#### NO CK

Date of Notification (1)					de Holo	the state of the state of the		(2) tics 2815	11 11	15	File		Q		
01:1:-	Notification		13000	reet Ado	iress ith Fron	nt St.								7.00	
DEP X	nitial Amended Amendment	<del>쓰</del>	12.5.12.55		, Zip Cod							· F			
	Emergency			ame of C					'ole	nhe	Mirmak				
	ustification) Cancellation				alender	-Trans	Canad	da		,					
L DOA	oanochanon				TY INFO		0.0000000000000000000000000000000000000								
Name of Facility Where Abaten Worldwide Holdings & Lo		g Place (3)						Type of Facility (4			Marille S				
Street Address 330 South Front St.								Subchapter 8 Other (i.e. pr	(C)the	er th	rK-12) nercial	build	ngs, t	nome	s,
City (5) Elizabeth NJ 07202								Square Feet 15	t of	Flo	3	BI	dg. Ag	je	
County (6)				ounty C	ode (7) SE ONLY)			Current Use (Prio Stator Genera		ng d	notishe	d)	-	-	
Union  Name of Monitoring Firm Hired	by Building	Owner (8)		ASCM	No.			of Abatement Cont	rai tor						-
GZA Street Address				00126	) 			Address Address	Sen	vice	-	- 53			_
55 Lane Rd. Suite 407								old Dock Rd. State, Zip Code		_					
City, State, Zip Code Fairfield NJ , 07004								nank NY 11980			Water State				
Project Manager for Monitoring Ben Sallemi	Firm		11	elephon 73-77	e No. 4–3311			none No. 924-8111		1500000	nse No 36	•			
Start Date (10) 5/25/15		Scheduled 7/31/15	Comp	oletion D	ate (11)			of OSHA Monitor Environmenta	l Ser	vice					
Occupancy Status During Abar	ement (Che	ck Only One	2)				Street	Address		_					- 22
Facility Closed/Vacated D	uring Entire	Period of A	bateme	ent			sam	e as above	10. 20						
Abatement Performed Ou Other – Describe: turbine	tside of Non structure ou	mal Facility tside proper	Hours				397	State, Zip Code le as above							
							Sam	e as above							
Scope of Work (Check All That  ≥3 sf or ≥3 if ≥160 sf or ≥260 if	( Арріу)		enovati emolitic	250000				Full Containme Mini-Enclosure Glovebag Prod	ed ire						
								Non-Exempted	( ar	id N	-Frabi		Abate		
		100000	Location ormally										Ty		file of
Location of Asbestos-Containing Mate TO BE ABATED In Facility (13)	rial (ACM)	Used Mai	d Solely ntenan odial St (12)	y by ce/	Asbes (i.e.	tos Cont thermal surfa	system cing, V	Material (ACM) ns insulation,	(	Amo Spec F or	y	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A										e	
Stator Turbine Sc	outh			X				askets	_	105		x			
Stator Turbine N	orth			X		Asbes	tos G	askets		5s		x			
	-				-						-				
Name of Registered Waste Ha	auler		N.	JDEP W	aste	Cubic	Yards	Name of	Re jist	erec	andfill				
ATC Inc.				auler ID -24310		of Wa	ste	Minerva	E nte	erpı	es				
City, State Shirley, NY						Dispo 6/10/	sal Dat	e City, Stat		01		SIN 250			
Completed by Pedro Guerra		Title Regio	onal C	ops. M	anager		Signatu	in figure 1			Da 6/	te 10/1:	5		
ASB-41 (R-06-08)							* Bo 1	not use this form for	a: be:	stos	ensure	exer	npted	activ	ities.

June 9, 2015							f Building ( Road V		perator	(2)		051	į.				5.0		
Agencies Notifie	ed Ty	pe Notific Initial	ation		- 1	Street A 770 To	ddress ownship	Line R	d.							1	-12		
EPA DEP DOL	×	Amend Amend	iment				ate, Zip Co y, PA 19						- P		-	Ti.			
DOH DCA		Emerge justifica Cancel	ation)	including	- 1		f Contact h Felice						T e	lepho	a Nun	ahar I U			
	1-		_			FACI	LITY INFO	ORMATIC	NC						-				
Name of Facility Former Luce				Place (3	3)					Ту		acility (4	435						
Street Address 353 Carter F										×	Sub	chapter er (i.e. p	8 (C th				dinas	hom	es.
City (5)										Sq	etc.) uare F	eet	1 0	of Flo	-		ldg. A		
Hopewell County (6)						County	Code (7)			8700	5,000	) Jse (Prid	or if he	ing d	nolish		00		
Mercer							USE ONLY,		_	tra	aining	cente	r Vilo	ant			S		
Name of Monito AET	oring Firm Hir	ed by Bui	lding (	Owner (8)		ASCN 0002						ent Con ronme		1000	ns, I	nc.			
Street Address 28 N. Penne	ell Rd.								Street 550			on St.	_						
City, State, Zip of Media, PA 1									City, S	State	, Zip C	ode							
Project Manage		ng Firm		100-111-1-1	T	Telepho	ne No.		Teleph			r, PA 1	93 32		ise N	0.			
Eric Housek	nect					10 100 Hz : 10 11 ACM	96-1132		610-	701	1-9000			00	08				
Start Date (10) 6/22/15				10/15/		npletion	Date (11)		Name		OSHA N	Monitor							
Occupancy Stat									Street 28 N		iress ennel	I Dd							
Facility Clo Abatement Other – De	sed/Vacated t Performed ( escribe:	During E Dutside of	ntire F f Norm	Period of A al Facility	Abatem / Hours	nent		_	City, S	State	, Zip C PA 19	ode			( <del></del>				
Scope of Work (	(Check All Th	nat Apply)	0			-				, .				-	-		-		
≥3 sf or ≥3 ≥ 160 sf or				and the same of th	Renova Demolit				×		Mini-Er Gloveb	ntainme nclosure ag Proc kempted	e edure					e.	
				le	Locati	on						T				Ī		ement	t
	Location of			1	Vormal	ly		Des	cription	n of						_	T	/pe	
Asbestos-Co	ontaining Mar O BE ABATE In Facility (13)		M)	Ma	ed Sole intenar todial S (12)	nce/	Asbes (i.e.	tos Conta thermal surfac	aining N	Mater s ins T, o	sulation r	CM)	(	Amou Spec F or I		Remova	Repair	Encapsulate	Enclosure
	WC 100			Yes	No	N/A										<u>a</u>		ate	re
	nt mechani		22.		Х		boile	r pack	king	1			6 SF		Х				
	ent center l	_				X		VA	T/Mas	tic			15	500	3F	X			
First Flo	or center l	building				X		VA	T/Mas	tic			2	2,20		X			
	Suest wing					X		VA	T/Mas	tic				1,60	11222	X			
Name of Registe Mercer Group		lauler			Н	JDEP Wauler ID 0416	100,000 E	Oubic of Was			1	ame of F			ındfill				
City, State Trenton, NJ								Dispos	al Date	//	2 2	ty, State	7.7						
Completed by				Title				ongoir	ng //. ghature	//	1	alls To	WAL ST	IIP, I	T Da	e			
Robert M. Ca	sciato			Presi	dent					L	1/	1			100000	/09/2	015		

Location of Asbestos-Containing Material (ACM)	Not	Locati mally L	Ised	Description of Asbestos Containing Material (ACM)	Inuom/ hiseq2	<i>F</i>	Abatem Type		
TO BE ABATED In Facility (13)	Ma	Solely baintenar todial S (12)	rce/	(i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	EF or LF	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A			<u>a</u>		late	Ire
Guest rooms			X	Mastic on condensate pans	1,80 ) SF	X			
Basement electric room			X	Transite Board	10 S 7	X		1	
Window panels guest rooms			X	Transite Board	7,00 ) SF	X			
Tennis Courts			X	1/8" wear surface	37,0 )0 SF	X	_	1	

THE JUH CO HAN WAR

CK# 24842

Date of Notification (1)	11/15			Name	of Buildin	g Owner/Operator	(2) Hayman	-113	V 11 1 1			1 6 (	Ē)
Agencies Notified	Type Notification			Stree	t Address								_
EPA DEP	Initial						45 East 2nd S	ti eet	_				_
☑ DOL	Amended Amendment #	:		City,	State, Zip C		\						
<b>⊠</b> DOH	☐ Emergency (iii justification)	ncludin	g				orestown, NJ	_					_
DCA DCA	Cancellation			Name	of Contac	t ten Kucharcz	nle	Teleph	ie Numb	per			
24-28							uk			,,,	٠.,	_	_
Name of Facility Where	Abatament is Takin	a Place	0 (3)	FA	CILITY INF	FORMATION	Tune of Facility	7.					-0.10.1
Name of Facility Where		denti					Type of Facility  School (K-12						
Street Address	1005	GOLLE					Subchapter 8	8 Other					
N 9039 63301 3030 00489 5030 5144	345 Eas	2nd	Stree	et			Other (i.e., pi		mmercia	al buil	dings	i	
City (5)							Square Feet	# of F	ors	В	ldg. A	ge	_
	Moores	town	ı,, NJ				2000		!		90	+/-	_
County (6)	1.				nty Code (* CNLY)	7) (STATE	Current Use (Pr	ic if bein	demolis	hed)			
	rlington				* <u>-</u>	N				- 70			_
Name of Monitoring Firm (8) DR F	nvironmental	Owner		ASCM	No.		nent Contractor (9) vens Environn			а Т			
Street Address	nvironmentar		_			Street Address	ens Environi	n :mtai	ervice	s, II	1C.		_
Oli Col Address	4 Berkeley Pl	ace				Street Address	PO B	cx 322					
City, State, Zip Code	. Beinerey 17					City, State, Zip C	Code	====		_		_	=
	Freehold, NJ 0	7728					Allentown	n, NJ 0	501				
Project Manager for Mo	nitoring Firm		Tele	phone	No.	Telephone No.		Licen	No.				_
	unocore		(73	32) 74	0-8408	(609) 25			0	0493	3		_
Start Date (10)	Sche				ite (11)	Name of OSHA							
7/1/15			7/10/	15			DB Envi	ronme	tal				_
Occupancy Status Durin			Gunna con			Street Address	4 Berke	Just Die					
☐ Facility Closed/Vacat						City, State, Zip C		1 .y 1 1c	=				_
Other - Describe:						Oity, State, Zip C	Freehold,	111 01	128				
Scope of Work (Check a	all that apply)						Tronora,		=				_
<b>∑</b> ≥3 sf or ≥3 lf		₩ D	onovot	ion.			ntainment with Neg	ga ive Pre	sure				
≥160 sf or ≥260 lf			enovat emolitic			☐ Mini-End Gloveba	ag Procedure						
						Non-Exe	empted (*) and No	n- Friable	rocedur				
			Location lormally				1			۹	bater Typ		
Location Asbestos-Containing I			d Solel		Ashasi	· Description of					7,		-
TO BE ABA	TED	C	ustodia	33000		os Containing Mat thermal systems i		Amo (Spe		R	_	Enc	ш
IN Facility (13)	/		Staff? (12)			surfacing, VAT, other miscellaned		SF or	=)	Remova	Repair	aps	Enclosure
(13)			T			otilei miscellanet	ous)			val	äř.	Encapsulate	sure
		Yes	No	N/A				_				to.	
Baseme	ent		×		The	ermal Pipe Ins	sulation	80	<u>`</u>	×			
									_				
Name of Registered Was	ste Hauler		200	JDEP \ auler ID		Cubic Yards of Waste	Name of Regis	te red Lar	fill				
Stevens Environn	nental Service	s, Inc	<u>.                                     </u>	182	292	1 CU		CROV	3 Land	dfill			
City, State						Disposal Date	City, State						
	Allentown, N					7/10/15	10//	Morri	ville, 1	PA			
Completed By	Title		oiss	1/1	0.00=	Signatu/e//	1/		ate	6/11	/15		
Mahlon E. Ste	vens	PI	ojeci	Man	ager	_   _///		=		6/11	/13		_

Agencies Notified    Type Notification   Street Address	Completed by R. McDonald	Title President			Oignat /	D. Mil	r. Pol		6/	11/1	3	
Genoies Notified  Type Notification  Street Address  Size Afficies  Gir (5)  FACILITY INFORMATION  Type of Facility (4)  Street Address  Gir (5)  FACILITY INFORMATION  Type of Facility (4)  Should be pride to characteristics on the process of the price	Newark, NJ 07105	Carry			6/22/	Soil B	al alehem	PA 18015	ate	1 1		
Gencies Notified   Type Notification   Streat Address   S	Newark Carting, Inc		Hauler ID	) No. 09	of Waste	te City. S	S PA Be	ilehem Lan		rp.		
gendes Notified  Type Notification  Street Address  Size BAA  Size BAB  Size		-	NIDED	Vaste 1	Cubic Yards	Name	o Regis	red Landfill	_	-		_
ABSENCE AND A SOCIATES    Size Address									-			-
Service Notified   Type Notification   Street Address   S												
Street Address  EPA  EPA  EPA  EPA  EPA  EPA  EPA  E	- SFF SURVEY -			SE	E ATTA	CHEP			X			
Street Address   Stre	(13)	Yes No	o N/A	1					_		क्र	
Street Address   Stre	Asbestos-Containing Material (ACM)  TO BE ABATED  In Facility	Used So Mainten Custodial	lely by nance/ I Staff?	(i.e. th	s Containing nermal system surfacing, V	Material (ACM) ns insulation, AT, or	-	pecify	Remova	Repair	Encapsula	The state of the s
gencies Notified  Type Notification  Street Address  DOL  DOH  DEA  DOH  DOH  DOH  DOH  DOH  DOH  DOH  DO		Is Loca	ation					220		Abate		
Gencies Notified  Type Notification  Type Notification  Street Address  PACILITY INFORMATION  FACILITY INFORMATION  FACILITY INFORMATION  FACILITY INFORMATION  Type of Facility (4)  School (K-12)  Scho	≥ 160 sf or ≥260 lf	PI Demoii	ilion			Clayoban Dro	r adure	Ion-Friable	Proce	dure		
Gencies Notified  Type Notification  Street Address  DEPA DEP   Initial   Amended   Amended   Amended   Amended   DEP   Initial   DEP   Initia	Scope of Work (Check All That Apply)  □ ≥3 sf or ≥3 lf				2	☑ Full Containm ☑ Mini-Enclosur	e it with	egative Pre	essure			
gencies Notified Type Notification  GEPA DEP Amended A	<ul> <li>☑ Facility Closed/Vacated During Entire Per</li> <li>☐ Abatement Performed Outside of Normal</li> </ul>	od of Apateri	nent		280 City,	Huyer Street State, Zip Code	6		-			_
GILITY INFORMATION    Street Address   Subchapter 8 (Other Id.e. pri ate & etc.)	Start Date (10) 6/22/15	heduled Cor	mpletion [	Date (11)	Om	ega Environment	Servic	s Inc.		-		
gencies Notified  Type Notification  EPA  DEP  DEP  DEP  DEP  DOL  DEP  DEP  DOL  DOL  DEP  DOL  DOL  DOL  DOL  DOL  DOL  DOL  DO	Project Manager for Monitoring Firm		Teleph	one No.	201	-262-5841						
GABRELLIAN ASSOCIATES  gencies Notified Type Notification  Type Notification  Street Address  GINTS  GABRELLIAN ASSOCIATES  CABRELLIAN ASSOCIATES  GABRELLIAN ASSOCIATES  GABRELCIAN ASSOCIATES  GABRELLIAN ASSOCIATES  GABRELCIAN ASSOCIATES  GABRELLIAN AS	City, State, Zip Code		2				2					
GABRELLIAN ASSOCIATES  GENCIES Notified Type Notification  Street Address  GINT 17 S.  EPA DEP Amended Amended Amendment # Emergency (including justification) DOA  DOA  Gancellation  FACILITY INFORMATION  Type of Facility (4)  STRIP MALL  Teler one Number  School (K-12 Subchapter 8 (Other Le. pri ate & mercial buildings, homes, etc.)  Square Feet FRANKLIN AUE  County (6)  SGUARE LLIAN ASSOCIATES  GABRELLIAN ASSOCIATES  To JUH 15 AR 4: 27  Tolar one Number  Teler one Number  Teler one Number  Tolar one Number  Teler one Number  Teler one Number  Tolar one Number  Teler one Number  Teler one Number  Tolar one Number  Teler one Number  Tolar one Number  Teler one Number  Teler one Number  Tolar one Number  Teler one Number  Tolar one Number  Teler one Number  Teler one Number  Tolar one Number  Teler one Number  T	Street Address				1							
Jencies Notified  Type Notification  EPA DEP Amended Amended Amendment # Emergency (including justification) DCA  Total  Type of Facility Where Abatement is Taking Place (3)  STRIP MALL  Itreet Address Type of Facility (4)  STRIP MALL  Itreet Address Type of Facility (4)  STRIP MALL  Itreet Address Type of Facility (4)  Street Address Type of Facility (4)  School (K-12 Subchapter 8 (Other (i.e. pri ate & etc.))  Square Feet Type of Facility (4)  Square Feet Type of Facility (4)	Name of Monitoring Firm Hired by Building Own	r (8)	ASCN	l No.								
GABRELLIAN ASSOCIATES  gencies Notified Type Notification  Street Address  GABRELLIAN ASSOCIATES  Street Address  GABRELLIAN ASSOCIATES  Street Address  GABRELLIAN ASSOCIATES  ASSOCIATES  A JUNE 15 ASSOCIATES  TO BE A JUNE 15	20unty (6)					Current Use (Pri	if bein	demolished	DEM	O		
GABRELLIAN ASSOCIATES  gencies Notified Type Notification Street Address  GEPA SINITIAL City, State, Zip Code						Square Feet		1				
GABRELLIAN ASSOCIATES  Gencies Notified Type Notification Street Address  GENA INITIAL STREET TO S.  City, State, Zip Code PAmendment #  GENA INITIAL STREET TO S.  City, State, Zip Code PAMEN NO 0 26 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		J.E				☑ Other (i.e. p	8 (Other ri rate & (	nan K-12) mmercial b	ouilding	gs, ho	mes,	
GABRELLIAN ASSOCIATES  Gencies Notified  Type Notification  Street Address  75 RT 175.  LEPA  I EPA  I DEP  Amended  Amendment #  Emergency (including justification)  JUST 175.  City, State, Zip Code  PARCHAMICA NOT 0765.  Name of Contact  Marker  FACILITY INFORMATION  FACILITY INFORMATION	lame of Facility Where Abatement is Taking Pla	e (3)			Manageria	15%						
gencies Notified  Type Notification  Street Address  9.5 P.T 17.5.  LEPA LIDEP Amended Amendment # Emergency (including)  Name of Contact  CABRELLIAN ASSOCIATES  ASSOCIATES  CITY ASSOCIATES  CITY ASSOCIATES  CITY ASSOCIATES  CITY ASSOCIATES  CITY ASSOCIATES  ASSOCIATES  CITY ASSOCIATES  No JUH 15 AS L: 27  CITY State, Zip Code PARCIAM CO. J.	DCA Cancellation		,		ATION							
gencies Notified Type Notification Street Address 95 RT 175	☐ Emergency (inclu		Name of C	ontact	700		Teler	one Number			-	_
GABRELLIAN ASSOCIATES  Street Address  Street Address								-				
ale of Modellocation (1) CASPELL IAN ASSOCIATED	gencies Notified Type Notification	- s	Street Add	2207			21	a JUH 1	5 4	日日	:27	1
ete of Notification (1) Name of Building Owner/Operator (2)	ate of Notification (1)		Name of Bi	uilding Owner BRELL in	r/Operator (2 イル イン	SOCIATES		*			i	

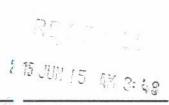
## State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)				T	Name	of Building	Own	er/Operator (2	2)		-		14		
6/	11 /	15		1	Dau	ghters o	f Mir	iam		2015	WR I	5 814	^		
Agencies Notified	Type Notifica	ation			Street	Address						117	C10 (	G	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					155	Hazel St	reet			105.	LICE				
				T	City, S	tate, Zip C	ode			~~~~	LICE	Monit	1371	11	
⊠ DOH □ DCA	Amendme		ina		Cliff	ton, NJ 0	701	1				13.5714	G	#150 	
(NJAC 5:23-8)	justification		ing		Name	of Contact				Telep	ne Nun	nber			
	☐ Cancellat	ion			Joh	n L. Con	way								
					FAC	CILITY IN	FOR	MATION			Marine Control		-11550000		
Name of Facility Where Ab	patement is T	aking Pla	ace (3)	)					Type of Facility	2.00					
Commercial Building	g								School (K-12		200 K 1	2)			
Street Address									Other (i.e., p				ilding	S,	
155 Hazel Street									homes, etc.)						
City (5)									Square Feet	# of	oors	BI	dg. Ag	je	
Clifton, NJ 07011															
County (6)					Coun	ty Code (7)	)(STA	TE USE ONLY)	Current Use (Pr	or if be	g demol	ished)			
Passaic											_				
Name of Monitoring Firm F	87500	ding Own	er (8)	P	ASCM	2000			ent Contractor (9)		4				
Detail Associates, In	ic.				000	12	0.00		NAGEMENT L	.C					
Street Address							35.00	et Address							
300 Grand Avenue							35/2/	7 Outwater							
City, State, Zip Code								, State, Zip C							
Englewood, NJ 0763								arfield, NJ	07026						
Project Manager for Monito	oring Firm		1		hone		1500000	ephone No.		100000000	se No.				
Anthony Valentine					1-569			73-928-4888		11	8			56,656,0	
Start Date (10)		Schedule						ne of OSHA N							
5/18/	15	9	_ / _	15	_ / -	15	Α	LL PRO MA	NAGEMENT L	I.C					
Occupancy Status During							Stre	et Address							
☐ Abstract Defended	이번 그 경험 없는 것으로 기계를 가셨다.					:	10000	7 Outwater							
Abatement Performed ( Time of Abatement:								, State, Zip Co							
Scope of Work (Check all				-			G	arfield, NJ	07026		7				
Scope of Work (Check all	шаг арріу)							⊠ Full Con	tainment with Ne	ative P	ssure				
≥3 sf or ≥3 lf     ≥3 sf or ≥3 lf			Reno					☐ Mini-End	losure						
≥160 sf or ≥260 lf		×	Demo	Olitio	n				g Procedure mpted (*) and No	ı-Friab	Proced	ure			
			Is Lo	cati	on						-		atem	ent Ty	vpe
Location of				mal				Description of				-	_		
Asbestos-Containing N TO BE ABAT			Jsed S Mainte					Containing Ma rmal systems			ount	Remova	Repair	Encapsulate	Enclosure
IN Facility		0	ustod		staff?	(1.0	s	urfacing, VAT	, or		or LF)	oval	=	psu	Sur
(13)				12) No	N/A	-	oth	ner miscellane	ous)					ate	(D)
Basement					N/A	Pipe Ins	eulat	ion		7	)7 LF				
Basement						VAT & I				-	00 SF				
1 <sup>st</sup> Floor			-			VAT & I					00 SF				
			-							-	) LF				
Connecting Hallway	Hauler				IDEB !	Pipe Ins			Name of Regis						
Name of Registered Waste	= mauler			100	JDEP \ auler II		Was	ic Yards of ste	IESI Landi		IUIIII				
Newark Carting		307		1000000	04509		Α	s Needed	and other non-action when						
City, State								oosal Date	City, State						
Newark, NJ							Т	BD	Bethlehen	1 PA	1				
Completed By (Print or Type	pe)	Title						Signature /	1.			Date			
Raymond Blum		Proje	ect M	ana	iger			11				107	0-	15	

ASB-41 JAN 13

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

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



				CONTINUATION SHEET		_	-			
				155 Hazel Street		Ab	eme		- 11	nı
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Faculty (13)	Nor S Main	s Locat rmally Solely tenand al 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)		1	Repair	Encapsul	E n c l o s u r e
	Yes	No	N/A			L				
Windows			Х	Window Caulking			(		Χ	
Exterior	F		Х	Transite	255 SF	F	(		Х	
	_					H	-			
						上				
	-	-				$\vdash$	_			
						L				
	-		_			$\vdash$				
						t				
	-	-	-			L	_			
						t	_			
						F	_			
			_			H	_			
						L				
	-		_			-	_			
						T				
						L				
	_	_				L				
	_	_				$\vdash$				

			. /4 /	
Completed by: (Print or type) Raymond Blum	Title:	Project Manager	Signature:	Date:

CHERCH 11525

#### STATE OF NEW JERSEY DEPARTMENT OF LABOR NOTIFICATION OF ASBESTOS A SATEMENT

Date of Notification (1) 06/08/2015								Building Owner/Ger Lerner and		le Da	on				
Agencies Notified	Туре	of Notifi	cation				Street A	ddress				(1000)	3	100	
2.22. == 1							640 F	alisade Aver	ue			****	(-		
(X)EPA	100000000000000000000000000000000000000		Notificati	on			City, Sta	ite, Zip Code				-	1.7		1
(X)NJDEP		Amen					Jerse	y City, NJ 07	307					, Cl	
(X) NJ DOL			dment #					f Contact			I	el. Num	ber	-94	
(X)DOH			gency (in	ciuain	g		Sue Fr	ancisco (Brint	on Brosius	Inc.)	1.				
( ) DCA			ation). Ilation											5.3	
	1 ( )	Carice	nation		F	ACILITY	INFORM	IATION		-				-	
Name of Facility Where Al	patemen	it is Tak	ing Place (	3)		TOILIT		Facility (4)			0.000			3	
Residential Property								nool (K-12)							
								ochapter 8 (othe							
Street Address					The second		(X) Oth	ner (i.e. private &	commerc	Spid It	., hor	nes, et	C.		
640 Palisade Avenue							C= F==	: 10,000	# of Floor	. 2		Dide	g. Age (	30	
City (5)		Count	y (6)		nty Code		Sq. ree	10,000	# of Floo	35		Diag	J. Age	0	
				(Stat	e Use C	Only)	Current	Use (prior if be	ing demolis	ned):					
Jersey City		Hud	son												
Name of Monitoring Firm	Hired by	Bldg. C	Owner (8)	ASC	M No.		Name of	f Contractor (9)							· · · · · ·
N/A				N/A			ISES,	Inc.							
Street Address							Street A	ddress							
N/A							3300 ]	Hudson Aver	ue						
City, State, Zip Code			10				City Star	te, ZipCode							
N/A							Union	City, NJ							
Project Manager for Monit	oring	Te	lephone Nu	umber			Telepho	ne Number			200	100	cense N	umber	
Firm							$(201)^3$	325-0055				0	1124		
N/A			hadalad O	1-4	D-1-	(44)	Name	f OSHA Monitor			_			- 10000	
Scheduled Start Date (10) 06/08/2015	1	2777357	heduled Co 5/10/201		on Date	(11)	ISES, I								
Occupancy Status During	Abatam						Street A				-				
( ) Facility Closed/Vaca					ment			Hudson Aver	ne						
( ) Abatement Performe	ed Outsi	de of N	ormal Facil	ity Hou					uc		_				
(X) Other - Describe: (	Unoccup	oied du	ring abaten	nent				ate, Zip Code	.0.5						
								City, NJ 070	187		_				
Source of Work (Check al	I that ap	ply)	(	) Den	nolition	90	( )	X) Renovation							
( ) Minor Project (<	25 SF	or < 1	DIFACM	)			()	( ) Full Contai	nment with	Vegat	e Pre	ssure			
(X) Small Project (>2					CM)		( )	) Mini-Enclos		9					
( ) Large Project (>16					~~~ <b>~</b>		( )	( ) Glovebag P	rocedure						
							(	) Non-Exem	pted (*) an						
Location of Asbestos-Con (ACM)	itaining I	Materia		tion No I Solely		/i.a		scription of ACM stems insulation,	surfacing	Ama (Spec		A	bateme	nt Type	
To be Abated in Fa	cility (13	3)	0.000 0.000	tenance		(1.6.		other miscellaneo		or				П	_
	53		Custodi	al Staff	? (12)				XX			Removal	70	Encapsulate	Enclosure
			YES	NO	N/A							nov	Repair	psul	lost
			1 1 2 3	INO	INA							<u>'al</u>	-	ate	Гe
			- V	_		TCLD	ine Inquie	lion.		80 LF	-	X			
Basement and main en		X		1517	ipe Insula	tion		OU LF	-	^					
Name of Reg. Waste Hau	ler			NJD	EP Was	te Haul	er ID#	Cubic Yards o	Waste	Name	f Reg	Landfil	1		
Newark Carting, In				045	09			2		Gran	Cer	tral Sa	anitatio	n	
5,	XXX			8450000	200000			200	12			Argyl F	Road		
City, State	Sirei	2017 PEN 120				Disp.				City, S		D 4 4 0	070		
369 Raymond Blvd.,		rk, N.	07105			_	0//2015				rgyl,	PA 18	0/2		
Completed by (Print or Ty	pe)		Title			Signa	<u>ture</u>	11		Date					
David Camacho			Projec	nt.			1/1.	11 0 006	)	06/0	/201	5			
David Calliacilo						1	av d	1 STIA		00/0	1201				
	5000000		Super	visor	2000000	1( /	1010/	MINI			-				

