PAID

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

1 ho	CK
CIR	٠ -
· · ·	7 MINT
promise or the same	10402

F 2 - 611 116 17 (2)					(F :::: 6				111	11 15	11,	15		\\//	15
Date of Notification (1)	6-14-	18		Name o	of Building Ow	ner/Operat	or (2)	Sans		#				1:7	ㅂ
Agencies Notified	Type Notification	10		Street A	Address D	7) ~	ا عن		軍	JIII	V 1	8	2018	
□ EPA □ DEP	Initial Amended		1	City. St.	ate, Zip Code	3, 5	DOX	_5	76	3			0	-CAIG	T. Parent
DOL	Amendment #		_			rton		LN	+	0	86	3	9	TOO	10
★ DOH	☐ Emergency (in justification)	ncluding	Г	Name o	of Contact	/ _	_	-	Te	lephone	Num	ber	SIM	3	- 6.
□ DCA	☐ Cancellation			(~	any l	line	4		1	119	09	33.	- 7	38	1
				FAC	ILITY INFOR	NOITAN			10	101	0 2			- 0,	<u> </u>
Name of Facility Where A	7 11	Place (3)	/	Re:	sidenti	al)		of Facility School (K-	12)		#1	-	4:		
Street Address	avesio	K	4	1115			X	Subchapte Other (i.e. etc.)	r 8 (Ott private	ner thạn & comn	K-12 nercia) I build	dings,	home	es,
City (5)	1 11	, ,	A		ALT O	7711	Squa	re Feet	# 0	of Floors	5	В	ldg. A	ge	
County (6)	tic Hi	ghla	nd	County	(VJ 0) Code (7)	7716	CIPE	nt Use (Pri	ior if he	ing dem	nolish	- lbe	50	1	
Monn	routh	~			USE ONLY) _		/ 1	DNVen		Resi			2	H	ou 5
Name of Monitoring Firm	Hired by Building O	wner (8)		ASCI	M No.	Nam		atement Co	ntracto	(9) nol				In	. ,
Street Address	100 3°	13			4.10.4	Stree	et Addre	S A	23	7	J	164	9 1	208	
City, State, Zip Code	JOK JO	7 14	30	0	532	City	State, Z	ip Code	-	Al	de	A	06	. 9	9
Project Manager for Movit	ri gFirm	NS		Telepho	one No.	Tele	phone N	ESY	PT	Licen	se No	U	6)3	3
Steve Se	hen Ken				758-33			3-336	5	(20	3	39	4	
Start Date (10)	5-12	Scheduled 7	- Com	pletion 7	Date (11)	Nam		HA Monitor	has	logi	05	τ	20		
Occupancy Status During	Abatement (Check	Only One	2)		10	Stree	t Addre			30	ري	-	10		-
Facility Closed/Vacat	ted During Entire Pe	eriod of At	batem	ent			P.O.	BOX	33	37					
Abatement Performe	d Outside of Norma	I Facility I	Hours					ip Code					10.00	130	# 1
☐ Other – Describe:						1	lew i	Egypt	Á	JJ	0	83	53	3	
Scope of Work (Check All	That Apply)							011							
≥3 sf or ≥3 lf		□ Re	enovat	ion			□ Fu	II Containm	ent with	n Negati	ive Pr	essur	е		
≥160 sf or ≥260 lf		De De	emoliti	on			☐ Mir	ni-Enclosure	е				78 -		
	6	_				_		ovebag Prod n-Exempted			Frioble	Droc	od. ir		
		Ι			1		140	II-Exemple	u () an	u NOII-r	nable		Joseph Company	ment	
*		100	ocation all								1		Ty		
Location of Asbestos-Containing N		10000	Solet			Descriptio Containing		/// (2)			. 1				
TO BE ABA	4. T. C.		tenan		(i.e. the	mal systen	ns insula	ation.		mount Specify		ZD	_	Enc	m
In Facility	The state of the s	Custo	(12)	tarr?	s	urfacing, V.	AT, or			or LF)		Removal	Repair	aps	clos
(13)			(/		oth	ner miscella	aneous)				1	val	Bir	Encapsulate	Enclosure
		Yes	No	"N/A										6	
Exterior	Malla			X	Sidin	s St	lingk	25	40	00	SE	X			
	7.					7	J								
			LN		facts Co	ubic Yards		l Nama of	Doniet	sad I as	dell				
Name of Registered Waste	1		255.55	JDEP Wauler ID	No. of	Waste	Li	Name of	1000		5	,		ົດ	1
City, State	nnologies			170		sposal Date	e	Wast City, State	e	anac	jem	ent	٥ (- 1	V
New Eq	ypt 1	UJ	N			Wious	Dato			le	P				
Steve Schen		PRES	:0	+		Signatur	e	Sal			Date /	1	14.	18	
Orche Maile	I POPL	11167	NUR	11		- Cu	ESE J	~UNE	NR	-	-	0	٠ ١	1)

I ALLE

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

CK#	
32264	1

Date of Notification (1	ve BTBT%				A40000000000			Owner/Operator OOHME CORP.	(2)	~ [7 6	D E	· []	WI
								JOHNE CORF.	lir	11	E ((2 [W 1
6 /	11 /18				_	et Addr		ENUE DO DO		打厂			And the Control of Little	
Agencies Notified	Type Notificatio								K 2000, RY28-41-	411			-	
EPA DEP X DOL X DOH	X Initial Noti Amended Cancellati On Hold	Notifi	3.5		RAH			RSEY 07065	Telephone Num	ber		UN		2018
DCA	EMERGE	NCY I	NOTIF	ICATION			JOHNSO	N	732-594-7746	F	SBE	STOS	B COI	TROL
				FACIL	ITY IN	VFORM	MATION	****				111	- IV.510	13
Name of Facility When	e Abatement is Ta	king I	Place	(3)				Type of Facilit						1
MERCK SHARP & DOI	HME CORPORATIO	N						Subchapt	er 8 (Other than I private & commo		is ho	mes	etc.)	
Street Address								Square Feet	# of Floors	T Diag		g. Age		1
126 EAST LINCOLN AV	VENUE - BUILDING	80N						40,000	1			65		
City (5)	County (6	5)				ty Coc			rior if being demo				555	1
RAHWAY	UNION				STATE		ONLY)		ABORATORY AN		FICE	FACIL	_1	
Name of Monitoring F ENVIRONMETAL HEA Street Address				(8)		1	CM No. 104	PAR ENVIRON	ement Contracto		ION			
655 WEST SHORE TR.	AII							Street Address 313 SPOOK RO	OCK ROAD					
City, State, Zip Code	SPARTA, NEW	/.IFR	SEY 0	7871				City, State, Zip						
Project Manager for Mo		0211		hone Nun	nber	0		Telephone Num		ense N	Numbe	er	-	1
WILLIAM S. KERBEL,				729-5649				845-369-7500	110					
Expected State Date (Sche		mpletion	Date ((11)	Ave	Name of OSHA					-	1
6 /	22 /18		7		30	1	18	AMERISCI LAE	BORATORIES IN	C	#	11480)	
Month Day Occupancy Status Duri			nth		Day		Year	Charak Addasas						-
X Facility Clos Abatement F	ed/Vacated During Reformed Outside of	Entire of Norr	Period	d of Abate cility Hou		scribe:		Street Address 117 EAST 30TH						
X Other - Desc	cribe: MONDAY	-FRIE	DAY 5	PM-2AM				City, State, Zip		001/	40040			
Scope of Work (Check								ainment with Neg	V YORK, NEW Y ative Pressure	URK	10016)		
Demolition	. X	Rend	vation	1			Mini Encl							
X >3SF OR LF >160 SF OR								Procedure le Procedure						
Locatio		l le	Locati	ion			tion of As			1 ^	h-4	t T		1
Asbestos-co			nally t					al (ACM)	Amount		baten	_	~	1
Material (E5501335	olely b	0.0000000000000000000000000000000000000	•		nermal sy		(Specify	REMOVAL	REPAIR	NO.	S	
TO BE A	BATED		t/Cust	2	in			ng, VAT,	SF or LF)	Į	A.	P	5	
in Facility	y (13)		taff (1		(or othe	r miscella	neous)		P	~	ENCAPSUL	ENCLOSUR	
		Yes		N/A						-	+	1	70	1
ROOM B11				X PIPI	E INSL	JLATIC	DN		25 LF	X	-	-	-	-
										1	1	1	1	1
				_						+-	+-	+	+	1
		-								+	-	1	-	-
		_								-	-	_	_	1
Name of Registered Wa		100000000000000000000000000000000000000	EP Wa	STATISTICS TO STATE OF THE STAT	ic Yard	ds of W	/aste	Name of Regist				Name of Colors]
FREEHOLD CARTAGE	., INC.		er ID N			2			OUNTY RESOUR		ANAG	SEME	NT SE	
825 HIGHWAY 33 City, State			15939		osal D	ato			ER DRIVE/ROUT	E 15				-
FREEHOLD, NEW JER	SEY			100000000000000000000000000000000000000	osai D 2-7/30/			City, State / MONTGOMER	Y PA 17752					
Completed by (Print or				10/22	.,,501	Signat	ture	// (X	Dat	е	1 1	1-1	10	1
BENJAMIN SANCHEZ			ROF	OPERATI	ONS	2.3	/	~XXX		6	, -1	1-1	Ó	

