H 052	$\nu$			ON OF ASBEST t to NJAC 8:60				E G	E		W	E
Date of Notification (1) 6/8/17				of Building Owr		r (2)				-	Controllarion	
Agencies Notified Typ	pe Notification			Address ROWER LA	NE			JUN	1	4 6	2017	Section (Assessment)
DEP DOL	Amended Amendment #			tate, Zip Code SBOROUGH	H, NJ 088	344	AS	BESTO		CON		DL &
DOH DCA	Emergency (includ justification) Cancellation	ing		of Contact ARCHIE			Telephor	ne Numb	er			
Name of English, Milhorn Abots	Table Die	(0)	FAC	ILITY INFORM	IATION	T .						
Name of Facility Where Abate Street Address	ment is Taking Place	e (3)					-12) er 8 (Other tha					
			94.5.200 pm			Other (i.e. etc.)	private & com	mercial b	ouild	ings,	hom	es,
City (5) SOMERSET, NJ						Square Feet 1200	# of Floor 2	rs		dg. A 0+	ge	
County (6) SOMERSET				Code (7) USE ONLY)		Current Use (Pr SINGLE FA	ior if being de MILY	molished	)			
Name of Monitoring Firm Hire	d by Building Owner	(8)	ASCI	M No.	Name DIN	of Abatement Co AGO ENVIRO	ontractor (9) NMENT LL	.C.				
Street Address						Address -LAFAYETTE	STREET					
City, State, Zip Code					City, S NEV	State, Zip Code VARK, NJ 071	05		-	NI POR		
Project Manager for Monitoring	g Firm		Telepho	one No.		none No. 491-0877	Licer 012	nse No. 240				
Start Date (10) 6/17/17	Sched 6/19		mpletion	Date (11)		of OSHA Monitor ENVIRONME						
Occupancy Status During Aba	tement (Check Only	One)				Address						
Facility Closed/Vacated Databatement Performed Outline - Describe:	Ouring Entire Period of utside of Normal Fac	of Abaten ility Hour:	nent s		City, S	3-ROUTE 22 \ tate, Zip Code ON, NJ 07083						
Scope of Work (Check All Tha	t Apply)				UNI	JN, NJ 07000						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit			<u>~</u>	Mini-Enclosur Glovebag Pro					9	
		Is Locati								bate	ment	
Location of Asbestos-Containing Mater TO BE ABATED In Facility (13)	I I I I I	Normal Jsed Sole Maintenal ustodial S (12)	ely by nce/	Asbestos C (i.e. therr		laterial (ACM) s insulation, T, or	Amount (Specify SF or LF	1 2	Demove	Repair	e Encapsulate	Enclosure
	Yes	s No	N/A								te	Ф
KITCHEN			X		LOOR TI		120SQF	= X				
BASEMENT			X	BOILE	ER INSUL	.ATION	10SQF.	Х				
N												
Name of Registered Waste Ha NEWARK CARTING INC		Н	IJDEP W lauler ID 14509	848	oic Yards Vaste		Registered La BETHLEHAI					
City, State PO BOX 5670 NEWARK	( NJ 07105			Disp	posal Date	City, Stat 2325-A	e APPLEBUTT	TER RI	D. E	BETI	HLE	НА
Completed by CARLOS GOMES	Title PR	RESIDE	NT		Signature		>	Date 6/8/1	7			

