





Date of Notification (1) 5/30/2014		11-9	Name of Building Owner/Operator (2) NEW JERSEY TRANSIT													
Agencies Notified	Type Notification Initial			Street Ad		LAZA E	AST		291	¶ JU	N 16	PI	1 2	35		
EPA DEP DOL	Amended Amendment	#	1 88		te, Zip Co RK, NJ				5 3	8 E S			175 200	no!		
☑ DOH DCA	justification) Cancellation				Contact AL GITT	ΓENS			7.7	Tel	ephore!	NI ALL			· ,	
				FACIL	LITY INFO	ORMATIC	NC									
Name of Facility Where A BLOCK 144 DEVE			ING	iS)					of Facility (4 School (K-12	!)						
Street Address 77 WEST 18TH ST	REET				×			X	Subchapter 8 Other (i.e. pr etc.)		& commercial buildings, homes,					
City (5) WEEHAWKEN			16					Squa	re Feet	# 0	f Floors		В	ldg. A	ge	
County (6) HUDSON					Code (7) ISE ONLY)	_	Curre	ent Use (Prior	r if bei	ng demo	olishe	ed)			
Name of Monitoring Firm TTI ENVIRONMEN	360	Owner (8)		ASCM	No.			of Abatement Contractor (9) BROTHERS CONTRACTING, INC.								
Street Address 1253 N. CHURCH S	STREET							et Address O RUTHERFORD BLVD.								
City, State, Zip Code MOORESTOWN, N	J 08057				-			ity, State, Zip Code CLIFTON, NJ 07014								
Project Manager for Mon	roject Manager for Monitoring Firm						A.	one N			Licens 0049					
Start Date (10) 6/11/2014		Com						HA Monitor (9) ABOV	/E	<u> </u>	T			18		
Occupancy Status During	Abatement (Chec	k Only One)						Addres				+				
Facility Closed/Vaca Abatement Perform Other – Describe:	ated During Entire F ed Outside of Norm	Period of Aba	atem	ent		_			ip Code			+				
Scope of Work (Check A	II That Apply)								-			-				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	, , , , , , , , , , , , , , , , , , , ,	-	novation P					Mir Glo	I Containmer ni-Enclosure ovebag Proce n-Exempted	edure					e	
		0.58	catio							. /				Abate		
Location Asbestos-Containing TO BE AB/ In Facili (13)	Material (ACM) ATED	Used S Maint Custod	Solel) enan	by ce/		tos Conta thermal s	systems ing, VA	laterial s insula T, or		(5	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
SEE ATTA	CHED	Yes I	No	N/A											te	
JLL ATTA	CITED					7			×							
Name of Registered Was	to Hauler		NI I	DEP Wa	aeto	Cubic Y	/arde	rds Name of Registered Landfill								
TWO BROTHERS C			Hauler ID No. of Waste 18743 100+/-				te	e MANACEMENT C D O M S					3.			
City, State CLIFTON, NJ		the opposite two sources	Disposal Date 7/2/2014				Date City, State MORRISVILLE, PA									
Completed by VIVECA RAMOS	СТ	CT COORDINATOR Signature					Ure Date 5/30/2014									

Block 144 Development LLC, Hoboken and Weehawken, New Jersey

144 Concrete/Block Building

Location	Material	Estimated Quantity
Concrete Block Building Warehouse N.E. Area	Roll-up Garage Door Frame Caulking	60 LF
Concrete Block Building Perimeter	Weatherproofing Felt and/or Mastic Material Between the Facade and Interior Walls	8,680 SF
Concrete Block Building	Below Grade Weatherproofing Felt and/or Mastic Material	3,310 SF
Concrete Block Building	Built-up Roofing Material	3,093 SF
Concrete Block Building	Roof Flashing Insulation	217 SF
Concrete Block Building	Fire Door Insulation	2 Ea. or 42 SF
Concrete Block Building Throughout	Electrical Wiring Insulation	To be determined

Concrete Block Building Throughout	Electrical Panels	. 8 SF
Concrete Block Building Throughout	Pipe and Pipe Fitting Insulation	To be determined
Concrete Block Building	Skylight Caulking	160 LF

144 Metal Corrugated Bldg.

Location	Material	Estimated Quantity
Corrugated Metal Building (2)	Fire Door Insulation	2 Ea. or 42 SF
Corrugated Metal Building	Roof Flashing	30 SF
Corrugated Metal Building Throughout	Electrical Wiring Insulation	To be determined
Corrugated Metal Building Throughout	Electrical Panels	8SF
Corrugated Metal Building	Built-up Roofing Material	2,970 SF

Carmine Franco Building

Location	Material	Estimated Quantity
Corrugated Metal Building Throughout Rooftop	Sheet Metal Roof Caulking Sealant	120 SF

NO CK

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



10

Date of Notification (1) 6 /	10	/ 14	1		Name of Building Owner/Operator (2) GLM at Comstock, LLC 2014 JUN 16 PH 2: 5									
Agencies Notified EPA DOLWD	Type N ☐ Initia				1260	Address Stelton tate, Zip C	The source of the second secon		ASBEST	e C ENG	OMI TNG	R()	•	
☑ DOH	1	endment #		6	[44] STA		IJ 08854		*_4.*				11	
□ DCA	1000000	ergency (i	ncluding		100000000000000000000000000000000000000	of Contact			Telephone Numb	er	-			
(NJAC 5:23-8)	10	ification)				Partick I				p	23			
	L Car	TOCHALIOT:							L'			-		
			Di	(0)	FAU	ILITIN	FORMATION	Type of Facility ((4)					
Name of Facility Where	Abateme	nt is Takir	ig Place	(3)				·						
Vacant Strip Mall					-			2) 8 (Other than K-12)						
Street Address 350 Comstock Stre	eet							Other (i.e., pr homes, etc.)	private and commercial buildings,					
City (5)				_				Square Feet	# of Floors	Bldg. Age				
New Brunswick								~ 15,000	1	50 years				
County (6)					Coun	ty Code (7)(STATE USE ONLY)		or if being demolis	hed)	-		- 1	
Middlesex					Journ	iy code (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Vacant Strip						
Name of Monitoring Firm	Hirod b	y Building	Owner	8)	ASCM I	No	Name of Abateme				-	-		
EHS Environmenta		y building	Owner	0)	ACCIVIT	140.	ATC Constru	2015			ě.			
Street Address	21, 1116						Street Address						-	
411 South Court, S	uito E							ay Avenue. Un	nit 2					
City, State, Zip Code	one L						City, State, Zip C							
Mickleton, NJ 0805	6						F 3570	ork, NJ 07093						
Project Manager for Mon		rm		Tele	phone I	No.	Telephone No.		License No.		7.17	1177		
Jack Carney	coming i			(9) (0)	56-224		201-293-2368	3	01210					
Start Date (10)		Sche	eduled C	lamo	tion Dai	te (11)	Name of OSHA N	Monitor						
05 / 28 /	14	1,000,000,000,000	06 /				ATC Constru	ction, LLC						
Occupancy Status Durin							Street Address					1		
☐ Facility Closed/Vacate					ment		6012 Broadw	ay Avenue						
☐ Abatement Performed	d Outside	e of Norma	al Facilit	y Hou	rs - Des	cribe	City, State, Zip C							
Time of Abatement:	AI	VIF	PM/	_PM		AM		ork, NJ 07093						
Scope of Work (Check a	III that ap	ply)		1007			☐ Full Con	tainment with Ne	gative Pressure					
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf			house of the	noval moliti			☐ Mini-End ☐ Gloveba	closure ig Procedure	on-Friable Procedu	re				
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Locatior Asbestos-Containing TO BE AB IN Faci (13)	Materia ATED lity	I (ACM)	Use	Norma ed Sol ainten	ally ely by ance/ Staff?		Description of estos Containing Manager, thermal systems surfacing, VAT other miscelland	aterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure	
	-984		Yes	No						-	_	_	-	
Awing and Sing Cra	gters				\boxtimes	Firedoo	or		20 sf		Ш	Ш		
Radical Cosmetics						Tar Pat	tch over drywall		4 sf					
Radical Cosmetics			M	Roofin	g Material		4,280 sf							
Furniture Warehouse						Parape	t Flashing		240 sf					
Name of Registered Wa Rovic Disposal	Rovic Disposal Hauler						P Waste Cubic Yards of Name of Registered Landfill Tullytown Resource Recovery 40 Cubic							
City, State Riverdale, New Je	rsev						Disposal Date 07/2014	City, State Tullytewn	, PA					
Completed By (Print or Type) Eric B Jeter Title PM							Signature	BO-6	D	ate	0.	4		
ACP 41							11-00	KIN		· ·				

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Date of Notification (1)					Name o	of Building	Owner/Operator (2	2)					h-6	المسالة
06/06	/	14			Merc	k Sharp	and Dohme Co	rporation	201	4 JIJN	12			
Agencies Notified Typ	e Notif	ication			Street A	Address					. 0	í	17 6	?: 3
☑ EPA ☐ I	nitial				2000	Gallopi	ng Hill Road		, i i .	11				
[1] [1] [1] [2] [2] [2] [3] [3] [4] [4] [4] [4] [4] [4] [4] [4] [4] [4	Amend				City, St	ate, Zip C	ode			& LIC	1	1,7	113	7.1.
		ment # <u>1</u>			Keni	ilworth.	NJ 07033			er LIL	LI	451	NG	
	Emerge justifica	ency (inc	luding	ŀ		of Contact		N - 1111 - 1111	Telephone N		_			\neg
	Cancel			4	67734555	Latroni				•				
	Janoer	ation			100000000						_	-	-	-
				(0)	FAC	ILITY IN	FORMATION	T	41		_			
Name of Facility Where Abate	ment is	s laking	Place	(3)				Type of Facility (
Building 5								☐ School (K-12) ☐ Subchapter 8		-12)				
Street Address								Other (i.e., pr			ouilo	dings	,	
2000 Galloping Hill Roa	d							homes, etc.)						
City (5)							20000000000	Square Feet	# of Floors	E	3ldg	. Ag	е	
Kenilworth								115000	4	4	46	3		
County (6)					Count	ty Code (7)	(STATE USE ONLY)	Current Use (Pri	or if being dem	nolished)				-
Union								Vacant	_					
Name of Monitoring Firm Hire	d by Ri	ilding O	wner (8)	ASCM I	Vo.	Name of Abateme	ent Contractor (9)				_		- 7
5		unung C	wilei (TOOM	10.		mental Manage	ment Inc					
Atlantic Environmental	, inc						Street Address	- manage	mieric, mo.					_
Street Address														
2 E. Blackwell Street				-0.00			8436 Enterpr							
City, State, Zip Code							City, State, Zip C							
Dover, NJ 07801							Philadelphia							
Project Manager for Monitorin	g Firm			Tele	phone I	No.	Telephone No.		License No).				
Ray Pirnat				97	3-366-	4660	215-365-5810)	1156					
Start Date (10)		Sched	uled C	omple	tion Dat	te (11)	Name of OSHA N	Monitor						
6/ / 23 / 1/	4	1 7	7 /	31	1	14	USA Environ	mental Manage	ement, Inc					
Occupancy Status During Aba		t (Chack	only o	ne)			Street Address					_		_
☐ Facility Closed/Vacated Du					ment		8436 Enterpr	rica Avanua						
☐ Abatement Performed Out						cribe								
Time of Abatement: 7:00							City, State, Zip C							
				2000			Philadelphia	, PA 19153						
Scope of Work (Check all that	apply))					M Full Con	ontainment with Negative Pressure						
			⊠ Re	novati	on		⊠ Mini-En		alive Fressure	-				
≥160 sf or ≥260 lf				molitic			☐ Gloveba	a Procedure		101				
							☑ Non-Exe	empted (*) and No	n-Friable Proc					
				Locat						1	٩ba	teme	ent T	ype
Location of				Norma			Description (Amount	1	0	Re	Ē	En
Asbestos-Containing Mate		CIVI)		intena			stos Containing Ma ., thermal systems		(Specify	-	3	Repair	Encapsulate	Enclosure
IN Facility	-		Cus	todial		(surfacing, VAT	, or	SF or LF) 2	5	7	lus	Sure
(13)				(12)	0.0000000000000000000000000000000000000		other miscellane	eous)					ate	
			Yes	No	N/A						+			
Roof					\boxtimes	Roof FI	ashing		1400 SF	- 🛭	3			
					\boxtimes					2	a	П	П	П
			ш	-	1000						-	_	_	
					\boxtimes						3	Ш	Ш	Ш
				П	П					I				
Name of Registered Waste H	auler				JDEP \		Cubic Yards of	Name of Regis	stered Landfill		-			
Freehold Cartage Inc.	autoi			323	lauler II		Waste		County RMS	s				
					15939)	40				_			
City, State							Disposal Date	City, State	5.4					
Freehold, NJ							7/31/2014	Montgome	ery, PA					
Completed By (Print or Type)		Title	9				Signature	1 100		Date		1 -		
Dilip Kumar		P	rogra	m Ma	nager		Aled	Muar	,	6/	51	14		
ASB-41							1/000	gumi.		17	1	- 1		
MAY 11		*	Do no	t use t	his form	for asbes	tos licensure exem	pted activities.						

