

										Promi	and the same	-	O Company of the last	-		Pr	int For
GL	17-033		PA		CATIO	tate of Ne N OF ASE t to NJAC	ESTOS	ABATE		T		E C	E		V	7 [6	
1 2 2 2	te of Notification (1) 3/11/2018					of Building ork Public			r (2)	The state of the s	Marian and	JUN	1 2	1 2	2018	3	
_	encies Notified	Type Notification	1		190 N	Address Iuhamm		Blvd.		WE CLEAT LINES ALONS	L	BESTO	)s co	ONI	TRO	N O	I Interpreted
X	DEP DOL	Initial Amended Amendmen			100000000000000000000000000000000000000	ate, Zip C rk, NJ 0				haman	And the State of t	LIC	ENS	NG	-	- G	Parata de
×	DOH DCA	iustification Cancellatio	)			of Contact min Ola					56,440	ephone   3-733-		er			
					FAC	ILITY INF	ORMATI	ON			_			_			
	me of Facility Where a eorge Washington			3)					Typ	e of Facility (4 School (K-12							
	eet Address 33 Clinton PI								B	Subchapter of Other (i.e. pretc.)	(Oth	er than k & comme	(-12) ercial b	uildi	ngs,	hom	es,
100.000	y (5) ewark	1.0								are Feet 000+	# o	f Floors		Blc 50	dg. A	ge	
1 10000	unty (6) ssex					Code (7) USE ONLY	)		Cur	rent Use (Prio	r if bei	ing demo	olished	)			
1 10000000	me of Monitoring Firm hitman	Hired by Building	Owner (8	)	ASCI	M No.		1010331400120		patement Cont p Inc.	ractor	(9)					
10000	eet Address Pleasant Hill Rd.							Street 140		ess burg Turnp	ike						
	y, State, Zip Code ranbury, NJ 08512	2								Zip Code gdale, NJ 0	7403				-		
	oject Manager for Mon	itoring Firm			Telepho 732-6	one No. 44-5418		Telepi	hone			License 01084					
9/// 200	ort Date (10) 6/22/2018		Schedu 06/30/			Date (11)			37	SHA Monitor p Inc.							
Oc	cupancy Status During	g Abatement (Che	ck Only O	ne)				Street									
×	Facility Closed/Vaca Abatement Perform Other – Describe:	ed Outside of Non	mal Facilit	Abater y Hour	ment s			City, S	State,	burg Turnp Zip Code							
	ope of Work (Check A							Bloo	ming	gdale, NJ 0	7403						_
×	≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	тыст, фр.уу		Renova Demoli					M	ull Containmei lini-Enclosure llovebag Proce		Negativ	e Pres	sure			
			T			Γ		12	N	on-Exempted	(*) and	d Non-Fr	iable F	70 00	-	ment	
	Location	of	4	s Locat Norma			Des	cription	of						Ту		
	Asbestos-Containing TO BE ABA In Facili (13)	Material (ACM) ATED	Ma	ed Sole aintena todial (12)	nce/ Staff?		tos Conta thermal surfac	aining N	Materia s insu T, or		(S	mount specify or LF)	Kernova	Domous	Repair	Encapsulate	Enclosure
	O-fataria M	a malfin m	Yes	No	N/A		\/A.T	. ( ) 4 -	4		7.5	20.05		1		ite	Ф
	Cafeteria/V	enaing	-	X	-		VAI	/ Mas	STIC		7,5	00 SF	X	+	-		
			-		-		····						-	+	$\dashv$	_	
				-	1								+	+	-		
	ne of Registered Was Group Inc.	te Hauler		F	NJDEP W Hauler ID 033034	No.	Cubic of Was			Name of R Minerva	N. T. W.						
	, State omingdale, NJ						Dispos TBD	al Date		City, State Waynesi	ourg,	ОН					
	npleted by na Solakov		Title Pres	ident			Si	ignature		Studio .		T	Date 06/11	/20	)18		

Mh# 3385

Date of Notification (1)				No	mo of	Duilding	Owner/Operator (	2)					
6 /	11 /	18					niversity-Office		Construction				and the same of th
							inversity-Onice	or besign and		n	M		Fr
Agencies Notified	Type Notific	ation		10000	reet Ad				NEGE	1	A.		
☐ EPA  ☑ DOLWD	☐ Initial			2	200 EI	lm Dr		A Particular Particula					
⊠ DHSS	Amended Amendm			Cit	y, Stat	te, Zip C	Code	- 1	170		0010	)	IIL
□ DCA	Emergen		na na	F	Prince	eton, N	IJ 08544		MUL JUN 1	4	2010	)	bo
(NJAC 5:23-8)	justificati		9	Na	me of	Contact			Telephone Numb				1
	☐ Cancella	tion		F	Rober	rt Orteg	go	I	609-258-1841	200	INTE	OL	À
					FACIL	ITY IN	FORMATION		ASBESTO	ENS	ING		
Name of Facility Where	Abatement is	Taking Pla	ce (3)		71012		Ottora	Type of Facility		Marie Construction	- PARTICIPATION OF THE PARTICI		
Princeton Universi			(-/					School (K-12					
Street Address	ty Diominoc							☐ Subchapter	8 (Other than K-12)				
Washington Rd									rivate and commerc	ial bu	uilding	js,	
City (5)								homes, etc.) Square Feet		DI	da A	~~	
Princeton								Square reet	# of Floors	DI	dg. A	ge	
County (6)				To	ounty (	Code (7)	)(STATE USE ONLY)	Current Hea /Dr	ior if being demolish	100			
MERCER					ounty .	code (r	MOTATE OSE ONET)	Cullent Ose (F)	ioi ii being demoisi	ieu)			
Name of Monitoring Firm	Hired by Buile	dina Owne	r (8)	TASC	CM No.		Name of Abateme	ent Contractor (9)					
TTI Environmental		anig Owne	. (0)	/100	JIVI 140	*	I	VIRONMENTA					
Street Address							Street Address	VIICONNILIVIA	L, INC.				
1253 N Church St.								DOTDEET					
							1123 BEAVE						
City, State, Zip Code	2057						City, State, Zip Co						
Moorestown, NJ 08			- 1				BRISTOL, PA	19007					
Project Manager for Mor	nitoring Firm				ne No.		Telephone No.		License No.				
Michael Keehn					88-88		215-788-6040		00509				
Start Date (10)	A BOSENI PLE	Scheduled	•				Name of OSHA M	Ionitor					
_6_ / _22_ /		6		Towns di	/ _1	8	BRISTOL EN	VIRONMENTA	L, INC.				
Occupancy Status Durin							Street Address						
☐ Facility Closed/Vacat							1123 BEAVE	R STREET					
Abatement Performed						be	City, State, Zip Co	ode					
Time of Abatement: 7	7:00AM-3:30F	-IVI/	PM		AIVI		BRISTOL, PA	19007					
Scope of Work (Check a	II that apply)				V				OSAN VIII				
≥3 sf or >3 If		<b>⊠</b> 1	) on our	ation				ainment with Neg	gative Pressure				
□ ≥160 sf or ≥260 lf			Renov Demol				☐ Mini-Enc	osure g Procedure					
			5330130	7727.010			Non-Exe     Non-Exe	mpted (*) and No	n-Friable Procedure	9			
			Is Loc							Ab	atem	ent T	ype
Location			Norn	nally olely b			Description o			R	Z	т	П
Asbestos-Containing TO BE ABA				nance			stos Containing Ma , thermal systems		Amount	emo	Repair	nca	nclo
IN Facil		Ci		al Staf	f?	(1.6.	surfacing, VAT,		(Specify SF or LF)	Removal	=	Encapsulate	Enclosure
(13)			(1:				other miscellane					late	(D)
		Ye	s N	0 N	/A								
Ground floor					] P	ipe Fit	tings (Wrap & C	ut)	36 LF				
Crawlspace					] P	ipe Fit	tings (Wrap & C	ut)	75 LF				
Crawlspace					] P	ipe Fit	tings		20 LF				
											Ī		П
Name of Registered Was	ste Hauler		-		P Was	ste	Cubic Yards of	Name of Regis	stered Landfill				
BRISTOL ENVIRON	MENTAL, I	NC.			er ID N 706	lo.	Waste		LANDFILL				
City, State				101			Disposal Date	City, State					-
BRISTOL, PA 1900	7								HILLS, PA 1904	7			
Completed By (Print or T	ype)	Title					Signature		Dat	e			
Brian Scafiro	5 50	Estim	ator					Scalino	100 0		11-	-18	