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

Check # 25523

Data of Natification (1)			20		(5.3.1					ME		E		7/7
Date of Notification (1)	/12/17			Nam	e of Buildir	ng Ov	vner/Operator	r (2) Wright			. U	ᆫ	Ш	( )
Agencies Notified	Type Notifi	cation		Stree	et Address			Wilgin				_		_
□ EPA	Initial	Service Servic									JUI	1	4	2017
	Amende			City,	State, Zip (	Code						_		
<b>⊠</b> DOL	Amendr	nent #_ ncy (includir	na					donfield, N	J 08033	3 400	ECT	00	001	. 100000
<b>⊠</b> DOH	justifica	ation)	.5	Nam	e of Contac	ct				hone Num	ノーしょ	CC	OCT	4113
□ DCA	☐ Cancella	ation				Bill	Wright							
				FA	CILITY IN	FORM	MATION							
Name of Facility Where	Abatement is	Taking Place	æ (3)					Type of Facilit	ty (4)					
		Resident	ial					School (K-	12)					
Street Address								Subchapte	r 8 (Other	than K-1	2)	alla a a		
								Other (i.e., homes, etc		commerci	ai buii	aings	,	
City (5)								Square Feet	# of	Floors	В	ldg. A	\ge	
	Ha	ddonfiel	d, NJ					2400	_	2	_  _	75	+/-	
County (6)	amden				nty Code ( ONLY)	7) (S	STATE	Current Use (F	Prior if bei	ng demoli	shed)			
Name of Monitoring Firm		Iding Owner		ASCM	-	I NI-	mo of Akata	- Ctt	0)				_	
163	MECS	ung Owner		MOCIV	INO.	INA		nent Contractor ( vens Environ		Comic	ac I.	10		
Street Address	MECS					Str	eet Address	ens Environ	memai	Service	28, 11	IC.		_
	PO Box	x 341				300	eet Address	PO	Box 32	2				
City, State, Zip Code	10 207	1311				City	y, State, Zip C		DOX 32				_	_
	osswicks,	NJ 085	15			O.K.	y, Otato, Zip O	Allentov	vn. NJ (	08501				
Project Manager for Mor	nitoring Firm		Tele	ephone	No.	Tel	ephone No.			nse N <del>o.</del>				
Bill We	isgarber		(60	09) 29	8-4070		(609) 25	9-9688		C	049	3		
Start Date (10)		Scheduled (	Comple	etion Da	ate (11)	Nar	me of OSHA N	Monitor						
6/28/17			6/30/	17				N	1ECS					
Occupancy Status Durin						Str	eet Address	artenance .	ass commen					
Facility Closed/Vacate									Box 34	1				
Abatement Performed Other - Describe:			ty Hou	irs		City	, State, Zip C							
		Ш						Crosswic	ks, NJ	08515				
Scope of Work (Check a	all that apply)						□ Full Con	tainment with Ne	anative Pr	escure				
≥3 sf or ≥3 lf			enovat				Mini-End	closure	sgative Fi	essuie				
≥160 sf or ≥260 lf			emolitio	on			Gloveba	g Procedure empted (*) and N	on Friable	Drocodu				
		Is	Location	on		-	LINOII-EXE	mpica ( ) and N	OTT-1 Hable	o i locedu	T	bate	ment	-
1		N	lomally	/		5 <u>1</u>					'	Тур		
Location of Asbestos-Containing N			d Solel ntenar		Asbest		Description of ontaining Mate		Amo	nunt				
TO BE ABAT	ED .	C	ustodia Staff?			therr	nal systems in	nsulation,	(Spe	ecify	R	ת	Enc	En
IN Facility (13)			(12)				facing, VAT, er miscellaneo		SF o	r LF)	Remova	Repair	apsu	Enclosure
* 5		Yes	No	N/A		10000000		rc-M			/al	Η.	Encapsulate	ure
D		165		IN/A			10 *							
Baseme	****		×				al Duct Ins		8		×		_	
lst Flo	or		X		The	erma	al Duct Ins	sulation	4	sf	×			
		_												
Name of D. Co.														
Name of Registered Was	JDEP \ lauler IC		11 11 11 11 11 11 11 11 11 11 11 11 11	oic Yards Vaste	Name of Reg	istered La	indfill	5397						
Stevens Environn		292		1 cu		Fairle	ss Land	lfill						
City; State			18	oosal Date	City, State	1	20 1240	007						
	Allentow						5/30/17	40/	/Morr	isville,	PA			
Completed By		Title		1.5			Signature	1 /		Date	C/10	/1 ~		- 3
ivianion E. Ste	Mahlon E. Stevens Project Manager										6/12	/17		

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

Check # 25521

			(P	ursua	nt to NJA	C 8	:60 and 5:16	)		land l		E	П	7\//
Date of Notification (1)	/10/17			Nam	e of Buildir	ng C	wner/Operator	20 20 Million 1990						/\/
	/12/17			_				Fisher						
Agencies Notified  EPA	Type Notification	on		Stree	et Address						JUI	V 1	4	201
DEP	Amended	ш	1	City,	State, Zip 0	Code	9				No. 20.20 (17.00)			
	Amendment Emergency		g				Pr	rinceton, NJ	08540	AS	BEST	OS	COI	NTP
M DOH □ DCA	justification Cancellation			Nam	e of Contac		D: 1		Telep	ohone-Nun	nber-	<u>GEN</u>	SIA	14
	200000000000000000000000000000000000000						va Fisher		_				Comments of	
Name of Facility Where	Abatement is Tak	ing Place	e (3)	FA	CILITY INF	-OR	MATION	Type of Facility	v (A)					
		sidenti	7000					School (K-1						
Street Address								Subchapter  Other (i.e.,   homes, etc.	private 8			dings,		
City (5)								Square Feet	,	Floors	В	ldg. A	ge	
	Prin	ceton,	NJ					2400	_	_1	_   _	45	+/-	_
	1ercer			USE USE	nty Code ( ONLY)	7) (	STATE	Current Use (P	rior if be	ing demol	ished)			
Name of Monitoring Firm (8)		Owner		ASCM	No.	Na		nent Contractor (9						
Street Address	MECS			-		-	Stev reet Address	ens Environ	menta	I Servic	es, II	ıc.		
	PO Box 3	41				51	reet Address	PO I	30x 32	22				
City, State, Zip Code Cro	osswicks, NJ	0851	5			Ci	ty, State, Zip C	ode Allentow	n, NJ	08501				
Project Manager for Mor	nitoring Firm		Tele	phone	No.	Te	lephone No.			ense N <del>o.</del>				_
	isgarber		_		8-4070	_	(609) 25		_	(	0049	3		
Start Date (10) 6/25/17	Sch	eduled C			ate (11)	Na	me of OSHA N		ECS					
Occupancy Status Durin	a Abatement (Ch		one)	1 /		St	reet Address	101	ECS					_
▼ Facility Closed/Vacate	ed During Entire F	eriod of	Abater	ment		-		PO E	30x 34	1				
☐ Abatement Performed ☐ Other - Describe: {		al Facilit	y Hour	S		Cit	y, State, Zip C							_
Scope of Work (Check a						_		Crosswick	s, NJ	08515			_	_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	п пас арріу)		enovation emolition				Mini-End Gloveba	tainment with Ne closure g Procedure empted (*) and No			ıre			
		1.000	ocatio omally								A	baten		
Location of Asbestos-Containing M			Solely		Ashast		Description of Containing Mate		۸۳۰	ount	-			
TO BE ABAT	ED	Cu	ustodia			ther	mal systems in	nsulation,	(Sp	ecify	20	71	Enc	E
IN Facility (13)			Staff? (12)				rfacing, VAT, er miscellaneo		SF o	or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A							/al	=	ılate	ure
Baseme	nt		×				Transite		15	0 sf	×		$\exists$	
Name of Registered Was	to Haula-			IDED :	A	-	L' V			161				
Stevens Environm		es, Inc.	Ц.	JDEP V auler ID 182	No.		bic Yards Waste 2 cu	Name of Regis		andfill ess Land	dfill			
City, State	Allentown,			102	.,		posal Date	Oity, State	//					_
Completed By Title							6/30/17 Signature	V /	Mon	risville,	PA		_	=
Mahlon E. Ster			oject	Man	ager		11/	1			6/12	/17		_

