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

ck 4499

| Date of Notification (1) | 1 | | Name | of Building | Owner/Operator | (2) A) = L14 | BERMAN |) (| در | | |
|--------------------------|--|-------------------------|--------------------|---------------|--|--------------------------------|------------------------|-------------|---------|-------------|----------|
| 6/10 | //3 Type Notification | | Street | | | | | * . | 5 | | 7 |
| Agency Notified | | | Queen | | 521 0 | @DEN | AUE | | | | _ |
| Q EPA | Diffitial Di Amended | | City, S | tate, Zip C | ode . | | 2000 | | | 15 | c |
| D DEP ET DOL | Amendment# | | . < | TEA | NECIC. | 112 5 | 7666 Telephone Numb | • · · · · · | | | \dashv |
| Б ОН | ☐ Emergency (including justification) | • | Name | of Contac | 1 ABERM | 4 () | (Georgeone reason | | | | 1 |
| □ DCA | ☐ Cancellation | | <u> </u> | | | | | | _ | | 一 |
| | | | FACI | LITY INFO | RMATION | Type of Facility | (4) | | | | \dashv |
| | Abatement is Taking Place | | | | 10 | D School (K-12 | | | | | - |
| | - HABER | 140 | · · · · · · | ~ . | | Ti Subchantor 8 | (Other than K-12) | | | | - |
| Street Address | 0.050 1 | 1= | | • | ŧ) | homes, etc.) | vate & commercia | i puliungs, | • | | |
| 521 | OGDEN A | · · · | | | | Square Feet | # of Floors | Bldg. Ag | | . • | • |
| City (5) | ANECIC | | | | | 2000 | 2 | U10101000 | 5. | + | |
| | | | | | (STATE USE | Current Use (Pr | nor if being demolis | shed) | | | |
| Be | ERGEN) | | ONLY |) | | | SIDENCE | ٽ | | | \dashv |
| 1.22 | m Hired by Building Owner | ASC | M No. | | | nent Contractor (S | | | | | |
| (8) | | | | | Best R | emoval I | пс | | | | ᅱ |
| Street Address | | | 12 | | | River St | | | | | - |
| City, State, Zip Code | | | | | City State Zip (| Code | | | | - | |
| City, State, 2p Code | 2 | | | | Hacken | sack, N. | J. 07601 | | | | |
| Project Manager for Me | onlining Firm | Telep | hone No. | | Telephone No. | | License No. | | | | |
| | • | | | | 201-329- | | 00388 | | | | |
| Start Date (10) | Scheduled Co | | |) | Name of OSHA | Montor Ivironmer | tal Inc | | | | |
| 6/24/13 | ing Abatement (Check only | / | 13 | | Street Address | | | | | | |
| | .• | | | | 280 Huy | ler St | | | | | |
| G Facility Closed/Vac | sted During Entire Period of ad Outside of Normal Facil | if Abatem lity Hours | ent | | City, State, Zip | Code | | 07606 | | | |
| D'Other - Describe: | 2000 TOS PA | ٠ | | 1.1. | South H | <u> Iackensac</u> | ck, N.J. | 07606 | _ | | - |
| Scope of Work (Check | all that apply) | , | | | O Full | Containment will | Negative Pressur | æ | | | |
| 223 sf or ≥ 3 # | | | | notation | a Nin | i-Enclosure volum Procedure | | ((8) | | | |
| _ 2 160 sf or ≥ 260 F | 4 | | - | AND PROPERTY. | ☐ Nor | -Exempted (") an | d Non-Friable Proc | cediure | Abar | tema | end |
| | | ls Lo | cation | 1000 | • | | | L | | уре | 7- |
| Loca | ation of | | maily Solely by | | Description | of | - Amount | | | m | L |
| Asbestos-Contain | ning Material (ACM) ABATED | · Maintr | anance/ todial | Asb | estos Containing A e., thermal system | s insulation. | · (Specify | | | 1 00 | Eno |
| . / BN.I | acity | S | - TO | · · · ` | surfacing, VA | T, or | SF or LF) | | Removal | Encapsulate | la la |
| | (13) | . (| 12) | | General Historian | | - | | - | 8 | • |
| 1 1 - L | | Yes | No N/ | 2012 | | | 0 | SLF | + | + | + |
| BASEN | LENT | | _ \> | - THE | RHUL SYST | 64 INWHA | 50 | | 7 | + | + |
| BASSI | LENT | | . > | THE | mac survi | Leing. | 30 | 34 1 | + | 十 | + |
| | | | | | | | | - | + | + | + |
| | | <u> </u> | TDW fort | House | Cubic Yards of | Name of Rec | istered Landfill | | | | |
| Name of Registered V | | ID N | EP Wast o | nauter | Waste | | | -ises | | | |
| Best Remov | al inc | 17 | 109 | | 200 | 1 | a Enterpr | | - | | |
| City, State | ensack, N.J. | 0760 | 1 | | Disposal Date | City, State Waynes | burg , Oh | 1 | | | |
| | ensack, N.J. | 0700 | | | Signaturé | 0 | | Date 6/ | 1,- | 1, | 2 |
| J. Maiorano | | nator | | | 51 | Majoro | we - | 9 | 19 | //3 |) |

