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State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-18 Date of Notification (1) Name of Building Owner/Operator (2) June 8, 2018 RUTGERS, THE STATE UNIVERSITY OF NJ Agencies Notified Notification Type Street Address □Initial Notification ENVIRONMENTAL HEALTH & SAFETY DEPT. (REHS) ☐ EPA ☒ Amended Notification # 1 74 STREET 1603, BLDG 4116, LIVINGSTON CAMPUS DCA TYPOGRAPHICAL ERROR City, State, Zip Code X DOL PISCATAWAY, NJ 08854 start date 6/15 ■ DEP- No Longer REQUIRED Telephone Number Name of Contact Emergency (including X DOH MICHAEL F. SMITH, ENV. 848-445-2550 justification) **HEALTH & SAFETY** □Cancelled FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) STANLEY BERGEN, BLDG# 7252 School (K-12) Subchapter 8 (other than K-12) S CONTROL & Street Address Other (i.e. private & commercial buildings, homes, etc.) RBHS NEWARK CAMPUS Sq. Feet: N/A # of Floors: 12 Bldg. Age: 80+ years City (5) County (6) County Code (7) Current Use (prior if being demolished): ACADEMIC NEWARK (State Use Only) ESSEX Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC 00098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 511 MAIN STREET City, State, Zip Code City State, ZipCode BURLINGTON, NJ 08016 BUTLER, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number BRIAN R. KEARNEY 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 06/15/18 06/18/18 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD, BLDG# 35E Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe: FAIRLAWN, NJ 07410 ☑ Other- Describe: Schedule: 3PM – 5AM Daily (24 HOURS &...) WEEKENDS AS NEEDED) Scope of Work (Check all that apply) ☐Full Containment with Negative Pressure \ge 3 sf or >3 lf X Renovation ☐ Mini-Enclosure $\square \ge 160 \text{ sf or } \ge 260 \text{ lf}$ Demolition Glove bag Procedure / Wrap & Cut XX Non-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type Material (ACM) in Facility (13) Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Staff? (12) Remove Repair Encap Enclose VAT, or other miscell.) or LF) NO NA YES Room GB 71 X VAT 150 SF X Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Name of Registered Landfill Cubic Yards of Waste: 10 CY See Hauler Below #1 & 2 G.R.O.W.S. North Landfill See Below Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State 100 New Ford Mill NJDEP # 12561 Rd. Morrisville, Pa Hauler #2) Newark Carting, Inc., Newark, NJ 04509 06/18/2018 19067 NJ DEP # 4509 215-736-1700 Completed by (Print or Type) Signature Date RAYMOND C. PEDALINO SENIOR PROJECT Raymond C. Pedaline June 8, 2018 MANAGER

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-18 Date of Notification (1) Name of Building Owner/Operator (2) June 5, 2018 RUTGERS, THE STATE UNIVERSITY OF NJ Agencies Notified Notification Type Street Address ☑ Initial Notification ENVIRONMENTAL HEALTH & SAFETY DEPT. (REHS) ☐ EPA ☐ Amended Notification # 74 STREET 1603, BLDG 4116, LIVINGSTON CAMPUS DCA □ Emergency (including City, State, Zip Code X DOL justification) PISCATAWAY, NJ 08854 DEP- No Longer REQUIRED □Cancelled Name of Contact Telephone Number W X DOH MICHAEL F. SMITH, ENV. 848-445-2550 **HEALTH & SAFETY** FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) STANLEY BERGEN, BLDG# 7252 School (K-12) ☐Subchapter 8 (other than K-12) Street Address Substracted & Cottlet that (N-12)

AGBECTOS CO THOL & **RBHS NEWARK CAMPUS** Sq. Feet: N/A # of Floors: 12 Bldg. Age: 80+ years City (5) County (6) County Code (7) **NEWARK** Current Use (prior if being demolished): ACADEMIC ESSEX (State Use Only) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC 00098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 511 MAIN STREET City, State, Zip Code City State, ZipCode BURLINGTON. NJ 08016 BUTLER, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number BRIAN R. KEARNEY 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 06/05/18 06/18/18 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD, BLDG# 35E ☐Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code ☑ Other- Describe: Schedule: 3PM - 5AM Daily (24 HOURS & FAIRLAWN, NJ 07410 WEEKENDS AS NEEDED) Scope of Work (Check all that apply) ☐Full Containment with Negative Pressure \ge 3 sf or >3 If **X** Renovation ☐ Mini-Enclosure □ ≥ 160 sf or > 260 lf Demolition ☐ Glove bag Procedure / Wrap & Cut ■ Non-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type Material (ACM) in Facility (13) (ACM) (i.e. thermal systems insulation, surfacing, Solely by Maint./Custodial (Specify SF Staff? (12) Remove Repair Encap Enclose VAT, or other miscell.) or LF) YES NO NA Room GB 71 X VAT 150 SF Name of Reg. Waste Hauler NJDEP Waste Hauler ID # 10 CY Name of Registered Landfill Cubic Yards of Waste: See Hauler Below #1 & 2 See Below G.R.O.W.S. North Landfill Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State NJDEP # 12561 100 New Ford Mill Hauler #2) Newark Carting, Inc., Newark, NJ 04509 Rd. Morrisville, Pa 06/18/2018 NJ DEP# 4509 19067 215-736-1700 Completed by (Print or Type) RAYMOND C. PEDALINO SENIOR PROJECT Raymond C. Pedalino June 5, 2018 MANAGER

Copies To: Rutgers, REHS, Attn: Mike Smith and ATC, Attn: Brian Kearney



State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7) GAC Project # 060-18 Date of Notification (1) Name of Building Owner/Operator (2) June 8, 2018 RUTGERS, THE STATE UNIVERSITY OF NJ Agencies Notified Notification Type Street Address □Initial Notification ENVIRONMENTAL HEALTH & SAFETY DEPT. (REHS) ☐ EPA ■ Amended Notification # 1 74 STREET 1603, BLDG 4116, LIVINGSTON CAMPUS DCA. TYPOGRAPHICAL ERROR City, State, Zip Code X DOL PISCATAWAY, NJ 08854 start date 6/15 ■ DEP- No Longer REQUIRED Name of Contact ■ Emergency (including Telephone Number X DOH MICHAEL F. SMITH, ENV. 848-445-2550 justification) **HEALTH & SAFETY** □Cancelled FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) WRIGHT REIMAN CHEMISTRY, BLDG# 3556 School (K-12) JUL 12 ☐Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) **BUSCH CAMPUS** # of Floors: 4 Bldg. Age: 60+ years Sq. Feet: N/A ASBESTOS CONTROL & City (5) County (6) County Code (7) Current Use (prior if being demolished): ACADEMICENSING **PISCATAWAY** MIDDLESEX (State Use Only) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC 00098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address 3 TERRI LANE 511 MAIN STREET City, State, Zip Code City State, ZipCode BURLINGTON, NJ 08016 BUTLER, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number BRIAN R. KEARNEY 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 06/15/18 06/18/18 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD, BLDG# 35E ☐ Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe: FAIRLAWN, NJ 07410 ☑ Other- Describe: Schedule: 3PM – 5AM Daily (24 HOURS & WEEKENDS AS NEEDED) Scope of Work (Check all that apply) ☐Full Containment with Negative Pressure $\square \ge 3 \text{ sf or } > 3 \text{ lf}$ □ Renovation
 □ ■ Mini-Enclosure $\times \geq 160 \text{ sf or } \geq 260 \text{ lf}$ Demolition ☐ Glove bag Procedure / Wrap & Cut XX Non-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type Material (ACM) in Facility (13) Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Remove Repair Encap Enclose Staff? (12) VAT, or other miscell.) or LF) YES NO NA Room 126 X VAT 300 SF X Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Name of Registered Landfill Cubic Yards of Waste: 15 CY See Hauler Below #1 & 2 See Below G.R.O.W.S. North Landfill

Completed by (Print or Type)
RAYMOND C. PEDALINO
SENIOR PROJECT
MANAGER
Signature
Raymond C. Pedalino
June 8, 2018

Disposal Date

06/18/2018

City, State

19067 215-736-1700

100 New Ford Mill

Rd. Morrisville, Pa

Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405

NJDEP # 12561

NJ DEP # 4509

Hauler #2) Newark Carting, Inc., Newark, NJ 04509

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-18 Date of Notification (1) Name of Building Owner/Operator (2) June 5, 2018 RUTGERS, THE STATE UNIVERSITY OF NJ Agencies Notified Notification Type Street Address ☑Initial Notification ENVIRONMENTAL HEALTH & SAFETY DEPT. (REHS) **EPA** ☐ Amended Notification # 74 STREET 1603, BLDG 4116, LIVINGSTON CAMPUS DCA □ Emergency (including City, State, Zip Code X DOL justification) PISCATAWAY, NJ 08854 ■ DEP- No Longer REQUIRED □ Cancelled Name of Contact Telephone Number X DOH MICHAEL F. SMITH, ENV. 848-445-2550 **HEALTH & SAFETY** (6) FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) WRIGHT REIMAN CHEMISTRY, BLDG# 3556 ☐ School (K-12) JUN 1 2 2018 Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) **BUSCH CAMPUS** # of Floors: 4 Bldg. Age: 60+ years Sq. Feet: N/A City (5) County (6) County Code (7) Current Use (prior if being demolished): ACADEMIC **PISCATAWAY** MIDDLESEX (State Use Only) Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC 00098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 511 MAIN STREET City, State, Zip Code City State, ZipCode BURLINGTON, NJ 08016 BUTLER, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number BRIAN R. KEARNEY 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 06/05/18 06/18/18 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD, BLDG# 35E □ Abatement Performed Outside of Normal Facility Hours -Describe: City, State, Zip Code FAIRLAWN, NJ 07410 ☑ Other- Describe: Schedule: 3PM – 5AM Daily (24 HOURS & WEEKENDS AS NEEDED) Scope of Work (Check all that apply) ☐Full Containment with Negative Pressure $\square \ge 3 \text{ sf or } > 3 \text{ lf}$ **X** Renovation ☐ Mini-Enclosure X ≥ 160 sf or > 260 lf Demolition ☐ Glove bag Procedure / Wrap & Cut ■ Non-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type Material (ACM) in Facility (13) Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Remove Repair Encap Enclose Staff? (12) VAT, or other miscell.) or LF) YES NO NA Room 126 X VAT 300 SF X Name of Reg. Waste Hauler NJDEP Waste Hauler ID # Name of Registered Landfill 15 CY Cubic Yards of Waste: See Hauler Below #1 & 2 See Below G.R.O.W.S. North Landfill Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State NJDEP # 12561 100 New Ford Mill Hauler #2) Newark Carting, Inc., Newark, NJ 04509 Rd. Morrisville, Pa 06/18/2018 NJ DEP # 4509 19067 215-736-1700 Completed by (Print or Type) Signature RAYMOND C. PEDALINO SENIOR PROJECT June 5, 2018 Raymond C. Pedatino MANAGER

Copies To: Rutgers, REHS, Attn: Mike Smith and ATC, Attn: Brian Kearney

Chaf# 13163

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

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State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-18											
Date of Notification (1) May 29,	2010				Name of Building Owner			UTV O	- N. I		
Agencies Notified	, 2010	Notification	n Tuno		RUTGERS, THE S	IAIE	UNIVERS	SIIY U	F NJ		
Agencies Notified		IX Initial		otion	Street Address	HEAL	THECA		DEDT	/DELI	C)
X EPA				tification #	ENVIRONMENTAL						
X DCA					74 STREET 1603,	BLDG 4	1116, LIV	INGSI	ON C	AMPU	15
X DOL				(including	City, State, Zip Code	00054					
IX DEP- No Longer REQUIR	FD		ication)		PISCATAWAY, NJ	08854					
DOH	LD	□ Canc	elled		Name of Contact			ohone N			
22 5011					MICHAEL F. SMITI	- CO - 1 1 1 1 1	. 848	445-2		П FЭ	-
				5100 500	HEALTH & SAFET	Υ	LILE	16 E			1-1
Name of Facility Where Abatem	ent is To	king Place (2	`	FACILITY IN	FORMATION (A)	111	II programa	***************************************			
RWJMS RESEARCH T					Type of Facility (4) School (K-12)	į				7,4440	
TOTAL TECENTOR I	OVVEI	, DLDOW	3000			15.4		UN 1	2 20	0	
Street Address					Subchapter 8 (other that					0	Louis I
RBHS PISCATAWAY O	CAMPL	JS			Other (i.e. private & co						- Salah
		· · · · · · · · · · · · · · · · · · ·			Sq. Feet: N/A	# OT F100	ors: 8 Bld	g. Age:	00+7	ears	And the same
	County (6	-		Code (7)	Current Use (prior if bein	a demolis	chodl: AC	ADEMIC	ANNE RING	UL &	Ē
PISCATAWAY	MIDD	LESEX	State	Use Only)	Carrent Ose (prior it bein	ig demons	sileuj. Au	ADLIVIT		Carried States	
Name of Monitoring Firm Hired I	by Bldg. (Owner (8)	ASCM		Name of Contractor (9)						
ATC			0009	98							
Ctroot Address					GREENWOOD ABA	TEMEN	IT CONSU	JLTAN	TS, IN	C.	
Street Address 3 TERRI LANE					Street Address						
3 IERRI LANE					511 MAIN STREET						
City Chata 71 Call											
City, State, Zip Code BURLINGTON, NJ 0	10046				City State, ZipCode						
	8016	T-1	N		BUTLER, NJ 07405						
Project Manager for Monitoring I BRIAN R. KEARNEY	Firm	Telephone			Telephone Number		Licen	se Numb	er		
BRIAN K. KEARNET		609-38	0-0000		973-492-0477		0084	10			
Scheduled Start Date (10)		Scheduled	Completi	on Date (11)	Name of OSHA Monitor		000	+0			
06/08/18		06/20/1			ENVIROVISION, IN	C.					
Occupancy Status During Aba	itement (Check only	one)		Street Address			1-1102			
☐Facility Closed/Vacated Dur				nt	20-21 WARGARAW	ROAD.	BLDG# 3	35E			
■ Abatement Performed Outs						,					
Describe: Schedule: 3PM -					City, State, Zip Code	SHX3.					
NEEDED)					FAIRLAWN, NJ 074	10					
Facility Occupied During At	batement	t									
☐ Other- Describe:											
16											
Scope of Work (Check all that ar	pply)										
						Full Cor	ntainment w	ith Nega	ative Pre	essure	
$\boxtimes \geq 3$ sf or >3 If				■ Renovation		☐ Mini-E	nclosure	-			
$\square \ge 160 \text{ sf or } \ge 26$	O If			□ Demolition		Glove b	oag Procedu	ire / Wra	ap & Cu		
					1	Non-Ex	empted (*)	and Non	-Friable	Proced	ure
Location of Asbestos-Containing		cation Norma			bestos Containing Material		mount	Abaten	nent Typ	e	
Material (ACM) in Facility (13)	0.00000.0000	ly by Maint./0	Custodial		nal systems insulation, surfac		Specify SF	Pemov	Repair	Encan	
	YES	f? (12) S NO	NA	VAT, or other mis	scell.)	or	·LF)	Enclose		Lilicap	
7 700		38 130034502	13/3								
R-B66		X		TSI		1	80 SF	X			
Name of Reg. Waste Hauler		NJDEP Wa	ste Haule	r ID#	Cubic Yards of Waste:	10 CY	Name	of Regis	tered La	ndfill	
See Hauler Below #1 & 2		See Belo			Cubic Tarus of Waste.	10 01		O.W.S.			ill
Hauler #1) Greenwood Abatem	ant Cons	ultanta Ina	Dutlan	NI 07405		Dianaga	I Data		City Ct		
NJDEP # 12561	ent Cons	unants, inc.	- butter,	143 07405		Disposa	Date		City, Sta	v Ford N	Aill
Hauler #2) Newark Carting, Inc	c., Newar	k, NJ 04509				06/00	12040			risville,	
NJ DEP # 4509	:00 5 880 (1884) 558					06/20/	12016		19067		
						-			215-736	-1700	
Completed by (Print or Type)	() () () () () () () () () ()	<u> Fitle</u>			Signature		Date				
RAYMOND C. PEDALIN	100	SENIOR F		CT	Raymond C. G.	Valiation	May	29, 20	118		
	r	WANAGE	R		Daymona O. De	auanne	1				