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

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	1	<u> </u>	므	U	<u>U</u>		
		HIN	1	1	2017	0	120

Date of Notification (1)			Nam	e of Ruild	ing Owner/Operator	/2)		11	4 21	117	
6/5/	17		0		os Pizza & Resta	0.000	ob #1706-217	C	hk. #	4711	
Agencies Notified Type Notif	ication			et Address			ASBEST	os c	CON	FRO	18
⊠ EPA ⊠ Initial					Highway		L	ICEN	SING	ì	
☑ DOLWD ☐ Amend	ed		-	State, Zip							0.000.000.000
☑ DHSS Amend		_			ld, NJ 08033						
□ DCA □ Emerge (NJAC 5:23-8) □ justifica	ency (includ	ing		e of Conta			1-				
Gancell				d Barke			Telephone Nur	nber			
				A PAGE TO STATE OF THE STATE OF						1	
Name of Facility Where Abatement is	Taking Dia	00 (2)	F.F.	CILITY	INFORMATION	1=					
Passariellos Pizza & Restaura	ant	ice (3)				Type of Facility					
Street Address						School (K-12	2) 8 (Other than K-1	2)			
119 Kings Highway						Other (i.e., p	rivate and comm	ercial t	ouildin	gs,	
City (5)						homes, etc.)					
Haddonfield						Square Feet	# of Floors	E	Bldg. A		
County (6)			Cou	nty Code	(7)(STATE USE ONLY)	9,500	2		70 +	/-	
Camden			000	my Code	(T)(STATE USE ONLY)	A CONTRACTOR OF THE CONTRACTOR	ior if being demol	ished)			
Name of Monitoring Firm Hired by Bu	ildina Owne	r (8)	ASCN	l No	Name of Abatam	Vacant					
Horizon Environmental		. (0)	NOON	1140.	1	ent Contractor (9) d Mold Service					
Street Address		-			Street Address	a Moid Service	s, Corp.				
PO Box 316					3859 Sylon E	Roulevard					
City, State, Zip Code					City, State, Zip C		· · · · · · · · · · · · · · · · · · ·				
Thorofare, NJ 08086					Hainesport,						
Project Manager for Monitoring Firm		Te	elephone	No.	Telephone No.	40 00000	License No.				
Dave or Steve Flanigan		0.00	856-848		609-702-0400	)	00862				
Start Date (10)	Scheduled				Name of OSHA N		00002		_	_	
6 /6 /17	6	/	13_ /	17	EMSL Analyt	ical, Inc.					
Occupancy Status During Abatement	(Check only	one)			Street Address						
□ Facility Closed/Vacated During Ent	ire Period o	f Abat	tement		200 U.S. Rou	te 130 North					
Abatement Performed Outside of N	Iormal Facil	ity Ho	urs - Des	scribe	City, State, Zip Co						
Time of Abatement:AM	PM/	PI	νι	_AM	Cinnaminsor						
Scope of Work (Check all that apply)								ox 11000 1100			
≥3 sf or ≥3 If	⊠ R	enova	ation			Neg	ative Pressure ‡	nel	Wui	15	
≥160 sf or ≥260 lf		emoli			☐ Mini-Enc	osure p Procedure					
					☐ Non-Exe	mpted (*) and Nor	-Friable Procedu	ire			
Location of		s Loc Norm						Ab	atem	ent Ty	уре
Asbestos-Containing Material (ACN		ed So	lely by	Asha	Description o estos Containing Ma	f	A \$2500 A TOTAL A TOTA	100000			
TO BE ABATED	M		ance/ I Staff?	(i.e	e., thermal systems i	nsulation.	Amount (Specify	Removal	Repair	ncal	nclo
IN Facility (13)	Cu	(12			surfacing, VAT,	or	SF or LF)	val	7	Encapsulate	Enclosure
	Yes	1			other miscellane	ous)				ate	W
Restaurant			$\boxtimes$	Floor T	ile & Mastic		5,500 SF				П
			$\boxtimes$							П	
								1			$\exists$
											=
Name of Registered Waste Hauler		1	NJDEP V	Vaste	Cubic Yards of	Name of Registe	ared Landfill				Щ
Waste Management			Hauler ID	No.	Waste	Grand Cent					
City, State			17273		5 Disposal Date	City, State					
Lafayette, NJ					6/14/17	Penn Argyle	DA				
Completed By (Print or Type)	Title				1 /	r eilii Aigyle				-0/409	
Kimberly A. Trumbetti	0.0000000000000000000000000000000000000	Coor	dinator		Signature		Da			1	
SB-41	311100	2001	amator			1		5-5	-1,	1	