ASB-41

MO#20613923482

| | | | (PL | | | C 8:60 and | | n. | - | | | | |
|--|--|----------|------------------|----------|-----------------|--------------------------------|----------|--|--------------------------|-----------------|---------|-------------|-----------|
| Date of Notification (1) | | | | Name | of Buildin | g Owner/Opera | ator (2) | 1 K 13 // | 13 49 2: 80 | | | - | |
| | /13 | 3 | | Carla | Caraballo |) | | . 444/ | .9 | | | | |
| Agencies Notified Type | e Notification | | | - | Address | | | | 47 5 | | | | - |
| | nitial | | | 120 Ja | acoby Str | eet | | Carry | ~ Sp | | | | |
| | Amended | | | | State, Zip (| | - 120 | 16.7.1. | 10 T | | | | |
| | Amendment # | | | Manle | ewood, N | 1.07040 | | 73.817 | 464 | | | | |
| | Emergency (in ustification) | ncluding | 3 | | of Contac | | | The second secon | Telephone Nun | nher | | | |
| The state of the s | Cancellation | | | | Caraballo | | | | Toropriorio Train | 1001 | | | |
| | | | V | | | | | | | | | | |
| Name of Facility Where Abate | mont in Takin | a Diago | (2) | FA | CILITY | FORMATION | | T | 723 | | | | - |
| | HEILIS TAKII | ig Place | (3) | | | | | Type of Facility | | | | | |
| Private house | | | | | | | | School (K-1) | 4) 8 (Other than K-1 | 21 | | | |
| Street Address | | | | | | | | 🛛 Other (i.e., p | rivate and comme | | uilding | js, | |
| 120 Jacoby Street | | | | | | | | homes, etc. |) | | | | |
| City (5) | | | | | | | | Square Feet | # of Floors | В | dg. A | ge | |
| Maplewood, NJ 07040 | | | | | | | | | | | | | |
| County (6) | | | | Coun | ity Code (7) | (STATE USE ON | VLY) | Current Use (Pr | ior if being demol | ished) | E. | | |
| Essex | | | | | | 415 - 1 | | | | | | | |
| Name of Monitoring Firm Hired | d by Building | Owner | (8) | ASCM | No. | Name of Aba | atemer | nt Contractor (9) | | | | | |
| | | | | | | Gr Tech LL | C | | | | | | |
| Street Address | | | - 3 | | | Street Addres | SS | | | | | | |
| | | | | | | 576 Valley I | Rd #2 | 283 | | | | | |
| City, State, Zip Code | · / | | | | | City, State, Z | | | | | | | |
| | | | | | | Wayne, NJ (| 07470 |) | | | | | |
| Project Manager for Monitoring | g Firm | | Tele | phone | No. | Telephone No | | | License No. | - | | | - |
| | | | | | | 973-638-177 | 77 | | 01127 | | | | |
| Start Date (10) | Sche | duled C | omple | tion Da | ite (11) | Name of OSH | | nitor | 01127 | | | | |
| 06/19/13 | | | | | | | | | | | | | |
| Occupancy Status During Aba | | | 4 | | | Envirovision Street Address | | sultants,Inc | | | | | |
| □ Facility Closed/Vacated Du | | | | ment | | lesse to | | | | | | | |
| Abatement Performed Outs | | | | | cribe | | | Road, Bldg .# | 35 E | | | | |
| Time of Abatement: | AMF | M/_ | PM_ | | AM | City, State, Z | | | | | | | |
| Coops of Work (Charle all that | | | | | | Fair Lawn, N | | Control of the contro | | | | -300,00110 | |
| Scope of Work (Check all that | apply) | | | | | | | and decontamin | ation gative Pressure | | | | |
| | | ⊠ Re | enovati | on | | Mini | i-Enclo | sure | 5 | | | | |
| ≥ 160 sf or ≥260 lf | | □ De | emolitio | n | | Glov | vebag | Procedure | Tent with Negativ | e Press | sure | | |
| | | - | | 1 | | Non- | -Exem | ipted (*) and No | n-Friable Procedu | - | 1 | - | |
| Location of | | | s Locat Norma | | | Descript | ion of | | | Ab | atem | ent T | ype |
| Asbestos-Containing Mater | ial (ACM) | | ed Sole | | Asbe | stos Containing | | | Amount | 교 | Repair | E | 5 |
| TO BE ABATED | | 4.000 | intena todial | | (i.∈ | e., thermal syste | | | (Specify | Removal | pai | cap | Enclosure |
| IN Facility (13) | | Jus | (12) | oluii: | | surfacing, other miscel | | | SIF or LF) | \ <u>va</u> | - | Encapsulate | ure |
| (/ | | Yes | No | N/A | 1 | other miscer | naneo | us) | | | | ē | |
| D | | T T | | | n: | | - | | | 100 | | | _ |
| Basement | | <u> </u> | 닏 | × | Pipe inst | ulation | | | 15 LF | X | Ш | Ш | L |
| | | | | | | | | | | | | | |
| | | | П | In | 1 | | | | | | | | 1 |
| | V | + | H | += | - | (-) | | | | ᆜ | | ᆜ | 1 |
| | | | Щ | | | | - more | | | | Ш | | |
| Name of Registered Waste Ha | uler | | NJI | EP Waste | e Hauler !D No. | Cubic Yards of | Waste | Name of Regis | tered Landfill | D-17/2-08/04/07 | | | |
| Gr Tech LLC | | | (| 003378 | 35 | TBD | | T.R.R.F. Inc | | | | | |
| City, State | - 11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | | | | | Disposal Date | | City, State | | - | | Salston a | America |
| Wayne, NJ 07470 | | | | | | TBD | | Tullytown, P. | Δ | | | | |
| Completed By (Print or Type) | Titl | e | | | | Signature | re 🖊 | | | ate | _ | | |
| N.Jevtic | | | | | | | K | te ve | | = | 12 | | |
| ASB-41 | JOW | ner | - | | | // | RU | are we | Ma 4 06 | /10/20 | 13 | | |