NU (K

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

49

Date of Notification (1)		Name of Building Owner/Operator (2)														
6 /	6 /	14			Pages 1	Barry Ro					المصا مسا					
Agencies Notified	Type Notific	ation			Street	Address			nets II	IN 16 PM	2. 4	١				
□ EPA	☐ Initial				2000000	Front St			ZEIA JU	M 10 FF	Z. 1	-				
□ DOLWD				920-11 mil	City, S	tate, Zip C	ode		2 100	100000	il The Co	1				
☑ DHSS	Amendm				1000	h Amboy			F 5/52	area co Ligensi	LIC					
☐ DCA (NJAC 5:23-8)			cluding			of Contact	655			Telephone Nu		1.,1		_		
(140/10/3.23-0)	☐ Cancella				Sco	tt Bisbor	rt				•					
					FAC	ILITY IN	FOR	MATION		-						
Name of Facility Where A	Abatement is	Taking	Place	(3)					Type of Facility (4)						
Former General Ca		1.50						7	☐ School (K-12)							
Street Address										opter 8 (Other than K-12) i.e., private and commercial buildings,						
40-50 Washington S	Street								homes, etc.)	ate and comi	nerciai d	unam	J S,			
City (5)									Square Feet	# of Floors	Е	ldg. A	ge			
Perth Amboy																
County (6)					Coun	ty Code (7)(STAT	TE USE ONLY)	Current Use (Prior	Current Use (Prior if being demolished)						
Middlesex																
Name of Monitoring Firm	Hired by Bui	Iding C	wner (8)	ASCM	No.	Nan	ne of Abateme	ent Contractor (9)							
Pennoni Assoicate	s, Inc.				0010	2	В	RISTOL EN'	VIRONMENTAL,	INC.						
Street Address							Stre	et Address								
515 Grove St., Suite	e 1B						11	123 BEAVE	ER STREET							
City, State, Zip Code							City	, State, Zip Co	ode				= 1000.0			
Haddon Heights, N	J 08035						В	RISTOL, PA	19007							
Project Manager for Mon	itoring Firm			Tel	ephone	No.	Tele	ephone No.		License No.						
Alan Lloyd				8	56-547	-0505	2	15-788-6040	0 ,	00509						
Start Date (10)		Sched	uled C	ompl	etion Da	te (11)	Nan	ne of OSHA M	lonitor							
6/_9_/	_14_	6	<u> </u>	1	0_/_	14	В	RISTOL EN	VIRONMENTAL,	INC.						
Occupancy Status During	Abatement	(Check	only o	ne)			Stre	et Address								
□ Facility Closed/Vacate							11	123 BEAVE	R STREET							
Abatement Performed						cribe	City	, State, Zip Co	ode							
Time of Abatement: 7	:00AM-3:30	PIVI/	—_P	VI	AIVI		В	RISTOL, PA	19007							
Scope of Work (Check al	I that apply)	8						П г.:!! C	Lainean and width Mana	tiva Dranaura						
□ >3 sf or >3 lf			Re	nova	tion			☐ Mini-Enc	tainment with Nega losure	tive Pressure						
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			⊠ De	molit	on			☐ Glovebag	g Procedure							
				•		10		⊠ Non-Exe	mpted (*) and Non-	-Friable Proce						
Lagation	of		100000	Loca				Description of	sf .		-	batem	Т			
Location Asbestos-Containing		M)	Use	d So	ely by	Asbe	stos (Containing Ma		Amount	Ren	Repair	Enc	Enc		
TO BE ABA	ATED	1118	H 20050555		ance/ Staff?	(i.e		rmal systems		(Specify	Remova	<u>a</u>	aps	Enclosure		
IN Facili (13)	ty		000	(12				urfacing, VAT ner miscellane		SF or LF)	=		Encapsulate	9		
()			Yes	No	N/A								U			
Exterior				\boxtimes		Cleanu	p of	transite deb	oris	600 SF						
												П	\Box			
					+								П			
Name of Pegistered Was	te Hauler		Ц		NJDEP	Naste	Cub	oic Yards of	Name of Registe	ered Landfill				_		
[[[[[[[[[[[[[[[[[[[O No.										
City, State					18706	5	Dist	oosal Date	City, State							
New Castle, DE							213	Jour Date	Waynesburg	g, OH						
Completed By (Print or Type) Title							L	Signature			Date /	, /				
Brian Scafiro		1.0000000	stima	tor				Breen.	Scefire /-	il	6/1	1/	14			

ASB-41 MAY 11

B S 1 4 0 5 8 * Do not use this form for asbestos licensure exempted activities.

CR# 2634

Date of Notification (1)					Name	of Building	Owner/Operator (2	2)					
01/	15 /	14	-		Prin	ceton Ur	niversity-Office	of Design and	Construction				
Agencies Notified	Type Notificati	ion			Street	Address			Starta.				. t-
☐ EPA					200	Elm Dr.			2.73	0.00020		1	e de
□ DOLWD □ □ □ □ □ □ □ □ □			alecters.	-	City, St	ate, Zip C	ode			CEES			
☑ DHSS	Amendmer			4		ceton, N			Qe/st	<u>=</u>		1	
☐ DCA (NJAC 5:23-8)	☐ Emergency justification		lding	ŀ		of Contact			Telephone-Num			-	
(NJAC 5.25-6)	☐ Cancellation	0020				ert Orteg				1			
	Gunoman			1			FORMATION		L 191	-6			
Name of Facility Where A	Abatement is Ta	aking F	Place (3)	- 1 70	10111111	ORMATION	Type of Facility (4) 20			14	
Princeton Universit			a desired .					School (K-12)	(Other than K-12	٠.			
Street Address Washington Rd								Other (i.e., pr homes, etc.)	ivate and comme	rcial bu	ilding	s,	40
City (5)								Square Feet	# of Floors	Ble	dg. Ag	ge	6.0
Princeton													
County (6)				-00-17	Coun	v Code (7	(STATE USE ONLY)	Current Use (Pri	or if being demoli	shed)			
MERCER						,, 0000 (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Library					
Name of Monitoring Firm	Hirad by Buildi	ing Ou	mor /9	1	ASCM I	No	Name of Abateme				_		_
ATC Associates Inc		ing Ow	niei (o	,	ASCIVIT	NO.	1	VIRONMENTAL	INC				
	J							AILOMAILMA	<u>., 1110.</u>				100
Street Address							Street Address	DOTREET					
Three Terri Center							1123 BEAVE						
City, State, Zip Code							City, State, Zip Co						
Burlington, NJ 080							BRISTOL, PA	19007	TO:N-				
Project Manager for Mon	itoring Firm				phone I		Telephone No.		License No.				
Michael Keehn				60	9-386	-8800	215-788-6040		00509				
Start Date (10)	Sc	chedul	ed Co	mple	tion Dat	e (11)	Name of OSHA Monitor						
2/5/	14	6	_ /	16	<u> </u>	14	BRISTOL EN	VIRONMENTAL	_, INC.				
Occupancy Status During	g Abatement (C	heck o	only or	ne)	0		Street Address						
☐ Facility Closed/Vacate					ment		1123 BEAVE	R STREET					
☐ Abatement Performed						cribe	City, State, Zip C	ode					
Time of Abatement:	3:30AM-3:00PI	M/			AM		BRISTOL, PA						
ON SITE 67 Scope of Work (Check a	13/14 - 6	116	114					5 N. T. C.					
Scope of Work (Offeck a	ii tilat apply)							tainment with Neg	ative Pressure				
≥3 sf or ≥3 lf			Ren				Mini-End	closure a Procedure					
≥160 sf or ≥260 lf		L	_ Den	nolitio	on			mpted (*) and No	n-Friable Proced	ıre			
			le l	Locat	ion			()			atem	ent T	vpe
Location	of			orma			Description of	of		-	_		T
Asbestos-Containing)			ely by	Asbe	stos Containing Ma	aterial (ACM)	Amount	Removal	Repair	nc	Enclosure
TO BE ABA	ATED				ince/ Staff?	(i.e	., thermal systems		(Specify	lova	a-	sde	uso
IN Facil (13)	ity	- 1	Cusio	(12)			surfacing, VAT other miscellane		SF or LF)	=		Encapsulate	ē
(15)			Yes	No	N/A		- Cirio i i i i i i i i i i i i i i i i i i					Ф	
Throughout Levels 0	C, B and A					Floor ti	le and mastic		1,465 SF		므		
Office A-7J				Windov	v Caulk		96 LF		닏				
Throughout Levels C, B and A						Duct w			1775 SF		屵		
1 st Floor Level 1						Pipe In	sulation (Wrap &		72 LF	\boxtimes		Ш	
Name of Registered Was		INC		100	JDEP \ lauler II	No.	Cubic Yards of Waste	Name of Regis G.R.O.W.S	tered Landfill . NORTH LANI	DFILL			
					20990		Disposal Date	City, State					
City, State NEW CASTLE, DE							Disposal Date	15760	LLE, PA 19067	'			
Completed By (Print or T	vpe)	Title					Signature		, [ate ,	,	8	
Brian Scafiro	71-7	//1/5005/00	timat	or			Brian	n Scafir	0/2	6 //	2/	14	
VCD 41									//				

STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NJAC 8:60-7 AND 12:120-7

71

Date of Notificat		Accessory (Species			Name of B	uilding Owner / Ope	rator (2)	Per Commence	P 5% 3	- n-	(
6 / 13	3 / 2014				Federal National Mortgage Assn.										
/ N N - A'G'	/ -1 17				Street Add			ne.							
Agencies Notifie	92.77		ion			, Zip Code		261	1 JUN	5 PM	F .				
☐ EP		nitial Amen	hah		St. Paul, M				4 JUN	0 119	2: 28				
			deu dment#		Name of C	CONTRACTOR OF THE PERSON OF TH	T	Company of the last of the las	e Number						
	33735 U 18		하나 뭐 하다 하네 뭐 하다 !	justification	Melissa SI		L		7 170	- 611.1	Tabi				
			ellation	Jacanoan				w.	10	ENSIN	4 91				
					FACILITY IN	FORMATION									
	Where Abateme	ent is	Taking P	lace (3)		Type of Facility (4)									
1161 Loraine Ave	enue					☐ School (i	K-12\								
21 1 2 1 1							ter 8 (Other t	han K-12	١						
Street Address 1161 Loraine Ave	enue					☑ Other (I.e.)	e., private & comes, etc.)								
City (5)	County (6)			County Code	(7)										
Plainfield	Middlesex			ooulli, cour	(- /	1,500	2			64 yrs					
idii ilioid	Imaanoox					Current Use (Prior	if being demo	olished)	1						
						Residential home -er	mpty								
Name of Monito	oring Firm Hired	by Blo	ig. Owne	er (8)	ASCM NO	Name of Abatemen	t Contractor	(9)							
Steve Rich Envi	ironmental Contr	actors	s d/b/a O	PUS Abateme	ent 	Steve Rich Environ	mental Contr	actors d/	b/a OPUS	Abateme	ent				
Street Address						Street Address									
222 Delawanna						222 Delawanna Ave	enue								
City, State, Zip	Code					21 0 d 21 0 d									
Clifton, NJ 0701	4					City, State, Zip Coo									
	or Monitoring Fi	m		Telephone N		Clifton, NJ 07014									
Warren Clenden				973-458-1188		T. L. L Niemska		License Number							
Sheduled Start		Sched		letetion Date (Telephone Number		1219							
_6 / _2	23 / 2014		6 /	/ 27	2014	973-458-1188		1213							
/		<u> </u>	/Oh l- /	7 2=h+4)		Name of OSHA Mo	nitor								
	itus During Abate lity Closed/Vacat	ment	(Check	only 1)		Steve Rich Environn	nental Contrac	tors d/b/a	OPUS A	batement					
	1887 N. S.	ea Du	iring Ent	ire Period Oi		Street Address									
	tement tement Performe	d Out	cide of N	ormal Facility	,	222 Delawanna Ave	nue								
	rs - Describe:							·/							
	er - Describe:					City, State, Zip Coo	de								
Cure	- Describer					Clifton, NJ 07014									
Scope of Work	(Check All That	Apply)												
☐ Dem	- litian			Renovation	П	Full Containment v	vith Negative	Pressure	2						
	or_>3lf		ш	Renovation		Mini - Enclosure	-								
	0 sf or ≥260 if				Ø	Glovebag Procedu	ire								
						Non-Exempted (*)	and Non-Fria	ble Proce	edure						
								Abatama	ent Type						
	tion of		ls		Descrip			Abateme R	I Type	ÌΕ	E				
Asbestos	Containing	1577.07	ocation		Asbestos - (Material		Amount	Ë	R	N	N				
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1270	acility		y Main-	1 "	or other mis	cellaneous)		V	Α	P	0				
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	stered Waste Hau	ıler		NJDEP Was	and the second s	Name of Register	ea Landfill								
Newark Carting	3			Hauler ID N	o. Yards 509 of Waste	10000000									
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City, State					Date	Bethlehem, PA									
Newark, NJ					6/25/201	4	1								
Completed by	(Print or Type)			Title	The same of the same of	Signati	Milling	10111	1	Date	/13/14				
Tracey O'Conn				Office Mana	ger	1//	Milly	1 6	u U	1 6	113/14				

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State of New Jersey

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Date of Notification (1) 6-4-2014					Building Co				Edison	114 11	1115	PM F	: 57		
Agencies Notified	Type Notification			Street Ad 312 Pie	ldress erson Av	enue/				14 0	JR - 0	· () \{	T 94.0		
DEP DOL	Initial Amended Amendment				e, Zip Coo , NJ 088					50€ &	LICEN	3114	3	71,	
DOH DCA	Emergency justification) Cancellation		1 2		Contact romslan	d				Tele	phone Nun	nher B			
				FACIL	ITY INFO	RMATIC	N								
Name of Facility Where A Herbert Hoover Mic		ng Place (3)						× s	of Facility (4 School (K-12	2)	- 45 17 AG			aireac	
Street Address 174 Jackson Avenu	ıe			A SCHOOL STATE					Subchapter (Other (i.e. pr etc.)	ivate 8	commerci	al build	200		s,
City (5) Edison								Square Feet # of Floors Bldg. Age 50,000+ 2 50+							
County (6) Middlesex				County C	ode (7) ISE ONLY)		Current Use (Prior if being demolished) School								
Name of Monitoring Firm Detailed Associates		Owner (8)	- V	ASCM No. Name of A 00012 GL Gro					ement Cont	tractor	(9)	U			
Street Address 300 Grand Avenue									eet Address 40 Hamburg Turnpike						
City, State, Zip Code Englewood, NJ 076	331							State, Zi mingd	p Code ale, NJ 0	7403					
Project Manager for Mor Anthony Valentine	nitoring Firm			Telephone No. 201.569.6708				none No 710-9			License N 01084	0.			
Start Date (10) 6-18-2014 after 3:0	00 pm	Schedule 6-23-20		npletion [Date (11)			of OSH Group,	IA Monitor Inc						
Occupancy Status Durin		ck Only On	e)				Street Address								
Facility Closed/Vac Abatement Perform	ated During Entire	Period of A	batem	ent		-	140 Hamburg Turnpike City, State, Zip Code								
Other – Describe:		That i acility	110013			_	Bloomingdale, NJ 07403								
Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	All That Apply)		enova emoliti					Min	Containme i-Enclosure	6	Negative F	Pressu	re		
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Locatio Asbestos-Containing <u>TO BE AB</u> In Faci (13)	Material (ACM) ATED lity	Use Mai Cust	d Sole ntenar odial S (12)	ly by nce/ Staff?		tos Conta thermal	system	Material is insula AT, or		(5	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
Home EC	Room	Yes	No X	N/A	С	eiling T	Tile GI	ue Do	ts	1,3	800 SF	х			
TIONIC LO	1100111					3									
							· ·		Na	Jan-1-1					
Name of Registered Wa GL Group, Inc	ste Hauler		Hauler ID No.				of Waste			Name of Registered Landfill Grows					
City, State Bloomingdale, NJ		Disposal Date City, State TBD Morrisville, PA				A		u u							

