Selkino-		one No.			License No.				
Project Manager for Monitoring Firm		'	Cicpitoti	, ,		856-7	53-98	00		00727				
Start Date (10)	Scheduled	Com	pletion D	ate (11)		Transfer of the second		Monitor						
5/31/13	6/3/13						Address		-					
Occupancy Status During Abatement (Chec						Succe	Add: 033							
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr	Period of Ab nal Facility H	atem	ent			City, St	tate, Zip	Code						-
Other – Describe:														
Scope of Work (Check All That Apply)						Г	1 =	Containm	ent wi	h Negative P	ressur	е		
≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	-	novat moliti				-	Mini	-Enclosur	e			_		
2100 31 01 2200 11						×	Glov	ebag Pro	cedure d (*) a	nd Non-Friabl	e Prod	cedur	е	
	lel	ocati	on									Abate	emen pe	t
Location of	- No	ormal	ly		D	escription	of					Γ.,		Γ
Asbestos-Containing Material (ACM)		Sole		Asbest	os Cor	ntaining N al system	/laterial s insulat	(ACM) tion.		Amount (Specify	R	R	Enca	1 5
TO BE ABATED In Facility	Custo	dial 5 (12)	Staff?	(1.0.	surf	acing, VA	T, or	35131	1	SF or LF)	Removal	Repair	Encapsulate	Enclosure
(13)	-	_	1		otner	miscella	leous				a a	-	ate	6
	Yes	No	N/A			C:	dir.«		-	800 SF	x			+
Exterior Siding			X		EX	erior Si	ung				+	-	1	+
									-		-	-	+	+
			-						-		+-	-	-	+
			1		Cut	la Varda		Name	f Regi	stered Landfil	1		<u> </u>	_
Name of Registered Waste Hauler		1	NJDEP V Hauler ID		of W	ic Yards /aste		G.R.C						
United Containers		2	2459		3			City, St						
City, State Elm NJ					6/3/	osal Date /13	е	Morris	sville	PA 19067				
Completed by	Title					Signatu	re	pi <sup>te</sup>		1 70	ate /31/1	3		
Anthony T Perna	Presi	dent					_			5	01/1			



Sate of Notification (1)				E	BA	ng Owner/Operato		TING	`6` ·	et sa	
Agencies Notified  Agencies Notified  Agencies Notified  Agencies Notified	Type Notificatio	#	-	City, State	55 2.Zip	Rr, 50	= LD . N I	2 ·		**/	}. <u>\$</u> Ω
□ DON .	Emergency (			Name of (	Conta S n	uce Brei		Telephone Num	ber		
Name of Facility Where	Abatement is Taki	ng Place	(3)	FACILI	ITINI	FORMATION		2) 8 (Other than K-12			
121	N. 32 nd	5+,					homes, etc	# of Floors		dings dg A	
Jounty (6) ATL	ANTIC				ode (	7) (STATE	I —	Prior if being demoli	shed,		
Name of Monitoring Firm  Stree: Address	n Hired by Building	Owner	A	SCM No		Street Address	ment Contractor (S	NC,			
State Zip Code				<u>;                                    </u>		City, State, Zip C	S,SPRUC Code PLE SHA	DE NIJ	08	: 5	2
Project Manager for Mo				hone No.	_	Telephone No.	9-0472	License No	77:		
Start Date (10)  6// 13/  Occupancy Status Duni	13 6	5/2	0/	on Date (1	1)	Super Address	GPH KI				
	ed Dunng Entire Po	enod of A	Abatem	ent	_	3 6 9 Crty, State, Zip C	ode	100= 200.		<u> </u>	
5cope of Work (Check a 25 51 or 25 ft 2160 st or 2260 ft	all that apply)		novation notition	1		Mini-End	ag Procedure	egative Pressure	ure.		