CK1097

	PAI		(P	ursuant	to NJAC	8:60 and	d 12:12	0)	CKI	#	697	- 0	7.7	F-23	Charles and
Date of Notifi	100 - 100 min 140 min	L. B. D	1	Name of	f Building	Owner/C	Operator	(2)		111	<u>E U (</u>		$-\mathbb{W}$	<u>E</u>	For
06/12/201	18				Medica			000000000	LLC	IKL	ation and all the nations in the fire	-		ALC: NOT HARDS	Property of the Park of the Pa
Agencies No	tified Type Notifi	cation		Street A							11111	1 4	2010	1	
☐ EPA	× Initial			184 F	ranklin .	Ave Su	ite 250	0			JUN	1 4	2018	5	l har
DEP	Amen			City, Sta	ate, Zip Co	ode									-
× DOL		dment # gency (including		Frank	lin Lake	s, NJ (	07417			-	ASBESTO	SCC	NTA	DL &	ě
X DOH		gency (including cation)		Name of	f Contact					Tel	ephone Nu	mber	NG		-
DCA	Cance	ellation		Adam						20	1-452-67	47			
Name of Fee	The Nation at the state of the			FACI	LITY INF	ORMATI	ON								
	ility Where Abatement is dical Center Param		3)					Туре	of Facility	(4)					10.0
Street Addres	The state of the s	us LLC							School (K-	12)					
	e 17 South							×	Subchapte Other (i.e.				dinas	home	20
City (5)	5 17 Oodii								etc.)						
Paramus								Squa	are Feet	# of	f Floors	E	Bldg. A	ge	
County (6)				County (	Codo (7)			C		10101					
Bergen				(STATE	USE ONLY	)		Curre	ent Use (Pr	ior ii bei	ng aemolis	nea)			
	nitoring Firm Hired by Bu	ilding Owner (8	1	ASCN	1 No.		Name	of Aba	atement Co	ntractor	(9)				
		3	C.						Safety L		(3)				
Street Addres	SS		1 10				Street	A STATE OF THE STA							
							8 Cr	osby	Ave						
City, State, Z	ip Code								Zip Code						
							100000000000000000000000000000000000000		, NJ 0750	)2					
Project Mana	ger for Monitoring Firm			Telephor	ne No.		Teleph	none N	lo.		License N	lo.			
							973-	400-	8711		01332				
Start Date (10				npletion l	Date (11)		Name	of OS	HA Monitor					vi de de d	
06/21/201		06/27/					Sam	ne as	(9)						
Occupancy S	tatus During Abatement	(Check Only O	ne)	•0			Street	Addre	ss						
× Facility (	Closed/Vacated During E	Entire Period of	Abaten	nent											
	ent Performed Outside on Describe: Second shift	f Normal Facility	/ Hours	3			City, S	State, Z	Zip Code						
Scope of Wor	rk (Check All That Apply	1													
☐ ≥3 sf or		law)		1 <b>7 a</b> -1000 (1			_	7							
	≥3 if or ≥260 If		Renova Demolit						II Containm ni-Enclosur		Negative F	ressu	re		
<del></del>								Gl	ovebag Pro	cedure					
							×	1 No	n-Exempte	d (*) and	d Non-Friat	le Pro			
			Locati Normal										House Carlos	ement pe	Š.
Asbestos	Location of -Containing Material (AC		ed Sole		Ashor		scription		I (ACM)				Γ,		
	TO BE ABATED	IVI	intena todial S			thermal					mount Specify	Z	-71	Enc	m m
	In Facility (13)	Jour	(12)	Jan:			cing, VA niscellar				or LF)	Remova	Repair	aps	Enclosure
	(.0)	-	T	T		outer it	iliscellal	leous)				val	≝.	Encapsulate	ure
		Yes	No	N/A										Ф	
First	floor store in center	×		Х		VA	T Mas	tic		33	30 SF	x			
				-								-			
Name of Reg	istered Waste Hauler		l N	JDEP W	/aste	Cubic	Varda		Name	Do-! 1	nad 1 - 1000				
200			100	lauler ID	17777	of Was					red Landfill				
Removal S	naiety LLC		0	037007	7	7			GROV	/S Nor	th				
City, State	XI I					100000000000000000000000000000000000000	sal Date		City, Sta						
Paterson, I						TBD			Morris	ville, P	Α				
Completed by		Title				S	ignature	2/	1/	7	Da				
Lasko Vesl	KOV	Pres	ident				120	1-	110	alex	7/0	6/12/	2018	1	



				(1-1	ıısuaı	IL TO MOV	AC 0.00 and 5.1	0)		www.	w ====		
Date of Notification (1)  05 / 29	5/_	18	_			of Buildin	g Owner/Operator ( oup	(2)		JUM	14	201	18
⊠ EPA ⊠	pe Notifical				500		at Boulevard N,	Building 100	AS	BESTO LIC	S OC BMSH	NTE NTE	S JOS
☑ DOH	Amendm	0.000	1101105		1	State, Zip (							
	] Emergen		uding			rnegat, N							
(NJAC 5:23-8)	justificati				Chineses and	of Contac			Telephone N	lumber			
	] Cancella	tion			Joe	Steinhe	iser	17. 19		90			
			- 10		FA	CILITY IN	IFORMATION						
Name of Facility Where Abar	tement is 1	Taking F	Place	(3)				Type of Facility	(4)				
Commercial								School (K-12		( 10)			
Street Address		1						☐ Subchapter ☐ Other (i.e., p			uildin	as.	
6303 Browning Road					1			homes, etc.)				,-,	
City (5)						10		Square Feet	# of Floors	1	Bldg. A	ge	
Pennsauken		51.51											
County (6)					Cour	nty Code (7	)(STATE USE ONLY)	Current Use (Pr	ior if being den	nolished)			
Camden													
Name of Monitoring Firm Hir	ed by Build	ding Ow	mer (	8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
Bio Terra Solutions							ALL PRO MA	NAGEMENT L	LC				
Street Address							Street Address						
P.O. Box 1224						Ti.	27 Outwater	Lane			76		4
City, State, Zip Code				- 17		64	City, State, Zip Co	ode					
Union, NJ	()*		39			t)	Garfield, NJ	07026					
Project Manager for Monitoria	ng Firm			Tele	phone	No.	Telephone No.		License No				3
Rick Eustaquio				97	73-494	-3762	973-928-4888		1188				
Start Date (10)		Schedule	ed Co	omple	tion Da	te (11)	Name of OSHA M	lonitor	1				
06 /04 /1	18	07	_ /	_ 06	_ / _	18	ALL PRO MA	NAGEMENT L	LC				
Occupancy Status During Ab	atement (	Check o	nly o	ne)			Street Address	· ·					-
□ Facility Closed/Vacated D	uring Entir	re Perio	d of A	Abate			27 Outwater I	Lane					
☐ Abatement Performed Ou	tside of No	ormal Fa	acility	Hour	s - Des	cribe	City, State, Zip Co	ode					
Time of Abatement:	AM	PM/_		_PM-		AM	Garfield, NJ						
Scope of Work (Check all tha	at apply)												
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf				novati			<ul><li>☐ Mini-Enc</li><li>☑ Glovebag</li></ul>	Procedure					
	* 2		Is	Locat	ion	T .	☑ NoII-Exe	mpted (*) and No	n-Friable Proce				
Location of			N	lorma	lly		Description o	f			batem	T	1
Asbestos-Containing Mat		1)		d Sole ntena		Asbe	stos Containing Ma	terial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
TO BE ABATEI IN Facility	D				Staff?	(i.e	<ul> <li>thermal systems i surfacing, VAT,</li> </ul>		(Specify SF or LF)	No.	활	aps	losu
(13)		-		(12)	1		other miscellane		Si di Li )	1 2		ulat	Гe
		)	res	No	N/A	= 5	(2) 10					Ф	
Room 1						Pipe Ins	sulation- Elbows	/Fittings	15 Fitting	s 🗵			
Room 2- Chapel	96		]			Pipe Ins	sulation- Elbows	/Fittings	18 Fitting	s 🗵			
Room 3	- 1				$\boxtimes$	Pipe Ins	sulation- Elbows	/Fittings	20 Fitting	s 🗵			
Room 3		. [				VAT/Ma	stic		150 SF				
Name of Registered Waste H	lauler			1000	JDEP \	4 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	Cubic Yards of	Name of Regis	tered Landfill				
Newark Carting				H	auler II 02383		Waste As Needed	IESI Bethle	hem Landfil	I			
City, State				_	52000		Disposal Date	City, State					
Newark, NJ							TBD	Bethlehem	, PA				
Completed By (Print or Type)	)	Title			- 4		Signature	1		Date			-
Allen Monchik		Pro	ject	Man	ager			Monchik		5/25/	18		



				(P	ursua	INE EO NJ	AC	8:60 and 5:1	16)						
Date of Notification (1)					Nam	e of Buildi	ng O	wner/Operator	(2)		JU	M	14	20	18
	25 /	18	_		W:	alters Gr	oup								7.77
Agencies Notified	Type Notific	cation			Stree	et Address				1 1	Programme and the second				O'contra
⊠ EPA					50	0 Barneg	jat E	Boulevard N.	Building 100	Ali	SBES		s UC Misi	MIT Na	30L 8
☑ DOH	Amende	5000			_	State, Zip					100			44.4	
□ DCA	Amendn  Emerge		ıdina		Ba	rnegat, I	UJ O	8005							
(NJAC 5:23-8)	justifical		Juli	J	_	e of Conta				Telephone	Numbe	or.		- 32	
	☐ Cancella				Jo	e Steinh	eise	r		reiepriorie	IVUITIDE	.1			
	E.		d		FA	CILITY	NFO	RMATION	-			V			
Name of Facility Where A	batement is	Taking F	lace	(3)	500,000	32.75.17.25.			Type of Facility	(4)		_			_
Commercial									School (K-1	2)					
Street Address									Subchapter	8 (Other than	K-12)				
6303 Browning Roa	d								Other (i.e., phomes, etc.	orivate and cor	nmerci	al bi	uildin	gs,	
City (5)					7/	71			Square Feet	# of Floors	:	I RI	dg. A	ne	
Pennsauken		9.85								-			-g.,	·go	
County (6)					Cou	nty Code (	7)(ST	ATE USE ONLY)	Current Use (P	rior if being de	molishe	ed)	-		_
Camden								1		zomg do		,,			
Name of Monitoring Firm		ding Ow	ner (	8)	ASCM	No.	Na	me of Abateme	ent Contractor (9)	)				_	-
Bio Terra Solutions							1		NAGEMENT L	No. and the					
Street Address							Str	reet Address	-						
P.O. Box 1224							1	27 Outwater	Lane						
City, State, Zip Code					-	12	Cit	y, State, Zip Co	ode						
Union, NJ	76		30				1000	Garfield, NJ							a a 1
Project Manager for Monit	oring Firm			Tele	phone	No.	Te	lephone No.		License No	D.				
Rick Eustaquio				97	3-494	-3762	9	73-928-4888	10	1188	-				
Start Date (10)		Schedule	d Co	mple	tion Da	ite (11)	Na	me of OSHA M	lonitor				11000		-
06 /04 / _	18	07	_ /	06	_ / .	18	1	ALL PRO MA	NAGEMENT L	LC					- 0
Occupancy Status During	Abatement (	Check or	nly o	ne)			Str	eet Address	-			_			
□ Facility Closed/Vacated	d During Enti	re Period	of A	Abater	nent		2	7 Outwater I	Lane						
Abatement Performed	Outside of N	ormal Fa	cility	Hour	s - Des	cribe	Cit	y, State, Zip Co	ode						
Time of Abatement:		PM/_		_PM-		AM	0	Sarfield, NJ	07026						
Scope of Work (Check all	that apply)						1					_	_		-
≥3 sf or >3 lf			Por	ovati	nn.				ainment with Neg	gative Pressure	Э				
≥160 sf or ≥260 lf				nolitio						- 6				90	
								Non-Exer     Non-Exer	mpted (*) and No	n-Friable Proc	edure				
Location	, f			Locati ormal				_ :				Aba	atem	ent T	уре
Asbestos-Containing N	n laterial (ACM	n   1		Sole		Ashe	etne	Description of Containing Mat	f	Amount		ZD.	R	ш	ш
TO BE ABAT	ED			ntena odial S		(i.e	., the	rmal systems i	nsulation,	(Specify		Removal	Repair	cap	nclo
IN Facility (13)	,		Justi	(12)	otan?	A 0.2	S	surfacing, VAT,	or .	SF or LF)		val	7	Encapsulate	Enclosure
(10)		Y	es	No	N/A		OU	ner miscellaned	ous)					ate	(0)
Room 1			1			Pine Inc	sula	tion- Elbows	Eittings	4E Eitting					
Room 2- Chapel		1	-				70.5		-	15 Fitting	-				
Room 3	y jitah							tion- Elbows		18 Fitting					
								tion- Elbows	/Fittings	20 Fitting	s [	X			
Room 3					$\boxtimes$	VAT/Ma	stic		2	150 SF	1				
Name of Registered Waste	e Hauler			10000	JDEP V auler ID		11 200 100	oic Yards of	Name of Regis	tered Landfill					
Newark Carting				10000	02383	Chonsan -	Was	ste s Needed	IESI Bethle	hem Landfil	1				
City, State								oosal Date	City, State				-		
Newark, NJ							T	BD	Bethlehem	, PA					
Completed By (Print or Typ	oe)	Title			9			Signature			Date			0.37	$\dashv$
Allen Monchik		Proje	ect l	Vlana	ger			Allen	Monchik		5/25	7/19	3		1

