Date of Notification (1)			-		Nam	e of Buildir	og Owner/Operator	(2)		200				
Date of Notification (1) 6 / 6 / 13 Brookdale Community College / Job # 1306-1771: Chk. #3187 Agencies Notified														
Agencies Notified Tv	pe Notific		_		50.1			73 //	7 300 # 1306-	3771	: Cni	(. #J	187	
	ne Nounc	Jation			100000000000000000000000000000000000000	Address	on Continue Dead	00/4//	AM a			0		
	Amende	d			_		n Springs Road	5 19 2	"1 2:50					
☑ DHSS	Amendm		100	_	- AND	State, Zip	Code	57155 C						
DCA	Emerger		ncludir	ıg		e of Contac	107738	- LILENS						
1000000	justificat Cancella					Richard	I Frank		Telephone Nun	nber				
	Cariocila						i i i i i i i i							
Name of Escility Whore Abot	omont in i	Table	- DI	. (0)	FA	CILITY	NFORMATION							
Name of Facility Where Abat Brookdale CC - Gorma		lakin	g Plac	e (3)				Type of Facility						
Street Address	ın Hall		_•					School (K-1		21				
[100 100 100 100 100 100 100 100 100 100								Other (i.e.,	r 8 (Other than K-1) private and comme	2) ercial b	uildin	as		
765 Newman Springs I	Koad				Y			homes, etc	i.)			30,		
City (5) Lincroft							Machine Alexander Company	Square Feet	# of Floors	E	Bldg. A	\ge		
County (6)								10,000 2 41						
Monmouth					Cou	nty Code (7	7)(STATE USE ONLY)		Prior if being demoli	shed)	8			
								Vacant						
Name of Monitoring Firm Hire	ea by Build	ding (Owner	(8)	ASCM	l No.	Name of Abateme	(0)				W. State	17-2-	
Tiger Environmental							Asbestos and	d Mold Servic	es, Corp.					
Street Address							Street Address	18						
234 20th Ave.							3859 Sylon B							
City, State, Zip Code						÷.	City, State, Zip Co		- 500 00 0 000 000 000 000 000 000 000 000					
Brick, NJ 08723 Hainesport, NJ 08036 Project Manager for Monitoring Firm														
Project Manager for Monitoring Firm Telephone No. License No.														
Kelly Walton					908-862		609-702-0400		00862					
Start Date (10)					letion Da		Name of OSHA M		(0)					
6/_17_/_1					21 /	13	EMSL Analyti	cal, Inc.						
Occupancy Status During Aba							Street Address							
☐ Abstament Berfarmed Out	uring Entir	re Per	riod of	Abat	ement		200 U.S. Rout	e 130 North						
Abatement Performed Out: Time of Abatement:	AM-	ormai Pi	racilit M	y Hoi	urs - Des 4-	Scribe	City, State, Zip Co	de				0.00		
				' ''	-	VINI.	Cinnaminson	NJ 08077						
Scope of Work (Check all that	apply)						5 1.			4				
≥3 sf or ≥3 If			⊠ Re	nova	tion		⊠ : ☐ Mini-Encl	Ne OSUTA	gative Pressure E	nci	05U	re		
≥160 sf or ≥260 lf			☐ De	molit	ion		☐ Glovebag	Procedure						
							☐ Non-Exen	npted (*) and No	n-Friable Procedu	re	0			
Location of				Loca						Ab	atem	ent T	уре	
Asbestos-Containing Mate	rial (ACM)			lely by	Ashes	Description of stos Containing Mate		Amount	Re	R	ᄪ	T.	
TO BE ABATED					ance/	(i.e.	, thermal systems in	sulation,	Amount (Specify	Remova	Repair	i car	Clo	
IN Facility (13)			Cusi	(12	Staff?	158	surfacing, VAT,		SF or LF)	<u>va</u>	-	Encapsulate	Enclosure	
(1.0)			Yes	No			other miscellaneo	us)				ate		
Under Floor						Transite	Duct	12 LF 🛛 🗆 🗆					П	
Tile Sub Floor						VAT and	d Mastic		10 SF		1			
In Ground - Outside Build	ling					(2) Trans	site Ducts		40 LF		믐	-		
		_		П	10	,-,			70 [1	-	믐			
Name of Registered Waste Ha	uler			=		P Waste					Ш	Ш	Ц	
Horizon Disposal, Inc.					Hauler ID	No.	No. Waste GROWS Landfill							
City, State					22612		Disposal Data							
Trenton, NJ							Disposal Date	City, State	B. 4		T-16-T-14-T			
<u>and the second </u>		Territor.					6/21/13	Morrisville	, PA 19067					
Completed By (Print or Type) Kimberly A. Trumbetti		Title	e:	V.255			Signature		Dat		.,	,		
SB-41		Un	iice C	oor	dinator		MACH			lı-L	1-15	5		