Location	ot.	No	ocation mally Solely	Dy		Description of			10000000	Larei 1 /1	
Asbestos-Containing N TO BE ABA IN Facility (13)	Matenal (ACM) <u>FED</u>	Cus Si	tenance stodial taff?			os Containing Mal thermal systems i surfacing, VAT, other miscellaned	nsulation, or	Amoun' (Specity SF or LF)	Removal	Repair	Endocate
5 D 11	10	Yes	No	Х	TI	2ANSITE		20004	*		
				=							
K Lame of Registered War	TNC,		Hat	DEP Waste uler ID No 7 9 0 4		Cubic Yards of Waste		istered Landfili	1		
T. S. Ciaro	SHADE,		-1			Disposal Date	City. State	SAUTVILL	_ =	W;	7.
Joseph K	LEMM _	V	119	)		Signature	er Kelin	m Date	2/	13	

#### MO#20613932122

Date of Natification (1)	,			Vame o	of Building	Owner/Or	perator (2	2812			-		
Date of Notification (1)	03 / 13				Schnoll		(	" " JAM.	E 1 2:50				
Agencies Notified	Type Notification  Initial			Street	Address				45° 2:50,				
☑ DOLWD	Amended		100		kman Roa tate, Zip Co			- No 4 / 1/20 -					
□ DHSS	Amendment #_												
☐ DCA	Emergency (inc	cluding			it, NJ 079 of Contact	01			Telephone Numb	er			
(NJAC 5:23-8)	justification)  Cancellation							8					
	Cancellation		I		Schnoll		TION				-	-	•
			(0)	FAC	ILITY IN	FURINA	IION	Type of Facility	(4)		_	-	
Name of Facility Where	e Abatement is Taking	Place	(3)					School (K-12					
Private house								Subchapter 8	(Other than K-1 2)				
Street Address									rivate and commerc	cial bu	lding	S,	
23 Beekman Road								homes, etc.) Square Feet	# of Floors	Blo	ig. Ag	10	
City (5)								oquare rect	<i>"</i> 0, , , , , , , ,		9.7%	, -	
Summit, NJ 07901				Count	y Code (7) (	STATE //S	SE ONLY)	Current Use (Pr	ior if being demolis	hed)			
County (6)				Count	y code (1) (	OTATE OC	L OILLI)	Carron Coo (i i	ion in boning demand	,,,,,,			
Union Name of Monitoring Fig.	em Hirod by Building (	Juner (	R) I	ASCM	No	Nome o	f Ahateme	ent Contractor (9)	· · · · · · · · · · · · · · · · · · ·			i si manian	
Name of Worldoning Fi	in fined by building t	JWIICI (	"	43CIVI	NO.			ent contractor (a,					
Observation and the same						Gr Tech Street A							
Street Address								1202					
City State Zin Code			-				lley Rd # ate, Zip Co	and the second s					
City, State, Zip Code			1	4 61		200							
Project Manager for M	onitoring Firm		Tole	phone	No	Telepho	NJ 0747	70	License No.				
Project Manager for M	officining i iiiii		1616	priorie	NO.				01127				
Start Date (10)	Scher	duled C	omolet	ion Da	te (11)	973-638 Name o	f OSHA N	Monitor	01127		Manager at a second		400 MARK -
06 / 13		06 /	1000			WALL CONTRACTOR							
				- ' -		Envirov Street A		onsultants,Inc					-86
Occupancy Status Dur  Karality Closed/Vac				ment		7/20 7/20		D I DII //	26 5				
Abatement Perform					cribe		Vagaraw ate, Zip C	Road, Bldg .#	33 E		-		
Time of Abatement	:P	M/	_PM_		AM		wn, NJ 0						
Scope of Work (Check	all that apply)		NAME OF TAXABLE PARTY.	NEWSTRANS		H	Clean u	p and decontamin					
		<b>⊠</b> Re	novati	on		H	Mini-Enc	tainment with Ne losure	ž.				
2 160 sf or 260 lf			molitic			$\boxtimes$	Gloveba	g Procedure	Tent with Negative	Press	ure		
		· ·	PARAMET.				Non-Exe	empted (*) and No	on-Friable Procedu	response	1		
		11 - 117	Locat Norma			D-				Ab		ent T	-
Locati Asbestos-Containii		Use	d Sole	ly by	Asbe		scription of taining Ma	aterial (ACM)	Amount	Re	Repair	Encapsulate	Enclosure
TO BE A	BATED	50.000	intena todial			., therma	systems	insulation,	(Specify	Removal	pai	aps	losi
IN Fa		Cus	(12)	otan:			cing, VAT miscellane		SIF or LF)	<u>a</u>		ula	J.G
(1.	5)	Yes	No	N/A	1	Other	moodiane	,043)				é	
<u> </u>		T Tes		X	Ding ing	alation			90 SF	X	П	П	П
Basement		+=	믐	-	Pipe inst					-			H
Garage			Ш	X	Pipe inst	ulation			60 LF	X	Ц		Ш
			П	П									
Name of Registered V	Vaste Hauler	1	NJI	DEP Wast	e Hauler ID No.	Cubic Ya	irds of Was	te Name of Regi	stered Landfill	-	lossano	Araba tive th	democratic
			1,	00227	05	TB	D	T.R.R.F. Inc					
Gr Tech LLC City. State			<u>i</u>	00337	0.0	Disposa		City, State	274.14.				