NOUN State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Name of Building Owner/Operator (2) Date of Notification (1) MERCK SHARP & DOHME CORP. /18 Street Address 18 Agencies Notified Type Notification 126 E. LINCOLN AVENUE, P.O. BOX 2000, RY28-414 FPA Initial Notification City, State, Zip Code DEP Amended Notification #1 RAHWAY, NEW JERSEY 07065 ASBESTOS CONTROL & DOL Cancellation DOH On Hold Name of Contact Telephone-Number DCA **EMERGENCY NOTIFICATION** PATRICIA JOHNSON 732-594-7746 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) MERCK SHARP & DOHME CORPORATION Subchapter 8 (Other than K-12) Other (ie. private & commcl. bldgs., homes, etc.) Street Address Square Feet # of Floors Bldg. Age 126 EAST LINCOLN AVENUE - BUILDING 84N 108.769 4 49 City (5) Current Use (Prior if being demolished) County (6) County Code (7) (STATE USE ONLY) RESEARCH LABORATORY AND OFFICE FACILI RAHWAY UNION Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) ENVIRONMETAL HEALTH INVESTIGATIONS, INC. PAR ENVIRONMENTAL CORPORATION 104 Street Address Street Address 655 WEST SHORE TRAIL 313 SPOOK ROCK ROAD City, State, Zip Code City, State, Zip Code SPARTA, NEW JERSEY 07871 SUFFERN, NEW YORK 10901 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number WILLIAM S. KERBEL, CIH 973-729-5649 845-369-7500 1101 Expected State Date (10) Name of OSHA Monitor Sched. Completion Date (11) /18 AMERISCI LABORATORIES INC 8 / /18 #11480 30 Month Day Year Year Month Day Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 117 EAST 30TH STREET Abatement Performed Outside of Normal Facility Hours - Describe: Other - Describe: MONDAY -FRIDAY 7AM-3:30 PM City, State, Zip Code NEW YORK, NEW YORK 10016 Scope of Work (Check all that apply) Full Containment with Negative Pressure Demolition Mini Enclo. Renovation >3SF OR LF Glovebag Procedure >160 SF OR 260 LF Non-Friable Procedure Location of Is Location Description of Asbestos-Abatement Type Asbestos-containing normally used Containing Material (ACM) Amount ENCAPSUL REPAIR REMOVAL NCL Material (ACM) solely by (ie. Thermal systems (Specify LOSUR TO BE ABATED Maint/Custodial insulation, surfacing, VAT, SF or LF) in Facility (13) Staff (12) or other miscellaneous) Yes No N/A MER -SOUTHWEST AREA X SUCT SEAM CAULK 10 SF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Waste Name of Registered Landfill FREEHOLD CARTAGE, INC. Hauler ID No. 3 LYCOMING COUNTY RESOURCE MANAGEMENT SE 825 HIGHWAY 33 15939 447 ALEXANDER DRIVE/ROUTE 15 City, State Disposal Date City State MONTGOMERY, PA 17752

6/12-12/30/18

DIRECTOR OF OPERATIONS

Signaturé

Date

FREEHOLD, NEW JERSEY

Completed by (Print or Type)

BENJAMIN SANCHEZ

State of New Jersey

		ľ	(Pi	ursua	nt to NJA	38:60 38:60	-7 and 12:	1 EIVI 120-7	1EN 1 7)			, IC	#	3:	22
									er/Operator ((2)					and the same of
Date of Notification (1)					ME	RCK S	SHARP & D	DOH	ME CORP.		7	E (G	5 1	W
5 / 31 /18						eet Ad				and 2	リー				
Agencies Notified Type No									JE, P.O. BOX	(2000, RY28	8-414				
	al Notific						e, Zip Code		V 0700F	- Control of the Cont	111	Ę,	UN	13	2018
	ended Nacellation		alion		IRAI	TVVAT	, NEW JE	KSE	1 0/005	1 54					
	Hold						Contact			Telephone	Numb	er			
DCAEN	ERGEN	CY N	OTIF				A JOHNSO	N		732-594-77	46 <i>F</i>	\SBE	S10	SCU	INTH MG
Name of Facility Where Abatemen	io Toki	D	lass		ACILITY	INFOF	RMATION	IT.	(F 11)					- Agrippin Teachdran	
Name of Facility where Abatemen	t is rakii	ng P	lace	(3)				1 y	pe of Facility School (K						
MERCK SHARP & DOHME CORPO	RATION									er 8 (Other th	nan K-	12)			
								X	Other (ie.	private & cor	mmcl.				
Street Address 126 EAST LINCOLN AVENUE - BU	I DING 9	IAN						1 8	Square Feet	# of Floo	ors			. Age	
City (5) Co		Co	nty C	ode (7)	-	108,769 irrent Use (Pr	ior if being d	emolic	chod)		19				
RAHWAY UN						E ONLY)		SEARCH LA					ACILI	ı	
Name of Monitoring Firm Hired by				(8)			SCM No.	Na	me of Abate	ment Contra	actor	(9)			
ENVIRONMETAL HEALTH INVEST Street Address	18, 11	VC.	12.			104	_	R ENVIRON	MENTAL CO	DRPO	RATI	ON			
655 WEST SHORE TRAIL								reet Address 3 SPOOK RO	OCK ROAD						
City, State, Zip Code							_	y, State, Zip		-				-	
SPARTA					08			JFFERN, NEV							
Project Manager for Monitoring Firm		_			Number			4000	lephone Num	iber	U. STATE		umbe	Г	
WILLIAM S. KERBEL, CIH Expected State Date (10)	To			729-5	649 tion Date	(11)			5-369-7500 me of OSHA	Monitor	1101				
6 / 12 /18		JUITE	8		30		/18	255755	MERISCI LAB		SINC		#1	1480	
Month Day Year		Mor			Day		Year						ESIV	1/	
Occupancy Status During Abatement X Facility Closed/Vacated D					hatement				eet Address 7 EAST 30TH	STREET					
Abatement Performed Ou							e:	1	1 LAST 3011	TOTALLI					
X Other - Describe: MC	NDAY -F	FRID	AY 7	AM-3	:30 PM			Cit	y, State, Zip						
Scope of Work (Check all that apply	re						Teull Cont	ainm	NEV ent with Neg	V YORK, NE		RK 1	0016		
Demolition		Reno	vatio	n			Mini Encl		ent with Neg	alive Fressui	16				
X >3SF OR LF							Glovebag	Pro	cedure						
>160 SF OR 260 LF		10.1	i de de la constante de la con]X	Non-Friat								
Location of Asbestos-containing			Locat				ription of As ning Materi			Amoun	nt		atem	-	_
Material (ACM)			olely t				Thermal sy			(Specif	100	REMOVA	REPAIR	ENCAPSU	ENCLOSL
TO BE ABATED	N	Maint	t/Cus	todial	i	nsulat	ion, surfaci	ing, \	VAT,	SF or LI	F)	No.	AR I	AP	5
in Facility (13)			aff (1			or oth	ner miscella	aneo	us)			AL.		SUL	SUR
		/es	140	N/A							-		\vdash	<u> </u>	~
MER -SOUTHWEST AREA	-	-		Х	SUCT SE	EAM C	AULK			10 SF		X	-		
	-												-		
Name of Registered Waste Hauler	I N	V.IDE	P W	aste	Cubic Ya	rds of	Waste	Na	me of Regist	ered Landfill					
FREEHOLD CARTAGE, INC.			er ID		Judic 1 a	3	110310	LY	COMING CC	UNTY RESC	OURC	E MA	NAG	EMEN	IT SE
825 HIGHWAY 33			15939	9				44	7 ALEXANDE	ER DRIVE/R	OUTE				
City, State FREEHOLD, NEW JERSEY					Disposal 6/12-12/3			Cit	y, State DN/SOMER	V DA 17750					
Completed by (Print or Type)	Title					Sign	nature /	No.	NIVIOUNIER	I, FA 17752	Date	,-	1.	7.	0 /
BENJAMIN SANCHEZ	DIREC	CTOF	ROF	OPE	RATIONS		/,	//	10		Date	5	131	11	X