ASB-41 MAY 11

D&S Proj. #: 2013

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

D&S Proj. #: 2013		1 1)	Notificati Pursuan	on of Asbes t to NJAC 8:	Asbestos Abatement (JAC 8:60 and 12:120) or (2) Att 2:50															
Q Das Proj. 11. 2013	_							2812												
	I Name	of Buildin	a Owner/C	Operator (2)				CO/J SUN 1	,											
Date of Notification (1)			JAJUGA					ofa E	AH ;	2. 5										
Agencies Notified Type Notification		Address	JAJUGA				_	2.7703		100	d .									
☐ EPA ☐ Initial			NUT STR	FET				" LICEN	3/1/1/	431										
DEP Amended		State, Zip	1.000	LIGI					1.16	٠,										
Amendment #:	- 11		PARK,	NI																
Li Emergency		of Contac		143				Telephone N	lumber	f										
justification)																				
DCA Cancellation	<u> </u> <u>A</u>	NTHON	Y JAJUC		TION			- 4					_							
B			FACILI	TY INFORMAT	ION		Tvr	e of Facility (4)			-									
Name of facility where abatement is to	aking place	(3)					'yp	School (K - 12)											
ANTHONY JAJUGA								Subchap	ter 8 (Oth	er tha	n K-1	2)								
Street Address			7					Other (Pr	ivate/Con	nmerc	ial									
							90	Bldgs./Ho	of Floors	· T	Bld	g. Age	e							
80 CHESTNUT STREET	T	(0)			Count	y Code (7)	"	quale i cot "	0, , , , , , ,											
City (5)	County	(6)		1		use only)	C	urrent Use (Prio	r if being	demo	molished)									
MIDLAND PARK	BERG	EN					_													
Name of Monitoring Firm Hired by Ble	dg. Owner (8)		ASCM No.	1	Name of Abatemer	t Cont	ractor (9)												
					_ _	D & S RESTO	RATIO	ON, INC.		_										
Street Address						Street Address														
						20 California z city, State, Zip Cod														
City, State, Zip Code						Paterson, NJ														
		Tol	- Numba		- -	Telephone Number			License N	Numbe	er									
Project Manager for Monitoring Firm		Pho	ne Numbe		- 11	973-345-802														
			D 1 (44)		<u> </u>	Name of OSHA Me	onitor					370								
Start Date (10)	Sched. 0	Completion	n Date (11)	V)		D & S Restora	ation,	Inc.		_	_									
06/22/13	07/05/				_ [Street Address	2													
Occupancy Status During Abatement	(Check onl	y one)				20 California		ie				_								
Facility closed/vacated during e	entire period	of abatem	nent. -		- 11	City, State, Zip Coo	ae													
		onity House			-11	Paterson, NJ	07503	ř.												
Describe:NORMAL HO	JUKS				- 11			Containment w/	negative	press	ure									
Scope of Work (check all that apply						Ī	Min	-enclosure												
	Renovation					Ē	Glo	vebag procedure n-Exempted (*) a	end Non-f	riahle	nroce	edure								
≥160 sf or ≥260 lf	Demolition						Nor	I-Exempled () a	illa Holl I	R	R	E	E							
Location of	Is location by mainter	normally u ance/cust	ised solely odial		on of a	sbestos-containing	en l	Amount		e m	e p	n	n							
asbestos-containing material (acm) to be	staff(12)			material (SDESIOS-COTILITIONS	V. 1.	(Specify SI LF)	For	0	a	а	C L							
abated in facility (13)	Yes	No	N/A							v e	1 r_	р								
			-	PIPE INSU	LATI	ON		32 L FT		X		旦	무							
Basement		-		BARE HEA	ATINO	G PIPES(RECLI	EAN)	100 L FT		X	닏	븯	井							
Basement										븯	님	붜	뷰							
										ዙ	片	片	뷰							
								- 120]	Ш									
Registered Waste Hauler		P Hauler I		ubic Yards of	Waste	Name of Registe	red La N. RF	ndfill SOURCE RE	COVER	RΥ										
D & S RESTORATION, INC.	135	06	Disposal I	2 YDS Date		City, State	.,													
City, State			06/24/1			TULLYTOV	VN, P	Α												
PATERSON, NJ 07503	Signature Date 06/05/13																			
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESID	ENT		as liconsura ex	remnte	d activities.			00/03	13										