NO CK

			4	(Pursuar	nt to NJA	C 8:60 ar	nd 12:12	0)				70	3	
Date of Notification (1)					of Buildin Hister To				201	JUN 1	5 5	1 2.	:,	
	Notification	n		100000000000000000000000000000000000000	Address uth King	Street							+ +	
DEP DOL	knitial Amended Amendmer	nt # <b>\</b>		City, S	itate, Zip ( cester, N	Code		V.,		¥(0E	1101	ig	<del>OL.</del>	
DOH J	Emergency ustification Cancellatio	)	ig	Name	of Contac ge Dom	:t				ephone N	umber			
					CILITY IN		ION			-	_	-		
Name of Facility Where Abatem Camden Docks	ent is Taki	ng Place	(3)		<i>312111111</i>	Ordina	1010	Type of Faci						
Street Address 2500 Broadway								Other (i	pt er 8 (O	er than K- & commer		ldıngs	, hom	ies.
City (5) Camden							10-110-22	etc.) Square Feet 2000	# 2	fFloors	1	3ldg. 60+	Age	
County (6) Camden					Code (7) USE ONL			Current Use Tug Boat	(F for if b	ng demolis	shed)			
Name of Monitoring Firm Hired to AET, Inc.	y Building	Owner (8	3)	ASC 107	M No		10	of Abatement ervices, LL		(9)				
Street Address 28 Pennel Road								Address W. Lincoln I	Hi jhwa	Suite 50	00			
City. State, Zip Code Media, PA. 19603							200	tate. Zip Code n ,PA. 1934						
Project Manager for Monitoring F Dave Turotsy	irm			Telepho 610-8	one No. 91-0114	1	d 1256 (1270)	none No. 872-8884		License 01161	No			
Start Date (10) 6 29 15		Schedu 7			Date (11	)	Name EMS	of OSHA Mon L	itc ·					
Occupancy Status During Abater	ment (Ched	ck Only C	ne)				Street	Address	_	-	-			00000
X Facility Closed/Vacated Dur Abatement Performed Outsi Other – Describe:	ing Entire	Period of	Abater	ment			_ SE 687/A J	Route 130 N						
		nai Facili	y Hour	S				tate, Zip Code iminson, NJ						
Scope of Work (Check All That A	pply)									-				
≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf		(Promotor)	Renova Demoli				×	Mini-Enclos	su e Pri cedure				re	
		15	Locat	ion								Name and Administration	temen	it
Location of			Normal	lly		Des	scription	of	-1		_	T	уре	_
Asbestos-Containing Material  TO BE ABATED In Facility (13)	(ACM)	Ma Cus	ed Sole aintena todial ( (12)	nce/ Staff?		tos Cont thermal surfac	aining M	aterial (ACM) insulation, Γ, or	5	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
Galley		Yes	No	N/A			TOI			0.1.5	-	-	ļ	-
Galley				X		Table	TSI			0 LF	X	-	-	
Janoy						rank	Insula	uon		0 SF	X	-	+-	+
										-	-	1	$\vdash$	
Name of Registered Waste Hauler		•	20150	JDEP W		Cubic \		Name	of Regist	red Landfi	II			
ecoservices, LLC.				auler ID 3-01278		of Was	ie			I Landfil	1)			
City, State Exton, PA.	ton, PA.						al Date	City, S Morri	ta e sville, F	4				
Completed by Tom Joiner	ted by Title						anature	m //	117/ ^		ate	110	_	

mergency with Cop	Oy O Sta	of New Jersey OF ASBESTOS	R C h	ed (C	2n/10,	a 1 'e	)	P		Prin	t For
C + 10 0 0 0 3 0 0 3 3	41	o NJAC 8:60 and Building Owner/C		5		-	201	14" 5 JU	10	97	10
Agencies Notified Type Notification	Street Ad	Pl	11/1	ips	166		-	-1-	. / (	) 4	M
EPA Initial Amended Amendment #	City, Stat	1400 te, Zip Code	Ta	1/K/	Aven	1'0	4	L/r	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	2//	10 1
DOL Amendment # Emergency (including justification)	ZjA Name of	Contact 1		/ / 3	Tele	or ne N	Numbe	er			9
DCA Cancellation	FACIL	J <i>en t</i> LITY INFORMATI	ON					-			
Name of Facility Where Abatement is Taking Place (3)  Phillps 66  Street Address				Subch	Illity (4) (K-12) apter 8 Othe (i.e. private &	rt an K	(-12)	o ildin	as b	omor	
1400 Park Avenue	9			etc.) Square Fee	t # of	Fibrs		Bldg	g. Ag	е	
County (6) UNION	County C	Code (7)		Current Use	(Prior bein	-	lished	1)	9888	Pow	7
Name of Monitoring Firm Hired by Building Owner (8)	ASCM			of Abatemen		9 ,	1	at		g L	4
Street Address			Street	Address		-				_	,
City, State, Zip Code			City, S	State, Zip Coo	le						
Project Manager for Monitoring Firm	Telephor		Telepi	hone No. 32 5克	5 0:00	L ense	e No.	7	-		
Start Date (10) 6-8-/5 Scheduled C		Date (11) 2 - 15			nitor くどうし	11	on	m	en	4	1
Occupancy Status During Abatement (Check Only One)  Facility Closed/Vacated During Entire Period of Abatement Performed Outside of Normal Facility House Other – Describe:		5	100000000000000000000000000000000000000	Address 234 State, Zip Cod	A 1	۲ h 	08	1ve	2	4	
Scope of Work (Check All That Apply)	-6		<u>U</u>	_/	74				_	1	
≥ 160 sf or ≥260 lf Demo	vation olition			Mini-Enc	ainmen with losure g Proce lure mpted (*) and				dure		
Is Loc Location of		De	escription	85	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					ment	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)  Used So Mainter Custodia (12)	nance/ al Staff?	Asbestos Con (i.e. therma surfa	taining I	Material (ACN ns insulation, AT, or	, (S	nont poify o_F)		Removal	Repair	Encapsulate	Enclosure
SCrape Yard ONGO X	o N/A	Surfa	cin	19	121	į ) <sub>3</sub>	E		+		X
300 30100				-V			_				2.
Name of Registered Waste Hauler	NJDEP W	/aste Cubic	Yards	Nan	ne of Ri giste	re Lan	ndfill				
Horwith Trucking, Inc	S'7	No. of Wa	aste 30	A	duc no	d	D	154	009	59.	
PO Box 7 No 8067	Hamp	fon PA TBI			State er 3e	9 1					6
Completed by Kurt Nale Title Sup	eris te	endent	Signatur	Kent	hale	3	Date	:-8	-/.	5	

Date of Notification	(1)		1	lame	of Buil	lding C	Owner / Operator	(2) 9R1E	4					
	6/2/2015		E	Danie	l Con	n		(## J	04/15	LM !	27			
Agencies Notified	Type Notific	ation			Addre		2				- 1			
					onne			495	8 615	11311				
☐ DEP	Initia				tate &		ode	ě.	10:1	THE	UL			
⊠ DOL		ended	_		lton, l				_		-	11		
⊠ DOH □ DCA		ergency	1		of Cor					110	lepho	ne ivi	ımpe	F
☐ DCA	☐ Can	cellation	E	Danie	el Con	in				1				
				FAG	CILITY	INF	ORMATION							
Name of Facility W	here Abatem	ent is Taking Pl	ace (3	3)			Type of Facility			State of the State	alex (i.e.			
Residence	565		97.	60			School (K	(-12)						- 1
Street Address								er 8 (Other tha						
370 Connecticut							Other (i.e.	. private & con	nr nercia	puildings	, hom	es, e	tc.)	
4							Square Feet	# of Flo	013	Bld	g. Age	9		
City (5)		County (6)	Co	unty C	Code (	7)	1800		2			*08		
Hamilton		Mercer					Current Use (F	Prior if being d	e nolish	(t				
							Residence							
Name of Monitoring	Firm Hired	by Building Owr	ner (8)		ASC	M No.	Name of Abate	ement Contrac	ctor (9)					
	,	-,	(-)				ALPHA ENV							
Street Address							Street Address	S	1/					
							PO BOX 829	7						
City, State & Zip Co	ode						City, State & Z	Zip Code				64		
							Trenton NJ							
Project Manager fo	r Monitoring	Firm	Telep	hone	Numb	er	Telephone Nu		Li	ense Nu				
	2004						609-847-295			-	0122	2		
Scheduled Start Da	ate (10)	Scheduled Cor	npletic	n Dat	te (11)		Name of OSH							
6/11/201	Name and Address of the Owner, when the Owner,	6/12/2015					EMSL Analy							
Occupancy Status							Street Address							
Name of the last o		During Entire P					107 Haddon			-				
	Performed (	Outside of Norm	al Ho	urs -	7am to	3pm	City, State & Z	(3)						
Describe:							Westmont, I	NJ 08108						
lane de la constant d		g Abatement											1,783	
Scope of Work (Ch	eck all that a	apply)						□ FI.C.	.4 .1	with No.	antii in	Dros	ouro.	
<b>—</b>				D	41 -	_	33	Mini-En		with Ne	gauve	ries	Suit	
≥3 sf or ≥3	55		×		ovatio				a proc	duras				
□ ≥160 sf ≥26	50 IT			Der	nolition	1		<u> </u>		72	23 333	100	20	
		9						Non-Ex		nd Non-l				
	ocation of			Locat			Description			ount	Aba	atem	ent T	ype
	tos-Containi	ng		nally			Asbestos-Cont Material (AC			ecify r LF)			ш	
	terial (ACM) BE ABATED			olely l	ice or		(i.e., thermal sy		31	1 41 /	Re	æ	Encapsulate	Enclsoure
	in Facility				Staff?	i	insulation, surfac				Remova	Repair	psi	dso
	(13)			(12)			or other miscella				Val.	=	ulat	ure
	, ,		Yes	No	N/A								е	
Basement			П	$\boxtimes$	П		Pipe Insula	tion	Olf					
			-											
Name of Registere	d Waste Hau	ıler		NJ	DEP V	Vaste		Name of Reg	is tered	andfill				
				Ha	uler II	No.	of Waste	100						
ALPHA ENVIRO	NMENTAL			00	33330	0	1cubic	Grows Lan	d ill	***************************************				
City, State				92			Disposal Date	City, State						
								B. 0	FIA					
Trenton, NJ							Various	Morrisville,	I'A		_			
Completed By (Prir				Tit			Signature				Date	001	_	
Rod Richardson	1			P	M		Rod Richardson				6/2/	201	5	

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

B & G proj. #:	2015-106		(F			:60-7		n	ck#	7258				
Date of Notification	(1)		lame of Build	ling Owne	er/Operator (2)			46 Um						
10 16 1/11 19	1/1151		Wood-Ric	lge Boa	rd of Educa	tion		- F	1 4,4	E p				
Agencies Notified	Type Notificati	on S	treet Addres	S						1.41	<i>‡</i>			
☐ EPA	<b>X</b> Initial		540 Wind	Isor Roa	ad									
DEP DOL	Amenda	TATALOG AND THE PARTY OF THE PA	ity, State, Zi Wood-Ri		07075					- i				
X DOH		N	ame of Cont	act				Tel	hone	Number				
☐ DCA	Cancella	tion	Peter Ca	atania					1)40	JU-1				
				FACI	LITY INFORM	ATION	1							
Name of facility wh	ere abatement is	s taking pla	ace (3)					Tyr e of Fa						
Wood-Ridge N	Middle Schoo	l (sub-ch	napter 8)					X X		(K - 12) pter 8 (O	ther th	nan K	.12\	
Street Address							19		her (P	rivate/Co	omme		/	
258 Hackens	ack Street							Sc Jare Fe	_	of Floor		Bk	ig. Ag	je
City (5)		Cour	nty (6)		<del></del>		inty Code (7)						20.005	
Wood-Ridge,	NJ 07075	Ве	rgen			(Sta	ite use only)	Ci rrent L M ddle			g dem	olishe	ed)	
Name of Monitorin	g Firm Hired by I	Bldg. Own	er (8)		ASCM No.		Name of Abatement							
EnviroVision					0079		B & G Restora	tion, nc.						
Street Address							Street Address							
20-21 Waga		ilding 35	5E				105 Ryerson							Marine Park
City, State, Zip Cod Fair Lawn, N				ž			City, State, Zip Code Lincoln Park,							
Project Manager for	Monitoring Firm		Pho	ne Numb	er	-	Telephone Number		-	License		ег		
Willie Morale	es		973	3-949-3	523		(973)696-686 Name of OSHA Mor			00	378			
Scheduled Start Da	te (10)	Sched	d. Completion	n Date (1	1)		B & G Restora							
06/23/2015		06/	28/2015	100			Street Address							
Occupancy Status I							105 Ryerson F							
Facility closed	d/vacated during erformed outside					1	City, State, Zip Code							
Describe:				***			LincolnPark, N	IJ 07 )35						
Other-Descrit Scope of Work (ch		/\												
Demolition	eck all that apply	Renovation	on			X	Full Containment w/ne	egative pressu	э [	Glove	oag pr	ocedi	ire	
>3 sf or >3 If		>160 sf or					Mini-enclosure	S #		Non-fr	iable	proce	dure	
Location of		Is locatio	n normally u		/			$\top$		121	R	R	Е	E
asbestos-con		by mainte staff(12)	enance/custo	odial			asbestos-containing	Ami (Sp.	int ify SF	or	e m	e p	n	n
material to be abated in fac		Yes	No	N/A	material	(ACM)		LF)	ally Of	OI .	O V	a	a	C L
			1.0	×	1 +	0 200	atia	150			e X	_		<del> </del>
gym storage are	Commission of the latest terms.				tar paper			150 150	f		X	H	믐	片
gym storage are	ea 2			X	tar paper	& Ma	astic	100			Ħ	H	H	情
								_			Ī			同
Registered Waste H B & G Restorat			EP Hauler II 19563	D# C	ubic Yards of	Waste		d Land fill Resource	k Red	coverv	Cent	ter		
City, State				Disposal D	ate		City, State							
Lincoln Park, N				06/	29/2015		Tullytown	, PA		Dete			У.	
Completed by (Pring Gordana Luna		Title Secreta	ry/Treasu	rer	Signature		Gordana Luna			Date 06/10	0/201	5		

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

	2015-111		7				and 12:120-7)		PI	, .				
B & G proj. #:	2013-111		(	ruisuaii	t to None c	5.00-7	and 12.120-1)	0,	Che	c# 7257				
Date of Notification (	(1)	1.1						140	11/4					
10 16 1/10 19					er/Operator (2)	)				5				
Agencies Notified	Type Notificati		Ruth M. I							5 19:	0.1			
EPA		Si   Si	reet Addres								- 1			
☐ DEP	Initial		36 Serve							- 5	-			
X DOL	Amendr		ity, State, Z Clifton, I		1									
▼ DOH		Na	ame of Con	tact					Telep	ne Numbe	Γ			
☐ DCA	Cancella	ition	Gary Ca	asolaro					9/5	10.	_			
				FACI	LITY INFORM	IATION								
Name of facility whe	ere abatement is	s taking pla	ce (3)					Туре	of Facil					
Ruth M. Feene	ev.								=	iol (K - 12)			40)	
Street Address	.,									hapter 8 (0 (Private/C			-12)	
36 Serven Pla	ce								Bld	:./Homes,				
84 TO SEC. 100 TO								Squa	re Feet	# of Floo	rs	Blo	dg. A	ge
City (5)		Coun	ity (6)			1000000000	nty Code (7) te use only)	Cur	nt Hos	Prior if beir	a don	oliche	ad)	
Clifton			ssaic			(Ota		hou	3e	Prior ii beli	ig dell	IOIISTIE	eu)	
Name of Monitoring	Firm Hired by I	Bldg. Owne	er (8)		ASCM No.		Name of Abatement			,				
n/a	St.		8				B & G Restora	tion, In	). 					У.
Street Address							Street Address 105 Ryerson F	Road						
City, State, Zip Code						-	City, State, Zip Code	10						
							Lincoln Park,	NJ 07	135					
Project Manager for	Monitoring Firm		Ph	one Numb	er		Telephone Number (973)696-686	39		License 0	Numb 0378	er		
0.1.1.1.01.1.0	(40)	ICabad	. Completio	- Data /11			Name of OSHA Mon	itor						
Scheduled Start Date	e (10)			in Date (11	)		B & G Restora	tion, In	D	Age of the same of				
06/20/2015			21/2015		V	_	Street Address			,				
Occupancy Status D							105 Ryerson F				10.54		_	
Facility closed	rformed outside						City, State, Zip Code							
Describe:  Other-Describ			1			-	LincolnPark, N	J 0703	5					
Scope of Work (che		1)											-1	-
Demolition	K all triat apply	Renovatio	n			F	ull Containment w/ne	gative p	essure	Glove	hag pr	ncedu	ire	
		>160 sf or				C: 1000	lini-enclosure	901110 p	555515		riable			
> <u>3</u> sf or > <u>3</u> If		-	n normally u	sed solely			min onoiosaro				TR	R	E	1
Location of asbestos-cont	aining	by mainte	nance/cust		1	on of a	sbestos-containing		Amour	150	е	е	п	E
material to be		staff(12)			material		spesios-containing		(Speci	SF or	m o	p a	c	С
abated in facil	ity (13)	Yes	No	N/A					LF)		v e	i	p	L
basement				×	VAT/Mas	tic			75 sc		X			
		£ .												
Registered Waste Ha B & G Restorati			P Hauler II 9563		ubic Yards of \ 2	Waste	Name of Registered Tullytown			lecovery	Cen	ter		
City, State Lincoln Park, N	J			Disposal D 06/2	ate 22/2015		City, State Tullytown,	PA					V	

Signature

Gordana Luna

Title Secretary/Treasurer Date

06/09/2015

Completed by (Print or Type) Gordana Luna

Date of Notification (1) 06/05/2015	No.				Building C Horse Pi				ool District	é	15 //		1	i	7.
Agencies Notified	Type Notification		383	treet Ac 80 Eri	dress ial Road					L.		1/5	AM	_	
EPA  DEP  DOL	Initial Amended Amendment #				te, Zip Coo rood, NJ						15 JU	<u>ر</u> 4. ز	-47	3.4	2
DOH DCA	Emergency (ir justification) Cancellation	cluding			Contact						one Nu	1-	115: 1	TUZ	
				FACII	ITY INFO	RMATIC	)N				-				
Name of Facility Where Highland High Sch		Place (3)		171012		TOMPATIC		_	e of Facility (4		-				
Street Address 450 Erial Road	v							×	School (K-12 Subchapter Other (i.e. pretc.)	8 (Other			dings,	home	es,
City (5) Blackwood								Squ	are Feet	# of F	ors	E	Bldg. A	ge	
County (6) Gloucester					Code (7) ISE ONLY)		_		ent Use (Prio	r if beinç	iemolis	shed)			
Name of Monitoring Fire Cardino ATC	m Hired by Building O	wner (8)		ASCM 00098					atement Con						
Street Address 3 Terri Lane, Suite	4	į.					Street	Addre			9 <u>0-0-8</u>				
City, State, Zip Code Burlington, NJ 080							City, S	State,	Zip Code J 07011		-				
Project Manager for Mo John R. Lutz		38		elephor	ne No. 6-8800		Teleph	none l	No.		cense	No.			
Start Date (10) 06/24/2015		Scheduled (	Comp				Name	of OS	8828 SHA Monitor		)704				
SECOND STATES OF SECOND		07/10/20	15						mpany, Inc						
Occupancy Status Durin							Street	Addre	ess						
X Facility Closed/Vac Abatement Perform Other – Describe:	cated During Entire Pened Outside of Norma	eriod of Aba Il Facility Ho	iteme ours	ent			City, S	State, 2	Zip Code		-				
Scope of Work (Check /	All That Apply)										-				
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			ovati	37333.0			×	M G	ull Containme ini-Enclosure lovebag Proc	€dure					
		Τ						l N	on-Exempted	*) and	on-Fria	ble Pro			
		Is Lo	catio mally											ement rpe	
Locatio Asbestos-Containing		Used S	Solely	/ by	Ashesi		cription		al (ACM)	Δm	unt		T		
TO BE AE In Fac (13)	BATED '			0.0000		thermal:	system ing, VA	s insu T, or	lation,	(Sp SF	cify	Removal	Repair	Encapsulate	Enclosure
Corridors, 2	2nd floor		Х			Cei	ling til	es		8,17	SF	x			
Name of Registered Wa	este Hauler		-AL	DED IA	looto	Cubic	/ marl -		I Nie o de	5 material	1				
Newark Carting, Inc			На	IDEP W Juler ID 409		of Was			Name of F		Landf	111			
City, State Néwark, NJ			1	1.1		Dispos 07/10/			City, State Bethleh		10-				
Completed by Voytek Roszkowski	numb	Title Preside	nt			Si	gnatur	d'i	50 100	٠. ا	100	ate 06/05/	2015		

(Pursuant to N.J.A.C. 8:60 and 12:120)

Agencies Notified   PA	Date of Notification (1)			Nam	e of l	Buildina	Owner / Operato	or (2)		3 7	100 J T		24.000 1.00	
DCA	6/			VER	IZO	N COM	MUNICATION	s 2015	. 700					
DCA	⊠ EPA	Notification					GOMERY PLA	ACE A.S.	0.17	AM 3	R: 50			
DCA								-^	. 1775	100	- 0			
DCA								Q <sub>2</sub>	111:2	- ( N 1	701.			
Second   S									- 31	1.691	elepho	ne N	lumb	er
Name of Facility Where Abatement is Taking Place (3)   Type of Facility (4)   Woodbury Cortral Office - VERIZON   Street Address   Subchapter 8 (Other thai is K-12   Other (i.e. private & corn nerolis Square Feet   F of Floos   Square Feet   F of Floos   Square Feet   F of Floos   County (6)   County (7)   Current Use (Prior if being de molist Communications   Name of Monitoring Firm Hired by Building Owner (8)   ASCM No. Name of Abatement Contract or (9)   BRISTOL ENVIRONMENT AL IN   Street Address   Street				person and	(1. 10.00), (1.0),	1/2-27-03-000-001-0	X 							
Woodbury Central Office - VERIZON   Subcapter & Cother (i.e. private & com nercis   Square Feet   #6 of Floo   Flo	Name of Facility Where	Ahatement is Taking P	lace (		ACIL	II Y INI		lity (A)	-	-				
Subchapter 8 (Other file. private & com nercis 2 buildings, homes, etc.)   Square Feet   # of Floor 5 Square Feet   # of Floor			1000 (	0)										
County (6)								50	aı K-12					
County (6)   County (6)   Camden   County Code (7)   Current Use (Prior if being de nolist do Communications   Communicatio	24 Curtis Ave.						Other (i.	e. private & cor	m nercia	building	s, hom	ies, e	etc.)	8
Name of Monitoring Firm Hired by Building Owner (8)	0.17 (2.)						Square Feet	# of Flo	00 'S	BI	dg. Ag	е		
Communications			Co	ounty	Code	e (7)								
Name of Monitoring Firm Hired by Building Owner (8)	vvoodbury	Camden						20.	ie nolish	d)				
USA Environmental  Street Address \$436 Enterprise Ave City, State & Zip Code Philiadelphia pa 19153 Project Manager for Monitoring Firm Mark Jenkins  Scheduled Start Date (10) Scheduled Start Date (10) Scheduled Start Date (10) Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor BRISTOL. ENVIRONMENT AL IN Scheduled Start Date (10) Scheduled Completion Date (11) Scheduled Start Date (10) Scheduled Start Date (10) Scheduled Completion Date (11) Scheduled Start Date (10) Scheduled Start Start Start Date (10) Scheduled S	Name of Monitoring Firm	Hired by Building Ow	ner (8)	1	Δ	SCM No			ct or (0)	-				
State & Zip Code   Shiston Number   Zef-784-8651   Zef-784-86	USA Environmental	Timed by Building Ow	ilei (o			JOIN NO				)				
City, State & Zip Code Philadelphia pa 19153  Project Manager for Monitoring Firm Mark Jenkins  Scheduled Start Date (10) G/29/15  Scheduled Completion Date (11) Richard Start Date (10) G/29/15  Scheduled Start Date (10) G/29/15  Scheduled Completion Date (11) Richard Start Date (10) G/29/15  Scheduled Start Date (10) G/29/15  Scheduled Completion Date (11) Richard Status Date (10) G/29/15  Scheduled Start Date (10) G/29/15  Scheduled Completion Date (11) Richard Status Date (10) Richard Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Describe: 5:00 PM − 1:30 AM Facility Coccupied During Abatement Scope of Work (Check all that apply)  Location of Asbestos-Containing Material (ACM) Material (ACM) TO BE ABATED In Facility (13)  TO BE ABATED In Facility (13)  Renovation Demolition  Description of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Renovation Demolition  Demolition  Description of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)  Renovation Demolition  Demolition  Demolition  Demolition  Description of Asbestos-Containing Material (ACM) SF r LF) Renovation Normally Used Solely by Material (ACM) TO BE ABATED In Facility (12) Yes No N/A  Basement Boiler Room  Basem	252													
Philadelphia pa 19153  Project Manager for Monitoring Firm Telephone Number 267-784-8651 Scheduled Start Date (10) Scheduled Completion Date (11) Scheduled Start Date (10) Scheduled Start Date (10) Scheduled Completion Date (11) Scheduled Start Date (10) Scheduled Completion Date (11) Scheduled Start Date (10) Scheduled Start Date (10) Scheduled Start Date (10) Scheduled Completion Date (11) Scheduled Completion Date (11) Street Address Street Address Start														
Mark Jenkins		3												
Scheduled Start Date (10) 6/29/15   Name of OSHA Monitor BRISTOL ENVIRONMENT AL IN 7/13/15   Street Address   Street Address		itoring Firm							Li	ense Nu		_	,	
Occupancy Status During Abatement (Check only one)		Scheduled Co.			-						0050	19		
Facility Closed/Vacated During Entire Period of Abatement   Abatement Performed Outside of Normal Describe: 5:00 PM − 1:30 AM   Facility Occupied During Abatement   Scope of Work (Check all that apply)   Full Containment   With Negative Pressure   With Negative Pressu		ocheduled Col			ale (1	1)			II AL IN	;				
Abatement Performed Outside of Normal Describes: 5:00 PM – 1:30 AM Facility Occupied During Abatement    Scope of Work (Check all that apply)	Occupancy Status During	Abatement (Check o	nly on	e)										
Describe: 5:00 PM – 1:30 AM Facility Occupied During Abatement    Scope of Work (Check all that apply)   Scope of Work (Check all that				of Ab	aten	nent			_	2				
Facility Occupied During Abatement   Scope of Work (Check all that apply)   Winite Enclosive of Mon-Exer upted   Mon-Friable Procedure   Mon-Exer upted   Mon-Friable Procedure   Asbestos-Containing   Asbestos-Containing   Material (ACM)   Scope of Work (Check all that apply)   Scope of W			aı											
Scope of Work (Check all that apply)   Scope of White Enclosure   Mini-Enclosure							BKISTOL, F	A 19001						
≥3 sf or ≥3 lf								_		-		025		
≥160 sf ≥260 lf	>3 sf or >3 lf			Ra	nova	tion				with Ne	gative	Pres	ssure	
Non-Exer pted   Individual Non-Exer pted   Individual Non-Friable Procedure   Individual Non-Friable Procedure   Individual Non-Exer pted   Individual Non			H						The second second second	dures				
Location of Asbestos-Containing Material (ACM) Material (ACM) TO BE ABATED Maintenance or Custodial Staff? (13)  Basement Boiler Room  Basement Boiler Roo											Friable	Pro	cedu	re
Material (ACM) TO BE ABATED in Facility (13)  Basement Boiler Room Basement Boiler Room  Basement Boiler Room							Description		Ar	ount				
Maintenance or Custodial Staff? (12)   Yes   No   N/A   N/		•				d								
Basement Boiler Room						r			SF	(LF)	Re	R	nce	Enc
Basement Boiler Room			Cust			?	insulation, surfac	cing, VAT			Mov	epai	nsdı	dsou
Basement Boiler Room	(13)		Yes			Δ	or other miscell	aneous)			<u>a</u>	_	late	ıre
Basement Boiler Room    Boiler/Breeching/ Packing/Rope Insulation   Demo/Removal of Boiler   Dem	Basement Boiler Roo	m			1.,,,		Fitting & Pine	e Insulation	62	I.F.		П		
Packing/Rope Insulation   Demo/Removal of Boiler   Demo/Removal of Bo				П	T	1						Ħ	H	H
Name of Registered Waste Hauler  NJDEP Waste Hauler ID No. 20990  City, State NEW CASTLE, DE 19720  In its Entirety, Assoc. piping & ID		21	62033				acking/Rope I	nsulation	_	-				
Name of Registered Waste Hauler  NJDEP Waste Cubic Yards of Waste Hauler ID No. 20990  City, State NEW CASTLE, DE 19720  Completed By (Print or Type)  Assoc. Breeching/Duct  Disposal Date  Cubic Yards of Waste MINERVA LA NDFII  Disposal Date WAYNESBUF G, O  Date  Date	Basement Boiler Roo	m	M	Ц	L				_	Tanana and Allenda				
Name of Registered Waste Hauler  NJDEP Waste Cubic Yards of Waste  Hauler ID No. 20990  MINERVA LA NDFII  City, State  NEW CASTLE, DE 19720  Completed By (Print or Type)  Title  Signature  Date				H	+  -					_		ዙ	H	H
SERVICE TRANSPORT GROUP, INC.  Hauler ID No. 20990  MINERVA LA NDFII  City, State  NEW CASTLE, DE 19720  Completed By (Print or Type)  Title  Signature  Date	-		H	H	+	1	ASSOC. Dreech	ing/Duct			H	H	H	H
SERVICE TRANSPORT GROUP, INC.  20990  MINERVA LA NDFII _  City, State  NEW CASTLE, DE 19720  Completed By (Print or Type)  Title  Date  Date	Name of Registered Was	te Hauler		N.	JDEP	Waste	Cubic Yards	Name of Regi	s ered L	ndfill		ш		
City, State  NEW CASTLE, DE 19720  Completed By (Print or Type)  Title  Signature  Date	SERVICE TRANSPOR	T CROUP INC		Ha			of Waste							
NEW CASTLE, DE 19720  Completed By (Print or Type)  Title  Signature  Date		I GROUP, INC.			20	550	Disposal Data		M ADLI	-				
Completed By (Print or Type)  Title Signature  Date	마니() [18] (18] [18] (18] (18] (18] (18] (18] (18] (18] (	20					Disposal Date		JF:G, O					
Patrick T. DeCaro Estimator Latrick 1 DeCare 1 6/9/15		rpe)		Tit	le		Signature					g 1	,	
	Patrick T. DeCaro			Es	stima	ator	Patrick	9. Dela	1. Id		6/	9/	15	