Copies To: Rutgers, REHS, Attn: Mike Smith and ATC, Attn: Brian Kearney OK2544

PAID

Date of Notification (1) 06/08/18				Name	of Buildin	ng Owr	ner/Operato	or (2)		E	6	E		V	
Agencies Notified	Type Notification			vvas	ningtor	low	nship Bo	ard of Educ	ation 🗮	$\langle $					The said
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EPA DEP	X Initial				ont St.				111		JUN	1 4	4 41	118	-
X DOL	Amended Amendmer	it #			tate, Zip										-
X DOH	Emergency	(including	-		hington		07882		or and the	ASBE	STO	SC	ONT	ROL	S.
X DCA	justification Cancellatio)			of Contac				LI	elephone					
	Caricellatio	n			ael Ang				9	08-689	9-11	19			
Name of Facility Where A	batement is Taki	no Place (3)	·	FAC	ILITY IN	FORM	ATION								
Port Colden Elemen	tary School	19 1 1000 (0)						Type of Faci	lity (4)		30.71.1-01.00				-
Street Address								X School	(K-12)						
30 Port Colden Rd.								Subcha Other (i	pter 8 (Ot	her than	K-12)			
City (5)								etc.)	e. private	& COMM	nercia	וטט ו	idings	, hom	ies,
Washington								Square Feet	# (of Floors		1	3ldg.	Age	
County (6)								60,000	2				50+		
Warren				(STATE	Code (7)	y)		Current Use	(Prior if be	ing dem	olishe	ed)			
Name of Monitoring Firm H	dired by Dullate	Our (0)				., _		Elementai	y Schoo	ol					
RK Occupational & I	Env Analysis	Owner (8)		The second section of	M No.			of Abatement							-
Street Address	-IIV. Allalysis,	IIIC.		090			Aca	demy Const	ruction	Inc					
401 James St.							The second second	Address							-
City, State, Zip Code								Route 46 Si	uite 14						
Phillipsburg, NJ 0886	35							tate, Zip Code							
Project Manager for Monito				T-1-1				wa NJ 0751	2						
Jonathan S. Gilbert	7g 1 11111			Telepho	ne No. 54-631	<u></u>		one No.		Licens	se No.			-	
Start Date (10)		Schodulas	Com					832 4244	W	0115	5				
06/25/18		Scheduled 07/07/1		npietion	Date (11)		of OSHA Moni	tor				0.45		li interior
Occupancy Status During	Abatement (Chec							e as above							
Facility Closed/Vacate Abatement Performed Other – Describe:	ed During Entire I Outside of Norm	Pariod of Ah	otom	ent				Address tate, Zip Code					MITTERS SAFE		
Scope of Work (Check All	That Apply)														
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf	323 0.0		novat moliti				X	Full Contair Mini-Enclos Glovebag P Non-Exemp	ure rocedure						
		Isl	ocatio	on l				Non-Exemp	led () and	d Non-Fi	riable	-		ement	
Location of		No	rmall	v)oossintiss						мраце Ту		
Asbestos-Containing Ma TO BE ABAT	aterial (ACM)	Used Maint	Solel	y by	Asbes	stos Co	escription intaining M	aterial (ACM)	Δ	mount					17444
In Facility	EU	Custod	ial S	taff?	(i.e	. therm	al systems	insulation	(8	Specify		Re	ת	Encapsulate	m
(13)		(12)			othe	facing, VAT miscelland	, or eous)	SF	or LF)		Remova	Repair	apsi	Enclosure
		Yes	No	N/A				-				<u>a</u>	5	ulati	ure
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Occ attach		+													
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									-		-				
Name of Registered Waste	Hauler		NI	DEP Wa	asto	Cuki	o Vost-								
Academy Construction				uler ID N		of W	c Yards aste		of Registe		fill				
	1110		00	34422		2		Fairle	ss Lanc	lfill					
City, State Totowa NJ						Disp	osal Date	City, St	ate			-			
Completed by						TBE)	100	sville, P	A					
John Geleski		Title					Signature	1 4	1 /		Date			-	-
MOIOONI		PM					loh	Ileha	1	- 1	06/0	8/1	8		

/ no ak

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

		(Pi	ursuar	nt to NJAC	2 8:60-7 and 12:	120-7)		11111	IF.	11 -	15	11	11/7 1
Date of Notification (1)					ne of Building (VALLEY HOSI		Operator	(2)			15.	-11	W_L
5 / 9 /2018				Stre	et Address					11/18	1	0 20	- 1.5
Agencies Notified Type Notifica	ation	10.77		223	NORTH VAN D	IEN A	/ENUE	111 44		JUE	1	2 20	118
TO CONTROL OF THE PROPERTY OF	Notification led Notification		L.	City	, State, Zip Cod GEWOOD, NEV	e V JERS	SEY 07652		ASBE	277	98.0	TIME	70L 8
X DOH On Hol DCA EMERC	d GENCY I	NOTIF	FICAT	300000	ne of Contact DRGE GANCSC)S		Telephone 1 201-447-81	Numbe	er	1.110	iva_	
			F	ACILITY I	NFORMATION								
Name of Facility Where Abatement is VALLEY HOSPITAL	Taking F	Place	(3)			Туре	of Facility School (K Subchapt	-12) er 8 (Other th	ian K-	12)	50500		60 00
Street Address						X		private & cor		bldg			
650 WINTER AVENUE	(0)						uare Feet 50,000	# of Floo			4	g. Age 10+	6
City (5) County PARAMUS BERGE	ΞN				nty Code (7) E USE ONLY)	ABA	NDONED	rior if being d)		
Name of Monitoring Firm Hired by Bu COLDEN CORPORATION	ilding O	wner	(8)		ASCM No.			ment Contra			ON		
Street Address							et Address	IVIENTAL CO	RPUF	KAII	ON		
131 VARICK STREET, SUITE 1022						1		OCK ROAD					
City, State, Zip Code							State, Zip						
NEW YORK, Project Manager for Monitoring Firm	NEW Y			Number		_	phone Num	W YORK 109		NI			
JIM MIADES		1 .	435-35				369-7500	ibei	Licen 1101	se iv	umbe	11	
Expected State Date (10)	Scho			tion Date	(11)	Control of the control	e of OSHA	Monitor	1101				_
7 / 5 /18 Month Day Year		3		30			L #11506	· · · · · · · · · · · · · · · · · · ·					
	ng Entire	Period mal Fa	d of Al	Hours - De	-	City,	State, Zip	H STREET Code NEW YORK,	NEW '	YOR	K		
Scope of Work (Check all that apply) Demolition 3SF OR LF X >160 SF OR 260 LF		ovation		Aller Street Co. 183	X Full Cont Mini Encl X Glovebag X Non-Frial	o , g Proce ble Pro	edure cedure						
Location of Asbestos-containing		Locati mally u			Description of A Containing Mater			Amoun	.	_		ent T	
Material (ACM) TO BE ABATED in Facility (13)	s Main S	olely b	oy todial 2)	ir	(ie. Thermal synsulation, surfactor other miscella	stems ing, VA	λT,	(Specify SF or LF	y =)	REMOVAL	REPAIR	ENCAPSUL	ENCLOSUR
1ST FLOOR THROUGHOUT			х	FLOOR M	MASTIC			####		X			
1ST FL. PERIMETER EAST & SOUTH			X	PIPE INS	ULATION AND	FITTIN	GS	700 LF		X			
1ST FLOOR KITCHEN			х	TILE GRO	DUT	300		600 SF		X			
1ST FLOOR PERIMETER			X	WINDOW	CAULK			20 SF		X			
EXTERIOR AIR HANDLER UNITYS			X	TAR FLA	SHING			160 SF		X			
Name of Registered Waste Hauler NEWARK CARTING 369 RAYMOND BLVD	100000	EP Wa er ID N 913	No.		ds of Waste 60	GRA	ND CENT	ered Landfill RAL SANITAI	RY LA	NDF	ILL		
City, State NEWARK, NEW JERSEY				Disposal I 07/05/18 -	Date - 03/30/2019	City, PLAI	State NATERO TO	OWNSHIP, P	Α		1	,	
	itle IRECTO	R OF	OPER	RATIONS	Signature /	1			Date	5	10	1/	18

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) THE VALLEY HOSPITAL Date of Notification (1) Street Address /2018 223 NORTH VAN DIEN AVENUE Type Notification Agencies Notified City, State, Zip Code Initial Notification FPA RIDGEWOOD, NEW JERSEY 07652 Amended Notification #1 DEP 8 Cancellation DOL Telephone Number Name of Contact LICENSING On Hold DOH 201-447-8141 EMERGENCY NOTIFICATION GEORGE GANCSOS DCA **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) Subchapter 8 (Other than K-12) VALLEY HOSPITAL Other (ie. private & commcl. bldgs., homes, etc.) # of Floors Bldg. Age Square Feet Street Address 40+ 50,000 650 WINTER AVENUE Current Use (Prior if being demolished) County Code (7) County (6) City (5) ABANDONED (STATE USE ONLY) BERGEN **PARAMUS** Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. PAR ENVIRONMENTAL CORPORATION COLDEN CORPORATION Street Address Street Address 313 SPOOK ROCK ROAD 131 VARICK STREET, SUITE 1022 City, State, Zip Code City, State, Zip Code SUFFERN, NEW YORK 10901 NEW YORK, NEW YORK 10013 License Number Telephone Number Telephone Number Project Manager for Monitoring Firm 1101 845-369-7500 347-435-3561 JIM MIADES Name of OSHA Monitor Sched, Completion Date (11) Expected State Date (10) EMSL #11506 /19 30 3 /18 6 / Year Month Day Year Day Month Street Address Occupancy Status During Abatement (Check only one) 307 WEST 38TH STREET Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe: City, State, Zip Code MONDAY -FRIDAY 7AM-3:30 PM Other - Describe: NEW YORK, NEW YORK Full Containment Scope of Work (Check all that apply) Mini Enclo . Renovation Demolition Glovebag Procedure >3SF OR LF Non-Friable Procedure 260 LF >160 SF OR Abatement Type Description of Asbestos-Is Location Location of ENCLOSUR ENCAPSUL Containing Material (ACM) Amount REPAIR REMOVA normally used Asbestos-containing (Specify (ie. Thermal systems solely by Material (ACM) SF or LF) insulation, surfacing, VAT, Maint/Custodial TO BE ABATED or other miscellaneous) Staff (12) in Facility (13) Yes No N/A ##### FLOOR MASTIC 1ST FLOOR THROUGHOUT PIPE INSULATION AND FITTINGS 700 LF 1ST FL. PERIMETER EAST & SOUTH X

TILE GROUT

WINDOW CAULK

TAR FLASHING

Disposal Date

Cubic Yards of Waste

06/11/18 - 03/30/2019

60

Signature

X

X

NJDEP Waste

913

DIRECTOR OF OPERATIONS

Hauler ID No.

1ST FLOOR KITCHEN

NEWARK CARTING

City, State

369 RAYMOND BLVD

NEWARK, NEW JERSEY

BENJAMIN SANCHEZ

Completed by (Print or Type)

1ST FLOOR PERIMETER

EXTERIOR AIR HANDLER UNITYS

Name of Registered Waste Hauler

600 SF

20 SF

Name of Registered Landfill

City, State

OINFIELD TOWNSHIP, PA

PLAINFLEL

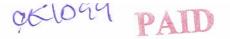
160 SF

GRAND CENTRAL SANITARY LANDFILL

X

X

Date



Date of Notification (1) 06/07/2018				Name Colle	of Buildin	g Owner/	Operato	or (2)		Light To	11	15.	1 1		74 74412 7877	Control of the Control
Agencies Notified	Type Notification Initial	<u> </u>		Street	Address nvent R		- COOLIT		4	-	J	JiV	1 2	201	8	
DEP DOL	Amended Amendment				ate, Zip (stown, N		30			h-	AGBES	LICE		INTE NO	IUL :	2 2
DOH DCA	Emergency justification) Cancellation	8 37	l		of Contact lacovo						lephone					
Name of Facility Where Henderson Hall	Abatement is Takir	ig Place (3)	FAC	ILITY IN	ORMAT	ION	Тур	oe of Facility (
Street Address 2 Convent Rd								×	School (K-1 Subchapter Other (i.e. p etc.)	8 (Oth	ner than & comm	K-12 nercia) Il buil	dings	, hom	ies,
City (5) Morristown								Squ	are Feet	# 0	f Floors		E	Bldg. /	Age	
County (6) Morris				County (STATE	Code (7) USE ONL	Y)			rent Use (Pri	or if be	ing dem	olish	ed)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCI	M No.		Name Unite	of Al	atement Cor afety LLC	tractor	(9)					
Street Address						Street 22 T										
City, State, Zip Code								Zip Code Park, NJ 07	035						25-22-	
Project Manager for Mon	itoring Firm		Telepho	ne No.		Telepi	hone			Licens 0131						
Start Date (10) 06/09/2018		Schedule 06/10/2			Date (11)				SHA Monitor afety LLC							
Facility Closed/Vaca Abatement Perform Other – Describe:	ated During Entire F	Period of A	Abate	ment 's			Street 22 T City, S	Addre roy L	ess	025						
Scope of Work (Check Al	Il That Apply)						LINC	JIII P	ark, NJ U7	035		-				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emoli				×	M G	ull Containme ini-Enclosure lovebag Proc on-Exempted	edure					0	
Location	a.f.		Locat						on Exempled	() ain	u Noll-I	ITADIC		Abate	ement pe	
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Room #	CHES		X				lbows			Alternative and the second	Total	+	X			
Name of Registered Wast United Safety LLC	te Hauler		+	JDEP Walauler ID 036820	No.	Cubic \ of Was TBD			Name of R			dfill				
City, State Lincoln Park, NJ						Dispos TBD	al Date		City, State Tullytow							
Completed by Vanco Petkov		Title Projec	ct Ma	anager		Si	gnature	nd.	0.18	90		Date 06/0		018		

page 5

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	Justificet	tion)	Buil		me of Co					14.4	VER.	1.1	1	1 .	[]	
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Name of Facility Where A	batement is T	Price Die	- /ds		FACILITY	/ INFORMA	MOLE		-	L	973-290	400	0			
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^{*} Do not use this form for astrestos incensure exempted activities.