| Date of Notification (1) 06/07/2013 | 39/100-100 (19 10) | | | | f Building /REEN | Owner/O | perator | (2) | Kij JU | 7/2 | | | | | |
|--|-------------------------------|---------------------|------------------|--------------------|----------------------|----------------------|-----------------|-------------|--|-------------|------------------|---------------|---------|-------------|-----------|
| Agencies Notified | Type Notification | | | Street A | ddress MORGA | N AVF | | | | 1,4 | W 2.5 | · . | | | |
| EPA DEP DOL | Initial Amended Amendment | # | | City, Sta | ate, Zip Co | ode | | | 4/2 | | - | | | | • |
| ⊠ DOH | Emergency (| | _ | Name o | f Contact | | | | | Tel | ephone Nu | ımher | | | |
| DCA | Cancellation | | | | ZON SE | | | | | | | | | 1 | |
| Name of Facility Where PRIVATE | Abatement is Takin | g Place (3 | 3) | FACI | ILITY INF | ORMATI | ON | Туре | of Facility | (4) | | | | | |
| Street Address | | | | | | - | | | School (K- Subchapte | | er than K- | 12) | | | |
| 426- MORGAN AV | E. | | | | | | | X | Other (i.e. etc.) | private 8 | & commerc | cial buil | dings, | hom | es, |
| City (5) PALMYRA N.J. 080 | 065 | | | | | | | Squa 260 | re Feet 0 | # 0 | f Floors | | Bldg. A | ge | |
| County (6) N/A | | | | County (STATE | Code (7) USE ONLY |) | | | ent Use (Pr | ior if bei | ng demolis | shed) | | | |
| Name of Monitoring Firm | Hired by Building | Owner (8) | | ASCI | /I No. | | | | atement Co | | | TION | illo | | |
| Street Address | | | | | | | Street | Addre | ss | - | | | | • | |
| City, State, Zip Code | | 7,1 | | | | | | | RDEN P | L. | | | | | |
| Design the second section to | Waster Flori | | | | | | | | SACK N. | J. 076 | | | | | |
| Project Manager for Mor | nitoring Firm | 3% | | Telepho | ne No. | | Teleph 201 - | | o. 4270 | | License I | No. | | | |
| Start Date (10) 06/08/2013 | | Schedule 06/10/2 | | npletion | Date (11) | | | | HA Monitor | | ES LAB | | | | |
| Occupancy Status During | | 12 | 1957 | ***** | | | Street | | ss KBRIDGI | E DD | CI IITE I | | | | |
| Facility Closed/Vac Abatement Perform | | | | | | ł | | | ip Code | L DR. | 3011E. I | | | | |
| Other - Describe: | U.Thet Access | | | | | | POW | /HAT | AN. VA. | 32139 | | | | | |
| Scope of Work (Check A x ≥3 sf or ≥3 lf | II I nat Apply) | X | Renova | tion | | | × |] | II Containm | ont with | Monethia | Droppy | | | |
| ≥160 sf or ≥260 lf | | CONTRACTOR . | emolit | | | | | Min | Il Containm ni-Enclosur ovebag Pro | e cedure | | | | 200 | |
| | | ls | Locati | on | | | | J NO | n-Exempte | d (*) and | Non-Fria | ble Pro | Abate | | |
| Location | | 1 | Normal d Sole | ly | | | cription | | //www. | | | _ | Ту | ре | |
| Asbestos-Containing TO BE AB | ATED ' | Ma | intenar | nce/ | | tos Conta thermal | systems | insula | | (S | mount specify | Re | 20 | Enca | Ē |
| In Facil (13) | ity | | (12) | | | other m | ing, VA | | | SF | or LF) | Remova | Repair | Encapsulate | Enclosure |
| | | Yes | No | N/A | | | | | | | | | | ate | roi |
| BASEMI | ENT | | X | | TSI | . Peper | Cell I | nsula | ition | 3 | 0 SF | Х | | | |
| | | + | | | | | | | | | | + | | | |
| | | | | | | | | | | | | + | | | |
| Name of Registered Was | | 11 | L | JDEP W auler ID | | Cubic \ of Was | | | Name of | Registe | red Landfi | | | | |
| SHARON QUALITY | CONSTRUCTION | ON LLC | | 33967 | | TBI |) | | | | NTERPR | ISE | | | |
| City, State HACKENSACK N.J. | 07601 | | | | | Dispos: TBD | al Date | | City, Stat | | RG. OHI | 0 | | | |
| Completed by CARLOS ESQUIVEL | _ | Title | TY N | MANAG | SER | 'Si | gnature | you | Many | al | A | ate 6/07/2 | 2013 | | |
| ASB-41 (R-06-08) | | | | | | -/ | $\overline{}$ | 1 | his form for | rasbest | os licensu | re exem | npted | activi | ties. |