0.00000								Section & Constitution	) A				
Wayne, NJ 07470	Ŧ\ T=:	la.		523		TB		Tullytown, F		ate	-		
Completed By (Print o	or Type) Tit	16				SI	gnature	te ver					
N.Jevtic	Ov	ner					/RU	the Men	106	/03/20	113		
ASB-41							1/						



Date of Notification (1	11(13		١.	lame o		Owner/Operator (		. : 28/2	
Agencies Notified	Type Notification		S	Veel A	ddress	-5 FRE		ALE VA	
) & A	☑ initial .		L				EMORF		2
] ∞₽ ] ∞₽	Amendment #		10	ity, Sta	Ie, Zip C	de 1000BIN	= NIT	,08220	44
	Emergency (in	ncluding	<u>_</u>			00717110		Talantona Number	<del></del>
) DOH -	justification) Cancellation		1,		Contact	FISHER			· h
			_اــ						<u>-</u>
				FACIL	או אדי	HOTTAKK			
ame of Facility Wher	e Abatement is Takin	g Place (3	3)		TATE OF THE SECOND		Type of Facility		
RES	IDENCE						School (K-12		
reel Address 7.1	2 78TH ST		· _				Other (I.e., pr	ivale & commercial	pulangs
	C /6111	<u> </u>					Square Feet	T of Floors	Bidg Age
ry (5)	VALON						1000	1 2	40+
			-	County	Code (7	STATE	Current Use (Pr	for I being demousn	ed)
ouniy (6) CAPE	MAY			USE O			VA	CANT	
UNF 4	U J. Duilding (	No.8/	-	CM No	o. T	Name of Abatem	ent Convector (9	)	
	m Hired by Building	JWII GI	1			KLEM	co IN	CI	
<u> </u>	7/1		-1-			Sveel Address		- 1 -	
reet Address							. SPRU	CE AVC.	
7.0.7						Ciry. State, Zip C	οσ <sub>0</sub>	- 11 T A	805 - =
iy, State, Zip Code			•				13 SHD	License No.	000
deci Manadai loi M	lonitoring Firm	1.	Telep	none N	0.	Telephone No.	19-047		4
decimalador in						100114	Inning.		
an Date (10)	Sche	dried Col	mplelk	on Date	(11)	Name of USPA	OKALEN	M	
6/13/1		/20		3					
coupancy Status Du	ring Abatement (Che	ck only o	റം)			7405	SPILUC	モハ いき・	
Teache ClosedVac	cated During Entire P	enod of A	DSIGNI	ieni					
Abatement Perform	ned Outside of Norma	al Facility	Hours			ΛΛΛΩ:	E SHAD	E, N, J,	08052
Ouner - Describe:					=_				
cope of Work (Chec	k all that apply)					Full Co	ntainment with N	egative Pressure	
7 > 3 £[or ≥ 3 II		Ren	ovatio	n.		<u> </u>	ag Procedure	0	
2160 st or 2260 H		Ø Deu	noti ton			MON-E	cempted (*) and i	Non-Friable Procedu	ADa.emer
			ocalio						· (**
		Used	maly Soleh			Description	ol	Amount	_
Localin Aspesios-Containe	on of	Main	Lenan	∞/ <b>\</b>	Asbe	sios Containing M thermal systems	insulation.	(Specity	Removal Removal
TO BE A	BATED		is lodia	٠	(1.6	surfacino, VA	1,01	SF & LFI	fingual of Removal
IN Fax			(12)			other myscellan	eccs)		1 3
(1)	· ·	Yes	Но	NIA					<del>-   -   -   -   -   -   -   -   -   -  </del>
(13				X		SIDING	gara a managara a la sa	8000	Y
985000		-			100000				
	,			^					
99,000	, E								++
5	, E .	-							
10	, E .						Name of B	Registered Landfill	
GARAG		-		JOEP	Waste ·	Cubic Yards	Name of F	Registered Landfill	
CARAG	Waste Hauler			UOEP Sauler I	O No.	01 Waste	C,1	4,C,M,C	١, ١٨٠
CARAB  Name of Registered  KLEM	Wasie Hauler			JOEP Jouler 1	O No.	of Waste	C,1	4,C,M,C	١, ١٨٠
Name of Registered  K & M  Cin State	Wasie Hauler			JOEP Jouler 1	O No.	Osposal Oale	C, Ciry. State Woo	7,C,M,C	N.J.