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

		(Pu	ırsu	ant	to L	A.J.A	. <u>C.</u> 8:60 and	1 12:12	20)	. 14	(	14#	28	23	3
Date of Notification	(1) 6/9/15			Nam VER	e of B	uilding	Owner / Operat	or (2)		mad E	File				
Agencies Notified  EPA	Type Notifica			Stree 15 N	t Add	ress GOM	RY PLACE		2012	JUg	5				
☐ DEP ☑ DOL ☑ DOH	☐ Amer			PITT	SBU		PA 15212		Ass.	ii	1	J: 56			
□ DCA		ellation		ALE	Х ВА	ontact YLOF	2			4101	$\frac{1}{I_{i_{k}} \cdot I_{i_{k_{k_{k}}}}}$	Teleph	one l	Numb	oer
Name of Facility M/h				FA	CILI	TY IN	FORMATION								
Name of Facility Wh Verizon Ewing Co Street Address	O Abateme	ent is Taking Pla	ace (3	3)			Type of Fac	(K-12)							
1606 Pennington	Road						Other (i	.e. priva	Other that te & cour	merc		ngs, hon	nes,	etc.)	
City (5)		C (C)			0 !	/ <del></del>	Square Feet	t	# of Flc	ors		Bldg. Ag	je		
Ewing		County (6)	100	unty	Code	(7)	0	/D : ::							
		Mercer					Current Use Communic			emolis	ied)				
Name of Monitoring USA Environmen	Firm Hired b tal	y Building Owne	er (8)		AS	CM No	Name of Aba BRISTOL I				1C				
Street Address 8436 Enterprise A	Ave						Street Addre	ess							
City, State & Zip Coo Philadelphia pa 1							City, State & BRISTOL,	Zip Cod	de						
Project Manager for Mark Jenkins	Monitoring F	Complete C			Num 8651	ber	Telephone N 215-788-60	lumber	-		cense I	Number 0050			
Scheduled Start Date 7/1/15	e (10)	Scheduled Com		n Da		1)	Name of OS BRISTOL E	HA Mon		TAL	10	0030	15		
Abatement P	ed/Vacated E Performed Ou	Ouring Entire Pe Itside of Norma	eriod o	of Ab			Street Addre 1123 BEAV City, State &	ER ST	REET						
Facility Occu		Abatement					BRISTOL,	PA 190	07						
Scope of Work (Che		ply)						⊠ F	Full Cort	ainm	ıt with N	Vegative	Pre	ssure	<u>}</u>
≥3 sf or ≥3 lf ≥160 sf ≥260					novati				Mini-En Glove Ba Non-Exe	g Pro		a Esiable	. D		
Loc	cation of		ls L	ocat	ion	1	Descriptio		NOII-EXE		nount		95.00	ent T	
Mate	os-Containing rial (ACM) E ABATED		Norm Sc	ally l	Used		Asbestos-Cor Material (A (i.e., thermal s	ntaining CM)		(:	pecify or LF)				
	Facility (13)		Custo		Staff?		insulation, surfactor or other miscell	cing, VA				Removal	Repair	Encapsulate	Enclsoure
Basement Equipm	nent Room						Duct Insula	ation		7	) SF		П	П	П
Roof				H	B		Wall Roof Fla	ashing			5 SF		昌	Ħ	
				Ħ						_	·		블		
				H	H						-	H			H
Name of Registered	Waste Haule	r				Waste D No.	Cubic Yards of Waste	Name	of Regi	tered	andfill				
BRISTOL ENVIRO	NMENTAL	INC		10000000	706			GROV	VS LAI	DFIL					
City, State BRISTOL, PA							Disposal Date	City, S	tate RISVIL .	E. P.					
Completed By (Print of Patrick T. DeCaro	or Type)			Titl	e tima	tor	Signature				1:R	Date 6/9/1	5		

EDS15-098-1

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

check # 1460 Page 1 of 1

Date of Notification (1) 6-5-2015					Building O Grove B			ion 201	5 JUN	5 A	¥ 3:	ic		
Agencies Notified	Type Notification			Street Ad 520 Po	dress mpton A	venue		₹5.	27.00	. (	- 1	~ <del>~</del>		
EPA DEP DOL	Initial Amended Amendment #				e, Zip Coo Grove, N		)9		<del>4. ()</del>	REIL	'G	V.		
× DOH × DCA	Emergency (ir justification) Cancellation	cluding	11 8	Name of Mario (					Геlерh	e Num	ber			
<u>N</u> 20/1				FACIL	ITY INFO	RMATIO	N							
Name of Facility Where Cedar Grove High		Place (3)					Ty		2)					
Street Address 90 Rugby Road								Subchapter of Other (i.e. prefetc.)				lings,	home	es,
City (5) Cedar Grove								quare Feet 50,000	# of Flc 2	rs	1 1	ldg. A 0+	ge	
County (6) Essex				County C	ode (7) SE ONLY)			urrent Use (Prio school	r if being (	molish	ed)			
Name of Monitoring Firm Ahera Consultants		wner (8)		ASCM 0005			Name of	Abatement Cont oup, Inc	tra :tor (9)					
Street Address PO Box 385	et Address Box 385 , State, Zip Code						Street Ad 140 Ha	dress mburg Turnp	oik e					
City, State, Zip Code Oceanville, N.J. 082	v, State, Zip Code ceanville, NJ 08231-0385							e, Zip Code ngdale, NJ 0	7403					
Project Manager for Mo	ceanville, NJ 08231-0385 Spect Manager for Monitoring Firm Seph Capone						Telephon	e No.	Li	nse No	).			
Start Date (10)		Scheduled	Con		552-1833 Date (11)		Name of	OSHA Monitor		1				
6-19-2015	I V		SCEEN .	1			Street Ad		_	_				
Occupancy Status Durin						4		mburg Turni	oik e					
	cated During Entire Poned Outside of Norma					F	City, Stat	e, Zip Code						
_							Bloomi	ngdale, NJ 0	72 03	_				
Scope of Work (Check /	All That Apply)	X Re		41			×	Full Containme	nt with Ne	ative D	raccii	ro.		
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			nova molit					Mini-Enclosure Glovebag Prod Non-Exempted	ed ire					
					- 120			Non-Exempled	anu N	I-FIIab	10	Abate		t
500	· ·	110000	ocati ormal	2000		Dan							ре	
Asbestos-Containing TO BE AE In Fac (13)	g Material (ACM) BATED ility	Used Main Custo	Sole tenar	ly by nce/		os Conta thermal s surfaci	cription of sining Mat systems ir ing, VAT, iscellaned	erial (ACM) nsulation, or	Amo (Spe SF or	fy	Removal	Repair	Encapsulate	Enclosure
Boiler F	Room	X	2007	1		Rib	Packing	1	120	F	Х			
N (C 10)							Brick	,	200	F	X			
	Boiler Room X  Boiler Room X						asket		40		X			
Bollet 1	Boiler Room X													
Name of Registered Wa	ste Hauler		1000	IJDEP W		Cubic Y		Name of	Re jistered	andfill				1
GL Group, Inc				lauler ID 033034		of Was	(5)5	Grows						
City, State Bloomingdale, NJ		ti se				Disposa TBD	al Date	City, State Morrisv						
Completed by Elena Solakov	90. P	Title Presid	ent	1 1	* #	Si	gnature	Eleru Sde	den_	Da 6-	te 5-20	15		

EDS15-156

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

check #14(1)
Page 1 of

Date of Notification (1) 6-4-2015			ne of Building			(2) ard of Educatio	n	2015	JU	15	tr.	
Agencies Notified Type Notifica	tion		et Address 4 Gray Stre	et								
EPA Initial Amende Amendr	nent #		, State, Zip Co est Caldwel		006-7	596		- CC	1,10	EN	WS	RO
□ Emerge     justificat     □ Cancell			ne of Contact ank Ennis				elepho	e Num	ber			
_		F	ACILITY INF	ORMATI	ON			-				
Name of Facility Where Abatement is T Jefferson Elementary School	aking Place (3)					Type of Facility (4  School (K-12	2)		200			
Street Address 85 Prospect Street						Subchapter 8 Other (i.e. pr	iva e & co	n K-12 mercia	i) al build	lings,	home	s,
City (5) West Caldwell						Square Feet 5,000+	t of Flo	S		ldg. A 0+	ge	
County (6) Essex			inty Code (7) ATE USE ONLY	)	_	Current Use (Prio School	r if being d	nolish	ed)			
Name of Monitoring Firm Hired by Build Ahera Consultants Inc	ding Owner (8)	14	SCM No. 057		EXEV. 1911-11-1	of Abatement Conf	tractor (9)					
Street Address PO Box 385						Address Hamburg Turng	oike:	-				
City, State, Zip Code Oceanville, NJ 08231-0385					City, S	tate, Zip Code mingdale, NJ 0	30, 0000000					
Project Manager for Monitoring Firm		1	ephone No. 19) 652-183	13	Teleph	one No. 710-9725	Lic	nse N 84	0.			
Krystoff Liz Start Date (10)		Comple	tion Date (11)		Name	of OSHA Monitor			,			
6-22-2015	8-7-2015					Froup, Inc		_				
Occupancy Status During Abatement (	Check Only One	)		20 92		Address Hamburg Turnp	nik a					
Facility Closed/Vacated During El Abatement Performed Outside of Other – Describe: Sub-8 Occupie	Normal Facility F			- 	City, S	tate, Zip Code mingdale, NJ 0		900	VII			
Scope of Work (Check All That Apply)								-				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		novation molition			×	Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	edire				•	
					-	1 Non-Exempled	and N	-i IIaL	1		ement	
		ocation ormally		Б.						Ту	ре	
Location of Asbestos-Containing Material (ACI TO BE ABATED In Facility (13)	M) Used Main Custo	Solely b tenance dial Staff (12)	(i.e	stos Con thermal surfa		Material (ACM) s insulation, T, or	Amor (Spec SF or	У	Removal	Repair	Encapsulate	Enclosure
Crawlspace	X		N.V.C.	ermal S	vstem	Insulation	6,475	F	X			
Crawispace			1110	ormai o	yotom	modication		-				
					100							
Name of Registered Waste Hauler		NIDI	EP Waste	Cubic	Yards	Name of I	Re istered	andfil				
GL Group, Inc		Haul	er ID No. 3034	of Wa		Grows					30.	
City, State Bloomingdale, NJ				Dispo TBD	sal Date	City, State Morrisv		(a 1)				
Completed by Elena Solakov	Title Presid	ent	13 13 (1)		Signature	Elen Ste	M.	0.0000000000000000000000000000000000000	ate -4-20	15		

D&S Proj. #: 2015-197

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

								CETE JAK				
Date of Notification (1)	Name of Bu	ilding Own	er/Operator (2)					CAS STA	13	Est	^	
10 16 1/10 19 1/11 15		residence								200	ST &	5
Agencies Notified   Type Notificat	Street Addr	ess						47.5	F-1 . 19			
DEP Amended	43 post a	ivenue,							# 0 T - 7	120	77	
Amendment #:	City, State,	Zip Code										
□ Emergency	hawthor	ne, nj 07:	506									
DOH (including justification)	Name of Co	ntact					Tele	none Numbe	r			
DCA Cancellation	andrew	denully					- 1					
		FAC	ILITY INFORM	ATION				-				
Name of facility where abatement is	s taking place (3)					Тур	of Fac	ity (4) hool (K - 12	)			
sinnigan residence							Пѕ	5-700-F 62-000 = 5-30		nan K	-12)	
Street Address							X o	er (Private/Ogs./Homes,	Comme		-/	
43 post avenue,						So	are Fe			Bio	dg. Aç	ge
City (5)	County (6)				nty Code (7)	_				·-		
hawthorne	PASSAIC			(Sta	te use only)	Cı	rent U	(Prior if bei	ng dem	iolishe	ed)	
Name of Monitoring Firm Hired by	Bldg. Owner (8)	1	ASCM No.		Name of Abatement	Contr	ctor (9					
					D & S RESTOR	ATIO	N, IN					
Street Address				-	Street Address							
					20 California A	ve.						
City, State, Zip Code					City, State, Zip Code							
					Paterson, NJ 07	7503						
Project Manager for Monitoring Firm	P	none Numb	er		Telephone Number	×		License				
					973-345-8020				01169			
Start Date (10)	Sched. Completi	on Date (1	1)		Name of OSHA Mon D & S Restorati		- 0					
06/23/15	06/30/15				Street Address	1011, 1	I U.	-				
Occupancy Status During Abatemer					20 California A	venue						
Facility closed/vacated during					City, State, Zip Code	)						
Abatement performed outside Describe:		Irs-										
Other-Describe: NORMAL H	OURS			_	Paterson, NJ 07	7503		_				
Scope of Work (check all that apply	()							nt w/negative	e press	ure		
$\boxtimes$ >3 sf or >3 lf	Renovation						e iclosur	adura				
≥160 sf or ≥260 lf	Demolition				Ħ		0 1	(*) and Non	-friable	proce	edure	
Location of	Is location normally	used solely	/						R	R	Е	E
asbestos-containing	by maintenance/cus staff(12)	stodial			sbestos-containing		Amo		e m	e p	n c	n
material (acm) to be abated in facility (13)	Yes No	N/A	material (	(ACM)			LF)	fy SF or	0	a	а	C
	103 100	INA						-	ė	r	р	
BASEMENT	X		PIPE INSU	LATI	ON		1)71ft					
			]									
Registered Waste Hauler D & S RESTORATION, INC.	NJDEP Hauler 13506		ubic Yards of V 2 yds.	vvaste	Name of Registered TULLYTOWN,			RECOVE	RY			
City, State		Disposal D			City, State							
PATERSON, NJ 07503		06/24/1			TULLYTOWN	, PA						
Completed by (Print or Type)	Title		Signature					Date	1/201/			
BOGDAN JOLDZIC	PRESIDENT  Do not use this form	for ashest	ne licensure av	empto	d activities			06/09	/ 2015	)		

D&S Proj. #: 2015-196

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

D&S Proj. #: 2015-196			(Fuis	uarii io	NJAC 0	.00	and 12.120)		75.	15.				
Date of Notification (1)	8	Name of	Building Ow	ner/Oper	ator (2)			£.		¥15 (A	-			
10 16 1/10 19 1/11 15	70	kelvin	williams								J. (	5		
Agencies Notified   Type Noti	fication	Street A	ddress						10	A STATE OF THE STATE OF				
DEP Amende	ed		ard street							1. 11. 11.	141.			
Amendmer	nt #:	City, Sta	te, Zip Code											
DOL Emerge		-	ON, NJ 070	83										
DOH (including justification)		Name of	Contact				(		Telep	ne Number				
DCA Cancella	- 82	kelvi	n williams						<u>.</u>					
			FAC	CILITY IN	IFORMAT	ION	I							
Name of facility where abatem	ent is taking	g place (3)						Туре	of Facil	v (4) pol (K - 12)				
kelvin williams									=	:hapter 8 (O	ther th	an K	-12)	
Street Address								i	₹ Oth	r (Private/Co	omme		/	
392 ward street								Saus	Bld re Fee	# of Floor		Ble	dg. A	ne .
City (5)	To	County (6)			T	Cou	inty Code (7)	Sque	6166	# 01 1 1001	٠	D.	ag. /\	90
		, , ,					te use only)	Curr	ent Use	Prior if bein	g dem	olishe	ed)	
UNION		UNION												
Name of Monitoring Firm Hired	d by Bldg. O	wner (8)		ASCN	l No.		Name of Abatemen							
Street Address						=	D & S RESTOR	RATION	, INC					
Olicet Address							20 California A	ve.						
City, State, Zip Code						=	City, State, Zip Code							
39							Paterson, NJ 0	7503						
Project Manager for Monitoring	Firm		Phone Num	ber		_	Telephone Number			License		er		
							973-345-8020			0	1169			
Start Date (10)	So	hed. Comp	letion Date (	11)		_	Name of OSHA Mo D & S Restora							
06/22/15	06	5/30/15					Street Address	oroza, zare						
Occupancy Status During Abate		1000			100-940-7-1-1-1-1-1	٦	20 California A	venue						
Facility closed/vacated du Abatement performed out							City, State, Zip Code	е						
Describe: NORMA  Other-Describe: NORMA	AL HOURS	A-1-1-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-				-	Paterson, NJ 0	7503						
Scope of Work (check all that a							Г		tainme	w/negative	press	ure		
$\ge 3$ sf or $>3$ If	Renov	ation						Mini-en						
≥160 sf or ≥260 lf	☐ Demoi	lition								lure *) and Non-	riahle	proc	edure	
Location of			ally used sole	ly				1 NOTE A	mptot	) and Hom	R	R	E	E
asbestos-containing	by ma staff(	aintenance 12)	custodial				sbestos-containing		Amou	SE or	e m	e p	n	n
material (acm) to be abated in facility (13)	Yes		N/A	- ma	aterial (AC	CM)			LF)	SF or	0	a	а	C L
				7					F 77/77		e	r	р	-
BASEMENT				PIPE	INSULA	AΤ	ION	66	LFT			부	片	뷰
		-	_	4-		_					片	屵	믐	ዙ
		= -		#-		-	1989				H	片	H	H
		=	-	+							片	+	Ħ	Ħ
Registered Waste Hauler		JDEP Hau	ler ID#		rds of Wa	ste	Name of Registere					_		
D & S RESTORATION, IN	vC.	13506	Disposal	1 yd.		_	TULLYTOWN	, RESO	JRCE	RECOVER	Y		7-11-1	
City, State PATERSON, NJ 07503			Disposal 06/23/				City, State TULLYTOWN	J. PA						
Completed by (Print or Type)	Title			Signa	iture	_	1 10101110111	.,		Date				
BOGDAN JOLDZIC		SIDENT								06/09/	15			
ASB-41	* Do no	t use this for	orm for asbes	tos licens	sure exem	npte	d activities.				and processing.	111111111		

D&S Proj. #: 2015-195

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

												The J	15.				
Date of Notification (1)		IN	ame of B	uilding Owr	ne	r/Operator (2)					£.		11/	5 ,			
0 6 /0 8 /1			MILLIE	BRENNI	EI	R						4.		***	3	61	
Agencies Notified Type  EPA Ini	e Notification	S	treet Addi	ess								4: [ ]	1,00			1	
	nended		15 ERIE	EPLACE									54	1,			
Amer	ndment #:	_     0	ity, State,	Zip Code						_						-	
	mergency	T	nutley,	nj 07109								76					
	cluding stification)	Na	ame of Co	ntact							Tele	hone Nu	umbe	r			- 10
D DCA	ancellation		MILLI	E BRENN	VE	ER					k						
	arioonation				500	ITY INFORM	ATIO	1									
Name of facility where ab	patement is ta	aking pla	ce (3)					I	1	Тур	of Fa		40)	2			
MILLIE BRENNER											=	hool (K	- 35		han V	10\	
Street Address											X C	bchapte ier (Priv	ate/C	omme		-12)	
15 ERIE PLACE									ŀ	Sq	are Fe	gs./Hom	Floor	5047A	BI	dg. A	ge
City (5)		Coun	ty (6)					inty Code (7)		_		_					
nutley		ESS	EX				(Sta	ite use only)		Cu	rent U	) (Prior i	f bein	g den	olish	ed)	
Name of Monitoring Firm	Hired by Bld				T	ASCM No.		Name of Abatement	t C	ontra	ctor (9						
_								D & S RESTOR	'A	TIC	N, IN						
Street Address								Street Address									
City, State, Zip Code					_	4	_	20 California A City, State, Zip Code	_								
Oity, State, Zip Code										00							
Project Manager for Monito	oring Firm		Ip	none Numb	ho	r	_	Paterson, NJ 07 Telephone Number	/50	03		Ilio	onco	Numb	or		
rejestimanager for monit	omig i min		1.	TOTIC INGITIE	DC	I a		973-345-8020	)			Lic		1169	Jei		
Start Date (10)		ICahad	Complet	on Date (1	41		_	Name of OSHA Mor	_	r							
Acceptance of the Acceptance		Scried.	Complet	on Date (1	1)			D & S Restorat			c.						
06/24/15		06/30						Street Address									
Occupancy Status During								20 California A		nue							
Facility closed/vacat Abatement performe Describe:	ed auring ented outside of i	tire perio normal f	d of abate acility hou	ement. rs-				City, State, Zip Code	9			A		9-3-11-22-11			
Other-Describe: NO	ORMAL HOU	RS					_	Paterson, NJ 07	75(	03							
Scope of Work (check all	that apply)								Fu	ıll Ca	ntainm	nt w/neg	ative	press	ure		
$\ge 3$ sf or $>3$ If	<b>⊠</b> Re	enovation	1						27		closur	•		•			
≥160 sf or ≥260 lf	П De	molition						×			ag pro		N.I.		172735E-39		
Location of	Is	location	normally	used solely	v				1/10	On-E	kempte	(*) and	NON-	I R	Proce	E	
asbestos-containing	1 06	/ mainter aff(12)	nance/cus	todial		Descriptio	n of a	sbestos-containing			Amo			e m	e	n	l E
material (acm) to be abated in facility (13				T	1	material (A		3			(Spe LF)	fy SF or		0	p a	c a	C
		Yes	No	N/A	1									v e	i	р	-
BASEMENT			X		1	PIPE INSUI	LATI	ON		1	0 L F			×			
BASEMENT			X			chimney this	mble	packing		3	SQ F			$\boxtimes$			
					]												
Registered Waste Hauler D & S RESTORATIO	N, INC.	NJDE 1350	P Hauler )6	A1.000.00		oic Yards of W yds.	aste	Name of Registered TULLYTOWN,				RECO	VER	Y			
City, State	2002			Disposal D		te		City, State									-
PATERSON, NJ 075				06/25/1	5			TULLYTOWN	, P	Α							
Completed by (Print or Typ BOGDAN JOLDZIC	( ) ( )	333	ידיאי		1	Signature				-		100000	ate	100-			
ASB-41		RESIDE		for ashest	08	licensure exe	mote	d activities	_			1_0	0/08/	2015			

							2015			J N		_
Date of Notification (1)			Name of I	Building Owne		25 (	06	UN 15				
Agencies Notified	Type Notification		Street Ad	/400	, ,		AVC 10	1/4/5	17	3:	4	
DEP DOL	Initial Amended Amendment #			e, Zip Code		N. J		10	4. 4.			
DOH	Emergency (inc justification)	luding	Name of	Contact		105		e Numb	1			
Z DCA	Cancellation		Be	ITY INFORMA		100						
Name of Facility Where	Abatement is Taking F	Place (3)	FACIL	TIT INFORMA	TION	Type of Facil	lity (4)					
	1111105	66		- 1		School		- 1( 40)				
Street Address	100 Park	t A	ve.			Other (i etc.)	pter 8 ( )ther the.e. private & co		buildin	gs, h	omes	٤,
City (5) Cinc						Square Feet	rs ou			g. Age	5	
County (6)			County C	Code (7)			(Prior if being					
Name of Monitoring Firm	OI)	mor (9)	ASCM		Name		/ / ?e + Contra :tor (9)	Ne	9			
Name of Monitoring Firm	1/A	riei (o)	ASCIVI	NO.			ates c	ntr	Q C7	4,,	39	
Street Address	///				Street	Address	in 5.t.	Ext	213	510	7	
City, State, Zip Code					City, S	State, Zip Code	(1) O. 1.	, ,	00	77	_	
D. i. d. M for M.	No dia a Cina		Tolophor	an No	Tolon	hone No.	1/10 N.	nse No.	00	12		
Project Manager for Mor	nitoring Firm		Telephor	ie ivo.	7.32	. 525	0100			19		
Start Date (10)		cheduled Co			Name	of OSHA Mor	nitor			,		
Occupancy Status Durin	15	7-3	3-13		Stree	Address	nu on	ner	19			$\dashv$
	cated During Entire Pe		ement		23	34 20	>+h	IVE	-			
Abatement Perform	ned Outside of Norma	Facility Hou	Irs .	hours	City, S	State, Zip Code	ルブ.			1	1	
Scope of Work (Check /			0		10	FICH	μ. υ.	00	/	~ `	<u> </u>	
23 sf or ≥3 lf	лі тпас другу)	Reno	vation		5	Full Conta	ainment with Ne	ative Pr	essure			
≥160 sf or ≥260 lf		Demo				Mini-Enclo	osure Proce <mark>c</mark> ure					
					Ĺ		npted (* and N	1-Friable				
		Is Loc							Α	baten Typ		
Locatio Asbestos-Containing		Norm Used Sc		Ashestos (	Descriptio Containing	n of Material (ACM	) Amo	nt			m	(000)
TO BE A	BATED	Mainter Custodia		(i.e. ther		ns insulation,	(Spe SF or		Remova	Re	ncap	Enclo
In Fac (13)		(12	2)	7.7	er miscella		0. 0.	.,	noval	Repair	Encapsulate	Enclosure
		Yes No	o N/A								te	LD
7- Pipes	tills	X		Tar	Paper	2 - Mac	150	/	X			
,					1							
Water Front	Sub station	ıχ		Transi	+ PI	pe	3'	-				
# 16	,			MINI		closure		4611	X		0	
Horwith	- 11		NJDEP W Hauler ID	No. of	ubic Yards Waste	Nam	ne of Registere	_andfill	7)	500	250	,/
City, State	Trucking - Noath		571		sposal Dat		State	0	1	151	01	/
Po Box Completed by	7 Noath	Title			7-3 Signatu		741563	Dat	7. e	100	7	9
Ku1	- + Nale	Title 50	perj	1 tender	4	But	hale		6-1	//-	-/5	5