Signature

Date

6-4-2014

Completed by

Elena Solakov

Title

President

EDS14-032

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

check #1266 Page-1 of 1

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Date of Notification (1) 6-4-2014		52			Building Conference				Edison	11 [1]	S P1	έ <u>Ε</u> .	·.·			
Agencies Notified	Type Notificat	ion		Street Ad 312 Pie	idress erson Av	enue			2814	IUK I	0 11	10.	-			
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DOH DCA	Emerger justificati			Name of Ken St	Contact romslan	d			C		phone N					
		- W		FACIL	ITY INFO	RMATI	ON		5							
Name of Facility Where A Thomas Jefferson N Street Address			3)		U.			×	of Facility (4 School (K-12 Subchapter	2) 8 (Othe	er than K	-12)				
450 Division Street									Other (i.e. pretc.)	rivate 8	comme	rcial b				s,
City (5) Edison		9,000						50,0		1	Floors		50	dg. A	ge	
County (6) Middlesex				County C	Code (7) ISE ONLY)		_	Curre Sch	ent Use (Prio OOI	r if bei	ng demo	lished)				
Name of Monitoring Firm Detailed Associates		ling Owner (8)		ASCM 0001			10000000000000	of Aba Group	tement Con , Inc	tractor	(9)					
Street Address 300 Grand Avenue		14						Addres Hamb	ss ourg Turnp	oike						
City, State, Zip Code Englewood, NJ 076	31								ip Code dale, NJ 0	7403			******			
Project Manager for Mon				Telephor	ne No. 69.6708		Telep	hone N 710-9	0.		License 01084					
Anthony Valentine Start Date (10)			ed Con		Date (11)		Name	of OSI	HA Monitor		2.00		(<u>-</u>	- / 20		
6-18-2014 after 3:0 Occupancy Status During	3.5	6-23-2 Check Only Or						Group Addre								
Facility Closed/Vac	ated During Er	tire Period of	Abaten	nent					ourg Turnp ip Code	oike						
Other – Describe:		Normai Facilit	y mours			_			dale, NJ C	7403						
Scope of Work (Check A	II That Apply)						_	and a								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit					Mi	II Containme ni-Enclosure ovebag Proc on-Exempted	e edure					е	
		ls	s Locat	ion						1/				W. S. W.	ement	9
Location	n of		Normal	lly			scriptio					-		ı y	P0	-
Asbestos-Containing TO BE AB. In Facil (13)	Material (ACN ATED	Ma Cus	ed Sole aintena stodial (12)	nce/ Staff?		therma surfa		ns insul AT, or		(5	mount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
==	D	Yes	No	N/A	-		oilina 7	Tile.		0	12 SF	X	-			
Home EC	Hoom		X			CE	eiling 7	ille	72	9	12 35	- 1				
								- 10-5								
							.,		1.0			JE!!				
Name of Registered Was	ste Hauler		H	NJDEP W Hauler ID 033034	No.	of Wa	Yards iste		Name of Grows	Registe	ered Lan	аш				
City, State Bloomingdale, NJ					×		sal Dat	е	City, Stat Morrisv		Α					
Completed by Elena Solakov		Title Pres	sident			1	Signatu	re &	Leru Ste	Ma	;	Date 6-4-	201	14		

Page 1 of 1 Check #1270

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Date of Notification (1) 6-10-2014						Building C							4065	- tal			
Agencies Notified	Type Notific	ation		1277	Street Ac 2175 L	ldress emoine	Avenu	ie		2514	4 JU	116	PH	5: 1	\Z		
EPA DEP DOL	100000000000000000000000000000000000000	ment #		1.000	City, Stat	e, Zip Cod e, NJ	de			ىز ئ	Ы <u>Г</u> (I S	17(15	100	21		
X DOH	Emerging justific	1000 000000	ncluding	10776	Name of					3		phone	Numl	per	V.		
DOH DCA	Cance	llation				eNichilo							1				
Name of Facility Where	A	Takina	Diago /2	1	FACIL	ITY INFO	RMATI	ON	Type o	of Facility (4	11	-					
LEWIS F. COLE M									× s	chool (K-12	2)	er than	K-12)				
467 Stillwell Avenu	е									other (i.e. pr	rivate 8	& comm	nercia	build	ings,	home	s,
City (5) FORT LEE									Square 40,00	e Feet	# o	Floors	151		dg. A O+	ge	
County (6) Bergen					County C	code (7) ISE ONLY)			Curren	nt Use (Prio	r if bei	ng dem	olishe	ed)			
Name of Monitoring Firm	n Hired by Bu	ilding O	wner (8)		ASCM	No.		Name	of Abate	ement Con	tractor	(9)		-			
Karl & Associates	iii iii ca by Ba	nung c)				GL (Group,	Inc							
Street Address 20 Lauck Road									Address Hambu	s urg Tpke							
City, State, Zip Code Mohnton, PA 1954	0					e tale 18 m			State, Zip mingda	code ale, NJ 0	7403						
Project Manager for Mo Michael Krischer	1001				Telephor	ne No. 223-1832	2	0.00	hone No)710-9			Licen 0108					
Start Date (10)				ed Con	<u> </u>	Date (11)		Name	of OSH	A Monitor							
6-20-2014 at 3:00p		1	6-24-2						Group,								
Occupancy Status Durin	25				000000 8 00					s urg Tpke							
Facility Closed/Vac Abatement Perform Other – Describe:	ned Outside o							City, S	State, Zip	•							
Scope of Work (Check /		1				Ar Opposit		Dioc	mingu	ale, INO O	77-100	-					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	All Ittal Apply	,	-	Renova Demolit		e T			Mini Glov	Containme i-Enclosure vebag Prod i-Exempted	e cedure					e	
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Locatio	n of		1	Normal	ly		De	scription	n of					-	ı y	pe	
Asbestos-Containing TO BE AB In Fac (13)	BATED ility	CM)	Ma	ed Sole aintena todial S (12)	nce/		therma surfa				(mount Specify or LF		Removal	Repair	Encapsulate	Enclosure
Room	118		165	X	14073	Trai	nsite E	Bench/	Table ⁻	Тор		80 SF		X			
Room				X					Table T			80 SF		X			
						15					5		- 1611				
Name of Registered War GL Group, Inc	aste Hauler			Н	IJDEP W lauler ID 033034	No.	of Wa	Yards ste	20	Name of I	60-80 -7 00-898	ereo La	nami				
City, State Bloomingdale, NJ							Dispo	sal Date	Э	City, State Morrisv		Α					
Completed by Elena Solakov		-	Title Pres	ident				Signatur	e Fo	2 S	1. W.	<i>j</i>	Dat	e 0-20	014		

Page 1 of 1 Check #1269

Date of Notification (1) 6-11-2014						Building C				79	. پېدا کوست		4	لما	e di	,	
Agencies Notified	Type Notifi	cation			Street Ac 2175 L	ldress emoine	Avenu	ie		781	4.11	116	PH	5: 1	. 3		
DEP DOL		dment#		_	City, Stat Fort Le	e, Zip Cod e, NJ	de			CV	- 25		po.				
DOH DCA	justific	gency (in ation) ellation	cluding		Name of Jack D	Contact eNichilo				8	Tele	phone	¥1	er			
					FACIL	ITY INFO	RMATI	ON			1887						
Name of Facility Where A Fort Lee High School		Taking	Place (3)					Ty ×	pe of Facility (School (K-1 Subchapter	2)	er than	K-12)				
Street Address 3000 Lemoine Aver	nue					970-00			Ė	Other (i.e. p	orivate &	k comm	ercial				s,
City (5) FORT LEE									40	quare Feet 0,000 +	2	Floors		50	dg. A)+	ge 	
County (6) Bergen					County C (STATE L	Code (7) ISE ONLY)			100,000	urrent Use (Pri chool	or if bei	ng dem	olishe	ed)			
Name of Monitoring Firm Karl & Associates	Hired by Bu	uilding O	wner (8)		ASCM	No.				Abatement Cor oup, Inc	ntractor	(9)					
Street Address 20 Lauck Road		Almerika III	111-20-2019					Street 140		dress mburg Tpke)						
City, State, Zip Code Mohnton, PA 19540)									e, Zip Code ngdale, NJ (07403						
Project Manager for Mon Michael Krischer				T	Telephoi	ne No. 223-1832		Telep	hon			Licens 0108					
Start Date (10)			Schedule			Date (11)		Name	of	OSHA Monitor							
6-24-2014	A1 - 1			0.000				Street					_			-	
Occupancy Status During Facility Closed/Vaca	ated During	Entire P	eriod of A	Abater	nent			140	На	mburg Tpke)						
Abatement Perform Other – Describe:	ed Outside solated Wor	of Norma k Area	al Facility	/ Hour	S		_	100 miles		e, Zip Code ngdale, NJ	07403						
Scope of Work (Check A	II That Appl	/)						_	_								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf				Renova Demoli					×	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure	Ĭ				e	
			Is	Locat	tion										Abate	ement pe	
Location Asbestos-Containing TO BE AB	Material (A	CM)	Use Ma	Norma ed Sole intena	ely by		tos Con therma	system	Mate	erial (ACM) nsulation,	(;	mount Specify		Re			Enc
In Facil	ity		Ous	(12)				cing, V/ miscella			Si	or LF)		Removal	Repair	Encapsulate	Enclosure
			Yes	No	N/A											e	
Science Room/	Prep Roo	m		X			L	ab Top	ps		1	20 SF		X			
					+		<u> </u>					+	-				
			-														
Name of Registered Was	ste Hauler				NJDEP W Hauler ID 033034	No.	Cubic of Wa TBD	Yards ste		Name of GROW		ered La	ndfill				
City, State Bloomingdale, NJ							Dispo TBD	sal Date	е	City, Sta Morris		Α					
Completed by Elena Solakov			Title Pres	ident				Signatur	re	Elony S	Lulle		Dat 6-1	e 1-2	014		

GL14-022

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

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6-4-2014						CH PLA				OARD O	F ED	UCAT	ÎON				
Agencies Notified	Type Notif			1	Street Ad Evergr	ddress een Ave	enue &	Cedar	r Stree	M4 JUN	16 F	消 5:	٦ÿ	3			
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1.00		gency (ir cation)	ncluding			Contact			EA 3:37	& L1	Tele	phone	Numbe	er			
DOH DCA		ellation				ah S. Sa	06/03/07/06/05				1 1-	7-			97	,	
Name of Facility Where A	hatement is	Taking	Diace /3	1)	FACI	LITY INFO	DRMATI	ION	Type	of Facility (4		-		_			
Howard B Brunner B				7						School (K-12							
Street Address		MAXILLE COLUMN					***************************************		X S	Subchapter 8	8 (Othe	r than	K-12)				
721 Westfield Rd										Other (i.e. pr	rivate 8	comm	ercial b	uild	ings,	home	es,
City (5)						111111111111111111111111111111111111111			Squar	e Feet	# of	Floors		1.31.223	dg. A	ge	
Scotch Plains									40,00		1)+		
County (6) Union					County ((STATE L	Code (7) USE ONLY))		Scho	nt Use (Prio ool	r if bei	ng dem	olished)			
Name of Monitoring Firm	Hired by B	uilding O	wner (8)		ASCN					ement Cont	tractor	(9)					
EnviroVision Consu	Itants, Ind).			0007	9			aroup,								
Street Address 20-21 Wagaraw Rd,	, Building	35E							Addres Hamb	s urg Turnp	oike						
City, State, Zip Code Fair Lawn, NJ 07410	0								State, Zi	p Code ale, NJ 0	7403						
Project Manager for Moni					Telepho	ne No.			none No			Licens	se No.				
Guillermo M Morale					(973) 6	36-914	5	201-	710-97	725		0108	4				
Start Date (10) 6-30-2014			Schedule 7-3-20		npletion I	Date (11)			of OSH Group,	A Monitor Inc							
Occupancy Status During	Abatemen	t (Check	Only Or	ne)					Addres	7700				J		-125000.10	
Facility Closed/Vaca										urg Turnp	oike						
Abatement Performe Other – Describe:	ed Outside	of Norma	al Facility	/ Hours	3			A CONTRACTOR OF THE PARTY OF TH	State, Zi	p Code ale, NJ 0	7403						
Scope of Work (Check Al	II That Apply	()						Dioo	Tilligu	ale, Ivo o	7 400						-
≥3 sf or ≥3 lf	ii macAppi	()	X	Renova	ition			×	Eull	Containme	nt with	Negati	ve Pre	eeur	<u> </u>		
≥160 sf or ≥260 lf			_	Demoli					Min	i-Enclosure		riogan	10110	Jour			
								E		vebag Proc n-Exempted		Non-F	riable	Proc	cedur	е	
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Location	of		1	Vorma	lly		De	scription	n of				-	-	- I y	ре	
Asbestos-Containing TO BE ABA		CM)		ed Sole iintena				taining N I system				nount		,	_	Enc	四
In Facili			Cus	todial ((12)	Staff?	(surfa	cing, VA	T, or			or LF)		Remova	Repair	Encapsulate	Enclosure
(13)			-		Τ		otner	miscellar	neous)					Val	=	ulate	ure
			Yes	No	N/A						00	VE OF					
Boiler Ro			X					Breech ater Ta				5 SF 0 SF	X	-			
Boiler Ro			X											-			
Boiler Ro			X					e Elbo	-			90 If	X	-			
Boiler Ro			X	L , .				Boiler	Morta			5 SF	X				
Name of Registered Was	te Hauler			1002	IJDEP W lauler ID	100 C	of Wa	Yards iste		Name of F	registe	red Lai	iailli				
GL Group, Inc				0	033034	!	TBD			Grows							
City, State Bloomingdale, NJ							Dispo TBD	sal Date		City, State Morrisvi		4					
Completed by			Title				1 5	Signature	e				Date			-	
Elena Solakov			Presi	ident					ک	lem Solo	lla		6-4-	201	4		

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Page 1 of 1

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Date of Notification (1) 6-4-2014		Name SCO	of Building C	Owner/Ope INS -FAI	erator NWC	OD BOARD	OF ED	UCAT	AON	1			
Agencies Notified Type Notification		Street	Address green Ave				4 JUN				 ژ		
EPA Initial Amended Amendment #			State, Zip Coo		76		,(EQ.)						
Emergency (ir justification) DCA Emergency (ir justification) Cancellation	ncluding		of Contact orah S. Sa	ridaki		8	∑ Tele	phone	Numbe	èr	-	A	
		FA	CILITY INFO	RMATIO	N								
Name of Facility Where Abatement is Taking J Ackerman Coles Elementary School						Type of Facility School (K-	12)	41 1	< 42)				
Street Address 16 Kevin Road						Subchapte Other (i.e. etc.)							s,
City (5) Scotch Plains						Square Feet 40,000+	# of	Floors			dg. A)+	ge	
County (6) Union			y Code (7) E USE ONLY)		_	Current Use (P School	ior if bei	ng demo	olished)			
Name of Monitoring Firm Hired by Building O EnviroVision Consultants, Inc.	wner (8)	100000	CM No.			of Abatement Co Froup, Inc	ntractor	(9)					
Street Address 20-21 Wagaraw Rd, Building 35E					Street	Address Hamburg Tur	npike						
City, State, Zip Code Fair Lawn, NJ 07410					City, S	tate, Zip Code mingdale, NJ							
Project Manager for Monitoring Firm Guillermo M Morales		1	hone No.) 636-914		Teleph	one No. 710-9725		Licens 01084					
Start Date (10)	Scheduled C		N		Name	of OSHA Monito	r	0100					
	7-3-2014				J	iroup, Inc							
Occupancy Status During Abatement (Check				10.0		Address Hamburg Tur	npike						
Facility Closed/Vacated During Entire P. Abatement Performed Outside of Norma Other – Describe:				(City, S	tate, Zip Code mingdale, NJ				150,54 (14			
Scope of Work (Check All That Apply)					DIUU	minguale, No	07403			-			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		vation olition			×	Full Containr Mini-Enclosu Glovebag Pr Non-Exempt	re ocedure					a	
			1		See	- Non-Exchipt	1	4 110111	Habio			ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Loc Norn Used S Mainte Custodia (1	nally olely by nance/ al Staff?		tos Contai	ystem: ng, VA	faterial (ACM) s insulation, T, or	(5	mount Specify F or LF)		Remova	Ty Repair	e Encapsulate	Enclosure
	Yes N	o N/A	Α									te	(0
Boiler Room	X			Wate	er Ta	nk	1	15 SF	X				
									-	-			
Name of Registered Waste Hauler		NJDEP Hauler	Waste ID No.	Cubic Y		000000000000000000000000000000000000000	f Registe	ered Lar	ndfill				
GL Group, Inc		00330		TBD		Grows							
City, State Bloomingdale, NJ				Disposa TBD	ıı Date		ate ville, P	Α	5,500				
Completed by Elena Solakov	Title Presider	nt	2	Sig	nature	Elem S	lulla	j	Date 6-4-	201	4		