Chill

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

Date of Notification (1) 06/06/2013		Name of Building Owner/Operator (2) White Township Board of Education Street Address 565 County Road 519													
Agencies Notified	Type Notification			Street Ad 565 Co	dress unty Roa	ad 519)				· · · · · ·	11	R.		K.,
EPA DEP DOL	Initial Amended Amendment #				e, Zip Cod ere NJ 07						Clos	ÿ , (),	177	ج.	6
	Emergency (in justification)	cluding	h	Name of	Contact					Tele	phone Num	her/.	0 /		
DOH DCA	Cancellation			Dawn F										<u>-</u>	
		DI (O)		FACIL	ITY INFO	RMATIC	N	Typ	e of Facility (4	1)					
Name of Facility Where White Township Co															
Street Address	Jisolidated Corie							×	School (K-12 Subchapter	8 (Oth	er than K-12)			
565 County Road 5	519								Other (i.e. p	rivate 8	& commercia	l build	ings,	home	s,
City (5)								Squ	uare Feet	# 0	Floors		dg. A	ge	
Belvidere								500	000	2		50)		
County (6) Warren				County C	code (7) ISE ONLY)				rrent Use (Pric	or if bei	ng demolish	ed)			
Name of Monitoring Firm	n Hired by Building Ov	vner (8)		ASCM	No.				batement Con						
RKO Environmenta				0090			Bako	o Co	nstruction a	& Res	storation, I	nc.			
Street Address 403 St. James Ave	enue						Street 265		ress rte 46 Ste 3	D					
City, State, Zip Code Phillipsburg, NJ 08	8865								, Zip Code NJ 07512						
Project Manager for Mo				Telephor			Telepl				License No).			
Jon Gilbert	900				4 6316				7010		00666				
Start Date (10) 06/24/2013		Schedule 07/06/2								& Res	storation, l	nc.			
Occupancy Status Durin	ng Abatement (Check	Only On	e)	Street Addres 265 Route						D					
Facility Closed/Vac Abatement Perform	cated During Entire Po	eriod of A	baten	nent		- 1				30					
Abatement Perform Other – Describe:	med Outside of Norma	I Facility	Hours	3 		_			, Zip Code NJ 07512						
Scope of Work (Check	All That Apply)														
≥3 sf or ≥3 lf	All trictripping	X p	enova	tion				Full Containment with Negative Pressure							
≥160 sf or ≥260 lf			emoli					Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure							
		т			Ι		Ŀ	스	Non-Exempted	d (*) ar	id Non-Friab			ement	t
			Locat Norma			20	- 2.2							ре	
Location Asbestos-Containing		Use	d Sole	ely by	Asbest		scriptio		rial (ACM)	1	Amount			ш	_
TO BE A	BATED		intena todial	nce/ Staff?		thermal	system	ns ins	sulation,		Specify F or LF)	Removal	Re	Encapsulate	Enclosure
In Fac			(12)				cing, V niscella			٥	1 01 1.1)	lova	Repair	Sule	unsc
	,	Yes	No	N/A										ê	0
Rooms 200,210,22	20,230,240 & 250		х			Win	dow C	Caull	k		136 LF	x	_	_	
Rooms 200,210,22	Rooms 200,210,220,230,240 & 250						nsite F	acia	a		60 SF	x			-
Rooms 300,310,32	Х			Win	dow C	Caull	k	5	48 LF	х					
Rooms 300,310,32	Rooms 300,310,320,330,540 & 560						nsite F			:	65 SF	х		<u></u>	
	Name of Registered Waste Hauler						Yards ste				ered Landfill				
	Bako Construction & Restoration, Inc.					Hauler ID No. of Waste 20				W.S.	inc.				
City, State Totowa NJ				07/08	3/2013	3	City, Sta Morris			•					
Completed by	Signature Date 06/06/2013														
Goran Kojic		Pioje	JUL IVI	anayer				<	2 con.	-	1 1 3				



Date of Notification (1)			-		Name	of Building	Own	ner/Operator (2	2)						
	05 /	13	-22		St.	Clare's H	ealth	n Systems	20	13 JUN II	AM 2				
Agencies Notified	Type Notifica	tion			Street	Address					- Fil C	- 06			
☐ EPA					400	Blackwe	II St	reet	4. 1	F-Trac		11.5 mg -			
☑ DOLWD	☐ Amended				City, S	tate, Zip C	ode			& LICEN	21110	121			- 51
☑ DHSS	Amendme				A 100 PM	er, NJ 07				TIOLIS	OHAD			1	
DCA (NJAC 5:23-8)	☐ Emergeno justificatio		luding			of Contact				Telephone	Numbe	r			
(NJAC 5.25-6)	☐ Cancellati				576 155	n J. Arye									
					FAC	ILITY IN	FOR	MATION							
Name of Facility Where A	Abatement is T.	aking l	Place	(3)	.,,,,	772111			Type of Facil	tv (4)					
St. Clare's Hospital				(0)					School (K						
Street Address										er 8 (Other than		-1			
200 Blackwell Stree	et								homes, e	, private and coc.)	ommerci	ai bui	iaing	s,	
City (5)			11.00						Square Feet	# of Floo	rs	Blo	lg. Ag	je	23.1
Dover									100,000	4		4	7		2000
County (6)					Coun	ty Code (7)(STA	TE USE ONLY)	Current Use	Prior if being of	lemolish	ed)			
Morris									Hospital						
Name of Monitoring Firm	Hired by Build	ing Ov	wner (8)	ASCM	No.	Nan	ne of Abateme	ent Contractor	(9)	***************************************				10
Environmental Hea	Ith Investiga	ations	5		0010	4	S	uperior Aba	tement Inc						
Street Address							Stre	et Address							A 1772.
665 West Shore Tra	ail						2	Henderson	Drive						
City, State, Zip Code							City	, State, Zip Co	ode						
Sparta, NJ 07871							N	lest Caldwe	II, NJ 07006						
Project Manager for Mon	itoring Firm	eraue ee		Tele	phone	No.	Tele	ephone No.		License	No.			U	
John A. Sekelsky					Company of the con-	1-2039	(9	73) 808-161	6	0041	1				
Start Date (10)					tion Da		Nan	ne of OSHA M	lonitor						
					_ / -	13_		uperior Aba	tement Inc						
Occupancy Status During								et Address							
☐ Facility Closed/Vacate					Control of the contro										
☐ Abatement Performed Time of Abatement:						ion harriers									
will isolate work a	reas from o						W	lest Caldwe	II, NJ 07006			-			
Scope of Work (Check al	Il that apply)							M Full Con	ainment with	Negative Press	ure				
≥3 sf or ≥3 lf			⊠ Re					☐ Mini-End	losure	vegative i resc	ou o				
≥160 sf or ≥260 lf		[☐ De	molitic	n			Gloveba	g Procedure	Non-Friable P	rocoduro	ŝ			
			le	Locat	ion	Γ		□ NO∏-EXE	mpted () and	NOII-FIIADIE FI	ocedure		ateme	ont To	ma
Location	of		1	Norma	lly			Description of	f						
Asbestos-Containing	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1)		d Sole				Containing Ma	terial (ACM)	Amou		₹en	Repair	inc	nc
TO BE ABA				intena todial	Staff?	(i.e		rmal systems urfacing, VAT		(Spec		Removal	air	sde	Enclosure
(13)	ity			(12)				ner miscellane		0, 0,	,	=		Encapsulate	ē
			Yes	No	N/A									Φ	
Center Wing Sleep R	oom					VAT &	Mast	ic		225 \$	SF	\boxtimes			
		-							#					П	
Name of Registered Was	ste Hauler				JDEP \	Vaste	Cuh	oic Yards of	Name of Re	egistered Land	fill		_		_
Service Transport	1000	auler II	No.	Was	ste	The state of the s	Landfill								
City, State			4-1-1-		SW21	1/	Dist	oosal Date	City, State						
New Castle, DE								/21/13		burgh, OH					
Completed By (Print or T	(vne)	Title		- 70		Signature									
Nick Petrovski								Jigriature	6-6-12						
MICK FELLOVSKI			Calut	-1116				16	with	min	1 6	-	0	1 ~	•

