Date of Notification (1)				Name	e of Buildin	a Ov	vner/Operator	(2)		-05			
6/12/	17			A			Board of Edi	10.00	I R			7.77	P
Agencies Notified Type Notific	ation			Stree	t Address						3	W	Ė
⊠ EPA ⊠ Initial					5 Summi	t Av	е		Prod.			an Brown graphs	
☐ DOLWD ☐ Amende				53,53	State, Zip (					1111 6		00.0	- 1
☑ DOH Amendm							NJ 08755			IUN 1	3	2017	/ /
DCA Emerger (NJAC 5:23-8) justificati	icy (ind	cluding	g		e of Contac		140 007 00		Tolonhoho Nur				-
(NJAC 5:23-8) justificati	Contract of the Contract of th			The state of the s	Crawfor	1000			Telephone Nur	nber	11	ITR	01.8
						-				2000		X. <del>X</del> . 1-1	
Name of Facility Where Abatement is	Talsias	Disease	(2)	FA	CILITY	NFO	RMATION	I =				NAME OF THE OWNER OWNER OF THE OWNER	-
Island Heights	raking	Place	(3)					Type of Facility	, ,				
Street Address								School (K-12	:) 3 (Other than K-1	2)			
115 Summit Ave								Other (i.e., pr	rivate and comme		uilding	js,	
City (5)								homes, etc.)					
Island Heights								Square Feet	# of Floors	1	ldg. A	ge	
County (6)				0	-h - O - d - /	71/07	TE HOE ON NA	20,000	1		50+		
Ocean				Cou	nty Code (/	(817	ATE USE ONLY)		or if being demol	ished)			
	1: 0		(0)					School					
Name of Monitoring Firm Hired by Buil TTI Environmental Inc	aing O	wner	(8)	ASCM	No.			ent Contractor (9)					
Street Address						1		nvironmental S	systems				
1253 North Church Street							eet Address						
City, State, Zip Code								lehem Pike - Sı	uite 60				
Moorestown, NJ 0857							y, State, Zip Co						
Project Manager for Monitoring Firm			Tal		Ma		Spring House	e, PA 19477					
1 Toject Wallager for Worldoning Film				ephone 56 840		1	ephone No. 215 542 7000		License No.				
Start Date (10)	Schod	ulad C			ite (11)		me of OSHA N	3.5	00847				
_6_ / _26_ / _17_			(5)		17	1	CES	ionitor					
Occupancy Status During Abatement (	Check	only o	one)			Str	eet Address						-
☐ Facility Closed/Vacated During Enti				ment		1	121 N. Bethl	lehem Pike - Su	uite 60				
Abatement Performed Outside of N					scribe		y, State, Zip Co						
Time of Abatement: 7:00AM-4:00P	M/	PM	I- <u>4</u> AM			1 3	Spring House						
Scope of Work (Check all that apply)									200				
≥3 sf or >3 If		⊠ Re	novat	ion			☐ Full Cont	ainment with Neg	ative Pressure				
⊠ ≥160 sf or ≥260 lf			moliti					g Procedure					
					,		Non-Exe     ■     Non-Exe     Non	mpted (*) and Nor	n-Friable Procedu	ure			
			Loca							Ab	atem	ent T	уре
Location of Asbestos-Containing Material (ACN	1)			ely by	Ashe	etne	Description o Containing Ma		Amount	Re	Re	Ш	m
TO BE ABATED	.7		intena				ermal systems		(Specify	Removal	Repair	cap	Enclosure
IN Facility (13)		Cusi	(12)	Staff?			surfacing, VAT,		SF or LF)	<u>a</u>		Encapsulate	ure
(13)		Yes	No	N/A		OL	her miscellane	ous)				te	
Exterior Window Caulk		П			Windov	v C a	ulk		250 LF	N/2			
Exterior William Gauik		_	5-2-25	-	WITIGOV	v Ca	uik		250 LF		Ш	Ц	Ш
		Ц											
Name of Registered Waste Hauler			N	JDEP I	Naste	Cub	oic Yards of	Name of Regist	ered Landfill				
Champion Waste Hauler			F	lauler II	O No.	Wa 1		Grows-Tull					
City, State							posal Date	City, State					$\neg$
Hainesport, NJ						7	/31/17	Morrisville,	PA 19067				
Completed By (Print or Type)	Title						Signature	11	D	ate ,			
Patricia Visco	Of	fice I	Mana	ger			Patie	www Marce	- (	5/12	Ji-	2	

Date of Notification (1)	and the second		Nam	e of Buildir	g Owner/Operator	(2)	11200	_	_		PR
6//	17				Park Township		· (n)_E	C	<u>E</u>		IJ [E
Agencies Notified Type Notific	ation		Stree	et Address			The state of the s				
⊠ EPA ⊠ Initial			25	Washing	ton Ave			JUN	1 2	20	117
☑ DOLWD ☐ Amende			City,	State, Zip	Code			JUN	10	LU	11
□ DOH   Amendm     □ DCA   □ Emerger		in a	Ed	lgewater	Park, NJ 08010		ì				
(NJAC 5:23-8) justificat	icy (includi	ing		e of Contac			Telephone Num	STO	S C	THE	ROL
☐ Cancella					n/Nancy Lane		Telephone Hun	١١٠١٠	- VIS	ING	
Name of Facility Where Abatement is	Taking DI:	000 (3)	ГР	CILITY	NFORMATION	T (F 17)	7.0				
Anne C Jacques School	Taking Fie	100 (3)				Type of Facility					
Street Address						School (K-1)	<sup>2)</sup> 8 (Other than K-12	2)			
25 Washington Ave						Other (i.e., p	rivate and comme	rcial b	uildin	gs,	
City (5)						homes, etc.				3	
						Square Feet	# of Floors	В	ldg. A	ge	
Edgewater Park, NJ 08010						30,000	1		50+		
County (6)			Cou	nty Code (7	)(STATE USE ONLY)	Current Use (Pr	rior if being demolis	shed)			
Burlington						School					
Name of Monitoring Firm Hired by Buil	ding Owne	er (8)	ASCM	l No.	Name of Abateme	ent Contractor (9)	)				
Epic Environmental Services					Controlled E	nvironmental (	Systems				
Street Address					Street Address						
1930 Brown Rd					1121 N. Beth	lehem Pike - S	uite 60				
City, State, Zip Code					City, State, Zip Co	ode		50724811150	9111085	110-0	
Newfield, NJ 08344					Spring House	e, PA 19477					
Project Manager for Monitoring Firm		Te	ephone	No.	Telephone No.		License No.			-	
James Eberts		8	56-205	5-1077	215 542 7000		00847				
Start Date (10)	Scheduled	Compl	etion Da	ate (11)	Name of OSHA M	lonitor					
6 /26 /17	7	/ 3	1 /	17	CES						
Occupancy Status During Abatement (	Check onl	v one)			Street Address						
☐ Facility Closed/Vacated During Enti			ement			ehem Pike - S	uite 60				
Abatement Performed Outside of No	ormal Faci	ility Hou	rs - Des	scribe	City, State, Zip Co		arte ou				_
Time of Abatement:AM-2:00	PM/	PM-2:0	00AM		Spring House						
Scope of Work (Check all that apply)					opring riouse	, I A 15411					
					☐ Full Cont	ainment with Neg	gative Pressure				
<ul> <li>≥3 sf or ≥3 If</li> <li>≥160 sf or ≥260 If</li> </ul>		Renova Demolit			⊠ Mini-Enc						
		Jennone	OII		⊠ Non-Exe	g Procedure mpted (*) and No	n-Friable Procedu	re			
		Is Loca	tion			()		_	atem	ent T	Vne
Location of		Norm			Description o				1		
Asbestos-Containing Material (ACM TO BE ABATED		sed So /lainten			stos Containing Ma		Amount	Remova	Repair	nca	Enclosure
IN Facility		ustodial		(i.e	<ul> <li>thermal systems i surfacing, VAT,</li> </ul>		(Specify SF or LF)	evo	ai-	apsı	uso
(13)		(12			other miscellane		Or Or Er)	=		Encapsulate	6
	Yes	s No	N/A							(D	
Exterior Doorways				Soffit P	laster		5 SF				
Doorways Throughout				ACM Tr	ansite Doorway	Panels	300 SF		П	П	П
	П	П						+=			
Name of Registered Waste Hauler		14	NJDEP 1	Maeto	Cubic Yards of	Name of Deci	tored Law Jen		Ш	Ш	
Champion Waste Hauler			Hauler II		Waste	Name of Regis					
City, State					2	Grows-Tul	iytowii				
Hainesport, NJ					Disposal Date	City, State	D. 406				
					7/31/17	Morrisville	, PA 19067				
Completed By (Print or Type)	Title				Signature	- /	7) Da		,		
Patricia Visco	Office	Mana	ger		Hal	cerce b	lacer a	1/12	1	17	

#### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 5:16) doub \$ 11279

Date of Notification (1)					Nam	ne of Buildir	ng Owner/Operator	(2)	part or the second or the seco				
6/	12 /	17	_		E	dgewater	Park Township S	School District	IM E	CE		$\mathbb{W}$	E
Agencies Notified	Type Notific	cation			Stre	et Address						-	
					25	Washing	iton Ave						
□ DOLWD	☐ Amende					State, Zip				UN 1	1-3	201	7
□ DOH	Amenda				100		Park, NJ 08010		Veni best				
DCA (NJAC 5:23-8)	☐ Emerger justificat		luding	]		e of Contac			Tolonhana New	5			
(16710 0.20 0)	☐ Cancella						n/Nancy Lane		Telephone Num	menc	2	NTR JG	OL 8
							NFORMATION		T		-		**********
Name of Facility Where A	batement is	Taking	Place	(3)				Type of Facility	(4)				-
Ridgeway Middle So	chool							School (K-12					
Street Address								Subchapter 8	Other than K-12	2)			
300 Delanco Road								homes, etc.)	rivate and comme	rcial bi	uildin	gs,	
City (5)								Square Feet	# of Floors	I R	ldg. A	00	
Edgewater Park, NJ	08010							30,000	1		50+	ye	
County (6)			-	_	Col	inty Code /	7)(STATE USE ONLY)			- 1 1	30+		
Burlington					000	mity Code (/	MOTATE OSE ONET)	The second control of	or if being demoli	snea)			
Name of Monitoring Firm I	Hirad by Buil	dina O	unor /	0)	ASCN	1 11-	I No CAL -	School					
The property of the same of th		ung O	wher (	0)	ASCIV	I NO.	Name of Abateme						
Epic Environmental Street Address	Services							nvironmental S	ystems			2.51116	
							Street Address						
1930 Brown Rd							1121 N. Beth	lehem Pike - Sı	uite 60				
City, State, Zip Code							City, State, Zip Co					7.5-55	
Newfield, NJ 08344				T ==			Spring House	e, PA 19477					
Project Manager for Monit	oring Firm			0.150.5	ephone		Telephone No.		License No.				
James Eberts				1		5-1077	215 542 7000		00847				
Start Date (10)						ate (11)	Name of OSHA M	Ionitor					
6/26/_	17		_ /	3	1_ /	17	CES						
Occupancy Status During							Street Address				-		
☐ Facility Closed/Vacated	d During Enti	re Perio	od of A	Abate	ement		1121 N. Bethl	ehem Pike - Su	iite 60				
Abatement Performed	Outside of N	ormal F	acility	Hou	ırs - De	scribe	City, State, Zip Co	ode				A400 1 3-	
Time of Abatement:		PIVI/	P	/I- <u>Z:(</u>	<u> </u>		Spring House	e, PA 19477					
Scope of Work (Check all t	that apply)						ПЕЛО						
≥3 sf or ≥3 If		D	⊠ Rer	nova	tion		☐ Full Cont	ainment with Nega	ative Pressure				
≥160 sf or ≥260 If		Ī	0.000	molit				Procedure with					
							Non-Exer     Non-Exer	mpted (*) and Nor	-Friable Procedu	re			
				Loca						Ab	atem	ent T	уре
Location o Asbestos-Containing M		1)			ely by	Acho	Description of			R	D.	ш	ш
TO BE ABAT		"	Mai	nten	ance/		stos Containing Mat ., thermal systems i		Amount (Specify	Removal	Repair	ıca	nclo
IN Facility			Cust		Staff?		surfacing, VAT,	or	SF or LF)	oval	1 =	Encapsulate	Enclosure
(13)			Yes	(12) No		1	other miscellaned	ous)				ate	O
Hallway Ceilings							tings (Wrap & C	ut)	35 LF				
Corridor Ceiling							on Collar		120 SF				
3			7				••		120 31				
		- 1											
Name of Registered Waste	Hauler			Ц.	LIDED	Mast	O. Fiz V. J. S	T			Ш	Ш	
Champion Waste Ha					NJDEP Hauler I		Cubic Yards of Waste	Name of Registe					
	uier						2	Grows-Tully	ytown				
City, State	VX.50						Disposal Date	City, State					
Hainesport, NJ							7/31/17	Morrisville,	PA 19067				
Completed By (Print or Typ	e)	Title					Signature	1.	Da	te ,			
Patricia Visco		Off	ice N	lana	ger		Water	en Vica	_	6/1-	, Í.	_	
A S.R							1 Electic	all bulle		-/14	41	1	

Date of Notification (1)				Na	me of Buildi	ing Owner/Operator	Cher	115/18				
	1	7				Park Township		t   11 L	Jl	JN	1 3	201
Agencies Notified Type Not  ⊠ EPA □ Initial	ification	1		Str	eet Address				0000	TO		
	dod				5 Washin			A	SBES		NSI	
	deu dment #	ŧ		1	, State, Zip						14031	40
☐ DCA ☐ Emerg			na	E	dgewater	Park, NJ 08010						
(NJAC 5:23-8) justific	cation)		J	Nar	ne of Conta	ct		Telephone No	umber			
Cance	ellation			R	obert Irwi	n/Nancy Lane		1		,		
				F	ACILITY I	NFORMATION						
Name of Facility Where Abatement	is Takin	g Plac	ce (3)				Type of Facility	(4)			_	
Mildred Magowan ES							School (K-12	2)				
Street Address							Subchapter	8 (Other than K-	12)			
405 Cherrix Ave							Other (i.e., p	rivate and comm	nercial	build	ngs,	
City (5)	SEC 7.	33/KC=					Square Feet	# of Floors		Bldg.	Δαρ	
Edgewater Park, NJ 08010							30,000	1		50.		
County (6)				Co	unty Code (	7)(STATE USE ONLY)		ior if being demo	nlished		-	
Burlington						10 ************************************	School	or a boning domi	31131160	/		
Name of Monitoring Firm Hired by B		Owner	r (8)	ASCI	VI No.	Name of Abatem	ent Contractor (9)					
Epic Environmental Services	5						nvironmental S					
Street Address						Street Address		yotomo				
1930 Brown Rd							lehem Pike - Sı	uite 60				
City, State, Zip Code						City, State, Zip C		arce ou				
Newfield, NJ 08344						Spring Hous						
Project Manager for Monitoring Firm			Te	lephon	e No.	Telephone No.	0, 1, 1, 10-177	License No.				
James Eberts			1		5-1077	215 542 7000	i	00847				
Start Date (10)	Sched	uled (	Comp	letion D	ate (11)	Name of OSHA N		00047				
_6_ / _26_ / _17_	7	7	/ _3	31 /	17	CES						
Occupancy Status During Abatement	(Check	only	one)			Street Address						
□ Facility Closed/Vacated During Er	itire Per	iod of	Abat	ement			lehem Pike - Su	.i				
	Normal	Facilit	ty Ho	urs - De	scribe	City, State, Zip Co		lite 60				
Time of Abatement:AM-2:0	00PM/_	P	PM-2:	00AM		Spring House						
Scope of Work (Check all that apply)	-1111-3					Opining House	s, FA 194//					
☐ ≥3 sf or ≥3 lf						☐ Full Cont	ainment with Nega	ative Pressure				
≥ 25 of 50 in ≥ 25 in ≥ 260 if		⊠ Re					losure					
						Non-Exe     Non-Exe	Procedure www.mpted (*) and Non	ಳಾ - ಕಾಲ್ಕ್ n-Friable Proced	ure			
			Loca							haten	nent	Type
Location of Asbestos-Containing Material (AC	8.4\		Norm	ally lely by		Description o	f		-		_	1
TO BE ABATED	IVI)			ance/	Asbes	stos Containing Ma , thermal systems i	terial (ACM)	Amount	(em	Repair	inca	ncl
IN Facility		Cus	todial (12	Staff?	(1.0.	surfacing, VAT,	or	(Specify SF or LF)	Remova	₩.	psu	Enclosure
(13)	-	Yes	No		-	other miscellaned	ous)	Conto Contratt	_		Encapsulate	e
Hallway Ceilings			No	N/A	ACMPar	per Pipe Insulati	on/Wran out	2515			"	
Exterior Doorways					Soffit PI	/ · · ·	on (wrap cut	35 LF				1
					Comeri	43101		5 SF			Ш	
	-			-								
Name of Registered Waste Hauler		Ц		LIDER	Masta	0 L: V : -						
Champion Waste Hauler				NJDEP Hauler I		Cubic Yards of Waste	Name of Registe					
City, State						Disposal Data	Grows-Tully	riown				
Hainesport, NJ						Disposal Date 7/31/17	City, State  Morrisville,	PA 10067				
Completed By (Print or Type)	Title						morrisvine,					
Patricia Visco		ice N	/lana	ger		Signature	· Via a.	100	ate 17	~ j ~	7	

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		1	11
			Committee of the commit