PAID

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

					8:60 and 1		-,	E .	THE PROPERTY.	F 6) [E	: П	17	7 [2 1
Date of Notification (1) 6/1/2018			Name NJIT	of Building	g Owner/Ope	erator	(2)	I. L.	10)	世世	2 6	3		<u>— [i</u>	
Agencies Notified Type	Notification		Street	Address					1111						-
□ EPA □	Initial		155 V	Warren S	Street Nev	wark	NJ			J	UN	1.3	20	18	and the same of
DEP DOL	Amended		GANGESS	tate, Zip C	Code										-
×	Amendment # Emergency (including	g		ark NJ					l.	ACRE	STOS	i OX	NIT	ROL	8.
	justification) Cancellation			of Contact	rahondo					ephone			ING		
	Caricellation				ORMATION	M.	-		97	3-414	-9224	+			
Name of Facility Where Abater NJIT	ment is Taking Place	(3)	170	ZIETT IN	OKWATION		Тур	e of Facility	(4)						
Street Address 155 Warren Street							×	School (K- Subchapte Other (i.e.	r 8 (Oth	er than & comm	K-12) ercial	build	inas.	hom	es
City (5) Newark NJ							_	etc.) lare Feet		f Floors		BI	dg. A		
County (6) Essex County				Code (7)	0			rent Use (Pr		ng dem	olished	1 333	50	4	
Name of Monitoring Firm Hired N/A	by Building Owner (8)	ASC N/A	M No.	N A	lame	of Ab	patement Co utions Se	ntractor	(9)					
Street Address N/A					S	treet ,	Addr								
City, State, Zip Code N/A								Zip Code rgen NJ 0	7047						
Project Manager for Monitoring N/A	Firm		Telepho N/A	one No.	T	eleph	one f			Licens					
Start Date (10) 6/2/2018 6 6 6 20 /	6 Schedul 6/4/20	ed Cor 18		Date (11)				SHA Monitor onmental		atories					
Occupancy Status During Abate	ement (Check Only O	ne)		-		treet A									
Facility Closed/Vacated Du Abatement Performed Out Other – Describe:	uring Entire Period of side of Normal Facility	Abaten y Hours	nent s		Ci	ity, St	ate, 2	ite 22 We Zip Code	st						
Scope of Work (Check All That A	Annly			- 4MB; - 4B	_ L	Jnior	n NJ	07803							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	× F	Renova Demolit				×	Mi GI	ull Containm ini-Enclosure lovebag Pro on-Exempte	edure						
	Is	Locati	on					ZXCIIIPICI	2 () and	THOII-I	lable I	100	20-25	ment	_
Location of	11	Vormal	ly		Descrip	otion o	of				L		Тур	oe .	
Asbestos-Containing Materia TO BE ABATED In Facility (13)	Ma	ed Sole intenar todial S (12)	nce/	Asbes (i.e.	tos Containi thermal sys surfacing other miso	tems , VAT	insul , or	ation,	(S	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
Theater Room	163	NO			plantas	10						1	_	(D	_
THOUSE TOOM			X		plaster	ceilii	ng		7	SF	x	+		-	
Name of Registered Waste Haul	0.5	1	IDEE												
Name of Registered Waste Hauf Newark Carting Inc	ei	H	JDEP W auler ID I509		Cubic Yard of Waste	ds		Name of I	en a gannaria			fill			
City, State Po Box 5670					Disposal D	ate		City, State 2335 Ap		tter Ro	d Beth	nleh	em	PA	
Completed by Marcos Regato	Title Presi	dent			Signa	ture	w	20 len	1	T	Date 6/1/2			700	