# State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.IAC 8:60 and 5.44)

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M		11111	4	4	0017		
ПП		JUN	1	4	2017		I not

Date of Notification (1)			-	Nor				THE JUI	1 1 4	201	/ []
6 /	1 /	17				ng Owner/Operator atherine Shoema		/ lob #4700 04	0.4	01.1	
Agencies Notified	Type Notification						ikei	/Job #1706-21 ASBES	US C	ONT	10Z18
	☐ Initial	111		Stre	eet Address			L	ICENS	ING	and the same
	☐ Amended			City	Ct-1- 77	•					
☑ DHSS	Amendment		_		, State, Zip		2				
☐ DCA (NJAC 5:23-8)		(includ	ing			wnship, NJ 0810	8				
	justification)  Cancellation				ne of Contac	ct		Telephone Nu	mber		
			_		acob			_			
Name of Facility Whose Ab	oto			F	ACILITY IN	NFORMATION					
Name of Facility Where Ab Residential	atement is Tak	ing Pla	ce (3)				Type of Facility	5 ZS195	111111111111111111111111111111111111111		
Street Address							School (K-1	2)			
- West Address							Other (i.e., r	8 (Other than K-1 private and comm	2) ercial bu	uildings	
City (5)							homes, etc.	.)	Di Ciai De	andings	'1
Haddon Township							Square Feet	# of Floors	BI	ldg. Age	e
County (6)							1500	2		75	
Camden				Cou	unty Code (7	7)(STATE USE ONLY)		rior if being demol	ished)		
	rod by D. T.F	0	15:				Residential				
Name of Monitoring Firm Hi Tiger Environmental	rea by Building	Owne	r (8)	ASCN	/I No.	Name of Abateme	CONTRACTOR OF STREET	•			
Street Address						Asbestos and	d Mold Service	es, Corp.			
16 W Elizabeth Ave #	2					Street Address					
City, State, Zip Code						3859 Sylon B					
Linden, NJ 07036						City, State, Zip Co	ode				
Project Manager for Monitor						Hainesport, N	IJ 08036				
Kelly Walton	ing Firm			ephone		Telephone No.		License No.			
Start Date (10)				(2)	62-4301	609-702-0400		00862			
_6_ / _7_ /	17 Sche				ate (11)	Name of OSHA M					
				/	17	EMSL Analyti	cal, Inc.				
Occupancy Status During Al	batement (Che	ck only	one)			Street Address					
☐ Abatement Performed Out	Juring Entire Poutside of Norma	eriod of	Abate	ment		200 U.S. Rout	e 130 North				
Time of Abatement:	AM- F	M/	ty Hou PM	rs - De: -	SCribe AM	City, State, Zip Co	de				
				-	-CIVI	Cinnaminson	NJ 08077				
Scope of Work (Check all that	at apply)										
≥3 sf or ≥3 lf		⊠ Re	enovat	ion		☐ Full Conta	ainment with Neg				
≥160 sf or ≥260 lf		-	emolitic	177.17.00			Procedure	f whole compl		remov	al
		T			1	☐ Non-Exen	npted (*) and Nor	n-Friable Procedu	re		
Location of			S Locat Norma						Aba	atement	t Type
Asbestos-Containing Mat	erial (ACM)	Use	ed Sole	ly by	Ashes	Description of tos Containing Mate	arial (ACM)	A			
TO BE ABATEI IN Facility	D	100000000000000000000000000000000000000	intena todial		(i.e.,	thermal systems in	sulation,	Amount (Specify	Removal	Repair	nclo
(13)		L	(12)	Jiail!		surfacing, VAT,	or	SF or LF)	val	Repair	Enclosure
		Yes	No	N/A	1	other miscellaneo	us)			dic	0
Basement		П			Straight	duct partition			+_+		
Basement				-		duct portions w		6 LF			
		Ш			Paper wi	rap on duct boot	s	2 SF			
											10
		П	П								1
Name of Registered Waste H	auler			JDEP V	Vaste 1	Cubic Yards of	None of D				
Waste Management			Ha	auler ID	No.	Waste	Name of Registe				
City, State				17273		5	Grand Cent	rai			
Lafayette, NJ					1	Disposal Date	City, State	Sec. 10.			
completed By (Print or Type)	1=:-					6/8/17	Penn Argyle	e, PA			
Kimberly A. Trumbetti	Title					Signature		Dat	e		
	0	mice C	oordi	inator		IXIX		_   ii	-1-1	7	
B-41						1 4 1	- The same of the	1 0			