Date of Notification (1)							_	ner/Operator (						_	
6/			Tre	nton Ho	usin	g Authority	/ Job #15	16-491	Check:	¥728	1	24			
Agencies Notified	Type Notific	cation			Stree	t Address					7		-		1100 10
⊠ EPA					875	New Wi	llow	Street					. 5	S.	
⊠ DOLWD	☐ Amende	0.000			City, S	State, Zip (	Code				-				
☑ DHSS ☐ DCA	Amendn    Emerge		_		Tre	nton, NJ	086	38							
(NJAC 5:23-8)	justificat		iuuing		Name	of Contac	ct			Telep	one Numb	er			
	Cancella				Gu	y Margio	tti			1 1					
					FA	CILITY IN	IFO	RMATION							
Name of Facility Where A	batement is	Taking	Place	(3)		VIII.		111111111111	Type of Facility	4)					
Josephson Apartm		0		/					School (K-12						
Street Address			10000				-		Subchapter !						
237 Oakland Street									Other (i.e., p homes, etc.)	ivate a	1 commerc	cial bu	ııldıng	JS,	
City (5)	-								Square Feet	T# of	loors	Ble	dg. A	ae	
Trenton									equal o r oor	,, ,,	100/0		-9.,	30	
County (6)					Cour	nty Code (7	71/57/	ATE USE ONLY)	Current Use (Pr	or if he	a demolish	ned)			
Mercer					0001	ity oodo (i	ДОП	TE OOL ONE I)	Apartment I		2028	iou)			
	me of Monitoring Firm Hired by Building Owne						Na	me of Abatem	ent Contractor (9)	- I	1				
	M.E.C.S.							AbateTech, I							
	eet Address							eet Address	110.						
	reet Address Po Box 341								DO Boy 25						
	Po Box 341 ry, State, Zip Code						-		e. PO Box 25						
	ty, State, Zip Code						Red dies	y, State, Zip Co							
	Chesterfield, NJ 08515							umberton, I	NJ 08048	111	- N				
Project Manager for Moni					ephone		100000	ephone No.		1000	se No.				
William Weisgarber		0 1 1		0050	09-915		-	09-265-2107		0	129				
Start Date (10)6 /10 /		Schedu				0.000		me of OSHA N							
				5.		15		MSL Analyt	Icai						
Occupancy Status During							1000	eet Address	2002 10						
☐ Facility Closed/Vacate ☐ Abatement Performed						ariba	1000	00 Route 13			Water Control				
Time of Abatement: _							1 28	y, State, Zip Co							
							. 0	innaminsor	ı, NJ 08077						
Scope of Work (Check all	that apply)							□ Full Conf	tainment with Nec	ative P	ecura				
≥3 sf or ≥3 lf			⊠ Rer	ovat	ion			⊠ Mini-Enc		auve r	SSUIC				
≥160 sf or ≥260 lf			_ Der	noliti	on			Gloveba	g Procedure		Б				
		-	1v					□ Non-Exe	mpted (*) and No	i-Friab	Procedure	1			54
Location	o f	1		Loca orma				Descriptions				-	atem		
Asbestos-Containing N		VI)	Used	Sol	ely by	Asbe	stos	Description of Containing Ma		А	ount	Removal	Repair	Enc	Enclosure
TO BE ABA	TED		100000		nce/ Staff?		., the	ermal systems	insulation,	(5	ecify	von	bair	aps	los
IN Facilit (13)	у	+	Gust	(12)			of	surfacing, VAT, her miscellane	, or	SF	or LF)	<u>n</u>		Encapsulate	иге
(10)			Yes	No	N/A		O.	noi misociiane	003)					е	
Between Apartments	#203 & #20	04				Pipe In:	sula	tion			LF		П		П
					100	1 .00									
											<u></u>	Ш	Ш	Ш	Ш
		[													
			$\neg$	П	П							П	П	П	
Name of Registered Wast	ame of Registered Waste Hauler						Cul	oic Yards of	Name of Regis	ered L	ıdfill				_
AbateTech, Inc.							Wa	ste	G.R.O.W.S						
City, State					18750	)	Dis.								
Lumberton, NJ							100000	posal Date	City, State	DΛ					
The Committee of the Co		T					0	/10/15	Tullytown,	-A					
Completed By (Print or Ty		Title						Signature	Carrie	_	Dat	e	1,0		
Gwendolyn Trumbet	tti	Ор	eratio	ns (	Coordi	nator			y m		0	4	115	)	

ASB-41 MAY 11 \* Do not use this form for eshestes licensure exempted estivities

Date of Notification (1)				Name	of Building	g Owner/Operator (	2)		- 00	10	1.4	٦. ١	- 1
6//	15	_				vick Board of Ed		1503-4	6 Che	ck#	7280	C	74
Agencies Notified Type Notifi	ication			Street	Address	(4			1 1 1 1	-	-	7	71
⊠ EPA ⊠ Initial				760	State Ro	oute 18			2, 44 4	3			3.5
☑ DOLWD ☐ Amend				City, S	State, Zip C	ode							
□ DHSS   Amenda     □ DCA   □ Emerge		101 11.50		Eas	st Brunsv	vick, NJ 08816							
(NJAC 5:23-8) Justifica		Gladin	a	Name	of Contac	t ·		elepho	e Numbe	er			
☐ Cancell				Adr	ministrati	ion	:						
				FAG	CILITY IN	FORMATION							
Name of Facility Where Abatement is	Taking	Place	(3)				Type of Facility (4	,					
Chittick ES							School (K-12)	( )than t	n V 12)				
Street Address							Subchapter 8	ite and	:ommerc	ial bu	ildino	IS,	
5 Flagler Street							homes, etc.)						
City (5)		54					Square Feet	# of Fi	ors	Blo	dg. A	ge	
East Brunswick													
County (6)				Cour	nty Code (7	)(STATE USE ONLY)	Current Use (Prio	if being	demolish	ed)			
Middlesex							School						
Name of Monitoring Firm Hired by Bu	ilding (	Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)		0,000	70 000			
Environmental Design						AbateTech, I	nc.						
Street Address						Street Address							
5434 King Avenue						30 Maple Ave	e. PO Box 25						
City, State, Zip Code						City, State, Zip Co	ode						
Pensauken, NJ 08109						Lumberton, I							
Project Manager for Monitoring Firm	Tele	phone	No.	Telephone No.		Licens	No.				-		
Tom Pruno		38-306		609-265-2107	1	005	9						
Start Date (10)	Scheo	luled C			te (11)	Name of OSHA N			-	_			
6 /23 /15					15	EMSL Analyt							
Occupancy Status During Abatement	(Checl	k only	one)			Street Address			-				-
☐ Facility Closed/Vacated During En				ment		200 Route 13	0 North						
☐ Abatement Performed Outside of	Normal	Facilit	y Hour	s - Des		City, State, Zip Co	ode	M	-				
Time of Abatement:AM	PI	VI/	PM-		AM	Cinnaminsor							
Scope of Work (Check all that apply)						D=1000		100					
T - 2 - 5 2 #		□ □				☐ Full Con	tainment with Nega	ve Pre	sure				
<ul><li>≥3 sf or ≥3 lf</li><li>≥160 sf or ≥260 lf</li></ul>			enovati emolitio				g Procedure						
24 _ 100 0. 01 _ 200 1.		,	211101111				mpted (*) and Non-	- <sup>-</sup> riable	rocedure	€			
		Is	Locat	ion						Ab	atem	ent Ty	уре
Location of			Norma			Description of				Z	D	ш	Ш
Asbestos-Containing Material (AC TO BE ABATED	(M)		ed Sole aintena			stos Containing Ma ., thermal systems		Am (Sp		Removal	Repair	Encapsulate	Enclosure
IN Facility		Cus	todial	Staff?	(1.6	surfacing, VAT		SFc		oval	=	nsc	sur
(13)			(12)	_	1	other miscellane	ous)					ate	(D)
		Yes	No	N/A	-				-	_			
50 Classrooms					Heat Sh	nield Insulation		15	iF		Ш	Ц	Ш
Corridor					Pipe Ins	sulation		200	_F				
50 Classrooms					Pipe Ins	sulation		20	.F				
35 Classrooms			$\boxtimes$		Floor ti	le & Mastic		20	iF				
Name of Registered Waste Hauler			100	JDEP \		Cubic Yards of	Name of Registe	ed Lar	fill				
AbateTech, Inc.			H	auler II 18750		Waste 40	G.R.O.W.S.	l andfi					
City, State				10/50	,	Disposal Date	City, State						
Lumberton, NJ						7/20/15	Tullytown, F	Δ					
Completed By (Print or Type)	Title					Signature	á		Dat	e :		034	
Gwendolyn Trumbetti			ione (	Coord	inator	( )	MAT			1	101	16	)
The results of the second seco		herat	10115		mator		rva			1	10/	10	
ASB-41 MAY 11	*	Do not	use th	is form	for asbest	os licensure exemp	ted activities.						

(Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) East Brunswick Board of Education / Job #1 503-41 16 Check #7279 10 / 15 6 / Type Notification Street Address Agencies Notified ☑ EPA 760 State Route 18 ☐ Amended ☑ DOLWD City, State, Zip Code Amendment #\_ ☑ DHSS East Brunswick, NJ 08816 ☐ Emergency (including ☐ DCA elepho e Number Name of Contact justification) (NJAC 5:23-8) Administration ☐ Cancellation FACILITY INFORMATION Type of Facility (4 Name of Facility Where Abatement is Taking Place (3) School (K-12) Irwin ES Subchapter 8 (Other to In K-12) Street Address Other (i.e., priv ate and commercial buildings, 71 Racetrack Road homes, etc.) Square Feet # of F ors Bldg. Age City (5) East Brunswick County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) County (6) School Middlesex Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. AbateTech, Inc. Environmental Design Street Address Street Address 30 Maple Ave. PO Box 25 5434 King Avenue City, State, Zip Code City, State, Zip Code Lumberton, NJ 08048 Pensauken, NJ 08109 Telephone No. Licens No. Project Manager for Monitoring Firm Telephone No. 609-265-2107 005 9 888-306-4545 Tom Pruno Scheduled Completion Date (11) Name of OSHA Monitor Start Date (10) 7 / 20 / 15 \_\_6\_\_ / \_\_23\_\_ / \_\_15\_\_ **EMSL** Analytical Street Address Occupancy Status During Abatement (Check only one) ☐ Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: \_\_\_\_AM-\_\_\_PM/\_\_\_PM-\_\_\_AM Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ☐ Full Containment with Nega ive Pressure □ Renovation  $\square$   $\geq$ 3 sf or  $\geq$ 3 lf  $\square$   $\geq$ 160 sf or  $\geq$ 260 lf ☐ Mini-Enclosure □ Demolition Non-Exempted (\*) and Non-Friable rocedure Abatement Type Is Location Normally Description of Location of Repair Encapsulate Used Solely by Asbestos Containing Material (ACM) Arr unt Asbestos-Containing Material (ACM) Maintenance/ (Sp cify (i.e., thermal systems insulation, TO BE ABATED Custodial Staff? surfacing, VAT, or SF ( LF) IN Facility (12)other miscellaneous) (13)Yes No N/A 15 3F X Heat Shield Insulation 50 Classrooms П X X 2.5( ) LF Corridors X Pipe Insulation 20 \_F X X Pipe Insulation 50 Classrooms 20 3F X Floor tile & Mastic 35 Classrooms Name of Registered La Ifill Cubic Yards of NJDEP Waste Name of Registered Waste Hauler Hauler ID No. Waste G.R.O.W.S. \_andfi AbateTech, Inc. 18750 40 Disposal Date City, State City, State 7/20/15 Tullytown, FA Lumberton, NJ

ASB-41 MAY 11

Completed By (Print or Type)

Gwendolyn Trumbetti

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

Operations Coordinator

Signature

Date of Notification (1) 6/8/15					Building O y of Ora										
Agencies Notified	Type Notification		1 2	treet Ad	dress Day Stre	eet					JU	N I	5 %	15	
DEP  DOL	Initial  Amended  Amendment #_	1	200		e, Zip Cod						12				
П рон	Emergency (indigential justification)	cluding	9.5		Contact					Telep	one Nur	nber			7
DCA	Cancellation		N	Marty N									_		
		N (0)		FACIL	ITY INFO	RMATI	ON	Type	of Facility (4	4)	_				
Name of Facility Where A		Place (3)						Туре							
Street Address	70.13						_	H	School (K-1: Subchapter	8 (Other	ian K-12	2)			
276 Snyder Street								×	Other (i.e. p etc.)	ri ate & c	mmerci	al build	ings,	home	s,
City (5) Orange				-				Squa 250	are Feet	# of F	ors		dg. A	ge	
County (6)			Тс	county C	ode (7)			Curr	ent Use (Prid	or f being	lemolish	ned)			
Essex					SE ONLY)	-		Aba	andoned						
Name of Monitoring Firm	n Hired by Building Ow	vner (8)		ASCM	No.				atement Con Environm		rvices	, Inc.			
Street Address							Street 135		ess elon Road	. Suite	02				
City, State, Zip Code							City, S	tate,	Zip Code	_	-				
Project Manager for Mor	nitoring Eirm		Т	elephor	ne No		Teleph		NJ 07405		cense N	lo.			
Project Manager for Mor							908-	218-	0880	(	1228	***************************************			
Start Date (10) 6/8/15		Scheduled 5/10/15	Com	pletion [	Date (11)		7.0.00000000000000000000000000000000000		SHA Monitor i Environm	ental S	rvices	, Inc.			
Occupancy Status Durin	ng Abatement (Check	Only One)		8			Street			2 ''-					
	cated During Entire Pe ned Outside of Norma			ent			City, S	State,	elon Road Zip Code , NJ 0740						
					25		MIIII	elon	, 145 0740		_				_
Scope of Work (Check A	All That Apply)	Про	novat	ion			Г	] <sub>F</sub>	ull Containm	et t with I	egative l	Pressu	re		
≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf			noliti				F	- M G	lini-Enclosure Blovebag Pro	e c∈dure					
			11791					N	lon-Exempte	d ) and	On-Fila	JIE PIO		ement	
		1000000	ocation rmall	0000		_		,						ре	
Locatio Asbestos-Containing		Used	Solel	y by	Asbest	177	escription taining N		ial (ACM)	An	unt			Ш	_
TO BE AB	BATED	Maint Custoo			(i.e.		I system				cify LF)	Remova	Re	Encapsulate	Enclosure
In Fac		(	(12)				miscella			Oi -		nova	Repair	sula	osur
		Yes	No	N/A										ate	o o
BUILDING BEING	DEMOLISHED										-				
AS ASBE															
												+			
Name of Registered Wa	aste Hauler		1.0000	JDEP W		7.000	Yards		M	Fegister					
Yannuzzi Group, In	C.		0.551.00	auler ID 7467	NO.		00			Brows L	ndfill l	North			
City, State Kinnelon, NJ						6/10	1000			ville, PA					
Completed by Anna Bastos		Title Admin	istra	tive As	ssistant		Signatur	e 14	- Bac	rter		ate /8/15			

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

Date of Notification (1) 6/8/15	2				Building O y of Ora										
Agencies Notified	Type Notification			eet Ad		ngo .					111-1-A	-	1/5		
			105 (07)		Day Stre	eet									
EPA DEP	Initial  Amended				e, Zip Cod										
▼ DOL	Amendment #		Oi	range	, NJ 08	844									1
□ DOH	Emergency (in justification)	Cluding			Contact					Telep	one Num				
DCA	Cancellation				Mayes								_		
Name of Facility Where	Abatement is Taking	Place (3)		FACIL	ITY INFO	RMATIC	NC	Tv	pe of Facility (4	1)	-				
Fire Damaged Prop	ran en litter en	riace (5)						.,	School (K-1)						
Street Address									Subchapter	8 (Other	ıan K-12	)			
278 Snyder Street								×	Other (i.e. p etc.)	ri 'ate & r	mmercia	al build	ings,	home	s,
City (5)									quare Feet	# of F	ors		dg. A	ge	
Orange									500	2			50+		
County (6)					ode (7) SE ONLY)				urrent Use (Prio bandoned	r if being	iemolish	ed)			
Essex	- Hissad by Duilding O		1000				Name	100000	Abatement Con	ti actor (C					
Name of Monitoring Firm	n Hirea by Building O	wner (8)	1	ASCM	NO.				zi Environm		rvices,	Inc.			
Street Address							Street				_				
otreet riddress							135	Kin	nelon Road	, Suite	02				
City, State, Zip Code									e, Zip Code						
									n, NJ 07405	j					
Project Manager for Mo	nitoring Firm		Те	lephon	e No.		Teleph		e No. 8-0880	,	cense N 1228	0.			
							07P/100.000		OSHA Monitor		1220				
Start Date (10) 6/8/15		Scheduled ( 6/10/15	Compl	letion L	)ate (11)				zi Environm	€ntal S	rvices,	Inc.			
Occupancy Status Durin	ng Abatement (Check	Only One)					Street			2	00				
	cated During Entire P			nt					nelon Road	, Suite	02				
Abatement Perform Other – Describe:	ned Outside of Norma	al Facility Ho	ours				100000000000000000000000000000000000000		e, Zip Code on, NJ 07405						
			-11-11-				MIIII	IEIC	)II, IND 07400						
Scope of Work (Check	All That Apply)	FT 5	o con res	020			Г	٦	Full Containme	o t with 1	agative E	)receiii	r 0		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			ovatio nolition						Mini-Enclosure	)	galive r	10330			
							-	+	Glovebag Prod Non-Exempted		on-Friah	le Pro	cedur	e	
								_	Non-Exemple	Janu	OHITHAL	1	Abate	93	t
			cation mally			Do	scription	n of					Ту	ре	
Location Asbestos-Containing		Used S	Solely	by	Asbest				erial (ACM)		unt			ш	
TO BE A	BATED	Mainte Custod			(i.e.		system cing, VA		nsulation,		cify LF)	Ren	Re	ncap	ncle
In Fac		(*	12)				niscella			0.	L. )	Removal	Repair	Encapsulate	Enclosure
1000000		Yes 1	No	N/A								-		ite	Ф
BUILDING BEING	DEMOLISHED										6.78				
AS ASBE	STOS														
											-				
Name of Registered Wa	aste Hauler	1	35.55	DEP W		100000000000000000000000000000000000000	Yards		Name of	F egister	i Landfil		1		
Yannuzzi Group, In	C.		1/18/703	uler ID 167	No.	of Wa	ste 00		WM - C	Sows L	ındfill N	lorth			
City, State						Dispo 6/10/	sal Date	е	City, Stat			#			
Kinnelon, NJ 07405	)	T:41-				(6.20) Section	2. 42					ate			
Completed by Anna Bastos		Title Adminis	strati	ve As	sistant	1	Signatur	24	a Bas	102	7.00	8/15			
, ima baotos							-110	10	- regul						_

Date of Notification (1) 6/8/15					Building C						. presi		- ^15		
Agencies Notified	Type Notification		1000	Street Ad	idress Day Str	eet					Mean				
EPA DEP DOL	Initial Amended Amendment #_			City, Stat	e, Zip Coo	ie									
DOH DCA	Emergency (in justification) Cancellation	cluding	1	Name of Marty N	Contact Mayes						one Nun				
				FACIL	ITY INFO	RMATI	ON								
Name of Facility Where Fire Damaged Prop		Place (3)						Ту	pe of Facility (4						
Street Address 280 Snyder Street	33.19	The state of the s						×	School (K-12 Subchapter 8 Other (i.e. pr	(Other	han K-12 mmercia	) al build	lings,	home	ės,
City (5)								Sq	etc.) quare Feet 500	# of l	oors		ldg. A	ge	
Orange				County C	`odo (7)				urrent Use (Prior	if bein	demolish		00 1		
County (6) Essex					ISE ONLY)				bandoned	n benn	demons	eu)			
Name of Monitoring Firm	n Hired by Building Ov	vner (8)		ASCM	No.		100-000-000-000-000-000-000-000-000-000		Abatement Cont zi Environme		rvices,	Inc.			
Street Address							Street 135 I		dress nelon Road,	Suite	02				
City, State, Zip Code									e, Zip Code n, NJ 07405						
Project Manager for Mon	nitoring Firm			Telephor	ne No.		Teleph 908-		e No. 3-0880	T	cense N 1228	0.			
Start Date (10) 6/8/15		Scheduled 6/10/15	Com	pletion [	Date (11)				OSHA Monitor zi Environme	ntal §	rvices.	Inc.			
Occupancy Status Durin	1.50						Street						7-17-		
	cated During Entire Pe			ent			135	Kin	nelon Road,	Suite	02				
Facility Closed/Vac Abatement Perform Other – Describe:	ned Outside of Norma	I Facility H	ours				100		e, Zip Code on, NJ 07405		10				
Scope of Work (Check A	All That Apply)							-							
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf			novat				E	1	Full Containme Mini-Enclosure Glovebag Proce	dure					
	<del></del>						L		Non-Exempted	(*) and	on-Friab	le Pro			
			ocation rmall											ement rpe	
Locatio Asbestos-Containing TO BE AB In Fac (13)	g Material (ACM) BATED ility	Used Maint Custod	Solel enar dial S 12)	ly by nce/ staff?		tos Con therma surfa		Mate is in: AT, o	erial (ACM) sulation, or	(S	unt cify LF)	Removal	Repair	Encapsulate	Enclosure
BUILDING BEING	DEMOLISHED	Yes	No	N/A					-		-	-			
AS ASBE	and the second s		-												
AS ASBE	3103														
N	4-11-1		1	IDED	la a b c	0	Vest		Name of F	ngiot-	110045"				
Name of Registered War Yannuzzi Group, Inc			Н	JDEP W auler ID 7467		of Wa	Yards iste 00		WM - G						
City, State			111	701			sal Date	9	City, State Morrisvi		0				
Kinnelon, NJ 07405	!	Title					Signatur	4		-	Da	te			
Anna Bastos		0.0000000000000000000000000000000000000	stra	tive As	ssistant	`	Ly	41	1. Basi	es		8/15			

#### THINCTOIN

Date of Notification (1) 6/8/15				me of Building e City of F			(2)							15
Agencies Notified	Type Notification			eet Address ne City Ha	II Plaza					-14	1 1		15	
DEP  DOL	Initial Amended Amendment		City	y, State, Zip ahway, NJ	Code					-		-	W	
DOH DCA	Emergency justification) Cancellation		Na	me of Conta	ct				Teleş	one	Numbe			
				FACILITY IN	FORMAT	ION			_					-
Name of Facility Where	Abatement is Takin	g Place (3)					Туре	of Facility	(4)	1000				
Abandoned Reside	ence							School (K-						
Street Address 194 West Grand A	venue						×	Subchapte Other (i.e.				uilding	s, hor	nes,
City (5) Rahway							Squa	etc.) are Feet	# of F	ors		1.00	Age	
County (6)			Co	unti Cada (7			1,30			-		50	+	
Union				inty Code (7 ATE USE ON				ent Use (Pr ndemned	ior it peinc	iemo	olished)			
Name of Monitoring Fire	m Hired by Building	Owner (8)	A	SCM No.				atement Co Environn		rvic	es Ind			
Street Address						Street	Addre	ess				*		
City, State, Zip Code		36						elon Road Zip Code	i — ——					
	=							NJ 0740	)5					
Project Manager for Mo	onitoring Firm		Tele	ephone No.		Teleph 908-2			(	cense 228	e No.			
Start Date (10) 6/9/15		Scheduled 6/12/15	Comple	tion Date (1	1)			HA Monitor Environm		rvice	es, Ind	:.		
Occupancy Status Durin	ng Abatement (Chec	k Only One)				Street	Addre	ss					100	
Facility Closed/Vac	cated During Entire I	Period of Ab	atement			135 k	Kinne	lon Road	i					
Abatement Perform Other – Describe:	med Outside of Norn	nal Facility H	lours					ip Code NJ 0740	)5					
Scope of Work (Check)	All That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	novation molition			×	Mi	II Containm ni-Enclosur ovebag Pro	е	gativ	e Press	ure		
		1						n-Exempte		n-Fr	riable P	oced	иге	
		100000000000000000000000000000000000000	ocation										temer	nt
Locatio			rmally Solely by	,		scription						T	Гуре	_
Asbestos-Containing TO BE AB		Maint	enance/	ASD	estos Con e. thermal				Am (Sp		7		En	ш
In Fac (13)		11	lial Staff 12)	,	surfa	cing, VA niscellan	T, or	28	SFo		Remova	Kepair	aps	Enclosure
(13)	,	Yes	No N	I/A	otheri	niscenan	leous)				Va	=	Encapsulate	ure
Throughout I	Basement			x	Grey P	ipe Insi	ulatio	n	50	F	Х			
Second fl. hall u		х	Black	k Floor	Tile		150	3F	Х					
Name of Registered Wa	ste Hauler		NJDE	P Waste	Cubic	Yards		Name of	R€ gistere	Lanc	dfill			
Yannuzzi Group, Ind	C.		Haule 1746	r ID No. 7	of Was	ste CY		GROW		- LONGE COLOR	res1000			
City, State Kinnelon, NJ 07405	5		1		Dispos 6/11/	sal Date		City, Stat Morrisv						
Completed by		Title				ianotitro				$\overline{}$	Date			
Anna Bastos		strative	Assistan		Can	inc	. Ba	2 100		6/8/15				

				r			to NJAC 8					.0536781	. (	CK	#	20	516	17
Date 0	of Notification (1) /15						Building Coridge To				Education							
Agend	cies Notified	Type No	tification		1000	Street Ad	ddress	n a t					U.		15	000	5	
	EPA DEP	× Initi					te, Zip Cod						_			1		
×	OOL	Am	ended endment#				ridge, N		80			1.67						
X C	OOH		ergency (ir ification)	cluding	7.5		Contact					Telep	one l	Numb	er			
×	DCA	Car	ncellation				ny D'Orsi		ON									
	of Facility Where A		t is Taking	Place (3	3)	FACII	LITY INFO	RMAII	ON	Parties	of Facility (4)							
	Address										School (K-12 Subchapter 8		ıan k	(-12)				
100	Delaware Aven	iue									Other (i.e. prietc.)	rate &	mme	ercial	build	ings,	home	s,
City (5							11			Squa	are Feet	# of F	ors			dg. A	ge	
Count	y (6) Ilesex						Code (7) JSE ONLY)	_		Curre	ent Use (Prior	if being	iemo	lishe	d)			
	of Monitoring Firm ronmental Con			wner (8)		ASCN 0003					atement Cont racting & E		nen	al C	ons	ultin	g, Ind	о.
	Address North Warren S	Street							Street 1141		ess ite 23							
	State, Zip Code ton, NJ 08608										Zip Code IJ 07470							
	t Manager for Mon Dominick Derco			0.00	Telephor	ne No. 92-4200		Teleph 973-			(	cens )408	e No.					
Start 07/0	Date (10) 1/15			Schedul 08/15/		pletion I	Date (11)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		HA Monitor sion Consu	tants,	nc.					
Occup	ancy Status During	g Abateme	ent (Check	Only Or	ne)				Street				-				5-3811	
× F	acility Closed/Vac								1 1 2 2 2 2 2 2		garaw Roa	d, Bld	. #3	4A				
× F × C	Abatement Perform Other – Describe: 1	Hours: Mo	e of Norma in - Fri - 7:0	0 a.m	3:30 p.r	n.	-	_			Zip Code n, NJ 0741(							
Scope	of Work (Check A	II That Ap	ply)							77			1000000					
property.	:3 sf or ≥3 lf :160 sf or ≥260 lf				Renovat Demoliti					M Gl	Ill Containme ini-Enclosure lovebag Proce	dure						
				1			1			_l No	on-Exempted	*) and	on-F	riable			ment	_
	Lasation				Location Normall			De								Ту		
As	Location bestos-Containing	Material (	ACM)	Use	ed Solel	y by		os Con		/lateria	al (ACM)		unt		F		ш	Е
	TO BE AB. In Facil	ity		Cus	todial S (12)	taff?	(i.e.	surfa	l system icing, VA	T, or	200 0000 000		cify LF)		Remova	Repair	Encapsulate	Enclosure
	(13)					T		other i	miscella	neous)	)				val	air	ulate	sure
	Custodial	Doom		Yes	No	N/A		Din	e Fittir			- 17	_F		X			
	Custodial			\ \rightarrow \text{i} \ \rightarrow \text{i} \ i		Pipe Ir	1750	tion		LF		X						
	Custodiai			All	-0611	ripe II	isuia	uon			_	Δ	-					
				-									-	_				
Name	of Registered Was	ste Hauler			l I N	JDEP W	/aste	Cubic	Yards		Name of F	egister	Lar	dfill	-			
	Contracting & E			nsul.,	Inc. H	auler ID 7819	350,500	of Wa			Grand C	entral						
City, S Wayr	State ne, New Jersey	8						Dispo	sal Date		City, State Pen Arg		ısyl	vani	а			
	leted by Bijelonic			Title Proje	ect Ma	nager		,	Signatur	e	1			Date 6/1	e 1/15	;		