ASB-41 MAY 11

No over

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

1305-4646 Check #5305

Date of Notification					wner / Operato	r (2)	-47°	1		(82)					
Agencies Notified			Hall U Address		ersity		· · · · · · · · · · · · · · · · · · ·	1.50	4/	S	12	_			
EPA	Type Notific	auon	1000				je Ave.			CA1.6	(
DEP	☐ Initia	I			tate & Z					10/12	<i>7</i> 5.	0			
⊠ DOL		nded #1					J 07079				A.,				
□ DOH	☐ Eme	rgency			of Conta						Te	elepho	ne N	umb	er
☐ DCA	☐ Cano	ellation	L	eon '	Vander	nele	eubroeke				L			4	9
				FAC	ILITY I	NFC	RMATION								
Name of Facility Wh	nere Abateme	ent is Taking Pl	lace (3)				Type of Facili	ity (4))	7					
Seton Hall Unive	rsity- A&S	Hall Steam L	ine				School (I								
Street Address									(Other tha	53					
400 South Orang	e Ave.									nmercial bui				tc.)	
							Square Feet		# of Floo	ors	Blo	lg. Age			
City (5)		County (6)	Cou	inty C	ode (7)		10,000			2			90		
South Orange		Essex					Current Use ((Prior	if being d	emolished)					
							University								
Name of Monitoring		y Building Owr	ner (8)		ASCM	No.	Name of Aba								
Omega Environm Street Address	ientai					-	AbateTech, Street Addres			00529					
280 Huyler Street							PO Box 25	SS							
City, State & Zip Co							City, State &	Zin C	ode						
South Hackensac		6					Lumberton								
Project Manager for	Monitoring F	irm			Number		Telephone No	umbe		Licens	se Nu	mber			
Geiser Fajardo			201-4				609-265-210					0052	9		
Scheduled Start Dat 6/5/13	e (10)	Scheduled Con	npletior 6/19/		∋ (11)		Name of OSH EMSL Analy								
Occupancy Status D							Street Addres	-							
		During Entire P			tement		108 Haddor								
	Performed O	utside of Norma	al Hou	rs			City, State & 2	3.57							
Describe:				Westmont, NJ 08108											
Facility Occu Scope of Work (Che						00-15-						_			
Scope of Work (Che	ck all that ap	ppiy)					_	M	Full Con	tainment wi	th Ne	gative	Pres	sure)
≥3 sf or ≥3 lf			M	Reno	ovation			X	Mini-End			9		7	
≥160 sf ≥260) If		Ħ	Dem	olition		(Ħ	Glove Ba	ag Procedur	res)	
			_						Non-Exe	empted and	Non-l	riable	Pro	cedu	ire
	cation of			ocatio			Description			Amour		Aba	tem	ent T	ype
	os-Containin	9	Norma				Asbestos-Con Material (A)		g	——(Specil SF or L					
	erial (ACM) E ABATED		Mainte	lely by			(i.e., thermal sy		ns	3F 01 L	r)	교	æ	ü,	E
	Facility		Custo		C-02000		sulation, surfac					Remova	Repair	Encapsula	Enclosure
	(13)			(12)		C	or other miscella	aneo	us)			<u>a</u>	₹	ılate	ure
			Yes	No	N/A)				_		_
Exterior Steam Li	ne					_	Steam Line	Pipe	, /	280 LI	F		Ц	닏	닏
			밎	$\sqcup \downarrow$								님	H		
	밁	밁									뷰	H			
	井	H	H								Η	H			
	H	H	H -							井	井	H			
Name of Registered	Name of Registered Waste Hauler					ete C	Cubic Yards	Nan	ne of Regi	stered Land	fill			ш	
realine of registered	vvasie i lauli	51			EP Was		of Waste	Ivali	ie of regi	stered Land					
AbateTech, Inc.					18750		12	TRI	RF Landf	ill					
City, State				•			Disposal Date		, State	***************************************					
Lumberton, NJ							6/19/13	Tul	lytown, F	PA					
Completed By (Print		Title		Signature Date											
Gwen Trumbet	tti			Off				А	N			6/3/1	3		
				Cod	ord.		V 1V	/\	//\		- 1				