GL14-022

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

check # 1275 Page 1 of 1



Date of Notification (1) 6-4-2014			•			Building C CH PLAI				BOARD O		UCAT	ION	L. L	- F		
Agencies Notified	Type Notifi	cation	- Eynin		Street Ac Evergre	idress een Ave	nue &	Cedar	r Stre	et 2	914 J	UH II	6 Pi	4 5	: 5;	į	
EPA DEP DOL	Initial Amen	ded dment #_	- Air-			e, Zip Coo Plains,		076								11.0	
▼ DOH ▼ DCA	justific	gency (in cation) ellation	cluding	1000	Name of Debora	Contact ah S. Sa	ridaki	***		9	Tele	phone	Numb	er	J	S	
N DOA	Oano	Silution	ATT 1000-300-			ITY INFO	ALTO MERINA	ON						1-1)			
Name of Facility Where William J McGinn E)						of Facility (4 School (K-12 Subchapter 8	2)	or than	K-12\				
Street Address 1100 Roosevelt Av	enue								Ħ	Other (i.e. pr etc.)				build	ings,	home	s,
City (5) Scotch Plains									11.000000000000000000000000000000000000	are Feet 000+	# of 2	Floors			dg. A)+	ge	
County (6) Union					County C	ode (7) ISE ONLY)			Curre	ent Use (Prio	r if bei	ng dem	olished	d)			
Name of Monitoring Firm	Hired by Br	ıildina Ov	vner (8)		ASCM	No.		Name	of Aba	atement Cont	ractor	(9)					
EnviroVision Consu					0007			GL C	Group	o, Inc							
Street Address 20-21 Wagaraw Ro	l, Building	35E						Street 140		ess burg Turnp	ike						
City, State, Zip Code Fair Lawn, NJ 0741	0								CONTRACTOR STATE	Zip Code dale, NJ 07	7403						
Project Manager for Mor Guillermo M Morale					Telephor (973) 6	ne No. 36-9145	5	Teleph 201-	none N 710-9			Licens 0108					
Start Date (10) 6-23-2014		1 1	Schedule 5-27-20		pletion [Date (11)				HA Monitor o, Inc							
Occupancy Status Durin	g Abatemen	t (Check	Only On	ne)				Street	Addre	ess						A Transition	
Facility Closed/Vac Abatement Perform	ated During	Entire Pe	eriod of A	Abatem						burg Turnp Zip Code	ike						
Other - Describe:							_	The state of the s		dale, NJ 0	7403						
Scope of Work (Check A	Il That Apply	y)						F.	71								
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Boiler R			Х			E	Boiler F	Rib Ins	ulatio	on	45	50 SF		X			
Boiler R	oom		Х				Wa	ater Ta	ink		17	70 SF		X			
Boiler R	oom	9	Χ				Pip	e Elbo	ws		6	0 LF		X			
Name of Registered Wa	ste Hauler			1.0200	JDEP W		1 1 1 THE RESERVE OF	Yards		Name of F	Registe	red La	ndfill				
GL Group, Inc				100000	auler ID 033034		of Wa TBD			Grows				- 01160			
City, State Bloomingdale, NJ							TBD	sal Date	,	City, State Morrisvi		A					
Completed by Elena Solakov			Title Presi	ident			S	Signatur	e &	Cleru Solv	lla	i	Date 6-4-		14		

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Page 1 of 1



Date of Notification (1) 6-4-2014					Building (CH PLA				OARD O	F ED	UCAT	. LJ TION				
Agencies Notified	Type Notification			Street Ad Evergr	ddress een Ave	enue &	Ceda	r Stree	2814 JUN	116	PM	5: 5	1,			
EPA DEP DOL	Initial Amended Amendment Emergency		_	Scotch	Plains,	de			330ES	TOS	100 117 H	17 P. 16	wl.			
DOH DCA	justification) Cancellation			Name of Debora	Contact ah S. Sa	ıridaki		6		Tele	phone	Num	ber ·		Z	
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Street Address 20-21 Wagaraw Rd				1000.			Street	Address		ike					-	-
City, State, Zip Code				-			City, S	State, Zip		-						
Fair Lawn, NJ 0741 Project Manager for Mon	itoring Firm		-1	Telephor			Telep	hone No		7403	Licen					
Guillermo M Morale	es .	Cahadul	od Co	(973) 6 mpletion I	36-914	5		710-97	A Monitor		0108					
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City, State Bloomingdale, NJ						Dispo	sal Date		City, State Morrisvi		A		-			
Completed by Elena Solakov		Title Pres	ident				Signatur	e Ed	Peru Ster	lla	;	Dat 6-4	e 1-20	14		

GL14-010

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

check # 1272 Page 1 of 1

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Date of Notification 6-4-2014	1 (1)				Name of BORO	f Building OUGH O	Owner/C	perator / MILF	(2) . ORD	Board of	Educ	ation. l	22				
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Name of Facility W	Ibara Abatama	nt is Takin	a Place /	2)	FACI	LITY INF	ORMATI	ON	Type	of Facility (4)						
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County (6) Bergen					County (Code (7) USE ONLY)		Curre	nt Use (Pri	or if bei	ng demo	lished)				-8-10
Name of Monitoring EnviroVision C			Owner (8)	ASCN 0007			CONTRACTOR OF THE PARTY OF THE	of Aba Group	tement Cor	ntractor	(9)					
Street Address 20-21 Wagaray	w Rd, Build	ing 35E							Addres Hamb	ss urg Turn	pike						
City, State, Zip Coo										p Code							
Fair Lawn, NJ										lale, NJ (7403						
Project Manager fo Guillermo M M		irm			Telepho (973) 6	ne No. 536-914	5	11 000 000 000	hone N 710-9			License 01084					
Start Date (10) 6-23-2014 at 3	:30 pm		Schedul 6-30-2		mpletion	Date (11)			of OSI Group,	A Monitor							
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Date of Notification (1) 06 /	11 /	14			200,000	of Building	g Owner/Operator (son	2)	7 " " -			3	9
Agencies Notified	Type Not	ification			0.000000	Address	- 400 M	2	814 JUN 16				
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(NJAC 5:23-8)	justific	ation)		_	Name	of Contac	t	5	Télephone Num	ber/G	25.5		
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			10		FA	CILITY IN	IFORMATION						
Name of Facility Where		is Takin	g Place	e (3)				Type of Facility (1 10				
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Street Address									ivate and comme		uilding	ıs,	
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City (5)								Square Feet	# of Floors	BI	dg. A	ge	
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County (6)					Cour	nty Code (7)(STATE USE ONLY)	Current Use (Price	or if being demolis	shed)			
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Name of Monitoring Fir	m Hired by B	uilding (Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)		- 17 67			
Bio Terra Solutio	ns						ALL PRO MA	NAGEMENT LI	_C				
Street Address							Street Address						
P.O. Box 1224							27 Outwater	Lane					
City, State, Zip Code							City, State, Zip Co						
Union, NJ							Garfield, NJ						
Project Manager for Mo	onitorina Firm			Tole	phone	No	Telephone No.		License No.				
Rick Eustaquio	omtoring i iii	•			73-494		973-928-4888	ì	1188				
Start Date (10)		Sched	duled C	Comple	tion Da	te (1,1)	Name of OSHA M	onitor					
06/21	/14	1		355	5_/	7.0	ALL PRO MA	NAGEMENT LL	_C				
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☐ Facility Closed/Vaca	ated During E	ntire Pe	riod of	Abate	ment		27 Outwater	Lane					
☐ Abatement Perform							City, State, Zip Co	ode					
Time of Abatement:	AM	PI	M/	PM		AM	Garfield, NJ						
Scope of Work (Check	all that apply)											
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			-	enovat emoliti			☐ Mini-End ☐ Glovebag	tainment with Neg losure g Procedure mpted (*) and Nor		ге			
			ls	s Loca	tion						atem	ent T	vpe
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(13)			(12)	Forester		other miscellane		200 83899 \$7	1 -		late	co.
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ASB-41				-			- Jan	- or pre-		1	1	/	- 100
JAN 13		*	Do no	t use tl	nis form	for asbest	tos licensure exemp	oted activities.		33			

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

Date of Notification (1)				N	Name of	Building (Owner/Operator (2	2)	And the second	1.00 1.4		1	
6/	12 /	14			BWP	School I	Partners, LLC) <u>L</u>	, bed	_
Agencies Notified ⊠ EPA	Type Notification	on	72	5	Street A	ddress Iain Stre	et		2814 JUH	16	Piń	5: 3	. !
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□ DCA			ng	-		f Contact		70	Telephone Nambe	FUF F	311	16	\neg
(NJAC 5:23-8)	justification Cancellation	3				Felczak			Tologo G		. •		
					FACI	LITY INF	ORMATION						
Name of Facility Where A	hatement is Ta	king Pla	ce (3)				Type of Facility (4)				
Lady Liberty Acade				6				School (K-12))				
	my onartor c		-					Subchapter 8	(Other than K-12) ivate and commerc	ial build	linas		
Street Address 746 Sanford Ave								homes, etc.)					
City (5)								Square Feet	# of Floors		. Age	9	
Newark								19,000	1	50)		
			_	-	Count	Code (7)	(STATE USE ONLY)	Current Use (Pri	or if being demolish	ned)			
County (6)					Count	, (,		Charter Sch	ool				
Essex		_	(0)		100111	la I	Name of Abatem	ent Contractor (9)					
Name of Monitoring Firm		ng Own	er (8)	1	ASCM N								
Health & Safety Ser	vices Inc				00117	/	Superior Aba	atement nic			-		-
Street Address							Street Address						
318 12th Street							2 Henderson	Drive					
City, State, Zip Code							City, State, Zip C	ode					
Hammonton NJ 08	037						West Caldwo	ell, NJ 07006					
Project Manager for Mon				Tele	phone N	√o.	Telephone No.		License No.				
	itoring : iiiii				09) 704		(973) 808-16	16	00411				
Jim Proctor	16	chedule	d Cor				Name of OSHA						
Start Date (10) 06 /14 /	10000				/ _		Superior Ab						
Occupancy Status Durin		heck or	alv on	e)		-	Street Address						
☐ Facility Closed/Vacat	g Abatement (C	a Dariad	of Al	hater	ment		2 Henderson	n Drive					
□ Abatement Performer	d Outside of No	rmal Fa	cility	Hour	s - Desc	cribe	City, State, Zip C						
Time of Abatement:	AM	PM/_	———	PM-	/	AM		ell, NJ 07006					
Scope of Work (Check a			-					-755					
Scope of Work (Official a	ii (iiat appi))							ntainment with Ne	gative Pressure				
≥3 sf or ≥3 lf			Ren				☐ Mini-Er	an Procedure					
☐ ≥160 sf or ≥260 lf		L	Dem	ionuc	311		☐ Non-Ex	empted (*) and N	on-Friable Procedu	re		42	
			ls l	oca	tion						ateme	ent Ty	ype
Location	n of			orma			Description	of		ZD.	Z,	ш	ш
Asbestos-Containing		1)			ely by	Asbe	estos Containing M	laterial (ACM)	Amount (Specify	Removal	Repair	าса	Enclosure
TO BE AB	ATED				ance/ Staff?	(i.€	e., thermal system surfacing, VA	s insulation,	SF or LF)	ova	=	psu	Sur
IN Faci			00011	(12)			other miscellar			-		Encapsulate	е
(13)		Y	es	No	N/A						_	_	_
Basement		D	I			Pipe In	sulation		225 LF	10			
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Name of Registered Wa	ste Hauler			1 1 1	NJDEP		Cubic Yards of	Name of Reg	istered Landfill				
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City, State							Disposal Date	City, State					
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Completed By (Print or	Type)	Title	200				Signature		////	Ĉ - l	1	1	U
Nick Petrovski		Pre	side	ent		75		Ulalle	- Cry	0 ~	2	$=$ \downarrow	7

ASB-41 MAY 11

^{*} Do not use this form for asbestos licensure exempted activities.