Ox 10801

| Date of Notification (1) 06/06/2013 | | | RC | ne of Bui | ilding Owner | r/Operat | or (2) | .0 | Sin. | | - | - | |
|--|--|---|--|--------------|--|--|---|--|---|--|----------------|---------------|-----------|
| Agencies Notified Type No | tification | | | et Addre | | LU | | £ | JUN L | 3 | | | |
| | | | | | ss RSON ST | - | | 5 | - | 4/1 | <i>∂.</i> 5 | | - |
| X DEP Am | al ended | | _ | | | l. | | * / , | | 1 | 3.1 | ۸. | |
| | endment# | | HO | DOVE | ip Code | - | | 77 | | | - 47 | () | |
| Em Em | ergency (inclu | ding | _ | | N,NJ,0703 | 30 | | | 14 | Salt vo | | | |
| E DOA | ification) | | | ne of Cor | | | | Τī | elephone | Numb | nor . | | 11/20 |
| | cellation | | | | OSCATO | | | 1- | o opione | IVANIL | | | |
| Name of Facility Where Abatement | ie Taking Die | 101 | F | ACILITY | INFORMAT | TION | | | - | | | | |
| PRIVATE | is raking Pla | ce (3) | | | | | Type of Fac | ility (4) | | | | | _ |
| Street Address | | | | | | | School | 35 S S | | | | | |
| 901- HUDSON STREET. | | | | | | | Subcha | apter 8 (Ot | her than | K 121 | | | |
| City (5) | | | 107 | | | | x Other (| i.e. private | & comm | ercial | buildir | as h | nm |
| HOBOKEN N.J. | | | | | | | etc.) Square Feet | | | | 100 | | |
| | | | | | | | 2,800 | | of Floors | | Bld | g. Age | |
| County (6) | | | Coun | ty Code | (7) | | 1 | _ 1 | | | 67 | YEA | RS |
| N/A | | | (STAT | E USE O | NLY) | | Current Use | (Prior if be | eing demo | olished |) | | |
| Name of Monitoring Firm Hired by B | uilding Owner | (8) | L | CM No. | 100 NE 1-10 | | | | | | | | |
| 170 | | \-/ | 7.00 | CIVI NO. | | Name | of Abatement | Contracto | r (9) | | | | |
| Street Address | | • | | | | SHA | RON QUAL | ITY CO | NTRUC | MOIT | LLC | | |
| | | | | | | Street | Address | 700 - 100 m | 0// | | | - | |
| City, State, Zip Code | | | | | | 22 V | AN ORDEN | PL. | | | | | |
| 100 C - 100 C C C C C C C C C C C C C C C C C C | | | | | | City, S | tate, Zip Code | | | | | | _ |
| Project Manager for Monitoring Firm | | | | | | HAC | KENSACK | N.J. 076 | 01 | | | | |
| | | | Teleph | one No. | | | one No. | | | | | | |
| Start Date (10) | | | | | | 201- | 708- 4270 | | License | | | | nerra |
| 06/ 15 /2013 | Sched | luled Co | mpletion | Date (1 | 1) | | | or. | 01135 | | | | |
| 1012010 | 1 06/10 | 2 10040 | | -0.000 | | of OSHA Monitor | | | | | | | |
| Joseph Co. C. | | 3 /2013 | 3 | | | SAN | of OSHA Monitor AIR TECHNOLOGIES LAB. | | | | | | |
| occupancy Status During Abatement | (Check Only | One) | | | | SAN | AIR TECHN | IOLOGIE | ES LAB | | | | |
| Facility Closed/Vacated During B | (Check Only | One) | | | | SAN . | AIR TECHN | IOLOGIE | | | | | |
| Facility Closed/Vacated During E Abatement Performed Outside of | (Check Only | One) | | | | SAN Street / | AIR TECHN Address OAKBRIDO | IOLOGIE | | | | | |
| Facility Closed/Vacated During E Abatement Performed Outside o Other Describe: | (Check Only of Entire Period of Mormal Facil | One) | | | | SAN Street / 1551- City, Str | AIR TECHN Address OAKBRIDG | GE DR. | | | | | |
| Facility Closed/Vacated During E Abatement Performed Outside o Other Describe: | (Check Only of Entire Period of Mormal Facil | One) | | | | SAN Street / 1551- City, Str | AIR TECHN Address OAKBRIDO | GE DR. | | | | | |
| Facility Closed/Vacated During E Abatement Performed Outside o Other – Describe: Cope of Work (Check All That Apply) | (Check Only of Entire Period of Mormal Facil | One) | | | | SAN Street / 1551- City, Str | AIR TECHN Address OAKBRIDG | GE DR. | | | | | |
| Facility Closed/Vacated During E Abatement Performed Outside o Other – Describe: cope of Work (Check All That Apply) ≥3 sf or ≥3 If | (Check Only of Entire Period of Mormal Facil | One) of Abaten ity Hours Renova | nent s | 35 | | SAN Street / 1551- City, Str | AIR TECHN Address OAKBRIDO ate, Zip Code HATAN VA. | GE DR. : | SUITE | В. | | | |
| Facility Closed/Vacated During E Abatement Performed Outside o Other – Describe: cope of Work (Check All That Apply) ≥3 sf or ≥3 If | (Check Only of Entire Period of Mormal Facil | One) of Abaten ity Hours | nent s | | | SAN Street / 1551- City, Str | AIR TECHN Address OAKBRIDG ate, Zip Code HATAN VA. Full Contains Mini-Encloss | GE DR. : | SUITE | В. | ure | | |
| Facility Closed/Vacated During E Abatement Performed Outside o Other – Describe: cope of Work (Check All That Apply) ≥3 sf or ≥3 If | (Check Only of Entire Period of Mormal Facil | One) of Abaten ity Hours Renova | nent s | | | SAN Street / 1551- City, Str | AIR TECHN Address OAKBRIDG ate, Zip Code HATAN VA. Full Contain Mini-Enclosu Glovebag Pr | GE DR. 9 23139 ment with ure occedure | SUITE | B. | | | |
| Facility Closed/Vacated During E Abatement Performed Outside o Other – Describe: cope of Work (Check All That Apply) ≥3 sf or ≥3 If | (Check Only of Check Only of Normal Facil | One) of Abaten ity Hours Renova Demoliti | nent s tion | | | SAN Street / 1551- City, Str | AIR TECHN Address OAKBRIDG ate, Zip Code HATAN VA. Full Contains Mini-Encloss | GE DR. 9 23139 ment with ure occedure | SUITE | B. | | re | |
| Facility Closed/Vacated During E Abatement Performed Outside o Other – Describe: cope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If Location of | (Check Only of Check Only of Normal Facil | One) of Abaten ity Hours Renova Demoliti s Locatio | nent s tion ion | | | SAN Street / 1551- City, Str POW | AIR TECHN Address OAKBRIDG ate, Zip Code HATAN VA. Full Contains Mini-Enclosu Glovebag Pr Non-Exempt | GE DR. 9 23139 ment with ure occedure | SUITE | B. | ocedu | <u>re</u> | - |
| Facility Closed/Vacated During E Abatement Performed Outside o Other Describe: cope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If Location of Asbestos-Containing Material (ACN) | (Check Only of Check Only of Normal Facil | One) If Abaten ity Hours Renova Demoliti S Locatic Normalied Sole | tion ion | | Desci | SAN Street / 1551-City, St. POW | AIR TECHN Address OAKBRIDG ate, Zip Code HATAN VA. Full Contain Mini-Enclosu Glovebag Pr Non-Exempt | GE DR. 9 23139 ment with ure occedure | SUITE | B. | ocedu Abat | | t |
| Facility Closed/Vacated During E Abatement Performed Outside o Other Describe: cope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If Location of Asbestos-Containing Material (ACN TO BE ABATED | (Check Only of Check Only of Normal Facility III) | Renova Demoliti S Locatio Normalled Solel | nent s tion on y y by ce/ | Asbe | Desci stos Contair | SAN Street / 1551-City, St. POW | AIR TECHN Address OAKBRIDG ate, Zip Code HATAN VA. Full Contain Mini-Enclosu Glovebag Pr Non-Exempt | 23139 ment with ure occedure ed (*) and | SUITE I | B. | ocedu Abat | emen ype | Γ |
| Facility Closed/Vacated During E Abatement Performed Outside o Other Describe: cope of Work (Check All That Apply) ≥3 sf or ≥3 If ≥160 sf or ≥260 If Location of Asbestos-Containing Material (ACM TO BE ABATED In Facility | (Check Only of Check Only of Normal Facility III) | Renova Demoliti S Locatic Normallied Solei aintenan | nent s tion on y y by ce/ | Asbe (i.e | Descistos Contair | SAN Street / 1551-City, St. POW | AIR TECHN Address OAKBRIDG ate, Zip Code HATAN VA. Full Contain Mini-Enclosu Glovebag Pr Non-Exempt f terial (ACM) psulation | 23139 ment with ure occedure ed (*) and Am (Sp | Negative Non-Fria | B. Pressi | Abat T | emen ype | Γ |
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| Project Manager for Mor | nitoring Firm | | | Telephon | ie No. | | | none N 864-2 | | | License N 01137 | NO. | | | |
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5.0 RESULTS