				10.00										-
Date of Notification (1)					E		ing Owner/Operator			JUN	1	3 2	017	Consta
6 /	8 /	17			V	Vest Long	g Branch BOE/ J	ob #1603-4997	Check #9	9207				i
Agencies Notified	Type Notif	fication			Stre	et Address	1	AND THE RESERVE OF THE PARTY OF	AS	BEST	751	CON	TRO	11 8
⊠ EPA					1:	35 Locust	t Avenue		, Au			SIN		/ = 0
Ø DOLWD	Amend				City	State, Zip	Code		The state of the s	****	und same to the t	- Annual Control	-	
□ DHSS		ment #_		-			ch, NJ 07764							
DCA (NJAC 5:23-8)	☐ Emerge justifica		cludir	ıg		e of Conta			Telephon	a Numb	or			
(10/10 0.20 0)	☐ Cancell					ian Kees	<del>7</del> 7.73		relebilon	ie iamini	<i>Y</i> =1			
	1-						NFORMATION				-			
Name of Facility Where A	Abatement is	Taking	Plac	e (3)	Γ/	ACILIT I	NFORWATION	Type of Facility	(4)	-			_	
Frank Antonides El				0 (0)				School (K-12						
Street Address	- Indition y							Subchapter 8	., 3 (Other tha	n K-12)				
135 Locust Avenue								Other (i.e., pr	rivate and c			uildin	gs,	
City (5)								homes, etc.)						
West Long Branch,	N I 07764							Square Feet	# of Floo	ors	В	ldg. A	(ge	
	NJ 07704										L			
County (6)					Cor	inty Code (	7)(STATE USE ONLY)	Current Use (Pri	or if being o	demolisi	ned)			
Monmouth			Jan 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					School						
Name of Monitoring Firm	Hired by Bui	ilding Ov	wner	(8)	ASCN		Name of Abateme							
TTI Environmental					002	6	AbateTech, I	nc.						
Street Address							Street Address						1.7	
1253 North Church	Street						30 Maple Ave	. PO Box 25						
City, State, Zip Code							City, State, Zip Co	ode						
Moorestown, NJ 080							Lumberton, N	IJ 08048						
Project Manager for Monit	toring Firm			Tele	phone	No.	Telephone No.		License	No.		-	-	
James Guilardi				8	66-840	0088-0	609-265-2107		00529	9				
Start Date (10)		Schedu	led C	omple	tion Da	ate (11)	Name of OSHA M	onitor						
6 /23 / _	17	7	/	7	/	17_	EMSL Analyti	cal						
Occupancy Status During	Abatement (	Check	only o	ne)			Street Address							
☐ Facility Closed/Vacated					ment		200 Route 130	0 North						
☐ Abatement Performed	Outside of N	ormal F	acility	/ Hour	s - Des	scribe	City, State, Zip Co							
Time of Abatement:	AM	PM/		_PM-		AM	Cinnaminson							
Scope of Work (Check all	that apply)			01-2-		-	Olillatillison	, 140 00077						
							☐ Full Conta	ainment with Nega	ative Press	ure				
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf or &gt;260 lf</li></ul>				novati			Mini-Encl	OSTITE WWW.	d 000					
24 = 100 St 01 = 200 II		L	_ Del	molitic	n		☐ Glovebag ⊠ Non-Exer	npted (*) and Non	-Friable Pro	ocedure				
			Is	Locat	on	T		1				atem	ent Ty	vne
Location o				lormal			Description of	.			-	_		1
Asbestos-Containing M		1)		d Sole			stos Containing Mat		Amou		Removal	Repair	Encapsulate	Enclosure
TO BE ABAT IN Facility				odial S		(i.e.	<ul> <li>thermal systems in surfacing, VAT,</li> </ul>	nsulation,	(Specion SF or L		оча	a÷.	sde	nso
(13)		L		(12)			other miscellaneo		01 01 2	. ,	= :		ılatı	re
			Yes	No	N/A			78					(D	
A&B Wing Hallway, 9 o	closets & c	gym [			$\boxtimes$	Pipe Fit	tings		220 to	tal	$\boxtimes$	П	П	П
Storage Closet			<b>A</b>		П		e & Mastic		70 SF	=				-
						1 1001 til	e a mastic		70 31					
		L	]		Ш							Ц	Ш	Ц
lame of Registered Waste	Hauler			1,6000	DEP V		Cubic Yards of	Name of Registe	ered Landfil	II				
AbateTech, Inc.				1	auler II 18750	Secretary server	Waste 40	G.R.O.W.S.	Landfill					
ity, State					10/30		Disposal Date	City, State						
Lumberton, NJ							7/7/17	Tullytown, F	PA					
completed By (Print or Typ	e)	Title					Signature	A		Date	,			_
Gwendolyn Trumbett		1.3,143,834	ratio	ons C	oordi	nator	Olympia (Charles	AA		1	6	8	11	all a second
		Ohe	··au	1113	Joiul	iacoi	1 ( // 11)	VII		1	W	100	. *	2

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															11
Date of Notification (1)			_	2-50-7-				Owner/Operator		; U	L Jl			017	1
6/	8 /	1			D	elbarton l	Hig	h School	/ Jo	b #1	603-4995	Ched	k#92	206	
Agencies Notified  EPA	Type Notif	ication	1		1 23782	et Address 80 Mendh	am	Road		i)	ASBES	TOS			)L &
☑ DOLWD						State, Zip					T-Street reflections	ence & happing a contract of	4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	ASSESS NO.	
☐ DCA	Amenda Emerge			20	4	orristown									
(NJAC 5:23-8)	justifica		riciudii	ig	Nam	e of Contac	ct			Tel	ephone Nu	ımber			
	☐ Cancell				Bi	II Champi	i			A 2350					
					F.A	CILITY IN	NFC	DRMATION					=	V=5/11	
Name of Facility Where A	batement is	Takin	g Plac	e (3)					Type of Facility	(4)					
Delbarton High Sch	ool								School (K-12						
Street Address									Subchapter 8				wildin	ac	
230 Mendham Road									homes, etc.)		and comm	ici ciai i	Juliuli	ıys,	
City (5)									Square Feet	# 0	of Floors	E	Bldg. A	Age	
Morristown, NJ 0796	60														
County (6)					Cou	nty Code (7	7)(S7	TATE USE ONLY)	Current Use (Pri	or if b	eing demo	olished)			
Morris									High School						
Name of Monitoring Firm I		ilding (	Owner	(8)	ASCM		1		ent Contractor (9)						
Detail Associates, Ir	ic.				16-0	0085	_	AbateTech, I	nc.						
Street Address							10000	reet Address							
300 Grand Avenue								30 Maple Ave							
City, State, Zip Code Englewood, NJ 0763	4							ty, State, Zip Co							
Project Manager for Monito				Tale		NI-		Lumberton, N	IJ 08048					-3.57.5	
Stephen Jaraczewsk					phone	100. 1-6708		lephone No.			ense No.				
Start Date (10)		Sched	uled C			ite (11)		609-265-2107 ame of OSHA M		"	00529				
_6_ / _7 /					/		The same	EMSL Analyti							
Occupancy Status During		_						reet Address							
☐ Facility Closed/Vacated					ment			200 Route 130	North						
Abatement Performed (	Outside of N	ormal	Facility	y Hour	s - Des	cribe		y, State, Zip Co							
Time of Abatement: 7A	M- <u>3:30</u> PM/		PM	/	MA			Cinnaminson,							
Scope of Work (Check all t	hat apply)								, 110 00017			-			_
☐ ≥3 sf or ≥3 lf	,		M D.	novati	0.0			Full Conta	ainment with Nega	ative F	Pressure				
≥160 sf or ≥260 lf				molitic					Procedure						
						1		Non-Exen	npted (*) and Non	-Friat	ole Proced	ure			
1				Locat Iorma								Al	atem	ent T	уре
Location of Asbestos-Containing Ma		1)	Use	d Sole	ly by	Asbes	tos	Description of Containing Mate			Amount	Re	Repair	En	E
TO BE ABAT		,		intena odial S	355 3555		, the	ermal systems in	sulation,	(	Specify	Removal	pair	caps	Enclosure
IN Facility (13)			Oust	(12)	Jan:			surfacing, VAT, her miscellaneo		S	F or LF)	<u>a</u>		Encapsulate	ure
1:-7		1	Yes	No	N/A		0.	Tion missionarios	437					te	
Library					$\boxtimes$	Trapsite	Pa	nels )		2	42 SF		П	П	П
Library						Pipe Fitt	<u></u>	- AND		100	4 total			П	
						riperiu	ing	5			4 ioiai				
													Ш	П	
Name of Registered Waste	Hauler			70000	JDEP V	0.75.000		oic Yards of	Name of Registe						
Service Transport				4 7757	auler ID <b>20990</b>	01.000000000000000000000000000000000000	Wa 2		G.R.O.W.S.	Land	lfill				
City, State			history exce					posal Date	City, State						
New Castle, DE							6	/16/17	Tullytown, F	PA					
Completed By (Print or Type		Title						Signature	a A		D	ate	01		
Gwendolyn Trumbett	i	Op	eratio	ons C	oordi	nator		LAL	100			le 1	8	1	Opposite Contraction of the Cont

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Date of Notification (1)		11.77.				ng Owner/Opera	ator (	(2)		JUN	13	201	7
6 /7	/17			D	elbarton l	High School		/ Jol	#1603-4995	Che	k#92	206	
Agencies Notified Type No	tification			Stre	et Address				ASB	ESTO	SCC	MTI	BOI
				23	30 Mendh	am Road			7.03		ENSI		IOL
☑ DOLWD ☐ Amer				City	, State, Zip	Code						***************************************	et.der de
	dment #_			100000		, NJ 07960							
	gency (incoation)	siuding	9	_	ne of Contac				Telephone No	ımber			_
Cance				В	ill Champi	İ			Totobrione 14	arribor			
						VFORMATION			L		-		
Name of Facility Where Abatement	ie Takina	Place	(3)	г/	ACILITY II	NFURINATION	4	T of F 184 . /	1				
Delbarton High School	is raking	1 lace	(3)				16	Type of Facility (	5.50				
Street Address							_	Subchapter 8		12)			
230 Mendham Road								Other (i.e., pri			buildin	ıgs,	
City (5)								homes, etc.)	T-11				
Morristown, NJ 07960								Square Feet	# of Floors	1	Bldg. A	Age	
				10				_					
County (6) Morris				Cor	inty Code (7	)(STATE USE ONL	-Y)	Current Use (Price	or if being demo	olished)			
								High School					
Name of Monitoring Firm Hired by B	uilding Ov	vner (	8)	ASCN		1		nt Contractor (9)					
Detail Associates, Inc.				16-	0085	AbateTech	h, In	ic.					
Street Address						Street Address	S						
300 Grand Avenue						30 Maple A	Ave.	PO Box 25					
City, State, Zip Code						City, State, Zip	Co	de					
Englewood, NJ 07631						Lumbertor	n, N	J 08048					
Project Manager for Monitoring Firm			Tele	ephone	No.	Telephone No.			License No.				
Stephen Jaraczewski			2	01-569	9-6708	609-265-21	107		00529				
Start Date (10)	Schedul				5.0 (8)	Name of OSHA	A Mc	onitor				77.	
6 /7 /17	6	_ /	8	/	17	EMSL Ana	lytic	cal					
Occupancy Status During Abatement	(Check o	only or	ne)			Street Address	;						
☐ Facility Closed/Vacated During Er	ntire Perio	d of A	bate	ment		200 Route	130	North					
Abatement Performed Outside of	Normal F	acility	Hou	s - Des	scribe	City, State, Zip	Coc	de					
Time of Abatement: 7AM-3:30PM	//F	PM		AM		Cinnamins							
Scope of Work (Check all that apply)													
≥3 sf or ≥3 lf	_	7 -				☐ Full C	onta	inment with Nega	tive Pressure				
\(\sum_{\geq} \geq 160 \text{ sf or \geq_260 lf}\)	-	Ren Dem				Mini-E     Glovel		sure Procedure					
		1 Dell	ionac	/11				pted (*) and Non-	Friable Proced	lure			
		ls L	ocat	ion						A	oatem	ent T	vpe
Location of			orma			Description					1	1	Ť
Asbestos-Containing Material (AC TO BE ABATED	M)	Used Main	Sole	nce/	Asbes	tos Containing I	Mate	erial (ACM)	Amount	Rem	Repair	nce	ncl
IN Facility		Custo	dial 8		(i.e.	thermal system surfacing, VA			(Specify SF or LF)	Remova	≝.	psu	Enclosure
(13)	_		(12)			other miscella	neou	us)	0. 0. 2. /			Encapsulate	re
	)	/es	No	N/A								ω.	
Library				$\boxtimes$	Transite	Pipe			242 SF		П	П	П
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					ripe ritt	iligs			24 total			Ш	Ш
		]											
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Name of Registered Waste Hauler				JDEP V		Cubic Yards of	T	Name of Register	red Landfill		1—	_	
Service Transport			H	auler ID	No.	Waste		G.R.O.W.S. L					
City, State				20990		20 Disposal Date	-						George Co.
New Castle, DE					1	6/16/17		City, State	٨				
	T-7/1							Tullytown, P.					
Completed By (Print or Type)	Title					Signature	30	10		ate	1		1
Gwendolyn Trumbetti	Ope	ratio	ns C	oordi	nator	IIN	11	/V.J		W	1	1	