DATE		NOTE	Pursuan	t to NJAC 8	:5105 A	12:12	MENT (M	E	C			\mathbb{V}		m
Date of Notification (1)				of Building C				HKI			ndrodurith deur	and the street like		1	10 to
06/08/2018				den Board	d of Ed	ucatio	on			.1111	1 1	2 2	018	datamate	$ \bigcup $
Agencies Notified Type Notification				Address	01			шШ		UU			. ∪10		beness
X EPA X Initial Amended				Cambridg		et								į	
× DOL Amendment	#			tate, Zip Coo den, NJ 08					AS	BEST				L&	
Emergency (including	7		of Contact					Tal	2022 PROPERTY	CEN	NAME OF TAXABLE PARTY.	3		DEPTH AND
DOH justification) Cancellation				ties Depa	rtment					ephone 56-96					
				ILITY INFO					:0:		0-40	120			
Name of Facility Where Abatement is Taking							Type of Faci	lity (4)							
Mastery CHarter School - McGrew Street Address	Camp	us					School								
3051 Freement Street							Subcha Other (i etc.)	pter 8 (i.e. priva	Othe ate 8	er than & comn	K-12 nercia) al buil	dings	, hom	es,
City (5)							Square Feet	T	# of	Floors	;	E	Bldg.	Age	
Camden															
County (6) Camden				Code (7) USE ONLY)			Current Use	(Prior if	bei	ng dem	olish	ed)			
Name of Monitoring Firm Hired by Building C	wner (8)	ASC	M No.		Name	of Abatement	Contra	ctor	(9)					
Environmental Consultinng						ELC	ON Environ	menta	al In	ic					
Street Address 2002 Renaissance Blvd, Suite 110							Address								
City, State, Zip Code							Glenwood [
King of Prussia							tate, Zip Code								
Project Manager for Monitoring Firm			Telepho	ne No	-		hington Cro	ssing		11		78			
Peter Photopoulos				79-7070		4.000	313-7427			Licen:).			
Start Date (10)	Schedul	ed Cor		Date (11)			of OSHA Mon	itor	_	0122		-			
06/22/2018	06/29/	2018		***************************************		same	•								
Occupancy Status During Abatement (Check	Only O	ne)				Street	Address				-				
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma	eriod of	Abaten	nent								=1.00000				
Other – Describe:	ıı Facılıt	/ Hours			_	City, S	tate, Zip Code								
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf	П	Renova	tion				F C		- 241		_				
2160 sf or ≥260 lf	green present	Demolit				7920	Full Contai Mini-Enclos	nment (sure	with	Negati	ve Pr	essu	re		
						×	Glovebag F Non-Exem			Non E	riahl.	Due			
	Is	Locati	on			- Committee	TYON-LACIN	pied ()	anu	14011-1	Habie		Abate		
Location of	1	Normal	ly		Desc	ription	of							ре	
Asbestos-Containing Material (ACM) TO BE ABATED		d Sole intenar		Asbestos	s Contai	ning M	aterial (ACM)			nount				ш	
In Facility	Cus	todial S	staff?	70.000.000	surfacir	ng, VAT	insulation, r, or			oecify or LF)		Remova	Re	Encapsulate	Enclosure
(13)		(12)		0	ther mis	scellan	eous)			J ,		ova	Repair	sula	osur
	Yes	No	N/A									_		ite	Ф
Hallway			x		Flo	or tile			1	152		х			
Storage closet			Х		Flo	or tile			3	04		х			
Auditorium			х	F	-loor ti	le/ma	stic		3	36		х			
Name of Registered Waste Hauler		1000000	JDEP W	EVENTO 1	Cubic Ya		Name	of Regi	ster	ed Lan	dfill				
Service Transport Group			auler ID I W2117	1-000	of Waste ΓBD	·	Mine	rva Er	nter	prises	S				
City, State New Castle De				1	Disposal TBD	Date	City, S	tate nesbu	ra C)H					
Completed by	Title					nature	- Wayi	10000	9.9	3''	Date				
Andre GOsek	Mana	ger			/		2						018		

State of New Jersey

CK 487

State of New Jersey Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

	14	2. 38. 32. Mars	Notii		bestos Abatement . 8:60-7 and 12:120-7)	t		E	C E		\mathbb{V}	
Date of Notification (1) 06/8/2018					Name of Building Own	ner/Operat	or (2)					Control of the Control
Agencies Notified		Notification	n Type		Street Address 13-15 Linden Ave Ea		1111	Administ	ration	2 '	2018	Lesson
☑ EPA ☐ DCA ☑ DOL ☐ DEP ☑DOH		☐ Initial No ☐ Amende ☐ Emerge justification ☐ Cancelle	ed # ency noti n)	n ification (including	City, State, Zip Code Jersey City, NJ 03 Name of Contact Joseph Javier			(W. 1974) 1995 196	one N	umber	TROL	8.
				EACILITY IA	 FORMATION							
Name of Facility Where Abatem Engine Company No-	ent is Ta	aking Place e Station	(3) Build		Type of Facility (4) ☐ School (K-12)		461					
Street Address 200 Sip Avenue					Subchapter 8 (other x Other (i.e. private & Sq. Feet: # 4000 of FI	commercia	al buil	dings., ho	omes, e	etc.)		
Jersey City, NJ	ty (6) Huds	0.502.50		ty Code (7) Use Only)	Current Use (prior if be	eing demol	lished):				
Name of Monitoring Firm Hired b	y Bldg.	Owner (8)	ASCN	/ No.	Name of Contractor (9)	1						
Street Address			1		BL Contracting Inc. Street Address 5 Marguerite Lane		10					
City, State, Zip Code					City State, Zip Code Towaco NJ 07082							
Project Manager for Monitoring F	irm	Telephone	Number		Telephone Number 973-650-0392			<u>License</u> 01265		er		
Scheduled Start Date (10) 06/12/18		06/16/18		ion Date (11)	Name of OSHA Monito Mark Jovic Consulting							
Occupancy Status During Abater Facility Closed/Vacated During Abatement Performed Outside Describe	a Entire	Period of A	hateme	nt	Street Address 87 Main Street							
⊠Other – Describe: 7 AM- 4 PM					City, State, Zip Code Lincoln Park, NJ 0703	5						
Source of Work (Check all that a	oply)											
≥ 3 sf or ≥ 3 lf ≥ 160 sf or ≥ 2	260 If			⊠ Renova □ Demolit		☐ Mini-Er ☐Glove-b ☒ Non-Fr	ag Pr	ocedure	re			
Location of Asbestos- Containing Material (ACM) in Facility (13)	Used S	ation Norma Solely by 'Custodial S NO		Description of As (ACM) (i.e. then surfacing, VAT, o	sbestos Containing Materi mal systems insulation, or other misc.)	ial A	moun		Abat		Type Encap E	inclose
Second Floor			X	Floor Tile and N	lastic	58	80 SF		X			
				=								
Name of Reg. Waste Hauler BL Contracting Inc		JDEP Was 0036784	te Haule	er ID#	Cubic Yards of Waste 4			Name of T.R.R.F	Regist	ered L	andfill	
						Disposa 06/15/2		<u>te</u>		ty, Sta	n, PA	
Completed by (Print or Type) Nedo Vasilic	-	<u>itle</u> roject Man	ager		Signature Nelo Vocil	ic		<u>Date</u> 6/8/2018				

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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

Data of Natification (4)	AHA				1								
Date of Notification (1)	08 / _	18			14		ig Owner/Operator (nship Board of E		III JUN	12	2018	}	
Agencies Notified	Type Notifica				No rescuentia	t Address Ewingv	ille Road		ASBESTO	s C(NTF	IOL 8	8
⊠ DOLWD	Amended					State, Zip			Lic	EIS	HIG	Andrew Control	100
□ DOH	Amendm	-				ing, NJ 0			The state of the s				
DCA (NJAC 5:23-8)	☐ Emergen justification		cluding	3	-	of Contac			Telephone Numb	ner			-
(☐ Cancellat					ton Shav			609-538-890		102		
					1 200000				009-330-890	0 1 1	102		_
Name of Facility Where A	\hatamant is T	Folding	Dlass	(2)	FA	CILITY	NFORMATION	T=					
Gusz Building	Abatement is 1	akınç	Place	(3)				Type of Facility					
Street Address								School (K-12	²⁾ 8 (Other than K-12)	1			
220 Ewingville Roa	d								rivate and commer		uilding	js,	
City (5)								Square Feet	# of Floors	BI	ldg. A	ge	
Ewing								10,000	2		70		
County (6)				A	Cou	nty Code (7	7)(STATE USE ONLY)	Current Use (Pr	ior if being demolis	hed)			
Mercer							60	School	170)				
Name of Monitoring Firm	Hired by Build	ding C)wner ((8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
Environmental Con	nections, In	ıc.					Shade Enviro	onmental, LLC					
Street Address							Street Address						
120 N. Warren Stree	et						623 Cutler Av	enue/					
City, State, Zip Code							City, State, Zip Co	ode			(Sec. 215)		
Trenton, NJ 08629							Maple Shade						
Project Manager for Moni	itoring Firm			Tel	ephone	No.	Telephone No.	,	License No.			THE JO	
Roland Jones				Allega	09-392		856-755-0099		00842				
Start Date (10)	S	Sched	uled C	ompl	etion Da	te (11)	Name of OSHA M	National Co.					
06 /18 /	18	_0	6_ /	_2	2_ /		EMSL Analyti						
Occupancy Status During	그 100명 (100명) 기업을 가게 보았다면 함께 없었다.						Street Address						
☐ Facility Closed/Vacate							200 Route 13	0 North					
Abatement Performed Time of Abatement: _							City, State, Zip Co		=				
Scope of Work (Check all	that apply)							ainment with Neg	native Pressure				
≥3 sf or ≥3 If ≥160 sf or ≥260 If			⊠ Re □ De		550500000		☐ Mini-Enc	losure Procedure	n-Friable Procedur	e			
				Loca						Ab	atem	ent T	уре
Location Asbestos-Containing I TO BE ABA IN Facilit (13)	Material (ACM TED)	Use Ma	inten	lely by ance/ Staff?		Description o stos Containing Mar ., thermal systems i surfacing, VAT, other miscellaneo	terial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
(.0)			Yes	No	N/A		other miscellanet	Jusy				te	
Exterior				\boxtimes		Windov	v Caulk		125 LF				
			П	П	П					П	П	П	П
Name of Registered Wast	te Hauler				NJDEP		Cubic Yards of	Name of Regis	tered Landfill	1-		_	
Freehold Cartage					Hauler II	O No.	Waste 1	Fairless La					
City, State							Disposal Date	City, State					
Freehold, NJ							06/22/2018	Morrisville	, PA				
Completed By (Print or Ty Diana Lynch	rpe)	Title	wner				Signature	K4	Da		8.	- 1	V
CD 44							1/ ra	ref !	4	2	0	10	į į

ASB-41 JAN 13 * Do not use this form for asbestos licensure exempted activities.

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State of New Jersey
NOTIFICATION OF ASSESTOS ABATEMENT

		NOT	IFICATIO	State of N OF A It to NJA	SBES	Jersey ITOS ABATE 30 and 12:12	MENT		C	E		W	E
Date of Notification (1) 06/07/2018			Name Sprir	of Buildi	ng Ov Publ	vner/Operatoric Schools	(2)		1111	-	2		
Agencies Notified Type Notification)		Street	Address Mounte				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	JUN	1	2 2	018	
DEP Amended Amendmen	t#	22 5 2 2 2 2 2 2 5 5 7 5	City, S	tate, Zip ofield	Code	ship, NJ 0	7091	AS	BEST	75 (ON: SING	HO	_ &
DOH Emergency justification Cancellation	ì	g	Name	of Conta	ct		1001		one Nur	nber			- Tolke son
Name of Facility Where Abatement is Takir		/3\	1			MATION	and the state of t		376-10	25 €	ext 12	239	-
Jonathan Dayton High School/Spi Street Address	ingfield	HS					Type of Facility School (K					territor en escalação y	WORKS AND ADDRESS OF THE PARTY
139 Mountain Ave. City (5)	and the state of t						Subchapte	er 8 (Other the private & co	ian K-12 mmercia	i) al bui	ldings	, hon	nes,
Springfield	-						Square Feet 100000	# of Flo	ors		Bldg.	Age	- Paris and a
County (6) Union			County (STATE	Code (7 USE ON) L.Y)		Current Use (P High School	rior if being d	lemolish	ed)			Professional Control
Name of Monitoring Firm Hired by Building Envirovision Consultants, Inc	Owner (8	3)	ASCI 000	VI No. 79	ne Potri ne ser pinertilizare	Name Bako	of Abatement Co Construction	ontractor (9)	ation	inc		-	*********
Street Address 20-21 Wagaraw Road, Bldg. 35 E		PP III of this involution				Street	Address Route 46 Su	THE RESIDENCE OF THE PARTY OF T			***************************************		-
City, State, Zip Code Fair Lawn, NJ 07410	and the second s	YOU PARKET AND	Фарил № Тац Бин (од 150 година)		e de la compansión de l	City, Si Totov	tate, Zip Code wa, NJ 07512					i Merindan Seniera	
Project Manager for Monitoring Firm Guillermo M. Morales			Telepho 973-6	ne No. 36-914	5	Teleph	one No. 256-7010	-	ense No		-		
Start Date (10) . 06/15/2018	_06/17	/2018	mpletion	Date (11	1)	Name (of OSHA Monitor Construction			00			-
Occupancy Status During Abatement (Chec Facility Closed/Vacated During Entire I				The first concession where	TOTAL SUPERING	Street	Address Route 46 Su					*******	
Abatement Performed Outside of Norm Other - Describe:	renou or nal Facilit	Abater y Hour	nent s			City, St	ate, Zip Code		the street on the base street, groups	**********			
Scope of Work (Check All That Apply)		***********	Notes to the second section of the second	· · · · · · · · · · · · · · · · · · ·		1000	va, NJ 07512					***********	to a tripical against
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli					Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure					
		Locat			** Commercial or	and the same of th	Tron-Liveringte	u () and Nor	1-Fria Die		-	e ment	
Location of Asbestos-Containing Material (ACM)	Use	Norma d Sole	ly by	Asha	sins (Description	of aterial (ACM)				Ту	ре	
IO BE ABATED In Facility (13)		todial (12)		(i.e	ther s	mal systems urfacing, VAT er miscellane	insulation,	Amoun (Specif SF or Li	y	Removal	Repair	Encapsulate	Enclosure
Room G-2	Yes	No	N/A	**************************************	TO PROFESSION IN SERVICE				And the second format of the second	/al	7	Hate	ure
NOON G-2	-	X	1	Te	rmal	System In	sulation	16 LF		K			
		Park Billion - 1-4.								*******		~~~	P-Internation
Name of Registered Waste Hauler		IN	JDEP W	iste	Tou	bic Yards	Name of	Registered La	and till	***************************************			
Bako Construction & Restoration, In	0.		auler ID 1 0889	Vo.		/Vaste	9.8	vn Resour		OVE	ry F	acilit	У
otowa, NJ					Dis 06	posal Date /18/2018	City, State Tullytov			ar Windows (ng Photographic control	NO. (1934) No. of
completed by Damir Valjevac	Title Proje	ot Ma	nager	ATT DEPOSITE OF STATE		Signature	- Alla	Company of the Compan	Date 06/0	7/2	018		
SB-41 (R-08-08)					l	* Do not	use this form for	asbestos lica	1			rctiviti	25