	N			to NJAC 8							0	· -	H -	25	60
Date of Notification (1) 6/11/15				Building Coridge To				f Education		( <del>8 - 1)</del>				<u> </u>	000
Agencies Notified Type Notification			Street A							1.71		5	10		
EPA Initial Amended Amendment #				chool Strate, Zip Coo						_					
X DOL Amendment				oridge, N		80									
Emergency (i justification)  DCA  Cancellation	ncluding		0.000	Contact					Telep	ne	Num	ber			
X DCA Cancellation				ny D'Orsi LITY INFO		ON				_		-			
Name of Facility Where Abatement is Taking Colonia High School	Place (3)		1701		1400711		Тур	e of Facility (4							
Street Address 180 East Street								Subchapter Other (i.e. pretc.)	8 (Other				lings,	home	es,
City (5) Colonia							Squ	are Feet	# of F	ors		1000	ldg. A	ge	
County (6) Middlesex				Code (7) USE ONLY)				rent Use (Prio	f being	emo	olishe	ed)			
Name of Monitoring Firm Hired by Building C Environmental Connection, Inc.	wner (8)		ASCN 0003					atement Contracting & E		ien	tal C	ons	ultin	g, In	c.
Street Address 120 North Warren Street						Street 1141		ess ute 23							
City, State, Zip Code Trenton, NJ 08608						125101		Zip Code NJ 07470							
Project Manager for Monitoring Firm Mr. Dominick Dercole		100	Telepho	ne No. 92-4200		Teleph 973-6		No. 9200	L	ens	e No	tá	9.	-	
	Schedule 08/15/1		pletion	Date (11)				SHA Monitor sion Consu	ıl:ants,	1C.					
Occupancy Status During Abatement (Check	Only One	e)				Street		7.57		-				<del></del>	
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe: Hours: Mon - Fri - 7:0	al Facility	Hours				City, S	tate,	agaraw Ro Zip Code n, NJ 0741	_	#3	84A				
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 If ≥160 sf or ≥260 If	-	enovat emoliti				×	M G	ull Containme lini-Enclosure llovebag Proc on-Exempted	e iure	150.00				0	
	ls	Locatio	on				- 14	orr Exclinated	) and	71-1	Habit		Abate	ement	1
Location of	N	ormall	у			scription							Ту	pe	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Mai Custo	ntenan odial S (12)	ice/ taff?		thermal surfa	taining N systems cing, VA niscellar	s insu T, or		Am (Sp SF c	ify		Removal	Repair	Encapsulate	Enclosure
Boiler Room	Yes	No	N/A		Din	e Fittin	ac		50	_	_	X			
Boiler Room	X				- 50	r Insula	- N	,	300	_		X			
Boiler Room	X	-		Roile		eching			850			X			
Zeller Reem				Done	, Dioc	Johning	11130	ilation							
Name of Registered Waste Hauler		N.	JDEP W	/aste	Cubic	Yards		Name of F	Rigistere	Lan	dfill				
J.R. Contracting & Environmental Co	onsul., li	nel	auler ID 7819	No.	of Was			Grand C		and	dfill				
City, State Wayne, New Jersey					1,000	sal Date		City, State Pen Arg		syl					
Completed by Jerry Bijelonic	Title Proje	ct Ma	nager		S	ignature ک	1	X			Dat 6/1	e 1/15	;		

		-	(P	ursuant	to NJAC 8:	:60 and	12:120	)			0	大 t	+	7	=11	' A
Date of Notification (1) 6/11/15					f Building O bridge To				Education			X 4	·	<u> </u>	216	501
Agencies Notified Type Not				Street A 428 Sc	ddress chool Stre	eet					Ū.	1.3				
DEP Ame	ended endment #		_		ate, Zip Cod bridge, N.		08	W= >								
DOH justi	ergency (ir fication) cellation	ncluding		Name of	f Contact ny D'Orsi					Telep	one N	umber				
					LITY INFOR		ON			-	1	-	-		_	
Name of Facility Where Abatement Woodbridge Middle School	is Taking	Place (	3)					Тур	of Facility (4 School (K-12		-					
Street Address 525 Barron Avenue									Subchapter Other (i.e. pretc.)	Other			ildi	ngs,	home	es,
City (5) Woodbridge								Squ	are Feet	# of F	ors		Blo 50	ig. A +	ge	
County (6) Middlesex				County (	Code (7) USE ONLY)		_		ent Use (Prio 1001	r if being	lemoli	shed)				
Name of Monitoring Firm Hired by E Environmental Connection,		wner (8)	'	ASCN 0003					atement Cont racting & E		ienta	l Cor	ısı	ıltin	g, In	c.
Street Address 120 North Warren Street							Street 1141		ess ite 23							
City, State, Zip Code Trenton, NJ 08608							Zip Code IJ 07470				2-27					
Project Manager for Monitoring Firm Mr. Dominick Dercole		Telephor	ne No. 92-4200		Teleph 973-6			[	ense 408	No.						
Start Date (10) 07/01/15		Schedul 08/15/		npletion I	Date (11)				HA Monitor sion Consu	ants,	1C.					
Occupancy Status During Abateme	nt (Check	Only Or	ne)				Street				-					
Facility Closed/Vacated During Abatement Performed Outside Other – Describe: Hours: Mor	of Norma	al Facility	Hours				City, S	tate, 2	garaw Roa Zip Code		#34	A	e i v			
Scope of Work (Check All That App		-	олоо р.				Fair I	_awr	n, NJ 0741							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	iy)	property.	Renova Demolit				×	M	ull Containme ini-Enclosure ovebag Proc on-Exempted	ure						
		Is	Locati	on						7 4114				(d) (d)	ment	
Location of		1	Vormal	у		Des	cription	of				-	_	Ту	oe	
Asbestos-Containing Material (A TO BE ABATED In Facility (13)	ACM)	Ma Cus	ed Sole intenar todial S (12)	nce/ Staff?	50)	nermal : surfac	aining M systems ing, VA niscellan	insu T, or	lation,	Am (Sp SF c	ify	Kemoval		Repair	Encapsulate	Enclosure
D :: D		Yes	No	N/A							_	_			(D	
Boiler Room					Pipe In		tion	300		X	1					
Boiler Room					Insula			300	-	X	1					
Boiler Room		X					eching			850	3F	X	1			
Name of Pagistared Wests Heules			L	IDED			ger Ins	ulati			-					
Name of Registered Waste Hauler J.R. Contracting & Environme	ental Co	nsul.,	ne H	JDEP W auler ID 7819	No.	Cubic ` of Was 20			Name of R							
City, State Wayne, New Jersey	-0.0			Dispos	al Date		City, State Pen Arg		sylva	nia						
Completed by Jerry Bijelonic	ct Ma	nager		Si	gnature	1	1		1.325	ate 6/11/	15					

												-17	Lak	014	00
Date of Notification (1) 6/11/15					Building Coridge To			(2) d of Education			JUL	ě			
Agencies Notified	Type Notification			Street A	ddress chool Str	eet									
EPA DEP DOL	Initial Amended Amendment				te, Zip Coo oridge, N		08							Pa 1949	
ĭ DOH ▼ DCA	justification)  Cancellation	100 100 00 00 00 00 00 <del>1</del> 7			Contact ny D'Orsi	i			Telep	ne	Numb	er			
				FACI	LITY INFO	RMATI	ON			-					
Name of Facility Where JFK High School	Abatement is Takin	g Place (3	3)					Type of Facility (4)  School (K-12)							
Street Address 200 Washington Av	/enue							Subchapter 8 Other (i.e. pri	(Other			build	lings,	home	es,
City (5) Iselin								Square Feet	# of F	ors	9	1	ldg. A	ge	
County (6) Middlesex				County (	Code (7) USE ONLY)		_	Current Use (Prior School	if being	em	olishe	d)			
Name of Monitoring Firm		Owner (8)		ASCN	No.		Name	of Abatement Conti	ictor (9	-					
Environmental Con	nection, Inc.			0003	0			Contracting & E	ıviron	ier	tal C	ons	ultin	g, In	C.
120 North Warren	Street							Address Route 23							
City, State, Zip Code Trenton, NJ 08608								tate, Zip Code ne, NJ 07470	-						
Project Manager for Mor Mr. Dominick Derce			Telephor	ne No. 32-4200			one No. 528-9200	I C	en:	se No. 8					
Start Date (10) 07/01/15		ed Con	npletion I	Date (11)			of OSHA Monitor o Vision Consu	:ants,	1C.						
Occupancy Status Durin	g Abatement (Chec	k Only Or	ne)				Street	Address							
Facility Closed/Vac Abatement Perform	ated During Entire	Period of	Abaten	nent				I Wagaraw Roa	d, Bld	#3	34A				
Abatement Perform  Other – Describe:	ned Outside of Norm Hours: Mon - Fri - 7	nal Facility :00 a.m	/ Hours 3:30 p.	m.		_		tate, Zip Code _awn, NJ 0741(							
Scope of Work (Check A	II That Apply)									(Marine)					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		and the same of	Renova Demolit				×	Mini-Enclosure Glovebag Proce	lure						
							<u> </u>	Non-Exempted	') and	n-F	riable				
Location	n of	1	Locati Vormal	57		Don	scription	of					Abate Ty		
Asbestos-Containing	Material (ACM)		d Sole			os Conta	aining M	laterial (ACM)	Am	ınt				m	
TO BE AB In Facil (13)			todial S (12)		(i.e. t	surfac	systems sing, VA niscellar		(Sp			Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A						_				O	3.50
Boiler R		, X			Air			sulation	500	_	-	X			
Boiler R		X					Insula		300	_		X			
Boiler R		X			Boile			Insulation	900	-	2	X			
Boiler R		X				-	e Fittin		53			K			
Name of Registered Was J.R. Contracting & E		onsul	Inc. H	JDEP W auler ID		Oubic of Was	0.000	Name of R Grand C			ndfill dfill				
City, State				7819		40 Dianas	al Data	e record re-evits according							
Wayne, New Jersey						Dispos	al Date	City, State Pen Argy		syl	vania	3			
Completed by Jerry Bijelonic		Title Proje	ct Ma	nager		S	ignature	N			Date 6/1		1		

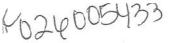
				(P	ursuant	to NJAC 8	:60 an	d 12:120	)				0	Ki	# c	25	160
Date of Notification (1) 6/11/15						f Building C bridge To				f Education	JL	Ī	1 -	231	5		
Agencies Notified  EPA	Type Not				Street A 428 Sc	ddress chool Str	eet										
DEP DOL	Ame	ai ended endment #	£			ate, Zip Coo bridge, N		08				_					
➤ DOH ➤ DCA	justi	ergency (in fication) cellation	ncluding			f Contact ny D'Orsi					Telep	ne	Num	ber			
20.1		ochation				LITY INFO		ION				-					-
Name of Facility Where A Avenel Street School			Place (	3)	17,01	2111 1111 0	TORDATI			e of Facility (4							
Street Address 230 Avenel Street									×	School (K-12 Subchapter 8 Other (i.e. pr etc.)	Other				dings	home	es,
City (5) Avenel			100						Squ	are Feet	# of F	ors		100	lldg. <i>A</i>	\ge	
County (6) Middlesex						Code (7) USE ONLY)				rent Use (Prior	fbeing	em	nolishe	ed)			
Name of Monitoring Firm Environmental Conr			wner (8)		ASCN 0003	-				patement Cont tracting & E		er	ntal (	Cons	ultin	g, In	C.
Street Address 120 North Warren S	treet							Street	Addr							<u> </u>	
City, State, Zip Code Trenton, NJ 08608										Zip Code NJ 07470		-					
Project Manager for Moni Mr. Dominick Derco		n	- 1	Telepho	ne No. 92-4200		Teleph	one		1 - 1 - 1 - 1	en:	se No					
Start Date (10) 07/01/15			2000000	Date (11)		Name	of OS	SHA Monitor sion Consu		-				A.,			
Occupancy Status During	Abateme							Street				_	_				
Facility Closed/Vaca Abatement Performe Other – Describe: H	ted During	Entire Po	eriod of	Abatem Hours				20-2°	1 Watate,	agaraw Roa Zip Code		#3	34A				
		- 1	o a.m	о.оо р.	111.		-	Fair	_aw	n, NJ 07410	)	_					
Scope of Work (Check All  ≥3 sf or ≥3 lf  ≥160 sf or ≥260 lf	That App	ly)	participant of the last of the	Renova Demolit				×	N G	ull Containmentini-Enclosure	er ure					e	
Location	of			Locati Normal			D-				1 / 2				Abate	ement pe	
Location Asbestos-Containing I TO BE ABA In Facilit (13)	Material (A TED	ACM)	Use Ma	ed Sole intenar todial S (12)	ly by nce/		os Cont thermal surfa	scription taining M I systems cing, VA niscellan	lateri s insu T, or		Ama (Spe SF o	fy		Removal	Repair	Encapsulate	Enclosure
Boiler Ro	om		X			Air	-Cell I	Pipe In	sula	tion	300	F		X			
Boiler Ro	Boiler Room X							r Insula			150			X			
Boiler Ro	Boiler Room X							eching	Inst	lation	520	F		X			
Boiler Ro	om		X			Pi	pe Fit	ting Ins	ulat	tion	37	F		X			
Name of Registered Wast	e Hauler			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	JDEP W	/aste	Cubic	Yards		Name of R		Lai	ndfill				
J.R. Contracting & Er	nvironme	ental Co	nsul.,		auler ID 7819		of Wa			Grand C		in	dfill				
City, State Wayne, New Jersey							Dispos	sal Date		City, State Pen Arg	Pen	3y	lvani	а			
Completed by Jerry Bijelonic			Title Proje	ect Ma	nager		S	Signature		1			Dat 6/1	e 1/15	5		

		FICATION		Jersey STOS ABATE 60 and 12:12		, <del></del>	2	(1)	LH	2	516	,0
Date of Notification (1) 6/11/15				wner/Operato wnship Boa		Education	ij	1	5 [		J. 8. Vine	
Agencies Notified Type Notification		Street Ad 428 Sc	ddress chool Stre	et								
EPA Initial DEP Amended Amendment		110,000	te, Zip Code oridge, NJ						-			
Emergency ( justification)  DCA  Emergency ( justification)  Cancellation	including	Name of Anthor	Contact ny D'Orsi			-	Teleph	ne Nur	nber		3-7-21	
		FACI	LITY INFOR	RMATION	т=							
Name of Facility Where Abatement is Taking Indiana School # 18	g Place (3)				Essent .	of Facility (4)						
Street Address 256 Indiana Avenue						School (K-12) Subchapter 8 Other (i.e. pri	Other t			dings	home	es,
City (5) Iselin						etc.) re Feet	# of FI	ors	1192	3ldg. <i>A</i>	\ge	
County (6) Middlesex		County C	Code (7) USE ONLY)		Curre	nt Use (Prior	being	emolisi	ned)			
Name of Monitoring Firm Hired by Building C Environmental Connection, Inc.	Owner (8)	ASCM 0003		5-02/03/03/03/03		tement Contracting & E		éntal	Cons	sultin	g, In	c.
Street Address 120 North Warren Street				Stree	et Addres	SS						
City, State, Zip Code Trenton, NJ 08608				FI 0.000 (0.000)	State, Z	ip Code J 07470	-	-				
Project Manager for Monitoring Firm Mr. Dominick Dercole		Telephor	ne No. 92-4200	Telep	ohone N -628-9	0.		ense N	lo.			
Start Date (10) 07/01/15	Scheduled Co	mpletion I	Date (11)	N 000 F00 A 3		HA Monitor	ants,	IC.	132 (222-27)			
Occupancy Status During Abatement (Chec	k Only One)			Stree	et Addres	SS		2000				
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: Hours: Mon - Fri - 7:	al Facility Hou	rs		City,	State, Z			#34#		7		
Scope of Work (Check All That Apply)				- Fai	r Lawn	, NJ 07410						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Renov Demo				Mir Glo	I Containmer	ure				- 120-1	
	Is Loca	otion			INO	n-Exempted	) and r	n-Friat	DIE PTO		ement	t
Location of	Norm	ally		Description	on of					T	/pe	_
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Used So Mainten Custodial (12	ance/ Staff?	(i.e. th	s Containing nermal syster surfacing, V other miscella	ms insula 'AT, or		Amo (Spe SF o	fy	Removal	Repair	Encapsulate	Enclosure
	Yes No	N/A									e	
Boiler Room	X			Black Pipe			75	_	X			
Boiler Room	X			Pipe Fitt			17	A CONTRACTOR OF THE PARTY OF TH	X			
Boiler Room	X		Plumbe	ers Paste o	on Fibe	rglass	450	.F	X	-		
Name of Registered Waste Hauler		NJDEP W	laste	Cubic Yards		Name of R	e nistere	Landfil				
J.R. Contracting & Environmental C		Hauler ID 17819	No.	of Waste 20	X	Grand C	entral					
City, State Wayne, New Jersey				Disposal Dat	te	City, State Pen Arg	Pen	sylva	nia	100000000000000000000000000000000000000		
Completed by Jerry Bijelonic	Title Project M	lanager		Signatu	ire <	N			ate /11/1	5		

				(F	Pursuan	t to NJAC 8	8:60 an	nd 12:12	0)				0	K	#	25	160
Date of Notification (1) 6/11/15						of Building ( dbridge To				f Education	1			1	T1- E	XJ	100
Agencies Notified	Type No	otification				Address School Str	reet					-		1 75	e		
DEP X DOL	Am Am	ended endment	#			tate, Zip Cod bridge, N		808							L		
▼ DOH ▼ DCA	just	ergency tification) ncellation		g	Name (	of Contact	10				Teler	one	Numl	рег			
None of Facility 145						ILITY INFO		ION				-		_			
Name of Facility Where A Mathew Jago Scho	Abatemen ol #28	t is Takin	g Place	(3)					Тур	e of Facility ( School (K-1							
Street Address 99 Glen Cove Aver	iue									Subchapter Other (i.e. p	E (Other	nan l	K-12) ercial	buil	dings	, hom	nes,
City (5) Sewaren									Squ	are Feet	# of F	ors		1000	ldg. /	Age	
County (6) Middlesex						Code (7) USE ONLY)				ent Use (Prid	or if being	lemo	olishe	d)			
Name of Monitoring Firm Environmental Con	Hired by nection,	Building ( Inc.	Owner (8	3)	ASCI 0003	M No. 30				atement Con racting & I		ien	tal C	ons	ultin	ıg, İr	ıc.
Street Address 120 North Warren S	Street							Street 1141		ess ite 23		-					
City, State, Zip Code Trenton, NJ 08608										Zip Code IJ 07470		-					
Project Manager for Mon Mr. Dominick Derco		Telepho	one No. 92-4200		Teleph 973-6	one N	No.	1	ens 408	Carrie and							
Start Date (10) 07/01/15			Schedu 08/15/		npletion	Date (11)				HA Monitor sion Const	ants.	1C.		- F Jan 16			
Occupancy Status During  Facility Closed/Vaca								Street	Addre			-	4A				
Facility Closed/Vaca Abatement Performe Other – Describe: <u>h</u>	ed Outside	of Norm	al Facilit	v Hours	2	_		City, St	tate, Z	Zip Code n, NJ 0741							8
Scope of Work (Check Al	I That App	oly)						1 GII L	_avvi	1, 140 07 41		-					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Property land	Renova Demolit				×	Mi Gl	II Containme ni-Enclosure ovebag Proc	e ure						
	14		1	s Locati	on			E.100	I INC	n-Exempted	( ) and r	n-Fr	Table		8578 10	e ement	
Location	of			Normal	ly		Des	scription	of			×				ре	
Asbestos-Containing I <u>TO BE ABA</u> In Facilit (13)	TED	ACM)	Ma	ed Sole aintenar stodial S (12)	nce/	(i.e. ti	s Cont hermal surfac	aining M systems cing, VAT niscelland	ateria insul T, or		Ama (Spe SF o	fy		Remova	Repair	Encapsulate	Enclosure
Della D			Yes	No	N/A											te	
Boiler Ro					ing Ins		on	44	=	X							
Boiler Ro					Insula			150	F	X							
Boiler Ro	om		X			Boiler	Bree	ching I	nsul	ation	660	F	X				
Name of Registered Wast	e Hauler			LN	IDED W	factor 1	0.1.				_	200					
J.R. Contracting & Er		ental Co	nsul.,	Inc. H	JDEP W auler ID 7819	No.	Cubic ` of Was 40			Name of R	15.0						
City, State Wayne, New Jersey				Dispos	al Date		City, State Pen Arg	Peni	sylv	ania			- 17 · 12				
Completed by Jerry Bijelonic	ct Ma	nager		Si	ignature		1		Ť	Date 6/11	/15		1				



Date of Notification (1) 6/01/15				ame of E Cyril Oll	luilding Ov iverre	wner/Op	erator	(2)						JUN	V	21	115	
Agencies Notified	Type Notification		1 7 7	treet Add	iress erry Lan	е												
EPA DEP DOL	initial Amended Amendment	#			, Zip Code k, NJ 07													
■ DOH DCA	Emergency ( justification) Cancellation			lame of C							Tr	ele	pho	e Numb	er			
_ bcx	Odriociiation	-		•	TY INFOR	RMATIO	N					-						
Name of Facility Where House	Abatement is Takin	g Place (3)		17.012.				Ту		Facility (								
Street Address 174 Cherry Lane						7.111 2.7		×	Su Otl	bchapter ner (i.e. p	8()	the e &	r th	n K-12) mercial	buildi	ngs,	home	s,
City (5) Teaneck								So	etc quare /A			of V/A	Flc	rs	Ble	dg. A	ge	
County (6)				County C	ode (7) SE ONLY)	8		1 / 5	urrent	Use (Pri	or it b	peir	ng (	molishe	ed)			
Bergen Name of Monitoring Firm	m Hired by Building	Owner (8)		ASCM				of A	Abate	ment Cor		tor	(9)					
N/A Street Address						-	Street	20000		nent, In	1C.		_					
Olicet Address										en Ave	nue							
City, State, Zip Code							City, S Toto		No. of the last of	07512				e e				
Project Manager for Mo	nitoring Firm			Telephon	e No.		Telepi 973-			85			Li #	ense No 1675				
Start Date (10) 6/16/15		Scheduled 6/17/15	Com	pletion D	ate (11)					Monitor ment, Ir				V <del></del>				
Occupancy Status Duri	ng Abatement (Che	ck Only One)					Street	t Ad	dress		_		_	-		W. T		
Facility Closed/Va	cated During Entire	Period of Aba	atem	ent						en Ave	nu e							
Abatement Perform  Other – Describe:	med Outside of Nor Occupied	mal Facility H	ours			_				Code 07512								
Scope of Work (Check	All That Apply)						Г	_		04-1		:41-	. NI	vetive D		-0		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			nova nolit					×	Mini- Glov	Containm Enclosurebag Pro	re ocer i	ure						
				-			L		Non	-Exempte		an	a r	n-Friad	e Pro		emen	t
			ocati rmal														/ре	
Location Asbestos-Containin TO BE A In Fac	ng Material (ACM) BATED cility	Used Maint Custoo	Sole tena	ly by nce/		tos Cont thermal surfac	systen cing, V	Mat ns ir 'AT,	terial ( nsulat or			(5	Spe F o	100000000000000000000000000000000000000	Removal	Repair	Encapsulate	Enclosure
(13	3)		No	N/A		otner n	niscella	anec	ous)						val	=	ulate	ure
baser	ment	100	X			pipe	insul	atio	on		-	2	00	.F	X			
											_		_		-	_	-	-
Name of Registered W	/aste Hauler			JDEP W		0.010101010101	Yards			Name o	f R	gist	ere	Landfill				
D&S Abatement, Ir				Hauler ID 20996	No.	of Wa	ste			Waste	Ma	ina	g€	nent o	f PA			
City, State Totowa, NJ	7					Dispo TBD	sal Dat	te		City, Sta Tullyto		, P.	A					
Completed by Deanna Brkusanin		Title Projec	t M	anager		5	Signatû	ire	0011	ink	1	111	0,	100	ate 01/1	5		
							. 0	1	ul	wy	16	1/	er	- 4				



Date of Notification (1) 6/01/15		Name of B Irene Ya	Building Ow aroush	ner/Opera	ator (2)	Til.		1111	I E	nnië.		1
Agencies Notified Type Notification		Street Add	iress dell Road							10		
➤ EPA			e, Zip Code on, NJ 07	7039								
Emergency (inc justification)  DCA Cancellation	luding -	Name of C					Teleph	ne Numi	ber			
		FACILI	ITY INFOR	MATION								
Name of Facility Where Abatement is Taking P House	lace (3)				Туре	of Facility (4) School (K-12)						
Street Address 10 Wardell Road					×	Subchapter 8 Other (i.e. privetc.)	Other t	ın K-12) ımercia	l buildi	ngs, h	omes	i,
City (5)					Squ N/A	are Feet	# of FI N/A	ITS	Blo N/	ig. Ag A	е	
Livingston, NJ 07039 County (6)		County C	ode (7) SE ONLY)		Curr - Ho	rent Use (Prior	being	∍molishe	ed)		0)	
Essex	(0)		8 8	LN		atement Contr	ctor (9)	_				
Name of Monitoring Firm Hired by Building Ow N/A	ner (8)	ASCM	No.			itement, Inc		1				
Street Address				10000	treet Addr 1 Rosei	ess ngren Avent	J					
City, State, Zip Code					ity, State, Totowa,	Zip Code NJ 07512		8				
Project Manager for Monitoring Firm		Telephon	ne No.	10.00	elephone 973-345-		L #	ense No	o.			
Start Date (10)	Scheduled Co	ompletion [	Date (11)	N	lame of O	SHA Monitor						
0/10/10	8/19/15					atement, Inc					_	
Occupancy Status During Abatement (Check	Only One)			0.55	Street Add	<sub>ess</sub> ngren Aven	I e					
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe: Occupied	riod of Abate I Facility Hou	ement urs		C	City, State,	Zip Code NJ 07512						
					TOlowa,	143 07312						
Scope of Work (Check All That Apply)  × ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		vation				Full Containme Mini-Enclosure	r t with N	gative F	ressu	re		
2100 SI 0I 2200 II		311011				Glovebag Proc Non-Exempted		on-Friab	ole Pro	cedur	e	
						NOTI-EXEMPLES	Juna	JII I III	1 10	Abate		
	Is Loc Norn				-ttt					Ту	pe	
Location of Asbestos-Containing Material (ACM)	Used So	olely by	Asbesto	os Contair	ription of ning Mate	rial (ACM)		unt -			Щ	m
TO BE ABATED	Mainte Custodia		(i.e. 1		ystems ins			cify LF)	Rem	Repair	сар	nclo
In Facility (13)	(1	2)			scellaneou			- 6	Remova	oair	Encapsulate	Enclosure
No.	Yes N	o N/A		518.7	*				╀		te	W
basement	>	(		pipe ir	nsulation	1	78	_F	X			
Name of Registered Waste Hauler		NJDEP V Hauler ID		Cubic Y of Wast		Name of						
D&S Abatement, Inc.		#20996		TBD		Waste City, Stat		ment (	JI PA			
City, State Totowa, NJ				Disposa TBD	0	Tullyto						
Completed by Deanna Brkusanin	Title Project	Manager		Sig	ghature // Delu	we Rllu	ew		ate 5/01/1	5		

State of New Jersey Check # 15169 NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) Date of Notification (1) Montclair S Cloverhill LLC 6-4-15 Agencies Notified Type Notification 365 Thomas Blvd. JUN 1 5 2015 [ ]EPA [X] Initial Notification [ ]DEP Montclair, NJ 07042 [ ]Amended [X]DOL Notification Telephone Numbe [X]DOH Name of Contact [ ] EMERGENCY Nick []DCA [ ]Cancellation FACILITY INFORMATION Type of Facilit (4) Name of Facility Where Abatement is Taking Place (3) Private Home [ ]School (K ·12) [ ]Subchapte: 8 ( her than K-12) Street Addres [X]Other (i. .. , p: .vate & commercial bui ding homes, etc.) 5 Cloverhill Place Square Feet f of loors Bldg. Age City (5 County Code (7) County (6) Essex (STATE USE ONLY) Current Use (Pr or i being demolished) Montclair Name of Abatement Contractor (9) Name of Monitoring Firm hired by Building ASCM No. Owner (8) N/A AZTECH MANAGEMENT, Inc Street Address Street Address 86 Christopher St. City, State, Zip Code City, State, Zip Code Montclair, NJ 07042 Telephone Number License Number Project Manager for Monitoring Firm Telephone Number (973) 744-8800 00371 N/A Name of OSHA Monitor Scheduled Start Date (10) Sched. Completion Date (11) 6-16-15 N/A 6-15-15 Day Day Year Month Year Occupancy Status During Abatement (Check only one) Street Address [X] Facility Closed/Vacated During Entire Period of Abatement [ ]Abatement Performed Outside of Normal Facility City, State, Zip Code Hours - Describe: «OffHours Descript» [ ]other - Describe: «Other Occupancy Descript» Scope of Work (Check all that apply) [ ]Full Containment with Nega ive Pressure [X] Renovation [ ]Mini-Enclosure  $[X] \ge 3$  sf or  $\ge 3$  lf [X]Glovebag Procedure [ ]>160 sf or >260 lf [ ]Demolition [ ]Non-Friable Procedure Abatement Type Ts Location E. Description of Location of Normally MCHOWD NCAPSUL Asbestos-Containing Asbestos-Containing Amo at Used E Material (ACM) Solely Material (ACM) (Spe ify By Main-0 SF or (i.e., thermal systems TO BE ABATED AI tenance/ In Facility insulation, surfacing, VAT, L Custodial A or other miscellaneous) (13)Staff (12) Yes No N/A E Pipe Insulation 90 Basement X Name of Registered andfill NJDEP Waste Cubic Yards Name of Registered Waste Hauler Hauler ID No. of Waste 1.5 G.R.O.W.S. AZTECH MANAGEMENT, INC. 17040 City, State Disposal Date City, State

6-17-15

Signature

Montclair, NJ 07042

Completed By (Print or Type)