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Date of Notification (1)	00	-		I Mari	(5 11			(0)			N 1	3	2017
	8 / _	17		100000000000000000000000000000000000000		_	Owner/Operator  ublic Schools	(2) / Job #1703-5	122 Check#		130 31		LUI;
Agencies Notified	Type Notificati	on		Stre	et Address	į.			Ā	SBES	ros	COI	VTRC
⊠ EPA				13	3 Augusta	a St	reet		-		ICE	<u>VISIN</u>	JG
⊠ DOLWD	Amended			City	State, Zip	Coc	de						
☑ DHSS	Amendmen		_	-	mesburg								
□ DCA     (NJAC 5:23-8)	☐ Emergency justification		ng		ne of Conta				Telephone N	umbor			
,	Cancellation	5.0							Telephone 14	umber			
				F	ACILITY II	NFC	DRMATION						
Name of Facility Where A	batement is Tak	king Plac	ce (3)					Type of Facility	(4)				
JFK ES								School (K-12					
Street Address								Subchapter 8			wildir	as	
28 Front Street								homes, etc.)		noroidi i	unun	95,	
City (5)		1220						Square Feet	# of Floors	E	Bldg. A	Age	
Jamesburg, NJ 0883	31												
County (6)				Cou	inty Code (	7)(S7	TATE USE ONLY)	Current Use (Pri	or if being dem	olished)			
Middlesex								School					
Name of Monitoring Firm I	Hired by Building	g Owner	(8)	ASCN	l No.	N	ame of Abateme	ent Contractor (9)					
TTI Environmental							AbateTech, In	nc.					
Street Address						St	reet Address	-					
1253 North Church 8	Street						30 Maple Ave	. PO Box 25					
City, State, Zip Code						Ci	ty, State, Zip Co	ode					-
Moorestown, NJ 080	57						Lumberton, N	IJ 08048					
Project Manager for Monito	oring Firm		Tele	ephone	No.	Te	elephone No.		License No.	3		7.5	
Mike Stocku			6	09-304	-3969	1	609-265-2107		00529				
Start Date (10)	Sche	eduled (	Comple	etion Da	ate (11)	Na	ame of OSHA M	onitor					$\overline{}$
6/26/	17	7_ /	1 _ 10	_ /	17	1	EMSL Analyti	cal					
Occupancy Status During /	Abatement (Che	ck only	one)			Str	reet Address			-55/-2			
☐ Facility Closed/Vacated						1	200 Route 130	0 North					
Abatement Performed C	Outside of Norma	al Facilit	y Hou	rs - Des	cribe	Cit	y, State, Zip Co	de			111111111111111111111111111111111111111	11/200	
Time of Abatement:	AMF	PM/	PM-		AM	100000000000000000000000000000000000000	Cinnaminson,						
Scope of Work (Check all to	hat apply)						vali						-
≥3 sf or ≥3 if		⊠ Re	novati	on				ainment with Nega	ative Pressure				
			molitic				☐ Glovebag	Procedure					
							☐ Non-Exen	npted (*) and Non	-Friable Proced	dure			
1			Locat							Ab	atem	ent T	уре
Location of Asbestos-Containing Ma			d Sole		Aches	etos	Description of Containing Mate		Amount	Re	Re	四四	四
TO BE ABATE		100000	intena		(i.e.	, the	ermal systems in	nsulation,	(Specify	Removal	Repair	cap	Clos
IN Facility (13)		Cus	todial ( (12)	Staff?			surfacing, VAT,		SF or LF)	val	-	Encapsulate	Enclosure
(13)		Yes	No	N/A	1	ot	her miscellaneo	us)				ate	
Boiler Room		$\boxtimes$			Boiler Ir	ısu	lation		250 SF		П	П	П
Boiler Room		$\boxtimes$			Insulation	on b	otw. Boiler Ri	bs	200 SF				
Boiler Room					Old Wire	e In	sulation		500 LF		П		
			П										
Name of Registered Waste	Hauler		N	JDEP V	Vaste T	Cut	oic Yards of	Name of Registe	red Landfill			П	ш
AbateTech, Inc.			H	auler ID	No.	Wa	ste	G.R.O.W.S.					
City, State				18750			oosal Date	City, State					-
Lumberton, NJ							/10/17	Tullytown, P	PA				
Completed By (Print or Type	)   Titl	e					Signature	3		Date .	2		
Gwendolyn Trumbetti	C	perati	ons C	oordi	nator		Con	15		W	8//	7	

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	UN 1 / Job :	UN 132 / Job #170	UN 13 2017 / Job #1704-51	UN 1 3 2017 / Job #1704-5141

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Date of Notification (1)								Owner/Operator	17. 20	The state of the s	JU			20	1 1
	8 /	1	7		H	PF VIII	700	Union LLC	c/o Hampsh	ire Compan	nies /	Jol	#1	704	-5141
Agencies Notified	Type Noti	fication	1		Stre	et Address	36		PG 1 of 2		SBES	TO	2 07	TIAC	DOL
⊠ EPA	☐ Initial				22	2 Maple A	leve	nue		A				ING	
⊠ DOLWD			ша		City	State, Zip	Cod	de		Collect State of the Particular State of the		- Name of the last	-		APTIMETICAL PROPERTY.
☐ DCA	Amend			na	M	orristowi	n, N	J 07960							
(NJAC 5:23-8)	justifica		riciadi	ng		ne of Conta	100			Telephone	Numbe	er			
	☐ Cancel	lation			Н	oon Lee									
					F	ACILITY	NFO	ORMATION		_					
Name of Facility Where A	batement is	Takin	g Plac	ce (3)			-		Type of Facilit	v (4)		_			
Former Pharmaceur			250	20050					School (K-						
Street Address									☐ Subchapte	r 8 (Other than		9760	507700		
700 Union Blvd.									Other (i.e., homes, etc		mmerci	al bu	uildin	gs,	
City (5)									Square Feet	# of Floor	s	TBI	dg. A	ae	
Totowa, NJ 07512	and the state of the									,, 0, 1,00,			<b>u</b> g. <i>r</i>	.90	
County (6)					Cou	inty Code (	(7)(S	TATE USE ONLY)	Current Use (F		emolishe	ed)			
Passaic				**					Private Bu	1000					
Name of Monitoring Firm		ilding (	Owner	(8)	ASCN				ent Contractor (9	9)					
Detail Associates, Ir	1C.				16-	0085		AbateTech, I	nc.						
Street Address							St	treet Address							
300 Grand Avenue							1	30 Maple Ave							
City, State, Zip Code					1		1	ty, State, Zip Co							
Englewood, NJ 0763					200		1	Lumberton, N	J 08048						
Project Manager for Monito				10.50	ephone		Te	elephone No.		License N	0.				
Stephen Jaraczewsk			10			-6708		609-265-2107		00529					
Start Date (10)					etion Da 1 /	ate (11)	D	ame of OSHA M EMSL Analyti					SCHIEG.		
Occupancy Status During							1	/							
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Time of Abatement:	AM	PN	N	PM		AM		iy, State, Zip Co Cinnaminson							
Scope of Work (Check all t	hat apply)				200	***		Sillialiiii50ii	, 143 00077						
	nat apply)							☐ Full Cont	ainment with Ne	gative Pressur	e				
<ul> <li>≥3 sf or ≥3 lf</li> <li>≥160 sf or ≥260 lf</li> </ul>			⊠ Re						osure	<del>-</del>					
23 - 100 31 01 - 200 II			Пре	monu	OH				Procedure	on-Friable Proc	edure				
			Is	Loca	tion						T	Aha	tem	ent T	VDE
Location of				Norma				Description of			-		_		
Asbestos-Containing Ma		1)		d Sol	ely by			Containing Mat		Amount		ζem	Repair	nca	ncl
TO BE ABATI IN Facility		- 1		todial	Staff?	(I.e		ermal systems in surfacing, VAT,		(Specify SF or LF	,	Remova	air	squ	Enclosure
(13)				(12)			ot	her miscellaned	ous)	01 01 L1	'	_		Encapsulate	6
			Yes	No	N/A									9	
Throughout						Elbows				1,000 tot	al	X			
Atrium Area						Plaster				5,000 SI	F	X			
1 <sup>st</sup> Floor					$\boxtimes$	Single L	aye	er Floor tile &	Mastic	7,810 SF	=	X			
2 <sup>nd</sup> Floor					$\boxtimes$	Double	Lay	er Floor tile 8	& Mastic	7,875 SF	=	X			
Name of Registered Waste	Hauler			N	JDEP V	Vaste	Cul	oic Yards of	Name of Regis	stered Landfill					$\neg$
AbateTech, Inc.				Н	auler ID		Wa		G.R.O.W.S						
City, State					18750			oposal Date	City, State						-
Lumberton, NJ								/31/17	Tullytown,	PA					
Completed By (Print or Type	e)	Title						Signature	,	0.7.0.70.70 	Data		i a		_
Gwendolyn Trumbetti	177		erati	one (	Coordi	nator		Signature	. +		Date	CALCARIAN .	Ç I	17	.
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#### NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1 Name of Building Owner/Operator (2) 8 17 HPF VIII 700 Union LLC/ Job #1704-5141 Check #9216 PG 2 of 2 Agencies Notified Type Notification Street Address ESTOS CONTROL & **⊠** EPA ☐ Initial 22 Maple Ave. **!JCENSING ⊠** DOLWD M Amended City, State, Zip Code **⊠** DHSS Amendment # Morristown, NJ 07960 ☐ Emergency (including □ DCA (NJAC 5:23-8) justification) Name of Contact Telephone Number ☐ Cancellation Hoon Lee **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Former Pharmaceutical Building ☐ School (K-12) ☐ Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 700 Union Blvd. homes, etc.) City (5) Square Feet # of Floors Bldg. Age Totowa, NJ 07512 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Passaic Private Building Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Detail Associates, Inc. AbateTech, Inc. Street Address Street Address 300 Grand Avenue 30 Maple Ave. PO Box 25 City, State, Zip Code City, State, Zip Code Englewood, NJ 07631 Lumberton, NJ 08048 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Stephen Jaraczewski 201-569-6708 609-265-2107 00529 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 6 / 19 / 17 7 / 31 / 17 **EMSL Analytical** Occupancy Status During Abatement (Check only one) Street Address □ Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: \_\_\_\_AM-\_\_\_PM/\_\_ PM-Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ≥3 sf or >3 If Mini-Enclosure ≥160 sf or ≥260 If □ Demolition ☐ Glovebag Procedure Non-Exempted (\*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Removal Repair Encapsulate Enclosure Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Hallway П X Pipe Insulation 900 LF X 1st Floor Mechanical Room П M Tank Insulation 250 SF X П П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. AbateTech, Inc. Waste G.R.O.W.S. Landfill 18750 40 City, State Disposal Date City, State Lumberton, NJ 7/31/17 Tullytown, PA Completed By (Print or Type) Signature Gwendolyn Trumbetti Operations Coordinator