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Date of Notification (1)			Nama	of Duitalia											
05/30/2018			Sprin	of Buildin Igfield F	ublic S	Operation of the chools	or (2) S	1		Jl	11	2	20	18	The state of the s
Agencies Notified Type Notification			139 N	Address Vountai				1 1	į.	ACC	- 177		(ini	ROL	. &
DEP Amended Amendmen				tate, Zip 0 gfield To		o, NJ	0708	1		F 1073-1 III	110	. N.	<u>ing</u>		and the same time
DOH justification) DCA Cancellation			Willia	of Contac Im Knor	r					lephone 3-376			xt.12	239	
Name of Facility Where Abatement is Takir	ig Place (3	3)	FAC	ILITY IN	ORMAT	NOI	Tyn	e of Facility (4	4)					_	
Jonathan Dayton High School/Spr Street Address 139 Mountain Ave.	ingfield i	HS ——						School (K-12 Subchapter Other (i.e. pretc.)	2) 8 (Oth	er than & comm	K-12) ercial	buil	dings	, horr	nes,
City (5) Springfield								are Feet	# 0	f Floors		1 2	3ldg. /	Age	
County (6) Union			County (STATE	Code (7) USE ONL	0		Curr	ent Use (Prio Ih School	r if bei	ng dem	olishe	d)			
Name of Monitoring Firm Hired by Building Envirovision Consultants, Inc	Owner (8)		ASCI 0007	VI No. 79		Name Bak	of Ab	atement Cont nstruction &	ractor 3 Res	(9) storatio	on, ir	IC.		W	
Street Address 20-21 Wagaraw Road, Bldg. 35 E						100000000000000000000000000000000000000	t Addre	ess ute 46 Suite	e 3D						
City, State, Zip Code Fair Lawn, NJ 07410				AND WAS				Zip Code NJ 07512		-			-		
Project Manager for Monitoring Firm Guillermo M. Morales			Telepho 973-6	ne No. 36-9145	5		hone N -256-			Licens 0666	e No.				
Start Date (19) 06/08/2018	Schedule 06/10/2	018	npletion	Date (11)				HA Monitor Instruction 8	Res	toratio	n, In	С.			
Occupancy Status During Abatement (Chec Facility Closed/Vacated During Entire F							Addre	iss ute 46 Suite	30						
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other - Describe:	reriod of Ai nal Facility	Hours	nent S			City, 8	State, Z	Lip Code NJ 07512				-			
Scope of Work (Check All That Apply)												-			
≥3 sf or ≥3 if ≥160 sf or ≥260 if	Command.	enova emolit				18 3	Mi Gi	II Containmer ni-Enclosure ovebag Proce n-Exempted	dure						
	ls L	_ocati	on			- American	1 110	Tr-Exempled	() and	Non-Fi	lable		Abate	ment	1
Location of Asbestos-Containing Material (ACM)	1	ormal Sole		Achae		scription				2000 Dec 200 Q 5	-	-	Ту	pe	
TO BE ABATED In Facility (13)	Custo	(12)	Staff?				s insul: T, or		(S	nount pecify or LF)	and the second part of the secon	Removal	Repair	Encapsulate	Enclosure
Room G-2	Yes	No X	N/A	Tox	mal Ou	-4	(6	
room d-2				ier	mal Sys	stem i	nsula	tion	16	S LF	2				
						No. of the second second					-	-			
Name of Registered Waste Hauler	2	1000	JDEP Wa		Cubic of Was			Name of Re							
Bako Construction & Restoration, Inc	O. ————		0889	110.	10			Tullytowr	n Res	ource	Rec	ove	ry F	acilit	:у
City, State Totowa, NJ					Dispos 06/11	al Date /2018		City, State Tullytowr	n, PA						
Completed by Damir Valjevac	Title Projec	t Ma	nager		Si	gnature 700		Mign	~	1.00	Date 05/3	0/2	018		

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

Date of Notification (1)					TN	(D :: ::			1	261	E 1	M	ㅂ	11	1
06 /	08 /	40					g Owner/Operator (1.75	$ U\rangle$		200				Separate Sep
	08 / _				Jac	ops Land	ding Phase 1 LII	HIC, LLC		1	12	2018	2	1	111
Agencies Notified	Type Notific	ation			Stree	Address			1	JI JUN	1 L	LUI	•	Leras	-
⊠ EPA ⊠ DOLWD	☐ Initial	4			5 P	owell Lar	ne						Decrees		
⊠ DOH	Amendm					State, Zip C			- Laboratoria	ASBEST	OS CC	NTF	OLE	ž.	
DCA	☐ Emergen	- Carlotte	cluding	1	Co	llingswoo	od, NJ 08108			ASSILO	CENSI	NG	and an artist of the last	and the same of	
(NJAC 5:23-8)	justificati	on)			Name	of Contac	t		Liseau	Telephone N	umber				
	☐ Cancella	tion			Joe	DiSalvo				856-662-1	1730				
					FA	CILITY IN	FORMATION								
Name of Facility Where A	Abatement is	Taking	Place	(3)				Type of Fa	cility (4	4)	1.00				_
Jacobs Landing Ph	ase 1							School	(K-12)						
Street Address								Subcha	pter 8	(Other than K	(-12)				
20 Bunns Lane								homes,		vate and com	mercial	build	ings,		
City (5)								Square Fee	,	# of Floors	T	Blda	. Age		
Woodbridge								5,000		2		70			
County (6)					Cour	nty Code (7)(STATE USE ONLY)	The second secon	e (Pric	or if being dem	nolished	1)			_
Middlesex							,	Vacant	TO NO. 1010			· /			
Name of Monitoring Firm	Hired by Build	ding C	wner	(8)	ASCM	No.	Name of Abateme	ent Contracto	or (9)				1.000		-
EHS Environmental	l, Inc.	1070					Shade Enviro								
Street Address							Street Address								
411 Southgate Cou	rt, Suite E						623 Cutler Av	/enue							
City, State, Zip Code							City, State, Zip Co								_
Mickleton, NJ 08056	6						Maple Shade								
Project Manager for Moni	170			Tele	phone	No.	Telephone No.	,		License No.					-
Jack Carney				1 200	56-224		856-755-0099			00842	•				
Start Date (10)	15	Sched	uled C			te (11)	Name of OSHA N								
06/18/				235	2 /	25 (5)	EMSL Analyt	Q0 Q1 Q1							
Occupancy Status During							Street Address	,	-					-	_
☐ Facility Closed/Vacate			1.03		ment		200 Route 13	0 North							
☐ Abatement Performed						cribe	City, State, Zip Co	KITA A SANCELIA ATTA							_
Time of Abatement: _							Cinnaminson								
Scope of Work (Check all	that apply)						Ommannison	1, 140 00077							_
	mar apply/		-				☐ Full Cont	ainment with	Nega	ative Pressure	0				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			☐ Re 図 De				☐ Mini-Enc								
☐ ≥100 St 01 ≥200 II			△ De	HIOHU)[]		☐ Glovebag	g Procedure	d Non	-Friable Proce	edure				
			Is	Loca	ion			7 (/	T			Abate	ement	Tvp	e
Location				Norma			Description o	f			-		- 1	1	-
Asbestos-Containing I		1)		d Sol			stos Containing Ma			Amount	1	Par S	Renair	3 3	nclo
TO BE ABA IN Facilit					Staff?	(i.e.	, thermal systems surfacing, VAT,			(Specify SF or LF)	1	Removal	ii lo	20 20	Enclosure
(13)	.,			(12)			other miscellane			01 01 21)	Ι.	-	Renair	1216	Ď
-t 0x			Yes	No	N/A										
Building 12 Unit B				\boxtimes		Sheet F	looring and Mas	stic		40 SF		3 [] [
									_		-	7	7 [7 1	\exists
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Name of Registered Wast	te Hauler			100	JDEP \		Cubic Yards of	Name of F	Registe	ered Landfill					
Freehold Cartage					15939		Waste 1	Fairles	s Lar	ndfill					
City, State							Disposal Date	City, State							\neg
Freehold, NJ							06/22/2018	Morris	ville,	PA /					
Completed By (Print or Ty	/pe)	Title				J	Signature		1		Date	7 100000			
Diana Lynch	2004.03%	0	wner					' X	4	er	6-	8	-/0	P	
							12 Non	111.	1			100			_

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

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Print Form

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

	Pursuant	to NJAC	8:60 an	d 12:12	0)	115		111 340 1010 1010	The said of the sa				Marketon of Control				
Date of Notification (1) 06/07/2018					of Building			r (2)	And the second s		JUN 1	2 2	018				
Agencies Notified	Type Notification			Street A	Address				-	e e e e e e e e e e e e e e e e e e e					2		
EPA DEP	Initial				erry Hill				Sparing and a	ASB	ESTOS	CONS	BO	1 2	Ĵ.	1	
	× Amended				ate, Zip C					7102	LICE	USING	110	Su Ci			
X DOL	Amendmen Emergency				ridge, N		7				- Comment of the				Section in France	-	
X DOH	justification)		,		of Contact					7550	lephone N		r				
DCA DCA	Cancellation	1		Eric F						73	32-727-	1414					
Name of Facility Where	Abatament is Takir	a Diana /	2)	FAC	ILITY INF	ORMATI	ON	-									
Glenwood Apartme		ig Place (3)					Ту	pe of Facility	(4)							
Street Address									School (K-								
6-8 Cherry Hill Ln								×	Subchapte Other (i.e.				ıildir	าตร	home	25	
City (5)								_	etc.)			. Oidi bi	27 1 1 1 1			,,,	
Old Bridge								100	juare Feet	1000000	f Floors			g. A	ge		
County (6)								- 10 V	000	2			60	+			
Middlesex county					Code (7) USE ONL	0			irrent Use (Pr partment	or if be	ing demo	lished)					
Name of Monitoring Firm	Hired by Building	Owner (8))	ASC	d No.		Name	ame of Abatement Contractor (9)									
N/A	, ,	100					100000000000000000000000000000000000000		neral Cons								
Street Address							Street			uouc	71, 1110.						
							100000000000000000000000000000000000000		lifton Aveni	ıe. PN	/IB Suite	218					
City, State, Zip Code									, Zip Code								
							8:25		NJ 07012								
Project Manager for Mon	itoring Firm		T	Telepho	ne No.		Teleph	none	No.		License	No.					
							973-	389	9-0089		00693	3					
Start Date (10)					Date (11)		Name	of C	SHA Monitor								
06/15/2018		06/20/					DIA	Ge	neral Cons	tructio	n, Inc.						
Occupancy Status During	g Abatement (Chec	k Only Or	ne)				Street			100	2000 102 10						
Facility Closed/Vaca	ated During Entire I	Period of	Abater	ment					ifton Avenu	ie, PN	1B Suite	218					
Abatement Performe Other – Describe:	ed Outside of Norn	nal Facility	y Hour	s					, Zip Code								
							Clifto	on,	NJ 07012								
Scope of Work (Check A	ii That Apply)	Comments.					proces	7									
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TW	Renova	2000			-		Full Containm		Negative	Press	ure				
=100 SI 01 2200 II			Demoli	uon			×		Mini-Enclosuri Glovebag Pro								
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		1	Locat										Ab		ment		
Location			Normal ed Sole		8		cription					-	_	Тур	oe T		
Asbestos-Containing TO BE ABA			intena			tos Conta			rial (ACM)		mount	_			m	m	
In Facili		Cus	todial ((12)	Staff?	(1.6.		systems sing, VA				Specify or LF)	kem		Renair	cap	nclo	
(13)			(12)			other m	niscellan	eou	s)		*	Remova	3	ă.	Encapsulate	Enclosure	
		Yes	No	N/A								-			ite	Φ	
6 A-D Cherr	y Hill Ln	x			P	ipe/Elb	ow Ins	sula	tion	18	30 LF	X					
8 A-D Cherry	y Hill Ln	x							ow Insulation 150 LF K								
													T				
												1	1				
Name of Registered Was	te Hauler							Cubic Yards Name of Registered Landfill									
Service Transport G	roup		2	NO.	of Was	te		Minerv	a Land	dfill							
City, State			Disposal D						City, Stat	9		_				\dashv	
New Castle, DE 197	20		06/20/20						5.0		OH 44	688					
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Milan Njezic		Vice							06/07/2018								

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Print Form

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Date of Notification (1) 06/07/2018		Name of Building Owner/Operator (2) Glenwood Apartments														
Agencies Notified	Type Notification		-	Street A	ddress				- Arrange	ra chiamana				no designation of	1	
□·				1 Che	rry Hill L	_n) AS	BES	I US COI	iros	mend		and the second	
EPA DEP	Initial Amended		-		ate, Zip Co					1	CENSIN	G	L&_	-	į.	
X DOL	Amendment	#			ridge, N		7				The same of the same of	Malphanama aben	and a range	Tribate Alexandri	į.	
despects	Emergency	(including			f Contact	0 00007								505.00		
DOH DCA	justification)			Eric P						8,47,67	ephone Nu					
□ DCA	Cancellation	1		40100200000	0385577577					13	2-727-14	+14				
Name of Facility Where	Abatement is Takin	a Place (2)		FACI	LITY INF	ORMATIC	NC	Time	-4 F:!!4 · /4							
Glenwood Apartme		ig Flace (3)						Туре	of Facility (4)							
	111								School (K-12)							
Street Address	ET CONT								Subchapter 8 Other (i.e. pri				dinac	hom	00	
12 & 16 Cherry Hil	I Ln								etc.)	vate c	x commerc	iai buii	unigs	HOHR	es,	
City (5)								Squar	are Feet # of Floors			E	Bldg. A	\ge		
Old Bridge								2000)	2		1	+06			
County (6)					Code (7)			Curre	nt Use (Prior	if bei	ng demolis	hed)				
Middlesex county			13	(STATE	USE ONLY			Apartment								
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	/I No.		Name	ne of Abatement Contractor (9)								
N/A	, ,							e of Abatement Contractor (9) A General Construction, Inc.								
Street Address			-					Addres		oristraction, inc.						
21100171001000										anue PMR Suite 218						
City, State, Zip Code								60 Clifton Avenue, PMB Suite 218 State, Zip Code								
Oity, Otate, Zip Code							fton, NJ 07012									
Desiret Messes for Mes	.,															
Project Manager for Mon	itoring Firm			Telepho	ne No.			phone No. License No.								
							973-	389-0	1089		00693					
Start Date (10)		Scheduled		pletion	Date (11)				A Monitor							
06/15/2018		06/20/20)18						ral Constru	ıctio	n, Inc.					
Occupancy Status During	g Abatement (Chec	k Only One)				Street	Addres	is							
Facility Closed/Vaca	ated During Entire I	Period of At	atem	ent			1360	Clift(on Avenue	, PM	B Suite	218				
Abatement Perform						T	City, S	tate, Zi	p Code	100000						
Other – Describe: _				Clifton, NJ 07012												
Scope of Work (Check A	Il That Apply)															
≥3 sf or ≥3 lf		X Po	nova	tion				1 5	Containmen	+ i+lo	Nonative I	2****				
× ≥160 sf or ≥260 lf		PROPERTY.	molit						Containmen i-Enclosure	t With	ivegative	ressu	re			
		-					×		vebag Proce							
		1					L	Nor	n-Exempted (*) and	Non-Frial	ole Pro				
		11	ocati	202,545										ement rpe	t	
Location		Used	rmall			Des	cription	of				-	1.7	he	-	
Asbestos-Containing		Main				tos Conta					mount			ū	m	
TO BE ABA		Custo			(I.e.	thermal s	systems ing, VA		tion,		pecify or LF)	Ren	Re	ıcaı	nc	
(13)			(12)			other m				O.	Of LI)	Remova	Repair	Encapsulate	Enclosure	
		Yes	No	N/A								<u>a</u>	-	ate	9	
		103	140	INIPA			roe gran			39000		-	_		\vdash	
12 A-D Cherr	y Hill Ln	Х			Р	ipe/Elbo	ow Ins	sulatio	n	18	80 LF	×				
16 A-D Cherr	y Hill Ln	x			Р	ipe/Elbo	ow Ins	sulatio	in	15	0 LF	X				
79.00						•						+	-	_		
Name of Registered Was	te Hauler		10000	JDEP W		Cubic Y			Name of Re	giste	red Landfil	1	0			
Service Transport G	roup		0.000	auler ID	No.	of Wast	te		Minerva	Land	dfill					
			12	0990		6 CY										
City, State	200		Disposal Date													
New Castle, DE 197	20		06/20/2018													
Completed by		Title	Signature					1 1			Secret .	ate	2 14			
Milan Njezic		Vice President Cq (06/07/2018								
				7-7-			1									