Date of Notification (1)			Name	of Building	Ow	ner/Operator (2	2)					
6/6/	13		DPI	MC		1.	Job # 1304-463	34 Check#	Tell of	5		
Agencies Notified Type Notifica	ation			Address		1270		-,	all arl	4		
☐ EPA ☐ Initial			33 \	West Stat	e St	treet 9 th Floo	or PO Box 034	Q		1		
☑ DOLWD ☑ Amended			City, S	State, Zip C	ode				11	-		
□ DHSS Amendm	VO CO STATE	_	Tre	nton, NJ	086	25			0	3	E.	
☑ DCA		3	Name	of Contact				Telephone Nur	nber		7	5
☐ Cancellat			Geo	orgette B	uncl	h		A	-14/			3
			FA	CILITY IN	FOR	RMATION	3			G- (**	3
Name of Facility Where Abatement is 7	Taking Place	(3)					Type of Facility ((4)	-		-	
Hunterdon Developmental Cer	iter						☐ School (K-12					
Street Address					- 174		Subchapter 8			مدامانه	_	
40 Pittstown Rd.							Other (i.e., pr homes, etc.)		ercial b	ullaing	s,	
City (5)							Square Feet	# of Floors	В	ldg. A	ge	
Clinton						,						
County (6)			Cour	ty Code (7)	(STA	TE USE ONLY)	Current Use (Pri	or if being demo	lished)			
Hunterdon							Developmen	ntal Center				
Name of Monitoring Firm Hired by Build	ding Owner	(8)	ASCM	No.	Nar	me of Abateme	ent Contractor (9)					
TTI Environmental		50720			Α	bateTech, Ir	ıc.					
Street Address					Stre	et Address		-				
1253 North Church Street					3	0 Maple Ave	. PO Box 25					
City, State, Zip Code		-				, State, Zip Co						
Moorestown, NJ 08057					L	umberton, N	IJ 08048					
Project Manager for Monitoring Firm	*****	Tele	phone	No.	Tele	ephone No.		License No.				
Jim Guilardi		60	9-314	-1683	6	09-265-2107		00529				
Start Date (10)	Scheduled C	omple	tion Da	te (11)	Nar	ne of OSHA M	onitor					
_5 / 8 / 13	_6_ /	28	/ 13 EMSL Analytical									
Occupancy Status During Abatement (Check only	one)			Stre	et Address						
☐ Facility Closed/Vacated During Entit												
Abatement Performed Outside of No				AM Sily, State, 2.p Sout								
Time of Abatement:AM	PIVI/	PIVI-		AIVI	W	/estmont, N	J 08108					
Scope of Work (Check all that apply)						M Full Cont	ainment with Neg	ative Pressure				
≥3 sf or ≥3 lf	⊠ Re	enovati	on			☐ Mini-Encl		alive Flessuie				
☐ ≥160 sf or ≥260 lf	☐ De	emolitio	n			Glovebag	Procedure					
						☐ Non-Exer	mpted (*) and Nor	n-Friable Proced				
en la constant		Locat Norma							Ab	atem	ent Ty	уре
Location of Asbestos-Containing Material (ACM	1.1-	ed Sole		Ashes	etas (Description of Containing Mat		Amount	Re	Re	Ē	Ē
TO BE ABATED	Ma	intena				mal systems i		(Specify	Removal	Repair	Encapsulate	Enclosure
IN Facility	Cus	todial ((12)	stam?			urfacing, VAT,		SF or LF)	<u>a</u>		sula	ure
(13)	Yes	No	N/A		otr	ner miscellaned	ous)		1		e e	
OLVII D		The same of	-	60114-0	411 -	:44: ll-	41	4015	100			
Chiller Room				50. to 5	4" F	itting Insula	tion	12 LF				
				1	****					Ш	Ц	
1												
Name of Registered Waste Hauler			JDEP \			ic Yards of	Name of Regist	tered Landfill				
AbateTech, Inc.		H	Hauler ID No. Waste T.R.R.F Landfill									
City, State					Disp	osal Date	City, State					
Lumberton, NJ			6/28/13 Tullytown, PA									
Completed By (Print or Type)	Title		Signature Date Date									
Gwendolyn Trumbetti	Operat	ions (Coordi									