State of New Jersey

(hac)	$\mathcal{I}$	D	IOI				NC 8:60 and 5:10			0 6	<u> </u>	U	
Date of Notification (1)					Name	of Buildin	g Owner/Operator (	2)		11111	1 2	201	7
06/	09 / _	17					Services	2)		JUN	J	201	
Agencies Notified	Type Notifica	ation			Street	Address			ASPE	STOS	00	NITE	201
⊠ EPA					244	5 Kuser	Road		ASDE	LICE			101
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☑ DOH ☐ DCA	Amendme		uding		Har	nilton, N	J 08690						
(NJAC 5:23-8)	justification		uuiiig		Name	of Contac	t		Telephone Nun	nber			$\neg$
	☐ Cancellat	tion			Gre	g Schulf	z			13			
					FA	CILITY IN	FORMATION		<b>-</b> 22				$\dashv$
Name of Facility Where A	batement is T	Taking F	Place	(3)		0.2	ii Orani trioit	Type of Facility	(4)				
Commercial				9 5				School (K-12	, T. (1984)				
Street Address								☐ Subchapter	3 (Other than K-1)				
1041 Route 206 Nor	th							M Other (i.e., p homes, etc.)	rivate and comme	ercial bu	ilding	s,	
City (5)								Square Feet	# of Floors	Blo	lg. Ag	ne er	-
Bordentown								oquaio, oot	" 611 16616		.9	,,,	
County (6)					Cour	ity Code (7	)(STATE USE ONLY)	Current Use (Pr	I ior if being demoli	ished)			-
Burlington						,							
Name of Monitoring Firm	Hired by Build	ding Ow	vner (	8)	ASCM	No.	Name of Abateme	l ent Contractor (9)	3	-			$\dashv$
Bio Terra Solutions								NAGEMENT L					
Street Address							Street Address					_	$\dashv$
P.O. Box 1224							27 Outwater	Lane					
City, State, Zip Code							City, State, Zip Co	ode					$\neg$
Union, NJ							Garfield, NJ						
Project Manager for Moni	toring Firm			Tele	phone	No.	Telephone No.		License No.				$\neg$
Rick Estaquio					3-494		973-928-4888		1188				
Start Date (10)	S	Schedul	led C	omple	tion Da	te (11)	Name of OSHA M	Ionitor					$\neg$
06 /19 /	17	07	/	19	_ /	17	ALL PRO MA	NAGEMENT L	LC				
Occupancy Status During	Abatement (0	Check o	only o	ne)			Street Address						$\dashv$
□ Facility Closed/Vacate					ment		27 Outwater	Lane					
☐ Abatement Performed	Outside of No	ormal F	acility	Hour	s - Des	cribe	City, State, Zip Co	ode					$\dashv$
Time of Abatement: _	AM	PM/		_PM-		AM	Garfield, NJ						
Scope of Work (Check all	that apply)						200 market Control of the Participant A						-
≥3 sf or ≥3 If			7 00	novati				ainment with Neg	gative Pressure				
\( \frac{1}{2} \) \( \frac{1} \) \( \frac{1} \) \( \frac{1}{2} \) \( \frac{1}{2} \)		Ľ		molitic			☐ Mini-Enc ☐ Glovebag	NT T T T N T N T N T N T N T N T N T N					
			10000						n-Friable Procedu	ure			
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TO BE ABA	TED	"		intena			., thermal systems		(Specify	Removal	Repair	cap	clos
IN Facilit	У		Cust	(12)	Staff?		surfacing, VAT,		SF or LF)	Val	-	Encapsulate	Enclosure
(13)			Yes	No	N/A	1	other miscellane	ous)		1		ate	
Roof		1				Elachin	g/Vent Caulking		4015	12			
11001						FIASIIII	ig/vent Cauking		42 LF		Ш		Ш
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All Pro Managemen				131	lauler II	O No.	Waste		ehem Landfill				
City, State	\$\$/				00348	360	As Needed Disposal Date	City, State					$\overline{}$
Garfield, NJ							TBD	Bethlehem	. DA				
		770					_ ^	Detrilenen		Ţ			
Completed By (Print or Ty Allen Monchik	/pe)	Title		8.7-			Signature	0 10		ate	21	10	
Allen Wonchik		Pro	oject	Man	ager		1000	~V		010	ri/	1/	

State of New Jersey

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Date of Notification (1) 6/9/17			Name Lorra	of Building O	wner/Operato	or (2)		The state of the s	JUN	1 3	_20	1/_
Agencies Notified Type Notification	on		Street	Address		-		ASB	EST	SC	ONT	RO
≥ EPA Initial								1			ING	
DEP Amended Amendme	int #			tate, Zip Cod								
X Emergence	y (includin	g		mus, NJ 07	652							
DOH justification			100	of Contact ine Coope								
				CILITY INFOR				_				
Name of Facility Where Abatement is Tak	ing Place	(3)	FAC	JILIT INFOR	RWATION	Tvr	oe of Facility (	4)	-			
Residential Home							School (K-1	no <del>d</del> ni				
Street Address							Subchapter	8 (Other than K-	-12)			
						×	Other (i.e. petc.)	rivate & comme	rcial bu	ildings	, hom	ies,
City (5) Paramus	1					Squ	Jare Feet	# of Floors	T	Bldg.	Age	
County (6)						27	00	2	- 1	65+/-	-	
Bergen			County	Code (7) USE ONLY)		Cur	rent Use (Prid	or if being demol	ished)			
Name of Monitoring Firm Hired by Building	- 0			- 53 - 5		1	sidential H					
Project Manager	g Owner (8	5)	ASC	M No.			batement Cor					
Street Address							es Abateme	ent 				
Supplemental and the supplemen					Street		ess Iidland Ave		-,			
City, State, Zip Code												
900 W 1000 000000					Sade	otate, dle F	Zip Code Brook, NJ 0	7663				
Project Manager for Monitoring Firm		T	Telepho	one No.	Telepi				N-	40000		
			•				3184	License 01305	NO.			
Start Date (10) 6/12/17			mpletion	Date (11)	Name	of OS	SHA Monitor					
	6/15/1			*								
Occupancy Status During Abatement (Che					Street	Addr	ess					
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor	Period of	Abater	nent									
Other – Describe: 8 A.M to 4 P.M	mai Facilit	y Hour	S		City, S	state,	Zip Code					
Scope of Work (Check All That Apply)												
23 sf or ≥3 lf	×	<b></b>			150	7						
≥160 sf or ≥260 lf	Parameter 1	Renova Demoli			×	9 1	ull Containme ini-Enclosure	nt with Negative	Pressu	ire		
	2.000					G	lovebag Proc	edure				
	T			T		J N	on-Exempted	(*) and Non-Fria	ble Pro		and the same	
Location of	100	S Locat Normal	117127-								ement /pe	t
Asbestos-Containing Material (ACM)	Use	ed Sole	ly by	Asbestos	Description Containing N	Of Istori	al (ACM)	Amount		Γ.	T	
TO BE ABATED In Facility		intena todial s		(i.e. the	ermal systems	s insu	lation,	(Specify	Z.	7	Enc	En
ı (13)		(12)			surfacing, VA her miscellan		,	SF or LF)	Remova	Repair	aps	Enclosure
	Yes	No	N/A				,		val	=	Encapsulate	ure
1st Fl of Home	-		1 11/1									
TOTAL OF FIGURE		X		P	opcorn Ce	iling		285 SF	x			
Name of Registered Waste Hauler			JDEP W	회사하다 시 : (8)	ubic Yards		Name of R	egistered Landfi				
Newark Carting		1000000	auler ID 1509		Waste CU		The second second	entral Sanitar		dfill		
City, State			.000		isposal Date				, -ui	- IIII		
Newark, NJ					SD		City, State Pen Argy	/i, PA 18072				
Completed by	Title				Signature	- /	111	-	ate			
Richard Cristofol	Presi	dent				£	1		9/17			