According to EPA regulations, any material that contains more than 1 percent of any type of asbestos is considered an ACM. HAs of similar materials (and various colors) are listed together to reflect their nature, function, location, and relevance to future abatement or renovation activities. The laboratory analytical results indicate that ACM are present at the site in the following HAs (refer to the ACM diagrams presented in Appendix C for detailed asbestos-containing HA locations):

| НА | Material | Location | Friability and NESHAP Category | Condition | Quantity |
|----------|---|--|---|-------------------------|--------------------------|
| HA FT 1 | 9" x 9" Tan Streaked VFT | Front Office Bldg: Vault | Non Friable Category I | Damaged | 96 SF |
| HA FT 6 | 9" x 9" Brown VFT | Paper Machine Building: Production Manager's Office Engineering Office | Non Friable Category I | Under 12"x!2" VFT | 228 SF 250 SF |
| HA DI 1 | Aircell Duct Insulation | Front Office Bldg: Former Heater Room | Friable | Damaged | 30 SF |
| HA DI 3 | Brown Spray-on Duct Insulation | #2 Finished Paper Warehouse: Loft Area above Lunch & Locker Rooms | Friable | Damaged | 250 SF |
| HA VDC | White Vibration Cloth | Front Office Bldg: Former Heater Room | Non Friable Category I | Significant Damaged | 8 LF / (1 VDC) |
| *HA CP 1 | Tan/Brown Ceiling Panels (<1% Amosite) | #1 Finished Paper Warehouse: Dry Sprinkler Room | Friable | Damaged | 24 SF |
| | | [[四]] [[]] [[]] [[]] [[]] [[]] [[]] [[] | | | |
| HA PI I | White Block Pipe Insulation - 4"-6" | #2 Finished Paper Warehouse: Loft Area above Lunch & Locker Rooms | Friable | Damaged | 175 LF |
| HA PI 2 | White Block Pipe Insulation | Powerhouse: | Friable | | |
| | - 12"-18" | Operating Level-Feed Pump Area Operating Level-TurbineGen Area Heater Platform | | Good Good Damaged | 315 LF 60 LF 40 LF |
| *** *** | W. W. W. W. | Upper Level | | Damaged | 70 LF |
| HA PI 3 | White Block Pipe Insulation - 8"-10" | Powerhouse: Operating Level-Feed Pump Area Heater Platform | Friable | Good Good | 210 LF 3 5 LF |

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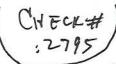
| HA | Material | Location | Friability and | Condition | Quantit |
|----------|--|--|---------------------------|----------------------------|--------------------------|
| | | | NESHAP Category | | |
| HA PI 5 | Layered Paper Pipe Insulation | Paper Machine Building: Production Office | Friable | Damaged | 6 LF |
| HA PI 6 | White Block Pipe Insulation - 18" w/o metal jackets | Powerhouse: Basement Level | Friable | Damaged | 40 LF |
| HA PI 7 | White Block Pipe Insulation - 8"-10" w/o metal jackets | Powerhouse: Basement Level | Friable | Good | 30 LF |
| HA PI 8 | White Block Pipe Insulation - 3"-6" w/o metal jackets | Paper Machine Building: Truckers' Lounge/Vending Wet End Upper Level Sizng Tank Area Upper Level Tool Box Room | Friable | Good Damaged Damaged | 50 LF 210 LF 20 LF |
| | | Powerhouse: Basement Level | | Damaged | 52 LF |
| HA PI 9 | Block Pipe Insulation - 18" w/white metal jackets | Powerhouse: Basement Level | Friable | Good | 25 LF |
| HA PI 10 | Block Pipe Insulation – 18" -24"w/silver metal jackets | Powerhouse: Basement Level | Friablo | Good | 100 LF |
| HA PI 11 | Block Pipe Insulation - 8" -10"w/silver metal jackets | Powerhouse: Basement Level | Friable | Good | 150 LF |
| HA PI 12 | Aircell Pipe Insulation | Paper Machine Building: Truckers' Lounge/Vending | Friable | Damaged | 20 LF |
| HA TI 1 | Hot Process Softener Tank Insulation | Powerhouse: Operating - Heater Platform Levels | Friable | Good | 300 SF |
| HA TI 2 | Hot Water Tank Insulation | Powerhouse: Heater Platform Level | Friable | Good | 550 SF |
| S PAR | | 中央政治(10) 图 10) | | | |
| НА НІ 2 | High Pressure Steam Heater Header Insulation | Powerhouse: Heater Platform Level | Friable | Damaged | 20 LF |
| HA SG 1 | Boiler Stack Gaskets | Powerhouse: Upper Level Mezzanine Level | Non Friable Category I | Good Good | 3 x16 L1 3 x85 L1 |
| HA BHG 1 | Boiler Hatch Gaskets | Powerhouse: Upper Level Operating Level | Non Friable Category I | Good Good | 3 x 8 LF 3 x32 LF |
| HA FD 1 | Metal Fire Door Insulation | All Original /Pre 1980 Metal Fire Doors assumed to be asbestos insulated | Friable | Good | ~32 Doors |
| HA FB | Tar & Felt Flashing w/Aluminizer | Powerhouse: Main Roof | Non Friable Category I | Good | ~625 SF |
| IA FD | Tar & Felt Flashing w/Aluminizer | Powerhouse: Hopper Roof | Non Friable Category I | Good | ~220 SF |