# State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8-60-7 AND 12:1207) CONTINUATION SHEET

JUN 1 4 2018

OS CONTROES CENSING

				6303 Browning Road		Abateme	nt Type	į,	ASRE
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Faculty (13)	No Main	s Locat rmally Solely stenancial Staf	Used by ce/Cust	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	E n c a p s u	E n c l o s u r
Room 7	Yes	No	N/A						15
			Х	Pipe Insulation Elbows/Fittings	12 Fittings	Х			
Room 7			Х	VAT/Mastic	150 SF	Х			
Patio		_	Х	Exterior Stucco Paneling	200 SF	Х			
Patio			х	Exterior Caulk assoc. with Stucco Paneling	200 SF	х			
Kitchen			Х	Pipe Insulation Elbows/Fittings	25 Fittings	Х			
Room 4			Х	Pipe Insulation Elbows/Fittings	20 Fittings	Х			
1st Floor- Hallway			Х	Pipe Insulation Elbows/Fittings	20 Fittings	Х			
Room 8- Restroom			Х	Glue Dots Assoc. with Mirrors	20 SF	Х			
Room 15- Shower Room			Х	Caulk Assoc. with Tub/Shower	75 LF	X			
Boiler Room			Х	Pipe Insulation Elbows/Fittings	10 Fittings	Х			
Boiler Room			Х	Fire Door	15 SF- 1 Door	Х			
Boiler Room			Х	Internal Boiler Insulation	25 SF	Х			
Exterior			Х	Stucco Paneling	3,000 SF	Х			
Exterior			Х	Caulk Assoc. with Stucco Paneling	1,000 LF	х			u :
Exterior			Х	Caulk Assoc. with Vent Cover	75 LF	Х			
Exterior			Х	Roofing Materials	4,500 SF	Х			
Exterior (Main Entrance Overhang)			X	Plaster Ceiling assoc. with Soffit	250 SF	Х		7	
0									
									į.
3 3			1						

Completed by: (Print or type) Allen Monchik	Title:	Project Manager	Signature:	Date:
			Allen Monchik	5/25/18

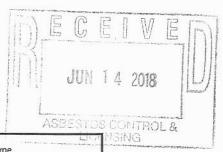
nock

Date of Notification (1)   Os				(	Pursua	nt to NJ	AC 8	8:60 and 5:1	6)	ME	C	E	1	W	E
Agencies Notified  DOLYO  DESCRIPTION  Agencies Notified  DOLYO  DOL	Date of Notification (1)				Nam	e of Buildir	ng Ov	wner/Operator	(2)		W	(Ja	[]	19	ഥ
Series Note   Content	06/	12 /	18					8	10.50						
Initial   BOLM	Agencies Notified	Type Notific	cation		Stree	et Address	-				JUN	1/	1 2	018	
SOCHON   Comment   Comme		☐ Initial			50	0 Barneg	at B	oulevard N.	Building 100						
DCA   Cancellation										1		N 42 . 18			
Name of Facility Where Abatement is Taking Piace (3)   Steet Address   Steet Address   Square Feet   # of Floors   Sldg. Age   Square Feet   # of Floors   Squar	- The second sec			ina	Ba	rnegat, N	J 08	3005		ASE					L &
Cancellation   Joe Steinhelser   FACILITY INFORMATION				irig		13.70				Telephone I	STORE TO NO.		10.00	ner majoritation	11405-1140
Name of Facility (*) Commercial    Type of Facility (*)   School (K-P)   School (K-P)   Street Address   Street Address   Subchapter 8 (Other than K-12)   Subchapter 9 (Other than K-12)   Subchapter 9 (Other than K-12)   Subchapter 8 (Other than K-12)   Subchapter 9 (Other than K-12)   Street Address					Jo	e Steinhe	eiser	•		reiopriorie	Marribe	.1			
Name of Facility (*) Commercial    Type of Facility (*)   School (K-P)   School (K-P)   Street Address   Street Address   Subchapter 8 (Other than K-12)   Subchapter 9 (Other than K-12)   Subchapter 9 (Other than K-12)   Subchapter 8 (Other than K-12)   Subchapter 9 (Other than K-12)   Street Address					FA	CII ITY II	VFO	RMATION		1					
	Name of Facility Where A	Abatement is	Taking Pla	ce (3)	.,,	IOILITT II	11 0	MINTON	Type of Facility	(4)					
Sitcet Address   Solutions   Street Address   Street Ad									11233	305					
Dimmes, etc.   Dimmes, etc.   Dimmes, etc.   Dimmes, etc.   Square Feet   # of Floors   Bidg. Age	Street Address								☐ Subchapter	8 (Other than I	K-12)				
Square Feet	6303 Browning Roa	d							Other (i.e., p	rivate and con	nmerci	al bui	lding	s,	
Pennsauken  County Code (7)(STATE USE ONLY)  Current Use (Prior if being demolished)  County Code (7)(STATE USE ONLY)  Current Use (Prior if being demolished)  Name of Monitoring Firm Hired by Building Owner (8)  Bio Terra Solutions  Street Address  P.O. Box 1224  City, State, Zip Code  City, Stat	City (5)											DIA	α Λ.		
Name of Monitoring Firm Hired by Building Owner (8)   ASCM No.   Name of Abatement Contractor (9)   ALL PRO MANAGEMENT LLC	Pennsauken								oquaic i cct	# 01 1 10015		Diu	y. Ay	je	
AscM No.   Name of Monitoring Firm Hired by Building Owner (8)   AscM No.   Name of Abatement Contractor (9)	County (6)				Cou	nty Code (	7)(ST	ATE USE ONI YI	Current Use (Dr	ior if heing dor	nolich	ed)			-11/
Sircet Address P.O. Box 1224  City, State, Zip Code Union, NJ  Telephone No. 973-494-3762  Starct Late (10) OB / 13 / 18 OCcupancy Status During Abatement (Check only one)  Facility Closed/Work (Check all that apply)  Scope of Work (Check all that apply)  2 3 sf or ≥3 if	Camden					, (	,,_,,		34 036 (F)	ioi ii beilig del	TORSTR	su)			
Sircet Address P.O. Box 1224  City, State, Zip Code Union, NJ  Telephone No. 973-494-3762  Starct Late (10) OB / 13 / 18 OCcupancy Status During Abatement (Check only one)  Facility Closed/Work (Check all that apply)  Scope of Work (Check all that apply)  2 3 sf or ≥3 if	Name of Monitoring Firm	Hired by Buil	ding Owne	r (8)	ASCM	No.	Na	me of Abateme	ent Contractor (9)						_
Street Address   27 Outwater Lane   28 Outwater Lane   29 Outwater Lane   20 Outwater L			esta <del>s</del> uccario	. ,	NORTH THE				8.5						
City, State, Zip Code Union, NJ  Project Manager for Monitoring Firm Rick Eustaquio  973-494-3762  973-928-4888  Telephone No. 973-928-4888  Telephone No. 973-928-4888  Telephone No. 973-928-4888  Telephone No. 1188  Start Date (10) 06 / 13 / 18 07 / 15 / 18 07 / 15 / 18  ALL PRO MANAGEMENT LLC  Decupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: AM	Street Address						-								
City, State, Zip Code Union, NJ  Telephone No. Rick Eustaquio  Start Date (10) OB / 13 / 18 Occupancy Status During Abatement (Check only one)  Facility Closed/Vacated During Entire Perdo of Abatement Datement: AM-PM-AM  Renovation Demolition  Respect Mon-Exempted (") and Non-Friable Procedure  Respectively Selected (") and	P.O. Box 1224								Lane						
Union, NJ   Garfield, NJ 07026	City, State, Zip Code								Property of the Parket of the						
Telephone No. 973-494-3762 973-928-4888 1188  Telephone No. 973-928-4888  Telephone No. 973-928-4888  Telephone No. 973-928-888  Telephone N	Union, NJ														
Rick Eustaquio    973-494-3762   973-928-4888   1188	Project Manager for Monit	toring Firm		Te	lephone	No.				License No	)				
Start Date (10)	Rick Eustaquio				973-494	1-3762				The control of the control	<i>,</i> .				
Street Address   Str	Start Date (10)	15	Scheduled	Comp	letion Da	ate (11)	Na	me of OSHA M	onitor	1					
Street Address   Stre	06 /13 /	18	07	/	15 /	18	A	ALL PRO MA	NAGEMENT L	LC					
Second	Occupancy Status During	Abatement (	Check only	one)			-								
Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement:AMPMIPMIAM	□ Facility Closed/Vacate	d During Enti	re Period o	of Aba	ement				ane						
Scope of Work (Check all that apply)	☐ Abatement Performed	Outside of No	ormal Faci	lity Ho	urs - Des	scribe									
Scope of Work (Check all that apply)	Time of Abatement:	AM	PM/	PI	Λ- <u> </u>	_AM	1 33	1940 - 내용 1955 - 1951 - 1951							
Second 1	Scope of Work (Check all	that apply)			3-11-E										
Demolition   Signature   Demolition   Signature   Details   Demolition   Signature   Details   Demolition   Signature   Details   Demolition   Signature   Details   Details   Demolition   Signature   Demolition   Signature   Demolition   Signature   Demolition   Signature   Demolition   Signature   Demolition   Signature   Demolition   Demolition   Signature   Demolition   Demolition   Signature   Demolition   Demolition   Signature   Demolition   Demolition   Demolition   Description of   Abatement Type   Abatement Type   Abatement Type   Abatement Type   Description of   Asbestos Containing Material (ACM)   Amount   Signature   Abatement Type   Abatement Type   Description of   Asbestos Containing Material (ACM)   Amount   Signature   Signature   Signature   Demolition   Signature   Dem	7 > 3 of or > 3 if									ative Pressure	Э				
Asbestos-Containing Material (ACM)  Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A  Room 1  Room 2- Chapel  Room 3  Room 4  Room 3  Room 4  Room 5  Room 5  Room 7  Room 8  Room 9  Roo	≥160 sf or ≥260 lf		7.00												
Asbestos-Containing Material (ACM)  Asbestos-Containing Material (ACM)  TO BE ABATED IN Facility (13)  Yes No N/A  Room 1  Room 2- Chapel  Room 3  Room 3  Room 3  Room 3  Room 4  Room 4  Room 5  Room 5  Room 5  Room 7  Room 8  Room 9  Room 9  Room 9  Room 9  Room 1  Room 2- Chapel  Room 3  Room 4  Room 6  Room 6  Rogistered Waste Hauler Rowark Carting  Room 6  Room 6  Room 6  Room 7  Room 7  Room 8  Room 9  Roo								⊠ Non-Exer	npted (*) and No	n-Friable Proc	edure				
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)  Room 1  Room 2- Chapel Room 3  Room 3  Room 3  Room 3  Room 4  Room 4  Room 5  Room 5  Room 7  Room 8  Room 9  Room	1											Aba	teme	nt Ty	/pe
Completed By (Print or Type)   Title   Stinatorny, VAT, or other miscellaneous)   SF or LF   Signature   Signature   Signature   Signature   Signature   Signature   Signature   SF or LF   Signature   Signature   SF or LF   SF or			n U			Ashe	etne			Amazunt	Ī	Z.	R	ш	m
Completed By (Print or Type)   Title   Stinatorny, VAT, or other miscellaneous)   SF or LF   Signature   Signature   Signature   Signature   Signature   Signature   Signature   SF or LF   Signature   Signature   SF or LF   SF or	TO BE ABA	TED	, N							FERT CON ENGINEER		ome	pai	ncar	Clo
Room 1    Pipe Insulation- Elbows/Fittings   15 Fittings		у	"									val	7	lusc	sure
Room 2- Chapel	(10)		Yes			1	OU	ner miscellane	ous)					ate	W
Room 2- Chapel	Room 1			-	1	Pipe Ins	sula	tion- Elbows	/Fittings	15 Fitting	18	M	$\Box$		П
Room 3	Room 2- Chapel										-	-	귀		
Room 3	Room 3					1	_			1000					
Newark Carting  Name of Registered Waste Hauler Newark Carting  Name of Registered Landfill Name of Registered Lan	Room 3			-			- filmou		, ittiligs	<del>_</del>		_	-		
Newark Carting  Hauler ID No. 02383  As Needed  Disposal Date  Newark, NJ  TBD  Bethlehem, PA  Signature  Allen Monchik  Project Menager		e Hauler		그닉		72.52.53			Name of Davi	200000000000000000000000000000000000000			Ц	Ш	
Disposal Date  Newark, NJ  Completed By (Print or Type)  Allen Monchik  Disposal Date  Disposal Date  City, State  Bethlehem, PA  Date  Date		o i idulot					15000000								
Newark, NJ  TBD  Bethlehem, PA  Completed By (Print or Type)  Title  Allen Monchik  Project Moncor  Allen Monchik  Date							A	s Needed		nem Landfil	11				
Completed By (Print or Type)  Title  Signature  Date  Date								sent today a sour recov							
Allen Monchik	2.50		1				T		Bethlehem	, PA					
Allen Monchik Project Manager Allen Monchik 6/12/18		pe)		7550772					57		Date	ğ.			
	Allen Monchik		Projec	ct Ma	nager			Allen	Monchik		6/1	2/18	3		