C E Mint Form-

								-				Print Fe
Ch1140		NOTII	FICATIO	State of New Je N OF ASBEST at to NJAC 8:60	OS ABATE	EMEN 20)	IT	B	EG	E		追
Date of Notification (1) 6/9/17				of Building Owr ry Ahearn	ner/Operato	or (2)			JUN	13	30	7
Agencies Notified Type Notificati  EPA Initial Amended  Agencies Notified Type Notificati				Address tate, Zip Code			i e	AS	SBESTO	OS C	ONT	ROL 8
	cy (includin	g	West	wood, NJ 07	675			22-50	=			
DOH justification Cancellat				of Contact y Ahearn				Telephor	ne Numbe	er		
Name of Facility Where Abatement is Ta	king Place	(3)	FAC	ILITY INFORM	IATION	Typ	e of Facility (	4)		-		
Residential Home		(0)				Тур	School (K-1	50.40 54.00				
Street Address						×	Subchapter	8 (Other tha rivate & com	n K-12) nmercial b	uildin	gs, hoi	nes,
City (5) Westwood			=0 =00 =00			Squ 245	are Feet 50	# of Floor	rs	Bldg	j. Age +/-	
County (6) Bergen			County (STATE	Code (7) USE ONLY)		Cur	rent Use (Prid sidential H	or if being de ome	molished	)		
Name of Monitoring Firm Hired by Buildin Project Manager	ng Owner (8	3)	ASCI	M No.			patement Con es Abateme					
Street Address					Street 280		ess lidland Ave					
City, State, Zip Code							Zip Code Frook, NJ 0	7663				
Project Manager for Monitoring Firm			Telepho	ne No.	Teleph 201-	none l	No.		nse No.			
Start Date (10) 6/19/17	Schedu 6/22/1		mpletion	Date (11)	Name	of OS	SHA Monitor					
Occupancy Status During Abatement (Ch	eck Only O	ne)			Street	Addre	ess					-
Facility Closed/Vacated During Entire Abatement Performed Outside of No Other – Describe: 8 A.M to 4 P.M	e Period of rmal Facilit	Abaten y Hours	nent s		City, S	state, 2	Zip Code					
Scope of Work (Check All That Apply)												
≥3 sf or ≥3 lf < ≥160 sf or ≥260 lf		Renova Demolit			×	Mi	ull Containme ini-Enclosure lovebag Proco on-Exempted	edure			ure	
Location of	10	Locati								Ab	atemer Type	nt
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Use Ma	ed Sole intenar todial S (12)	ly by nce/	Asbestos C (i.e. thern su	Description ontaining Manal systems rfacing, VA er miscellan	lateria s insul T, or	lation,	Amount (Specify SF or LF	/   2		1 9	Enclosure
	Yes	No	N/A						<u> </u>	-	ate	Ге
Basement		Х		Va	t/Ceiling	Tile		121 SF	x			
Stairs 1st/2nd fl		Х			VAT			86 SF				
15VZIIU II		X		VA	T/Ceiling	Tile		91 SF	x	-		
ame of Registered Waste Hauler ewark Carting		Н	JDEP W auler ID 1509	No. of V	oic Yards Vaste		Marine and the second	egistered La entral San		ndfil		
ity, State		02	5003	3 C	oosal Date		City, State	ai oai	y LC	a ruiii	-	
ewark, NJ				TBI				/l, PA 180	72			
completed by ichard Cristofol	Title Presi	dent			Signature		11		Date 6/0/1	7		

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

B & G proj. #:

2017-72

Sub chapter 8 Project

•						Sub chapt	er 8	Project	_	Check	# 8426				_	
Date of Notification	1 (1)	Î	Name	of Build	ding Own	er/Operator (2)	)				E @	R	П	7\/7	e i	-
10 16 1/10 19	1/1171		Bay	onne	Board	of Education	1				E C	<u>E</u>	<u>U</u>	W		
Agencies Notified EPA	Type Notifica	ation	Street	Address	S					III	-				1	-
☐ DEP	X Initial		100000000000000000000000000000000000000	Aven						The second secon	JUI	V 1	3 2	017	1	1
X DOL	☐ Amend	dment	City, St		p Code , NJ 07	002				1					-	
▼ DOH			Name o			002				I Folombor	SREST	080	CON	TRO	1 2	
□ DCA	☐ Cancel	lation	1			/O // N /				Telephor	ie ivuitipe	CEN	SIN	<u>i</u>		
			Lec	) J SII	nitn, Jr.	/ Scott Nola	an			=		2				-
					FAC	ILITY INFORM	ATIO	N								
Name of facility wh	nere abatement	is taking	place (3)	)					Тур	e of Facility	(4) al (K - 12	)				
Horace Mann	School #6										apter 8 (		han K	(-12)		
Street Address										Other	(Private/0	Comme		,		
25 West 38th	Street								Sai		Homes,		B	ldg. Ag	ne.	_
City (5)		C	ounty (6)				Co	unty Code (7)	Joqu	Jaie i eet	# 011 100	13		ug. / tg	90	
Bayonne, NJ		١,	Hudson				(St	ate use only)	Cu	rrent Use (P	rior if bei	ng den	nolish	ed)		_
Name of Monitoring								TNI	-	hool						=
T & M Assoc	The second secon	blug. O	mer (o)			ASCM No. 145		Name of Abatemen								
Street Address						140	-	B & G Restora	ation, li	nc.					_	=
11 Tindall Ro	oad							105 Ryerson	Road							
City, State, Zip Code Middletown,								City, State, Zip Code								_
Project Manager for				Inhaa	ne Numb		_	Lincoln Park,		/035	117-2	N				_
Kevin Burns	Worldoning Firm	11			2-539-			(973)696-686			License 0(	378	ber			
Scheduled Start Dat	te (10)	ISch	ed. Com				_	Name of OSHA Mor	nitor							-
06/24/2017	(10)		6/27/20		Date (11	7.		B & G Restora	ation, I	nc.						_
Occupancy Status D	Ouring Abateme						_	Street Address 105 Ryerson F	Pood							
Facility closed					ent.			City, State, Zip Code								=
Abatement pe Describe:	rformed outside	of norm	al facility	hours-												
Other-Describ	ne:						-	Lincoln Park, I	NJ 070	)35						
Scope of Work (che	eck all that appl	y)					_				2114472					
☐ Demolition	X	Renova	tion				∐ F	full Containment w/ne	egative p	oressure [	Glove	oag pr	ocedu	ıre		
× >3 sf or >3 lf		_	or <u>&gt;</u> 260 If				X I	Mini-enclosure			Non-fi		proce	dure		
Location of asbestos-cont	lainina		tion norm			_				A		R	R	E n	E	
material to be		staff(12				Descriptio material (A		sbestos-containing		Amount (Specify S	F or	m	p	С	n	
abated in facil	lity (13)	Yes	No	0	N/A	,	,			LF)		V	i	a p	L	
pasement girls r	estroom		1	$\dashv$	X	pipe insula	tion	above drop ceilin	a	70 If	U-1027 II	e		П	П	-
			je													-
																_
																-
Pagistared Wests III	auler .	L	JL	ular ID/	10	ibic Yards of W	lacto	Name of Decists	11 67 2 6	1						_
Registered Waste Ha B & G Restorati		MJ	DEP Hau 19563			2	asie	Name of Registered Tullytown			covery	Cent	er	20		
City, State	1			Dis	sposal Da			City, State		A STATE OF THE PARTY OF THE PAR						•
Lincoln Park, N				L_	06/2	7/2017 Signature		Tullytown,	PA		Lo			1.		
Completed by (Print	or Type)	Title Secret	ary/Tre	asuro		Signature	8	Cordana Luna			Date 06/00	1/201	7			

B & G proj. #: 2017-71

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

	E	C	E		$\mathbb{V}$	E	n
Check	#	JIIN	_1	3	2017	_	
-		with the second second			NTR		