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| HA | Material | Location | Friability Condition and NESHAP Category. | n Quantity |
|-------|---------------------------|---|---|------------|
| HA FG | Roof Flashing | Paper Machine Bldg: Roof, Dry End Parapet Wall | Non Friable Good Category I | ~440 SF |
| HA FK | Tar Flashing w/Felt Cover | #1 Finished Paper Whse: Roof Canopy, Wali | Non Friable Good Category I | ~50 SF |

| | | | Friability Condition Quanti and NESITAP Category |
|---|---------------------|--|---|
| HA FO Felt & Tar Flashing w/Aluminizer | | Main Office Addition Roof, Front Wall Parapet | Non Friable Good ~115 S] Category I |
| HA FS: | Felt & Tar Flashing | Stock Prep Stair Tower Roof | Non Friable Good ~135 SI Category I |

Friable ACM is any material containing more than 1 percent asbestos that, when dry, may be crumbled, pulverized, or reduced to powder by hand pressure. Non-friable ACM is any material containing more than 1 percent asbestos that, when dry, cannot be crumbled, pulverized, or reduced to powder by hand pressure. Under NESHAP, non-friable ACM is divided into two categories. Category I Non-Friable ACM are asbestos-containing resilient floor coverings (commonly known as vinyl asbestos tile), asphalt roofing products, and gaskets. These materials rarely become friable unless ground, sanded, abraded or pulverized. All other non-friable ACM such as transite materials are considered to be a Category II material, which can become friable on impact.



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| gencies Notified X] EPA | Type of Notification | otificatio | n | Str | eet Address | P O Bo | x 124 | 3. | | W 2. | 50 | | -11 |
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| x] DOH] DCA | [x] Emergen | ion) | iding | N | ame of Contact Mark | Tucker | | Telepho | ne Number | | - | | |
| | [] Cancern | | | EA CH | ITY INFORM | MATION | | | | | | | _ |
| | re Abatement is Taking P Residence | lace (3) | | FACIL | ITT IN OIL | MATION. | Type of Facility [[[X | School Subo | chapter 8 (other er (i.e., private | r than k | 12) | | ng |
| Street Address | 27 Rochester Drive | | | | | | | hom | es, etc.) | Bldg. A | | | - |
| City | AND THE PROPERTY OF THE PARTY O | County (| (6) | Co (S | ounty Code (7) TATE USE ON | LY) | Square feet 1000 sf Current Use (P | rior if being | 1 | Didg. 7 | 60 | | |
| Brick | | Ocean | | | | | Re | sidence | | | | | - |
| C) (a nitoring) | Firm Hired by Building C |)wner (8 |) | A | SCM No. | Name of | f Abatement Cont | ractor (9) iardian Co | ontracting, I | nc. | | | |
| Name of Monitoring | N/A | | | | | Street A | ddress | | | | | | |
| Street Address | | | | | | | | 89 Route | 9, Unit 61 | | | | - |
| City, State, Zip Code | | | | | | City, St | ate, Zip Code To | ms River | , New Jerse | y 0875 | 5-12 | 71 | _ |
| | | | Telephone N | Jumber | | Telepho | one Number | | License Nu 00624 | ımber | | | |
| Project Manager for 1 | Monitoring Firm | | | | | 732-3 | 49-9932 | | 00624 | | | | |
| Scheduled Start Date | 2 (10) | _ | | | n Date (11) | Name o | of OSHA Monitor E. | M.S.L. A | nalytical | | | | _ |
| 6/1 | 1/13 uring Abatement (Check | anly one | 6/12/13 | | | Street A | Address |)56 Stelto | m Pond | | | | |
| [x] [] [] Scope of Work (Che | Facility Closed/Vacater Abatement Performed (Other – Describe eck all that apply) | Outside (| of Normal F | acility Ho | ours | City, S |] Full Conta | ainment wit | , New Jerse | | 54 | | |
| [x] | >3 sf or ≥3 lf | | [] | Renovat | | [x | | npted (*) ar | nd Non-Friable | Procedu | ire | 12 | |
| [] | ≥160 sf or ≥260 lf | | [x] | Demolit | tion | | 1 Non Exe | | | Abat | | Type | |
| | | Γ | | | | | | | | | | Е | T |
| Asbestos-Contai TO BE | eation of ning Material (ACM) E ABATED facility (13) | | Is Location Normally to Solely by tenance/C Staff (12) | ised y | | VA | Containing (ACM) | | Amount (Specify SF or LF) | R E M O V A L | R E P A I R | N C A P S U L E | |
| •9 | | 1 | | | Asbestos | siding | | | 800 sf | X | | | _ |
| Exterior | | - | X | + | 11000000 | | | | | | - | +- | _ |
| | | | + | + | + | | | | | +- | +- | +- | _ |
| | | + | | + | - | | | | | | | | _ |
| | | | NJDEP Wa | aste Haule | er ID No. Cu | bic Yards of | Waste Name | of Registere | ed Landfill | | | | |
| Name of Registere | ed Waste Hauler dian Contracting, Inc | | | 20223 | | 3 | y, State | L.R.F. | | | | | |
| City, State Toms | River, New Jersey | | | 6/13 | osal Date 3/13 Signature | Tu | illytown, Penn | sylvania 1 | | Da 6/ | te 10/20 | 13 | |
| Completed by (Pr | rint or Type) | Title | iact Mana | ager | | lich | | | | - 6/ | 10/20 | | - |
| Nicho | olas Fernicola | Pro | *Do not us | se this fo | rm for asbesto | | exempted activi | ties. | | | | | |