State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

						AC 8:60 and 5:1	0)	11.	11 -	E	11	103	E	
Date of Notification (1)				Nam	ne of Buildi	ng Owner/Operator	(2)		E G	<u>L</u>	Ш	U	브	7
6/	13 /	18				7 Properties		Job #18	805-230	7 . (Chl	k o#E	056	-
Agencies Notified	Type Notification	on		Stre	et Address				JUI	1 1 8	3 2	20幣	036	-
☐ EPA				- Contraction		antown Dr.								to annual
☑ DOLWD ☑ DHSS	Amended	. ii			State, Zip			<u> </u>	ASSEST				1 0	_!
□ DCA	Amendment Emergency			100000		d, NJ 08516	- Andrews	,		ioens Ioens			AL G	
(NJAC 5:23-8)	justification)	(includii	ng		e of Conta				(III - 1-1-1 (Instrument - 1-1-1)	HLF TO THE				CT.
	☐ Cancellation	1				scarnera			ephone N					
				-		NFORMATION			32-492-3	3606				
Name of Facility Where	Abatement is Tak	ing Plac	ce (3)			IN ORWATION	Type of English	h. (4)						
Residential							Type of Facilit School (K-							
Street Address							☐ Subchapte	r 8 (Othe	er than K	-12)				
							Other (i.e.,	private	and comr	mercial	bui	ilding	S,	
City (5)							homes, etc Square Feet							
Mt. Holly, NJ							1900		of Floors			lg. Ag	ge	
County (6)				Cou	inty Code (7)(STATE USE ONLY)	100000000000000000000000000000000000000	3				118		
Burlington					my oddo (MOTATE OSE ONLY	Current Use (F		eing dem	olished	i)			
Name of Monitoring Firm	Hired by Building	Owner	(8)	ASCM	No.	Name of Abateme	Residentia	7.5						
Tiger Environmenta	al					Asbestos and								
Street Address						Street Address	a Wold Service	ces, Co	orp.					
234 20 th Ave.						3859 Sylon B	evile							
City, State, Zip Code						City, State, Zip Co								
Brick, NJ						시 그렇다고요								
Project Manager for Moni	toring Firm		Tel	ephone	No	Hainesport, N	13 08036							
Kelly Walton			1.77		52-4301			1	ense No.					
Start Date (10)	Sche	eduled (609-702-0400		0	0862					
Start Date (10)6 /22 /	18 Sche		Comple	etion Da	ate (11)	Name of OSHA M	onitor	0	00862	(4				
6/22/	18	6	Comple / 2:	etion Da		Name of OSHA M EMSL Analyti	onitor	0	00862	(a				
Occupancy Status During Facility Closed/Vacate	18	ck only	one)	etion Da	ate (11) 18	Name of OSHA M EMSL Analyti Street Address	onitor cal, Inc.	0	00862	(a				
6 / 22 / Occupancy Status During Facility Closed/Vacate Abatement Performed	Abatement (Che d During Entire P Outside of Norm	ck only eriod of	one)	etion Da	18	Name of OSHA M EMSL Analyti Street Address 200 U.S. Rout	cal, Inc.	0	00862	(a				
6 / 22 / Occupancy Status During X Facility Closed/Vacate	Abatement (Che d During Entire P Outside of Norm	ck only eriod of	one)	etion Da	18	Name of OSHA M EMSL Analyti Street Address 200 U.S. Rout City, State, Zip Co	cal, Inc.	0	00862	()				
6 / 22 / Occupancy Status During ☐ Facility Closed/Vacate ☐ Abatement Performed Time of Abatement:	Abatement (Che d During Entire P Outside of Norma	ck only eriod of	one)	etion Da	18	Name of OSHA M EMSL Analyti Street Address 200 U.S. Rout City, State, Zip Co	cal, Inc. ee 130 North de , NJ 08077			4				
6 / 22 / Occupancy Status During ☐ Facility Closed/Vacate ☐ Abatement Performed Time of Abatement: ☐ Scope of Work (Check all	Abatement (Che d During Entire P Outside of Norma	6 ck only deriod of al Facilit	Comple / 2: one) Abate ty Hou PM	ement rs - Des	18	Name of OSHA M EMSL Analyti Street Address 200 U.S. Rout City, State, Zip Co	cal, Inc. ee 130 North de , NJ 08077) "	CI	ear	7- L	Ā
	Abatement (Che d During Entire P Outside of Norma	ck only deriod of all Facility PM/	complete Com	ement rs - Des	18	Name of OSHA M EMSL Analyti Street Address 200 U.S. Rout City, State, Zip Co Cinnaminson Drap - Full Cont	e 130 North de NJ 08077) "	CI	ear	7-l	A
	Abatement (Che d During Entire P Outside of Norma	ck only deriod of all Facility PM/	Comple / 2: one) Abate ty Hou PM	ement rs - Des	18	Name of OSHA M EMSL Analyti Street Address 200 U.S. Rout City, State, Zip Co Cinnaminson Full Contain Mini-Encl	e 130 North de NJ 08077 General First	egative F	Chuy Pressure		CI	ear	7- L	A
6 / 22 / Occupancy Status During ⊠ Facility Closed/Vacate □ Abatement Performed	Abatement (Che d During Entire P Outside of Norma	ck only deriod of al Facilit PM/	complete Com	ement rs - Des	18	Name of OSHA M EMSL Analyti Street Address 200 U.S. Rout City, State, Zip Co Cinnaminson Full Contain Mini-Encl	e 130 North de NJ 08077	egative F	Chuy Pressure	dure				
6 / 22 / Occupancy Status During ☐ Facility Closed/Vacate ☐ Abatement Performed Time of Abatement: ☐ Scope of Work (Check all ☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf ☐ Location of	Abatement (Che d During Entire P Outside of NormAMF that apply)	ck only eriod of fall Facilit PM/ Rec Dec	complete Com	ement rs - Des	18	Name of OSHA M EMSL Analyti Street Address 200 U.S. Rout City, State, Zip Co Cinnaminson Full Conta Mini-Encl Glovebag Non-Exer	e 130 North de NJ 08077 in a C n C ainment with Ne osure Procedure npted (*) and N	egative F	Chuy Pressure	dure		l e a 1		
6 / 22 / Occupancy Status During Facility Closed/Vacate Abatement Performed Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing M	Abatement (Che d During Entire P Outside of NormAM that apply) of Material (ACM)	Ck only eriod of all Facility PM/	complete (Complete (Comple	ement rs - Des	ate (11) 18 scribe AM	Name of OSHA M EMSL Analyti Street Address 200 U.S. Rout City, State, Zip Co Cinnaminson Full Conta Mini-Encl Glovebag Non-Exer Description of stos Containing Mat	e 130 North de NJ 08077 in a Comment with Neosure Procedure Inpted (*) and N	on-Friab	Chuy Pressure	dure	Abat	teme	nt T	УF
	Abatement (Che d During Entire P Outside of NormAMF that apply) of Material (ACM) TED	Ck only eriod of all Facilities PM/	one) Abate ty Hou PM enovate s Locat Norma ed Sole intena	ement rs - Des ion on ition illy elly by ince/	ate (11) 18 scribe AM	Name of OSHA M EMSL Analyti Street Address 200 U.S. Rout City, State, Zip Co Cinnaminson Full Cont. Glovebag Non-Exer Description of stos Containing Mat., thermal systems in	cal, Inc. se 130 North de NJ 08077 cainment with Neosure Procedure Inpted (*) and N erial (ACM) insulation,	on-Friab	Pressure Dile Proced Amount Specify	dure	Abat	teme	nt T	yp
	Abatement (Che d During Entire P Outside of Norm AM- that apply) of Material (ACM)	Ck only eriod of all Facilities Re De Is Use Ma Cus	complete com	ement rs - Desion on tion on Staff?	ate (11) 18 scribe AM	Name of OSHA M EMSL Analyti Street Address 200 U.S. Rout City, State, Zip Co Cinnaminson Full Conta Mini-Encl Glovebag Non-Exer Description of stos Containing Mat	e 130 North de NJ 08077 Gainment with Ne osure Procedure npted (*) and N erial (ACM) nsulation, or	on-Friab	Pressure	dure	Abat	teme	nt T	yp
6 / 22 / Occupancy Status During Facility Closed/Vacate Abatement Performed Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing M TO BE ABAT IN Facility (13)	Abatement (Che d During Entire P Outside of Norm AM- that apply) of Material (ACM)	Ck only eriod of all Facilities PM/	one) Abate ty Hou PM enovate s Locat Norma ed Sole intena	ement rs - Des ion on tion on Staff?	ate (11) 18 scribe AM	Name of OSHA M EMSL Analyti Street Address 200 U.S. Rout City, State, Zip Co Cinnaminson Full Conta Glovebag Non-Exer Description of stos Containing Mat thermal systems in surfacing, VAT,	e 130 North de NJ 08077 Gainment with Ne osure Procedure npted (*) and N erial (ACM) nsulation, or	on-Friab	Pressure Dile Proced Amount Specify	dure	Abat	teme		yp
	Abatement (Che d During Entire P Outside of Norm AM- that apply) of Material (ACM)	Ck only eriod of all Facilities Re De Is Use Ma Cus	complete com	ement rs - Desion on tion on Staff?	ate (11) 18 scribe AM	Name of OSHA M EMSL Analytic Street Address 200 U.S. Rout City, State, Zip Co Cinnaminson Full Conta Glovebag Non-Exer Description of stos Containing Mat thermal systems in surfacing, VAT, other miscellaneous	e 130 North de NJ 08077 Gainment with Ne osure Procedure npted (*) and N erial (ACM) nsulation, or	on-Friab	Pressure Dile Proced Amount Specify	dure Removal	Abat	teme	nt T	yp
6 / 22 / Occupancy Status During Facility Closed/Vacate Abatement Performed Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing M TO BE ABAT IN Facility (13) Crawlspace	Abatement (Che d During Entire P Outside of Norm AM- that apply) of Material (ACM)	Ck only eriod of all Facilities PM/	complete com	ement rs - Des ion on tion on Staff?	ate (11) 18 scribe AM Asbes	Name of OSHA M EMSL Analyti Street Address 200 U.S. Rout City, State, Zip Co Cinnaminson Full Conta Glovebag Non-Exer Description of stos Containing Mat thermal systems in surfacing, VAT, other miscellaneous	e 130 North de NJ 08077 Gainment with Ne osure Procedure npted (*) and N erial (ACM) nsulation, or	on-Friab	Pressure Dile Proced Amount Specify F or LF)	dure A Removal	Abat	teme	nt T	
6 / 22 / Occupancy Status During Facility Closed/Vacate Abatement Performed Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing M TO BE ABAT IN Facility (13) Crawlspace	Abatement (Che d During Entire P Outside of Norm AM- that apply) of Material (ACM)	Ck only eriod of all Facilities PM/	complete (12) Abate ty Hou PM enovate molitic s Local Norma ed Sole intena todial (12) No	etion Da 2 / ement rs - Des ion on tion ully ely by ince/ Staff?	Asber (i.e. Asb. De	Name of OSHA M EMSL Analyti Street Address 200 U.S. Rout City, State, Zip Co Cinnaminson Full Conta Glovebag Non-Exer Description of stos Containing Mat thermal systems in surfacing, VAT, other miscellaneous	cal, Inc. te 130 North de NJ 08077 An Cainment with Neosure Procedure Inpled (*) and N erial (ACM) Insulation, or us)	on-Friab A (S	Pressure Dile Proced Amount Specify F or LF)	dure	Abat	temer Repair	Encapsulate	ур
6 / 22 / Occupancy Status During Facility Closed/Vacate Abatement Performed Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Abatement IN Facility (13) Crawlspace Crawlspace	Abatement (Che d During Entire P Outside of Norma AM- that apply) of Material (ACM) TED y	Ck only eriod of all Facility Del	complete (12) Abate ty Hou PM enovate molitic s Local Norma ed Sole intena todial (12) No	etion Da 2 / ement rs - Des ion on tion ully ely by ince/ Staff?	Asber (i.e. Asb. De	Name of OSHA M EMSL Analyti Street Address 200 U.S. Rout City, State, Zip Co Cinnaminson Full Conta Glovebag Non-Exer Description of stos Containing Mat thermal systems in surfacing, VAT, other miscellaneous	cal, Inc. te 130 North de NJ 08077 An Cainment with Neosure Procedure Inpled (*) and N erial (ACM) Insulation, or us)	on-Friab A (S	Pressure Dile Proced Amount Specify F or LF)	dure A Removal	Abat	temer Repair	nt T	ур
6 / 22 / Occupancy Status During Facility Closed/Vacate Abatement Performed Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing M TO BE ABAT IN Facility (13) Crawlspace Crawlspace	Abatement (Che d During Entire P Outside of Norma AM- that apply) of Material (ACM) TED y	Ck only eriod of all Facility Del	complete (a) (12) No	etion Da 2 / ement rs - Des ion con tion con tion N/A N/A	Asber (i.e. Asb. De Paper W	Name of OSHA M EMSL Analyti Street Address 200 U.S. Rout City, State, Zip Co Cinnaminson Full Conta Mini-Encl Glovebag Non-Exer Description of stos Containing Mat thermal systems in surfacing, VAT, other miscellaneous	e 130 North de NJ 08077 in a Cainment with Ne osure Procedure npted (*) and N erial (ACM) nsulation, or us)	on-Friab	Pressure Amount Specify F or LF)	dure	Abat	temer Repair	Encapsulate	yp
6 / 22 / Occupancy Status During Facility Closed/Vacate Abatement Performed Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Abatement IN Facility (13) Crawlspace Crawlspace	Abatement (Che d During Entire P Outside of Norma AM- that apply) of Material (ACM) TED y	Ck only eriod of all Facility Del	complete (a) (12) No	etion Da 2 / ement rs - Des ion con tion con tion N/A N/A	Asber (i.e. Asb. De Paper W	Name of OSHA M EMSL Analyti Street Address 200 U.S. Rout City, State, Zip Co Cinnaminson Full Conta Glovebag Non-Exer Description of stos Containing Mat thermal systems in surfacing, VAT, other miscellaneo	cal, Inc. se 130 North de NJ 08077 cainment with Neosure Procedure Inpted (*) and N erial (ACM) Insulation, or us) Name of Regis	on-Friab A (S SF	Pressure Amount Specify F or LF)	dure	Abat	temer Repair	Encapsulate	yp
6 / 22 / Occupancy Status During Facility Closed/Vacate Abatement Performed Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing M TO BE ABAN IN Facility (13) Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace	Abatement (Che d During Entire P Outside of Norma AM- that apply) of Material (ACM) TED y	Ck only eriod of all Facility Del	complete (a) (12) No	etion Da 2 / ement rs - Des ion con tion con tion N/A N/A	Asber (i.e. Asb. De Paper W	Name of OSHA M EMSL Analyti Street Address 200 U.S. Rout City, State, Zip Co Cinnaminson Full Conta Glovebag Non-Exer Description of stos Containing Mat., thermal systems in surfacing, VAT, other miscellaneous ebris Vrap rk w/Paper Wrap Cubic Yards of Waste 5	onitor cal, Inc. se 130 North de NJ 08077 cainment with Neosure Procedure Inpled (*) and N erial (ACM) Insulation, or us) Name of Regist Grand Cer	on-Friab A (S SF	Pressure Amount Specify F or LF)	dure	Abat	temer Repair	Encapsulate	УF
6 / 22 / Occupancy Status During Facility Closed/Vacate Abatement Performed Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing M TO BE ABAT IN Facility (13) Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace	Abatement (Che d During Entire P Outside of Norma AM- that apply) of Material (ACM) TED y	Ck only eriod of all Facility Del	complete (a) (12) No	etion Da 2 / ement rs - Des ion con tion con tion N/A N/A	Asber (i.e. Asb. De Paper W	Name of OSHA M EMSL Analyti Street Address 200 U.S. Rout City, State, Zip Co Cinnaminson Full Conta Mini-Encl Glovebag Non-Exer Description of stos Containing Mat thermal systems in surfacing, VAT, other miscellaneous ebris Vrap rk w/Paper Wrap Cubic Yards of Waste 5 Disposal Date	onitor cal, Inc. se 130 North de NJ 08077 cainment with Neosure Procedure Inpted (*) and N erial (ACM) Insulation, or us) Name of Regis Grand Cer City, State	on-Friab A (S SF	Pressure Ole Proced Amount Specify F or LF) 10 LF TBD andfill	dure	Abat	temer Repair	Encapsulate	yp
6 / 22 / Occupancy Status During Facility Closed/Vacate Abatement Performed Time of Abatement: Scope of Work (Check all ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf Location of Asbestos-Containing M TO BE ABAN IN Facility (13) Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace Crawlspace	Abatement (Che d During Entire P Outside of NormAMF that apply) of Material (ACM) TED y	Ck only eriod of al Facility Del Is Is Ma Cus	complete (a) (12) No	etion Da 2 / ement rs - Des ion con tion con tion N/A N/A	Asber (i.e. Asb. De Paper W	Name of OSHA M EMSL Analyti Street Address 200 U.S. Rout City, State, Zip Co Cinnaminson Full Cont. Mini-Encl Glovebag Non-Exer Description of stos Containing Mat., thermal systems in surfacing, VAT, other miscellaneous ebris Vrap rk w/Paper Wrap Cubic Yards of Waste 5 Disposal Date 6/25/18	onitor cal, Inc. se 130 North de NJ 08077 cainment with Neosure Procedure Inpled (*) and N erial (ACM) Insulation, or us) Name of Regist Grand Cer	on-Friab A (S SF	Pressure Ole Proced Amount Specify F or LF) 10 LF TBD andfill	dure	Abat	temer Repair	Encapsulate	yp
	Abatement (Che d During Entire P Outside of NormAMF that apply) of Material (ACM) TED y Title P Title Titl	Ck only eriod of al Facility Del Is Is Ma Cus	complete (22) one) Abate ty Hou PM enovat emolitic (12) No No No No No No No No No N	etion Da 2 / ement rs - Des ion on tion illy ely by ince/ Staff? N/A D JDEP V auler ID	Asbee (i.e. Asb. De Paper W Ductwo	Name of OSHA M EMSL Analyti Street Address 200 U.S. Rout City, State, Zip Co Cinnaminson Full Conta Mini-Encl Glovebag Non-Exer Description of stos Containing Mat thermal systems in surfacing, VAT, other miscellaneous ebris Vrap rk w/Paper Wrap Cubic Yards of Waste 5 Disposal Date	onitor cal, Inc. se 130 North de NJ 08077 cainment with Neosure Procedure Inpted (*) and N sulation, or us) Name of Regis Grand Cer City, State Penn Argy	on-Friab A (S SF	Pressure Amount Specify F or LF) 10 LF TBD	dure	Abat	temer Repair	tt Encapsulate	YP C