D&S Proj. #: 14-232

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





Date of Notification (1)	Name of	Building Owne	r/Operator (2)			2614 .11	N 16 PM	5:	: 1		
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Agencies Notified Type Notificatio	n Street Ad	ddress				D ontF	113 00	HTF	m		
☐ EPA ☐ Initial ☐ Amended	179.5	SCOTLAND I	ROAD			~ &	LICENSU	NR.	3 5	72	
DEP Amendment #:		te, Zip Code				~@		-503		-	
DOL Emergency	- so (ORANGE, NJ	07079								
DOH (including	Name of					Telephone	e Number				
justification)						٠ احد	6				
Cancellation	DAN	HELLE KINC				 -		_	_		=
		FACIL	ITY INFORM	ATION				-54			
Name of facility where abatement is	taking place (3)					Type of Facility (4)				
5						1 =	I (K - 12)			21	
DANIELLE KING							apter 8 (Other Private/Comr			2)	
Street Address			·				Homes, etc.	Hercia	aı		
170 SCOTLAND ROAD						Square Feet	# of Floors		Bldg	. Ag	е
City (5)	County (6)			Coun	ty Code (7)		4				
o.iy (o)				(State	e use only)	Current Use (P	rior if being de	emoli	shed)	
SO. ORANGE	ESSEX								_		
Name of Monitoring Firm Hired by B	lldg. Owner (8)		ASCM No.		Name of Abatemen	t Contractor (9)					
					(
Street Address					Street Address						
City, State, Zip Code					City, State, Zip Code	Э					
							T				
Project Manager for Monitoring Firm		Phone Numb	er		Telephone Number		License Nu	mber			
				-	Name of OSHA Mo	nitor		_	-		
Start Date (10)	Sched. Com	pletion Date (11)		Name of OSHA MO	intoi					
06/26/14	07/11/14				Street Address			_		-	
Occupancy Status During Abatemen		e)	- Court is a second								
Facility closed/vacated during				11	City, State, Zip Cod	e		700			
Abatement performed outside	of normal facility	hours-									
Describe:				_							
Scope of Work (check all that apply)					Full Containment	w/negative pre	essur	e		
	Renovation					Mini-enclosure					
	Demolition				₽	Glovebag procedu Non-Exempted (*)	ire Land Non-fria	hle n	racer	iure	
≥160 sf or ≥260 lf		nally used solely	,			Non-Exempled ()	And Non-ma		R	E	
Location of asbestos-containing	by maintenance	e/custodial	1	ion of as	sbestos-containing	Amount	6		e	n	E n
material (acm) to be	staff(12)		material		spesios containing	(Specify	SF or	300	a	c a	C
abated in facility (13)	Yes N	lo N/A				LF)	\			p	L.
D A CULATINE			PIPE INSU	ПАТІ	ON	1601ft		1	t		
BASEMENT First Floor			PIPE INSU			10 l ft		3 1			
			PIPE INSU			91 ft		3 [
Second Floor			I I L L L L L L L L L L L L L L L L L L						1		
							Ī	7 1	1		
Registered Waste Hauler	NJDEP Ha	auler ID# I C	ubic Yards of	Waste	Name of Register	ed Landfiil		- 1-			
D & S RESTORATION, INC	13506		2 yds		TULLYTOWN	N RESOURCE RI	ECOVERY	-			_
City, State		Disposal			City, State						
PATERSON, NJ 07503		06/27/1			TULLYTOW	N, PA	Tp.				
Completed by (Print or Type)	Title		Signature				Date 06/09/14	6			
BOGDAN JOLDZIC	PRESIDENT						00/03/12			-	

(K 006183

D&S Proj. #: 2014-233

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





													1		
Date of Notification (- 11				Operator (2)						•	حيونا		
Agencies Notified	Type Notificat	ion		YS GRIM	M					2014 111	MIC	ри с			
	Initial	IOII St	treet Add	iress								111			
3.000 S. 1000	Amended	11.		TYRTLE A		ENUE				$f_{\mathcal{E}} \circ \phi \circ \nabla \nabla \nabla$	THE	יחווי	Des	3	
_	Amendment #:	<u> </u>	ity, State	e, Zip Code						P. & 1	JCEN	SING	7 - 1		
☑ DOL ☐	Emergency		PLAIN	IFIELD, N	NJ (07061				و قد ا		U1.10			
☑ DOH	(including	Na	ame of C	ontact						Telephon	e Numbe	er			
☐ DCA F	justification)	- 11	CLAD	YS GRIM	/N/					4	*				
	Cancellation		GLAL										-	_	
Name of facility who		a takira ala	es (0)	FAC	CILI	TY INFORM	ATION		11	Type of Facility	(A)				
Name of facility who	ere abatement i	s taking pia	.ce (3)								(K - 12)			
GLADYS GRIM	ИM				55					Subch	apter 8 (Other th	nan K	-12)	
Street Address				-					7		(Private/C			50.000 M	
104534557									1 -	•	Homes,				
1845 MYRTLE	AVENUE	T 0	÷. (0)						=	Square Feet	# of Floo	ors	ы	dg. A	ge
City (5)		Coun	nty (6)					nty Code (7) te use only)	1 -		des if hel		- 11 - 1-	-1\	
PLAINFIELD		TIN	ION				(Sia	te use only)		Current Use (P	rior it bei	ng aem	IOIISTI	ea)	
Name of Monitoring	Firm Hired by				T	ASCM No.	-	Name of Abateme	ent Co	ontractor (9)				-	
ranio or morniornig	, min rimed by	Diag. Omic	, (0)		1	AGOIVI IVO.									
Street Address								D & S RESTO	JKA.	TION, INC.					
Street Address									A						
City, State, Zip Code					_			20 California City, State, Zip Co	-					-	
City, State, Zip Code								1000							
5 111	W 11 7 F			D	_		_	Paterson, NJ)3	Thisans	Numb	.01		
Project Manager for	Monitoring Firm	1		Phone Num	iber			Telephone Number 973-345-80			License)1169	er		
								Name of OSHA M			<u> </u>	11109			
Start Date (10)		Sched	. Comple	etion Date (11)			D & S Restor							
06/19/14		06/30)/14					Street Address	latioi	i, mc.				- Annual	-
Occupancy Status D	uring Abatemer			COLUMN TO SERVICE STATE OF THE			-	20 California	Ave	nue					
Facility closed	/vacated during	entire perio	od of aba	atement.				City, State, Zip Co				-			
	rformed outside	of normal f	acility ho	ours-											
Describe: Other-Describ	NORMAL H	IOURS			_		-11	Paterson, NJ	0750	03					
Scope of Work (che										Il Containment v	v/negativ	nress	ure		
>3 sf or >3 lf		,, Renovatio	n							ini-enclosure	miogani	o prooc	0.0		
									THE R. P. LEWIS CO., LANSING, MICH.	ovebag procedu	re				
≥160 sf or ≥26	50 lf	Demolition								on-Exempted (*)	and Non		_	edure)
Location of		Is location by mainte		ly used sole	ely							R	R	E	E
asbestos-cont		staff(12)	Hallce/C	ustoulai				sbestos-containing	g	Amount (Specify S	SE or	m	p	n	n
material (acm) abated in facil			Na	T	-	material (ACM)			LF)	or Oi	0	a	а	C
	, (- /	Yes	No	N/A								e		р	-
BASEMENT			X			PIPE INSU	LATI	ON		102 L FT		X			
					T										
					7		-	***************************************							
					+				-	1		TIT	П	П	T
				7	+							TH	Ħ	F	T
Registered Waste Ha	auler	NJDE	EP Haule	er ID#	Cul	oic Yards of V	Vaste	Name of Registe	ered L	andfill		- []			1-
D & S RESTORA		135			1 3	YD				ESOURCE RI	ECOVE	RY			
City, State				Disposal		te		City, State							
PATERSON, NJ	07503		201 2	06/20/				TULLYTOW	VN, P	'A			_		
Completed by (Print		Title				Signature					Date				
BOGDAN JOLD	OZIC	PRESID									06/09	/14			
ASB-41		* Do not use	e this for	m for asbes	stos	licensure ex	empte	d activities.							

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

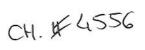
Ck#2632

										1000	6	D	05.00	
Date of Notification	(1) 6/10/14						Owner / Operato MUNICATIONS		4		À			
Agencies Notified EPA	Type Notifica	ation		Stree	et Ac	dress	5 555		JUN 16 1	DM C.				
	N 1.30-1						n Orange Aven	ue Loss	JUN 10 1	III U	1.			(3)
DEP	☐ Initial					te & Zip (
□ DOL	Amer						New Jersey	It saf	<u> </u>	OUTE	101			
□ DOH		gency	1			Contact			& LICEN	Te	lepho	ne N	IImp	er
DCA	☐ Cano	ellation		ALE	ХВ	AYLOR		<i>39</i>	a LIOLIN		_		'	
						•								
Name of Facility Wh	nere Abateme	ent is Taking P	lace (3	3)			Type of Facili	ity (4)						
South Orange Co	entral Office	9					School (I	K-12)						
Street Address	**						☐ Subchap	ter 8 (Other th	nan K-12)					
125 West South	Orange Ave	nue						e. private & co		uildinas	, hom	es. e	etc.)	
							Square Feet				g. Ag	_	,	
City (5)		County (6)	Co	unty	Coc	de (7)	36665		4			75		
South Orange		Essex					Current Use (Prior if being	demolished)				
							Verizon cor	nmunicatio	n center					
Name of Monitoring	Firm Hired b	v Building Owr	ner (8)	_	TA	SCM No						_		
TTI Environment		, canaling own	101 (0)		1	ioom i ii		NVIRONME						
Street Address		-					Street Addres							
1253 North Churc	ch Street							ER STREET	Š.					
City, State & Zip Co			100000				City, State &	A STATE OF THE PARTY OF THE PAR						-
Moorestown NJ							BRISTOL, F							
Project Manager for	CHANGE COLUMN	irm	Teler	ohone	e Nu	ımber	Telephone No	S APRICALL DELINAS PROPERTIONS	Licer	nse Nur	nber			
Harold Baldwin			908-				215-788-604	10			0050	9		
Scheduled Start Da	te (10)	Scheduled Cor			ate (11)	Name of OSH							
7/7/14			7/18					NVIRONME	NTAL INC					
Occupancy Status I		ment (Check of During Entire P			ata	mont	Street Addres							
The state of the s				OI AL	Jalei	Hent		ER STREET	······································			-		
		utside of Norm	aı				City, State &	1.0						
	5:00 PM -						BRISTOL, F	A 19007						
Scope of Work (Che	upied During													
Scope of Work (Che	eck all that ap	ppiy)						Full Co	ntainment v	vith Nec	ative	Pres	ssure	4
☐ ≥3 sf or ≥3 l	f		\square	Re	nov:	ation			nclosure	,,,,,,,,,,	,			
≥160 sf ≥26					moli				Bag Procedi	IIFAC				
2 100 SI 220	0 11		Ш	De	HOI	ition			xempted and		riable	Dro	codu	ıro
					41		Description		Amou					
7.00	ocation of os-Containin	~	0.000	Loca nally			Description Asbestos-Con		(Spec		ADE	nem	ent T	ype
	erial (ACM)	g		olely		iu	Material (A		SF or				Е	9.00
	BE ABATED			tenai		or	(i.e., thermal s		0, 0,	LI)	Re	Z	nca	l E
	Facility		Cust			3/2//	insulation, surfac				Remova	Repair	squ	dso
	(13)			(12)			or other miscella				val	=	Encapsulate	Enclsoure
			Yes	No	N.	/A		20 ± 240±0300 (± ± ± ± ± ± ± ± ± ± ± ± ± ± ± ± ± ±					6	"
Basement Stairw	ell		\boxtimes	П	Τr	7	VAT & Ma	stic	180 9	SF		П	П	П
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Basement Boiler	7.0		X	H	+=	-	VAT & Ma		1000			Ħ	Ħ	Ħ
Basement Meter			X	H	十片	1	VAT & Ma		800 8			Ħ	Ħ	Ħ
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Name of Registered	Waste Haule	er l		N.	IDE	P Waste	Cubic Yards	Name of Reg	nistered Lan	dfill				
Traine of registered	vvasto maan	51		100000		r ID No.	of Waste	Traine or res	giotorou Eur					
SERVICE TRANS	PORT GRO	UP, INC.			20	0990	21	MINERVA	LANDFILL					
City, State							Disposal Date	City, State		-				
NEW CASTLE, DI	E 19720						TBD	WAYNESB	URG, OH					
Completed By (Print	or Type)			100	tle		Signature		, ,	1.5	Date	3000		
Patrick T. DeCard				E	stin	nator	Patrick	11 1000	. 10		6/10/	14		
							Tarrick	1. D'Car	0/7					

CH# 4557

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06/11/2014					Bullaing (jh Dickii										÷	أسأ
Agencies Notified Type	Notification		+	Street Ad	Idress						2014	JUN	16	р	¥ 5	
EPA X	Initial				adison A											- 23
X DEP X DOL	Amended Amendment				e, zip co in, NJ 0						4⊃d \$	531		CC	:17	≘∩†
× DOH	Emergency (justification)	including		Name of						Fel	ephone	Numb	4-1	¥01	46	
DCA DCA	Cancellation				Sorczyc											
Name of Facility Where Abater	ment is Takin	g Place (3))	FACIL	ITY INFO	RMATI	ON	Туре	of Facility (4)						
Science Building		ft.							School (K-12	2)						
Street Address				: W					Subchapter 8 Other (i.e. pr	(Oth	er than I	K-12) ercial l	huild	inas	home	20
285 Madison Ave								(etc.)			Croidi i				0,
City (5) Madison								Squar	re Feet	# 0	f Floors		BI	dg. A	ge	
County (6)	-			County C				Curre	nt Use (Prio	r if be	ng dem	olished	<u> </u> i)			
Morris				(STATE U	ISE ONLY)		_									
Name of Monitoring Firm Hired	d by Building (Owner (8)		ASCM	No.				tement Cont pany, Inc		(9)					
Street Address			a e	1	***		Street									
5434 King Ave									t Ave							
City, State, Zip Code Pennsauken, NJ 08109									ip Code I 07011							
Project Manager for Monitoring Tom Pruno			Telephor	ne No.		Teleph 973-2	one No 253-8			Licens 0070						
Start Date (10) 06/23/2014	Schedule 06/26/2	d Con	npletion [Date (11)			of OSH	HA Monitor								
Occupancy Status During Aba	tement (Chec						Street									
Facility Closed/Vacated D Abatement Performed Ou Other – Describe:	Ouring Entire I	Period of Anal Facility	baten	nent		_	City, S	tate, Z	ip Code			-				
Scope of Work (Check All Tha	t Apply)											+				
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf			enova emolit				×	Mir	II Containme ni-Enclosure ovebag Proc n-Exempted	edure					a	
		ls	Locati	ion				140	II-Exempted	() ai	u 14011-1	Habie		Abate	ment	
Location of		N	lormal d Sole	ly			scription		u fla 😙			-		Ту	ре	
Asbestos-Containing Mate TO BE ABATED	rial (AÇM)	Mai	intena	nce/	Asbes (i.e.	tos Cont thermal	taining M system:	Material s insula	I (ACM) ation,		Amount Specify		R	71	Enc	En
In Facility (13)		Cusi	odial ((12)	otan?			cing, VA niscellar			S	F or LF)		Removal	Repair	Encapsulate	Enclosure
, san		Yes	No	N/A				,					<u>a</u>	_	late	лге
Room S-2A			X			VA	T/Mas	tic		3	08 SF	2	2			
		-			Т	ransite	9		1	00 SF	>	<				
				Pipe	insula	tion "w	/гар 8	k cut"		50LF	2	2				
Name of Registered Waste Ha	auler			IJDEP W lauler ID		Cubic of Wa	Yards		Name of F	Regist	ered Lar	ndfill				
Newark Carting Inc				5409	110.	OI VVa	316		GROWS	3						
City, State Newak, NJ				Dispos	sal Date	12	City, State Morrisvi		'A .				3,500			
Completed by Voytek Roszkowski	dent			S	Signature	1	Osko	اح	. 0	Date 06/		014				