CK4119

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

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K	-						
		HIM	1	A	2017		

	-			٧.				~,			IIIN	1 A	20	17	
Date of Notification (1)		-			Nam	e of Buildin	g Owner/Operator (	(2)	La!	L	IUN-	1 4	-20	17	les .
6/	9 /	17			Mr	. Roberto	de O. Marques		/Jo	ob #170	makes in contrast to the	-	-	-	1719
Agencies Notified	Type Notific	ation			Stree	t Address			1	ASBE					Lå
⊠ EPA											LICI	=1/15	ING	*********	Care tre-sentate
⊠ DOLWD	☐ Amended				City,	State, Zip (	Code		53		1				
☐ DHSS	Amendm				Ne	wtown, P	A 18940								
(NJAC 5:23-8)			cluding	9		e of Contac	120000000000000000000000000000000000000		Tel	ephone N	lumbe	r			
(110/10/0.20/0)	Cancella				Tro				1	op.iono i					
							NFORMATION		-						
Name of Facility Where	Abatement is 7	Taking	Place	(3)				Type of Facility	(4)					_	
Former Temple Em	eth Shalom							School (K-12	2)						
Street Address								Subchapter				al hu	ildina		
8501 Ventnor Aven	iue							Other (i.e., p	) )	and com	merci	ai bu	lidirig	5,	
City (5)		11-1-274						Square Feet	-	of Floors		Blo	dg. Ag	ge	
Margate								10000		2			+- 50	1	
County (6)					Cou	nty Code (7	7)(STATE USE ONLY)	Current Use (Pr	rior if I	being den	nolishe	ed)			
Atlantic								Vacant							
Name of Monitoring Firm	Hired by Build	ding O	wner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)	)						
Tiger Environment	al						Asbestos an	d Mold Service	es, C	orp.					
Street Address							Street Address								
16 W Elizabeth Ave	# 2						3859 Sylon B	oulevard							
City, State, Zip Code							City, State, Zip Co	ode							
Linden, NJ 07036							Hainesport, N	NJ 08036							
Project Manager for Mon	itoring Firm			Tel	ephone	No.	Telephone No.		Li	cense No	),				
Kelly Walton				(	908) 86	32-4301	609-702-0400	)		00862					
Start Date (10)		Schedu	uled C	ompl	etion Da	ate (11)	Name of OSHA N	lonitor							
_6_ / _12_ /	17	7	/	6	5_/	17_	EMSL Analyt	ical, Inc.							
Occupancy Status During	g Abatement (	Check	only o	one)			Street Address								
☐ Facility Closed/Vacate							200 U.S. Rou	te 130 North							
Abatement Performed	Outside of No	ormal l	Facility	у Ног	rs - Des	scribe	City, State, Zip Co	ode							
Time of Abatement: _	AM	PM	1/	PN		_AM	Cinnaminson	, NJ 08077							
Scope of Work (Check al	I that apply)					***************************************									
≥3 sf or ≥3 lf		1	☐ Re	nova	tion			tainment with Neg	gative	Pressure	9				
≥160 sf or ≥260 lf			☐ De					g Procedure							
								mpted (*) and No	n-Fria	able Proce	edure				
				Loca								Aba	ateme	ent T	уре
Location Asbestos-Containing		.		Norma d So	ely by	Acho	Description o stos Containing Ma			Amount		Re	Re	E	E
TO BE ABA		"			ance/		thermal systems			(Specify		Removal	Repair	cap	Enclosure
IN Facili	ty		Cust	todial (12	Staff?	1	surfacing, VAT,	or	,	SF or LF)		val		Encapsulate	sure
(13)		1	Yes	No		1	other miscellane	ous)						ate	
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SEE ATTACHED SCO	DPE OF WO	KN				ATTAC	HED		A	TTACHE	.D		Ш	Ш	Ш
												$\boxtimes$			
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Name of Registered Was	te Hauler			1	NJDEP	Waste	Cubic Yards of	Name of Regis	stered	Landfill				-	_
Waste Managemen	t			1	Hauler II		Waste	Atlantic Co			A				
City, State					1727	)	8 Disposal Date	City, State							
Lafayette, NJ							7/7/17	Egg Harbo	r Tov	wnship	NJ 0	8234	1		
Completed By (Print or T	vne)	Title	750					70		р,					
Kimberly A. Trumbe			fice (	Coor	dinato	r	Signature				Date		9.	-1:7	
		U	nice (	2001	umato	ti.		V	NAME OF TAXABLE PARTY.			0	1	1	