				(Pu	rsuan	t to NJA	C 8	60 and 5:1	6)	In E	C	3	7	V	
Date of Notification (1)		-			Name	of Building	T Ow	ner/Operator (	(2)		(c) (c)		П	1.7	
06/	12 /	18	- 3			Iters Gro		neiroperator (	(2)			a .			- Marine and
Agencies Notified	Type Notifica	ation			Street	Address					JUN	1/	20	118	
⊠ EPA	☐ Initial						t Re	vulovard N	Building 100	1					
☑ DOLWD		i						Julevalu IV,	building 100	1 1					
☑ DOH	Amendme	ent # <b>1</b>				State, Zip C				ASB	ESTO				_ &
DCA	☐ Emergen		ding			negat, No		005		Talanhara	LICE	NS	ing	u war nigeri.	/3, TRE PROF
(NJAC 5:23-8)	justification   Description   Description					Steinhe				Telephone N	lumber				
					FAC	CILITY IN	FOR	RMATION							$\neg$
Name of Facility Where A	batement is T	aking Pl	ace	(3)	Circo				Type of Facility	(4)					$\neg$
Commercial				. ,					School (K-1	0.00					1
Street Address									☐ Subchapter	8 (Other than K	(-12)				
6303 Browning Roa	d									private and com	mercial	bui	Iding	3,	
City (5)									homes, etc.			DI.		100	
Pennsauken									Square Feet	# of Floors		Bla	g. Ag	e	
County (6)					Cour	hy Codo /7	V/CTA	TE USE ONLY)	Current Use (P	rior if heire d	a a li a b	1			
Camden					Coun	ty Code (/	)(31A	TE USE ONLY)	Current Use (P	rior if being den	nolished	)			
Name of Monitoring Firm	Hired by Ruile	lina Oum	or /0	2) [	ASCM	No	No	no of Abota	nt Contractor (0	Λ.		_			
Bio Terra Solutions		ing Own	ici (8	"	HOUN	NO.			ent Contractor (9	TG:					
Street Address									NAGENIENI	-LC					
P.O. Box 1224								eet Address							ĺ
								7 Outwater							
City, State, Zip Code								, State, Zip Co							
Union, NJ								arfield, NJ	07026						
Project Manager for Monit	toring Firm				phone I			ephone No.		License No	).				
Rick Eustaquio					3-494			73-928-4888		1188					
Start Date (10)	0.00	chedule					Nan	ne of OSHA N	lonitor						
06 /13 /	18	_07	_ /	15	_ / -	18	A	LL PRO MA	NAGEMENT L	LC					
Occupancy Status During							Stre	eet Address							$\neg$
□ Facility Closed/Vacate							2	7 Outwater	Lane						1
Abatement Performed							City	, State, Zip Co	ode						
Time of Abatement:	AM	PM/_		_PM-		AM	G	arfield, NJ	07026						- 1
Scope of Work (Check all	that apply)														$\neg$
☐ >3 sf or >3 lf			Don	ovati					tainment with Ne	gative Pressure	9				
≥160 sf or ≥260 lf				nolitio				☐ Mini-Enc	g Procedure						- 1
					95				mpted (*) and N	on-Friable Proc	edure				
2 880			10.00	Locat	9783-040							Aba	teme	nt Ty	ре
Location Asbestos-Containing N		,		ormai Sole		A=1-	ntos (	Description of		A	7	D T	D I	ш	m
TO BE ABA		,	Mair	ntena	nce/	(i.e	the	Containing Ma rmal systems	insulation	Amount (Specify		Removal	Repair	Encapsulate	Enclosure
IN Facilit		1	Custo		Staff?		s	urfacing, VAT	, or	SF or LF)		EVA	7	nsc	sur
(13)		V	es	(12) No	N/A	1	oth	ner miscellane	ous)					late	O
Room 1				П	N/A	Pine Inc	sulat	tion- Elbows	/Fittings	15 Fitting	ie F	ZI	П		П
Room 2- Chapel								tion- Elbows		18 Fitting		<u> </u>		니	믬
Room 3								tion- Elbows		20 Fitting		ZI		님	님
Room 3			_			VAT/Ma	i i i i i i i i i i i i i i i i i i i		on ittiligs	150 SF	-			믬	믬
Name of Registered Wast	le Hauler		- 1		JDEP \				Nome of D	0.000		X]	Ц	П	Ц
Newark Carting	ic i laulei			9337	auler I		Was	oic Yards of ste		istered Landfill	11				
ACTIVITIES OF THE PARTY OF THE					02383		Α	s Needed		lehem Landfi	11				
City, State								posal Date	City, State						
Newark, NJ							T	BD	Bethleher	n, PA					
Completed By (Print or Ty	/pe)	Title						Signature			Date				
Allen Monchik		Proj	ect	Man	ager			Allen	Monchi	6	6/12	1/1	8		

# State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8-60-7 AND 12:1207) CONTINUATION SHEET



				6303 Browning Road		Abatemen	nt Type	1 TO THE REST OF THE PARTY.	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Faculty (13)	No.	s Locati rmally Solely I stenanci al Staff	Used by ce/Cust	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	E n c a p s u l	E n c l o s u r e
Room 7			Х	Pipe Insulation Elbows/Fittings	12 Fittings	Х			
Room 7			Х	VAT/Mastic	150 SF	Х			
Patio			Х	Exterior Stucco Paneling	200 SF	Х			
Patio			Х	Exterior Caulk assoc. with Stucco Paneling	200 SF	х			
Kitchen			Х	Pipe Insulation Elbows/Fittings	25 Fittings	Х			
Room 4			Х	Pipe Insulation Elbows/Fittings	20 Fittings	Х			
1st Floor- Hallway			Х	Pipe Insulation Elbows/Fittings	20 Fittings	Х			
Room 8- Restroom			Х	Glue Dots Assoc. with Mirrors	20 SF	Х			
Room 15- Shower Room			Х	Caulk Assoc. with Tub/Shower	75 LF	Х			
Boiler Room			Х	Pipe Insulation Elbows/Fittings	10 Fittings	Х			
Boiler Room			Х	Fire Door	15 SF- 1 Door	Х			
Boiler Room			Х	Internal Boiler Insulation	25 SF	Х			
Exterior			Х	Stucco Paneling	3,000 SF	Х			
Exterior			Х	Caulk Assoc. with Stucco Paneling	1,000 LF	х			
Exterior			Х	Caulk Assoc. with Vent Cover	75 LF	Х			1
Exterior			Х	Roofing Materials	4,500 SF	Х	I months and		
Exterior (Main Entrance Overhang)			х	Plaster Ceiling assoc. with Soffit	250 SF	х			
	T								

Completed by: (Print or type)	Title:	Project Manager	Signature:	Date:
Allen Monchik			Allen Monchik	6/12/18

"OPEN NOTIFICATION"