									1	0 1	UTI	- IL
Date of Notification (1)	11	Name of Bu	uilding Owr	ner/Operator (2)	)		last 850					
0 6 1/0 6 1/1 7		Jerome						ASBEST	20	201	ITRO	1 8
Agencies Notified   Type Notific	ation	Street Addr						ASDEST	CEN	15117	G	
EPA   X Initial							N 64.4. 419	- L. C. CHESTING PROGRAMME	No. of Concession, Name of Street, or other Persons, Name of Street, or ot	T. Marie L. A.		
DEP DEP	11	City, State,	Zip Code					-				
X DOL Amen	dment		ield, NJ	07081								
X DOH	and the latest the lat	lame of Co	ntact				Telephor	ne Numbe	٢	economic di		
☐ DCA ☐ Cance	llation	Jerome	e Casey				1					
			FAC	ILITY INFORM	ATIO	N						
Name of facility where abatement	is taking pl	ace (3)					Type of Facility					
Estate of Mary Ellen McC	afferty							ol (K - 12)		han k	( 12)	
Street Address							Jan. 100 Jan	apter 8 (C (Private/C			12)	
							Bldgs. Square Feet	/Homes, e # of Floor		В	ldg. Ag	16
City (5)	Cou	nty (6)			Co	unty Code (7)		11 01 1 1001			-9.7.9	
Springfield, NJ 07081	Ur	ion			(Sta	ate use only)	Current Use (P	rior if bein	g den	nolish	ed)	
Name of Monitoring Firm Hired by	Bldg. Own	er (8)		ASCM No.	-1	Name of Abatement C	residential ontractor (9)		_			
				n/a	-	B & G Restoration	55.5					
Street Address	-				=	Street Address				_		
						105 Ryerson Ro	ad	- North Street Color	No. of Local Division in			
City, State, Zip Code						City, State, Zip Code Lincoln Park, N	107035					
Project Manager for Monitoring Fire	n	l Ph	one Numb	ner .	-	Telephone Number	3 07 000	License	Numi	er		
, , , , , , , , , , , , , , , , , , , ,	5.5	1	ionio manie	,01		(973)696-6869		1	378			
Scheduled Start Date (10)	Sched	d. Completion	on Date (1	1)	-	Name of OSHA Monito						
06/19/2017	06/	20/2017			1	B & G Restoration	on, Inc.					_
Occupancy Status During Abateme	nt (Check o	only one)				105 Ryerson Roa	ad					
Facility closed/vacated during						City, State, Zip Code						
Abatement performed outside Describe:	e of normal	facility hour	rs-		_	Linnala Davis N.I.	07005					
Other-Describe:					-	Lincoln Park, NJ	07035				13	
Scope of Work (check all that app	50 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							_				
	Renovatio					Full Containment w/nega	tive pressure	Gloveb				
★ >3 sf or >3 if	≥160 sf or				X	Mini-enclosure	L	Non-fri	, , ,	roce	dure	
Location of asbestos-containing		n normally in normally in normally in					Amount		e e	e e	E n	Ε
material to be	staff(12)			Description material (A		sbestos-containing	(Specify S	For	m o	p a	C	n C
abated in facility (13)	Yes	No	N/A	100000000000000000000000000000000000000			LF)		v e	i	a p	L
pasement			X	pipe insula	tion		57 lf		X			
					Manager 1							
Registered Waste Hauler	L	Dillantari	0# 10	ubic Yards of W	lasta	There of Besistered L	- 460			Ц		
B & G Restoration, Inc.		P Hauler I 19563		1	asie	The second secon	esource & Re	covery (	Cent	er		
City, State Lincoln Park, NJ			Disposal D 06/2	ate 20/2017		City, State Tullytown, PA	A					
Completed by (Print @r Type)	Title			Signature	_			Date				
Gordana Luna	Secreta	ry/Treasu	rer			Gordana Luna		06/09	/201	7		

Janes	1	100	1	11	1111	1
1000			1	11	WI	
11 11	1	W	1	11	U	1
11 11	-			-	-	-

Date of Notification (1)					Name	of Building	g Owner/Operator	(2)		-			
04/	12 /	17					Department of	2025	Protection	JUN	13	201	17
Agencies Notified	Type Notifica	ation			Street	Address							
⊠ EPA	☐ Initial				401	East Sta	ate Street, PO B	ox 420	ASF	BESTO	5 CC	INT	ROL
⊠ DOLWD					City, S	State, Zip C	Code		7.02	LIG			
☑ DOH □ DCA	Amendme		•		Tre	nton, NJ	08625						
(NJAC 5:23-8)	justification	on)	Juding		Name	of Contac	t		Telephone Nu	mber			-
,	☐ Cancellat				Jos	eph Maid	o		1				
					FA	CILITY IN	FORMATION		10				
Name of Facility Where A	Abatement is T	aking	Place	(3)				Type of Facility					
Residential								School (K-12	2) 8 (Other than K-	12)			
Street Address									rivate and comm		ilding	s,	
City (5)			-					Square Feet	# of Floors	I RI	dg. A	10	
Mansfield Township	р							Oquale 1 eet	# 01 1 10015	Di	ig. A	ge	
County (6)					Cour	ty Code (7	)(STATE USE ONLY)	Current Use (Pr	for if being demo	olished)			
Warren													
Name of Monitoring Firm	Hired by Build	ling O	wner (	8)	ASCM	No.	Name of Abatem	ent Contractor (9)					
USA Environmenta	l Manageme	nt			0011	2	ALL PRO MA	NAGEMENT L	LC				
Street Address							Street Address						
344 West State Stre	eet						27 Outwater	Lane					
City, State, Zip Code							City, State, Zip C	ode					
Trenton, NJ 08601							Garfield, NJ	07026					
Project Manager for Moni	itoring Firm			Tele	ephone	No.	Telephone No.		License No.				
					09-656		973-928-4888	3	1188				
Start Date (10)					tion Da		Name of OSHA N						
04 /24 /					_ / -	1/_	ALL PRO MA	NAGEMENT L	LC				
Occupancy Status During	****						Street Address						
☐ Facility Closed/Vacate							27 Outwater						
Abatement Performed Time of Abatement: _							City, State, Zip C Garfield, NJ						
Scope of Work (Check all	I that apply)								8 83				
☐ ≥3 sf or ≥3 lf		1	Re	novat	ion		☐ Full Con   Mini-End	tainment with Neg	gative Pressure				
≥160 sf or ≥260 lf			☑ De				☐ Gloveba	g Procedure					
							⊠ Non-Exe	empted (*) and No	n-Friable Proce	dure			
Location	of			Loca lorma			Description	.f		Ab	_	ent T	уре
Asbestos-Containing		)	Use	d Sol	ely by	Asbe	Description of stos Containing Ma		Amount	Re	Repair	En	Enc
TO BE ABA					ance/ Staff?		., thermal systems	insulation,	(Specify	Removal	pair	Saps	Enclosure
IN Facilii (13)	ty		000	(12)			surfacing, VAT other miscellane		SF or LF)	<u>m</u>		Encapsulate	ure
			Yes	No	N/A				7			ė	
101 and 204					$\boxtimes$	Multi-la	yered resilient t	loor cover	336 SF				
002 and 005					$\boxtimes$	Flue Ce	ment		8 SF				
001,004,101,102,103,	104				$\boxtimes$	Paper o	luct insulation		80 SF				
Exterior						Cement	titious Siding		3,420 SF				
Name of Registered Was	te Hauler			110	NJDEP N		Cubic Yards of	Name of Regis	stered Landfill				
Century Waste Sen	vices LLC			ŀ	dauler II 32797		Waste As Needed	IESI Bethi	ehem Landfill				
City, State					32131		Disposal Date	City, State					
Elizabeth, NJ							TBD	Bethlehen	ı, PA				
Completed By (Print or T	ype)	Title	-				Signature	11 :		Date?	1	1	
Allen Monchik		100000000000000000000000000000000000000	oject	Mar	ager		1100	U/	Ţ	61	17	11	7

# State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8-60-7 AND 12:120-7) CONTINUATION SHEET



									1.0	
				699 Oxford Road		Abateme	nt Type	1	AC	BESTOS CONTROL &
Material (ACM) TO BE ABATED In Faculty (13) Mi	Norm So lainte odial	olely benance Staff	Used by e/Cust (12)	Description of Asbestos-Containing Material (ACM) (i.e. thermal systems, insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	R e m o v a I	R e p a i r	E n c a p s u	E n c ! o s u r e	LICENSING
Ye	'es	No	N/A							
Exterior			F	Black/Tan Caulk at exterior trim and siding	200 LF	х				
Exterior Doors			Х	Glazing at window panels of storm door	102 LF	Х				
Exterior below grade foundation				Black tar vapor barrier below grade foundation wall	798 SF	Х				
Throughout	T		Х	White window glazing	720 LF	Х				
Rear porch roof (bottom layer)				Black rolled tar paper under roof shingle	160 SF	х				
Rear porch roof and upper roof				Black flashing at shingle & wall interface and chimney & vents	114 LF	Х				1
	+									
	7									
	#									
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	1									
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	+	_								
	7									
	$\Rightarrow$									
	+	_	_							