ASB-41 MAY 11

13069-4648 Check #5308

Date of Notification (1)	Name of Building		or (2)	· Vil	7		ety.					
6/5/13 Agencies Notified Type Notification	Seton Hall Univ	ersity			ARO							
Agencies Notified Type Notification	Street Address 400 South Orar	ιαο Ανο		1/03/7	5	15						
□ DEP □ Initial	City, State & Zip (- 45 7	177 F.	-0						
☑ DOL ☐ Amended #	South Orange,			1	X 400	,						
□ DOH	Name of Contact		the contract of the contract o		Telepho	ne N	umb	er				
☐ DCA ☐ Cancellation	Michael Marco	ni		. [_				
	FACILITY INF	ORMATION		,	**							
Name of Facility Where Abatement is Taking P	lace (3)	Type of Facil										
Seton Hall University- Aquinas Hall		School (20									
Street Address			oter 8 (Other tha				o de la compa					
400 South Orange Ave.				nmercial buildin			tc.)					
City (5) County (6)	County Code (7)	Square Feet	1000 TO-000 100 COM		Bldg. Age							
South Orange Essex	County Code (7)	10,000	Prior if being d	2		90	114557.00	-				
South Orange Essex		University	(Filor if being u	emonsneu)								
Name of Monitoring Firm Hired by Building Own	ner (8) ASCM No		tement Contrac	etor (0)								
Omega Environmental	iei (o) Aocivi ivo	AbateTech		00529								
Street Address		Street Addres										
280 Huyler Street		PO Box 25										
City, State & Zip Code		City, State &										
South Hackensack, NJ 07606	T+1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	Lumberton		10.								
Project Manager for Monitoring Firm Geiser Fajardo	Telephone Number 201-489-8700	Telephone N 609-265-21		License N	00529							
The state of the s	mpletion Date (11)	Name of OSI	The state of the s		0032	3						
6/7/13	6/21/13	EMSL Anal										
Occupancy Status During Abatement (Check or	nly one)	Street Addres		0		===						
Facility Closed/Vacated During Entire P												
Abatement Performed Outside of Norma	al Hours	City, State &	50									
Describe: 6 PM Start		Westmont,	NJ 08108									
Facility Occupied During Abatement Scope of Work (Check all that apply)												
Scope of Work (Check all that apply)			☐ Full Con	tainment with N	legative	Pres	sure	4				
\ \ \ ≥3 sf or ≥3 lf	Renovation		Mini-End				00.0					
≥160 sf ≥260 lf	Demolition		Glove B	ag Procedures								
			Non-Exe	empted and Nor	n-Friable	Prod	cedu	ire				
Location of	Is Location	Description		Amount	Aba	teme	ent T	ype				
Asbestos-Containing Material (ACM)	Normally Used Solely by	Asbestos-Con Material (A		(Specify SF or LF)			ш					
TO BE ABATED	Maintenance or	(i.e., thermal s		SF OF LF)	Re	刀	Encapsulate	Enc				
in Facility		insulation, surfac	ing, VAT		Removal	Repair	ıpsu	Enclosure				
(13)	Yes No N/A	or other miscell	aneous)		<u>a</u>	-	late	-Te				
E. C. P.				=== 0=		$\overline{}$						
First Floor First Floor		Floor tile & N		750 SF		H	H	H				
FIRST FIOOT		Fire Doo	rs	20 total		H	H	H				
	+				ᆂ	ㅐ	片	H				
					ᆂ	ㅐ	H	H				
	 				ᅥ片	뉘	Ħ	H				
Name of Registered Waste Hauler	NJDEP Waste	NJDEP Waste Cubic Yards Name of Registered Lan										
	Hauler ID No.	of Waste										
AbateTech, Inc.	18750	6	TRRF Landf	111								
City, State Lumberton, NJ		Disposal Date 6/21/13	City, State Tullytown, F	Δ								
Completed By (Print or Type)	Title	Signature	i dilytowii, r		Date							
Gwen Trumbetti	Office	Oignatule	4		6/5/1	3		*				
- Committee of the comm	Coord.	$\left(\right) $	i)		3,3,1	-						

Date of Notification (1)	6 / 1	3		N		of Building Brenda C		Operator (2	2)	2013 1495#	1305-1767 (Chk.	#318	34		
				1			,			- JON 1	1		-			
Agencies Notified	Type Notification ☑ Initial	n		1	10-10-00-0	Address	Oaka	Delico			AM 2:5	a				
☑ EPA ☑ DOLWD	☐ Amended			_	III CLASH COM	Canopy ate, Zip Co		Dilve	_	# 7 7 2 0	V,	<u>(', </u>	-			
☑ DHSS	Amendment	#		1				nc E		# CICEN	V. 11/2					
☐ DCA	☐ Emergency (g	-		ge Park				· ·	Telephone Nu	mhar				
(NJAC 5:23-8)	justification)			1		of Contact					relephone Nu	mper				2
	☐ Cancellation			⊥		Brenda (150	4				-	_			_
					FAC	ILITY INI	FORMA	TION								
Name of Facility Where		ing Plac	e (3)					(T) (C)	10.22	ype of Facility (4	•)					
Residential Proper	ty - SHED									☐ School (K-12) ☐ Subchapter 8 (Other than K-	12)				
Street Address									D	Other (i.e., priv	ate and comm	ercia	l buil	dings	5,	
209 Regency Road										homes, etc.)						
City (5)									S	Square Feet	# of Floors			g. Ag	е	
Edgewater Park										Shed 121 SF	1		- 1	969	2000	
County (6)					Count	y Code (7)	(STATE L	ISE ONLY)	C	Current Use (Prio				, 1	1	7.
Burlington			85							Apartment B	uilding KIS	ide	nt	1al	(X	2)
Name of Monitoring Firm	Hired by Building	g Owner	(8)	A	SCM N	No.	Name o	of Abateme	ent	t Contractor (9)						
NA							Asb	estos an	d I	Mold Services	, Corp.					
Street Address							Street	Address	33							
Control of the Contro							3859	Sylon B	30	ulevard						
City, State, Zip Code		-					City, St	ate, Zip C	od	е						
Guy, Guno, Ep and						Hain	esport, l	NJ	08036							
Project Manager for Mor	nitoring Firm		Te	elep	hone N	No.	Teleph	one No.			License No.					
i rojost managor to ma							609-	702-0400	0		00862		19			
Start Date (10)	Sch	neduled	Comp	leti	on Dat	e (11)	Name	of OSHA N	VIOI	nitor						
6 / 17 /					1											
Occupancy Status Durin								Address					0.5			-
☐ Facility Closed/Vacat					ent		VIDEOUS KIETVE VENO		ite	130 North						
Abatement Performe						cribe		tate, Zip C				- 27	- 1000	-		
Time of Abatement:										NJ 08077						
C	II that apply)			-			Ollil	101111111111111111111111111111111111111	,	140 00077						-157-0
Scope of Work (Check a	ili that apply)						E	Full Con	ntai	inment with Nega	ative Pressure					
≥3 sf or ≥3 lf			Renov					Mini-End								
≥160 sf or ≥260 lf			emol	itior	n		L	J Gloveba ₹ Non-Exe	ag I em	Procedure pted (*) and Non	-Friable Proce	dure				
		-1-	Is Loc	ratio	on.					()		- 1	Aba	ateme	ent Ty	vpe
Location	n of		Norr	nall	у		De	escription	of			Ì				
Asbestos-Containing	529 5 29		sed S fainte				stos Cor	ntaining Ma	ate	erial (ACM)	Amount		Removal	Repair	nca	Enclosure
TO BE AB		100	istodi			(i.e		al systems acing, VAT			(Specify SF or LF)		ova	₹	psu	INSC
(13)			(1	2)				miscellane			J. J ,				Encapsulate	O.
3		Ye	s N	lo	N/A											
SHED				1	\boxtimes	Asbest	os Shir	ngles			300 SF		\boxtimes			
									-			~				
	Tallana.	_ _	1				The state of the s					블	_	_		
]									Ц	П		
			T]												
Name of Registered Wa	ste Hauler			_	JDEP V	Vaste	Cubic '	Yards of		Name of Regist	ered Landfill					
Horizon Disposal,				10000	auler II		Waste			GROWS La	ndfill					
The same and the s	MOTATOR S			L	22612	!	5 Dispos	al Date	-	City, State						
City, State Trenton, NJ							6/17			Morrisville,	PA 19067					
Sec. 1997	Time\ 13	Title	-	_	7927		0.0000000000000000000000000000000000000	ignature	Λ			Date		_		
Completed By (Print or			1				100		-13							
Kimberly A. Trumb	Detti	Offic		Y	M	X		9	u	U	0	9				