State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

51		N			o NJAC 8			ENI		S.	39				
Date of Notification (1) 06/11/2014		71.50	100	Name of Passaid	Building C)wner/Op	erator (2)			F 3700		*	L. I.	ف
Agencies Notified	Type Notification	1		Street Ad 390 Gre	dress egory Av	ve					2014 JUN	16	PM	5:	111
EPA DEP DOL	Amended Amendmer				e, Zip Coo c, NJ 07					<i>,</i>	30ES/		~,~,	TE	77
⊠ DOH □ DCA	justification Cancellatio)	1	Name of Russel	Contact Albrech	ıt				₹Īė́Ι	ephone Num	ber in	JIN	G	
		<u> </u>		FACIL	ITY INFO	RMATIO	N		-	<u> </u>					_
Name of Facility Where A William Cruise Men									of Facility (4) School (K-12				9¢		
Street Address 390 Gregory Ave									Subchapter 8	(Oth	er than K-12 & commercia) Il build	ings,	home	s,
City (5) Passaic									e Feet	#0	f Floors	ВІ	dg. A	ge	E
County (6) Passaic				County C	ode (7) SE ONLY)			Curre		r if be	ing demolish	ed)	Į.		
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCM	No.	1.0			tement Cont pany, Inc	ractor	(9)				
Street Address			ı				Street A	Addres	SS						
City, State, Zip Code			7				City, St	ate, Zi	p Code 07011				2010-000		
Project Manager for Mor	nitoring Firm		T	Telephor	ne No.		Telepho	one No	o.		License No	ο.			
Start Date (10) 06/25/2014		Schedule		npletion [Date (11)		ARIKACIAGOA	of OSH	HA Monitor		100.01				
Occupancy Status Durin	a Abatement (Ch						Street								
Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire	e Period of A	baten						ip Code						
Scope of Work (Check A	All That Apply)	-							-						
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf			enova emolit				×	Mir Glo	ni-Enclosure ovebag Proc	edure	h Negative P			e	
		Is	Locati	ion		197 <u>— 19</u> 10						_	Abate	ement	
Location	n of	l N	ormal	ly		Des	cription	of					Ту	pe	
Asbestos-Containing TO BE AB In Faci (13)	ATED)	Mai Cust	d Sole ntena odial ((12)	nce/ Staff?		tos Conta thermal s	aining M systems ing, VA	aterial insula T, or		(Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A											
Exter	ior		×		W	/indow/[Door c	aulki	ng	5	581 LF	х			
Name of Registered Wa Newark Carting Inc	ste Hauler			J JDEP W lauler ID 5409		Cubic \ of Was			Name of F		tered Landfill	1			
City, State Newak, NJ						Dispos	al Date	-	City, State Morrisvi		РА				

Date

06/11/2014

Signature

Title

President

Completed by

Voytek Roszkowski

^{*} Do not use this form for asbestos licensure exempted activities.



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(Z)
C. C. C.

EPA Initial Amended Amendment # Emergency (including justification)	City, State Short Hi Name of C VJ Ayni	C Parkway e, Zip Code ills, NJ 07 Contact	7708	Type of Facility School (K-	107	5/45	m	UT			
Amended Amendment # DOL Amendment # Emergency (including justification) Cancellation Name of Facility Where Abatement is Taking Place (3) Street Address 110 South Street	Short Hi Name of C VJ Ayni	ills, NJ 07 Contact Iian			Tejephone N	5/45	m	UT			
Name of Facility Where Abatement is Taking Place (3) Street Address 110 South Street	VJ Ayni	lian	MATION		(4)	Imner (~	1401	MG	- 1		
Name of Facility Where Abatement is Taking Place (3) Street Address 110 South Street			MATION		107				1		
Street Address 110 South Street					107		,				
110 South Street				School (K-12)							
		Subchapter 8 (Other than other (i.e. private & commetc.) Square Feet # of Floors						home	s,		
City (5) Morristown	County Code (7) Current Use (Prior if being dem						dg. A	ge			
County (6) Morris		ode (7) SE ONLY)		Current Use (Pr	ior if being demoli	ing demolished)					
Name of Monitoring Firm Hired by Building Owner (8)	ASCM	No.	1 P 30 (00000 10 0000	of Abatement Co Company, In							
Street Address 5434 King Ave			Street	Address Piaget Ave							
City, State, Zip Code Pennsauken, NJ08109	***************************************		City, S	State, Zip Code on, NJ 07011							
Project Manager for Monitoring Firm	Telephon		Telepi	none No.	License	No.					
Tom Pruno Start Date (10) Scheduled Cor	888-306			253-8828 of OSHA Monito	00704						
06/11/2014 06/17/2014		ato (11)		Company, In							
Occupancy Status During Abatement (Check Only One)			Street	Address							
Facility Closed/Vacated During Entire Period of Abater Abatement Performed Outside of Normal Facility Hour Other – Describe:			City, S	State, Zip Code	~						
Scope of Work (Check All That Apply)			_								
≥3 sf or ≥3 if			E	Mini-Enclosu Glovebag Pr	re ocedure	h Negative Pressure e nd Non-Friable Procedure					
. Is Loca	tion			_ //orr Example			Abate	ement			
Location of Norma	ally		Description	n of		Precial buildings, homes, Bidg. Age Dished) Pressure Priable Procedure Abatement Type Removal X X X X X					
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Used Soli Maintena Custodial (12)	ance/ Staff?	(i.e. th	s Containing I permal system surfacing, V other miscella	AT, or	Amount (Specify SF or LF)	Remova	Repair	Encapsula	Enclosure		
Yes No	N/A							ਿੰ	(0		
Various locations	х	Pipe in	nsulation "\	wrap & cut"	80 LF	x					
Various locations	Х	Duct i	nsulation "	wrap 7 cut"	290 SF	x					
	Х	Co	ntaminate	d debris	2 CY	х					
2nd Fl	Х	- NAME OF THE RESERVE	oe insulatio		10 LF		Х				
	NJDEP W Hauler ID	0.0000000000000000000000000000000000000	Cubic Yards of Waste	GRO\	of Registered Land NS	lfill					
City, State Freehold, NJ			Disposal Date		ate sville, PA				-		
Completed by Title Voytek Roszkowski President	t		Signatu		, , , , , ,	Date 06/10/:	2014	9			

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

*** Sub Chapter 8 ***

Check # 6579	
16 PM 5: 69	
re coutro!	
CENSING .	
Telephone Number	
Type of Facility (4) School (K - 12)	
Subchapter 8 (Other the Comme	
Bldgs./Homes, etc. Square Feet # of Floors	Bldg. Age
Current Use (Prior if being dem school	nolished)
Contractor (9)	
on, Inc.	
oad	V
NJ 07035	
License Num 00378	ber
tor	
on, Inc.	28
oad	
J 07035	11
native pressure Glovebag p Non-friable	
Amount m (Specify SF or o v	R e p a i r
2,400 sf 🗶	
750 sf 🗶	
230 sf 🗶	
Landfill	
	week cost

D / 5N-05-6-	- (4)															
Date of Notification		111			er/Operator (2)										
10 16 1/11 10		amazan da ar	Noodlar	nd Park E	BOE		9614 IIIN I	6 PM 5: 69								
Agencies Notified EPA	Type Notification		eet Addre	ss Bride Ave	enue			e coutro	; 1							
☐ DEP	✗ Initial	11 -	ty, State, Z		- Inde		9 1 11	ENSING	1.							
X DOL	☐ Amendm				NJ 07424	. 5	a LI		1 = 1							
X DOH	_	Na	me of Cor	ntact				Telephone	Number							
☐ DCA	Cancella	tion	Jack W	ittig						_==						
				FACI	LITY INFORM	MOITAN	1									
Name of facility w	here abatement is	taking pla	ce (3)					Type of Facility (4								
Beatrice Gilm	ore Elementa	ry Schoo	I	AL 1.*				=	(K - 12) apter 8 (Oti	ner th	an K-	12)				
Street Address			-						Private/Co		cial					
1075 McBrid	e Avenue								Bidgs./Homes, etc.							
City (5)		Coun	ty (6)			1	inty Code (7)									
Woodland P	ark, NJ 07424	Pas	saic			(Sta	ite use only)	Current Use (Pr school	ior if being	demo	olishe	d)				
Name of Monitorin	ng Firm Hired by E	Bldg. Owne	r (8)		ASCM No.	-	Name of Abatement C	ontractor (9)								
Briggs Asso	ciates				0004		B & G Restoration	on, Inc.								
Street Address							Street Address					30.54				
3 Crosswick	s Street						105 Ryerson Ro	oad								
City, State, Zip Coo Bordentown	de i, NJ 08505						City, State, Zip Code Lincoln Park, N	IJ 07035								
Project Manager fo	or Monitoring Firm		Pi	none Numb	er	_	Telephone Number		License N		er					
Michael Hoo	odak		60	9-298-5	520		(973)696-6869		003	3/8	_					
Scheduled Start Da	ate (10)	Sched	Completi	on Date (1	1)		Name of OSHA Monitor B & G Restoration									
06/26/2014		07/1	7/2014				Street Address									
Occupancy Status							105 Ryerson Ro	ad								
Abatement p	ed/vacated during performed outside	entire perion of normal f	od of abate acility hou	ement. rs-	City, State, Zip Code											
Describe: Other-Descr	ibe: work shift	8:00am -	4:30pm			LincolnPark, NJ 07035										
Scope of Work (c																
Demolition	X	Renovatio	n			X F	Full Containment w/nega	ative pressure	Gloveb							
>3 sf or >3 l	f 🗶	≥160 sf or	≥260 If				Mini-enclosure	[Non-fri			dure				
Location of		Is location	normally	used solel	у					R	R	E n	E			
asbestos-co		by mainte staff(12)	nance/cus	stodiai			asbestos-containing	Amount (Specify S	F or	m o	р	С	n			
material to babated in fa		Yes	No	N/A	materia	(ACIVI)		ĹF)		v e	a i	a p	L			
Rooms 101, 10	02, 103			X	VAT			2,400 sf		X						
Room 104				X	VAT & m	nastic		750 sf		X	닏	브	卄			
Rooms 201, 202, 20				X	VAT			4,750 sf		X	부	무	님			
Teacher's Roo	m			X	VAT			230 sf		X	님	부	H			
					Subje Vende	(\N/oct-	Name of Registered I	andfill		Ш	Ш	Ц.				
Registered Waste B & G Restora	Hauler ation, Inc.		P Hauler 19563		Cubic Yards of 25	vvaste	Tullytown F	Resource & Re	ecovery (Cent	er					
City, State Lincoln Park,	NJ			Disposal I 06/2	Date 26/14 - 07/1	8/14	City, State Tullytown, F	PA								
Completed by (Pri		Title		1	Signature		(0, (0		Date							
Gordana Lun		Secreta	ry/Treas	urer	_	Gordana Luna					06/10/2014					

1	
P. 108	
1 2 V	

Date of Notification (1)	. /			Building O	wner/C	perator (2	2)			:0	i				
6/11/1	4		P.S.E.	G.			921.								
Agencies Notified	Type Notification		Street Ad 4000 H	ddress HADLEY	ROA	D	2014	JUN 16	PH	5: 7	• ;				
EPA DEP	Initial Amended	İ	City, Sta	te, Zip Coo	le		44 J G		Mou	7					
X DOL	Amendment #_ Emergency (in	cluding	SOUT	H PLAIN	FIELD	D, NJ 07	080 🧞 🦼	& LICEN		j.	10 (8)				
ĭ DOH	justification)	cluding		Contact	0	0.,	1	Telephor	ie Num	ber	١.		_		
DCA	Cancellation			HN		RAD	ley					1	70		
Name of Facility Where	Abatement is Taking	Place (3)	FACI	LITY INFO	RMATI		Type of Facility (4)	-						
PSEG	Abatement is Taking	riace (S)				1	School (K-1	100							
Street Address							Subchapter	8 (Other tha			2 (1)(1)(1)				
13 VAN	J VLIE	1	e fa				Other (i.e. p etc.)	rivate & con	mercia	al build	lings,	home	s,		
City (5)/							Square Feet	# of Floo	rs	BI	idg. A	ge			
	TON						18,248			FR	1×	3.0	RS		
County (6) PASS	AiC		County (USE ONLY)			Current Use (Pric	TCH		PA 7	Tin.	U			
Name of Monitoring Firm	* C - C - C - C - C - C - C - C - C - C	wner (8)	ASCM	No.		Name o	f Abatement Cor		0	11 /	70.				
ENVIRONMENTAL	TACTICS		004	5		UNIQ	UE SYSTEMS	S OF AME	RICA	١					
Street Address 64 BROAD STREE	Т					Street A	Address VHITEHEAD A	AVE.							
City, State, Zip Code						City, Sta	ate, Zip Code								
MATAWAN, NJ 077						1	TH RIVER, NJ	J 08882 License No.							
Project Manager for Mor TOM GEIGER	itoring Firm		Telephor 732-29	ne No. 92-2217		732-4	one No. 32-8350		ense No	D .					
Start Date (10)	14	Scheduled Co	mpletion	Date (11)			of OSHA Monitor	S OF AME	RICA						
Occupancy Status Durin	g Abatement (Check	Only One)	10/1	7		Street A									
_	ated During Entire Pe		ment			396 W	VHITEHEAD A	AVE.							
Abatement Perform	ed Outside of Norma	I Facility Hour	rs	. +	0.		ate, Zip Code								
	ecupied by	necessari	y aprice	WAS OF	7	SOUT	TH RIVER, N.	08882							
Scope of Work (Check A	II That Apply)	_	П												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renov Demoi				H	Full Containme		ative P	ressur	е				
		L Demoi	illidori				Glovebag Prod	cedure		_					
						M	Non-Exempted	d (*) and Nor	and Non-Friable Procedure						
41		Is Loca						-				ment pe			
Location Asbestos-Containing	마루테 마시 그러워서 하시면 내려가 있다.	Norma Used Sol		Achect		scription of	of aterial (ACM)	Amour	nt			_			
TO BE AB		Maintena Custodial			thermal	l systems	insulation,	(Specif	fy	Re	Z	ince	Enc		
In Facil	ity	(12)				cing, VAT miscellane		SF or L	F)	Remova	Repair	Encapsulate	Enclosure		
(10)		Yes No	N/A		Outer 1	moochan	2003)			/al	=	late	ıre		
	0		. IN/A	0.0	1.	1.2.	. 0			-					
SOUTH SIDE (LONTROL BING	X	-	ACI	19	WiN.	DOW CAULK	52	LF	\wedge			-		
			+						-		-				
Name of Registered Was	ste Hauler		NJDEP W	/aste	Cubic	Yards	Name of	Registered I	andfill						
WASTE MANAGEM	ENT		Hauler ID 1125		of Wa	iste 5	GROW	S NORTH	I						
City, State ELIZABETH, NJ					Dispo	sal Date	City, Stat	e ISVILLE, F	PA						
Completed by		Title	1,52					te_							
CAROL RAIMO		OFFICE	MGR.			are	el Xac	ma		6/1	11/	1.9	4		