V(U - (-

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

Print Form

			Name of Building Owner/Operator (2)								Marting Street	Wales and State of St				
Date of Notification (1) 06/04/2018					of Building (wood Apa		tor (2)	de la constant de la	JU	K 12	201	8		- Constant		
Agencies Notified	Type Notification	1			Address			1	0000	TC8 (7	VALUE		-23	D 225-AL.		
EPA DEP	X Initial				erry Hill L				Market Comment	IOHUS	MG.	ULG	4	to beautiful and		
DEP X DOL	Amended Amendmer				tate, Zip Cod Bridge, NJ			3 17 10 mmm. 4		*	To a settle better between		Lemus territorio	-		
▼ DOH	Emergency justification		3		of Contact				Teler	phone Nu	ımhar			1000		
DCA	Cancellatio			Eric F	Prieto				and consult	-727-14						
Name of E - 222 AAR				FAC	ILITY INFO	RMATION				i mailean ma						
Name of Facility Where Glenwood Apartme		ng Place (3)				Тур	e of Facility (4)							
Street Address	2110							School (K-12	2)		•					
12 & 16 Cherry Hill	Ln						×	Subchapter 8 Other (i.e. pretc.)	ivate &	than K-1 commerc	2) ial bui	ldings	, hom	ies,		
City (5) Paterson							Squ 200	are Feet	# of F	loors		Bldg	Age			
County (6)			1	County	Code (7)	1	100000		_	domolio		00 +				
Middlesex					USE ONLY)			Current Use (Prior if being demolished) Apartment								
Name of Monitoring Firm	Hired by Building	Owner (8)	ASCI	M No.				ment Contractor (9)							
Street Address									Construction, Inc.							
Street Address							et Addr		ם אחם	0	040					
City, State, Zip Code								ton Avenue Zip Code	, PIVIB	Suite	218					
							IJ 07012									
Project Manager for Mon	itoring Firm	T	Telepho	ne No.		ohone N		L	icense N	lo.						
0: 10: (46)						973	3-389-	0089	(00693						
Start Date (10) 06/15/2018		Schedul 06/20/			Date (11)			SHA Monitor		i and						
Occupancy Status During	a Abatement (Che						et Addre	eral Constru	uction,	inc.						
Facility Closed/Vaca			000000	ment				ton Avenue	. PMB	Suite 2	218					
Abatement Perform	ed Outside of Norr	nal Facility	/ Hour	S		Zip Code						_				
Other - Describe: _			-			- Clif	ton, N	IJ 07012								
Scope of Work (Check A	Il That Apply)	-					anany .									
≥3 sf or ≥3 if ≥160 sf or ≥260 if		Personne	Renova Demoli			The second second second second	× GI	all Containment ini-Enclosure ovebag Proces on-Exempted (dure				10			
		Is	Locat	ion				/ dila i	torr ride	T		ement				
Location			Normal d Sole			Descriptio	n of					Ту	ре			
Asbestos-Containing TO BE ABA		Ma	intena	nce/	Asbesto	s Containing nermal systen	Materia	I (ACM)	Amo		_		四	ш		
In Facili	ty	Cus	todial 9 (12)	Staff?		surfacing, V.	AT, or	-	(Spe SF or		Removal	Repair	caps	Enclosure		
(13)		Van		T		other miscella	ineous)				oval	air	Encapsulate	sure		
12 A-D Cherr	v Hill I n	Yes	No	N/A	Dia	e/Elbow In	o. dot		100		-		CD			
16 A-D Cherr		X							180		X					
TO A D OHER		Lih	Pipe/Elbow Insulation 150 LF ⊀													
Name of Registered Wast			118	JDEP W auler ID		Cubic Yards of Waste		Name of Re	gistered	Landfill						
Service Transport Gr	roup		199	0990		6 CY Minerva Landfill										
City, State New Castle, DE 1972	20				31.8	Disposal Date		City, State Waynesh	ura C)H 4469	38					
Completed by Title						06/04/2018 Waynesburg, OH 44688 Signature 7 Date										
Milan Njezic Vice Pres										2018						

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			()	rursuant	to NJAC	8:60 an	id 12:12	0)			. Fast -	e .		1	11 11
Date of Notification (1) 06/04/2018				of Building			(2)	il branch	1-4		4	018	1	14	
Agencies Notified	Type Notification	,		Street A	vood Ap	artmer	IIS			L.					1
	1				rry Hill I	Ln				AS:		Kiri.	4.1	7) 7.	
× EPA DEP	X Initial Amended		-		ate, Zip Co					44	~ 4	0.001			
DOL.	Amendmen		_		ridge, N		7		Š.			198.0			T-
X DOH	Emergency justification			Name o	f Contact					Tele	ephone Nu	mber			
DCA DCA	Cancellation			Eric P						73	2-727-14	14			R
Name of Facility Where	Abstement is Takir	ag Place /2	1	FACI	LITYINF	ORMAT	ION	T		41					
Glenwood Apartme		ig Flace (a	7)					1 yp	e of Facility (
Street Address								H	School (K-1 Subchapter		er than K-1	2)			
6-8 Cherry Hill Ln				b	080000000000			×	Other (i.e. p etc.)				dings	home	es,
City (5)	ld Bridge	2_						Squ 200	are Feet 00	# of	Floors	- 10	3ldg. <i>A</i> 30 +	\ge	
County (6)	V		T		Code (7)			Cun	rent Use (Prid	or if beir	ng demolis	ned)			
Middlesex				***********	USE ONLY			Apartment							
Name of Monitoring Firm N/A	Hired by Building	Owner (8)	LAU IIA	ASCN	A No.				atement Cor						
Street Address							-		eral Const	ructio	n, Inc.				
Street Address							Street		_{ess} fton Avenu	o DM	IR Suito	210			
City, State, Zip Code			li Nordonia			district the			Zip Code	ie, Fivi	D Suite 2	210			
									J 07012						
Project Manager for Mon	Project Manager for Monitoring Firm						Teleph	one I	No.	T	License N	0.			-
							7-0-	3-389-0089 00693							
Start Date (10) 06/15/2018		Schedule 06/20/2		mpletion	Date (11)				SHA Monitor eral Const	ruction	n. Inc.				
Occupancy Status During	g Abatement (Chec	ck Only On	e)				Street			, aotioi	1, 1110.				-
Facility Closed/Vaca	ated During Entire	Period of A	baten	nent			1360	Clif	ton Avenu	e, PM	B Suite 2	218			
Facility Closed/Vaca Abatement Perform Other – Describe:	ed Outside of Norn	nal Facility	Hours	8		714	City, S	tate, i	Zip Code						
					- 16		Clifto	on, N	NJ 07012						
Scope of Work (Check A	II That Apply)	[reserve]					grown.								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		PROPERTY.	enova emolit				×	M G	ull Containme ini-Enclosure lovebag Proc on-Exempted	edure				5	
		la la	Locati	ion			- Summer	110	on-Exempled	() allu	Non-Friad	FIO	30.100-306	ement	
Location	of	N	ormal	ly		De	scription	of						ре	
Asbestos-Containing	Material (ACM)		d Sole			tos Cont	aining M	lateria	al (ACM)		nount	_		ш	E
TO BE ABA in Facili		Cust	odial S	Staff?	(i.e.		systems cing, VA		lation,		pecify or LF)	Remova	Repair	тсар	ndlo
(13)		-	(12)			other n	niscellan	eous)			oval	bair	Encapsulate	Enclosure
		Yes	No	N/A	1 2									te	9
6 A-D Chern	y Hill Ln	X			Р	ipe/Elb	ow Ins	ulati	ion	18	0 LF	K			
8 A-D Chern	y Hill Ln	Х			Р	ipe/Elb	Elbow Insulation 150 LF <								
Name of Registered Was	te Hauler		IN	JDEP W	aste	Cubic	Yards		Name of F	Register	ed Landfill				
Service Transport G			Н	auler ID	73.7	of Was	of Waste								
City, State			2	0990		6 CY		III							
New Castle, DE 197	20					Section 1995	al Date /2018		City, State		OH 4469	38			
Completed by		Title					6/04/2018 Waynesburg, OH 44688 Signature						-		
Milan Njezic		Vice F	Presi	dent			(2)	14	-/t	7	-		2018		
						(/									

CHECK #

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CV	4642
- W	7092

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

Date of Notification (1)		Name of	f Building Own	net/Operator (1		1 1	/ 6	
6/7/18		1	TR. I	SUACO	STRAI	us te lo					
Agencies Notified Type Notification		Street A	ddress				U),	12	201	8	
☐ EPA Initial		City, Ct	ata Zin Cada						/-W1	-	
DEP		City, Sta	ate, Zip Code	. 4	N.T. D	7446 ASBE	440/4	e terren	********		
☐ Emergency (inc	cluding		Contact	1	104.0	Telephone Numb	or C	S UU MSH	NTB VG	DL 8	
DOH justification Cancellation			D. ST	WANG 5	reus	F				Ì	
			LITY INFOR								
Name of Facility Where Abatement is Taking Pla	0.10.00	. 20		20	Type of Facility	(4)					
Street Address	angra	5CV)			School (K-	12) 8 (Other than K-12)					
Street Address			****			orivate & commercial b	ouildin	gs, ho	nes, e	tc.)	
City (5)			<u> </u>		Square Feet	# of Floors	В	ldg. A	ge	-	
RAMSEY		1,			2500	2		19	35	5	
County (6) BERGEN		County (The second secon	or if being demolished)					
			USE ONLY)			10ENG					
Name of Monitoring Firm Hired by Building Own	ner (8)	ASCN	A No.	Name	of Abatement Cont	ractor (9)					
Street Address				Bes	t Remova Address	l Inc.				_	
Street Address						iver Stree	_			1	
City, State, Zip Code				City. S	State, Zip Code	iver stree	L		-		
				1		NJ 07601					
Project Manager for Monitoring Firm		Telephor	ne No.		none No.	License No.					
				201	-329-7444	0038	8				
	Scheduled Com	- 1		Name	of OSHA Monitor	T					
6/20/18		21/1	18	Ome.	ga Enviro	nmental					
Occupancy Status During Abatement (Check Only	1 12				Address					- 1	
Facility Closed/Vacated During Entire Period Abatement Performed Outside of Normal Fa	d of Abatement				Huyler State, Zip Code	Street				-	
Abatement Performed Outside of Normal Fa Other - Describe:	CC: 2	en.		1		I- N.T.	776	0.0		1	
Scope of Work (Check All That Apply)		South Hackensack, NJ 07606									
₽ ≥3 sf or ≥3 lf	Renova	tion			☐ Full Containm	ent with Negative Pres	sure			- 1	
□ ≥160 sf or ≥260 lf	☐ Demoli	tion			Mini-Enclosur						
					 Glovebag Proc Non-Exempted 	edure l (*) and Non-Friable F	roced	ure			
	Is Locat	tion						Abate			
Location of	Norma	lly		Description	of			Ty	pe	-	
Asbestos-Containing Material (ACM) TO BE ABATED	Used Sole Maintena				laterial (ACM) lation, surfacing,	Amount (Specify	×		-En	H	
In Facility	Custodial (12)		111800000000000000000000000000000000000	VAT, or	-	SF or LF)	Remova	Repair	Encapsulate	Enclosure	
(13)	(12)	1		other miscellar	neous)		val	Ħ·	ulate	ure	
	Yes No	N/A									
BASEMENT/HOILER ROOM		1	THERMAN	SYSTEM	INSULATION	160CF	X				
/											
81											
Name of Registered Waste Hauler		NJDEP Wa		ubic Yards	Name of	Registered Landfill		-			
D D 7	Hauler ID		f Waste	(e) v.		_		100			
Best Removal Inc City, State	1710		risposal Date	/ Mine City, Stat	<u>rva Enterp</u>	ri	ses	<u>, I</u>	LC		
Hackensack, NJ 07601				6/21/18	/	20 000000 20 000000	1.	468	Q		
Completed by	Title		Signature	1	Date		1	2			
J. Maiorano	Estima	ator		1	(Maisson 6/7/18						



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Date of Notification (1)		Nan		lding Owner/Ope						and the second	Carrier - Friday	-
6/7/18				· CYNT	HIA	SHE	ARIN		1.7	201	3	AL STATE
Agencies Notified Type No	tification	Stre	et Addre	SS								S. Carlotte
DEP DOI AI	tial nended nendment # nergency (including		y, State, 2	DONFIE	w.	ru Tu	. 07	7003 GBESTO		NTF	IOL I	8
DOH ju	stification)	INAL		. SHEAR	wie			Z) .	_			\dashv
DCA LL C	erchation	F		Y INFORMATI	ON	Type of Fac	ility (A)					\dashv
	is Taking Place (3) YNTHIA SHE	EAG(دنى			□ Schoo	ol (K-12)	Other than K-12) ate & commercial buil	dinos	home	s. etc.	,
Street Address								# of Floors		z. Age		\dashv
City (5)	FI.ELO					Square Fee	0	2		93		
County (6)			unty Coc		-	Current Us	e (Prior i	f being demolished)	•			
ESSE	,		TATE USI		Name 0	of Abatemen			SHOPE			
Name of Monitoring Firm Hired by	Building Owner (8)		ASCM N	₩.		Remo						
Street Address			-		Street A	Address						
SHOOT NAMED OF						South tate, Zip Co		ver Street				
City, State, Zip Code					0.00			NJ 07601				
		Te	elephone	No.		one No.	- K 9 1	License No.				
Project Manager for Monitoring Fit	ш		•		201-	-329-7	7444	00388				
Start Date (10)	Scheduled C			:(11)		of OSHA M		. 1				
6/25/1	Y Ghask Only One)	26	18		Ome 8	Address	riro	nmental				
Occupancy Status During Abateme		ent			280	Huy1e	er S	treet				
☐ Facility Closed/Vacated Duri ☐ Abatement Performed Outside	e of Normal Facility Hours	00	H			state, Zip Co			761	16		
Other - Describe: 8:00					Sout	th Had	cken	sack, NJ C	/01	10		
Scope of Work (Check All That A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Ren	ovatio nolitio			Æ	Mini-E	nclosure	nt with Negative Press dure (*) and Non-Friable P		ıre		
					[□ Non-E	xempted	(*) and Non-Friable 1		Abate		
		ocatio		r	escription	n of				Ту	pe	
Location of Asbestos-Containing Materia TO BE ABATED In Facility (13)	ul (ACM) Used Mair Custo	Solely ntenano dial St (12)	by ce/	Asbestos Coi (i.e. thermal sys	ntaining N stems inst VAT. o	Material (AC ulation, surf	CM) acing,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A				- TIQ1	100 LF	x			
BASEMENT			V	THERMAL	Systel	9,200	Allor	700 -1				
			-									
		-										
Name of Registered Waste Haule Best Removal In City, State			IJDEP W fauler ID	No. of V	posal Date	1207	Mine City, Sta					Ιď
Hackensack, NJ	07601				6/2	1	Wayn	esburg, O		468	13	
Completed by	Title	imo	ator		Oignadi		عمضا	Jung	6	17/	18	
J. Maiorano	ESL	TIII	IUI			1 -		orm for asbestos licens			d a sei	vitio.