ASB-41 MAY 11

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

#### State of New Jersey

	NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)  Pate of Notification (1)  Name of Building Owner/Operator (2)													
Date of Notification (1)				Name	e of Buildin	g Owner/Operator (	2)	14 11	4 1	4	2017	-		
6/	12 / 17	_			ckettstov			1706-2186 Ch ASBES	k. #4	-	ITO	21.0		
Agencies Notified	Type Notification			Stree	t Address					VSIN		ナレウ		
⊠ EPA	☑ Initial			315	5 Washin	gton Street		the second secon	1011	10111		-0-,000		
☑ DOLWD ☑ DHSS	Amended Amendment #			City, S	State, Zip (	Code				50700111	1000			
□ DCA	☐ Emergency (ir			Had	ckettstov	vn, NJ								
(NJAC 5:23-8)	justification)	cidaling		Name	of Contac	t		Telephone Numb	er					
, , , , , , ,	☐ Cancellation			Gai	il Woicek	owski, BA		, suspine italia						
						IFORMATION								
Name of Facility Where Al			7.00 m				Type of Facility	(4)						
Hackettstown High	School - Securi	ty Ves	tibul	es			School (K-12							
Street Address								(Other than K-12)		ومنامانه				
599 Warrant Street							homes, etc.)	rivate and commerc	ciai bi	ıllalıng	JS,			
City (5)							Square Feet	# of Floors	BI	dg. A	ae			
Hackettstown							30000	1		1957	7			
County (6)	-			Cour	nty Code (7	)(STATE USE ONLY)	000000000000000000000000000000000000000	or if being demolis						
Warren					, (,	/(orring ode origin)	School	or it being deritons	icu)					
Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9)														
Langan Engineering		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	, iooivi	110.		Mold Service	c Corn						
Street Address		711.10				Street Address	i word Service	s, corp.						
300 Kimbal Drive, 4t	h Floor						alaa.ual							
City, State, Zip Code	1111001					3859 Sylon B								
Parsippany, NJ 0705						City, State, Zip Co								
Project Manager for Monito				1		Hainesport, N	IJ 08036							
Vijay Patel	oring Firm			phone		Telephone No.		License No.						
	0.1.	1.10		3-560		609-702-0400		00862						
Start Date (10)6 /23 / _	Code (Code)	uled Co				Name of OSHA M EMSL Analyti								
Occupancy Status During	Abatement (Check	only o	ne)			Street Address								
☐ Facility Closed/Vacated	College Control of the College			nent		200 U.S. Rout	e 130 North							
☐ Abatement Performed (	<b>Dutside of Normal</b>	Facility	Hour	s - Des	cribe	City, State, Zip Co					_			
Time of Abatement:	AMP	Λ/	_PM-		AM	Cinnaminson								
Scope of Work (Check all t	hat apply)													
☐ ≥3 sf or >3 lf		⊠ Rer	ovatio	on		☐ Full Conta	ainment with Neg							
≥160 sf or ≥260 lf			nolitio			☐ Glovebag		rrap and ci	1					
						☐ Non-Exer	mpted (*) and Nor	n-Friable Procedure	9					
	_	1000	Locati ormal						Ab	atem	ent T	уре		
Location o Asbestos-Containing M			d Sole		Asha	Description of			R	Z,	Щ	Щ		
TO BE ABAT		Maii	ntenar	nce/		stos Containing Mat ., thermal systems i		Amount (Specify	Removal	Repair	Encapsulate	Enclosure		
IN Facility		Custo	odial S	Staff?		surfacing, VAT,	or	SF or LF)	val	=	nsc	Sun		
(13)		V	(12)	21/4	-	other miscellaned	ous)				ate	O		
Security Vestibule		Yes	No	N/A	Pipe Ins	sulation		8 LF						
Security Vestibule		7	$\overline{}$		-			The second second	-					
Security vestibule					Elbow/F	rittings		18 Ea						
			<u> </u>						ш	Ш		Ш		
Name of Registered Waste	Hauler		437.75	JDEP V	10400000000000000000000000000000000000	Cubic Yards of	Name of Regist	ered Landfill						
Waste Management				auler ID <b>17273</b>	0.000	Waste 5	Grand Cent	tral						
City, State						Disposal Date	City, State							
Lafayette, NJ						6/26/17	Penn Argyl	e, PA						
Completed By (Print or Typ	e) Title					Signature		Date	е					

ASB-41 MAY 11

Kimberly A. Trumbetti

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

4-12-17

Office Coordinator

Ch 3279			ICATIO	tate of New N OF ASB t to NJAC	ESTOS	ABATE			and contract and a second	DI-LE	<u>G</u>	B	one and	
Date of Notification (1)				of Building							JUN	1	1 20	717
6/8/17			Rene	Jinorio 8	& Justi	in Jinor	rio (JII	NCO)	No deliveration					
Agencies Notified Type Notification			Street A	Address		2-01000				ASBE	OTO	20.0	CALT	7001
EPA Initial Amended									7	AODE			SING	
The state of the s				ate, Zip Co		3					-		2.1 10	****
X DOL Amendment Emergency		_		ucus, NJ	07094	4			***					
DOH justification)		.		of Contact					Te	lephone Nu	mber	_		
DCA Cancellation				or Justir	-					and the second second second				
Name of Facility Where Abatement is Takin	n Place (	3)	FAC	ILITY INFO	DRMAT	ION	Tuno	of Facility (4	\					
N/A	9. 1000 (	~,					-		59 80					
Street Address	ekeulles						N S	School (K-12 Subchapter 8 Other (i.e. pri	(Oth	er than K-1: & commerci	2) al buil	ldings	, hom	es,
City (5)		7.					and the second	etc.) re Feet	# 0	f Floors -	11	Bidg. /	100	
Bayonne, NJ 07002													-9-	
County (6)		T		Code (7)			Curre	nt Use (Prior	if bei	ng demolish	ned)			
Hudson			(STATE	USE ONLY)	-	_		a)						
Name of Monitoring Firm Hired by Building ( CA Environmental	Owner (8)		ASCN	ИNo.		200000000000000000000000000000000000000	of Abater, LL0	tement Contr	actor	(9)				
Street Address	*					Street		10						
2200 Paterson Plank Rd						203 E	Belmo	ont Ave						
City, State, Zip Code								p Code						
North Bergen, NJ 07047							A CONTRACTOR	NJ 07508						
Project Manager for Monitoring Firm Carmelo Altomonte			Telepho			Teleph				License N	0.			
Start Date (10)	Cabadul	- d C	DOLLARS IN HERE	64-6583		1999/1911/01/03	336-0	22.07.5(29)		01195				
05/18/17	6/13/1		npietion i	Date (11)			of OSH er, LL(	IA Monitor						
Occupancy Status During Abatement (Check						Street								
A STATE OF THE STA			· ont					nt Ave						
Abatement Performed Outside of Norm	al Facility	/ Hours	ient S			City, St	tate, Zi	p Code						-
						Hale	don, N	NJ 07508						
Scope of Work (Check All That Apply)									te still					
≥3 sf or ≥3 if ≥160 sf or ≥260 if	-	Renova Demolit					Min Glo	Containmen i-Enclosure vebag Proce i-Exempted (	dure				·e	
	Is	Locati	on					- Indisplay	/ 4111	21101111100		7277	ement	
Location of	1	Normal	ly		Des	scription	of					Ty	ре	
Asbestos-Containing Material (ACM)	1,000,000,000,000	d Sole intenar			os Cont	aining M	laterial		Α	mount			Е	
TO BE ABATED In Facility		todial S		(i.e. t		systems cing, VAT		tion,		pecify or LF)	Rer	R	nca	Enc
(13)		(12)				niscellan			31	OI LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A								<u>a</u>		ate	ē
Main Garage & Boiler Room		X			Pipe	Insulat	tion		25	50 LF	Х			
Front Office	Front Office X								25	0 SF	Х			
Entire Roof		X		East	, North	n, South	h & W	/est	4.2	200 Ft	Х			
(Clean up Debri)									0.5%			-		
Name of Registered Waste Hauler		N	JDEP W	aste	Cubic	Yards	T	Name of Re	egiste	red Landfill				-
Super, LLC		Н	auler ID /H1632	No.	of Was			Waste M						
City, State 203 Belmont Ave					Dispos TBD	al Date		City, State Tullytown	n, PA	\				
Completed by	Title				S	ignature	1		7	Dat			-	-
Tailor Dominguez	Proje	ct Ma	nager				1	of the		05	/03/	17		