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

Data of Matification (4)				IL TO NOAC				Transles) E	0	BI	W	F	[
Date of Notification (1) 06-06-18			Name PSE	of Building G	g Owner/	Operato	(2)		15	6		13	L'a	
	Notification nitial			Address Hadley	Rd.				-	JUN	1.8	201	8	世
DEP X A	mended mendment #1			tate, Zip C					1-3		The same of the sa	and the second	01.0	
DOH ju	mergency (includestification) ancellation	ding	Name	of Contact	- 28			age and the same a	Tele	phone	OS C Number 7807	DNTH	IOL &	-
				ILITY INF	ORMAT	ION		7,5215	102	-004-	7 007			
Name of Facility Where Abateme PSEG Third Street Substa	ent is Taking Place ation	ce (3)					Type of F	0.0						
Street Address 163 Third Street							Sub Sub	ool (K-12 chapter er (i.e. pi	8 (Other	r than I	K-12) ercial b	uilding	s, hom	nes,
City (5) Kearny			-				Square F N/A		# of f	Floors		Bldg N/A	Age	
County (6) Hudson		I	County (STATE	Code (7)	0		Current U Switchin		r if being	g demo	olished)			AB 707 S 111
Name of Monitoring Firm Hired b	y Building Owner	r (8)	ASCI N/A	M No.			of Abatem Environ	ent Cont	ractor (9					
Street Address N/A			1			Street	Address Id Dock I		I Selvi	ces, i	TIG.			
City, State, Zip Code N/A						City, S	tate, Zip C	ode				-		
Project Manager for Monitoring F N/A	irm	T	Telepho	one No.		Teleph	one No.			License				
Start Date (10)			N/A mpletion	Date (11)		Name	924-8111 of OSHA M	Ionitor		01136				
06-15-18 Occupancy Status During Abatem		15-18	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				Environ	mental	Servi	ces, I	nc.			
Facility Closed/Vacated Duri Abatement Performed Outsi Other – Describe: Electrical	ng Entire Period de of Normal Fac	of Abater	nent			17 0	Address d Dock F tate, Zip Co							
					-	Yaph	ank NY	11980						
Scope of Work (Check All That Ap ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	opiy)	Renova Demoli	900			×	Mini-En Gloveba	ag Proce	edure				23890	
		Is Locati				-	I NOII-EX	empted	() and i	NON-FI	lable P	Aba	temen	t
Location of Asbestos-Containing Material	(ACM)	Normal Used Sole	ly by	Achoo		scription			200	2 2	-	Τ.	уре	
TO BE ABATED In Facility (13)		Maintena Custodial S (12)	Staff?	(i.e.	thermal surface	systems cing, VA niscellan		M)	(Spe	ount ecify or LF)	Kemoval	Repair	Encapsulate	Enclosure
Control House	Ye	s No	N/A x			Caulk	-		20		-	-	Ф	
			^			Jaulk			20	LF	X			
Name of Registered Waste Hauler		1000	JDEP Wauler ID		Cubic of Was		(i)	me of Re	150				-	
Veolia ES Technical Solution	ns	100		331369	TBD			Q Way	ne Dis	posa	I			
City, State Flanders, NJ 07836					Dispos TBD	al Date		y, State Ileville	, MI 48	3111				
Completed by Raymond Tutiven	Title Su	e pervisor			S	gnature	mand	1	ita	to the	Date 06-06	-18		