Date of Notification (1) 06/07/2018	Name of Building Owner/Operator (2) Jacqui Mandelbaum															
Agencies Notified	,,								1,1							
EPA DEP DOL	Initial Amended Amendmen Emergency		_	North	ate, Zip C Plainfie	ld, NJ	07060		4	J	UN I	2 20)18	inni di disalifi		an ordered manufactures
DOH DCA	justification Cancellation			Jacqu	f Contact i Mande	elbaum			1	Tel	lephone	Numb	eri	Lå	e de la martin de la c	Biotom v
Name of Facility Where	Abatement is Takir	ng Place (3)		FAC	ILITY INF	ORMAT	ION	Type	of Facility (4	47						
House		.g . 1200 (0)						-	School (K-12							
Street Address								×	Subchapter Other (i.e. pretc.)	8 (Oth	er than I & comm	K-12) ercial b	uild	ings,	home	es,
City (5) North Plainfield					-				re Feet	# o	f Floors A			dg. A	ge	
County (6) Somerset					Code (7) USE ONLY)		Curre	ent Use (Prio Se	r if bei	ing demo	olished)		211-11-	
Name of Monitoring Firm N/A	Hired by Building	Owner (8)	*	ASCN	I No.				tement Cont ement, Inc		(9)					
Street Address							7000	Addres osenç	ss gren Aven	ue						
City, State, Zip Code						911)			ip Code J 07512							
Project Manager for Mon	Project Manager for Monitoring Firm							none N 345-8			Licens 01311					
Start Date (10) 06/18/2018		Scheduler 06/19/2		mpletion	Date (11)		110000000000000000000000000000000000000		HA Monitor ement, Inc	о. С.				Intiksa		
Occupancy Status During	g Abatement (Che	ck Only One	∍)				THE STATE OF THE STATE OF	Addres	274							
Facility Closed/Vaca Abatement Perform	ed Outside of Norr	Period of Almal Facility	bater Hour	nent 11 Rosengren Avenue City, State, Zip Code										- 2 1		
Other – Describe: 9						-			J 07512							
Scope of Work (Check A	II That Apply)							7								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		(morning)	enova				×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
		ls l	ocat	ion										bate	ment	
			ormal Sole			De	scription	of				-	Т	Ту	oe	
TO BE ABA	Asbestos-Containing Material (ACM) TO BE ABATED In Facility Used S Mainte Custodi					thermal surfa	taining M systems cing, VA miscellan	s insula T, or	(ACM)	(S	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
Baseme	ent		X			Pipe	Insula	tion	-	16	35 LF	7	7		_	
788-80 (-100) 2410 (-100)	- 74									- -	+					
										+	+					
										+	+					
Name of Registered Was	te Hauler		NJDEP Waste					Name of R	egiste	red Land	dfill				-	
Das Abatement, Inc.					Hauler ID No. of Waste 20996 TBD Waste Management of PA											
City, State Totowa, NJ			TBD	sal Date		City, State Morrisvil		Ą								
Completed by Ned Joksimovic Title Project Ma					ect Manager Signature Date 06/07/2018						018	8				

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

		- 1		Building Owner	(Omaratar (2	1		111 12 (6	1	1		TI			
Date of Notification (1)				BUILDING OWIE			con					All the second of			
Agencies Notified Type Notification			Street Ad				-	11 11	10	201	Q				
☐ EPA Initial								17	1 6	LUI	<u> </u>	lone			
□ DEP □ Amended				te, Zip Code				5 . L .							
DOL Amendment #_	luding	-	E	NGLEV	OCCU	. 1	1J. P	7637	19.00	INTE	OL.	Š.			
DOH justification)	iuumg		Name of					Telephone Numb	er	ING		-1			
□ DCA □ Cancellation				CAME!								. 9			
Name of Facility Where Abatement is Taking Plan	20 (2)		FACI	LITY INFORM	IATION	Type	of Facility (4)				\dashv			
Name of Facility where Abatement is Taking Flat		٠	=200	^ 3				57 37							
Street Address		-11-00	310	.,			School (K-12 Subchapter 8	(Other than K-12)							
Sacci Addicas				****		-	Other (i.e. pr	ivate & commercial l	uildin	gs, hor	nes, et	c.)			
City (5)			4.1			Squar	re Feet	# of Floors		ldg. A					
ENGLEWOOD			1.			. 2	900	2		19	40)			
County (6)			County C		-	Сигте	nt Use (Prior	if being demolished		58 5/W FCR					
BERGEN		1	STATE U	ISE ONLY)		7.	KES	I DEN CE							
Name of Monitoring Firm Hired by Building Own	ner (8)		ASCN	1 No.	Name	of Abat	ement Contra	actor (9)							
					Bes	st Removal Inc.									
Street Address							5.11	W-447954							
								ver Stree	t			-			
City, State, Zip Code					V-5500 #1200		p Code	0=/01							
	roject Manager for Monitoring Firm							NJ 07601 License No		-					
Project Manager for Monitoring Firm		Telephor	ie No.		one No										
Start Date (10)	Scheduled	Comp	letion De	ate (11)			7444 A Monitor	0038	8			\dashv			
6/19/18	6		>//		1.00.00		2.5.00								
Occupancy Status During Abatement (Check Only		1			Street	Address	S C C C C C C C C C C C C C C C C C C C	nmental							
☐ Facility Closed/Vacated During Entire Perio		ement	ent 280 Huyler Street												
Abatement Performed Outside of Normal Fa	cility Hor		As .				p Code								
Other - Describe: 730 SMTO	210	1001			Sout	th F	Hacken	sack, NJ	076	06					
Scope of Work (Check All That Apply)															
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☐ ≥160 sf or ≥260 lf		emoliti	on				ni-Enclosure ovebag Proce								
						□ No	n-Exempted	(*) and Non-Friable	Proced	ure					
	Is	Location	on							Abate Ty					
Location of	N	Iormall	y		Description	of			-	1	7				
Asbestos-Containing Material (ACM)		d Solely intenar		Asbestos (i.e. thermal	Containing M	faterial	(ACM)	Amount (Specify	×		En	편			
TO BE ABATED In Facility	Cust	odial S	taff?	***************************************	VAT, or			SF or LF)	Remova	Repair	Encapsulate	Enclosure			
(13)		(12)	,	ot	her miscellar	neous)			val	F:	ulate	ure			
	Yes	No	N/A												
BASEMENT			V	THORM	c ins	MAT	101	2304F	×						
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			-						-		-				
		- 1 -		<u></u>	1.1. 11. 1		None of	Dagistared Landfill							
Name of Registered Waste Hauler			JDEP W auler ID	10 PM	bic Yards Waste	1	Name of I	Registered Landfill							
Best Removal Inc 17						(se)	Mine	rva Enter	ori	ses	, I	J.C			
City, State					sposal Date	10	City, State								
Hackensack, N.J. 07601					G/ZO Signature	MD754	Wayne	esburg, 0		468	8				
Completed by	Title					20		Da	te	_1.	0				
J. Maiorano	Est	ima	tor		X	(1	مان		6/	1/1	8				

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Date of Notification (1) 6/7/18				f Building ines Ca			r (2)	Carlo Maria Carlo Alba	The state of the s	JUN	1 2	. 2	018	Separa Petalli	
Agencies Notified Type Notif		1000	Street A 1535 F					1	1			Contraction of		Language	
DEP Amer		0	City, Sta	ate, Zip Co ton NJ (ode 08210				ASI	BEST LIC	SENS	ON!	TRO	L & .	معال 10000000
∑ DOH Emer	gency (including cation)	N		f Contact					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ephone					
L Cano	ellation			LITY INFO	ODMAT	ION			008	9-624-	1494	+			
Name of Facility Where Abatement is Sea Pines Campgrounds	s Taking Place (3)		1 AOI	LITT IN	OKWAI	ION	_	of Facility ((165K)						
Street Address 1533 Rt 9			dinabel e				×	School (K-1 Subchapter Other (i.e. p	8 (Othe			buile	dings	hom	es,
City (5) Swainton					V.—			etc.) ire Feet	# of	Floors		В	lldg. A	\ge	
County (6) Cape May				Code (7) JSE ONLY)			ent Use (Pri	or if beir	ng demo	olishe	d)			
Name of Monitoring Firm Hired by Bu	uilding Owner (8)	1	ASCN	1 No.				atement Cor					Agree Agree		
Street Address							Addre HITE	ss DOVE CO	DURT			11-5			
City, State, Zip Code								ip Code OD, NJ 0	8701						
Project Manager for Monitoring Firm		Te	elephor	ne No.		Teleph		lo.		License	e No.				
Start Date (10) 6/17/18	Scheduled 6/19/18	Comp	oletion [Date (11)		1		HA Monitor D PROFE	SSION	NALS					
Occupancy Status During Abatement	(Check Only One)					Street				-					
Facility Closed/Vacated During I Abatement Performed Outside of Other – Describe:	Entire Period of About Period	ateme lours	ent			City, S	tate, Z	DOVE CO							
	· · · · · · · · · · · · · · · · · · ·					LAKEWOOD, NJ 08701									
Scope of Work (Check All That Apply ≥3 sf or ≥3 lf		novatio	on			Full Containment with Negative Pressure									
≥160 sf or ≥260 lf	× Der	molitio	n			×	Mir	ni-Enclosure ovebag Prod n-Exempted	edure					2	
	Is Lo	ocation	n				110	II-Lxemptec	() and	INOII-F1	laule		Abate	ment	t
Location of	No	rmally	9			scription					-		Ту	ре	
Asbestos-Containing Material (AC <u>TO BE ABATED</u> In Facility (13)	Maint Custod	enanc	ce/		therma surfa	taining N systems cing, VA niscellar	s insula T, or		(S	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A						- Lieu Born					te	(U
EXTERIOR		4			F	Roofing			50	0SF	>				
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City, State NEWARK, NJ	# · · · · · · · · · · · · · · · · · · ·	1 , ,				sal Date 18									
Completed by JOSEPH PERLSTEIN	Title OWNE				Signature										

CK 6753



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

Data of Natification (d)			(1			8:60 and		,	1			111 1				-
Date of Notification (1) 6/7/18					of Building tina Har	Owner/O	perator	(2)	į		JU	HV I	Z	201	8	
Agencies Notified	Type Notification				Address		<u> </u>		1	i						
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DEP X DOL	Amended Amendmen	t #			ate, Zip C tic Highli					The second second	and the second of the second of the second of	***********	~	-		Percentury, san
⊠ DOH DCA	Emergency justification Cancellation		1	Name o	of Contact			7 -		Te	elephone	Numb	er			
	_					ORMATIC	ON					-3.07	190			
Name of Facility Where	Abatement is Takir	ng Place (3)					Ту	pe of Facility	(4)						
Street Address			-			<u></u>		×	School (K- Subchapte Other (i.e.	r 8 (Ot	her than I & comm	K-12) ercial	build	lings,	home	es,
City (5)								Sq	etc.) uare Feet	# (of Floors		В	ldg. A	ge	
Atlantic Highlands																
County (6) Monmouth				County (STATE	Code (7) USE ONLY	n			rrent Use (Pr me	ior if be	eing demo	olished	i)			
Name of Monitoring Firm	Hired by Building	Owner (8)	ASC	M No.				batement Co AD PROFI						200-1018	
Street Address							Street 6 WH		ress E DOVE C	OUR	Г					
City, State, Zip Code					W				Zip Code OOD, NJ 0	8701						
Project Manager for Mon	nitoring Firm			Telepho	one No.		Teleph 732-6		No. -9078		Licens 1200	e No.				
Start Date (10) 6/17/18		Schedul 6/19/1		mpletion	Date (11)				SHA Monitor		NALS					
Occupancy Status During	g Abatement (Ched	k Only O	ne)				Street									
Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire ed Outside of Norr	Period of nal Facility	Abaten y Hours	nent s		-	City, S	tate,	Zip Code		F.º 					
Scope of Work (Check A	II That Apply)						LAN	= ٧٧	OOD, NJ 0	08701				0.02		
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Asbestos-Containing TO BE AB/ In Facili (13)	Material (ACM) ATED	Ma Cus	ed Sole iintena todial ((12)	nce/ Staff?		stos Contai thermal s surfacii other mi	ystems ng, VA	later insi T, or	ulation,	(Amount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
INTERN	00	Yes	No	N/A											е	
INTERI	OR	-				Boiler	Insula	itior	1		50LF	X				
Name of Registered Was	te Hauler		IN	JDEP W	/aste	Cubic Y	arde		Name of	Regist	ered Land	dfill				
NEWARK CARTING			Н	lauler ID 4509		of Waste			IESI	rvegist	oreu Lali	um				
City, State NEWARK, NJ		-				Disposa 6/19/18			City, Stat BETHL		и РА					
Completed by JOSEPH PERLSTEI	N	Title OWN	IER			Sig	ınature					Date				

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ate of Notification (1)										$))_{i}$	E (\mathbb{W}	
6/06/2018						ng Owne Y VILL	r/Operator AGF	(2)	11	11					
gencies Notified Ty	pe Notification	1			Address				-11	Ш	JL	IN 1	2	2018	
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DOH DCA	justification) Cancellation)			of Conta						hone N		r	-	-
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me of Facility Where Abat	ement is Takir	ng Place	(3)	.,,,	>1 L 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	II OIVINA	TION	Type of Facili	ty (4)	-					
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y (5) NION NJ								Square Feet	#	of F	loors		Bldg.	Age	
unty (6) NION					Code (7			Current Use (F	Prior if b	peing	demoli	shed)			
me of Monitoring Firm Hire A	ed by Building	Owner (8	3)	ASCI	M No.			of Abatement C				AI 11	C		
eet Address							Street A	ddress							
, State, Zip Code							1	51 ST. STF	REET.						
•								ate, Zip Code 「H BERGE	N NJ C	704	7				
ject Manager for Monitorin	g Firm			Telepho			Telepho 201-7	ne No. 76-0642		177153	icense I 300	Vo.			
t Date (10) /15/2018		Schedu 06/18		mpletion	Date (11)		OSHA Monito						7.11	2000
supancy Status During Aba	tement (Check						Street A		LIVIA	L					
Facility Closed/Vacated I Abatement Performed Or	Durina Entire F	Period of	Ahate	ment 's			2333.	US 22 te, Zip Code		*****	No.				
Other - Describe:							UNIO								
pe of Work (Check All Tha	t Apply)						1			-					-
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		10	s Locat	ion			- Franci	Non-Exempte	o () a	na N	on-Friat	T Pro	0.00	e emen	+
Location of			Norma	lly		De	scription of	F						лен /ре	•
Asbestos-Containing Mater TO BE ABATED In Facility (13)	rial (ACM)	Ma	ed Sole aintena todial ((12)	nce/	Asbes (i.e	stos Cont thermal surfa	taining Mai systems in cing, VAT, niscellaneo	erial (ACM) nsulation, or	(Amou Spec F or	cify	Remova	Repair	Encapsulate	
		Yes	No	N/A								a	1	late	1
ement Boiler Room &					Pipe	e insuls	tion bldg	g # 2065	6	60 L	F.				
Basement gas meter					pipe	insulat	ion bldg	# 2075		8 LF	=				
Basement gas meter					pipe	e insula	tion bldg	# 2081		10 L	F				
Basement gas meter					pipe	insula	tion bldg	# 2109		10 L	F				
e of Registered Waste Hau STATE	uler		Н	JDEP Wa	aste	Cubic of Was	Yards ste	Name of	Registe	ered	Landfill	SE			
State NX NY.			13	J J J J		Dispos	al Date	City, Star	ie			2-3500			
pleted by		Title	V			1		VVAIIV	L30U	7	-				-
LOS ESQUIVEL		SAFE	ETY N	MANAG	ER	(mofen	19	2			2018		
NX NY.				9951 //ANAG	ER	TBD	al Date		City, Stat WAYN	City, State WAYNESBU	City, State WAYNESBURG	City, State WAYNESBURG OHIO Dat 06	WAYNESBURG OHIO. Date 06/06/2	City, State WAYNESBURG OHIO. Date 06/06/2018	City, State WAYNESBURG OHIO. Date