Constantine Vivian

Title

President

Morrisville, ?A 19067

Date

6-4-15

		N		ATION	te of New OF ASBE o NJAC 8	STOS	ABATEN		(	1/100	1	1	- 39	20	
Date of Notification (1) 6/9/15			3.0		Building O		perator	(2)		_	ال	11 1	5	2015	
Agencies Notified Type Notif				Street Ac 24 Veri	idress non Terr	ace									
X					te, Zip Cod field, NJ		3								
X DOH Emer	gency (ir cation) cellation		N	lame of	Contact d Caram		73			elepho	e Num	h-i			
	Cilation				ITY INFO		ON								
Name of Facility Where Abatement i house	s Taking	Place (3)							of Facility (4) School (K-12						
Street Address 24 Vernon Terrace								X C	Subchapter 8 Other (i.e. pri etc.)				ings,	home	s,
City (5) Bloomfield									e Feet	f of Flo	s	BI 68	dg. A	ge	
County (6) Somerset					Code (7) ISE ONLY)	\		Currer	nt Use (Prior	if being c	molish	ed)			
Name of Monitoring Firm Hired by B	uilding O	wner (8)		ASCM	l No.				ement Contronmental	The state of the s	LLC				
Street Address								Addres	is 33, 4 E Ga	te Drive					
City, State, Zip Code	tate, Zip Code						The second second		p Code NJ 0741	8					
Project Manager for Monitoring Firm			1	elephor	ne No.		Teleph	none No 764-22	).		nse N	0.			
Start Date (10) 7/6/15		Schedule		pletion [	Date (11)				IA Monitor						
Occupancy Status During Abatemen	nt (Check	Only On	e)				Street	Addres	ss		-				
Facility Closed/Vacated During Abatement Performed Outside Other – Describe:				ent			City, S	tate, Zi	p Code		-			<u> </u>	
Scope of Work (Check All That App	ly)									_	-				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	enovat emoliti				×	Min Glo	Containmenti-Enclosure vebag Procen-Exempted	ed ire				6	
		le	Location	nn.				1101	Lxempted	T allo I	11100		Abate	ement	
Location of Asbestos-Containing Material (A TO BE ABATED In Facility (13)	(CM)	Use Mai	Normall d Solel intenan odial S (12)	y y by ice/		tos Con therma surfa	escription taining N I system icing, VA miscellar	Material s insula T, or		Amo (Spe SF or	у	Remova	Repair	e Encapsulate	Enclosure
		Yes	No	N/A								_		te	(D)
basement				Х		pipe	insula	ition		85 L	1	х			
basement				Х	boi	iler ex	terior in	nsulati	ion	30 5	:	х			
				-											
Name of Registered Waste Hauler Freehold Cartage			Н	JDEP Wauler ID 5939		of Wa	Yards iste		Name of F Western						
City, State Freehold, NJ						Dispo TBD	sal Date		City, State Birdsbor			y			
Completed by A. Scott Higgins		Title Presi	dent				Signatur	ed	<u></u>		100000	ate 9/15			

Ch#3642

Date of Notification (1) 06/08/2015			Building ( -Union J						JI	E)	1 =	1015	,		
Agencies Notified Type N	otification			Street A	ddress entral Av	/A									
X DEP Ar	tial nended nendment #		_	City, Sta	ite, Zip Co Providenc	de	07974								-
X DOH jus	nergency (i stification) ancellation	nciuaing			f Contact ammerd	ahl				T alephor	Nun	ber			
				FACI	LITY INFO	RMAT	ION			-					9400
Name of Facility Where Abateme Developmental Learning C		Place (3	3)					Type of Fa	and the source						
Street Address 330 Central Ave								x Subc		(O her tha			dings	home	es,
City (5) New Providence								Square Fe	eet	# of Floo		В	ldg. A	ge	
County (6) Union				County (	Code (7) USE ONLY)			Current U:	se (Prior	if b ∋ing de	olish	ed)			
Name of Monitoring Firm Hired by Partner Engineering and S				ASCN	ΛNo.	11		of Abateme		act ir (9)	-				
Street Address 611 Industrial Way West	Partie						Street	Address McBride A							
City, State, Zip Code	iy, State, Zip Code atontown, NJ 07724						City, S	state, Zip Co	ode				-		
Project Manager for Monitoring Fi	atontown, NJ 07724						Teleph	dland Par			se No	D.			
Brian Nemetz Start Date (10)		Schedule	ed Cor		30-1700 Date (11)		1000	225-8400 of OSHA M		011	4				encuence o
06/19/2015		06/22/2	2015				J&S	Environm		at orator	es				
Occupancy Status During Abatem Facility Closed/Vacated Duri	19	0.50	50	nent				Address Route 22	2 west						
Abatement Performed Outsi  Other – Describe: friday:star	de of Norma	al Facility	Hours	3	standard h	rs	200	itate, Zip Co							
Scope of Work (Check All That A	oply)							.,			_				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		and the same of th	Renova Demolit				×	Mini-En	ntainmen closure ag Proced	t w th Neg	ve P	ressu	re		
					1					*) and Nor	riab	e Pro			
Location of			Locat			Do	scription	of					Abat Ty	ement /pe	ľ.
Asbestos-Containing Material	(ACM)		d Sole		Asbest	tos Con	taining N	Naterial (AC	M)	Amour				m	
TO BE ABATED In Facility (13)		300000000	todial (12)		(i.e.	surfa	l system cing, VA miscellar		,	(Specif SF or L		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A							e secolulista	<u>a</u>		ate	re
boiler room		Х				78.45.71	r insula			200 S		х			
boiler room		X		-		pipe	insula	tion		20 LF		х			
								_	-						
Name of Registered Waste Haule	I	JDEP W	/aste		Yards	Na	me of Re	egis tered L	ndfill	1	-	and the same of			
Lilich Corporation		lauler ID 8724	No.	of Wa n/a	ste	9 663	.R.O.W								
City, State Woodland Park, NJ						Dispo n/a	sal Date		y, State orrisville	e, <sup>2</sup> A					
Completed by Momo Glavatovic		Title vice p	oresio	dent		5	Signature	CHA			Da 06	te /08/2	2015		

Check # 15175

CK 1568

### State of New Jersey NOTIFICATION ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1)							g Owner/Operator	(2)			- 75			10
6/8/15					Matl	new Sosl	ca	-						_
Agencies Notified	Type Notif	ication				Address	•							
EPA	Initial	12.2				Гenby D								_
DEP DOL	Amend	led ment#				State, Zip	Code							
	☐ Emerg	ency (inc	luding	1		an, NJ								_
DOH DCA	justific Cancel					e of Con			Telep	one Numb	er			
Швел	L Caricer	lauvii			Math	ew Soska	ì							
			V		FAC	CILITY INF	ORMATION							
Name of Facility Where	Abatement is	s Taking	Place	(3)				Type of Facility						
Residence								School (K-1	5.0	W 1/ 40	V			
Street Address								Subchapter Other (i.e., )				inge		
273 Tenby Drive								homes, etc.						
City (s)								Square Feet	# of	oors		dg. A	100	
Delran, NJ								1900 SF	12		-	yrs		_
County (6)					Cou	nty Code( ONLY)	7) (STATE	Current Use (P	or if b€	g demolis	ned)			
Burlington				_				Residence	=					_
Name of Monitoring Firm	n Hired by Bi	uilding O	wner	T	ASCM	No.		ment Contractor (9						
(8) <u>N/A</u>				_			AEi2, LLC							_
Street Address							Street Address							
							300 S. Lenola							_
City, State, Zip Code			4091-221				City, State, Zi							
							Maple Shade	, NJ 08052	===				_	_
Project Manager for N	Monitoring F	irm		Tele	ephone	No.	Telephone No.		Lice	se No.				
							609-481-212		1 00	-				_
Start Date (10)				omple	tion Da	te (11)	Name of OSHA	Monitor						
6/18/15		6/27/1					AEi2, LLC							
Occupancy Status Durin							Street Address							
□ Facility Closed/Vaca							300 Lenola							
Abatement Performe	d Outside of	Normal	Facility	y Hou	rs		City, State, Zip Maple Shad	Code NIT 08052						
Other - Describe:														_
Scope of Work (Check	all that apply	)						ontainment with N	egative	ressure				
≥3 sf or ≥3 lf			⊠ Re	novat	ion		Mini-Er							
≥160 sf or ≥260 lf			De	molitio	on			ag Procedure	an Eric	a Dragadu				
			la l	ocati			□ Non-E	xempted (*) and N	on-riia	e Procedu		bate	ment	l.
			)5/25/1/2	ocau							′	Тур		
Location	of		Used				Description of		۸۳	Nunt			E	E
Asbestos-Containing I TO BE ABA		M)		tenar istodi			tos Containing Ma , thermal systems			ount	R	R e	n c	n
IN Facilii			5	Staff?		(,,-,	surfacing, VAT	, or	SF	·LF)	m o	P	p	0
(13)				(12)			other miscellane	eous)			v a	i	n 11	u u
			V	NI-	N/A						1	r	a	e
Attic			Yes	No		Vermi	nlite		500 5		X		e	
Auc					X	- CITIE	7011 LO		==		1	-		-
					-						-	-	_	
											_	_		
Name of Registered Wa	ste Hauler			1000	NJDEP		Cubic Yards	Name of Reg	stered	indfill				
AEi2, LLC				100	tauler II 21376	NO.	of Waste	TBD						
City, State				- 14	13/0		Disposal Date	City, State		1/				
Maple Shade, NJ							TBD ,	TBD =		/				
Completed By		Title					Signature	1971	7	Date				
Wm. Minnick		1.000000	ogran	ı Mg	ŗ.		111/	Mmu	1	6/8/15				
ASB-41														

Check # 15176

#### MO#22436291935

Date of Notification (1)				Name	of Building	Owner/Operator (2	2)					5.0%		
06/09	15	_		Kathle	een Tuozz	zolo								9
Agencies Notified Type No	otification		-	microscope and the second	Address	2010		_		Utt.	3	e e e		
☐ EPA ☑ Initia	1			23 77/	ldwood T	Arrace								
■ DOLWD □ Ame				-	State, Zip C					-	-			
	ndment #_				Ridge, NJ									
	rgency (in fication)	cluding			of Contact	The second secon		TT	elephor	Numbe	27			
	cellation			K athle	een Tuozz	rolo		1						
						FORMATION								
Name of Facility Where Abatemen	t is Taking	Place	(3)	1 A	CILITIN	IFORMATION	Type of Facility	(1)		_			_	-
Private house	t io railing	, 1 1000	(0)				School (K-12	30000						
Street Address							Subchapter	8 (C	her tha	K-1 2)				
A CONTRACTOR OF A CONTRACTOR O							Other (i.e., p		te and	ommerc	al bu	lding	S,	
23 Wildwood Terrace City (5)							homes, etc.		f of Flo		Die	la A		
Glen Ridge, NJ 07028							Square reet		FUIFIC	5	DIC	ig. Ag	je	
County (6)				Coun	ty Code (7)	(STATE USE ONLY)	Current Use (Pr	rior	f hoing	emolich	000)			
Essex				Ooun	ity code (1)	(STATE OSE ONET)	Current use (F)	1101	Deling	EHIOHSI	leu)			
Name of Monitoring Firm Hired by	Building (	Owner	(8)	ASCM	No	Name of Abateme	ant Contractor (9	1						
				7100111	110.	Gr Tech LLC	sin contractor (s	1						
Street Address						Street Address		-		_				
							282							
City, State, Zip Code						576 Valley Rd # City, State, Zip Co		_		-	-			
						Wayne, NJ 0747								
Project Manager for Monitoring Fi	m		Tele	phone	No.	Telephone No.	0	T	Licens	Vo.			-	
			1 25522			973-638-1777			1127	171	-			
Start Date (10)	Sched	duled C	omple	tion Da	ite (11)	Name of OSHA M	Ionitor	- 1	1127	_	-			
06 /18 /15				) /		Environicion Co	noultonto Inc							
Occupancy Status During Abatem						Envirovision Co Street Address	iisuitaiits,iiic	-		-			-	
□ Facility Closed/Vacated During				ment			Pood Dldg #	251						
Abatement Performed Outside	of Normal	Facilit	y Hour	s - Des	scribe	20-21 Wagaraw City, State, Zip Co		221						
Time of Abatement:AM	P	M/	PM_		_AM	Fair Lawn, NJ 0								
Scope of Work (Check all that app	ly)						and decontamin	natio	n with	agative	press	ure		_
≥ >3 sf or >3 lf		⊠ n.				Full Cont	tainment with Ne							
☐ ≥ 160 sf or ≥260 lf		A Re	novati molitic	on on		Mini-Enc Gloveba	g Procedure	Ter	t with I	gative	Press	ure		
<u> </u>						Non-Exe	mpted (*) and No	on-F	iable I	ocedure	3	1		
V W 3			Locat								Aba	ateme	ent Ty	уре
Location of Asbestos-Containing Material	ACM)	(0.00.00)	Norma ed Sole	-	Acho	Description of			Λ		Z	R	П	Ш
TO BE ABATED		Ma	intena	nce/	(i.e	stos Containing Ma ., thermal systems i	insulation,		Amo (Spe		Remova	Repair	cap	clo
IN Facility		Cus	todial (12)	Staff?		surfacing, VAT,	or or		SIF o		υval	=	Encapsulate	Enclosure
(13)		V	T	h1/6	1	other miscellane	ous)						ate	
D		Yes	No	N/A							EZ		_	
Basement		Ш		X	Pipe inst	ılation		30	LF		$\boxtimes$	Ц	Ц	Ш
Basement				$\boxtimes$	Boiler in	sulation		36	SF		$\boxtimes$			
		П	П							-				
Name of Registered Waste Haule		L	NJI	DEP Wast	e Hauler ID No.	Cubic Yards of Wast	e Name of Regi	ster	d Lanr	II		ш	Ш	Ш
Gr Tech LLC						05X-591			o Luin	1863				
City, State		-	(	003378	53	TBD Disposal Date	T.R.R.F. Inc							
							(5)							
Wayne, NJ 07470  Completed By (Print or Type)	7:41					TBD	Tullytown, P	A		-				
ti 11 (5%) fi	Title	5				Signature	1	7000		Dat	е			
N.Jevtic	Ow	ner					tente wend	ad		06/0	9/20	15		
MAY 11	+	Do no	i use ti	his form	n for asbes	tos licensure exemp	ted activities.							



## Emergeny

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

CK.4:02

Date of Notification (1) 6/9/15		Building Owner/O Schuler private								
Agencies Notified Type Notification	Street Ad 2 East 3	dress 32nd Street			J	N 15	2015			
EPA Initial DEP Amended Amendment #		e, Zip Code Haven Gardei	ns NJ 080	008						
Emergency (includin justification)  DCA  Emergency (includin justification)  Cancellation	Name of Kevin	Contact			Tele	one Numb	er			
		ITY INFORMATI	ON							
Name of Facility Where Abatement is Taking Place Kevin Schuler private home	3)	S)	Ту	pe of Facility (4						
Street Address 2 East 32nd Street			×	Subchapter Other (i.e. p	(Othe	han K-12) ommercial	buildi	ngs, h	omes	۶,
City (5)				etc.) quare Feet 000+	# of 2	oors	Blo	ig. Ag	е	
Beach Haven Gardens NJ 08008  County (6)	County C	Code (7)	C	urrent Use (Pric	100000	demolishe				
Ocean	1857	JSE ONLY)		ouse						
Name of Monitoring Firm Hired by Building Owner ( N/A	) ASCM	I No.	Pernac	Abatement Conso Inc.	ractor	)		•		
Street Address	,		Street Ad PO Box							
City, State, Zip Code				e, Zip Code Berlin NJ 080	<del></del>					
Project Manager for Monitoring Firm	Telepho	ne No.	Telephon	ne No. 3-9800		icense No				
- Ciari - Ciari	led Completion	Date (11)	Name of	OSHA Monitor				14		
6/10/15 6/12			same							
Occupancy Status During Abatement (Check Only			Street Ac	aress						
Facility Closed/Vacated During Entire Period Abatement Performed Outside of Normal Fac Other – Describe:	f Abatement ty Hours		City, Stat	te, Zip Code						
Scope of Work (Check All That Apply)						4		5450		
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	Renovation Demolition		×	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	: :edure				2	
·			155	Non-Exemple	1 ( ) all	NOTE TIES	1	Abate		1
	Is Location Normally		escription o	,f				Ту	ре	Т
Aspestos-Containing Material (ACM)	sed Solely by Maintenance/ ustodial Staff? (12)	Asbestos Co (i.e. therm sur	ntaining Ma	iterial (ACM) insulation, , or	(	ount ecify or LF)	Removal	Repair	Encapsulate	Enclosure
Ye		Ev	erior Sidi	na	15	0 SF	x			-
Exterior Siding	X	EX	erior Siui	ny		-	1			-
	-					-				
				-		\$				
Name of Registered Waste Hauler	NJDEP \		ic Yards /aste			ed Landfill				
United Containers	22459	3		G.R.O		<u> </u>				
City, State Elm NJ			oosal Date 2/15	City, Sta Morris		19067				
Completed by Ti Anthony T Perna P	e esident		Signature	7		1,000	ate /9/15			

						S ABATEMENT and 12:120-7	,	66.0						
Date of Notification	(1)	(Pursu				wner/Operator			_	-			-	
6-9-15			Mrs.	Nov	votn	У								
	Type Notific	ation	Street 2	Addres	ss					111	= -	70. H		
[ ]EPA	[X]Initial		1515	44	th S	treet			Ų		J .	- 10		
[ ]DEP	Notific	cation	City, S	tate,	Zip C	ode				-				
[X]DOL	[ ]Amended		1.77		177.0	n,NJ,070	47							
[X]DOH	Notific	cation	Name of	Conta	act			Telephone	e l'umber					
	[ ]EMERGEN	CY	Mrs.			v		-	401-	007	4			
[ ]DCA	[ ]Cancella	ation				4								
				FACIL	ITY IN	FORMATION								
Name of Facility Whe		is Taki	ng Place	(3)			Type	of Facili	ty (4)					
Same as above							0.73	]School (				- 10	,	
Street Addres								]Subchapt []Other (i						
									il dings					
							Squar	e Feet	of F	pors	Blo	ig. I	Age	
City (5		County	(6) Essex			ty Code (7) TE USE ONLY)								
					(0111	11 001 01111	Curre	ent Use (P	Prior if	being	dem	olis	hed)	
Name of Monitoring E	diam biand bu	Puildin	g ASCM	No		Name of Abate	ment C	ontractor	(9)	_				
Owner (8)	TIM HITEG DY	Burrarn	g ASCM	NO.		AZTECH 1								
N/A						Street Addres				_				
Street Address						86 Chris		ner St.						
City, State, Zip Coo	ie.					City, State,							- 77-27	
orty, budge, arp ood						Montcla	100 mar.		12					
Project Manager for	Monitoring F	irm Te	lephone	Numbe	r	Telephone Nur	nber			Lice	ense	Numb	er	
		N	/A			(973) 74	4-880	00		00	037	1		
Scheduled Start Date	e (10) Sch	ed. Comp	letion I	ate (	(11)	Name of OSHA	Monito	or		_			89	
6-20-15	-	6-3	22-15			N/A								
Month Day Y Occupancy Status Dur	College December 1997		Day only or	Year		Street Addres	20			-				
[X]Facility Clo	sed/Vacated 1					octeet naute.	35							
of Abatemen []Abatement Pe		ide of N	ormal Fa	cilit	v	City, State,	Zip Co	ode						
Hours - Desc	ribe: «OffHou	rs Descr	ipt»		-	crey, beace,	urb oc	, 44						
[ ]other - Desc			y Descri	pt»						_				
Scope of Work (Check	c all that ap	ply)				[ ]Full	Conta	inment wit	th Negat	ve Pi	ressu	re		
[X]≥3 sf or			[X] Renov			[X ]Min	i-Encl	osure						
[ ] <u>&gt;</u> 160 sf ∈	or ≥260 lf	1	[ ]Demol	ition		[]Glove	-	ocedure e Procedu:	re					
Mary September 1			Is Location	T							Aba	teme		Гуре
Location			Normally			Descripti Asbestos-Con		ng	Amoi	t	R	R	E	E N
Asbestos-Cor Material			Used Solely			Material		-9	(Spec		E	E	CA	C
TO BE AB			By Main- tenance/			(i.e., therma		200000000000000000000000000000000000000	SF	C	0	A	PS	OS
In Facil			ustodia: taff (12			ulation, sur r other misc			LIE		A	I R	U	UR
		Yes		N/A							1		-	E
Basement			2	2	Boi	ler			35	F	X			
										_	-			
Name of Besietes	Wasta Warda		IJDEP Was	rte.	Contraction	ic Yards	Nome	e of Regis	stured I	ndfi	11			
Name of Registered V AZTECH MANAG		NC E	auler II		100000	Waste 1.5	10000000	R.O.W.		and the				
City, State		-	L7040		Die	posal Date	Cit	y, State	_					-
Montclair, NJ	07042					-23 <b>-1</b> 5		rrisvi	lle,	A 1	906	7		
Completed By (Print	or Time) In	itle				Signatur				— h	ate			
Constantine V		resid	ent			C 1/	(())				6-9	-15	5	

Check # 15174

### Check#2213

MAY 11

			1							a. 7	1				
Date of Notification (1)				Name	of Building	Owner/C	perator (2)						and a		
	10 /	15		Carlos	Cunas			21	Hi Jy	Ŋ	5 75				
Agencies Notified	Type Notificat				Address			6			0 /6	1:	20	-	
☐ EPA	Initial	60			elleville A	Vanua			7 E				- 6		
▼ DOLWD	Amended				State, Zip C				1.	-5 2	10.7	.1	- /		
□ DHSS	Amendme	Control of the second	_						14	95. 1	1-1	111	1		
DCA	☐ Emergence		ıg		rille, NJ 0				T. alan	he a	Numbe	-			
(NJAC 5:23-8)	justification  Cancellation								eleb	IIC 5	Numbe	1			
	Cancellation	JII			ey Holme										
				FA	CILITY IN	IFORMA	TION								
Name of Facility Where A	batement is Ta	aking Plac	e (3)					Type of Facility	(4)						
Private house								School (K-12 Subchapter		4h -	K 4 0)				
Street Address								Other (i.e., p	orivate a	nc c	ommerci:	al bu	ildina	S	
199 Belleville Avenue								homes, etc.		5.56.58 A.G			3	·	
City (5)								Square Feet	# of	FI )	rs	Bio	dg. Ag	je	
Belleville, NJ 07109															
County (6)				Coun	ty Code (7)	(STATE U	SE ONLY)	Current Use (Pr	ior if be	ing i	emolish	ed)			
Essex															
Name of Monitoring Firm	Hired by Buildi	ng Owner	(8)	ASCM	No.	Name o	of Abateme	nt Contractor (9	)						
						Gr Tecl									
Street Address						Street A			-						
						576 Va	lley Rd #2	283							
City, State, Zip Code						-	ate, Zip Co			10.00					_
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						5500	NJ 0747								
Project Manager for Moni	torino Firm		Tele	phone	No	Telepho		0	Lice	ns I	No				
			1010	prioric	110.	55508011 50518					140.				
Start Date (10)	10	cheduled	Comple	tion Do	to /11\	973-633	of OSHA M	anitar	0112	21 -					
06 / 19 /						Name C	OSTA IVI	DIIIIOI							
								nsultants,Inc							
Occupancy Status During				V.D. (C. T. C.		Street A	Address								
Facility Closed/Vacate								Road, Bldg .#	34 A						
Abatement Performed Time of Abatement:	AM-	rmai Facii PM/	ity Houi	's - Des	Δ M	City, St	ate, Zip Co	de							
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					7 1111	Fair La	wn, NJ 07	7410							
Scope of Work (Check all	that apply)							and decontamin				ress	ure		
		X F	Renovati	on			Mini-Encl	ainment with Ne osure	ga ve P	re 31	ure				
2 160 sf or 2260 lf			)emolitic	on		$\boxtimes$	Glovebag	Procedure	T∈nt wi	th e	egative F	ress	ure		
					,		Non-Exer	npted (*) and No	on- Friab	le r	ocedure		1		
			Is Loca									Aba	ateme	ent Ty	уре
Location Asbestos-Containing		l U	Norma sed Sole		A-6-		scription of					D	Z	Ш	Ш
TO BE ABA		N	laintena	ince/			taining Mat I systems ii	erial (ACM)	200	m 11 Sp :i	2000	em	Repair	тса	nclo
IN Facili	ty	CL	stodial	Staff?	A V		cing, VAT,		1973	F <sub>1</sub> L	2.5	Removal	¥:	Encapsulate	Enclosure
(13)			(12)	1	-	other r	miscellaneo	ous)			5992533	=		late	œ.
		Yes	No.	N/A											
Basement				X	Pipe ins	ulation			2( LF			X	П	П	
			П												
			1	1						-				Ш	
	79	$  $ $\square$	1	Ш								Ш			
														П	П
Name of Registered Was	te Hauler		NJ	DEP Wast	e Hauler ID No	Cubic Ya	rds of Waste	Name of Regi	ste ed L	ar i	ill			_	
Gr Tech LLC			8	003378		TBI		T.R.R.F. Inc							
City, State		-		-00011		Disposa		City, State							
Wayne, NJ 07470															
Completed By (Print or T	vne)	Title				TBI		Tullytown, P	Α		-				
						Sig	gnature 🏑	1	,		Date				
N.Jevtic		Owner					- //e	which wena	d		06/1	0/20	15		
FINANCE I							11								

### CH# 3652

Date of Notification (1) 06/10/15		24			Building wp. Bo				2615	JUN /					**********
Agencies Notified	Type Notification			Street Ad		1			0 33¢	5 n	) 5:	1:	28	-	
X EPA X DEP X DOL	Initial Amended Amendment #		_	City, Sta Brick, I	te, Zip Co NJ 0872	ode	enue		- 3	100		3 7	71		
<ul><li>DOH</li><li>DCA</li></ul>	justification) Cancellation			Name of James	Edward	ds			1	Telenh	ie Niin	nher			
NI		D		FACIL	LITY INFO	ORMAT	ION			-					
Name of Facility Where Osbornville Elemen		Place (3)						Type of Fac							
Street Address	, , , , , , , , , , , , , , , , , , , ,		<del></del>						ol (K-12) napter 8 (	Other th	n K-12	!)			
218 Drum Point Ro	pad								(i.e. priva				dings	hom	es,
City (5) Brick, NJ 08723								Square Fee	et	# of Flc	rs	E	Bldg. A	\ge	
County (6)				County C	Code (7) JSE ONLY	)		Current Use school	e (Prior if	being (	molish	ed)			
Name of Monitoring Firm McCabe Environme		wner (8)		ASCM	l No.			of Abatemer Corporat		tor (9)	-	11000			
Street Address 464 Valley Brook A	ve						8 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Address McBride A	ve						
City, State, Zip Code Lyndhurst, NJ 0707	71							tate, Zip Coo dland Parl		424	S-10 (112)				
Project Manager for Mor J. Chiavello	nitoring Firm		10	Telephor	ne No. 88-4839		Teleph	one No. 225-8400	-	Lie	nse N	0.			
Start Date (10) 06-22-2015		Schedule	d Con				Name	of OSHA Mo Environme							
Occupancy Status Durin								Address	sillal La	- DOTAL	ies,				
	ated During Entire P	50	700	ent				Route 22	west						
Abatement Perform Other – Describe:	ned Outside of Norma	al Facility	Hours					tate, Zip Coo							
Scope of Work (Check A	All That Apply)										_				_
≥3 sf or ≥3 If ≥160 sf or ≥260 If		CONTRACTOR OF THE PARTY OF THE	enova emolit				×	Full Cont Mini-Enc Glovebag	losure g Proced	re					
		lal	ocati				L	Non-Exe	mpted (*)	and No	-Friab	e Pro	on Carte	e emen	t
Location	n of	l N	ormall	у		De	scription	of					Ту		
Asbestos-Containing TO BE AB In Facil (13)	ATED lity	Mair	I Soleintenar odial S (12)	nce/	Asbes (i.e.	tos Con thermal surfa	taining M	laterial (ACN insulation, T, or	1)	Amou (Spec SF or	1	Removal	Repair	Encapsulate	Enclosure
boiler ro	oom	X		1211	ex	terior b	oiler in	sulation	_	200	-	x			-
boiler ro	oom	×				Seattle French		sulation		200	-	x			
boiler ro	oom	x				interio	or insula	ation		100	-	x			
boiler ro	oom	×			p	ipe/fitt	ing inst	ulation		100	-	x			
Name of Registered Was	ste Hauler			JDEP W	aste	Cubic	Yards		ne of Reg		andfill				
Lilich Corporation				auler ID I 3724	No.	of Wa n/a	ste	G.F	R.O.W.	S Land	ill				
City, State Woodland Park, NJ						Dispos n/a	sal Date		, State rrisville	PA					
Completed by Momo Glavatovic		Title vice p	resid	ent		S	Signature	all	/		Da: 06		2015		