Completed by: (Print or type) Allen Monchik	Title:	Project Manager	Signature:	Date: (7)
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Date of Notification (1)					Name of Building Owner/Operator (2)								-11		
					New Jersey Department of Environmental Protection JUN 13 2017							1.000			
Agencies Notified Type Notification					Street Address										
⊠ EPA	☐ Initial					401 East State Street, PO Box 420 ASBESTOS COI							)L &		
□ DOLWD	Amended Amendment #				City, State, Zip Code										
⊠ DOH					Trenton, NJ 08625										
DCA (NJAC 5:23-8)	☐ Emergeno justificatio	luding	ŀ	Name of Contact Telephone Number											
Cancellation						Joseph Maio									
					FACILITY INFORMATION										
Name of Facility (Alleger			DI.	(0)	FAC	ILIIY IN	FORMATION								
Name of Facility Where Abatement is Taking Place (3)								Type of Facility (4)							
Residential							School (K-12) Subchapter 8 (Other than K-12)								
Street Address								e., private and commercial buildings,							
							homes, etc.)								
City (5)							Square Feet # of Floors Bldg. Ag			е					
Mansfield Townshi	p														
County (6)					Coun	ty Code (7	)(STATE USE ONLY)	or if being demolish	red)						
Warren															
Name of Monitoring Firm Hired by Building Owner (8)						Vo.	Name of Abatement Contractor (9)								
USA Environmental Management					0011	2	ALL PRO MANAGEMENT LLC								
Street Address							Street Address								
344 West State Street							27 Outwater I	Lane							
City, State, Zip Code											$\neg$				
Trenton, NJ 08601						Garfield, NJ	07026								
Project Manager for Moni	itoring Firm			Telep	ohone l	No.	Telephone No.	License No.	).						
					9-656-		973-928-4888		1188						
Start Date (10) Scheduled Comple						e (11)	Name of OSHA Monitor								
04 /24 /1705 _ / _24							ALL PRO MA	NAGEMENT L	LC						
Occupancy Status During Abatement (Check only one)							Street Address					_	-		
☐ Facility Closed/Vacated During Entire Period of Abatel					nent		27 Outwater	ano							
						cribe									
Abatement Performed Outside of Normal Facility Hour Time of Abatement:AMPM/_PM-							City, State, Zip Co								
					Garfield, NJ	07026									
Scope of Work (Check al	that apply)						☐ Full Cont	ainment with Neg	ative Pressure						
				novatio			Mini-Enc	losure	,						
≥160 sf or ≥260 lf     Demolition					n			g Procedure	s Frieble Dresedur						
									-4 7						
Location	of			lormal			Description of	ıf.			ateme				
Asbestos-Containing				d Sole		Asbe	stos Containing Ma		Amount (Specify	Rer	Repair	Enc	Enc		
TO BE ABA				intenai odial S		(i.e	., thermal systems			Removal	air	aps	Enclosure		
IN Facili (13)	ty		Ousi	(12)	Man:		surfacing, VAT other miscellane		SF or LF)	8		Encapsulate	re		
(10)			Yes	No	N/A	ĺ	other misochane	ous,				te			
101 and 204						Multi-la	yered resilient f	loor cover	336 SF						
002 and 005					☐ Flue Ce		ment		8 SF						
001,004,101,102,103,104						Paper o	luct insulation		80 SF						
Exterior							Cementitious Siding 3,420 SF								
1					JDEP \		Cubic Yards of	Name of Registered Landfill							
ATC					auler II		Waste As Needed	Minerva E	nterprises						
City, State					J11-2	V-24310 As Needed Disposal Date City, State									
Shirley, NY					TBD Waynesburg, OH										
Completed By (Print or Type) Title						(Signature) \ Date				-	i -				
Allen Monchik							( ) ( )	1~	_   "	4	12	11	7		

42071		DEC	E		/ [									
Date of Notification (1)							g Owner/Operator (	(2)	JUN JUN	1 1 3	20	17		
06/	09/17					vin Prope	erties L.P.		environes as					
Agencies Notified  EPA	Type Notification  Initial				100000000000000000000000000000000000000	t Address 5 Route 5	7 Fast		ASBESTOS CONTROL &					
☑ DOLWD	☐ Amende	d				State, Zip (			LICENSING					
⊠ DOH	Amendm				4 10 10 10 10 10	am (1) 이번 10 10 10 10 10 10 10 10 10 10 10 10 10	ode Township, NJ (	7001		-				
DCA	☐ Emerger justificat		cludin	g		e of Contac		01002	Telephone Num	1	7.20			
(NJAC 5:23-8)				000000	rald A. O			Telephone Killer	nar					
	☐ Cancella								_			<u></u>		
FACILITY INFORMATION  Name of Facility Where Abatement is Taking Place (3)  Type of Facility (4)														
Commercial	Iakın	Place	(3)				Type of Facility (4)							
Street Address							☐ School (K-12) ☐ Subchapter 8 (Other than K-12)							
401 E. Washington							Other (i.e., private and commercial buildings, homes, etc.)							
City (5)								Square Feet # of Floors Bldg. A						
Washington														
County (6)						nty Code (7	)(STATE USE ONLY)	Current Use (Prior if being demolished)						
Warren								Schedule for demolition						
Name of Monitoring Firm Hired by Building Owner (8)						No.	Name of Abateme	nent Contractor (9)						
Bio Terra Solutions					061	5995	ALL PRO MA	NAGEMENT LLC						
Street Address							Street Address							
P.O. Box 1224							27 Outwater Lane							
City, State, Zip Code					City, State, Zip Co	ode								
Union, NJ					Garfield, NJ (	07026								
Project Manager for Monitoring Firm Tele						No.	Telephone No.	License No.	cense No.					
Rick Eustaquio 97					73-494	-3762	973-928-4888		1188					
Start Date (10) Scheduled Complet						- 10 (D) (	Name of OSHA M	lonitor						
<u>06</u> / <u>20</u> / <u>17</u> <u>07</u> / <u>20</u>					0_/	17	ALL PRO MA	NAGEMENT L	LC					
Occupancy Status During Abatement (Check only one)							Street Address							
☐ Facility Closed/Vacated During Entire Period of Abaten							27 Outwater I	Lane						
Abatement Performed Outside of Normal Facility Hours						scribe	City, State, Zip Co							
Time of Abatement:AMPM/PM-						Alvi	Garfield, NJ 0	7026						
Scope of Work (Check all	that apply)						□ Full Cont	ninnant with Na	nation December					
☐ ≥3 sf or ≥3 lf ⊠ Renovation							☐ Full Cont	ntainment with Negative Pressure						
							☐ Glovebag							
			io	Loca	tion	1	Non-Exer     Non-Exer	mpted (*) and No	n-Friable Procedu	1				
Location of Norma							Description o	f		Ab	atem	ent T	ype	
Asbestos-Containing Material (ACM) Used Sol							stos Containing Ma	terial (ACM)	Amount	Removal	Repair	Enc	Enclosure	
TO BE ABATED IN Facility					Staff?	(i.e	., thermal systems i surfacing, VAT,		(Specify	nov	air	aps	losi	
(13)	y			(12)	_	1	other miscellane		SF or LF)	<u>a</u>		Encapsulate	Гe	
1 22 22			Yes	No	N/A							е		
Dining Room	om					VAT/Ma	stic		4,000 Sf					
-											П	П	П	
			П							+=				
							Cubic Yards of	Name of Pegis	stored Landfill			П	ш	
Century Waste Services, LLC					lauler II	D No.	Waste	Name of Registered Landfill IESI Bethelhem Landfill						
City State						7	As Needed							
Elizabeth, NJ							Disposal Date TBD	City, State Bethlehem	ΡΔ		,			
Completed By (Print or Type) Title								Detrilettett			_/		_	
Allen Monchik	Project Manager						\$ignature \	4		ete 6	31	17		

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Miles and Company of the Company of							_					
			FICATH	State of New Jers ON OF ASBESTOR Int to NJAC 8:80 a	S ABATE		UIA FAX	A				
Date-of Notification (1)										-		
5/3/17		lirr	Name of Building Owner/Operator (2)									
Agencies Notified Type Notification			Street	Address O SPRIN	)(·	GI MAY = 22017.						
DEP TO Amended			City, S	tste, Zip Gode		2 6	2001	1				
DOL Amendment		ng	EZ	12ABET	n N		Telanhana Ni	mhar		H		
DOH justification		177	SCONTACT VEIER CONSTRUCTION	RIN	1 1 1 1 1				-			
Name of Facility Where Absternent is Takin	g Place	(3)	IFA	CHIAT INFORMAT		Type of Facility	EAG E I	V	[]			
Street Address						School (1	ter 8 (Other than K-1	2)				
Suedi Pilmieso				•	. (	Other (J. etc.)	, private & commerc	ar bu		and the last		
ELIZABETH N.D.	Δ-	7/70	1			Square Feet	# of Floors		Blog.	a.g		
County (6)	U	1 al	County	Code (7)			nor if being demoils	ved)	OL 8			
UNION	2		(STATEUSE CHLV)			of Abatement Contractor (9)						
Name of Monitoring Firm Hired by Building (	Jamer (4	0)				DATECH LICE						
Street Address						Address SIY						
City, State, Zip Code				City, State, Zip Code OID Bridge NO 0325					7 -			
Project Manager for Monitoring Firm	T	Teleph	one No.	Telepin	1048: No. 1 License No. 233x7500 00°206							
Start Date (10)	P 10		Date (11)		OSHA Monito	r .			enes.			
Occupancy Status During Abatement (Check		<b>6</b> /3	913		-	JATECH INC						
Facility Closed/Vacated During Entire P	eriod of	Abelea	vent		4.0.	te, Zip Code	4					
Absternent Performed Cutside of Normal Other - Describe:	ar Facas	y nous	· · · · · · · · · · · · · · · · · · ·		010	1371012	380 C,0	57				
Scope of Work (Check All That Apply)  D ≥3 sf or ≥3 ti	D D	Renova	Non.		В	Fill Confelian	nent with Negative P	1888	re.			
☐ ≥3 sf or ≥3 lf ≥160 sf or ≥250 lf	Demailt			A	Mini-Enclosure Glovehan Procedure							
		,		Non-Exempt	ed (") and Non-Friab	e Pro	Abere	e MA				
Location of		S Locati Normali	<b>y</b> .	hine	scription of			Type		pe		
Asbestos-Containing Material (ACM)			y by: ice/	Asbestos Conta	aining Ma	tertal (ACM)	Amount (Specify	ਨ	70	1		
in Facility (13)	Cus	foodial 3 (12)	ball?	SUTTED	ing VAT	or	SF or LF)	Removal	Repair	Shoot		
	Yes	No	N/A							3		
EXTERIOR			X	SiDii	NG		800 S/F	X		L		
3 7												
										_		
Vame of Registered Weste Hauler	ļ	I NO	DEP W	este. Cubic Y			Registered Landfill					
NovaTech Ibic			850	1 2	3		0.00.5			_		
Sid Blide NO. 08	852	1		513		City; Stat	Some P.F	(	,			
Completed by	Title		·	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	makine	14	X / Date	2	17			
CARLOS HYEIDA	ME	Siber	<u>Ul</u>		100	M STAN	WE 12	12				
SB-41 (R-06-03)					Do not u	se this torm for	asbestos licensure	exemp	oted a	d		