	PAID	ı			to NJAC					7	E	C	E		7 [	7 7 7	The state of the s
Date of Notification (1) 6/13/2018				Name of PSE&	f Building ( G	Owner	/Operator	(2)		3		HIAI	1 ,	20	10	Andreas in the particular of the control of the con	Andrew Comments
Agencies Notified	Type Notification			Street A	ddress HADLEY	' RO	4D			A STATE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN T	,	JUN	1 2	20	10	-	1
DEP X DOL	Initial Amended Amendment #			City, Sta	ite, Zip Co	de		7068		a di	ASB			ONTI	ROL	<u>!</u> &	100
ĭ DOH	Emergency (ir justification)			Name of	f Contact			7,000			27/28/23/11/7	phon	CENS e Nun	ber			
DCA	Cancellation				REY GA						856	628	3-247	7	040		
Name of Facility Where PSEG - ESS			)		10 E		MH		of Facilit					00,000			
Street Address	AY MONI		2	VD		1	כונ		School (k Subchap Other (i.e	ter 8	(Othe				lings,	home	es,
City (5) NEW!	4 RK		02		•				etc.) re Feet		# of N/A	Floor	S	100000	ldg. A	ge	
County (6) ESSEX				County (	Code (7) USE ONLY,			Curre N/A	nt Use (I	Prior	if bein	ng der	nolish	ed)			
Name of Monitoring Firm ENVIRONMENTAL		wner (8)		ASCN 004	/ No.*				tement C				RICA	, INC			
Street Address 64 BROAD STREE	T							Addres	ss EHEA[	) A\	/E.						
City, State, Zip Code MATAWAN, NJ 077					,		00 55275355500		ip Code IVER, I	NJ 0	8882	2					
Project Manager for Mor TOM GEIGER	nitoring Firm			Telephor	ne No. 90-2217		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	hone No 432-8				Licer 011	nse N	0.			
Start Date (10) 6/25/2018		Schedule 9/30/20		npletion I	Date (11)				HA Monit		OF A	ME	RICA				
Occupancy Status Durin				21 - 1111-2			Street	Addres	SS							1100	
	ated During Entire Pened Outside of Norma OUTDOORS						City, S	State, Zi	EHEAD ip Code IVER,			2			-1		
Scope of Work (Check A							1 300	71111	IVLIX,	140 0	,000						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit				2	Mir Glo	l Contair ni-Enclos ovebag P n-Exemp	ure Proce	dure					е	
		1	Locat							1				_	Abate Ty	ment	
Location Asbestos-Containing TO BE AB In Faci (13)	Material (ACM) ATED lity	Use Ma Cus	Normal ed Sole iintena todial ( (12)	ely by nce/ Staff?		tos Co therm sur	Description ontaining I all system facing, VA r miscella	Material is insula AT, or			(S	nount pecify or LF	,	Removal	Repair	Encapsulate	Enclosure
OUTDO	000	Yes	No	N/A		DID	- 0014	CTIC		-	20	015	_	37			
OUTDO	ORS		X			PIPE	E SOMA	ASTIC			20	00 LF		X			
Name of Registered Was	ste Hauler		100	JDEP W		1	ic Yards		Name	of Re	egiste	red La	andfill				
WAST MANAGEME	ENT ————————————————————————————————————		1	lauler ID 1125	IVO.	API	Vaste PX. 10		FAIR		S						
City, State ELIZABETH, NJ						TB	774		City, S MOR	RIS							
Completed by CAROL RAIMO		Title OFF	ICE N	IGR.			Signatur C	a	cal X	la	·m	0	6/	te 13/20	18		

CK# 9012 PAID

"OPEN	NOTIFICATION'
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CK# 9012	N		CATION	OF ASBES	STOS	ABATE		IT	m	E (	G [		$\mathbb{V}$		
Date of Notification (1) 6/13/2018			Name of PSE&0	Building O	wner/0	Operator	(2)	:::::::::::::::::::::::::::::::::			IIN	1 /	201	Q	Towns the Control of
Agencies Notified Type Notification			Street Ad 4000 H	ddress ADLEY	ROA	.D	72.30				UP	1	(	9	Lopest
EPA Initial DEP Amended Amendment #_				te, Zip Cod H PLAINI		D, NJ 0	706	68	De la companya de la	ASBE	STO	S CC ENS	ONTF	IOL	À
Emergency (inc justification)  DCA Cancellation	cluding	11.		Contact EY- GAZ	ICK					lephone 6-628-					
Name of Facility Where Abatement is Taking F	Place (3	8)	FACII	LITY INFO	RMAT	ION	Tv	pe of Facility	(4)						
PSEG- MHIOA & M		-						School (K-	12)		14.40				
RR TRACKS OFF	BLA	ANC	HAR	D S	<b>ア</b> 。		×	etc.)	private	& comm	ercial		900000		3,
City (5) NEWARK							Sq N/	uare Feet A	# 0 N/	of Floors A		N.	dg. Aq /A	je	
County (6) ESSEX			County C	Code (7) USE ONLY)	2000		Cu N/	irrent Use (Pri /A	ior if be	ing dem	olishe	d)			
Name of Monitoring Firm Hired by Building Ov ENVIRONMENTAL TACTICS	mer (8)		ASCM 0045					batement Co SYSTEM			RICA,	INC	;		
Street Address 64 BROAD STREET				46		Street 396		iress IITEHEAD	AVE.						
City, State, Zip Code MATAWAN, NJ 07747						700.00		, Zip Code RIVER, N	J 0888	32					
Project Manager for Monitoring Firm TOM GEIGER		- 1	Telephor	ne No. 90-2217		Teleph 732-		No. 2-8350		Licens 0111		8)			
	chedule /30/20		pletion (	Date (11)				SHA Monitor SYSTEM		AMER	RICA				
Occupancy Status During Abatement (Check	Only Or	ne)				Street		iress IITEHEAD	Δ\/E	=					
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Normal Other – Describe: OUTDOORS					_	City, S	State	, Zip Code I RIVER, N		82					
Scope of Work (Check All That Apply)						1 000									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renovai Demoliti				×	-	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure					9	
		Locati						TTOTT EXOTIPIE	() ()	14 110111	1,000		Abate Ty	ment	
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility  (13)	Use Ma Cus	Normall ed Solel aintenar todial S (12)	y by nce/ staff?		os Cor herma surfa	escription ntaining N al system acing, VA miscellar	Mate is ins AT, c	or	(	Amount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
OUTDOORS	Yes	No X	N/A		PIPE	SOMA	ST	TC TC	2	200 LF		Х			
Name of Registered Waste Hauler WAST MANAGEMENT		Н	JDEP W auler ID 1125	2000	of W	c Yards aste 2X. 10		Name of		tered La	ndfill				
City, State ELIZABETH, NJ			, 120			osal Date	9	City, Sta		LE, PA	Α				
Completed by CAROL RAIMO	ICE N	IGR.			Cianatus	e /	Malx			Date	e 3/20	18			

"OPEN NOTIFICATION"

CKH	3008	PA		CATION	ate of Nev I OF ASB to NJAC	ESTOS	ABATE			E	CE			Communication of the Communica	Contraction of the Contraction o
Date of Notification (1) 6/13/2018				Name o	f Building G	Owner/C	Operator	(2)		The section of the section of	JUN 14		8	1	
Agencies Notified	Type Notification	h Đ		Street A 4000 l	ddress	′ ROAI	D		1:1-13	The second secon					Manual and
DEP X DOL	Amended Amendment				ate, Zip Co		), NJ 0	7068		ASE	LICENS	OFF SHy L	HOL	Sk 	
DOH DCA	justification) Cancellation	•			f Contact REY GA	ZICK	-200			2010 (0)	ephone Nur 6-628-24				
				FACI	LITY INFO	ORMATI	ON								
Name of Facility Where PSEG - M .  Street Address	Abatement is Takin H 9	ig Place (3	)	9,71,777-1					of Facility (4 School (K-1 Subchapter	2)	er than K-12	2)			
RRTRAC	KSON	31	L:	RE.	114	CT		1	Other (i.e. p etc.)	rivate 8	& commerci	al build	dings,	home	s,
City (5)	UARK			100	.,,,				re Feet	# of N/A	f Floors A	250	ldg. A	ge	
County (6) ESSEX	0,11-1-				Code (7) USE ONLY,	)	_	Curre N/A	nt Use (Prid	or if bei	ng demolish	ned)			
Name of Monitoring Firm ENVIRONMENTAL		Owner (8)		ASCN 004					tement Con		(9) AMERICA	A, IN			
Street Address 64 BROAD STREE	 ET							Addres	ss EHEAD A	AVE.					
City, State, Zip Code MATAWAN, NJ 07	747								ip Code IVER, NJ	0888	32				
Project Manager for Mo TOM GEIGER	nitoring Firm			Telepho 732-29	ne No. 90-2217		100000000000000000000000000000000000000	none No 432-8			License N	0.			
Start Date (10) 6/25/2018		Schedule 9/30/20		pletion	Date (11)				A Monitor	S OF	AMERICA	Α			
Occupancy Status Durin	ng Abatement (Ched	ck Only On	ie)	tier series			Street	Addres	SS						77
Abatement Perform	cated During Entire ned Outside of Norn	Period of A	Abatem Hours	nent					EHEAD A	AVE.					
Other - Describe:							SOU	ITH R	IVER, NJ	0888	32	7.0			
Scope of Work (Check A	All That Apply)	_					<u> </u>	7							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit				×	Min Glo	i-Enclosure vebag Proc	edure	Negative F			9	
	<del></del>	le	Locati	on			- In	1 1401	PEXCHIPICO	i ( ) air	u Non-i nac	10110	Abate		
Locatio	n of	l l	Normal	ly		De	scription	of .					Ту	pe	
Asbestos-Containing TO BE AB		Ma	d Sole intena	nce/		tos Cont					mount Specify	R	_	Enc	Щ
In Faci	ility	Cust	odial 9 (12)	Staff?	(	surfa	cing, VA	T, or			or LF)	Remova	Repair	Encapsulate	Enclosure
(13)		Yes	No	N/A		otheri	riiscellai	ieousj				/al	_	ılate	ure
OUTDO	ORS		X			PIPE	SOMA	STIC		20	00 LF	X			
					- //										
Name of Registered Wa			0.00	JDEP W		Cubic of Wa	Yards ste		The state of the s		ered Landfill			vo	
WAST MANAGEME	:N I			1125		APP	K. 10		FAIRLE						
City, State ELIZABETH, NJ						Dispo	sal Date		City, State MORRI		E, PA				

Completed by

CAROL RAIMO

Title

OFFICE MGR.