Print-Form

EDS17-079

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

Page 1 of 2

check #2833

Date of Notification (1)					r/Operator	(2)		T.	anim,		0		n n	7 -	
6-7-2017				y City Pu	ıblic	Schools				D)	E	C	E		
Agencies Notified Type Notification  X EPA X Initial				Address Claremon	t Ave	enue			The county of the county	K			ALPHANIST MINES	Chinas Resi	
▼ EPA     □ DEP     □ Amended     ▼ DOL     □ Amendment ;	‡			ate, Zip Co y City, N.		305			1		Ü	IUN	1 4	20	17
Emergency (i	ncluding			of Contact	969				Tele	ephońe	Mun	nhor -			
DOH justification)  Cancellation			Kevin	O'Reilly										TMC	ROL
Name of Facility Where Abatement is Taking	Dines /2		FAC	ILITY INFO	ORMA	TION	T	-55926-74	-		-	LIV	EIVC	ING	
PS 20	Place (3	)						of Facility (4							
Street Address								School (K-12 Subchapter (		er than	K-12	2)			
239 Ocean Avenue							T (	Other (i.e. pr					dings	home	es,
City (5)							Squar	e Feet	# of	Floors		В	ldg. A	ge	
Jersey City							50,00		3				0+		
County (6) Hudson				Code (7) USE ONLY)			Scho	nt Use (Prio	r if bei	ng dem	olish	ed)			
Name of Monitoring Firm Hired by Building O Ahera Consultants Inc	wner (8)		ASCN 0057				of Abat Group,	ement Cont	ractor	(9)					
Street Address						Street									-
PO Box 385		30				140 H	Hambi	urg Turnp	ike						
City, State, Zip Code Oceanville, NJ 08231-0385						City, St Bloor		p Code ale, NJ 07	7403						
Project Manager for Monitoring Firm John Smoyer		Telepho (609) (	ne No. 352-1833	3	Teleph 201-7	one No 710-97			Licens 0108		).				
			npletion	Date (11)				A Monitor				-11			
Occupancy Status During Abatement (Check	7-26-20			***************************************		GL G Street									
Page 1								s urg Turnp	ike						
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma	eriod of A Il Facility	batem Hours	ent			City, St									-
Other – Describe: Facility Occupied					-			ale, NJ 07	7403						
Scope of Work (Check All That Apply)						-									
≥3 sf or ≥3 lf ≥160'sf or ≥260 lf	-	enova emoliti				×	Mini	Containmer -Enclosure vebag Proce	dure						
the state of the s							Non	-Exempted	(*) and	Non-F	riabl		55 7 TW		
Location of		_ocati												ement pe	
Asbestos-Containing Material (ACM)	Used	Sole	y by	Asbesto		escription ntaining Ma		(ACM)	Ar	nount				ш	
TO BE ABATED In Facility	0.0043 700000	dial S		(i.e. t		al systems facing, VAT		ion,		pecify or LF)		Remova	Re	Encapsulate	Enclosure
(13)		(12)				miscellane			0,	01 21 )		nova	Repair	sula	osun
A F	Yes	No	N/A									_		ite	O
Boiler Room	Boiler Room X					Ceiling B	lanke	t	97	0 SF		X			
Boiler Room			ACM B	oiler	exhaust	link i	nsulat	44	SF		х				
Boiler Room	X			Boile	er do	or rope in	nsulat	tion	15	SF		x			
Classroom 110		Χ		CE	eiling	& wall p	laster		2,1	54 SF		X			
Name of Registered Waste Hauler		2,712,7	JDEP Wauler ID	C. 122 C.	Cubi of W	c Yards		Name of R	egister	ed Lan	dfill				
GL Group, Inc			33034		TBD			Grows							
City, State Bloomingdale, NJ				3	Disp TBD	osal Date		City, State Morrisvill	e, PA	\					
Completed by Elena Solakov	ent				Signature	Eler	u Slullor	j		Date 6-7	e '-201	7			