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

				t to NJAC						1	E (C	E	П	W	E
Date of Notification (1) 06/14/2018			Name of	of Building Port Auth	Owner/o	Operator f New '	(2) York	& New Jer	sev			<u> </u>		U	U	15
Agencies Notified Type Notification	Î.		Street	Address							J	UN	1	8 7	2018	
EPA Initial Amended				ewster Fate, Zip C												5
X DOL Amendmen				irk, NJ 0					Sign company to ca	A	SBE					L &
■ Emergency justification		g		of Contact					Te	lepho	ne Ni		JEN!	SIN	<u> </u>	-
DCA Cancellation	1			el DaCo					97	73-96	61-60	390				
Name of Facility Where Abatement is Takir	ng Place	(3)	FAC	ILITY INF	ORMAT	ION	Type	of Facility (4	1)							
Newark Airport - Building 345	- T						П	School (K-12	+			Ē.				
Street Address 350 Scargo Earhart Drive			100				×	Subchapter of Other (i.e. pretc.)	8 (Oth	er that	an K-	12) cial b	uildir	ngs,	home	es,
City (5) Newark							Squa N/A	re Feet	# o	of Floo	ors		Bld 35	g. A +	ge	
County (6) Union				Code (7) USE ONLY	n			ent Use (Prio lerground						it	220112411	
Name of Monitoring Firm Hired by Building ATC Associates, Inc.	Owner (8	3)	ASCI	M No.				atement Cont urg Indust			ce C	om	pan	y		
Street Address 104 East 25th Street						Street 2217		ss man Drive)						ê Leches	
City, State, Zip Code New York, NY 10010						City, S	tate, Z	ip Code n, PA 180								
Project Manager for Monitoring Firm			Telepho	ne No. 53-8280		Teleph 610-6	one N	0.			ense i	No.			- C	-
Start Date (10) 07/2/2018	Schedu 12/28/	led Cor 2018	mpletion	Date (11)		Name Bran		HA Monitor ura								
Occupancy Status During Abatement (Chec	k Only O	ne)				Street				15-15-1						
Facility Closed/Vacated During Entire	eriod of	Abater	nent					man Drive	(i)							
Abatement Performed Outside of Norm Other – Describe:	nal Facilit	y Hour	S					ip Code n PA 1801	5							
Scope of Work (Check All That Apply)						Dour	CHOI	11 / 1001						1,7.00		
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demoli				×	Mir Glo	ll Containmer ni-Enclosure ovebag Proce n-Exempted	edure					dure	è	
		s Locat												bate	ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Normal ed Sole aintena stodial ((12)	ly by nce/		tos Cont thermal surfac		laterial insula T, or		(8	mour Specif or L	fy	Nallova	Domovo	Tyr	Encapsulate	Enclosure
	Yes	No	N/A									1			te	(9)
Underground Fuel Piping			X	Bla	ack Tar			per	10,	500	LF	Х				
Underground Transite Conduit		X		Trans	ite Cor	nduit		3,6	00 L	_F	X	-				
Name of Basis											-					
Name of Registered Waste Hauler Brandenburg Industrial Service Co		Н	JDEP W auler ID 1838		Cubic of Was			Name of R IESI Betl					•			
City, State Bethlehem, PA			500000			al Date /18-12/	/28/1	City, State Bethlehe	m, P	PΑ						
Completed by Stephen Carne	Title Envir	ronme	ntal Er	ngineer	_	ignature	and a	P				ate 6/14	1/20	18		

Signature

Completed By (Print or Type) Constantine Vivian

Title President 1199 Randall Ave, Bronx

Date

6/13/2018

41009			NOTI	FICATIO	State of New N OF ASBE	STOS	ABATE	MEN	п	D	E	C	E		₩P	
Date of Notification (1)	-			11	of Building C	90		1)				JUN	1 1	8 :	2018	and afternoon and a
06/09/2018				LEN	DE POL	7 1	I L	J								
Agencies Notified	Type Notification	n		Street	Address						ASI	BES!	OS	CON	THU	L. &
EPA DEP	Initial			074 0							-	L	IGE:	MIS?	O	
DEP DOL	Amended Amendmer	nt#			tate, Zip Coo WOOD N.		307									
☑ DOH	Emergency	(including	g		of Contact	3. 07				Tolor	2622	. Niver				
DCA	justification Cancellatio				DE POL					1		Num 6 69				
N. 75 W. 110				FAC	ILITY INFO	RMAT	TON	01001911								
Name of Facility Where A PRIVATE	Abatement is Taki	ng Place	(3)					Тур	e of Facility (4	4)						
Street Address									School (K-1	2)						
								岗	Subchapter Other (i.e. p	8 (Other rivate &	r than comn	K-12 nercia) Il bui	ldings	. hom	es.
City (5)									etc.) Jare Feet	# of F						
MAYWOOD NJ. 07	607								989.	7 2	loors		1	3ldg. / 80	0.70	
County (6)				County	Code (7)			0.00	rent Use (Pric		g dem	nolish	ed)			
BERGEN				(STATE	USE ONLY)	39			•	N/A			,			
Name of Monitoring Firm N/A	Hired by Building	Owner (8)	ASC	M No.				patement Con							
N/A Street Address									EAST ENV	IRON	MEN	ITAL	LL(0.		
Street Address				S			Street									
City, State, Zip Code							1126									
, one, _p oods							1		Zip Code BERGEN N	J. 070	147					
Project Manager for Mon	itoring Firm		1	Telepho	one No.		Teleph					se No		-		
N/A			1				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		- 0642	1	0130		•			
Start Date (10)					Date (11)		Name	of OS	SHA Monitor							
06/13/2018		06/13/					ENV	IRO	PROBE IN	IC						
Occupancy Status During			307				Street						-			
Facility Closed/Vaca Abatement Performe	ted During Entire	Period of	Abate	nent					RTY ST.							
Other - Describe: _		mai i aciii.	y i ioui	s 		_			Zip Code HEN NJ.							
Scope of Work (Check Al	That Apply)						IVILI	001	ILIVIVO.							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demoli				××	M G	ull Containment lini-Enclosure lovebag Proce on-Exempted	edure					-	
		lo	Locat	ion	I				Z. Z.ompieu	/ unu i	1011-1	Habit	1 10		ement	
Location			Norma ed Sole	lly		Des	scription	of							rpe	
Asbestos-Containing I TO BE ABA		Ma	aintena	nce/	Asbesto	s Cont	aining M systems	ateria	al (ACM)		ount	1			щ	m
In Facilit	У	Cus	todial ((12)			surfac	cing, VA	T, or	. 1		cify r LF)		Remova	Repair	icap	nclo
(13)		-	_	1		other n	niscellan	eous))				oval	air	Encapsulate	Enclosure
		Yes	No	N/A											e e	
BASEME	:NT		Х		PI	PE IN	ISULA	TIOI	N	12.	LF		Х			
		-								•						
Name of Registered Wast	e Hauler			JDEP W	(asts)	0	V1									
RI STATE ASSOCO				IJDEP W lauler ID	24 12 12 12 12 12 12 12 12 12 12 12 12 12	Cubic ' of Was			Name of R	11.75						
	, IIVO			19951		TBD	00000		MINER	VA EN	IER	PRIS	SE I	NC.		
City, State BRONX NY.					1		al Date		City, State							
Completed by		Title				TBD			WAYNE	SBURG	G OI					
CARLOS ESQUIVEL		100000000000000000000000000000000000000	ETY	MANAG	BER .	Si	ignature	3	rund.	000	2	Date		2040		
		J. 11						-	7	17	- 1	00/	U3/2	2018		

C14 0100		NOTIF (P	CATION	OF/ASE	w Jersey ESTOS A 8:60 and	BATE	MENT	. (112	0)		Pri	nt For
Date (Notification (1)									1	加量	<u>U</u>	<u>L</u>	U \	
Date of Notification (1) 06/11/18				road St	Owner/O	perator	(2)							
Agencies Notified Type Notification	ı		Street A	ddress						1.	JUN	18	3 20	18
▼ EPA				road St					-	į				
DEP Amended			1.5	ate, Zip Co						ASI	BEST	os c	ONT	ROL &
Emergency	(including	-		f Contact					Tala	ohone Ni	L	DENS	ING	
DOH justification Cancellatio				ny Pisa						\$954-8				
			110.000.000.000	CONTRACTOR AND ADDRESS	ORMATIC	ON								
Name of Facility Where Abatement is Takin Auto Glass Services LLC.	ng Place (3)					Туре	of Facility (4)						7
Street Address								School (K-12) Subchapter 8	Other	than K-	12)			
227 Broad St.							×	Other (i.e. priv				ldings	home	es,
City (5)						-		etc.) are Feet	# of F	Floors		Bldg. A	\ge	
Bloomfield							170		1			50+	:50	
County (6)			County (STATE	Code (7)	2			ent Use (Prior i			shed)			
Essex Name of Monitoring Firm Hired by Building	Owner (9)		ASCN	56067111-0301103011	/	Nome		o Glass Rep atement Contra						
N/A	Owner (o	,	ASCI	л NO.				rvices Inc.	ictor (s	3)				
Street Address						Street	Addre	ss .						
						156	Mapl	e Ave.						
City, State, Zip Code								Zip Code						
Project Manager for Monitoring Firm			Telepho	no No		Teleph	-	n, NJ 07057		Licoppo	NIo			
Project Manager for Monitoring Pinn			releptio	ne ivo.		862-				License I 01107	NO.			
Start Date (10)	Schedul	ed Cor	mpletion	Date (11)		Name	of OS	HA Monitor						
06/25/18	06/30/			3.52. 191				alodka						
Occupancy Status During Abatement (Che	- 5	250				Street								
Facility Closed/Vacated During Entire Abatement Performed Outside of Non					-			e Ave. Cip Code						_
Other – Describe:								n, NJ 07057						
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demolit					Fu Mi	II Containment ni-Enclosure ovebag Proced		Vegative	Pressi	ıre		
	-			1		×		n-Exempted (*		Non-Fria	ble Pr			
	9	Locati Normal											ement /pe	
Location of Asbestos-Containing Material (ACM)	Use	d Sole	ly by	Asbes	Deso stos Conta	cription ining N		I (ACM)	Am	ount			ш	
TO BE ABATED In Facility		intena todial S			thermal s		s insul			ecify or LF)	Ren	Re	Encapsulate	Enclosure
(13)		(12)			other mi				31 (JI LI'J	Removal	Repair	slusc	osur
	Yes	No	N/A								_		ate	Φ
front roof			*		roof	flashi	ng		450) sf.	*			
front roof			*		roof m	nembr	ane		900) sf.	*			
office		*		flo	or tile:	S		750) sf.	*				
Name of Registered Waste Hauler		100000	JDEP W		Cubic Y			Name of Re	gistere	ed Landfi	II			
Newark Carting Inc.		196	lauler ID 5409	No.	of Wast	e		GCSL						
City, State					Disposa	al Date		City, State						
Newark, NJ					07/02/	18		Pen Argyl	, PA	8				
Completed by	Title	idest	î		Sig	gnature		1/5		4350	ate	40		
Leslaw Nalodka	Pres	ident				/		11/10			06/11/	10		