Date

6/13/2018

Signature

CK# 9015

"OPEN NOTIFICATION"

CK#9015	N		CATION	te of New OF ASBE o NJAC 8	STOS	ABATE		For management		E C	E		$\mathbb{V}$	Ī	
Date of Notification (1) 6/13/2018			Name of PSE&C	Building O	wner/	Operator	(2)		X The second	1115	1 1	1	0.40	•	
Agencies Notified Type Notification			Street Ad	idress IADLEY	ROA	.D		3-3-9		JU	4 1	4 /	2018		
EPA X Initial DEP Amended Amendment			City, Stat	e, Zip Cod H PLAIN	ie		7068	-	A	SBEST	OS (	CON	TRO	i	
Emergency (i justification)  DCA  Emergency (i justification)  Cancellation	ncluding	15.93	Name of JEFFR	Contact EY GAZ	ICK					ephone 1 6-628-2	Numb	er	Constitution.	(6)	
Name of Facility Where Abatement is Taking	Place (3	1	FACIL	ITY INFO	RMAT	ION	Type	of Facility (	4)						_
PSEG - MH 9A	X A5.00							School (K-1 Subchapter	2)	er than K	(-12)				
34 MANUFAC	Tul	ER	s	PIAC	E	8		Other (i.e. petc.) re Feet		comme Floors	ercial		ngs, l		s,
City (5) NEWARK							N/A	ie reet	N/A			N/		,,,	
County (6) ESSEX			County C	ode (7) ISE ONLY)			Curre N/A	nt Use (Pri	or if bei	ng demo	olishe	d)			
Name of Monitoring Firm Hired by Building C ENVIRONMENTAL TACTICS	wner (8)		ASCM 0045					tement Cor			ICA,	INC			
Street Address 64 BROAD STREET					3	271533555000	Addres WHIT	ss EHEAD /	AVE.						
City, State, Zip Code MATAWAN, NJ 07747				*				ip Code IVER, N	J 0888	32					
Project Manager for Monitoring Firm TOM GEIGER		100	Telephor	ne No. 10-2217			none N 432-8			Licens 01111					
Start Date (10) 6/25/2018	Schedule 9/30/20		npletion [	Date (11)		110070000		HA Monitor SYSTEM		AMERI	ICA	1		4-04-	
Occupancy Status During Abatement (Chec	k Only Or	ne)					Addres	ss EHEAD /	ΔVF						
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: OUTDOORS						City, S	State, Z	ip Code		32		N-			
Scope of Work (Check All That Apply)						1000						-	-		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit					Min	II Containm ni-Enclosur ovebag Pro n-Exempte	e cedure					e	
	Is	Locat	ion					III EXCITIPIO	<u> </u>				Abate Ty	ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normal ed Sole iintena todial ( (12)	ely by ince/ Staff?		os Co therma surf	escription ntaining I al system facing, VA miscella	Matéria is insula AT, or	ation,	(	mount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A											(D	
OUTDOORS		X			PIPE	SOMA	ASTIC	,	2	00 LF		Х			
Name of Registered Waste Hauler WAST MANAGEMENT		1	NJDEP W Hauler ID 1125		of W	ic Yards /aste PX. 10		Name of FAIRL		ered Lar	ndfill				
City, State ELIZABETH, NJ	5.9				Disp	osal Date D	е	City, Sta MORR		LE, PA	(				
Completed by CAROL RAIMO	MGR.			Signatur	e face	el K	sin	re)	Dat 6/1	e 13/20	)18				

"OPEN NOTIFICATION"

11/40		A TENY		94	ata of Nov	v loreov	v			OPEN	INC	) [		A	IIU
C/C # 90	0/6 1/	ALL	NOTIF (P	ICATION ursuant	OF ASBI	ESTOS 8:60 and	y ABATE d 12:120	MENT D)		EC	E	Ŋ	<i>[</i> ]	200	
Date of Notification (1) 6/13/2018				Name of PSE&	f Building ( G	Owner/C	perator	(2)		11	1 4	20	10	Pacifical Services	The same of the sa
Agencies Notified	Type Notification	37		Street A 4000 h	ddress HADLEY	ROAL	D		L .	. 00		20	110	To the same of the	
DEP X DOL	Amended Amendment				ite, Zip Co H PLAIN		D, NJ 0	7068		ASSESTO	S CC			&	
Ď DOH DCA	Emergency justification) Cancellation	_			f Contact REY GAZ	ZICK				Telephone 856-628-		г			
				FACI	LITY INFO	RMATI	ON				-				
Street Address	H 9B	u		10				☐ So				uild	inas	home	25
City (5)	KS NE	AR 9	1/	KOA	NOKE	EA	VE.	Square	2.)	# of Floors	or orar o	07.00	dg. A		
NEU	DARK							N/A		N/A		N	/A		
County (6) ESSEX				County (	Code (7) USE ONLY)			Current N/A	Use (Prio	r if being demo	olished	)			
Name of Monitoring Firm ENVIRONMENTAL		Owner (8)		ASCN 004			300000000000000000000000000000000000000		ment Cont	ractor (9) OF AMER	ICA, I	NC	;		
Street Address 64 BROAD STREE	 T							Address	HEAD A	VE.					
City, State, Zip Code MATAWAN, NJ 07	7 <b>4</b> 7					•		State, Zip	Code /ER, NJ	08882					
Project Manager for Mor				Telepho	ne No. 90-2217		Telepi	none No. 432-83		Licens 0111					
Start Date (10)					Date (11)		Name	of OSHA	Monitor			-72-			
6/25/2018 Occupancy Status Durin	og Abatamant (Cha	9/30/2	5.35 <u>.</u>				_ E_ 3	QUE SY Address		OF AMER	ICA	_			
Facility Closed/Vac				nent			9515000000		HEAD A	VE.					
Abatement Perform  Other – Describe:	ned Outside of Norr				El .	_	85.0	State, Zip JTH RIV	Code /ER, NJ	08882					
Scope of Work (Check A	All That Apply)						_	_				30) 1	- 59		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demoli				>	Mini- Glove	Enclosure ebag Proce					9	
		le	Locat	ion						//			Abate		
Locatio			Norma	lly			scription						Ту	ре	
Asbestos-Containing TO BE AB In Faci (13)	ATED lity	Ma	ed Sole aintena todial ( (12)	nce/		thermal surfa				Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure
0.177.0		Yes	No	N/A		2122		0710		20215	_	_		CD	
OUTDO	ORS		X			PIPE		200 LF	- 12	X					
				-											
											$\top$				
Name of Registered Wa	ste Hauler		5.4	JDEP W		15/15/10/15/16/16	Yards		Name of F	Registered Lan	dfill				
WAST MANAGEME	ENT			Hauler ID 1125	No.	of Wa	X. 10		FAIRLE						
City, State ELIZABETH, NJ				Dispo: TBD	sal Date		City, State MORRIS	SVILLE, PA							
Completed by		Title				5	Signatur	e /	1		Date			0,523977	C-17-

OFFICE MGR.

6/13/2018

CAROL RAIMO

K# 901	17			Sto	ata of Nov	ı larası				"OPEN	I NO	T	FIC	AT	10
JR FI 101	P	AD		CATION	ate of New OF ASBE to NJAC 8	STOS	ABATE		T STATE	)EG	E		V	E	m
Date of Notification (1) 6/13/2018				Name of PSE&C	Building (	Owner/C	perator	(2)		JUN JUN	V 1 a	21	719	SE PERSONAL SE SE	-
	Type Notification			Street Ad 4000 H	ddress HADLEY	ROA	)	Wei-20	- Page				210	Merchania	7000
DEP  DOL	Initial Amended Amendment				te, Zip Co		), NJ 0	706	8	ASBEST	OS CO	)NT	ROL	. &	
DOH DCA	Emergency ( justification) Cancellation				Contact REY GAZ	ZICK				Telephone			A C VARIO		<del></del>
				FACIL	LITY INFO	RMATI	ON								
Name of Facility Where Al PSEG -		g Place (3	)					Тур	e of Facility (4 School (K-1						
Street Address  RR TRACKS	NEAR	66	MA	laju Fi	ACTUR	CERS	PI	×	Subchapter Other (i.e. p etc.)	8 (Other than rivate & comm	n K-12) mercial l	ouild	ings,	home	es,
City (5)	WARK		- /11	10 577				Squ N/A	are Feet	# of Floors	S	0.55 (2)	dg. A /A	ge	
County (6) ESSEX		`		County C	Code (7) JSE ONLY)	5 <del>1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1</del>		Cur N/A		or if being den	nolished	1)			
Name of Monitoring Firm I ENVIRONMENTAL		Owner (8)		ASCM 0045					systems	tractor (9) S OF AMER	RICA,	INC	;		
Street Address 64 BROAD STREET				L			Street 396		ess TEHEAD A	AVE.					
City, State, Zip Code MATAWAN, NJ 07747  City, State, Zip Code SOUTH RIVER, NJ 0888															
Project Manager for Monit TOM GEIGER	oring Firm			Telephor 732-29	ne No. 90-2217		Teleph 732-		No. -8350	Licen 0111	nse No. 11				
Start Date (10) 6/25/2018		Schedule 9/30/20		npletion [	Date (11)				SHA Monitor SYSTEMS	S OF AMER	RICA				
Occupancy Status During		5					Street		ess TEHEAD A	AVE.					
Facility Closed/Vaca Abatement Performe Other – Describe: O	d Outside of Norm					_	City, S	State,	Zip Code RIVER, NJ						
Scope of Work (Check All	That Apply)											-			
× ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		× F	Renova Demoliti	tion ion				d N G	ull Containme lini-Enclosure Blovebag Prod		tive Pre	ssur	e		
							×			(*) and Non-	Friable		3500-3310-3		01
Location	of	1	Locati	ly		De	scription	n of					Abate Ty	ement pe	
Asbestos-Containing I <u>TO BE ABA</u> In Facilit (13)	TED	Ma	d Solei intenar todial S (12)	nce/		thermal surfa	taining N system cing, VA niscellar	s insu AT, or		Amount (Specify SF or LF	,	Removal	Repair	Encapsulate	Enclosure
0.177		Yes	No	N/A		2122	00111	OTI		22215				fe	CD
OUTDOO	ORS		Х			PIPE	SOMA	1511	C	200 LF		X			
Name of Registered Wast	e Hauler			JDEP W		100000000000000000000000000000000000000	Yards		Name of	Registered La	andfill				
WAST MANAGEMEN	NT			auler ID 1125	No.	of Wa	<. 10		FAIRLE			21.11.1			
City, State ELIZABETH, NJ						TBD			City, State	e SVILLE, PA					
Completed by CAROL RAIMO		Title OFF	ICE N	IGR.		5	Signatur	/	1-0 80	(ma)	Date 6/13		18		