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PAI			ION OF AS	lew Jersey BESTOS ABATE C 8:60 and 12:12		DEG			\mathbb{V}	呾				
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Date of Notification (1)		Na		INELAW	OS COM	ISTRUCTI	OL	(.010					
Agencies Notified Type Noti	fication	Str	eet Addres	s		ASBEST		******	TRO	1 8				
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DE DOL Ameno	iment #	City	State, Zip	t ISLE	CITY	N.T C	82	4 2	3					
DOH justific	ency (including ation) lation	Nar	ne of Conta			Telephone Num								
		F	ACILITY IN	FORMATION										
Name of Facility Where Abatement is			-		Type of Facilit									
Street Address	MILE				School (K-	r 8 (Other than K-12	2)							
Steet Address					Other (i.e., homes, etc	private & commerci :.)	al bui	dings	ė.					
City (5) A VIALO	M				Square Feet	# of Floors	_ _	ldg. A						
County (6) CAPE MA			unty Code (E ONLY)	7) (STATE	V	Prior if being demolis (A CLA KL) T	shed)							
Name of Monitoring Firm Hired by Bu (8)	of Monitoring Firm Hired by Building Owner ASCM No. Name of Abatement Contractor (9) CLOM (O) [NC Address ASCM No. Street Address													
Street Address	reet Address Street Address 369 S. S.P.R.U.C.													
City, State, Zip Code	369 S. SPRUCE AUE													
Project Manager for Monitoring Firm	. Te	elephone	No.	Telephone No. 856-77		License No	7	 _		_				
Start Date (10)	Scheduled Comp	letion D	ate (11)	Name of OSHA	Monitor //	4								
Occupancy Status During Abatement				Street Address										
Facility Closed/Vacated During Ent	ire Period of Aba	ement		City, State, Zip C	nda			_	=	=				
Abatement Performed Outside of N Other - Describe:	tormal Facility No	·		City, State, 240		- fr			,					
Scope of Work (Check all that apply)				The state of the s	ntainment with Ne	gative Pressure								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	☐ Renova Demolit			☐ Mini-End ☐ Gloveba 127 Non-Exe	g Procedure	on-Friable Procedur	e							
	Is Locat						A	bater						
Location of	Used Sold	y by		Description of			-							
Asbestos-Containing Material (ACM) TO BE ABATED	Maintena Custod		Asbest (i.e.,	os Containing Mat- thermal systems in	nsulation,	Amount (Specify	Re	_D	Encapsulate	Enc				
IN Facility	Staff (12)	•		surfacing, VAT, other miscellaneo	or us)	SF or LF)	Removal	Repair	psul	Enclosure				
(13)	Yes No	N/A			30.50		B.		ale	9				
SIDING		X	-	TRANSIT	E_	1250 SE	X							
SIVING		1												
		1								_				
Name of Registered Waste Hauler		UDEP \		Cubic Yards of Waste	1	stered Landfill								
ICLEMOD DUC		199	24	Disposal Date-	City, State	MU-A-				=				
City. State WANGE SHOUE	MI. J	08	520			BINIE A	I.I	· .		_				
Completed By	Title Sul. D			Signature -	Wh	Date -	6-	18	*					



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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

PAI	D		FICATION	ON OF AS	New Jersey SBESTOS ABATE C 8:60 and 12:12		DEG	E.		V i	
Date of Notification (1)			Nan		ling Owner/Operato	EXCAUR	ATINGUN	12	201	Ø	T-SEP-THOUSE.
Agencies Notified Type No			_	eet Addres	14 INDU	AN TRI	AILARD.				Long
☑ DOLAmer	ndment # gency (includ	ing	City	State, Zip	PF MAY	COURT	+ DUSE N	T	36	21	0
☑ DOH justif	ication) ellation		Nam	RE OF COUR	act RRY		Telephone Num	ber		11-000	
			FA	ACILITY IN	FORMATION						=
Name of Facility Where Abatement	is Taking Pla	ce (3)				Type of Facili	etaliatiots.				
Street Address	Device					Subchapte	er 8 (Other than K-1) private & commerci		dings	i,	
City (5)	1:AL C	2110	ア	llaus		Square Feet	# of Floors		ldg. A	75	\neg
CAPE M	MAY C	UUV			(7) (STATE	1500 Current Use (Prior if being demoli		50		=
CAPE MAY				E ONLY)		V	ACANT				
Name of Monitoring Firm Hired by B	uilding Owne	r	ASCN	No.	The second of th	nent Contractor	(9)				
Street Address					Street Address	D INC.					\dashv
Sireet Address						SPRUCE	- AUE				_
City, State, Zip Code					City, State, Zip C	ode	W.J 080	220	2		
Project Manager for Monitoring Firm		Tel	ephone	No.	Telephone No.	9-0472	License No.	7,1-			
Start Date (10) 6-16-18	Scheduled			ate (11)	Name of OSHA	Monitor W/K	2				
Occupancy Status During Abateme					Street Address						
▼ Facility Closed/Vacated During E □ Abatement Performed Outside of □ Other - Describe:				20000000	City, State, Zip C	ode	8				ㅓ
Scope of Work (Check all that apply)										=
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovat emolitic			☐ Mini-End ☐ Gloveba	closure ig Procedure	egative Pressure Ion-Friable Procedu				
	Is	Location	on		NOT-EXE	empted () and N		7	bate	ment	\neg
Location of	4	lormally d Solel	Contract of the Contract of th		Description of				Typ	е	_
Asbestos-Containing Material (ACN TO BE ABATED IN Facility (13)	Mai C	ntenan ustodia Staff? (12)	ice/		tos Containing Mate, thermal systems in surfacing, VAT, other miscellaneo	nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A		T.O.A.15.7	-6	1000 50	V		6	4
SIDING			X		TRAWSIT		1000 SP	X	\dashv		
Name of Registered Waste Hauler			UDEP V		Cubic Yards	Name of Reg	istered Landfill				\dashv
KLEMCO IN	٥		auter ID	No.) Y	of Waste	C. M	1. C. M.L). ¥	7		_
City, State MUPLE SHAVE	NL.3				Disposal Date	City, State	OBINE A	١.١			_
Completed By	Title S	10			Signature (-	Date 1 0	6 -	18		



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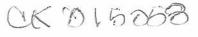
Date of Notification (1)					Nam	e of Buildi	ng Owner/Operator	(2)			1 1	Į.	
06 /	11 /	18	3			ank Of A		(2)					-
Agencies Notified								Balance Mr.	MEG	FI	W	F	Fa-
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(NJAC 5:23-8)	justifica				Nam	e of Conta	ct	art.	Telephone Nu	ımber			1
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					FA	CILITY	NFORMATION	-	Li	SENSI	NG_	-	
Name of Facility Where A	Abatement is	Taking	g Plac	e (3)				Type of Facility	v (4)				
Bank of America								School (K-1	12)				
Street Address								─ Subchapter	8 (Other than K-	12)			
8 Park Avenue								homes, etc	private and comn	nercial b	uildin	gs,	
City (5)								Square Feet	# of Floors	Te	Bldg. A	\00	
Rutherford, NJ								2,000	1		45	ige	
County (6)					Cou	inty Code (7)(STATE USE ONLY)		rior if being demo	lichod)			
Bergen							, ,,,	Garrent OSC (I	nor it being derne	nisileu)			
Name of Monitoring Firm	Hired by Bui	ilding C	Owner	(8)	ASCN	1 No.	Name of Abatem	ent Contractor (C)\	Valley Land			
New York Environm				100			JVN Restora	50	")				
Street Address							Street Address	don nic					
88 Harbor Road							47 Foster Ro	ad					
City, State, Zip Code							City, State, Zip C						
Port Washington, N	Y 11050												
Project Manager for Moni				To	lephone	No	Staten Island	1 NY 10309					
Michael Baudo	toring i iiiii			1	16-94		Telephone No.		License No.				
Start Date (10)		School	ulod C	1		ate (11)	718-605-6256		00774				
06 /22 /	18	177.95			etion Da !7 /		Name of OSHA N	Monitor					
							Testor Tech						
Occupancy Status During Facility Closed/Vacate					1111 ONNO 11 41 41		Street Address						
Abatement Performed	Outside of N	ire Per Iormal	Facilit	Abat	ement	a a rib a	10- 59 Jackso						
Time of Abatement: 8:	:00AM-4:30	PM/	P	у по М-	AM	scribe	City, State, Zip Co						
							LIC NY 11101						
Scope of Work (Check all	that apply)						□ Eull Cont	talamana di Stata Ni					
≥3 sf or ≥3 lf			⊠ Re				☐ Mini-Enc	tainment with Ne losure	gative Pressure				
≥160 sf or ≥260 lf			☐ De	molit	ion		Glovebag	g Procedure					
			le	Loca	tion		⊠ Non-Exe	mpted (*) and No	on-Friable Proced	lure			
Location	of			Norm			Description o	£		At	atem	ent T	уре
Asbestos-Containing N	/laterial (ACN	Л)	Use	d So	lely by	Asbe	stos Containing Ma		Amount	Re	Re	En	m
TO BE ABAT IN Facility					ance/ Staff?		e., thermal systems i	insulation,	(Specify	Removal	Repair	cap	Clos
(13)	у			(12			surfacing, VAT, other miscellane	or or	SF or LF)	\\\ \a_{\text{a}}	1	Encapsulate	Enclosure
		İ	Yes	No	N/A		other miscellane	ous)				ate	"
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		-	_		-				20 31			П	
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				П	П								
Name of Registered Waste	e Hauler				NJDEP I		Cubic Yards of	Name of Regis	stered Landell			Ш	
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City, State					NJ-56	6	15	1100000000					
Newark, NJ							Disposal Date	City, State					
		T=					06/30/2018	Bethlehem	ı,PA				
Completed By (Print or Type	oe)	Title	2				Signature /	- 1//	and the second s	ate			
Ralph Barnhardt		Pr	oject	Man	ager		WINh	KU_~	1/ 10)(z =	11-	18	,





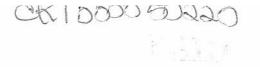
CK#446

Date of Notification (1)					Nam	e of Buildir	na O	wner/Operator	(2)	-		· L				
06 /	11 /	18			000000	rizon	ng O	whenOperator	(2)				o-ountrees.	elapholom s		
Agencies Notified										1	IF P	IS I	\mathbb{W}	E	Pho	1
⊠ EPA	Type Notific	cation			100000000000000000000000000000000000000	et Address						155 11	L.F		Age of the last of	
⊠ DOLWD	☐ Amende	ed				00 Orang					1					1
☑ DHSS	Amenda					State, Zip					ii .IIIN	1.2	2018	3	I los	#
☐ DCA	☐ Emerge	ency (in	cludin	g	Cr	anford, N	1J 0	7016		11 5	1		2016		horen	-
(NJAC 5:23-8)	justifica	tion)		Π·		e of Contac	- T				Telephone	Number	r		1	
	☐ Cancella	ation			Ch	ristoper	Pier	rce			/201-356	-5165	NTR	DL &		
					FA	CILITY II	NFO	RMATION			[]	CENSI	NG	************	one of the last	-
Name of Facility Where A	batement is	Taking	Place	e (3)		MAY 200 MARKET TO THE CONTROL OF THE			Type of Fac	ility (4)					
Verizon									School (I							
Street Address									☐ Subchap	ter 8	(Other than	K-12)				
1100 Orange Avenu	ie								Other (i.e	e., pri	vate and cor	nmercia	l build	lings,		
City (5)	11570								homes, e	- 1	1					
Cranford									Square Feet		# of Floors	5	7.55	. Age		
County (6)					Cou	nty Code (71/07	ATE LIGE ON NO	10,000		1		50			
Union					Cou	nty Code (1)(51.	ATE USE ONLY)	Current Use	(Pric	or if being de	molishe	d)			
Name of Monitoring Firm	Hirad by Dui	Idina C),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(0)	1001		T.,									
USA Environmental				(0)	ASCM	No.		ame of Abateme		(9)						
Street Address	Managaer	ment	inc.					JVN Restora	tion Inc							
The Control of the Co							St	reet Address		- Th						
8436 Enterprise Ave	enue						1	47 Foster Ro	33.7%							
City, State, Zip Code							Cit	ty, State, Zip Co	ode							
Philadelphia, PA 19							1	Staten Island	NY 10309							
Project Manager for Monit	toring Firm				ephone		Te	lephone No.			License No	0.				
Mark Jenkins						5-5810	1	718-605-6256			00774					
Start Date (10)						ate (11)	Na	me of OSHA M	lonitor		1					
06 /25 /	18	_ 0	7_/	_3	1_/	18	1	Testor Tech								
Occupancy Status During	Abatement ((Check	only	one)			Str	eet Address								
☐ Facility Closed/Vacate	d During Enti	ire Per	iod of	Abate	ment			10 59 Jackso	n Avenue							
Abatement Performed	Outside of N	lormal	Facilit	y Hou	rs - Des	scribe		y, State, Zip Co		-				-		_
Time of Abatement:	AM	PN	1/5:00	PM-1	:30 _{AM}		100	IC NY 11101								
Scope of Work (Check all	that apply)						_	-10 111 11101		0.00-1				-10, 107		_
	0.0 50							☐ Full Cont	ainment with I	Nega	tive Pressure	e				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Re De De Re De Re Re						osure			R:				
				inonti	on			☐ Glovebag	Procedure mpted (*) and	Non	Eriable Dres					
			Is	Loca	tion				ripted () and	14011-	-Filable Proc					-
Location of				Norma				Description of	f				Abate		Тур	е
Asbestos-Containing N		/I)	Use	d Sol	ely by	Asbe	stos	Containing Mat	terial (ACM)		Amount		Re a		ן ו	E
TO BE ABAT					Staff?	(i.e		ermal systems i			(Specify		Removal	a a		Enclosure
(13)		1		(12)			ot	surfacing, VAT, her miscellaned	or ous)		SF or LF)	<u>n</u>	Donoit	1 2	T P
			Yes	No	N/A				/					ā	5	
Basement A/C Equipn	nent Room	1	\boxtimes			Pipe Ins	sula	tion and Fltti	nas		9 LF	F	X C	7 -	7 6	7
									90	+	J LI	k		7 _	7 -	긔
				Ш								[] [
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			П	П									7 -		7 -	7
Name of Registered Waste	e Hauler				JDEP V	Naste	Cut	oic Yards of	Name of D	mi-t	and 1 160	IL		1	1 L	_
Newark Carting					auler I		Wa		Name of Re							
City, State					NJ-56		1	5	G.R.O.W	.S.,	inc.					
								posal Date	City, State							
Hackettstown, NJ							0	6/28/2018	Morrisvi	lle,P	A					
Completed By (Print or Typ	oe)	Title						Signature/	1 // //		- comme	Date				-
Ralph Barnhardt		Pr	oject	Mar	ager			11/6/6	11/2		1	01	-//-	- 20	18	
SR_41		_						1 11	1 6 -	-	11	1	11	4	-	- 1



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ACRE			(F	Pursuan	t to NJAC	8:60 ar	nd 12:12	:0)	NI	m	E	C	E	7	VI	E
Date of Notification (1) 06-06-18				Name o	of Building	Owner/	Operator	r (2)	×	K	5	9		Ш	<u>n</u>	- Contraction
Agencies Notified Ty	pe Notification				Address	D.1	-					JUN	12	20)18	
EPA X	Initial Amended				Hadley tate, Zip C											and the second
X DOL	Amendment				Plainfie						ASB	EST				8
DOH DCA	Emergency (justification)	includin	g		of Contact					Tel	ephon	E Nun		ING		DECEM-OF.
DCA	Cancellation				amac					73	2-35	4-780)7			
Name of Facility Where Aba	tement is Takin	g Place	(3)	FAC	ILITY INF	ORMAT	ION	Tv	pe of Facility ((4)						
PSEG Third Street Su	bstation								School (K-1							
Street Address 163 Third Street								×	Subchapter	8 (Oth	er than & com	n K-12 mercia) al buil	dings	, hom	es,
City (5) Kearny								Sq N/	uare Feet	# of N/A	Floor	s		ldg. A	Age	
County (6) Hudson				County (STATE	Code (7) USE ONLY)	_		urrent Use (Prio witching yar		ng der	nolish	ed)	Cell		
Name of Monitoring Firm Hir N/A	ed by Building (Owner (8)	ASCI N/A	M No.				Abatement Con nvironmenta			, Inc.				
Street Address N/A							Street 17 O		iress Dock Rd							
City, State, Zip Code N/A									, Zip Code k NY 11980)			84			
Project Manager for Monitori N/A	ng Firm			Telepho N/A	one No.		Teleph 631-9		No. -8111		Licer 0113	ise No).			
Start Date (10) 06-15-18		Schedu 07-15-		mpletion	Date (11)				SHA Monitor nvironmenta	al Serv	ices,	Inc.		2000-00-0		
Occupancy Status During Ab	atement (Check	Only O	ne)				Street	Add	ress							
Facility Closed/Vacated Abatement Performed C Other – Describe: Elect	Outside of Norm	al Facilit	Abaten y Hours	nent 3			City, St	tate,	Oock Rd , Zip Code							
Scope of Work (Check All Th	at Apply)						Yaph	nani	k NY 11980	Y.						
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		- December of	Renova Demolit				×	1	Full Containme Mini-Enclosure Glovebag Proc Non-Exempted	edure					a	
		ls	Locati	on						(),	1,1011		7	Abate	ment	1
Location of Asbestos-Containing Mate			Normal ed Sole			Des	scription	of						Ту	ре	
TO BE ABATE! In Facility (13)	O (ACM)	Ma Cus	intenar todial S (12)	nce/ Staff?	Asbest (i.e.	thermal surfac	aining M systems cing, VAT niscelland	insi T, or		(S	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
Control Hous	e	Yes	No	N/A X			Caulk			20) LF				Ф	
250, 11003				^			Jauik				, , , ,		Х			
Name of Registered Waste H	auler		N	JDEP W	/aste	Cubic '	Yards		Name of R	Penister	ed La	odfili				
Waste Management			Н	auler ID		of Was			Fairless			ruill				
City, State Elizabeth, NJ 07201				7,000		Dispos TBD	al Date		City, State Morrisvil		1906	67				
Completed by Raymond Tutiven		Title Supe	rvisor			/81	gnature GHM	.1	Til	lies		Date 06-	06-1	8	100000000000000000000000000000000000000	