Date of Notification (1)					Nam	e of Buildir	ng Owner/Operator	(2)		ПП	- ·		1
	14 /	18	_		W	ildwood I	Retail LLC		ECEL	\mathbb{V}			the Residence of the letter of
Agencies Notified ☑ EPA	Type Notifica ☑ Initial	ation				et Address							
⊠ DOLWD	Amended	t				1 Ayers (THE PERSON NAMED IN COLUMN TO PERSON NAMED I	JUN 182	1018	G. Carrie	9	
☑ DHSS	Amendme	ent#_			1 100	State, Zip		- Andrews			April 1		
☐ DCA (NJAC 5:23-8)			uding			aneck, N			PRESTOS CON	TRAI	0	TOT FAIT	agranu
(NJAC 5.23-0)	justification Cancellat					e of Contac even Yen			Telephone Num	~	m %'s		
									201-927-876	9	2.1.280 *.0 860		30)
Name of Facility Where Al	natement is T	Takina I	Diana	(2)	FA	CILITY	NFORMATION	Т					
Warehouse	Jatement is 1	aking i	Place	(3)				Type of Facility (School (K-12)					
Street Address								☐ Subchapter 8	(Other than K-12)			
4315 New Jersey Av	е							Other (i.e., pr homes, etc.)	ivate and commer	rcial b	uildin	gs,	
City (5) Wildwood								Square Feet	# of Floors	В	ldg. A	ge	
County (6)					T-		er regissor estende con constant	9,750	1		1950)	
US; Cape May CO.					Cou	nty Code (7	()(STATE USE ONLY)		or if being demolis	hed)			
land the second	E d b D TI							Warehouse					
Name of Monitoring Firm F	fired by Build	ling Ow	mer (8	3)	ASCM	No.	Name of Abateme						
Street Address								n Environmenta	I Service, LLC				
Street Address							Street Address						
City, State, Zip Code							958 Jackson						
Oity, State, Zip Code							City, State, Zip Co						
Project Manager for Monito	ring Eirm			Tele		N1-	Mays Landing	g, NJ 08330					
. Tojour Manager for Monite	ning rum		1	rele	phone	No.	Telephone No.		License No.				
Start Date (10)	S	chedul	ad Co	mnlo	tion Do	ite (11)	609-561-1901 Name of OSHA M		01158				
06/15/						18			10				
Occupancy Status During A								Environmenta	i Services, LLC	<i>.</i>			
☐ Facility Closed/Vacated					nent		Street Address 958 Jackson	D.d					
☐ Abatement Performed C	Outside of No	rmal Fa	acility	Hour	s - Des	cribe	City, State, Zip Co						
Time of Abatement: 7AI	M- <u>11:30</u> PM/		PM		AM		Mays Landing						
Scope of Work (Check all ti	nat apply)												
			Ren	ovatio	on		☐ Full Conta	ainment with Nega	tive Pressure				
⊠≥160 sf or ≥260 lf			Dem				☐ Glovebag	Procedure					
			lo l	ocati	00	Г	☐ Non-Exer	npted (*) and Non	-Friable Procedur	е			
Location of	2 3			rmal			Description of			Ab	atem	ent T	ype
Asbestos-Containing Ma	aterial (ACM)		Used			Asbes	stos Containing Mat		Amount	Re	Re	En	四
TO BE ABATE IN Facility	<u>=D</u>		Main Custo			(i.e.	, thermal systems in	nsulation,	(Specify	Removal	Repair	cap	Enclosure
(13)		-		(12)			surfacing, VAT, other miscellaneo		SF or LF)	a		Encapsulate	ure
First Floor		Y		No	N/A							<u>6</u>	
FIIST FIOOI						Pipe Ins	sulation		320LF				
	Bath												
Name of Registered Waste		46			DEP V		Cubic Yards of	Name of Registe	red Landfill	1		70	
Graham-Tech Enviror	nmental Se	rvice,	LLC		uler ID 00345	30,000,000	Waste	G.R.O.W. No	orth Landfill &	Fully	towr	E	
City, State		1					Disposal Date	City, State					
14 Read Drive Sickler		081						1513 Broder	ntown Rd. Morr	isvil	le,PA		
Completed By (Print or Type	(e)	Title					Signature	U	Date	e,			~
Vernice Graham		Pres	iden	t			IVOIM	LUMA	n	(1	-11	4-	18
CD 44			-					- 1 /		~		1	-





State of NJ Notification of Asbestos Abatement Pursuant to NJAC 8:60-7 and 12:120-7) EMERGENCY CLEAN UP**

Check # 9012

		, Wend	Good 4	-		EWIERGEN	CYC	LEAN UP**	Check	K# 9012				
Date of Notification	(1)	1	Name o	of Build	ding Ow	ner/Operator (2	2)		ID E	e e	11	W	E	
10 16 1/11 12	1/118		-		aveiro		,		11D)_E	GE	L	A		\mathbb{N}
Agencies Notified	Type Notifica	ation	Street A	ddres	S		_						-	-
∐ EPA	X Initial								the state of the s	JUN 1	8 2	2018	C. Approva	IJ
☐ DEP			City, Sta	ate, Zi	o Code				Vist Vist					
X DOL	Amend	dment		Shann-	NJ 0	7940			120	SESTOS (TAI)	700	0	
X DOH	4		Name of	f Conta	act					ne Numbe			i or	***************************************
☐ DCA	Cance	llation	Roc	ier Ci	raveiro	,				DANIEL - 12501113 1	740.	e to care many		27/200/01
			1108	901 01				2000						
					FA	CILITY INFORM	MATIO	N						
Name of facility who	ere abatement	is taking	place (3)						Type of Facility	(4) ol (K - 12)				
Roger Craveire	0							1	1 =	50 65	thor t	han k	(12)	
Street Address									17/11/2007	hapter 8 (O (Private/C			(-12)	
									Bldgs	./Homes, e	tc.			
City (5)		T C	ounty (6)				Γο.		Square Feet	# of Floor	S	В	ldg. A	ge
		"	ounty (o)				2000	unty Code (7) ate use only)	Current Use (F	Prior if boin	a don		ad)	
Madison		N	/lorris				,	,,	Residential	Tioi ii beili	y ucii	1011311	euj	
Name of Monitoring	Firm Hired by	Bldg. Ov	vner (8)			ASCM No.	1	Name of Abatement	Contractor (9)					
<u> </u>	70					n/a		B & G Restorat	ion, Inc.					
Street Address								Street Address						
AV AL 3: A L								105 Ryerson R	coad					
City, State, Zip Code								City, State, Zip Code Lincoln Park,	NII 07025					
Project Manager for	Monitoring Fire	n		Dhor	ne Numi	her	_	Telephone Number	NJ 07035	TLicense	Mirma	201		
rojest Manager for	wormoring r in			11101	ie ivuiti	bei		(973)696-686	9		378	Jei		
Scheduled Start Date	2 (10)	ISch	ed. Comp	letion	Date (1	1\	_	Name of OSHA Moni	tor		_			
06/13/2018	0 (10)				Date (1	17		B & G Restorat	ion, Inc.					
West 100 Co. 000 Co. 100 Per 1			6/16/201				_	Street Address			A - Ra-Le			
Occupancy Status D					ont			105 Ryerson R	oad 					
Abatement per								City, State, Zip Code						
Describe: Other-Describe	a.						-	Lincoln Park, N	J 07035					
Scope of Work (che		v)						L 					A	
Demolition	×	Renova	tion				X	Full Containment w/neg	ative pressure	Gloveb	an nr	ncedi	ITE	
>3 sf or >3 If	_		or >260 If					Mini-enclosure	jaure process	☐ Non-fri				
		-	ion norma		ed solel	vl					R	R	Е	
Location of asbestos-conta	aining	by mair	ntenance/			1	on of a	asbestos-containing	Amount	*	e m	е	n	E n
material to be abated in facili	tv (13)	staff(12		T	0.000.000	material ((Specify S	SF or	0	p a	c a	С
abated in ident	., (10)	Yes	No		N/A						v e	i	р	L L
Basement					X	clean-up v	vet w	riping&Hepa vacuu	ım 540 sf				X	
First Floor Room					×	clean-up w	et w	iping&Hepa vacuu	m 260 sf				X	
Garage					X	Designation of the last of the last	ALC: NO.	ping&Hepa vacuur	The same of the sa				X	
Lower Level					×	VAT & Ma	stic		260 sf		X			L.
Registered Waste Ha	uler	L INTE	DEDLIE		17	ubic Yards of V	Vanta	Nome of Desisters 1	Landfil			Ш	Ц.	Ш
B & G Restoration		INJI	DEP Haul 19563	er ID#		3	vasie	Name of Registered Grand Cen					950	
City, State				Dis	posal D	ate		City, State					-	
Lincoln Park, N.					06/1	15/2018		Pen Argyle,	PA				y	
Completed by (Print of Gordana Luna	or Type)	Title Secret	ary/Trea	asure	r	Signature		Gordana Luna		Date 06/12	/201	8		