CK# 9018 State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 6/13/2018 PSE&G 2018 14 Agencies Notified Type Notification Street Address 4000 HADLEY ROAD EPA Initial ASBESTOS CONTROL & City, State, Zip Code DEP Amended LICENSING × DOL Amendment # SOUTH PLAINFIELD, NJ 07068 Emergency (including Name of Contact Telephone Number × DOH justification) JEFFREY GAZICK 856-628-2477 DCA Cancellation FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) PSEG -School (K-12) Subchapter 8 (Other than K-12) Street Address × Other (i.e. private & commercial buildings, homes, DANOKE AVE etc.) City (5) # of Floors Square Feet Bldg. Age N/A N/A N/A Current Use (Prior if being demolished) County (6) County Code (7) (STATE USE ONLY) **ESSEX** Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) **ENVIRONMENTAL TACTICS** 0045 UNIQUE SYSTEMS OF AMERICA, INC Street Address Street Address 64 BROAD STREET 396 WHITEHEAD AVE. City, State, Zip Code City, State, Zip Code MATAWAN, NJ 07747 SOUTH RIVER, NJ 08882 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. TOM GEIGER 732-290-2217 732-432-8350 01111 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 6/25/2018 9/30/2018 UNIQUE SYSTEMS OF AMERICA Occupancy Status During Abatement (Check Only One) Street Address 396 WHITEHEAD AVE. Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: OUTDOORS City, State, Zip Code SOUTH RIVER, NJ 08882 Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf Renovation Full Containment with Negative Pressure >160 sf or >260 lf

	ш,	, ciriont	1011		×		g Procedure mpted (*) and Non-Friabl	le Pro	cedur	re	
Location of	1000	Locati	20.000		Description of	F				ement ype	t
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Ma	d Sole intenar todial S (12)	nce/		stos Containing Mat thermal systems ir surfacing, VAT, other miscellaned	erial (ACN nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A					-		te	CD
OUTDOORS		Х			PIPE SOMAS	TIC	200 LF	Х			
Name of Registered Waste Hauler		397	JDEP W	Zija da	Cubic Yards	Nan	ne of Registered Landfill				
WAST MANAGEMENT		1 1 1 2	auler ID 1125	No.	of Waste APPX. 10	FA	IRLESS				

Title

OFFICE MGR.

Disposal Date

Signature

TBD

Completed by

ELIZABETH, NJ

CAROL RAIMO

City, State

Date

6/13/2018

City, State

MORRISVILLE, PA

Camo

"OPEN NOTIFICATION" CKH 9019 State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 6/13/2018 PSE&G Agencies Notified Type Notification Street Address U 4000 HADLEY ROAD EPA Initial City, State, Zip Code DEP Amended ASBESTOS CONTROL & × DOL Amendment # SOUTH PLAINFIELD, NJ 07068 LICENSING Emergency (including Telephone Number Name of Contact × DOH justification) JEFFREY GAZICK 856-628-2477 DCA Cancellation **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) PSEG -School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, × MOND etc.) City (5) # of Floors Bldg. Age Square Feet N/A N/A N/A County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) **ESSEX** Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) **ENVIRONMENTAL TACTICS** 0045 UNIQUE SYSTEMS OF AMERICA, INC Street Address Street Address 64 BROAD STREET 396 WHITEHEAD AVE. City, State, Zip Code City, State, Zip Code MATAWAN, NJ 07747 SOUTH RIVER, NJ 08882 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. TOM GEIGER 732-432-8350 732-290-2217 01111 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 6/25/2018 9/30/2018 UNIQUE SYSTEMS OF AMERICA Occupancy Status During Abatement (Check Only One) Street Address 396 WHITEHEAD AVE. Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code X Other - Describe: OUTDOORS SOUTH RIVER, NJ 08882 Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf Renovation Full Containment with Negative Pressure ≥160 sf or ≥260 lf Demolition Mini-Enclosure Glovebag Procedure × Non-Exempted (\*) and Non-Friable Procedure Abatement Is Location Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ Encapsulate TO BE ABATED (i.e. thermal systems insulation, (Specify Remova Repair Custodial Staff? In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Х **OUTDOORS** PIPE SOMASTIC 200 LF X

Completed by CAROL RAIMO	Title OFFICE MGR.	Signature Aral Laimo	Date 6/13/2018

Cubic Yards

APPX. 10

Disposal Date

of Waste

TBD

NJDEP Waste

Hauler ID No.

1125

ELIZABETH, NJ

City, State

C

Name of Registered Waste Hauler

WAST MANAGEMENT

Name of Registered Landfill

MORRISVILLE, PA

**FAIRLESS** 

City, State

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PAIL	1		CATION	ate of Nev I OF ASBE to NJAC 8	ESTOS	ABATE		D	E	C	E		<u> </u>		M
Date of Notification (1).			Name of	f Building ( G	Owner/C	perator	(2)		No. of Concession, Name of Street, or other Persons, Name of Street, Name of S	JUN	1 4	20	18	The state of the s	IJ
Agencies Notified Type Notification  EPA   Initial			Street A 4000 h	ddress HADLEY	ROAL	)		Tientrace	ASB	ESTO	SC	TIME	201	0	
DEP Amended Amendment #		_		ate, Zip Co H PLAIN		), NJ 0	7080		(Palmonton)	Lic	ENS	ING			The same of
□ DOH     □ DCA     □ DCA     □ Emergency (ii justification)     □ Cancellation	nciuaing			Contact EFF	No	VAI	<		Tele 90	phone	Num	ber 2-	07	184	7
Name of Facility Where Abatement is Taking	Diago /	2/	FACI	LITY INFO	RMATI	ON	Tunn of Fo	allih . (4)							
PS E&G  Street Address	Place (3	o) 						ol (K-12)	1	rthon	V 10\				
45 GARFIEL	-D	A	VE.	,			Other etc.)	apter 8 (i.e. pri	vate &	comm	ercia	l build	198		∋s,
JERSEY (	2:1							IA		Floors ル / ,	A		dg. A	-	
HUDSON				Code (7) USE ONLY)			Current Use		if bein ノ/ タ	-	olishe	ed)			
Name of Monitoring Firm Hired by Building O ENVIRONMENTAL TACTICS	wner (8)		ASCN 004				of Abatemer QUE SYST			519500	ICA	INC			
Street Address 64 BROAD STREET				54	v.		Address NHITEHE	AD A	/E.						
City, State, Zip Code MATAWAN, NJ 07747							tate, Zip Coo TH RIVEF		08882	2					
Project Manager for Monitoring Firm TOM GEIGER			Telephoi 732-29	ne No. 90-2217			one No. 432-8350			Licens 0111					
Start Date (10) 6/25/18	Schedule	ed Con	/	Date (11)			of OSHA Mo		OF A	MER	ICA	INC			
Occupancy Status During Abatement (Check							Address NHITEHE	AD A\	/E.						
Facility Closed/Vacated During Entire Pondatement Performed Outside of Normal Other – Describe:	al Facility	Hours	ient i		<u> </u>		tate, Zip Coo TH RIVEF		1888	2					
Scope of Work (Check All That Apply)					.//.85			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			-			1977	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolit					Full Cont Mini-Enc Glovebag Non-Exe	losure g Proce	dure					Э	
		Locati					_						Abate Ty	ment pe	
Location of Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Use Ma	ed Sole intenar todial S (12)	ly by nce/		os Cont thermal surfac		laterial (ACN insulation, T, or	1)	(S	nount pecify or LF)		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A				1	_						te	CD .
GUTDOORS		X		TRAM	PE	-	a	100		X					
Name of Registered Waste Hauler		I NI	JDEP W	lasta	Cubic	Varde	Non	ne of Re	nietor	ne I ha	dfill				
WASTE MANAGEMENT		Н	auler ID	\$195.0740 SEV	of Was		- FA	IRLES	or <del>a</del> nd a line of	ou Lai	iuiiii				
City, State ELIZABETH, NJ					Dispos	sal Date	City	, State DRRIS	VILL	E, PA					
Completed by CAROL RAIMO	Title OFFI	ICE N	IGR.		53.	innature		Ra	in	20	Date	6/	13,	/18	5



K 197		ı		CATION	ate of Nev OF ASBI to NJAC	ESTOS	ABATE			E	CE		E		Administration and the second
Date of Notification (1) 6/12/2018	2211.52 (4			Name of Hugo	Building Neu Re	Owner/0	Operator anager	(2) ment			JUN 1 d	2018	}		La Company
Agencies Notified	Type Notification			Street A 78 Jol	<sup>ddress</sup> nn Miller	Way,	Buildir	ng 78				eron involvedant Visco	~	i benever	AND LLAS
EPA DEP DOL	Amended Amendment				ite, Zip Co y NJ 07				99	ASB	LICENS		<del>3L &amp;</del>	Maringon No	
X DOH DCA	Emergency (i justification) Cancellation	ncluding			Contact Stanko	vic, Pr	oject N	Иanag	ger		ephone Nu 73-570-2				
				FACI	LITY INFO	DRMAT	ION						===		_
Name of Facility Where A Kearny Point Indus		Place (3	)						of Facility School (K-	12)	AUC 102.00	V=00			
Street Address 78 John Miller Way	, Building 78							×	Subchapte Other (i.e. ¡ etc.)	orivate (	& commerc	cial build	150		es,
City (5) Kearny								Squa 45,0	re Feet )00	# 0	f Floors		ldg. A 100	ge	
County (6) Hudson					Code (7) USE ONLY)	S			nt Use (Pri ehouse	or if bei	ng demolis	shed)			
Name of Monitoring Firm	Hired by Building C	wner (8)	'	ASCN	l No.		Name Che	of Aba ckma	tement Co rk Indust	ntractor rial	(9)			712	
Street Address								Addre: /lorga							
City, State, Zip Code									ip Code I 07871						
Project Manager for Mon	itoring Firm			Telepho	ne No.			none N -570-2			License 01334	No.			
Start Date (10) 6/23/2018		Schedule 8/4/20		pletion	Date (11)				HA Monitor rk Indust						
Occupancy Status During  Facility Closed/Vaca								Addres /lorga							
Facility Closed/Vaca Abatement Perform Other – Describe:	ed Outside of Norm								ip Code J 07871						-11223
Scope of Work (Check A	II That Apply)							1777							
≥3 sf or ≥3 if ≥160 sf or ≥260 if		PROPERTY	Renova Demoliti					Mir Glo	ll Containm ni-Enclosur ovebag Pro n-Exempte	e cedure	J			e	
Location	o of	1000	Locati			Do	scription	o o f						ement pe	
Asbestos-Containing TO BE AB, In Facil (13)	Material (ACM) ATED	Ma Cusi	d Sole intenar todial S (12)	nce/ Staff?		tos Con thermal surfa	taining N I system cing, VA miscellar	/laterial s insula \T, or		(\$	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A										\U	
Outside of Build	ing (ROOF)		X			Windo	ow Par	ne Tar		50	00 SF	X			
Name of Registered Was Atlantic Carting	ste Hauler		1 22.5	JDEP Wauler ID		Cubic of Wa 120	Yards ste	25-1	7.52.23		ered Landfi gement	II	1		
City, State Wayne NJ						Dispo	sal Date	)	City, Star Tulleyt	te own F	PΑ				
Completed by Corey Stankovic	Completed by Title Sign											ate 6/23/2	018		