W 2019

| Date of Notification (1) | | | Name | of Buildin | g Owner/ | Operator | (2) | | 912 | | | | |
|--|-----------------------------|----------------------|---|--|--|--|------------------------------------|--------------------|------------|-----------|--|-------------|----------|
| 06/08/2013 | RID | VAN SAI | - 47 | er V | 1/2 | | | | | | | | |
| Agencies Notified Ty | | t Address | | | 1.57 | 1,5 - | | | | | | | |
| EPA X | Initial | | | - MARIC | | E DR. / | APT. C | ζ, | | • | ·// < | 50 | s. |
| DOL U | Amended Amendment# | | | State, Zip (| | • | | | 14. | | | - | |
| □ DOH | Emergency (inclu | uding | | of Contac | | | | | | | 17/20 | | |
| DCA DCA | justification) Cancellation | | 10 OF REST 075 BODG | AN SAL | | 1 | Telephone Number | | | | | | |
| | | - | | CILITY IN | | | | | | | | | |
| Name of Facility Where Abate | ement is Taking Pla | ice (3) | .,, | OILIT III | ORWAI | ION | Type of Facilit | v (4) | | | | | |
| PRIVATE | | | | | | 1 | School (F | | | | | | |
| Street Address 3 - ROSS STREET | | | | | | $\neg \neg$ | Subchap | ter 8 (Oth | ner than | K-12) | | | |
| | | | | | | 1 | Other (i.e etc.) | . private | & comm | ercial b | uilding | js, ho | mes, |
| City (5) WHARTON N.J. 07885 | - | | | y y | | | Square Feet | # 0 | of Floors | | Blda | Age | |
| |) | | | | - 1 | 2500 | 1000 | stories | | | | | |
| County (6) | County | Code (7) | v. | | Current Use (F | rior if be | peing demolished) | | | | | | |
| Name of Monitoring Firm Hire | d by Duilding C | | | | " — | - | N/A | | | | | | |
| N/A | d by Building Owne | er (8) | ASC | M No. | | Name o | of Abatement Contractor (9) | | | | | | |
| Street Address | | - | | | | | RON QUALI | TY COI | NSTRU | CTIO | N LL | C | |
| | | | | | | | Address | | | | | | |
| City, State, Zip Code | | | | | | No. of the last of | N ORDEN I | 7L. | | | | | |
| town Committee of the C | | | İ | City, State, Zip Code HACKENSACK N.J. (| | | | | | | | | |
| Project Manager for Monitoring | Telepho | one No | | | | .J. 0/6 | | | | | | | |
| 2 12 12 13 13 13 13 13 13 13 13 13 13 13 13 13 | Telephone No. | | | | Telephone No. License No. 201 -708- 4270 01135 | | | | | | | | |
| Start Date (10) | | | | | of OSHA Monitor | | | | | | | | |
| 06/17/2013 | 3 | | - 1 | | VIR TECHNO | | ESTAF | 3 | | | | | |
| Occupancy Status During Abat | tement (Check Only | One) | | | | Street A | | | | | | | |
| Facility Closed/Vacated D | 1551 (| 1 OAKBRIDGE SUITE. B | | | | | | | | | | | |
| Abatement Performed Ou Other – Describe: | tside of Normal Fac | cility Hou | rs | | | | te, Zip Code | | | | | | |
| Scope of Work (Check All That | AEX | | | | _ | POW | HATAN VA. | 23139 | | | | | |
| | Apply) | | | | | <u> </u> | | | | | | | |
| ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf | ation ition | Full Co | | | | | Containment with Negative Pressure | | | | | | |
| | u | Demoi | idon | | | × | Mini-Enclosur Glovebag Pro | e | | | | | |
| | | | | | | | Non-Exempte | d (*) and | Non-Fri | able Pr | ocedu | re | |
| | Is Local | | | | | | | | | Abatement | | | |
| Location of Norma Asbestos-Containing Material (ACM) Used Sol | | | Description | | | | | | | - | Туре | | |
| TO BE ABATED Main In Facility Custo | | Maintena | 200000000000000000000000000000000000000 | (i.e. t | thermal s | ining Mat vstems ir | 10.000 | Amount (Specify | | | I I | _ m | |
| | | (12) | Stall? | | surfacir | surfacing, VAT, or other miscellaneous) | | | SF or LF) | | Repair | icap | nd |
| 10 (0) | Yes | . T N= | T | | other mis | scellanec | ius) | | | Removal |) air | Encapsulate | Endosure |
| BASEMENT | Tes | | N/A | | | | | | | | | e e | 0 |
| DASEIVIENT | | X | | P | PIPE INS | SULAT | ON | 60 | SF | X | | | |
| | | | | | | | | | | + | | | _ |
| | | | | | | | | | | + | - | | |
| | | | | | | | | | | +- | | | |
| lame of Registered Waste Haul | er | IN | JDEP Wa | aste | Cubic Ya | rde | Names | 3 | | | | | |
| HARON QUALITY CONS | STRUCTION LI | CH | auler ID N | Vo. | of Waste | | Name of F | | | | | | |
| ity, State | | | 003396 | | TBD | | MINER | VA EN | ERPR | ISE. I | NC | | |
| ACKENSACK N.J. 07601 | ľ | | | | Disposal | | City, State | | | | | | |
| ompleted by | Title | | | L | TBD | 2 | WAYNE | SBUR | G, OHI | 0 | | | |
| IOMARA GOMEZ | | ESIDEN | JT. | | Sign | Signature | | | Date | | | | |
| | | | | | 1, Xiomandoreno | | | | 06/08/2013 | | | | |