ASB-41 MAY 11

Date of Notification (1)						Owner/Operator (2)).	100	JI.			
	28 / 13	3		O'Bud	k Estate	e ⁴⁰ .	уор #1205-1644	Chk. #3178	*			
	Type Notification Initial			Street A		Avenue	Уоб #1205-1644 // АЛ	1 2:50				
				City, Sta	te, Zip Co	ode	LICENSING	7 32				
☑ DHSS	Amendment #	- 83		Fords	, NJ 088	363	TASINI	1/10/				_
DCA (NJAC 5:23-8)	☐ Emergency (in justification)	ncluaing		Name of	Contact			Telephone Num	ber			
(NJAC 5.25-6)	☐ Cancellation			Mr. D	ick Gas	sert	-					_
		-19-2-77	-	FACI	LITY INF	ORMATION						
Name of Facility Where A	batement is Takir	ng Place	(3)				Type of Facility (4	-)				
Residential Property							☐ School (K-12) ☐ Subchapter 8	Other than K-1	2)			
Street Address							Other (i.e., pri	vate and comme	rcial bui	ldings	S ,	
26 Woodland Avenu	ie						homes, etc.)					
City (5)							Square Feet	# of Floors	1	g. Ag	е	
Fords							980	1		5		
County (6)				County	Code (7)	(STATE USE ONLY)	Current Use (Price	or if being demol	ished)			
Middlesex							Residential					
Name of Monitoring Firm	Hired by Building	Owner (8)	ASCM N	0.	Name of Abatement Contractor (9) Asbestos and Mold Services, Corp.						
Horizon Environme							d Mold Services	s, Corp.				
Street Address						Street Address						
PO Box 316						3859 Sylon E					-	
City, State, Zip Code						City, State, Zip C						
Thorofare, NJ 0808	6					Hainesport,	NJ 08036	License No.		_100	_	
Project Manager for Mon	itoring Firm			phone N		Telephone No.	•	00862				
Dave or Steve Flan	igan		1	856-848-0800 609-702-0400 00862 upletion Date (11) Name of OSHA Monitor					-			
Start Date (10)						A 11						
6 / 6 /		SW 15		<u> </u>	13	EMSL Analy	ticai, iiic.					
Occupancy Status During	g Abatement (Che	eck only	one)			Street Address	1 - 400 North					
☐ Facility Closed/Vacate	ed During Entire I	Period of	Abate	ment	urib o		ute 130 North					- 1
Abatement Performed	d Outside of Norm AM-	nal Facilit PM/	y Hou PM	rs - Desc /	AM	City, State, Zip C						
						Cililaniniso	11, 110 00011					
Scope of Work (Check a	ll that apply)						ntainment with Neg	ative Pressure				
≥3 sf or ≥3 lf		⊠ Re	enova	tion		☐ Mini-En	iclosure ag Procedure					
≥160 sf or ≥260 lf			emoliti	ion		☐ Non-Ex	empted (*) and No	n-Friable Proce	dure			
			s Loca	ation					Al	atem	ent T	уре
Location	n of		Norm		5.70	Description		Amount	Re	Re	Ē	En
Asbestos-Containing				lely by ance/	Asbe	estos Containing M e., thermal systems	s insulation,	(Specify	Removal	Repair	caps	Enclosure
TO BE AB IN Faci		Cu		Staff?	(1.0	surfacing, VA	T, or	SF or LF)	<u>a</u>		Encapsulate	ure
(13)		-	(12		1	other miscellan	neous)				9	
		Yes	+					600 SF				
Basement					-	File and Mastic		340 SF		-	1	
2 nd 1/2 of Basement					Floor	File and Mastic		340 51		믐	12	
					1					1	片	井
								-1		ЦЦ		
Name of Registered Wa	ste Hauler			NJDEP		Cubic Yards of Waste	Name of Regi					
Horizon Disposal,	Inc.			Hauler I 2261		5	GROWS L	andilli				
City, State						Disposal Date	City, State	D4 40007				
Trenton, NJ						6/10/13	Morrisville	e, PA 19067				
Completed By (Print or	Type)	Title			2) 2: 2/2/2	Signature	re Date					
Kimberly A. Trum	. 278 . 33	Office	Coo	rdinato	r	(AXV)			U-1	0-1:)	_