Date of Notification (1) 5/7/14	Name of Building Owner/Operator (2) Marx Realty and Improvement Co., Inc. 2914 JUN 16 PH 5: 13																	
Agencies Notified	Type Notifi	cation		-	Street A		на шрг	overn	ient C	o., inc. 7	814	IUR !	o r	П	J. 1	Ú		
	[Sec.]	Cation					21st F	loor				1016	0.0	٠,٠	T E	n:		
EPA DEP DOL	Initial Amen	ided		ŀ	City, Sta	te, Zip Co	ode			100		LIC						
DOL		dment a	#3 including		New Y	ork, NY	10017	-4146		To	U	L L. ()					, to	
DOH DCA	justific	cation) ellation	ricidality			Contact e Starr					Tele	ephone		er D				
Name of Carlle MA	, ,	<u></u>	DI (0		FACI	LITY INF	ORMATIC	NC										
Name of Facility Where No name	Abatement is	aking	Place (3)						of Facility (4)								
Street Address										School (K-12) Subchapter 8		er than I	K-12)					
3607 Bergenline Av	ve.								×	Other (i.e. pri	vate 8	comm	ercial I	ouilo	lings,	hom	es,	
City (5)										etc.) ire Feet	# of	Floors	-	В	ldg. A	Age		
Union City									30,0	000	3			7		3		
County (6) Hudson					County (Code (7) JSE ONLY)				Prior if being demolished)							
Name of Monitoring Firm		ilding C	wner (8)		ASCM	1 No.		Name		tement Contr					-			
Vertex Air Quality S	Services									nvironmen			s, Inc					
Street Address 700 Turner Way, S	uite 105		55000						Addre East	ss Union St.		1						
City, State, Zip Code		-						City, S	State, Z	ip Code	<u> </u>							
Aston, PA 19014			rickeler comment					Wes	t Che	ster, PA 19	382							
Project Manager for Monitoring Firm Don Heim					Telephor 610-55	ne No. 58-8902			none N 701-9			Licens 00508						
Start Date (10) Scheduled C 8/1/14					npletion (Date (11)		Name		HA Monitor								
Occupancy Status Durin	g Abatement	(Check	Only On	e)				Street	Addre	SS			-	_				
Facility Closed/Vac										er Way								
Abatement Perform Other – Describe:					City, State, Zip Code Aston, PA 1901													
Scope of Work (Check A	II That Apply)							-	_								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Princer	enova emolit	vation Dition				Mir Glo	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Proced								
			lo	Locati	ion				<u> </u>	n-Exempled (Non-F	riable		Abate		-		
Location	n of		N	lormal	ly		Des	cription	of			12		- 8		pe		
Asbestos-Containing	Material (AC	CM)		d Sole ntena			tos Conta	aining M	/ateria			nount				Ш	_	
TO BE AB. In Facil			Cust	odial 9 (12)	Staff?	(i.e.		ing, VA	T, or	ation,		pecify or LF)		Remova	Repair	псар	nclo	
(13)				(12)			other m	iscellar	neous)					oval	air	Encapsulate	Enclosure	
D 10 ::			Yes	No	N/A								Ш			6		
Basement Boiler a		ning	X				Therma		0.0.00	1		0 SF	X					
Basem			X				Pipe i				85	0 LF	X					
Baseme	ent		X				VAT	/Mas	tic		400	00 SF	X					
3rd Flo	loor				X		Р	laster			25	0 SF	X					
Name of Registered Was	te Hauler			10000	JDEP Wauler ID		Cubic Y of Wast			Name of Re	egister	ed Lan	dfill					
Richard Burns					9955	NO.	OI VVasi	.e		Western	Berk	s Com	muni	ty I	anc	fill		
City, State Philadelphia	City, State						Disposa TBD	al Date	1	City, State	/PA			50.2				
Completed by			Title				10000000000	grature	///	11/1/	_	Date						
Robert W. Casciato	t M. Casciato President					1///////						6/10/14						

Location of Asbestos-Containing Material (ACM)	1	Locat	1000000	Description of Asbestos Containing Material (ACM)	Amount (Specify		Abatement Type						
TO BE ABATED In Facility (13)	Ma	Solely I intena todial S (12)	nce/	(i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	SF or LF)	Removal	Repair	Encapsulate	Enclosure				
	Yes	No	N/A					ate	6				
2 nd floor			X	Pipe insulation	5 LF	X		\exists					
2 nd Floor			X	Floor tile	700 SF	X							
2 nd Floor			X	Plaster	300 SF	X							
Retail Storage			X	Duct Insulation	200 SF	X							
Basement			X	Contaminated surfaces	10,000 SF	X		1					
Basement			X	Contaminated Contents	300 CY	X							
						X							
						X							



Date of Notification (1)		Name of Building Owner/Operator (2) Regulation Official Control Contr											
115 130 1201	니	H 24217	cu luttin	but No	1919 1	for fee							
Agencies Notified Type Notification	3	Street Address	- 1		0-	三	7						
□ EPA D Initial		194 W	tarnox	4 1010	44KE KI	_ =	- 7						
☑ DOLWD ☑ Amended	,	City, State, Zip C			Santa Santa	72	9						
DOH Amendment #	No. of the last of	1250 . 1 11	LIVI		hici	9							
DCA Emergency (incl.		Name of Contact		î.	Telephone Number	er							
(NJAC 5.23-8) Cancellation	- 1		ack 10.	redek		.,							
		FACILITY IN	174		0.4	Ċ	-						
Name of Facility Where Abatement is Taking	Place (3)	- AOILIT III		Type of Facility (4)	- 7.1							
Kalifornia la la care de la servició	Rich	2 /	D. JEK	School (K-12)	.0	0						
Street Address	IVV.		C.FUGC.	Subchapter 8	(Other than K-12) ivate and commercial	ral huildings	9						
290 Hamburg Tu				homes, etc.)									
City (5)	į.			Square Feet	# of Floors	Bldg. Age							
Wayne NJ				15,000									
County (6)		County Code (7)	(STATE USE ONLY)		or if being demolish	ea)							
1'USSQ16			y humz										
Name of Monitoring Firm Hired by Building Ov	wner (8) A	SCM No.											
HET													
Street Address			Street Address	. 1	11 se ho.	Hagnes y 500							
25 N Pennell Ry			City, State, Zip Co		}								
City, State, Zip Code	101	363	TX KO	b / 1%	1434	٩							
Project Manager for Monitoring Firm		hone No.	Telephoné No.		License No.	10.							
ERIC Houseknecht		396-1133.	494 877	-0204	DILLE	Ì							
	led Completic		Name of OSHA M		10:10								
	120		9ms										
			Street Address	Lea-									
Occupancy Status During Abatement (Check Facility Closed/Vacated During Entire Period		ent		WHE 130	North								
Abatement Performed Outside of Normal F	Facility Hours	- Describe	City, State, Zip Co		, , - ,								
Time of Abatement: 1 V/AM-3:50PM.	/PM	AM		minson	NUT	0807	7						
Scope of Work (Check all that apply)													
∑ ≥3 sf or ≥3 lf	Renovation	2	☐ Full Con	tainment with Neg dosure	jalive Flessule								
2 ≥ 160 sf or ≥260 lf	Demolition		Gloveba	o Procedure	Edulu Burndun	8							
			☐ Non-Exe	mpted (*) and No	n-Friable Procedure	Abateme	nt Type						
	Is Locatio Normally		5				1						
Location of Asbestos-Containing Material (ACM)	Used Solely	221	Description of tos Containing Ma		Amount	Repair	Enclosure						
TO BE ABATED	Maintenand	ce/ (i.e.	, thermal systems	insulation,	(Specify	air	osu						
IN Facility	Custodial St (12)	aπγ	surfacing, VAT other miscellane		SF or LF)	=	re lat						
(13)	Yes No	N/A	Other Hiscenarie	ous)			0						
		D 7	ST	- 120 - 31 - 32	200 LF	X -							
					379 / F								
Muchanial Space													
			Outin Vande of	Name of Regis	tered Landfill		<u> </u>						
Name of Registered Waste Hauler		DEP Waste uler ID No.	Cubic Yards of Waste										
Mest madernes	3	1	ول ا	GRO									
City, State			Disposal Date	City, State	sulle, PA								
Treaton, No			IDU	PIUCE	Dat	te .							
Completed By (Print of Type) Title	22. 10. 11.		Signature	Din I	(144) S		4						
Linda P. Dellerino Mi	unager		There	V Huch	un 5	13011	ì						

Check#1925

- 10 -	

Date of Notification (1)					Name	of Buildin	g Owner/0	perator (2	2)	200			-						
	2	14			Britt 2	Zimmerm	ian			2014 JUN 1	וב ה	, ,	·						
	pe Notifica	ation			Street	Address	*********			EPIT JUIN	0 17	-	< 1	- 12					
□ EPA 🛛	Initial				26 Ца	rvard Te	Tace												
⊠ DOLWD □] Amended	i				State, Zip				A SIGE ST			91						
X DHSS	Amendm	ent #			City, s	state, Zip	Code			& LIC	FUSI	LIG	1.71						
10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -] Emergen	cy (inc	cluding		West	Orange, 1	NJ 07052)			-1401	40	- 4	100					
(NJAC 5:23-8)	justificati				Name	of Contac	ct			Telephone Nu	mber								
] Cancellat	tion			Britt 2	Zimmerm	nan				D								
					FA	CILITY II	NFORMA	TION		_									
Name of Facility Where Abar	tement is 1	Taking	Place	(3)					Type of Facility	(4)									
Private home									School (K-1	2)									
Street Address						-			Subchapter	8 (Other than K-1	2)								
26 Harvard Terrace									Other (i.e., homes, etc.	private and comm	nercial bu	uilding	S.						
City (5)									Square Feet		ID	ida A							
									Square reet	# 01 F10015	Ь	Bidg, Age							
West Orange, NJ 07052 County (6)					10		/OT. TE												
50000 000					Cour	ity Code (7)	(STATE U	SE ONLY)	Current Use (P	rior if being demo	olished)	*							
Essex																			
Name of Monitoring Firm Hir	ed by Built	ding C	wner	(8)	ASCM	No.	Name o	of Abateme	ent Contractor (9	9)									
							Gr Tec	h LLC											
Street Address								Address											
							576 Va	lley Rd#	283										
City, State, Zip Code								ate, Zip Co		_									
							1000000												
Project Manager for Monitori	ing Firm			TTala	phone	No	Telepho	NJ 0747	70	11:									
, reject manager for weinter	1616	priorie	NO.	A			License No.												
Start Date (10)	1			973-63			01127												
			ite (11)	Name o	of OSHA N	lonitor													
		/ .	14	Envirov	vision Co	nsultants,Inc													
Occupancy Status During At	etement (Check	only o	ne)				Address	,,,,,,			-	-						
☐ Facility Closed/Vacated I	During Enti	re Per	iod of	Abate	ment		20-21 X	Vagarau	Road, Bldg .#	244									
Abatement Performed Ou	tside of N	ormal	Facilit	y Hour	s - Des	cribe	City St	ate, Zip Co	Road, Didg .#	34A									
Time of Abatement:	AM	PN	N	PM_		_AM	Acres and a second												
Scope of Work (Check all the	et apply)	-			Fair Lawn, NJ 07410 Clean up and decontamination with negative pressure														
	л орр.ј ј						Н			gative Pressure	ive pres	sure							
>3 sf or >3 if = 160 sf or >260 if				novati				Mini-Enc	losure	(3)									
☐ ≥ 160 st or ≥260 if			De	molitic	n		\bowtie	Glovebag	g Procedure	Tent with Negative Pressure									
								Non-Exe	mpted (*) and N	on-Friable Proced	dure	1							
1				Locat Vorma							Ab	atem	ent T	уре					
Location of Asbestos-Containing Mat	erial /ACM	1)		d Sole				scription o			Z Z	70	ш	m					
TO BE ABATE		17		intena					terial (ACM)	Amount	Remova	Repair	nc	Enclosure					
IN Facility	_		Cus	todial	Staff?	(1.		cing, VAT,	nsulation,	(Specify SIF or LF)	JO.	<u>a</u> .	sde	081					
(13)				(12)				niscellane		SIF OF LF)	<u>a</u>		Encapsulate	le l					
- 127 W-			Yes	No	N/A				/				ē						
Basement					X	D: ·	. 1		_	10.1 =	ראו		П						
Bascilicit					27	Pipe ins	ulation			40 LF	X	Ш	Ш						
			П	П	П					-		I	П						
					1	-					$ \parallel$ \perp	1	ш	$ \Box $					
			Ц																
Name of Registered Waste F	Hauler			NJC	EP Wast	Hauler ID No	Cubic Ya	rds of Wast	e Name of Regi	stered Landfill									
Gr Tech LLC				(03378	25	TBI)	T.R.R.F. Inc										
City, State					00010	,,,	Disposa	7.0	City, State	**									
							200		The state of the s	av.				ĺ					
Wayne, NJ 07470		1					TBI		Tullytown, P	A									
Completed By (Print or Type))	Title				Signature Date 1 Date													
N.Jevtic		Own	er					A.	for went	20	6/12/20)14							
ASB-41		-	1240		nge yan	79 77		Heo		-									