Name of Registered  KLEM  Ciny State  MAPLES	Wasie Hauler CO INC, IN O DE, N	5,0	80	JOEP Hauler II	0 No. 0 Y	Osposal Date	C, Ciry. State Wood	7, C, M, C	N.J.
Name of Registered  K & M  Cin State	Wasie Hauler CO INC, IN O DE, N	5,0	80	JOEP Jouler 1	0 No. 0 Y	Osposal Date	C, Ciry. State Woo	7, C, M, C	N.J.

.

*;*; •

ck 4483

Date of Notification (1)			Nan	ne of Built	ing Owner/Operator	r (2) L ;	-/4		Up.				
6-3-13			14	K. Kunimichi									
Againsy Nettled	Type Notification	- Ti	12	35	VAN DY	KE ST		4		4			
D EPA D DEP	[2] Initial  [3] Amended		-	- Co-4- 50	- 0-4-		-11	110		1			
DEP DEP	Amondmost#	la-	R	PIPGE	wood, 1	O EU	7450				_		
[/]	Emergency (including justification)		Na	me of Con	ect .	•	Talashana blus	ehor		4.7			
E DOH	☐ Cancellation				numichi		I			_	•		
			F	ACILITY II	FORMATION	Type of Facility	49						
	Abatement is Taking Pl	ace (3)											
K. KUNIM	1CHI.	<del></del>	<del></del>	* ·	<del></del>	School (K-12 Subchapter &	6 (Other than K-12	2) .					
735 1/A.	DUVE C	+	3.5			Other (i.e. pr	ivate & commerci	إمالاتها اد	gs,				
Cay S.	DYKE ST	<u> </u>				Square Feet	# of Floors	Bidg.					
RIBGE WOO	20					2300	2	70	6.46	25			
County (6)			Co	unty Code	(7) (STATE USE	Current Use (P	for if being demoi	lished)					
BERGEN			ON	ily)		RESID							
Name of Monitoring Fit	an Hined by Building Own	ner A	SCM No		1	ment Contractor (							
(6)		<u> </u>			Best B	Removal I	nc				_		
Street Address			River St										
City, State, Zip Code					City, State, Zip	Code							
					Hacken	nsack, N.							
Project Manager for Mr	mileting Firm	Tele	ephone l	ito. · ·	Telephone No.		License No. 00388						
	Schoduled C	'acestade	n Bed. A		201-329- Name of OSHA		00300				_		
6-14-13	6-17	-13	, see (		Onega En	vironmen	tal Inc	E					
Occupancy Status Duri	ing Abeliament (Check or				Street Address						-		
Cl Facility Closed/Vaca	eted During Entire Period	of Abatas	ment		280 Huy				-	-	-		
D Abatement Performs	8 Am 5 PM	ality Hous	<b>S</b> .		City, State, Zip (		b M T	07604	5				
Scope of Work (Check				<u></u>		Iackensac	V						
H23ser23F			THE STATE OF THE S	Renovation	A Fee	Containment with Englosus	Negative Pressur	RE					
3 160 4 at 5 280 E	*		'DE	Demolition	EP Glov	rebro Procedure	Main Crishia Co.	·					
1	<del></del>	T	ocation	T	. U Non	-Exempted (*) and	POLICE POL	- Carrier	Abab	DERROE	¢		
	for of			ا م		-	1	-					
Ashestes-Containi	tion of ing Material (ACM)	- Main	Solely by	/ Ast	Description estas Containing M	interial (ACM)	- Amount			9			
TO BE	ASATED	Çu	Stedial las?	. 0	o., thousand systems surfacing, VA7	insulation, f, or	(Specify SF or LF)	1	Repair		Enclosuro		
	3)	"	(12)		other miscellan	eous)	,		1	ncapoulato	SE SE		
;		Yes	No N	VA.					Ŀ				
BASEMEUT			1	XTH	FRMALINS	SLATION	75	SF.	M				
·									I	П			
									1	Ц			
N	anda Manda				I AAS W	I Manua and	hand I mades			Ц			
Name of Registered W		ID No	Q	te Hauter	Cubic Yards of Waste	Name of Regis							
Best Remova	at Inc	17	109		140	1	Enterpr	ises					
Cay, State	nsack, N.J.	0760	1	201	Disposal Date	Waynesb	urg , Oh	9			700000000000000000000000000000000000000		
Hacket	nsack, N.J.	0700			6-17-13						-		
R. VELDRA		ator			RVeller	en		G-3	-1-	3			
The state of the s				-	1 10000	-				-	-		

Cle:4484

the of Modification (1)			Nam	e of Bui	ng Owner/Operator	(2) ·		9	5		
-3-13	2 #1 4 8		1		ODLESI				1/2		-
pency Notified	Type Notification		Sty	et Addre	SOUTH 1	MADIE	AUENUE			1,00	
EPA	Caratinal		6					1	· ·	<u> </u>	
DEP	Amendments CLENC				ROCK . A	ROCK NI 07452					
(DOL	C Emergency (including	3	Nan	ne of Co	act	- 4	Talaphana, Marri		All and a second	NO AND AND ADDRESS OF THE PARTY	_ [
LDOH	justification)  Campalistion		15	3. G	ODLESKi	440		4	1000	William .	