Date of Notification (1)		Name of Building Owner/Operator (2)												
6/	6 /	13	_		Nitt	a Casing	ıs	∂ीµgı	# 1306-1770 C	Chk. #	3186			
Agencies Notified	Type Notifica	tion			Street	Address		, e	1/1 0.			or or other than		
⊠ EPA					141	Southsi	de Avenue/ PO E	3ox 858	AM :	2				
⊠ DOLWD	☐ Amended				City, S	tate, Zip C	Code	4.7	10 -	20				
⊠ DHSS	Amendme	_	udina		Son	nerville,	NJ 08876	`	MENT STATE					
☐ DCA (NJAC 5:23-8)	justification		ualing		Name	of Contac	t		Telephone Num	ber				
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ Cancellat	10.00			Gar	y Seibel				_				
					FAC	CILITY IN	FORMATION	•						
Name of Facility Where A	batement is T	aking l	Place (3)			•	Type of Facility	(4)	*				
Nitta Casings				•				School (K-12						
Street Address				_					Other than K-12					
141 Southside Aver	nue							M Other (i.e., p homes, etc.)	rivate and comme	ercial bu	ilding	S,		
City (5)								Square Feet	# of Floors	Blo	dg. A	ge		
Somerville								92000	1	!	52			
County (6)					Coun	ty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demoli	ished)				
Somerset								Process Ma	nufacturer					
Name of Monitoring Firm	Hired by Build	ling Ov	vner (8)	ASCM	No.	Name of Abateme	ent Contractor (9)						
Horizon Environme	ntal						Asbestos an	d Mold Service	es, Corp.					
Street Address	V. San 1136-5						Street Address			-				
PO Box 316							3859 Sylon B	oulevard						
City, State, Zip Code							City, State, Zip Co	ode		5-100		- 2: 10: 11:		
Thorofare, NJ 08086	6						Hainesport, N	NJ 08036						
Project Manager for Moni	toring Firm			Tele	phone	No.	Telephone No.		License No.					
Dave Flanigan				85	6-848	-0800	609-702-0400	ĺ	00862					
Start Date (10)		Schedu	led Co	mple	tion Da	te (11)	Name of OSHA N	lonitor	tions on the Control of the Control	1/				
6 / 20 /	_13	6	/	28	_ / _	13	EMSL Analyt	ical, Inc.						
Occupancy Status During	Abatement (0	Check	only or	ne)		-	Street Address							
☑ Facility Closed/Vacate	d During Entir	e Perio	od of A	bate	ment		200 U.S. Rou	te 130 North						
☐ Abatement Performed														
Time of Abatement: _	AM	PM/		_PM-	·	AM	Cinnaminsor	n, NJ 08077						
Scope of Work (Check all	that apply)				20		☐ Full Cont	tainment with Neg	native Pressure					
≥3 sf or ≥3 lf			⊠ Ren				☐ Mini-End	losure	gativo i roccaro					
⊠ ≥160 sf or ≥260 lf		[_ Den	nolitio	on		☐ Gloveba	g Procedure	n-Friable Procedu	Iro				
			le l	ocat	ion	Ι	⊠ Noil-Exe	impled () and No	il-Filable Floced		atem	ant T	vno.	
Location	of			orma			Description of	of		-			<u> </u>	
Asbestos-Containing I)			ely by		stos Containing Ma	iterial (ACM)	Amount	Removal	Repair	nc	Enclosure	
TO BE ABA					nce/ Staff?	(i.e	thermal systems		(Specify	SVOI	≌:	aps	uso	
IN Facilit (13)	.y			(12)			surfacing, VAT other miscellane		SF or LF)	=		Encapsulate	ē	
			Yes	No	N/A							(D)		
Boiler Room						Gasket	Material from 4	ovens	800 LF					
			-								П	П	П	
Name of Registered Wast			JDEP V	Vaste	Cubic Yards of	Name of Regis	stered Landfill			_				
Horizon Disposal, Ir	1057	auler ID	No.	Waste	GROWS L									
City, State					22612		5 Disposal Date	City, State				-		
Trenton, NJ							6/28/13		, PA 19067					
Completed By (Print or Ty	(ne)	Title					Signature	1		ate				
Kimberly A. Trumbe	- Day (4)		ico C	00-	linator		Statute		ا		-12			
Miniberry A. Trumbe	,	Oil	ice c	0010	ordinator U-U-13									

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