MO#20613923493

| Date of Notification (1) | | | | Nar | ne of Buildin | ng Owne | r/Onerator | (2) | 2812 | | | | | |
|---|-------------------------------|---|-----------------|--------------|------------------|--------------|------------------|--|----------------------|---------------------------------------|---------|-------------|------|--|
| | 07 / | | | Lyn | n Kreinbe | rg | ir operator | (2) | 2817 JU | 1/19 | | | 4 | |
| Agencies Notified EPA | Type Notification | n | | Stre | eet Address | | | | | 7 5 | 11 - | | _ | |
| ☑ DOLWD | | | | | N.Fulton | | | | 4// | | <: | Sc | | |
| ☑ DHSS | Amendment | nded City Chata 7:- O- I | | | | | | | —— "///// | 70.00 | | - | - | |
| DCA | ☐ Emergency | | | | | | | | | (4. _{1/2} .) | Z Page | | | |
| (NJAC 5:23-8) | | ne of Conta | | | Telephone Number | | | | | | | | | |
| | ☐ Cancellation | 1 | | Lvn | n Kreinber | ·a | | | 1-000000 | ic manibe | 85 8 | | | |
| | | | | | ACILITY I | | ATION | | | | | | | |
| Name of Facility Where A | hatement is Tak | ing Play | 20 (3) | | ACILITY | NOKIVI | ATION | T+ 75 | | | | | | |
| Private house | | Type of Facili | | | | | | | | | | | | |
| Street Address | | School (K | -12) | - 16 4 00 | | 22 | | | | | | | | |
| | | Subchapter 8 (Other than K-1 2) Other (i.e., private and commercial buildings, | | | | | | | | | | | | |
| 103 N.Fulton Street | | homes, etc.) | | | | | | | | | | | | |
| City (5) | | | | | | | | Square Feet # of Floors Bidg. Age | | | | | | |
| Bloomfield, NJ 07003 | | | 25000 | | | | | | | | | | | |
| County (6) | | | 2000 | Co | unty Code (7) | (STATE | USE ONLY) | Current Use (| Prior if being | demolish | ed) | | | |
| Essex | * | | | | | | | | - 3 | | | | | |
| Name of Monitoring Firm | Hired by Building | Owner | (8) | ASCI | M No. | Name | of Abatem | ent Contractor | (9) | | | | 28 | |
| | | | | | | 1000 | ch LLC | | (0) | | | | | |
| Street Address | | | | Address | | | | | | | | | | |
| | | | | | Hoos | | | | | | | | | |
| | | | | | | | | y Rd #283 | | | | | | |
| | | | | | | | tate, Zip C | | | | | | | |
| Project Manager for Monit | oring Firm | | Ta | lank* | - 11- | | e, NJ 074 | 70 | | | | | | |
| | omig i mii | | 16 | ephon | e No. | | one No. | | License | No. | | | | |
| Start Date (10) | | | 1.2 | | | 973-63 | 8-1777 | | 01127 | | | | | |
| 35 B | | | | | ate (11) | Name | of OSHA N | Monitor | | | | | | |
| | | 06 | | 8 / | 13 | Enviro | vision Co | nsultants,Inc | | | | | | |
| Occupancy Status During | Abatement (Che | ck only | one) | 7. 1 | | | Address | moditalits, file | | | - | | | |
| □ Facility Closed/Vacate | During Entire P | eriod o | f Abate | ement | | 20-21 1 | Wagarow | Dood Did. | 1255 | | | | | |
| Abatement Performed | rs - De | scribe | City St | tate, Zip Co | Road, Bldg .# | 7 33 E | | | | | | | | |
| Time of Abatement: | AIVI | PM/ | PM | | _AM | | 100 | | | | | | | |
| Scope of Work (Check all | that apply) | - | | | | rair La | wn, NJ 0 | | | e e - e - e - e - e - e - e - e - e - | | | | |
| | 11.77 | 100-11 | | | | Н | Full Conf | and decontam | ination | | | | | |
| >3 sf or >3 If 2 160 sf or >260 If | ≥ 3 sf or >3 If Renovation | | | | | | Mini-Enc | ontainment with Negative Pressure | | | | | | |
| | | | emoliti | on | | × | Glovebag | Procedure [| Tent with Ne | gative Pr | essure | | | |
| | | 1 | s Loca | tion | | | Non-Exer | mpted (*) and N | on-Friable Pro | ocedure | i | | | |
| Location o | f | | Norma | | | - | 40.00 | 20 | | | Abate | ment T | уре | |
| Asbestos-Containing M | Use | ed Sole | ely by | Ashes | De tos Cont | scription of | f erial (ACM) | | | מ מ | т | To | | |
| TO BE ABAT | | intena | ance/ Staff? | (i.e. | , thermal | systems in | nsulation. | Amour (Specif | it i | Repair | nca | Enclosure | | |
| IN Facility (13) | Cus | (12) | | | surfa | cing, VAT, | or | SIF or L | , F) | Repair | psc | usc | | |
| (10) | | 1 | T | T | | other n | niscellaneo | ous) | | | <u></u> | Encapsulate | | |
| | | Yes | No | N/A | - | | | | | | | w | | |
| asement | | | | \boxtimes | Pipe insu | lation | | | 120 LF | [| X] [| | - | |
| | | | | | | | | | -20 51 | | =+= | | 1 | |
| | | += | = | | | | | | | _L | | | L | |
| | | Ш | Ш | | | LEYSON SIES | | | | | | П | | |
| | | | | | | | | | | | = | 1 | | |
| | Hauler | | NJE | EP Waste | Hauler ID No. | Cuhic Yer | ds of Waste | Name of De | atara di Li | L | | ŢŲ | | |
| lame of Registered Waste | T. T. I I I G | | | | | | | The state of the s | | | | | | |
| | | | | | | |) | T.R.R.F. Inc | | | | | | |
| r Tech LLC | | | | | | Dienocal | Date | City, State | | - 7000 | 42 | - | - | |
| r Tech LLC City, State | | | | | | Disposal | Date | City, State | | | | | | |
| r Tech LLC Dity, State Zayne, NJ 07470 | | | | | | TBD | | 1000 | A | | | | | |
| r Tech LLC Dity, State Vayne, NJ 07470 | e) Title | e | | | | TBD | | Tullytown, P. | A | Date | | | | |
| Name of Registered Waste r Tech LLC City, State Vayne, NJ 07470 Completed By (Print or Type Jevtic | e) Title | | a hisa | | | TBD |) | 1000 | A | Date 06/07/2 | les . | | -N-1 | |