DCA			FA	CHLITY	FORMATION	,					
ern of Earling Whose	Abatement is Taking Place	e (3)		17/	(a)	Type of Facility	(4)				1
B. GODL	ESKi.			3 1 4 7		© School (K-12	corpor than K-121				
Sandalah Andreas			•		•	Brother (Le. pr	Nade & commorcia	buildings,			
655 SOU	JTH MAPLE A	VEX	<i>DOC</i>	=		homes, etc.) Square Feet	& of Floors	Bidg. Ag	Ð	_	_
S. S.		•					2	73.	YR	S	-
GLEN RO	ck				A STATE INC	Compat Line (P	nor if being demoli	shed)	+		
A AMA			Co	unty Co LY)	(7) (STATE USE	RESID	acti				
BERGEN	m Hired by Building Come	- I AS	CM No		Name of Abate	mont Contractor (	7)				10.50,000
tome of Monitoring PR 5)	W LEGAT ON STREET OWNER		200 000		A STATE OF THE PARTY OF THE PAR	Removal I					_
Ninet Address					Street Address	•					
7 7				•	450 S	.River St					
ay, State, Zip Code					City, State, Zip	Code	J. 07601				
		1 9.6.	hone	Ma	Telephone No.		License No.				
reject Manager for Mr	initiality Firm	retel		Mo	201-329	-7444 -	00388				
Mart Date (19)	. Schoduled Co	mpletion	Date	(11)	None MOON	Manilar	tol Inc				
10-13-13	6-14					nvironmer	ital inc				-
Occupancy Status Dur	ng Abahement (Check on	y one)			Street Address	yler St					
C Facility Closed/Vac	ied During Entire Period	of Albeton	ent		Cay State Zin	Code					
Absternent Perform B(Other — Describe:	of Custon of Rouses Pas	my mous			South	Hackensa	k, N.J.	07606			
Scope of Wesk (Check	all that apply)	•					Negative Pressur				
m>sdm2SF				Renova	- STAR	ni-Enclosure webag Procedure		•			
2 190 of or 2 260 If	•			Demoli	n jarga	e-Exempted (*) es	d Nón-Friable Pros	cedure	40-4		-4
<del>-</del>		IsLa	cation					Ľ	Abeata Ty		III.
· ·	dien of	- No	scally Sololy	_	Doscriptio	n of					
Ashestes-Contain	ing Material (ACM)	· Maint		el	shestes Containing (i.e., thornal system	Minterial (ACM) ns insulation,	- Amount - (Specify	3	2	Encapsuiste	Encioeure
IO SE	ASATED.	Çu . S		ŀ.	surfacing. V	AT, er	SF or LF)	COMOVA	Ropat	DOM:	Ineo
	13)	. (	(12)		Cates and the	10000)		-		8	
`		Yes		N/A		<u> </u>	+1	CFH	+	Н	-
BASEMEN			_	X	HEIRUNAL IN	SCLATION	35	SPIT	十	H	1
		-		_	<del></del>	<del> </del>		-	T	H	-
		-	-	-					T	П	T
	Vanta Mardae	N HO	ED MY	ste Hau	Cubic Yards	f Name of Reg	istored Landill			_	-
Name of Registered V		ID N	io		Waste	1	a Enterpr	ises			
Best Remov	ST THE	17	109		1/2 40	PSh. Clada					
Cay, State	nsack, N.J.	0760	1		6-14-13		burg, Oh			, 8	
Hacke	HERCE, M.J.	0,00	4					Date 6-			. ,
Completed by	Title			Strange and the second	R. Vo	۸.	-	1	7	_ 1	1 .