Date of Notification (1) 06/10/15						Owner/Oper		(2)	2815	11 11 1	*2000.2000	***	-	
Agencies Notified	Type Notification		1	Street A						UP	15 R	17 1	: 22	
_	_				e Street				143	5 m			< 1	
DEP DOL	Initial Amended Amendment	#	_		ate, Zip Co Grove,	de NJ 08069	)		ď	110	Sur 9	n i	ROL	
DOH DCA	Emergency ( justification) Cancellation	including	-	Name o	f Contact w Ricco			=	Teler	one N				
DCA	L Caricellation			75276689957		RMATION								
Name of Facility Where	Abatement is Taking	Place (3)	)	FAGI	LITIME	MULATION	Т	Type of Facility (	4)					
Vacant Duplex						- 3		School (K-1	2					
Street Address								Subchapter	8 (Other				90	
67-69 Penn Street								Other (i.e. p etc.)	ri rate &	mmer	cial bui	dings	, home	es,
City (5)							1	Square Feet	# of F	ors	E	3ldg. /	Age	
Penns Grove											1			
County (6) Salem					Code (7) USE ONLY)			Current Use (Prior Vacant	or if being	iemol	ished)			9
Name of Monitoring Firm	n Hired by Building (	Owner (8)		ASCN	/ No.	Na Na	ame (	of Abatement Con	ti actor (!	-			-	
N/A						R	licco	Construction		· ·				
Street Address			i					Address Creek Road			2			
City, State, Zip Code							ate, Zip Code awr, NJ 0803							
Project Manager for Mor	nitoring Firm	<u>:</u>	Telepho	ne No.			one No.	-	bense	No.				
0. 10. (0)								66.6452	(	204				
Start Date (10) 06/20/15		07/20/1		npletion	Date (11)			of OSHA Monitor ew Ricco						
Occupancy Status Durin	g Abatement (Chec	c Only One	e)			1		Address		-				77
Facility Closed/Vac	ated During Entire F	eriod of A	baten	nent		2	82 C	reek Road			:	ŝ		
Abatement Perform Other – Describe:	ed Outside of Norm	al Facility	Hours	3, .		- 1	1000	ate, Zip Code						
I —			_			_ B	lellm	awr, NJ 0803	1					
Scope of Work (Check A	II That Apply)						_				ř.			
≥3 sf or ≥3 lf			enova			12 72		Full Containme	er t with N	gative	Pressu	re		
× ≥160 sf or ≥260 lf		× D	emolit	tion				Mini-Enclosure Glovebag Prod						
						<u>.</u>	X	Non-Exempted		on-Fria	able Pro	cedu	е	
			Locati					.				Abat	ement	
Location			ormal d Sole		R. II.	Descrip	otion	of				1	/pe	
Asbestos-Containing TO BE AB			ntena		Asbest	os Containi thermal sys	ng M	aterial (ACM)	Am		77		g	m
In Facil	lity	Custo		Staff?	(1.6.	surfacing				ify LF)	em	Repair	cap	nclo
(13)			(12)			other misc	ellan	eous)		250	Removal	air	Encapsulate	Enclosure
195		Yes	No	N/A		25					-		te	(D
Exteri	or			Χ.,	1	Transite	Sid	ling	800	SF	Х			
3. 24														
			1	-										
			1						-					
Name of Registered Was	ste Hauler	I	JDEP W	/aste	Cubic Yar	ds	Name of F	Raistere	Land	fill			$\vdash$	
Ricco Construction (	Corp	H	lauler ID 28909	20 20 m244	of Waste		Salem (	2011/0-001/09/09/09		3300.0				
City, State Bellmawr, NJ					Disposal Dis	Date	City, State Alloway		-					
Completed by		Title				Sign	altı ırr	0	, 110	1 -	Date			
Andrew Ricco						- ///	Va)	neulAle	15	1 1	06/10/	15		

Date of Notification (1) 6/10/2015			100		Building Ov Pleasant E			52 C C	tion	20 15 JU	10			134	
Agencies Notified	Type Notification			Street A	Macket Transfer		0, 20			<b>21 15</b> JU	10	7.	11.	27	,
EPA  X DEP  X DOL	Initial Amended Amendment			City, Sta	te, Zip Code	е	8742			= 1	17	7 (2)	1/4	01	
DOH DCA	Emergency (i justification) Cancellation	ncluding			Contact Corso					T€ lephon	Num	ber	~	al .	
Name of Facility Where I	hatament in Talkin	DI (0)		FACI	LITY INFOR	RMATI	ON	_			_				
Name of Facility Where A Memorial Middle sc		Place (3)						_	e of Facility (4						
Street Address 808 Laura Herbert [	Orive							×	School (K-12 Subchapter Other (i.e. pretc.)	8 (Ot ier thai			dings,	home	es,
City (5) Point Pleasant								Squ	Jare Feet	# of Floor		В	ildg. A	\ge	
County (6) Ocean					Code (7) USE ONLY)				rent Use (Prio	r if be ing de	olish	ed)			
Name of Monitoring Firm Environmental Desi		Owner (8)		ASCN	1 No.				patement Control	tractc (9)					
Street Address 5434 King ave suite	101			1			Street 606 I		ress Bride Ave		_				
City, State, Zip Code Pennsauken, NJ 08	1.09								Zip Code d Park, NJ	074 24	-				
Project Manager for Mon Jay Murray	ect Manager for Monitoring Firm						Teleph	none			e No	).			
Start Date (10) 06-20-2015	it	Scheduled		pletion	Date (11)		Name	of O	SHA Monitor ironmental		_				
Occupancy Status During	Abatement (Check						Street	-30.000							
X Facility Closed/Vaca Abatement Perform	ated During Entire P	eriod of At	batem	ent			((75)(5)(5)(5)	11051050	te 22 west		_				
Other - Describe: _						-			J 07083						
Scope of Work (Check Al	I That Apply)	X Re	enova	tion			The state of the s		VRAP/CI		10 D	racell	re		
2160 sf or ≥260 lf		Promoternia .	moliti				2	N	/lini-Enclosure	_	76.1	cssu	16		
							É		Blovebag Proc Ion-Exempted		riabl	e Pro	cedur	е	
		1.750	ocati											emen vpe	t
Location Asbestos-Containing		Used		ly by	Ashesto	De s Conf	scription	of Nateri	ial (ACM)	\moun					
TO BE ABA	ATED	Main Custo	itenar		(i.e. th	nermal	systems	s insu	ulation,	Specify		Re	Z.	Enca	Enc
In Facili (13)	ty		(12)				cing, VA niscellar			&F or LF		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A								100		ate	9
6th grade wing(c	classrooms)			X	pipe	insu	lation-	wrap	o/cut	18LF	1000	x			
Name of Registered Was	ame of Registered Waste Hauler					Cubic	Yards		Name of F	Regis ered La	dfill	L			L
Lilich Corporation				auler ID 3724	No.	of Wa	ste		G.R.O.V		. 1005077.0				
City, State Woodland Park, NJ						Dispos n/a	sal Date		City, State Morrisvi						-
Completed by		Title				S	Signature	1	44		Dat				
Momo Glavatovic		vice pr	resid	ent				6	SHE SHE		06	/10/2	2015		-

					SALT TO A BOTT TO A MAP STON	The second section of the second seco		50	- Check	# 98	365		
Date of Notification	(1) June 10, 201	5			of Building	Owner / Operator (2	0.50	-					
Agencies Notified	Type Notific			Street /	Address ooper Ave		207 453	5 . (j.) 13	·5 · · · ·	28		25	
□DEP □DOH	392030	al ended endment#			ate & Zip ( River, NJ			-		ĈĮ.			
DCA	(homeonical and a constant	cellation		Name of	of Contact lafsky				Tele	ephor	e Nu	mbe	r
				FAC	CILITY IN	FORMATION							
Name of Facility Wh Bank of America Street Address		is Taking P	lace.(3)				K-12) oter 8 (Other than						
1290 Hooper Avenu	ue					Other (i	.e., private & c		The second secon	, hon . Age		tc.)	
City (5) Toms River						1,100 Current Use ( Bank	Prior if being der	1 nolishe			50		
County (6) Ocean			unty Code										
Name of Monitoring Environmental Tes		Building Own	-		ASCM N	Synatech, Inc		r (9)					
Street Address 413 North Black Ho	rse Pike					Street Addres							
City, State & Zip Co Runnemede, NJ 08	8078						rbor, NJ 08087						
Project Manager for Howard Zenobi	Monitoring Fire	n	10000	lephone N 6-482-131		Telephone Nu 609-296-6916			_icense Numb	er 0081	7		
Scheduled Start Dat June 20,		Scheduled	515 (.5)	on Date (1	1)	Name of OSH Synatech, Inc							
Occupancy Status D			nly one)		it	Street Addres	ss						
Other – De	Performed Ou scribe: cupied During A		nal Hours			City, State & Z Little Egg Ha	Zip Code arbor, NJ 08087						
Scope of Work (Che													
≥3 sf or ≥ 50 l ≥160 sf or ≥2	f	,		Renovation Demolition			Full Containmer Mini-Enclosure Glovebag Proce Non-Exempted	dure	egative Pressu		re		
	ocation of			on Norma		Descripti	ion of	T			atem	ent T	Гуре
	aining Material <u>BE ABATED</u> I Facility	(ACM)		y Mainten dial Staff?		Asbestos-Co Material ( (i.e., thermal	(ACM)	Am	unt (Specify F or LF)				
	(13)		Yes	No	N/A	insulation, surf or other misce	acing, VAT			Removal	Repair	Encapsulate	Enclosure
Manager's Entry Do Area, Coupon Boo					Х	Joint Com	pound		200 SF	Х			
Name of Registered	Waste Hauler	4	NJDEP \	Vaste (	Cubic Ya	ards of Waste	Name of Regis	ered L	ndfill				
Synatech, Inc.			Hauler II		15		Grows Landfi						
City, State					Disposal	Date	City, State						040
Little Egg Harbor, I	NJ 08087	Title			August :	a a	Morrisville, P	Date				_	
Diane Aloia		100000000	e Admini	strator	Nu	me I ale			, 2015				

				to NJAC 8				5	-		CH	_#	Ś	5/	5 f
Date of Notification (1) 6/9/15				f Building C nberg Bo				2875 J.	1. 12	,					
Agencies Notified Type Notificati	on	1	Street A 301 69	ddress 9th Stree	t			6-2-	-		. * ?	ij			
DEP Amended Amended	ent #			ate, Zip Coo nberg, N.		13		ê.	3.72			1.			
□ Emergen				f Contact benese					Tele	one	Num	har			
			FACI	LITY INFO	RMATI	ON			-0	_					
Name of Facility Where Abatement is Ta Anna L. Klein Elementary School		3)	17.01				Тур	e of Facility (							
Street Address 301 69th Street			-					Subchapter Other (i.e. p	(Other				lings,	home	s,
City (5) Guttenberg								etc.) are Feet 000 +	# of I	ors		200	ldg. A	ge	
County (6) Hudson				Code (7) USE ONLY)			Cur	rent Use (Pri	o if bein	dem	olishe	ed)			
Name of Monitoring Firm Hired by Buildi RJB Environmental, Inc.	ng Owner (8	)	ASCN 0014					patement Cor tracting &		nen	tal C	cons	ultin	a. In	C.
Street Address 56 East Bridge Street				-		Street	Addr			<u></u>				5,	
City, State, Zip Code					City, S	tate,	Zip Code NJ 07470		S-171						
Project Manager for Monitoring Firm Mr. James Frisbee	orrisville, PA 19067  oject Manager for Monitoring Firm						one		T	cens	e No				
Start Date (10) 06/26/15	Schedu 07/17/	led Com		92-4200 Date (11)		Name	of OS	SHA Monitor	Iltants						
Occupancy Status During Abatement (C						Street				110.					
			ont					agaraw Ro	d, Blc	1. #3	84A				
Facility Closed/Vacated During Ent Abatement Performed Outside of N Other – Describe: Hours: Mon - Fr	ormal Facilit	y Hours			_	5.55		Zip Code n, NJ 0741	[])						
Scope of Work (Check All That Apply)				_							0				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renovat Demoliti				×	N G	ull Containme fini-Enclosure Blovebag Prod Ion-Exempted	e o::dure						
		. 1		T			1 10	ion-Exemple	a ( ) and	011-1	Habit		144011	ment	
Location of		s Location			Do	scription	of						Ту	ре	
Asbestos-Containing Material (ACM)  TO BE ABATED In Facility (13)	Mi Cus	ed Solel aintenar stodial S (12)	nce/ staff?		os Con therma surfa		lateri s insu T, or			unt cify LF)		Removal	Repair	Encapsulate	Enclosure
04-1	Yes	No	N/A		D' I	A/ II DI				0.5					
Stairwell-Cove Base and Rise	Г		X		PINK	Wall Pl	aste	<b>:</b> Γ	15	SF		X			
Floors 1 thru 4															
Name of Registered Waste Hauler		I N	JDEP W	Vaste	Cubic	Yards		Name of	E agistar	Har	dfill				
J.R. Contracting & Environmenta	l Consul.,	Inc H	auler ID 7819		of Wa			Grand (							
City, State Wayne, New Jersey					Dispo	sal Date	3	City, Stat Pen Arg		ısyl	vani	а			
Completed by Jerry Bijelonic	Title Proje	ect Ma	nager		5	Signature	1	4			Date 6/9	e /15			

CK 2161

Date of Notification (1) June 10, 2015					Building Owner/Gonnections		(2)	26 JU	15	v t.				
Agencies Notified	Type Notification			Street Add	dress vood Avenue	Suite	101	/			C 4			
EPA DEP X DOL	Initial Amended Amendment	#			e, Zip Code ange NJ 070	)17		ê.		1/0	-			
▼ DOH DCA	Emergency (injustification)  Cancellation		1	Name of (					Teleph	ne Num	ber			
DCA DCA	Caricollation				ITY INFORMAT	ION				1			11 =	
Name of Facility Where		Place (3)		TAGIL	THE OTHER		Туре	e of Facility (4)						
Family Connections Street Address	S						H	School (K-12) Subchapter 8		an K-12	)			
48 13th Street							×	Other (i.e. privetc.)	ate & c	nmercia	al build	ings,	nome	s,
City (5) Paterson							Squ	are Feet	# of F	ors	BI	dg. A	ge	
County (6) Passaic	,			County C	ode (7) SE ONLY)		AXXXX	rent Use (Prior cant	f being	emolish	ed)			
Name of Monitoring Firm	n Hired by Building (	Owner (8)	-	ASCM				atement Contr						
Sky Environmental	Services Inc.			00357	767	Be C		truction Cor	oratic	_				
Street Address 140 Boulevard						235	Wate	chung Aven	ie					
City, State, Zip Code Mountain Lakes, N	J 07046							Zip Code ange, NJ 07	)52					
Project Manager for Mo Leonid Shereshevs				Telephon 973-58		Telep 973-		No. 2900	l C	ense N 231	0.			
Start Date (10) June 12, 2015		Scheduled June 15,			Pate (11)			SHA Monitor er Laborator	es Gl	al Inc				
Occupancy Status Durin	ng Abatement (Chec				2		t Addr			-	100			
➤ Facility Closed/Vac	cated During Entire	Period of Ab	aten	nent			ESW. 50 3	Cary Street		_				2
Abatement Perform Other – Describe:	ned Outside of Norm	nal Facility F	Hours	5				Zip Code nd, VA. 2322	0					
Scope of Work (Check	All That Apply)			9229		г					•			
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		1077	nova molif				l N	ull Containmer /lini-Enclosure Blovebag Proce lon-Exempted	dure				9	
		_	_					von-Exempled	) and	JII-FIIaL	JIE FIU	Abate		1
100		100000000000000000000000000000000000000	ocat orma										ре	
Asbestos-Containin TO BE AF In Fac (13	g Material (ACM) BATED sility	Used Main Custo	Sole	ely by nce/ Staff?	Asbestos Co (i.e. therm sur		Mater ns ins AT, or	ulation,	(Sp	int ify LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A						-				
Basen	nent		X			Γ with N				3F	X			
Basen	nent		X		Pip	e Insul	ation	1		F	X			
Name of Registered Wa			4.5	NJDEP W Hauler ID		ic Yards /aste		Name of R		Landfil				
Be Construction Co	orporation			idulei ID		*********		Tullytow		У				
City, State West Orange, NJ 0	7052				Disp	osal Dat	е	City, State Tullytow						
Completed by Barbara Reed		Title Presid	lent			Signatu	re e	acal	Lee	<i>F1</i>	ate 3/11/2	2015		

CK 3720

Date of Notification (5)	10 =			5.000.00-00-00-00-00-00-00-00-00-00-00-00	25			
6	70-13	Mama of	Beering Owner/Open	(2)	/		12 :	_
Agendes Notified	Type No Ecolon	Street Ad	Pine/A	and Censin	evi ion	20	CI	1
		1000	300 7	7th State	et :		G. J.	_
DOL	Amendment (2	City, State	. Zip Code	= /				
Посн	Emegancy (actoring justication)		Sea	Ist Ci	4 11	- 0	8234	
	☐ Cancelation	Name of C	La I Same	THE RESERVE OF THE PARTY OF THE		Marring		-
			FRANK	-	1	1401000	100	1
Name of Facility Where A	becament is Taking Plane (3)	FACELIN	THE CREMATION		die	-		_
	Resident			Type of Feeling		-		-
Street Address 20		7		School (K-1)	2)			
City (5)	- 77th Stable	5		Dindrepter La Other (i.e., p	THE E	(-12) Societi		
SEA ZS	LE City			homes, etc.) Source Feet	S FFor			
County (6)	Ling			3000	1 3	091	Sig. Age.	
L'apre 1	You	COUNTY COM	e(7) (STATE	Conent Use (Pro	n Gb sing de	250	10.	-
Name of Monitoring Form Ha	acidy Building Owner   A	SOM No		ent Consector (9)	<u>Re</u>	den		24
Street Address	THEFT		An	H JOE LL	ri		7 3	-
OBEST VEHICLE			Street Bernen					1
Cây, Stata, Zip Corde			/	212 Bunl 11	21720 1	the	57	5
			City, State, Zp.Co.	学 11	=======================================	=		_
Project Manager for Monitoria	ig Fam   Teleph	one No.	l_ De,	inco no	1 20	375		
			Telephone No.	16 09/1	Lice se No.	270	7)	
Start Date (10) 6-20-45	Schemided Completion	Date (11)	Name of CSHA Mo	- 770 ह	===	270		10000
Company Siets During Abe	6-25-15			Sel.	$\mathcal{L}$			Manual In
Li recent Cosed Version for	TOO Ender Product of the		Street Address					Land
The state of the s	is of Name Parky Hous	T. STATE	Oby, State, Zip Code					der Penting
7. Ontal - Descript.			Oty, 553, 20 Cot	9				Margaria Cons
Scope of Work (Check all that a	क्कान	1						
]≥5 sf cr≥60 ]≥160 sf cr≥600 f	Removalin			trant with Nicoland	Pie sue		j	
			Glassian B	meani—			-	
	siosso	and the same of th		Pan Kur-Fre	र्मिक्ट मारक्यां है ब्येक्ट			
Location of	Namely Used Sciely by	G-Afgr	_	4		Abata	ype ype	
Asbestos-Conteiring Messall ( TO 85 ARATED	ACM) Meintenance/	Ashestos	पञ्चलकात वर्षे पञ्चलकात स्थलका	FACIN A		- 1	1 [	
5V F202y (13)	Star?	ال السي ال	Suiscing, VAT, or	E	peci,	Fig.	Bulgostanianianianianianianianianianianianiania	
, <i>r</i>	(12)	C C	(ar miscelerate)	9	CH ST !	Repair	Enchrecterenter Enchrechen	
All side	YS NO NA	TO STATE OF THE PERSON OF THE	,	1/Breedy	BELLAN	J.	ura	
OUTSIDE	- V	ACK	SIdING	70	00 F	-		
	The state of the s				7			
						11		
me of Registered Waste Hauter	The state of the s			7204		998	- 1	
		feste   Cu	bic Yards   Na	ne of Registered L		9 6		
ANI SEE LLC	3563		10CY W	IN of A	1		a towards	
	CO NJ	Dis	Day Cay	S== // /	-7			
refebbel Shr	i Tea		100	14/4/tie	NIA			
J411	" UP		Signature		Dal : 40 ·	15		
					- 70	2		

<sup>°</sup> Do not use this form for esbestos licensure exempled activities.

Check # 9873 Date of Notification (1) Name of Building Owner / Operator (2) June 10, 2015 Bank of America Agencies Notified Street Address Type Notification EPA 4005 Highway 9 North @ Aldrich Road DEP **DOL** Initial City, State & Zip Code Amended Howell, NJ 07731 ⊠рон Amendment # DCA Cancellation Name of Contact Telephone Number Jim Kalafsky FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Bank of America School (K-12) Street Address Subchapter 8 (Other tha i K-12) 4005 Highway 9 North @ Aldrich Road Other (i.e., private & comme sial buildings, home, etc.) # of Floors Square Feet Bldg. Age City (5) 1,500 60 Howell Current Use (Prior if being de nolishe) Bank County (6) County Code (7) Monmouth USE ONLY Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contract ir (9) Environmental Testing Consultants, LLC Synatech, Inc. Street Address Street Address 413 North Black Horse Pike 829 Radio Road City, State & Zip Code City, State & Zip Code Runnemede, NJ 08078 Little Egg Harbor, NJ 08087 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Howard Zenobi 856-482-1311 609-296-6916 00817 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor June 20, 2015 July 31, 2015 Synatech, Inc. Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 829 Radio Road Abatement Performed Outside of Normal Hours City, State & Zip Code Other - Describe: Little Egg Harbor, NJ 08087 Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with sigative Pressure ≥3 sf or ≥ 50 lf Renovation Mini-Enclosure ≥160 sf or ≥260 lf Demolition Glovebag Procedure Non-Exempted \*) and on-Friable Procedure Location of Is Location Normally Used Description of Abatement Type Asbestos-Containing Material (ACM) Solely by Maintenance or Asbestos-Containing An unt (Specify TO BE ABATED Custodial Staff? (12) Material (ACM) F or LF) (i.e., thermal systems IN Facility Encapsulate (13)insulation, surfacing, VAT Enclosure Remova Repair or other miscellaneous) No N/A Yes Exterior Window Assemblies X ACM Caulk 100 LF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Waste Name of Registered L ndfill Hauler ID No. 27429 Synatech, Inc. Grows Landfi I City, State Disposal Date City, State Little Egg Harbor, NJ 08087 Morrisville, P. August 3, 2015 Completed By Title Signature Date Diane Aloia **Executive Administrator** , 2015 June 1

<b>3</b> 11.5						,		Jun	9 201	5 08:28	1	P(	01/0	01	
			NOTIF (P	CATION	tate of Ne 1 OF ASE 10 NJAC	ESTOS .	ABATEN	ENT	No De	Alf of Hea O	1 & Sel	i di hi	Fris.	<b>州</b> 8	577
Date of Notification (1)	15				of Building			(2)	Date:	19/	Time	8:	2, 6	3	
Agencies Notified Type  □ EPA □ DEP □ A	Notification Initial Amended Amendment			Prince of				sock	190E	-			- 3		ىدر: ( )
■ DOH	mergency (i justification) cancellation			Name o	of Contact	ינאטו	-		~O, ? ~	Telop	ne Nur	riber.		u	r Fi
Name of Facility Where Abatem	ent is Takino	Place (3)		FAC	ILITY INF	ORMATI	ON	The section	1171 //1						
MOZEK Street Address 622 IHACUSUS	mild decree					1-		Type of F  □ Scho □ Subo □ Othe etc.	ol (K-12 hapter 8 r (Le. pri	) Diher ti	n K-12 imercia	) )	dings,	home	ns,
CIGAL STAOT								Square F	eet	# of F	) IS	T	Sløg. 7	77	
County (6) BERULE	of Monitoring Firm Hired by Building Owner (8)				Code (7) USE ONLY	)		Current L	Ise (Prior	being	malish	⊋ď)			
Name of Monitoring Firm Hired i	y Building O	wner (8)		ASC	M No.		Name A, MA	of Abatem	ent Contr ting Inc	tor (9)	***************************************	***************************************			
Street Address						March Annahill State Comm	2	Address reeland Av	re	-					Newwo-
City, State, Zip Code	tate, Zip Code					- Carlot	City, S	tate, Zip Co	ode	-					
Project Manager for Monitoring F	Firm		1	Tolep	hone No.		Teleph	nd Park, N one No.	J 07432	L	nse No	).			
Start Date (10) 6 /9/15	7	Schedul	ed Con	pletion	Date (11)		Name o	262-5841 of OSHA N ga Enviror		- I	2156 C.		-		
Occupancy Status During Abate Izi Facility Closed/Vacated Du Abatement Performed Outs Other - Describe:	ring Entire P	eriod of A	batem	ent			Street 280 H	Address uyer Stres ate, Zip Cansack, NJ	t ode		700 700				
Scope of Work (Check All That	Apply)						7700010			-					_
DE ≥3 Sfor≥3 If D ≥160 Sfor≥250 If		åFR □ D	enovat emolitic				阿阿	Mini-End Gloveba	losure g Procer	i re					
		[á	Locati	oπ	<u> </u>		<u></u>	Non-Exe	mpted (-	) and No	Husole	Prod		ement	
Location of Asbestos-Containing Materia	(ACM)	Use	Vormali d Solel	ly by	Ashes	De tos Con	scription	of laterial (Al		ð 144.4	_	-	Ty	rpe:	
In Facility (13)	,		Intenar todial S (12) No		(l.e.	thermal Stude	systems sing, VAT niscelland	Insulation,	JIVI)	Amic (Spe SF or		Removal	Repair	Епсврывав	Енсылие
BASEMENT				X	est mente	p	IPK		-	8	ZP	×			-
						MALE AND					*************				
	<u> </u>					-mus		***	+		resident de la constantina			-	_
Name of Registered Waste Hauk Newark Carting, Inc	31			JDEP W auler ID 0450s	No.	of Was	Yards te	Na		istered Sethleh	indfill	ill Cor	D.		
Dity, State, Zip Code Newark, NJ 07105	<del></del>			M	****	Dispos	al Pate	Cit	y, State.	p Code	-	UA)DA			
Completed by R. McDonald		ent			1	ignaturs (		Donald		Date 6	1/9	les	_	$\dashv$	

A Emergana

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

CK. 4 10 4

Date of Notification (1) 9/10/15				lame of B Susan D					2015 . [1]	1 1	Ē.t.v	01				
Agencies Notified	Type Notification		S	treet Add	ress						- F RA		9			005000
EPA DEP DOL	Initial Amended Amendment		C	ity, State	, Zip Cod	de	3		e: ./	PF	100	1001				
DOH DCA	Emergency (i justification) Cancellation	ncluding	1000	lame of C Danielle						T	enhone	Numb	er	,		
				FACILI	TY INFO	RMATI	ON									
Name of Facility Where Susan Delouya Priv		Place (3)						Тур	e of Facilit / (4	1)						
Street Address	vate Fiorite					<del></del>			School (F-12 Subchap er		er than I	K-12)				
33 Channel Road								×	Other (i.€. pr				build	ings,	home	as,
City (5)								Squ	etc.) are Feet	#	f Floors		BI	dg. A	ge	
Toms River NJ 087	753							100	00	1			35	5+		
County (6) Ocean				County Co			_		rent Use (i 'rio me	r if I	ing dem	olished	1)			
Name of Monitoring Firm	n Hired by Building C	Owner (8)		ASCM N	No.		Name		nc.	trac	(9)					
Street Address							Street PO E									
City, State, Zip Code							City, S	tate,	Zip Code	01	-					
Project Manager for Mor	nitoring Firm		Тт	elephone	No.		Teleph	2000	rlin NJ 0 309 No.	91	Licens	se No.				
							856-	753-	9800		0072	7				
Start Date (10) 6/11/15		Scheduled 6/15/15	Com	pletion Da	ate (11)		Name		SHA Monifor							
Occupancy Status Durin	ng Abatement (Chec	k Only One)					Street	Addr	ress							
	cated During Entire P ned Outside of Norm			ent -		_	City, S	tate,	Zip Code		-					
Scope of Work (Check A	All That Apply)					<del>}</del>			1.1	_	_					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			novat					N	full Contail me Mini-Enclos ure Blovebag Froc Non-Exemited	edu					9	
		I In I in		_					TOTI EXOTIN TOO		14 (1401)	TIGOLO			ment	1
Locatio	n of	Is Lo Nor	mally	200		De	scription	of						Ту	ре	
Asbestos-Containing		Used S Mainte				tos Con	taining N	/later	ial (ACM)		Amount				т	_
TO BE AE		Custod			(i.e.		l system icing, VA				Specify F or LF)		Ren	Re	nca	incl
(13)		(	12)				miscellar				1 01 11 )		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A									_		ate	e
Exterior	Siding			х		Exte	erior Si	ding			950 SF		ĸ			
								54								
Name of Registered Wa	iste Hauler			JDEP Wa		0.000	Yards		Name of I	Reg	ered Lar	ndfill				
United Containers				auler ID N 2459	10.	of Wa	1812G25		G.R. ).\							
City, State Elm NJ						Dispo 6/15/	sal Date 15		City, 5 tate Morr sv		A 1906	67				
Completed by		Title				1	Signatore	e //	)			Date				
Anthony T Perna		Preside	ent					K		_	<u>ر</u>	6/10	0/15	5		

### NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1)			Name of Build	ling Owner/Open	rator (2)		- 0	7/	0	20	
June 9, 2015					luss, Inc.	FIS	** ,	20	7	50	
	ion Notification ided Notifi	귀가	Street Addres	709 C	edar Lane	_	277 : D				
[x] DOL Amer	dment #_ gency (incl		City, State, Zi	Teane	ck, NJ 07666	હ	Kr.	ruj.	-54	1	
I DCA	cation) ellation		Name of Cont A	act my Lohman		Telepho	e Number				
		FAC	CILITY INFO	RMATION							
Name of Facility Where Abatement is Taking Raven Hill Apartm					Type of Facility (4)	Sch	I (k-12)				
Street Address 82 Walraven Stree	t				[ ] [x]		apter 8 (oth		100	al build	ings,
City	County (	(6)	County Code (	7)	Square feet	hom	, etc.) Floors	Bldg	Age		
1982			(STATE USE		10,000 sf		2			0	
Teaneck	Berger	1			Current Use (Prior Aparti	3.00	emolished)				
Name of Monitoring Firm Hired by Building (	Owner (8)		ASCM No.	Name of	Abatement Contracto	(9)	tuantina	Ima			
N/A Street Address				Street Ad		an Co	tracting,	inc.			
C' 0 7 0 1				0' 0	1889]	Coute	Unit 61				
City, State, Zip Code				City, Sta	te, Zip Code Toms	River.	New Jerse	ev 087	755-13	271	
Project Manager for Monitoring Firm	Т	elephone Number			ne Number 9-9932		License N 00624				
Scheduled Start Date (10) 6/10/15	S	6/16/15	ion Date (11)		OSHA Monitor	Ι Δτ	lytical				
Occupancy Status During Abatement (Check				Street Ad		L. 711	lytical				
[ X ] Facility Closed/Vacated					1056	teltor	Road				
Abatement Performed (	Jutside of	Normal Facility Ho	ours	City, Sta	te, Zip Code		face Table	000	<i>5 1</i>		
					Piscat	iway,	ew Jerse	y 088	54		
Scope of Work (Check all that apply)				[ ] [x]	Full Containmer Encapsulation	with 1	gative Pres	sure			
[ ] >3 sf or ≥3 lf		[X] Renova	ition	[ 1	Glovebag Proce	ure					
[ ] ≥160 sf or ≥260 lf		[ ] Demol	ition	į j	Non-Exempted	*) and 1	n-Friable I	Procedu	re		
		15 Amr		di see se se				Abat	ement	Гуре	
Location of		s Location ormally used		Description Asbestos-Con			mount	R	R	Е	Е
Asbestos-Containing Material (ACM)		Solely by	20	Material (A	ACM)	(S	cify SF	E M	E P	N C	N C
TO BE ABATED in facility	Mainte	nance/Custodial Staff		(i.e., thermal			r LF)	0	A	A	L
(13)		(12)		insulation, su VAT, o				v	I R	P S	S
		10400004000		other miscell				A		U	U R
	YES	NO N/A						L		E	E
Basement 126	X		boiler/bre	eching/pipe						X	
Basement 82	X		boiler/bre	eching/pipe			2			X	
Basement 92	X		boiler/bre	eching/pipe						X	
Name of Registered Waste Hauler	I XII	DED Wests Havele	TDM: OI	- W. J CW	. Di en en	17	ISII				Щ
Guardian Contracting, Inc.	INJ	DEP Waste Hauler		ic Yards of Was	T.R.R.F.	ered La					
City, State Toms River, New Jersey		Dispo	sal Date	City, St Tullvt	own, Pennsylvan	a	,				
Completed by (Print or Type)	Title		Signature	\ \ \	11//1		1	Date			
Nicholas Fernicola	Project	t Manager		YICC	los t		_	6/9/	2015		

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

### NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1)					Name of B	uilding O			3 .	1 <del>2.00.00.00.00.00.00.00.00.00.00.00.00.00</del>	01	9	>-	1
W <sup>20</sup>	June 9, 2015						Towns	hip of Warren	<u> </u>		26	1	5 /	
Agencies Notified  [ X ] EPA  [ ] DEP		ion Notificat			Street Add		775577777	untain Blvd.	ei) Jin	†5 f <sub>j</sub> ja	1: [	2		
[x] DOL	Amer	ndment #_ gency (inc			City, State,	, Zip Cod		n, NJ 07059	£ [ ]	1 day	110	Ĺ		
DCA	justifi	ication)		l	Name of C	Contact				e Number	-			
. ,	[ ] Cance	ellation				Doug I	Buro							
				FAC	ILITY IN	FORM	ATION							
Name of Facility Where Al		Place (3)	8					Type of Facility						
Co	dington House							L	<u>-</u>	l (k-12) apter 8 (oth	her than	k-12)		
Street Address	Mt. Horeb Roa	d						[ x	] Oth	(i.e., privat			al build	ings,
City		County	(6)	8	County Cod		,	Square feet		Floors	Bldg	. Age		
XV		Como			(STATE US	SE ONLY	)	1500 sf Current Use (Pr	ior if being	2 emolished)		8	0	
warren		Some	rset					222	mer Res					
	Guardian Contracting, Inc. eet Address 1889 Rte. 9, Unit 61						Name of	Abatement Contra	ctr (9)					
	Guardian Contracting, Inc. eet Address 1889 Rte. 9, Unit 61						Street Ad		irc ian Co	tracting,	Inc.			
	Guardian Contracting, Inc.						Street Ad		9 Route	, Unit 61				
City, State, Zip Code	Guardian Contracting, Inc.						City, Stat	e, Zip Code			9000000		steronero	
			T 1 - 1 N				T-11		ns River	New Jers License N		755-1	271	
	Guardian Contracting, Inc.						732-34	e Number 9-9932		00624	umber			
Scheduled Start Date (10)	Nicholas Fernicola         732-349-99           reduled Start Date (10)         Scheduled Cor           6/9/15         6/10/15							OSHA Monitor	1. <mark>:</mark> .L. Aı	5 6 2				
Occupancy Status During	Diect Manager for Monitoring Firm Nicholas Fernicola  Nicholas Fernicola  Nicholas Fernicola  Nocheduled Start Date (10)  6/9/15  Scheduled Cor  6/9/15  Scheduled Cor  6/10/15  Scheduled Cor  6/10/15						Street Ad	ldress						
1 1	ame of Monitoring Firm Hired by Building Owner (8)  Guardian Contracting, Inc.  reet Address  1889 Rte. 9, Unit 61  ty, State, Zip Code  Toms River, NJ 08755  oject Manager for Monitoring Firm Nicholas Fernicola  theduled Start Date (10) Scheduled Company Status During Abatement (Check only one)  [x] Facility Closed/Vacated During Entire Period of [a] Abatement Performed Outside of Normal Facility Closed (Check all that apply)  [x] >3 sf or ≥3 lf  [x] R							105	6 Stelto	Road				
		Outside o	i Normai Fac	uity Ho	urs		City, Stat	te, Zip Code Piso	ca away,	lew Jerse	y 088	54		
Scope of Work (Check all	that apply)						[ ]	Full Contains	ne it with	gative Pres	ssure			
							ĺ							
1 5 5			12	Renova			[x]							
[ ] ≥16	0 sf or ≥260 lf		[ ]	Demolit	ion		l J	Non-Exempt	ed (*) and	on-Friable	Procedu	ire		
			71								Abat	ement	Туре	
			Is Location		1		Descriptio				R	R	E	Е
Location Asbestos-Containing N	07.00	N	ormally use Solely by	ed			estos-Cor laterial (A	•	(5	mount ecify SF	Е	E	N	N
TO BE ABA		Maint	enance/Cus	stodial			, thermal	· ·	(	or LF)	M	P A	CA	C
in facilit	У		Staff			insu	lation, su			70	0	I	P	0
(13)			(12)			oth	VAT, o		10		V	R	S	S
		YES	NO	N/A		Oth	er miscem	aneous)			A L		L	R
Description		120		1.772				200		C			Е	Е
Basement			X		Asbest	os pipe	insulatio	n	30	f	X		-	-
72		-									-		-	
					-					-	+		-	-
Name of Registered Waste	Hauler	l N	JDEP Waste	Hauler	ID No.	Cubic Ya	rds of Was	te Name of Re	gi tered L	dfill	1			
Guardian Co	ontracting, Inc.			223		2		T.R.R.I						
City, State	, New Jersey				al Date		City, St		orio					
Completed by (Print or Ty		Title		6/11/	Signatur	e ^	1 unyt	own, Pennsylv	ar la	-	Date			
Nicholas Fer			ct Manage	r	- g.m.ui	1	ich	Y+x			7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	2015		
		* <i>L</i>	o not use ti	his forn	n for asbes	tos licen	sure exen	pted activities.					7.77.7	

### NOTIFICATION OF ASBESTOS ABATEMENT

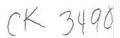
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1)			Name	of Building	Owner/Oper	rator (2)	_		•	5 5	-1 -	/
June 9, 2	)15			87.8	Merce	r Management	eps-		2	6.	73,	1
Agencies Notified Type of Notified Type	tification Initial Notific Amended No		337,867,763	Address	5,000,07,27,07,0	S. Broad Street	2 E TU (	M 15	File	1: 12	<b>.</b>	
[x] DOL [x]	Amendment Emergency (	#	City,	State, Zip Co		ille, NJ 08620	2	Mirg.		6.27		
[ ] DCA [ ]	justification) Cancellation		Name	of Contact John	Oliver		Telepho	Number	= 4_5			
	-	F	ACILITY	YINFORM	ATION	•						
Name of Facility Where Abatement is 7	aking Place (		ACILIT	I IIVI OICIV	MITON	Type of Facility	(4)					
Building	į, į,					[	200	(k-12)				
Street Address						] [		ipter 8 (oth				
650 Strawber	y Street					[x	] Othe hom	(i.e., privat , etc.)	e & cor	nmerci	al build	ings,
City	Cour	nty (6)		y Code (7) TE USE ONL	.Y)	Square feet 6,000 sf	# 0	loors	Bldg	. Age	0	
Trenton	Me	rcer				Current Use (Pr	ior f being	molished)				
	me of Monitoring Firm Hired by Building Owner (8)  N/A  reet Address  ry, State, Zip Code					Abatement Contra	cto (9)	tracting,	Inc			
Street Address	-				Street Ad		iid all CC	u acting,	me.			
							9 Loute	Unit 61				
City, State, Zip Code					1.00		ns River,	lew Jers		755-12	271	
Project Manager for Monitoring Firm		Telephone Num	iber			ne Number 9-9932		License N 00624	umber			
Scheduled Start Date (10) 6/9/15		Scheduled Com 6/19/15	pletion Date	e (11)	Name of	OSHA Monitor E.N	1.S L. Ar	lytical				
1 7 7	acated Durin	ng Entire Period of			Street A	ddress	6 ! teltor				0	
Abatement Perfo		e of Normal Facilit	y Hours		City, Sta	te, Zip Code Pise	cat iway,	ew Jerse	y 088	54		
Scope of Work (Check all that apply)					[ ]	Full Contains Mini-Enclose		gative Pres	sure		11	
[ ] >3 sf or ≥3 lf		L 3	novation		[ ]	Glovebag Pro	oce ure	n-Friable	Procedu	ırê		
[ X ] ≥160 sf or ≥260	I	[x] De	montion		[ ^ ]	Non-Exempt	ed ( ) and	m-i Habie i	,			
									Abat	ement	Гуре	
Location of Asbestos-Containing Material (A		Is Location Normally used Solely by	J: 1		Description bestor-Communication best of the communication best of the	ntaining ACM)	(S	nount cify SF r LF)	R E M	R' E P	E N C	E N C
TO BE ABATED in facility	Ma	intenance/Custo Staff	diai		e., thermal sulation, su			(LL)	0	A I	A P	L
(13)		(12)			VAT,	or			V	R	S	S
				ot	her miscell	aneous)			A		U L	U R
	YE	S NO N	/A						L		E	E
Exterior		X	As	bestos roo	fing		63	5	X			
									-	-	-	-
				upo - s					-	-	-	-
Name of Registered Waste Hauler		NJDEP Waste H	auler ID No	. Cubic Y	ards of Was	ste Name of Re	egis ered La	ifill	1			
Guardian Contracting	Inc.	2022	23	15		T.R.R.		Section -				
City, State Toms River, New Jers		10000	oisposal Dat 1/22/15	е	City, S Tully	tate town, Pennsylv	an a	7				
Completed by (Print or Type)	Title	:		nature	. 1	11	A		Date	/2015		*
Nicholas Fernicola	7.00	ject Manager	Form for	anhantas li-	1. Ch-	unted activities			0/9/	2013		
		*Do not use this	jorm for a	isdestos lice	insure exer	прива аспушеs.						

CK 2674

### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

		N			OF ASBE		ABATEME d 12:120)	ENT		Service Comments	* • •		390		
Date of Notification (1) 6/10/15					Building (		Operator (2	2)	28	ti JUK	15		· ·		
Agencies Notified	Type Notification			Street A					,	WELL.	10 1	M I	: ((		
× DEP × DOL	initial Amended Amendment	#			te, Zip Co ng Ridge		7920		***	& LI	ENS	THE	KÜL	i i	
× DOH	Emergency justification)			The street of the street	Contact	•				Telen	ine Nui	mber			
DCA	Cancellation			Howar	d						+ 111				
Name of Facility \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	A street in Table	- Dlass (2)	\	FACI	LITY INFO	RMATI		Tunn	of Facility /	<u></u>					
Name of Facility Where A vacated house	Abatement is Takir	ig Place (3	)				1	_	of Facility (						
Street Address								_	School (K-1 Subchapter		an K-1	2)			
57 Dogwood Lane							Ė	<b>×</b>	Other (i.e. p				dings,	home	es,
City (5)		1,							etc.) e Feet	# of F	ors	В	ldg. A	ge	
Berkley Heights								1800	)	1		6	0+		
County (6) Union		<b>\$</b> 9		County (	Code (7) USE ONLY)		1		nt Use (Pri- ated hous		emolis	ned)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	l No.				tement Cor		1				
Street Address				1			Street A		se Road	1					
City, State, Zip Code							City, Sta	0.110.50					-		
		1 10					100000000000000000000000000000000000000		k, N.J. 07	7722					
Project Manager for Mon	itoring Firm			Telepho	ne No.		Telepho 732-29			1	ense N	lo.	1		
Start Date (10) 6/19/15		Schedule 6/24/15		npletion I	Date (11)	it .	Name of	f OSF	IA Monitor		-				ŧ
Occupancy Status During	g Abatement (Che	ck Only On	ne)	0 1		A) 7.620	Street A	ddres	SS	_	-				
Facility Closed/Vaca Abatement Perform Other – Describe: 7	ed Outside of Norr						City, Sta	ite, Zi	p Code						
Scope of Work (Check A ≥3 sf or ≥3 lf	II That Apply)	× R	Renova	ition				Full	I Containm	er t with N	gative I	Pressu	re		
≥160 sf or ≥260 lf			emolit	ion			×	Glo	i-Enclosure vebag Prod n-Exempted	ce dure	on-Friat	ole Pro	cedur	e	
		Is	Locati	ion		2000		1000000						ement	
Location Asbestos-Containing TO BE ABA	Material (ACM)	Use Ma	Normal d Sole intena	lly ely by nce/		tos Con	escription of taining Ma I systems i	terial		Am (Sp		Re		rpe Enc	E
In Facili (13)	ity	Cusi	(12)	olali !			cing, VAT, miscellane			SF c	LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A								-		te	Œ
kitche	n			х		li	inoleum			15	sf	x			
												1			
- 3* p															
Name of Registered Was Ace Insulation Co., I		Tas for	. H	IJDEP W lauler ID 2086		of Wa	: Yards iste	4	Name of Chrins	Registere	Landfil				
City, State Colts Neck, New Jer	sev				(8.11		sal Date	1	City, Stat		<del>- 10-10,</del>				
Completed by Bree McGuire		Title Secre		Treasu	ırer		Signature			***	133333	ate /10/1	5		



### State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

	/[10	NOT		State of Ne TON OF ASE ant to NJAC	ESTOS	ABATE									
Date of Notification (1) 06/10/15				ne of Building E REDZIN		Operator	(2)	28	ti Ji	M	5 A	M 1	: i	)	
Agencies Notified	Type Notification			et Address 1 KNOLL C	CREST	AVEN	UE	at y	o E i	11	3,00	13 1	Rai	-	
EPA DEP X DOL	Initial Amended Amendment			, State, Zip C ICK, NJ 08						-11-	76.57	40	101		
X DOH DCA	Emergency justification)  Cancellation	•	Nan	ne of Contact E					Tele	enh	e Num	ber			
			F	ACILITY INF	ORMAT	ION									
Name of Facility Where	Abatement is Takin	g Place (3)						of Facility (4 School (K-12 Subchapter 8	!) 3 <mark>(</mark> )the					<b>1</b> .000000000	
191 KNOLL CREST	T AVENUE	•					1	Other (i.e. pr etc.)	iv te à	s cc	mercia	build	lings,	nome	es,
City (5) BRICK, NJ				4				e Feet	# of 2	Flo	rs	В	ldg. A	ge	
County (6) OCEAN COUNTY				inty Code (7) ATE USE ONL	Y)		Curre	nt Use (Prio 1E	ri bei	ng (	molishe	ed)			
Name of Monitoring Firm	Hired by Building	Owner (8)	A	SCM No.				PROFES			S				
Street Address						100000000000000000000000000000000000000	Addres	s DOVE CO	URT		-				
City, State, Zip Code								p Code DD, NJ 08	37 )1						
Project Manager for Mor	nitoring Firm		Tele	ephone No.			none No 668-9			Li 1;	nse No				
Start Date (10) 06/21/15		Scheduled 06/21/15	Comple	tion Date (11	)	17.33.55.65.55.77		A Monitor PROFES	SSIO	NA	S				
Occupancy Status Durin	S // //						Addres	SS DOVE CO	LRT		-				
Facility Closed/Vac Abatement Perform Other – Describe:	ned Outside of Norr	nal Facility H	ours			2000		ip Code OD, NJ 08	 37						
Scope of Work (Check A	All That Apply)									7		7. 11.7			
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	1, 2,	and the second s	ovation nolition				Mir	I Containme ni-Enclosure ovebag Proc		n N€	ative Pr	essu	re		
-		•				Ė		n-Exempted		d N	1-Friabl	e Pro	cedur	е	
	E		cation											ement /pe	t
Asbestos-Containing TO BE AB In Faci (13)	Material (ACM) ATED lity	Used 5 Mainte Custod	Solely benancealial Staff	/ ASDE	estos Cor e. therma surfa		Material is insula AT, or		(5	Spe F or	fy	Remova	Repair	Encapsulate	Enclosure
		Yes	No I	W/A								1 622		te	L.
2ND FLOOR B	ATHROOM				Р	LASTE	R		2	00	F	Х			
										_					
		-	-						_	_	-				
Name of Registered Wa	ste Hauler		NJDI	EP Waste	Cubi	c Yards		Name of F	Re giste	erec	.andfill				1
NEWARK CARTING			The second second	er ID No.	of Wa	aste ARDS		IESI							
City, State NEWARK, NJ					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	osal Date 1/15	9	City, State		И F	A				
Completed by JOSEPH PERLSTE	IN	Title OWNE	R			Signatur	е	19			Da:	te /10/	15		

314	IL OI NL	. WW JL	NOLI D	LEAKTMEN	VI OI I	LADOR N	OTIFICATION	OF ASSE	1037	16)	el t	+ /	1/30	25
Date of Notification (1)						Name of	Building Owner	/Operator (2)		in	101/1	-		
06/08/2015						506	efferson St.	LLC						
Agencies Notified	Type of N	Votifica	ation			Street A	ddress							
( V ) ED 4	/ > / >					1125	Maxwell Lr	n. Apt 304	· _2P	220				
(X)EPA			otification	on			te, Zip Code	7 1		7.12	15			
(X)NJDEP		mend									V	H.		
(X) NJ DOL			ment#			Hobo	ken, NJ 070	30	\$1.7 y				-0	
(X) DOH			ency (incation)	cluaing		Name of			2		el. Nur	nber		
( ) DCA			ation)			Dana	Spalding			*				
	( ) 08	incen	ation	F	ACILITY	Y INFORM	ATION					0.5		
Name of Facility Where At	patement is	Takin	g Place (	3)			acility (4)							
Residential Propert	У						ool (K-12)							
Street Address							chapter 8 (oth							
506 Jefferson St., N	JJ 07030	)				(X) Oth	er (i.e. private	& commerc	li l blag	, nor	mes, e	ic.		
City (5)	To	ounty	(6)	County Cod	le (7)	Sa Foot	5,000	# of Floor	. 1		Blda	Age 6	0	
				(State Use 0		5q. 1 eet.	0,000	# 01 1 10013	- 1		blug.	Age O	0	
Hoboken	F	Hudso	on			Current	Use (prior if be	eing demoli	slied): r	staur	ant			
Name of Monitoring Firm H	Hired by Blo	dg. Ow	/ner (8)	ASCM No.		Name of	Contractor (9)			_				
N/A	A N/A													
Street Address	reet Address													
N/A						3300 F	Iudson Ave	nue						
City, State, Zip Code						100	e, ZipCode							
N/A							City, NJ							
Project Manager for Monito	oring	Tele	phone Nu	ımber			e Number						Number	
Firm N/A		2 /2				(201)3	25-0055				0	1124		
Scheduled Start Date (10)		Sche	eduled Co	mpletion Date	(11)	Name of	OSHA Monitor							
06/18/2015		100	24/201		2 (11)	ISES, Ir								
Occupancy Status During	Abatement	121/03/03/03				Street Ac								
( ) Facility Closed/Vaca	ted During	Entire	Period of	Abatement			Iudson Ave	nue						
( ) Abatement Performe									_					
( X ) Other - Describe: U	moccupied	abanc	doned but	lamg			e, Zip Code	007						
Source of Work (Check all	that apply		/ V	) Demolition		Umon	City, NJ 07 ) Renovation	087		-				
Source of Work (Check all	that apply)	_	( ^	) Demondon		(	) Renovation							
( ) Minor Project (<						(	) Full Contain	nment with I	<b>V</b> ∍gativ	Pres	sure			
( ) Small Project ( >2	25 <160 S	F or	>10 <260	LF ACM)		(	) Mini-Enclo							
(X) Large Project (>1	160 SF or	> 260	) LF ACN	Л		( )	) Glovebag F		N					
Location of Asbestos-Cont	taining Mat	erial	ls I ocati	ion Normally			) Non-Exemple pription of ACM	oted (*) and	Amo				ent Type	
(ACM)	talling wat	Cilai		Solely by	(i.e. t	thermal sys	tems insulation,	surfacing,	(Specif			Datellie	int Type	
To be Abated in Fac	cility (13)			enance or		VAT, or o	ther miscellaned	ous.)	or L	7.			ш	m
			Custodia	al Staff? (12)		*					Remova	Re	Encapsulate	Enclosure
			YES	NO N/A							YOU	Repair	suli	nso
											<u>a</u>		ate	Ге
Roof main surface and	side flashi	ina	Х		Roofs	surface			- 800 L	T	X			
	ame of Reg. Waste Hauler NJDEP Waste							of Waste	Vame	_	Landfil			
Atlas Disposal Opti	tlas Disposal Options, Inc. 50452								Grand	Cen	tral Sa	anitatio	on	
	100 Pro 100 Pr								1963	en A	Argyl F	Road		
City, State	A PARTICLE PROPERTY OF THE PARTY OF THE PART								Dity, St		D 4 4 0	070		
		ver, N	<u> </u>	1		9/2/015	11	$\rightarrow$	Pen A	Эλі'	PA 18	0/2		
Completed by (Print or Typ	oe)		Title		Signat	ture	-///	)	Date					
David Camacho			Projec	t	1	to 10	1 MAX	/	)6/08	201	5			
			Superv		1	100	MILING							
			- apor		1/	vc			_					

CK1197

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

Data of Matification (1)			- 1	Nama of	Duilding C	hunori	Operator (2)		_						
Date of Notification (1)				Name of Building Owner/Operator (2)										77	
JUNEIBTH 2015				MIKE BESINA						000	77.44.			-	
Agencies Notified Type Notification				Street Address 356 NORTH AVE.						م لا يولا ي		: =			
☐ EPA ✓ Initia	al		L							-				1:25	
	ended			City, Sta	te, Zip Coo	de	4 4 4			2.5		-5			
	endment #		-	13	AMSE	FY,	NJ	0744	6	ć.				1.0	
	ergency (in fication)	iciuaing		Name of	Contact	-			Telep	one Nun	nber				
DEP DOL Amended Amendment # City, State, Zip Code BAMS EY, NJ 07446  DOH DOH DCA Cancellation Cancellation Cancellation City, State, Zip Code BAMS EY, NJ 07446  Name of Contact Tele													- 1	1	
					LITY INFO	-			-						
Name of Facility Where Abatement	is Taking	Place (3	)				Ту	pe of Facility (	4)						
HOME								School (K-1	2)						
Street Address						-		Subchapter	8 (Other	an K-12	2)			1	
356 NORTH AVE.					Other (i.e. pri					mmercial buildings, homes,					
	HA	VE .		- // - / -				etc.)							
City (5) Square Feet # of										/					
RAMSEY, NJ 07					446			327/ Current Use (Prior f being			21/2 1929 - 86YK				
County (6)					Code (7)		Current Use (Prior f being			lemolished)					
VERGAN COUNTY					USE ONLY)			2	45ME						
Name of Monitoring Firm Hired by Building Owner (8)					No.		Name of A	Abatement Cor	ntr ictor (9	-	Tigar.				
λ				14	3		GOLD COAST ABATE			DENT & DEMA					
DIVINE ENVIRONMENTAL Street Address							Street Address			MENT & DEATO					
358 B.	10.1/						25	Inlast							
358 BROADWAY 25									4000	18178					
City, State, Zip Code											~/				
NEWARK, NJ 07104 Project Manager for Monitoring Firm								WEEHAWKEN, NJ Telephone No.			67086				
					Telephone No.			The state of the s							
NKIRUKA ONWUKAIFE Start Date (10)   Scheduled Co					973.483.340D			201-820-030:2			01254				
Start Date (10)		Schedule	d Con	pletion	Date (11)		Name of 0	OSHA Monitor				1.7			
JUNE 20TH 2015	75	JUN	E	HTAN	2015	a .	ERI	CK BENI	SILDE	>					
Occupancy Status During Abateme	nt (Check	Only On	e)	ang tit	2010		Street Add	dress	1110						
2 - 274 5775									STRE						
									-1						
Other – Describe:								City, State, Zip Code  UNION CT			T 07-07				
							UN	ION (IT	>	٠, ٠	0	+0	07		
Scope of Work (Check All That App	ily)						-								
≥3 sf or ≥3 lf							Full Containmen; with N			gative Pressure					
00000							Glovebag Proce jure Non-Exempted (*) and			pp-Friable Procedure					
						TVON Exemples 1 / and			Abatement						
		10000	Locati							Type					
Location of Used So Maintel				olely by Asbestos							-	T			
										ınt	- 71		E	т	
TO BE ABATED In Facility		Cust	odial S	Staff?	(1.6.		acing, VAT, o	SF c	ify LF)	lem	Re	сар	nck		
(13) (13)							miscellaneous)		01 (	/	Remova	Repair	Encapsulate	Enclosure	
		V	Me	NI/A							<u>m</u>		ate	Э	
		Yes	No	N/A											
BASEMENT			X		P	IPE	INSUL	ATION	1:		X				
3,1001			-				-11-74				1				
									_		-	-			
Name of Registered Waste Hauler					NJDEP Waste Cubic			Yards Name of Register			Landfill				
Name of Registered Waste Flauler				Hauler ID No. of V			laste			12 12 12 12 12 12 12 12 12 12 12 12 12 1					
ATLANTIC CAR	TING			#260			10	GRANU	S CEN	RAI	PAN	1700	1/	ANDE	
City, State						Disp	osal Date	City, Stat	e	- Figuret 6			, ,	.140	
1141 ROUTE.	23	la lave	_	VITA	AUD A	6	21/2013	19/2	Fru L	61	DA	10	< Z	3	
Completed by		Title	C 1	AO C	77770	4/	Signature	11901	CHI	100	te	100	170	-	
De la					IDENT SIGNALLIE					RAL SANITARY LANDFILL  64 PA 18672  Date  JUMPETH 2015					
ANTHONY MANDE	5/	1 A	ES/	OEN.	/		1 Att	TIL			UEG	6.11	001	7	

THE TOTAL