Date of Notification (1)				Na	me of Build	ding	Owner/Operator	(2)					man d	
	1	14		1	over Bo	ard	of Education		0.01 a					
Agencies Notified Type N	lotificati	on		Str	eet Addres	SS			2014	プリド	16	Pi	12	: 21
⊠ EPA ⊠ Initi	al			1	00 Grace	Str	eet							7.00
☑ DOLWD ☐ Am		,		City	, State, Zi	р Со	de		ក្រុ	L31	ű.	11.65	HT]	201
2 51,00	endmen		_	D	over, NJ	078	801		č	E LI	CEI	431	NG	
	ergency ification	(includi)	ng	Nar	ne of Cont	tact			Telephone	Numl	ber			
☐ Can	N	lr. Rober	t Go	mes			100		- 4					
				F	ACILITY	INF	ORMATION							
Name of Facility Where Abatemen	nt is Tak	king Plac	ce (3)					Type of Facility	(4)					
Academy Street School								School (K-1	2)		2			
Street Address					-	-	Subchapter Other (i.e.,	8 (Other than	K-12)) cial b	uildin	as.		
14 Academy Street								homes, etc.		,,,,,,,	J.W. 4		J	19.0
City (5)								Square Feet	# of Floor	s	В	ldg. /	Age	
Dover								30,000 SF	2			40+		
County (6)				Co	unty Code	(7)(S	TATE USE ONLY)	Current Use (P	rior if being de	emolis	hed)		7/2	
Morris								School						
Name of Monitoring Firm Hired by	Building	Owner	(8)	ASCI	M No.	IN	lame of Abatem	ent Contractor (9)		(2)			
USA Environmental Manag			8000	00	112		East Coast F	laz Mat Remov	al, Inc.					
Street Address			-			S	treet Address							
344 West State Street							494 E. 41 Str	eet -						
City, State, Zip Code						C	ity, State, Zip Co	ode						
Trenton, NJ 08618							Paterson, NJ	07504	- 6					
Project Manager for Monitoring Fir						T	elephone No.		License N	lo.				
					6-8101		973-345-0022		00507			6 852		
Start Date (10) Scheduled Complet					ate (11)	N	ame of OSHA M	lonitor						
07 / 07 / 14_		07	<u>'</u>	14_/	14		East Coast H	az Mat Remov	al, Inc.					
Occupancy Status During Abateme	ent (Che	ck only	one)			Si	treet Address							
☐ Facility Closed/Vacated During				ement	nent 494 E. 41 Street									
☐ Abatement Performed Outside	of Norma	al Facilit	у Но	urs - De	s - Describe City, State, Zip Code									
Time of Abatement: 7:30AM-4	:30PM/	P M-A	V				Paterson, NJ	07504						
Scope of Work (Check all that appl	y)											- 2		
PASSAGE OF TURBLE OF SIGN COUNTY OF A CONTROL OF A CONTRO	5.50	⊠ na		tion				ainment with Neg	ative Pressur	re				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		⊠ Re	molit	on I Glovebag Procedure										
ZZ _100 0, 0, _100							☐ Non-Exer	n-Friable Prod	cedure		_			
		1	Loca								-	Abatement		T
Location of	CM		Norm	lely by	Ash	estos	Description of Containing Mat		Amount		Removal	Repair	Encapsulate	Enclosure
Asbestos-Containing Material (A TO BE ABATED	(CIVI)	2332		ance/		e., th	ermal systems in	al systems insulation,			nov	air.	aps	losu
IN Facility		Cus	todial (12	Staff?			surfacing, VAT, ther miscellaned	(C)	SF or LF)	<u>a</u>		ulat	ē
(13)		Yes	No			U	ulei miscellanec	(43)					O	
				3,370%	Pina &	Fitti	ing Insulation		370 LF		\boxtimes		П	П
Boiler Room - Original Section				10	-		Insulation		110 SF					П
Boiler Room - Original Section	n			10						-				
Boiler Room - Original Section	n				Boiler	Insu	lation		120 SF			ᆜ	님	
											Ш	Ш	Ш	Ц
				NJDEP		10000	bic Yards of aste	Name of Regist		.		!.		1
East Coast Haz Mat Remova	I, Inc.		F	auler II		2	.0		/S, INC. W/M of Pennsyl					
City, State							posal Date	City, State						
Paterson, NJ 07504						0	7-11-2014	Morrisville,	PA 19067					
Completed By (Print or Type)	Title	e					Signature, I	ΛΙ Ι Ι		Date				
Lelsie Olszewski	1.000	roject	Man	ager			luly	()WWW		0	6-1	1-2	2019	1

A		
Check	44	0070
LINECK	11	77/4

Date of Notification (1) June 12, 2014			Name of Building Owner / Operator (2) Santander Bank, NA												
Agencies Notified EPA DEP	Type Notification	on			Address issey Boı	ulevard		116 PM 2: ?	73	W. D. J. 1844						
⊠dol ⊠doh	Initial Amend	ed ment #			ate & Zip ester, MA		ICENSING	r _x								
DCA	Cance			Name o	of Contact Peck	t		Telephon	Telephone Number							
	J	_		FAC	ILITY I	NFORMATION		2								
Name of Facility Who Santander Bank	ere Abatement is	Taking P	ace (3)			Type of Facility School (K	(-12)									
Street Address 1135 & 1137 Burnt	Tavern Road					Other (i.		commercial build	-	_	tc.)					
City (5) Brick	8					Square Feet 6,000 Current Use (F		Floors 2 demolished)	Bldg. Age 60							
County (6) Ocean			unty Code			Retail										
Name of Monitoring Firm Hired by Building Owner (8) Hillman Consulting					ASCM I	Synatech, Inc	•	ctor (9)								
Street Address 1600 Route 22 East, Ste. 107 City, State & Zip Code						Street Address 829 Radio Ro City, State & Z	ad									
Union, NJ 07083 Project Manager for Monitoring Firm Telep Brian Nemetz 908-6					lumber 6	Little Egg Hai Telephone Nu 609-296-6916		87 License	Number 0081	7	- 100%					
Scheduled Start Date (10) June 23, 2014 Scheduled Completion Date (11) July 30, 2014						Name of OSH	Name of OSHA Monitor Synatech, Inc.									
Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement																
Abatement Performed Outside of Normal Hours Other – Describe: Facility Occupied During Abatement						City, State & Z Little Egg Har	(1 ³ 1 = 10 4 (1) (1) (1) (1)	87								
Scope of Work (Che ≥3 sf or ≥ 50 li ≥160 sf or ≥2	f 60 If			Renovation Demolition	n		Mini-Enclosur Glovebag Pro Non-Exempte	nent with Negative I re ocedure ed(*) and Non-Friat	ole Procedu							
Asbestos-Conta	cation of aining Material (A E ABATED	CM)	Solely b	on Norma y Mainten dial Staff	ance or	Description Asbestos-Co Material ((i.e., thermal	ntaining ACM)	Amount (Spe SF or LF)	ecify	Abatement Type						
in in	I Facility (13)		Yes	No	N/A	insulation, surfa or other misce	acing, VAT		Removal	Repair	Encapsulate	Enclosure				
First Floor		-			x	Floor Tile &	Mastic	600 SF	X	_	Н	Т				
First and Second F	loors				х	Joint Com		2,400 SF	X							
Second Floor Bath	room	-			x	Wall Stu	ICCO	175 SF	X							
Name of Registered	Waste Hauler		NJDEP \	No.		ards of Waste		gistered Landfill				-				
Synatech, Inc. City, State			27	429	Disposa	al Date	Grows Land City, State	dfill			-					
Little Egg Harbor, I	NJ 08087				July 31	, 2014	Morrisville,	PA								
Completed By		Title			Signatu	1 - / //		Date								
Diane Aloia		Executiv	e Admini	strator	1 1	Mare allo		June 12, 2014								



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



Date of Notification (1) 06/10/2014			Name of Building Owner/Operator (2) Newark Farmers Market Urban Renewal 16 PM 2: 12															
Agencies Notified	Type Notification		S	treet Ad					en FST			34 3948						
DEP DOL	Amended Amendment				e, Zip Coo k, NJ 07			3	& L1				No.					
DOH DCA	iustification) Cancellation		100	lame of David F	Contact Forem					- SS	Telephone Numb							
				FACIL	ITY INFO	RMATION	1											
Name of Facility Where	Abatement is Takin	g Place (3)						Type o	of Facility (4	1)								
Street Address 52-62 Cornelia Stre	eet							S × O	chool (K-12 ubchapter ther (i.e. p	8 (Oth				ings,	home	es,		
City (5)			o'e i i i i	1000000			1	Square	tc.) e Feet	# 0	Floors		BI	dg. A	ae			
Newark								28,43		1				yrs	3			
County (6) Essex				ounty C	ode (7) SE ONLY)	James and the second			t Use (Prio	r if bei	ng dem	olish	ed)					
Name of Monitoring Firm	Hired by Building	Owner (8)	\vdash	ASCM	No	IN	lame	of Abate	ement Con	tractor	(9)							
BioTerra Environme									Contracts		(-)							
Street Address PO Box 1224								Address ero Ro	59									
City, State, Zip Code Union, NJ, 07082								, State, Zip Code rlstadt, NJ 07072										
Project Manager for Mor Laura Wieczezak							Telephone No. License No. 01230											
Start Date (10)		Scheduled	Comp	oletion D	Date (11)	11 02			A Monitor nvironme	ental S	Solutio	ons						
Occupancy Status Durin	g Abatement (Chec	k Only One)	0.742			S	Street	Address	S									
Facility Closed/Vacated During Entire Period of Aba				nt		F	PO E	3ox 12	ox 1224									
Abatement Perform Other – Describe:											Т							
Scope of Work (Check A	II That Apply)																	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			novati nolitio				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure											
								1 NOIT	-Lxempteu	() all	u Non-i	Habi		2000 100	ment			
F. Construction			ocatio rmally			-	Description of s Containing Material (ACM) nermal systems insulation, surfacing, VAT, or other miscellaneous)						Туре					
Location Asbestos-Containing <u>TO BE AB</u> In Faci (13)	Material (ACM) <u>ATED</u> lity	Used S Maint Custod	Solely enand	by ce/		os Contair thermal sy surfacin				Amount (Specify SF or LF)		,	Remova	Repair	Encapsulate	Enclosure		
		Yes	No	N/A											fe .	to .		
Roo	f	x				Roofing	/Flas	shing		23,	782 S	F	х					
Roo		x				T	ar				20 SF		x					
Loading Do	ck Roof	X			1	ransite I	Roof	Panel		1,0	080 SF	=	х					
Loading		x				VAT F	loor	Tile		3,2	50 SI	F	x					
Name of Registered Wa	7.45	DEP W	CONT. 100.	Cubic Ya			Name of I	Registe	ered La	ndfill								
Asbestos Transporta	ation Company	INC.		uler ID -371	NO.	of Waste	! .		Cycle Chem, Inc.									
City, State Shirley, NY						Disposal	Date	ate City, State Elizabeth, NJ										
Completed by		Title			100	Sign	paterie		1/2			Da						
Niall Kenny	I Will Many OF								06	/10/2	2014							

Date of Notification (1)		Name of	Building Ow Joseph N	ner/Operator	(2)	2814	JUN !	<i>-</i>	· · ·					
-04/01/14 X6/12/14		Chanal Ad		lezgoua		,	JON 1	0	11	2:-				
Agencies Notified Type Notification EPA Initial			MILTON		25	ب ن م	Figh	· /	ris e s e					
DEP Amended X DOL Amendment #			e, Zip Code DE HEIGH		& LICENSING									
Emergency (in justification) DCA Cancellation	cluding	Name of	Telenhona N	one Number										
		FACIL	ITY INFOR	MATION		<u> </u>								
Name of Facility Where Abatement is Taking	Place (3)				Type of Facility (4 School (K-12	2)	1							
Street Address 304 HAMILTON AVE						8 (Other than K rivate & comme		ings,	nome	s,				
City (5) SEASIDE HEIGHTS					Square Feet 3000	# of Floors 2	ge							
County (6) OCEAN		County C	ode (7) ISE ONLY)		Current Use (Prio	r if being demo	lished)							
Name of Monitoring Firm Hired by Building Ov	wner (8)	ASCM	No.		e of Abatement Contractor (9) A LEAD PROFESSIONALS									
Street Address					Address HITE DOVE CC	OURT								
City, State, Zip Code				City, S	tate, Zip Code EWOOD, NJ 08	Code								
Project Manager for Monitoring Firm		Telephor	ne No.	Teleph	Telephone No. License No. 1200									
	Scheduled Completion Date (11) Name of OSHA Monitor													
06/10/19		06	16/14		Address									
Occupancy Status During Abatement (Check					HITE DOVE CO	DURT								
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma Other – Describe:	eriod of Abate Il Facility Hou	ement irs		City, S	state, Zip Code EWOOD, NJ 08									
Scope of Work (Check All That Apply)								-						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Renov Demo			5	Fult Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
	1					() and realist	Table 1 to	Abate						
	Is Loca Norm			5				Ту						
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used So Mainten Custodial (12	lely by ance/ I Staff?	(i.e. th	Description s Containing Nermal system surfacing, VA other miscellar	Material (ACM) s Insulation, T, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure				
CEILING	763 140			PLASTE	R	800	х							
,														
Name of Registered Waste Hauler		NJDEP W	laste	Cubic Yards	Name of I	Registered Lan	dfill			Щ				
NEWARK CARTING		Hauler ID 04509	No.	of Waste	IESI	Togrotored Earl	~////	-346	2-1-1-1	į				
City, State NEWARK, NJ				Disposal Date		e EHEM PA								
Completed by JOSEPH PERLSTEIN	Title OWNER	- Ar		Signatur	9		Date							





06/12/14			SOMERSET DEVELOPMENT Street Address															
Agencies Notified	Type Notific	ation		Street Ac 911 E.	ddress COUNT	TY LIN	NE ROA	AD.					İξ					
DEP DOL	Initial Amend	ed ment #			te, Zip Co		701		10 3/18 &	Lici	3 00 [M3]	NC.	100					
DOH DCA	justifica Cancel			Name of Contact Telephone Number PETER TISDALE														
<u> </u>	- Curios				LITY INFO		ION					-	-	-				
Name of Facility Where	Abatement is	Taking Place (3)	,,,,,,,,		7 (10)		Туре	of Facility (4	4)								
Street Address							School (K-1 Subchapter	8 (Oth										
1 PASSAIC ST									Other (i.e. p etc.)			mercial buildings, homes,						
City (5) WOODRIDGE								Squar	re Feet	# 01	f Floors		В	dg. A	ge			
County (6) BERGEN				County C	Code (7) JSE ONLY)			Curre	nt Use (Prid	or if bei	ng dem	olishe	ed)					
Name of Monitoring Firm	n Hired by Buil	Iding Owner (8)		ASCM	l No.		PACKET STATE OF THE STATE OF TH		tement Con									
Street Address							Street	Addres	SS		-							
City, State, Zip Code						- Stillion			OOVE CO	COURT								
Project Manager for Mo		T.I. L	- N-		LAK	KEWOOD, NJ 08701												
Project Manager for Mo		Telephon	ne No.			ephone No. License No. 1200												
Start Date (10) 06/22/14	d Con	npletion [A Monitor PROFE	Monitor PROFESSIONALS														
Occupancy Status Durin	e)				Street	Addres	SS											
Facility Closed/Vac Abatement Perform Other – Describe:																		
Scope of Work (Check A	All That Apply)		2111-23-21				LAK	EVVOC	JD, NJ 0	6/01						-		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	enova emolit				> >	Min Glo	I Containme ni-Enclosure nvebag Prod n-Exempted	e cedure					e					
		ls	Locati	ion										Abate	emen	t		
Locatio		Lies	lormal d Sole					cription of aining Material (ACM) systems insulation, ing, VAT, or iscellaneous)				+	Туре					
Asbestos-Containing TO BE AB In Faci (13)	BATED	Mai	ntenai odial 8 (12)	nce/		therma surfa	al system acing, VA				Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure		
		Yes	No	N/A											(D)			
EXTER			X				OOFIN				00SF		X					
INTER	IOR		X			FL	OOR T	ILE		25	500SF		X			-		
												\forall						
					aste	Cubic of Wa	c Yards	* BOOK BOOK BOOK BOOK BOOK BOOK BOOK BOO										
NEWARK CARTING	3			lauler ID I 4509	140.	20			IESI									
City, State NEWARK, NJ						06/2	osal Date 5/14)	City, State BETHL		/ PA							
Completed by JOSEPH PERLSTE	IN	Title OWN	ER				Signature Date 06/12/14						4					