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

Date of Notification (1)	13/13			ilding Owner/Operator	ONSTRUCT	1000	_	2					
Agencies Notified	Type Notification		Street Addr	ess	(_ : ::	20	. 8		7.7				
	[2] Initial		30	0 77 7	H ST.	17			<u>`</u>				
DEP DEP	Amended		City, State,	Dip Code		003 47	5	,					
Z DOL	Amendment #		SF	D ISLE CI	LA NIT	05275	C.						
	Emergency (in justification)	iciuaing	Name of Co	ntact		Talanhana Nishha	Hr.						
DOH DOA	Cancellation		FRANK EDUALDI										
J ~~	, ,		-	INFORMATION			-						
		- Diago (3)	FACILITY	INFORMATION	Type of Facility	(4)							
Name of Facility Where	e Abatement is Takin	g Place (3)			School (K-12	)							
16	FSIDENCE				Subchapter 8	(Other than K-12) ivate & commercia	huildir	nas.					
Street Address	7 29FN	STA		-	homes, etc.)								
	1 4.71				Square Feet	# of Floors	Biod	, Age	10				
City (5)	resion			107175	Current les (Pri	or If being demolish	ned)						
County (6)	<b>.</b>		USE ONLY	de (7) (STATE	V A	CANT							
LAPE					ment Contractor (9)								
Name of Monitoring Fir		Owner	ASCM No.		FMCO IN								
	U/A	لحنب		Curat Address									
Street Address				360	95,5 PRUC	E DUE.							
	-				<u> </u>		۸.						
City, State, Zip Code				Mo	PLE SHAT	DEINIDI	000	) Z					
	The state of the s	Te	lephone No.	Telephone No.		License No.							
Project Manager for M	onitoring milli	1	7.7	856-7	79-0472	007	/ /	_					
e 12/1	Tight	duled Como	letion Date (11	) Name of OSHA	Monitor	_			*				
Start Date (10)		,	/13	7,	SEPH KL	Endi	_	=	=				
Occupancy Status Du		-		Street Address		.vc= duc.							
Occupancy Status Du Facility Closed/Vac	ated During Entire P	eriod of Aba	tement	36		VIL A 00,			===				
★ Facility Closed/Vac Abatement Perform	and Outside of Norma	al Facility Ho	urs	City, State, Zip	Code	= 41	T. (	1 80	5.				
Other - Describe:					APLESI	1000,			=				
Scope of Work (Check	k all that apoly)			T EUR C	ontainment with Ne	gative Pressure							
Scope of Avolk (Cueci	GII G 601 - CPP-)/		ation	☐ Mini-E	nclosure								
≥3 sf or ≥3 lf		Renov		= ~!	bas Drocedure	on Friable Procedu	re		5				
≥160 sf or ≥260 lf		E Dello		Non-E	Exempted (*) and N	GEFTIADIE FIOCES	TA	Dateme Type	nent				
		Is Loca	ition				. 799		æ				
				17. 17.				Typ					
28		Normal Hand So		Description	of	4	-	Bldg. Age  d)  d o 5 2  4  Abatemer Type					
Locatio	on of	Used So	lely by	Description sbestos Containing N	(ACM)	Amount (Specify	D		Enc				
Ashestos-Containin	g Material (ACM)	Used So Mainten Custo	lely by ance/ A dial	sbestos Containing N	Material (ACM) as insulation,	Amount (Specify SF or LF)	Rem		Encaps				
Asbestos-Containing	g Material (ACM) SATED	Used So Mainten Custo Staf	lety by ance/ A dial · (?	sbestos Containing N (i.e., thermal system surfacing, VA	Material (ACM) as insulation, AT, or	(Specify	Remova		Encapsula				
Ashestos-Containin	g Material (ACM) BATED ility	Used So Mainten Custo	lety by ance/ A dial · (?	sbestos Containing N	Material (ACM) as insulation, AT, or	(Specify	Removal		Encapsulate				
Asbestos-Containing TO BE AB IN Fac	g Material (ACM) BATED ility	Used So Mainten Custo Staf	lety by ance/ A dial (?)	sbestos Containing N (i.e., thermal system surfacing, VA	Material (ACM) as insulation, AT, or	(Specify SF or LF)			Encapsulate				