Date of Notification (1) 06/11/18					of Building				rminal	7 [C		W		[6]
Agencies Notified	Type Notification	-			Address	JilleStit	ITaue	sie	rminai	1 1	. W	La li	17	123	
rice.	12 <u>00.00</u> 0				adaress e 1 Nort	h			11	ή				-	
EPA DEP	X Initial				ate, Zip C						31111	12	2018		14
X DOL	Amended Amendment	#			n, NJ 0				114	5.41	5.7		2010	4444	Enguerra
MINISTER STATE OF THE STATE OF	Emergency	(including			of Contact					7-					
DOH DCA	justification) Cancellation			Joe G					+	Te	lephone N	Number	VTAC	La	
	E Carlochatori				ILITY INF	ODMAT	ION				832-74	0-259	9 5		norwood sur-
Name of Facility Where	Abatement is Takin	g Place (3	3)	TAG	ILI I INF	ORWAI	ION	Type	e of Facility	4)					
Phillips 66 Domest									157.14	505					
Street Address								H	School (K-1 Subchapter		er than K	-12)			
Route 1 North								X	Other (i.e. p	orivate o	& comme	rcial bu	ildings	, hom	ies,
City (5)		-						Sans	etc.) are Feet	1#0	f Floors	— Т	Bldg.	Δαο.	
Linden								200		0	1110013		0	nge	
County (6)				County	Code (7)			Curr	ent Use (Pri	-	ing demol	- 1			
Union			- 1		USE ONLY)			insfer Pipe		ing demoi	ioricaj			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	d No.		Name		atement Cor		(9)				
									d Specialt			8			
Street Address		11.56-1-11.751-1-1-57					Street	Addre	ess						
							2400) Mai	in Street E	Extens	sion Sui	te 10			
City, State, Zip Code							City, S	tate, 2	Zip Code						
	100						Sayı	eville	e, NJ 0887	72					
Project Manager for Mon	itoring Firm			Telepho	ne No.		Teleph	one N	lo.		License	No.			
									0100		00750				
Start Date (10)				npletion	Date (11)		10-9 (1) S (9)		HA Monitor						
06/25/18		06/29/					Tige	r Env	/ironment	al					
Occupancy Status During							Street						-1250		
Facility Closed/Vaca	ated During Entire F	Period of A	Abater	nent		12	234								
Abatement Perform Other – Describe:	ed Outside of Norm Encapsulation of acr	nai Facility m in pipe r	Hours ack	S					Zip Code						
Scope of Work (Check A							Brick	k, NJ	08724						
	іг ттат Арріу)	EST					_	,							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Remoli				-	Fu	II Containme	ent with	Negative	Pressi	ure		
			remon	uon				Gle	ni-Enclosure ovebag Prod						
							X		n-Exempted		d Non-Fri	able Pro	ocedu	е	
		171	Locat											emen	t
Location			lormal d Sole				scription		ł			-	1	/pe	_
Asbestos-Containing TO BE ABA		Mai	intena	nce/		tos Cont thermal					mount			四	l m
In Facili		Cust	odial 9 (12)	Staff?	(1.0.		cing, VA		auon,		pecify or LF)	\center (em	Repair	cap	nck
(13)			(12)			other n	niscellan	eous)			200	Remova	pair	Encapsulate	Enclosure
		Yes	No	N/A								-		ite	e
Transfer	Pipe	x				Pipe	Insula	tion		20	00 LF			X	
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		-									-	_	-	-	-
		1													
Name of Registered Was	te Hauler			IJDEP W lauler ID		Cubic			Name of I	Registe	red Land	fill	-		
Freehold Cartage				5939	NO.	of Was	ste		Fairless	Land	dfill				
City, State						15000	al Date		City, State	9					
Freehold NJ						06/29		1 ,	Morrisv		Α				
Completed by		Title					ignature	14.	111			Date			
Dan Baptista		Safet	y Ag	ent			H	#	1111	7		06/11/	/18		
							11	111/	160			and M			
ASB-41 (R-06-08)							Do no	t use t	this form for	asbest	os licensu	ire exe	mpted	activi	ties.

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Date of Notification (1)			Namo	of Building	Oumorl)noroto	. (2)	-	13					
06/06/2018				ood Ter			(2)	. [THE PARTY NAMED IN	JUN	1 2	201	8	
Agencies Notified Type Notification			Street A		2210				u ui	-	-			berenz
× EPA			2/45/25/0 603	Riverside						ASDEST	00.00	NITE	OL S	_
EPA Initial Amended Amendment	#			ate, Zip C York, N`		1			Thousand the same	Li	CENS	NG	16756	A
■ Emergency (justification)	(including			of Contact		-			Te	lephone N	umber			
DCA Cancellation			Brian	Tarzik						12) 873-				
Name of Facility Where Abatement is Takin	n Place (3)	FAC	ILITY INF	ORMATI	ON	Tun	e of Facility	(4)					
Boiler Room 5	g i iacc (U)					lπ							
Street Address							Ħ	School (K- Subchapte	8 (Oth	ner than K-	12)			
1-10 lozia Terrace							×	Other (i.e. etc.)	orivate	& commer	cial bui	ldings	, hom	es,
City (5) Elmwood Park							Squ 100	are Feet	2	of Floors	100	Bldg. /	Age	
County (6)			County	Code (7)				rent Use (Pri		ina domoli		56		
				USE ONL	n			sidential	OI II DE	ing demon	sileu)			
Name of Monitoring Firm Hired by Building C Crown Air Services LLC	Owner (8))	ASC	M No.		175 170		atement Cor		1		7.00		
Street Address								ays Solution	ons C	orp				
478 Albany Avenue, Suite 76						Street 132 \		ess hington Av	/enue					
City, State, Zip Code						City, S	tate,	Zip Code	11(
Brooklyn, NY 11203						1		, NY 1120	5					
Project Manager for Monitoring Firm Vanessa Miller			Telepho 34753			Teleph 7188				License 01340	No.			
Start Date (10)	Schedul	ed Co		Date (11)				SHA Monitor		01040				
06/25/2018	07/06/					Asbe	stwa	ays Solution	ons C	orp				
Occupancy Status During Abatement (Check						Street			(00110					
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm	eriod of a lacility	Abater / Hour	ment s					hington Av Zip Code	renue					
Other – Describe:								NY 1120	5					
Scope of Work (Check All That Apply)						2200								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	_	Renova Demoli				×	7 ''	ull Containme		n Negative	Pressu	ire		
		20111011					G	lovebag Prod	cedure					
	le	Locat	ion				J NO	on-Exempted	1 (*) an	d Non-Fria	ble Pro		e ement	-
Location of	1	Locat Norma	lly		Des	cription	of						ре	
Asbestos-Containing Material (ACM) TO BE ABATED		d Sole intena			tos Conta	aining M	lateria			mount	_		四四	ш
In Facility (13)	Cus	todial ((12)		(1.6.	surfac	ing, VA	T, or			Specify or LF)	Remova	Repair	caps	Enclosure
(13)	Yes	NI-	NI/A		otner m	niscellan	eous))			oval	air	Encapsulate	sure
Boiler Room	X	No	N/A		Dallar	. Ima. da	41		4.0	20.0	-		10	
Boiler Room	X			D =:1	71 2071020	Insula				20 Sqf	X			
Boiler Room	^			BOIL	er Brea	cning	insu	lation	1	0 Sqf	X			
			-											
Name of Registered Waste Hauler			JDEP W	aste	Cubic	Yards		Name of I	Panieta	red Landfi				Щ
Newark Carting Inc		10000	lauler ID 506	No.	of Was			III see some been		e Facility				
City, State		1.			Dispos	al Date		City, State				-		
Newark, NJ 07102						5	1)	킾					
Completed by Mendy Gorodetsky	Title Office	ar			şi	gnature	1/	1			ate	20.45		
	Onice	71			11		1	Z		0	6/06/2	2018		
ASB-41 (R-06-08)					6	* Do not	t use	this form for	asbest	os licensur	e exen	npted	activit	ties.

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

Date of Notification (1) 06/06/2018				Name o	of Building	Owner/0	Operator		STEEL OF STATE OF STA	- Comments	Secretary development	J	UN	1 2	201	8	The state of the s
X FPA	Type Notification			Street A 155 R	Address iverside	Drive					L	ASBE	STO:	S CO	NTA	OL 8	
X DEP X DOL	Amended Amendment				ate, Zip Co York, NY		ka		- Augustine - Augu		The Parket	- Senting - OSC	*********	Transfer, maga	The second	Marine Constitution of the	en production
▼ DOH ▼ DCA	Emergency justification) Cancellation				f Contact Tarzik							lephon					
				DAMES TO SERVICE OF THE	ILITY INFO	ORMATI	ON				_ (2	12)0	7 3-4	919			
Name of Facility Where Ab Boiler Room 4	atement is Takin	g Place (3	3)					Тур	e of Facility	1000							
Street Address 31 16th Avenue								×	School (K- Subchapte Other (i.e. etc.)	er 8	(Oth				dings	, hom	es,
City (5) Elmwood Park								Squ 100	uare Feet		# 0	f Floor	S	100	ildg. i	Age	
County (6)				County (Code (7) USE ONLY)				rent Use (Presidential	rior	if be	ing der	nolish	ed)			
Name of Monitoring Firm H Crown Air Services L	lired by Building	Owner (8)	2	ASCN	/ No.				oatement Co ays Soluti								
Street Address 478 Albany Avenue, S	Suite 76						Street 132		ess hington A	ve	nue						
City, State, Zip Code Brooklyn, NY 11203									Zip Code , NY 1120)5							
Project Manager for Monito Vanessa Miller	oring Firm			Telephoi 34753			Teleph 7188					Licer 013	nse No 40).			
Start Date (10) 06/18/2018		Schedule 06/30/2		npletion I	Date (11)				SHA Monitor ays Soluti		s Co	orp					
Occupancy Status During A Facility Closed/Vacate Abatement Performed Other – Describe:	ed During Entire F	Period of A	Abaten	nent			City, S	Vas	ess hington A Zip Code , NY 1120		nuc						
Scope of Work (Check All 7	That Apply)						Dioo	Kiyii	, 141 1120						_		1
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	enova emolit				×	N G	ull Containm lini-Enclosur llovebag Pro on-Exempte	re oce	dure					·e	
			Locati						on Exompto) and	4 14011	TTUD		Abat	emen	
Location of Asbestos-Containing Ma			lormal d Sole		Aabaat		cription		-1 (4 014)						1 1	/pe	
TO BE ABAT In Facility (13)		1,000,000	ntenar odial S (12) No	N 17 (19)		thermal surfac		insu T, or			(S	mount Specify or LF		Removal	Repair	Encapsulate	Enclosure
Boiler Roo	m	X	INU	IN/A		Boiler	Insula	ation	IS		14	0 Sq	F	X			
Boiler Roo	m	X				Annual Control	Insula					0 Lnf		X			
Boiler Roo	m	Х			Boile	r Brea	ching	Insu	lation		10) Sqf		X			
Name of Registered Waste	Haula-		1 4	IDES					Le								
Newark Carting Inc	naulei		Н	JDEP W auler ID 506	2/6	Cubic \ of Was			Name of Tully-T		ATT TO SERVE						
City, State Newark, NJ 07102						Dispos	al Date	200	City, Stat	te							
Completed by Mendy Gorodetsky		Title Office	r			Si	gnature		1				Dat 06	e '06/2	2018		

Print Form

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	PA		NOTII	FICATIO Pursuan	N OF ASE	8:60	OS ABATE and 12:12	EMENT (0)		m	E (2	3 1	W	E	Property of the Party of the Pa
Date of Notification (1) 06/07/2018	Allallary				of Building		er/Operato	r (2)	The state of the s			No. of Street, or other party of the last			-	
Agencies Notified	Type Notification			Street	Address				-			M 1	2	2018	The same of the sa	14)
× EPA × DEP × DOL	Initial Amended Amendment	t#			tate, Zip C nan, NJ		8			L	SBEST	TOS ICEN	CON	TROI	-8	been
⊠ DOH □ DCA	justification) Cancellation		9	Name	of Contact ifer Brad					Te	lephone		Contraction of the last	2	The state of the s	r
					CILITY INF	Í	ATION						3			
Name of Facility Where A Private Residence	Abatement is Takir	g Place	(3)					Туре	of Facility							
Street Address					1.51			×	School (K- Subchapte Other (i.e.	r 8 (Oth	ner than & comr	K-12	!) al buil	dings,	hom	es,
City (5) Skillman								Squa	etc.) are Feet 0	# c	f Floors	3	1	3ldg. <i>A</i>	\ge	
County (6) Somerset					Code (7)	o		30000	ent Use (Pr	ior if be	ing den	nolish	-	seata a trical		
Name of Monitoring Firm N/A	Hired by Building	Owner (8)	ASC	M No.		Name Nari	of Aba	atement Co struction I	ntractor	r (9)					
Street Address							Street	Addre		15-12-12-12-12-12-12-12-12-12-12-12-12-12-						
City, State, Zip Code							City, S	State, Z	ip Code ark, NJ 0							
Project Manager for Monit	toring Firm			Telepho	one No.		Teleph		lo.	7000	Licen).			
Start Date (10) 06/18/2018				mpletion	Date (11)		Name	of OS	HA Monitor		0130	0			-	
Occupancy Status During	Abatement (Chec	06/20/					Street		truction l	LLC						
Facility Closed/Vaca Abatement Performe	ted During Entire F	Period of	Abater	nent			63 Le	eathe	r Stockin	g Path	1					
Other – Describe:	d Outside of North	iai Facilit	y Hour	S			110		ip Code ark, NJ 0	7035						
Scope of Work (Check All	That Apply)										-					
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf			Renova Demolî				×	Min	ll Containm ni-Enclosur ovebag Pro n-Exempte	e cedure	8				a	
		1	Locat				71-							Abate	ment	
Location of Asbestos-Containing No. 100 BE ABA In Facility	Material (ACM) TED	Use Ma	Norma ed Sole intena todial S	ely by nce/		tos Co therm	Description Intaining Mal systems	lateria insula		(8	mount Specify		Re	Ty		Enc
(13)	,	Yes	(12) No	N/A			facing, VA r miscellan			51	or LF)		Removal	Repair	Encapsulate	Enclosure
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	and the second s															_
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