EDS17-079

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

# page 2 rof 2 E C E I V E D JUN 1 4 2017

#### CONTINUATION SHEET

1 1164 8	R E M O V A L X X X X X	R E P A I R	E N C A P S U L	NE NC LOSURE	E-THE
Classroom 110         X         VAT & Mastic         750 SF           Classroom 110 Restroom         X         Ceiling & wall plaster         372 SF           Classroom 110 Restroom         X         VAT & Mastic         42 SF           Classroom 110 cloak room         X         Ceiling & wall plaster         797 SF           Classroom 110 cloak room         X         VAT & Mastic         111 SF           1st fl rear hallway, center hallway, center hallway, & main entrance area         X         VAT & Mastic         2,350 SF           Classroom 210         X         Ceiling & wall plaster         2,154 SF           Classroom 210         X         VAT & Mastic         750 SF           Classroom 310         X         VAT & Wall plaster         876 SF           Classroom 310         X         VAT & Mastic         750 SF           Classroom 310 cloak room         X         VAT & Mastic         750 SF           Classroom 310 cloak room         X         Ceiling & wall plaster         750 SF           Classroom 310 cloak room         X         Ceiling & wall plaster         1,064 SF	X X X	R		E	
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Classroom 210         X         VAT & Mastic         750 SF           Classroom 210 cloak room         X         Wall plaster         876 SF           Classroom 310         X         Ceiling & wall plaster         2,154 SF           Classroom 310         X         VAT & Mastic         750 SF           Classroom 310 cloak room         X         Ceiling & wall plaster         1,064 SF	X	+	+	-	-
Classroom 210         X         VAT & Mastic         750 SF           Classroom 210 cloak room         X         Wall plaster         876 SF           Classroom 310         X         Ceiling & wall plaster         2,154 SF           Classroom 310         X         VAT & Mastic         750 SF           Classroom 310 cloak room         X         Ceiling & wall plaster         1,064 SF	X	-	+		-
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Classroom 310         X         Ceiling & wall plaster         2,154 SF           Classroom 310         X         VAT & Mastic         750 SF           Classroom 310 cloak room         X         Ceiling & wall plaster         1,064 SF	X	-			-
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		-	-		

Completed By: (Print or Type) Elena Solakov  Title President	Signature Scotlar Date 6-7-2017
--	---------------------------------

GL16-004 Mulberry

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

check #2835 Page 1 of 1

Date of Notification (1) 6-2-2017		Name of Building Owner/Operator (2) Ramapo College of New Jersey						DECEIV								
Agencies Notified Type Notification  X EPA Initial  Amended	Type Notification Street Address 505 Ramapo Valley F					Road					IIINI	1	1 1	017		
X DOL Amendment			City, State, Zip Code Mahwah, NJ 07430						PT		JUIV	-1	4 2	017		
Emergency justification)  DCA  Cancellation		Name of Contact Gina Mayer-Costa							Telephone Number OS CONTROL							
Name of Facility Where Abatement is Takin	g Place (	3)	FACI	LITY INFO	RMATI	ON	Type of Fac	cility (4)					2444600			
Mulberry Building College Park Ap Street Address	artment	S						l (K-12) apter 8 (Oth	or than l	× 12)						
505 Ramapo Valley Road								(i.e. private				lings,	home	es,		
City (5) Mahwah							Square Fee 14,054	et # 0	of Floors		Bi 4	ldg. A 7	Age			
County (6) Bergen	County Code (7) (STATE USE ONLY)					Current Use (Prior if being demolished)  College Apartments										
Name of Monitoring Firm Hired by Building OUSA Environmental Management,			ASCM No. Name of Abatement Contra 00112 GL Group, Inc					nt Contractor	tractor (9)							
[ ** 1984   1985						reet Address 40 Hamburg Turnpike										
City, State, Zip Code Trenton, New Jersey 08618					City, State, Zip Code Bloomingdale, NJ 07403											
Project Manager for Monitoring Firm William Weisgarber, Jr.								hone No. License No. -710-9725 01084								
Start Date (10) 6-7-2017	Schedul 9-1-20		mpletion Date (11) Name of OSHA Monitor GL Group, Inc					nitor								
Occupancy Status During Abatement (Check Only One)					Street Address 140 Hamburg Turnpike											
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe:				City, State, Zip Code Bloomingdale, NJ 07403												
Scope of Work (Check All That Apply)																
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			rovation Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								۵					
		Locati		n								Abatement Type				
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	d Sole intena	Asbestos Containing Material Staff?  Asbestos Containing Material Staff?  (i.e. thermal systems in surfacing, VAT, other miscellaneous)				laterial (ACM) Amou s insulation, (Spec T, or SF or		Amount Specify F or LF)	Removal		Repair	Encapsulate	Enclosure		
Apartments A-M & Mechanical		X		Drywall and Joint			Compound	oound 53,142 S		:	X					
Apartments A-M & Mechanical		X		S	Stud/Joist Adhesive				376 LF	X						
Apartments A-M		X		Resilient Floor Coverings					982 SF		Х					
Name of Registered Waste Hauler GL Group, Inc		Н	JDEP W auler ID 033034	No.	Cubic `of Was	ste	s Name of Registered Land									
City, State Bloomingdale, NJ		Dispos TBD				al Date	city, State Waynesburg, OH									
Completed by Elena Solakov	Title Presi	dent	Signatu				e Elen Slulla 6-2-20					2017				