Asbestos-Containing TO BE AB IN Fac	g Material (ACM) BATED ility	Used So Mainten Custo Staf (12	lety by ance/ A dial · (? ) 0 N/A	sbestos Containing N (i.e., thermal system surfacing, VA other miscellar	Material (ACM) is insulation, it, or neous)	(Specify			Encapsulate				
Asbestos-Containing TO BE AB IN Fac (13)	g Material (ACM) BATED ility	Used So Mainten Custo Staf (12	lety by ance/ A dial (?)	sbestos Containing N (i.e., thermal system surfacing, VA	Material (ACM) is insulation, it, or neous)	(Specify SF or LF)			Encapsulate				
Asbestos-Containing TO BE AB IN Fac (13)	g Material (ACM) SATED siry )	Used So Mainten Custo Staf (12	lety by ance/ A dial · (? ) 0 N/A	sbestos Containing N (i.e., thermal system surfacing, VA other miscellar	Material (ACM) is insulation, it, or neous)	(Specify SF or LF)			Encapsulate				
Asbestos-Containin TO BE AB IN Fac (13)	g Material (ACM) SATED siry )	Used So Mainten Custo Staf (12	lety by ance/ A dial · (? ) 0 N/A	sbestos Containing N (i.e., thermal system surfacing, VA other miscellar	Material (ACM) is insulation, it, or neous)	(Specify SF or LF)			Encapsulate				
Asbestos-Containin TO BE AB IN Fac (13)	g Material (ACM) SATED siry )	Used So Mainten Custo Staf (12	lety by ance/ dial · (? )  o N/A	sbestos Containing N (i.e., thermal system surfacing, VA other miscellar	Asterial (ACM) s insulation, T, or neous)	(Specify SF or LF)	*		Encapsulate				
Asbestos-Containing TO BE AB IN Fac (13)	g Material (ACM) MATED iiity )  IN GL  AG E	Used So Mainten Custo Staf (12	lety by ance! Addial · (?)  o N/A  X  NUDEP Wast	sbestos Containing N (i.e., thermal system surfacing, VA other miscellar	Asterial (ACM) s insulation, T, or neous)	(Specify SF or LF)	*		Encapsulate				
Asbestos-Containing TO BE AB IN Fac (13) SID CAA Name of Registered V	g Material (ACM) MATED sility  IN GL  AG F  Waste Hauler	Used So Mainten Custo Staf (12	lety by ance/ dial · (? )  o N/A	sbestos Containing N (i.e., thermal system surfacing, VA other miscellar  TRAINS / TE  Cubic Yards of Waste	Name of Re	(Specify SF or LF)	*		Encapsulate				
Asbestos-Containing TO BE AB IN Fac (13)  5 1 D  CAA  Name of Registered V	g Material (ACM)  MATED  AIN CL  AG F  Waste Hauler  LNC ,	Used So Mainten Custo Staf (12 Yes N	NUDEP Wast Hauter ID No.	sbestos Containing N (i.e., thermal system surfacing, VA other miscellar  TRANSITE  Cubic Yards of Waste	Name of Records City, State	(Specify SF or LF)	*		Encapsulate				
Asbestos-Containing TO BE AB IN Fac (13) SID CAR Name of Registered V	g Material (ACM)  MATED  AIN CL  AG F  Waste Hauler  LNC ,	Used So Mainten Custo Staf (12 Yes N	lety by ance! A dial · (? ) O N/A X	sbestos Containing N (i.e., thermal system surfacing, VA other miscellar  TRANS / TE  Cubic Yards of Waste  Disposal Date	Name of Record City, State	(Specify SF or LF)  900 da  gistered Landfill  1, C, M.U.	*		Encapsulate				
Asbestos-Containing TO BE AB IN Fac (13)  SID  CAA  Name of Registered V	g Material (ACM)  MATED  AIN CL  AG F  Waste Hauler  LNC ,	Used So Mainten Custo Staf (12 Yes N	NUDEP Wast Hauter ID No.	sbestos Containing N (i.e., thermal system surfacing, VA other miscellar  TRAINS / TE  Cubic Yards of Waste	Name of Record City, State	(Specify SF or LF)	*		Encapsulate				