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

				ICATION	OF ASE	ESTOS	ABATE			E	CE				designations
Date of Notification (1) 6/12/2018				Name o Hugo	f Building Neu Re	Owner/Cealty Ma	Operator anager	r (2) ment	The same of the same	D The section of	JUN 1	201	8		
Agencies Notified  EPA	Type Notification			Street A 78 Jo	ddress hn Mille	r Way,	Buildir	ng 78	504 6		A tradition and the contract of the contract o	errinorphisms.	~	- Language	and the same
EPA DEP DOL	Amended Amendment				ate, Zip C					ASBE	STOS O		OL 8	<b>,</b>	
DOH DCA	justification) Cancellation				f Contact Stanko		roject N	Manage	r		ephone Nu 3-570-2				
				FACI	LITY INF	ORMAT	ION								
Name of Facility Where Kearny Point Indus	Abatement is Takin strial Park	g Place (3	3)					☐ Sc	Facility thool (K-	12)					
Street Address 78 John Miller Way	, Building 78								her (i.e.		er than K-		dings	, hom	es,
City (5) Kearny								Square 45,00	Feet	# of	Floors		3ldg. <i>A</i> 100	Age	
County (6) Hudson					Code (7) USE ONLY	)			Use (Pri house	or if beir	ng demolis	shed)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	/I No.		Name Che	of Abater ckmark	ment Co Indust	ntractor rial	(9)				
Street Address								Address Norgan	Dr						
City, State, Zip Code								State, Zip rta NJ 0							
Project Manager for Mon	itoring Firm	Telepho	ne No.			none No. -570-26	45		License I	No.	-				
Start Date (10) 6/23/2018		Schedule 8/4/20		mpletion I	Date (11)		1000000	of OSHA ckmark		I rial					
Occupancy Status During								Address lorgan	Dr						
Facility Closed/Vaci Abatement Perform Other – Describe:	ated During Entire I ed Outside of Norm	nal Facility	/ Hour	S			City, S	state, Zip rta NJ C	Code	-				-	
Scope of Work (Check A	II That Apply)						- Pai								
≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf		× F	Renova Demoli	ation tion			×	Mini-E Glove	Enclosure bag Pro	e cedure	Negative			e	
		100	Locat	10.5.6.0										ement	t
Location Asbestos-Containing TO BE AB, In Facil	Material (ACM) ATED	Use Ma	Norma ed Sole intena todial	ely by nce/ Staff?		tos Cont thermal surfa	systems cing, VA	faterial (A s insulatio T, or		(S	mount pecify or LF)	Removal	Repair	e Encapsulate	Enclosure
(13)		Yes	No	N/A		other n	niscellan	neous)				oval	air	ulate	sure
Outside of Build	ing (ROOF)		X			Windo	w Pan	e Tar		500	00 SF	X			
						,									
Name of Registered Was Atlantic Carting	100	IJDEP W lauler ID		of Was 120	Yards ste	1 3		1000 - 10	red Landfi gement	I					
City, State Wayne NJ						Dispos	sal Date	9	City, Stat Tulleyt	e own PA	Ą				
Completed by Corey Stankovic			S	ignature	(5	- Repo	· ·		ate 3/23/2	018					

PAID			Si FICATION Pursuant		BESTOS	ABATE		The control of the co	D) E	C E	3	V		
Date of Notification (1) 06/12/2018		Name of Building Owner/Operator (2)  JJ Operating Inc.								Thirty and advanced to				
Agencies Notified Type Notification	Type Notification				Street Address ASBESTOS CONTE							ROL	<del></del>	
EPA Initial Amended Amendment		City, State, Zip Code New York, NY 10120												
	Emergency (including justification)				Name of Contact Jack Jemai				Telephone Number 212-265-5570					
				LITY INF	ORMAT	ION			1212-200	-3370				
Name of Facility Where Abatement is Taking Old Rite Aid Store/ Market Halsey I	g Place ( Buildin	(3) (1			***************************************		Тур	e of Facility (4)	)				Satto li Perso.	
Street Address 165 Halsey Street		-				School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes,								
City (5) Newark						Square Feet				Age				
County (6) Essex					n		Current Use (Prior if being demolished) Office Building							
Name of Monitoring Firm Hired by Building C RK Occupational & Environmental,	)	ASCN 0009		Name of Abatement Contractor (9) Bako Construction & Restoration, Inc.										
Street Address 401 St. James Ave.		Street Address 265A Route 46					Suite 3D							
City, State, Zip Code Phillipsburg, NJ 08865						City, State, Zip Code Totowa, NJ 07512								
Project Manager for Monitoring Firm Jon Gilbert		one No. Telephone No. 973-256-7010				License No. 0666								
	Scheduled Completion Date (11) 08/25/2018					Name of OSHA Monitor Bako Construction & Restoration, Inc.								
Occupancy Status During Abatement (Check Only One)						Street Address 265A Route 46 Suite 3D								
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Mon-Fri: 3:00pm-11:30pm						City, State, Zip Code - Totowa, NJ 07512								
Scope of Work (Check All That Apply)						10101	wa, i	NO 07512	The state of the s					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Renovation Demolition					Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
	Is Location Normally										Abatement Type			
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Sole iintena todial (12)	ely by nce/	by Asbestos Containing M			Material (ACM) ns insulation, AT, or		Amount (Specify SF or LF)		Repair	Encapsulate	Enclosure	
OUIS: MARKET STATE OF THE STATE	Yes No N/A					te	6							
Old Rite Aid/Market St. Side	-	X		-	Ceiling/column				15,000 SF	X				
Basement B-3 Near traight Flourity		X	-			ion and elbows			420 LF	X			ļ	
Basement B-3 Near freight Elevator	ent B-3 Near freight Elevator X			Pipe Insulation			tion and Elbows		140 LF	X	1			
Name of Registered Waste Hauler		I N	LIDEP W	aste	Cubic	Varde		Nama of D-	nietoscal I s	4611		<u></u>	<u></u>	
Bako Constr. & Rest. Inc/ Newark Ca	1	VIDEP Waste Cubic Yaller ID No. of Waste TBD			Transcor to grotor od Editalii			very f	acili	ty				
City, State	Disposal Dat TBD			al Date	Date City, State Tullytown, PA									
Totowa, NJ/ Newark, NJ					100			Tanytown	, FA				- 20	

PAID

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

Chut 3386

Date of Notification (1)		TN1	(B ::::	2 12	101	Complete Street Street Street						
6/12	1000000	Name of Building Owner / Operator (2) DECE WELL						Ĩ				
Agencies Notified Type Notification			Street Address							2		
⊠ EPA		n Street				Der Manner						
DEP DEP	Initial	Code	11.1	i dun	1 4 201	8 11	UII					
li l	Amended	Cinci	nnati, OH of Contact	45202		1		į l.	man }			
DOH DCA	Emergency Cancellation	100 March 1980	or Contact /enrich		The state of the s	ASBESTO	SCONTO	Telepho	ne Nu	ımbe	er	
						LIO	ENSING	12/18/12	3-12	-41		
Name of Facility Where Ab	natement is Taking P		CILITY IN	Type of Facil	lity (A)		and the state of t	AND SCHOOL SECTION OF				
Macys Store	dement is raking r	lace (3)		School (								
Street Address		Subchapter 8 (Other than K-12)										
2000 Route 38, Suite 2		Other (i.e. private & commercial buildings, homes, etc.)										
		Square Feet	#	of Floors	В	ldg. Age	Э					
City (5)	Water of The Control		Code (7)						-	25.52.6		
Cherry Hill			Current Use	(Prior if b	eing demoli	shed)						
Name of Monitoring Firm H	ner (8)	ASCM No		Retail Name of Abatement Contractor (9)								
Pennoni Associates, In		101 (0)	AGOINTING		Bristol Environmental, Inc.							
Street Address					Street Address							
515 Grove St.					1123 Beaver Street							
City, State & Zip Code Haddon Heights, NJ 08		City, State & Zip Code										
Project Manager for Monitoring Firm Telephone Number					Bristol, PA 19007 Telephone Number License Number							
Alan Lloyd 856					215) 788-6040 00509							
Scheduled Start Date (10) Scheduled Completion Date (11)				Name of OSI				7 Section 137	1142112			
6/26/18	A1. ( ) (O) 1	7/10/18			Bristol Environmental Inc.							
Occupancy Status During Abatement (Check only one)  Facility Closed/Vacated During Entire Period of Abatement					Street Address 1123 Beaver Street							
Abatement Performed Outside of Normal Hours –				City, State &		Ir.						
Describe: 10PM to 7AM				Bristol, PA								
Facility Occupied D												
Scope of Work (Check all t	hat apply)				⊠ E	ull Containm	ont with N	ogativo	Droce	Suro		
☐ ≥3 sf or ≥3 lf			ovation			ini-Enclosur		eyalive	11633	suie		
≥160 sf ≥260 lf			nolition		☐ Glove Bag Procedures							
				Non-Exempted and Non-Friable Pr								
Location Asbestos-Con	Is Locati Normally U	2000/23	Description			Amount Specify	Aba	Abatement Type				
Material (ACM)			y		Asbestos-Containing Material (ACM)					ш	_	
			ce or	(i.e., thermal s			F or LF)	Remova	Re	ncap	ncl	
in Facilit (13)	y	Custodial S (12)	staff?	insulation, surfac	sulation, surfacing, VAT or other miscellaneous)				Repair	Encapsulate	Enclosure	
(3-7)		Yes No	N/A	or other middell	ancous			-		ate	G.	
1st Floor				Mastic		6.	,875 SF		$\Box$	П	П	
3 <sup>rd</sup> Floor			Mirror Mas	Mirror Mastic								
			ᅵ					ᆛH	井	H	님	
Name of Registered Waste	Hauler	<u>                                    </u>	DEP Waste	Cubic Yards	Name o	of Registered	d Landfill				Ш	
875			uler ID No.	of Waste			Lanami					
Service Transport Inc.			20990	25 Cu Yd		a Landfill					11/2/2	
City, State New Castle, Delaware				Disposal Date 7/10/18	City, Sta							
Completed By (Print or Type)			3	Signature	vvayne	sburg, OH	1	Data				
			e oject	Olymature	0-		1 m	Date <b>6/12</b>	/12			
		nager	JUNO 1	My	igoni/	ri/gr 6/12/						