			RECEIN	/ED 06/12	2/2018	04:08PM				
12 2018 16:03 NJ Asbestos	Control 609,633,066	54	pa	ige 1		I	C		W [5
ON 00 10 2015-127		State cation of Asb	95105 A 36-7 B							
Date of Notification (1)	Name of Euilding Ow	ner/Operator (2)				TOL A	SEUTIS LIGE	HIN(THOL	. &s.
0 16 1/1 12 1/118	Roger Craveiro					To the terror of the second	PERCENTAGE STORY	to the same of	100 0000	entukkoner
Agencies Notified Type Notification	Street Address					ر (۱۱) اب	مرقال سے		T	
D EPA Initial							1/		- [Tiles.
DEP -	City, State, Zip Code	50.15	,		14/	UVED A	2000///			
KI DOL Amendmen	MICHIGALIF AND DE	7940			¥77	VIVER A		<u>. I</u>		
DOH Dancelfetion	Name of Contact				p ·	I BREDNOTHS I	ed libri			
☐ DCA ☐ DBIIDGING.	Roger Cravein	0					,			
	FA	CILITY INFORM	ATION			A				
Name of facility where shatement is la	king place (3)				Type	of Facility (4)	(K - † 2)			
Roger Craveiro							ter 8 (Other	than K-1	2)	
Street Address					4	Char (P	rivate/Comm			
,					Scu	ara Feat 6	omes, etc.) Bld	g. Aga	
Olty (6)	County (6)		Count	y Code (7)	-					
Madison	Morria		(State	use only)		rent Use (Prid	of if being de	molished	ಶ)	
Name of Montering Firm Hired by Sid		T ASCM No.	. ITP	vame or Abate		sidential ctor (9)				_
Idition of Interference Hitting of the	9. 010/10/ (0)	n/a	- 11	B& G Resi				50		
Street Address			1	trest Address						
				105 Ryers		-		-		<u></u>
City. State, Zip Code				ity, State, Zip : Lincoln Fi		7035				
Project Manager for Mankoring Firm	Phone Nu	mber		ејернопе Миг	er .		License Nur	TOBI		
114				(973)696			0037	8		- Court
Schoduled Start Date (10)	Bened. Completion Date	(11)		Name of OSHU	pration. I	nć.				
06/13/2018	06/16/2018		1	Street Address						_
Occupancy Status Buring Abetement	Check only one)			105 Ryers	n Hoad				-	
Facility closes/vecated during as Abstement performed cutaids of	itire period of abatemant.		R	City, Stete, Zip	.ವರಣ	8				
Describe:	trainial reality include		_	Lincoln Pa	k, NJ 07	035				
Scope of Work (check all that apply)										_
	Senovation		E F	il Containmer!	whitestive	enussenq:	Glovebag	procedu	TLØ	
	160 sf or ≥260 lf		E M	ini-enclosura		[dehl-noM	le precs	dure	
i applies of	a location sormally used so	plety					. 1	R	E	Ε
t-ratus suctaining	by maintenáříče/custodia) staff(12)			bestos-confai i	168	Amount (Specify S	re and I	n p	0	n
abated in facility (13)	Yes No No	1	d (ACM)		-	ĽF)	1	1 1	0	Ĺ
Basement		class.ur	a harat tari	ioina&Hepa	SC INW	540 sf	- 1	111	E	
First Floor Room		All the second s	wet wi	pinga:napa	Scanu	260 sf			屋.	
Сагадо		The state of the s	wet wil	olng&Hepa	эсиит	292 sf			R.	
Lower Lovel		× VAT &	Mastic			260 sf		到日	山山	4
		T Cubic Yards	* 10	Name of Rep	Noved Lea	KIFII .				<u> </u>
Registered Waste Hauter B & G Restoration, Inc.	19563	3	or Arears	Gran	d Centra					
City, State		10 Date 06/15/2018		City, State	rgyle, PA					
Lincoln Park, NJ Completed by (Print or Type)	Title	Signature					Data			
Gordana Luna	Secretary/Treasurer			Godera S	595/12		D8/12/	2018		-

CK 4759

PAID

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



Date of Notification (1)				T	Jame of Duile	ding Owner/Operat	25 (2)					ì
_6-	17-18			-	HI	ARBAUG	H DEV	ELOPER	35 C	ONTE	OL &	edermer.
	Type Notifica	tion		S	Street Addres	18 GLA	SSBORD	RD				
M DOD	☐ Amended			C	city, State, Zip			-			-	==
1	Amendme Emergenc		ding	_	u	JOOOBUR	Y HETC	3HTS N	1.7	08	09	7
DA DOH	justification Cancellation	n)	,	N	ame of Conta	act		Telephone	-1-			
	Cancellatio	n 			SAL	ME						
Name of Facility Where Ab	otomont in To	Li Di	(2)		FACILITY IN	FORMATION						
R E	SIDEN	CF	ice (3)				Type of Faci					
Street Address	312010						School (K	(-12) ter 8 (Other tha	n K-12)			
							Other (i.e.	., private & com	mercial	buildir	gs,	
City (5)							homes, e Square Feet		rs	Bldc	Age	
A	VIALOR	<u> </u>					1200	7			O +	
County (6)	:				ounty Code (7) (STATE	Current Use	(Prior if being d	emolishe	ed)		
Name of Monitoring Firm His	MA				SE ONLY)			ACANIT				
(8)	I IA	g Owne		ASC	M No.	Name of Abaten		(9) ENC			Exception of	
Street Address	N P			_		Street Address	voice .	LIVE		_		_
						369	S. Sp	RUCE K	Lux			
City, State, Zip Code						City, State, Zip C	ode	AX 1900 FI	, T			
Project Manager for Monitori	ing Firm		Tel	ephor	e No	Telephone No.	LE SH		LIT	08	305	2
				op ioi		856 779	9-0472	License N	CI	37	1	
Start Date (10)	Sch	eduled (Comple	etion [Date (11)	Name of OSHA N			V.1-			
6-22-18		(-		-15	<u>'</u>		N/	A				
Occupancy Status During Ab						Street Address						
Facility Closed/Vacated D Abatement Performed Out					1	0: 0 7: 0						_
Other - Describe:	BIGE OF NOTE	ai raciii	y riou	13		City, State, Zip Co	ode					
Scope of Work (Check all tha	it apply)											_
	11.1.11					Full Cont	tainment with Ne	egative Pressur	e			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		_	movati			☐ Mini-Encl	losure g Procedure					
P -		4				Non-Exe	mpted (*) and N	on-Friable Proc	ædure			
			ocatio					,			ement	
Location of		Used	Solely	by		Description of					pe	
Asbestos-Containing Materia TO BE ABATED	al (ACM)		tenano stodial			s Containing Mate		Amount			m	_
IN Facility			taff?		(i.e., u	nermal systems ins surfacing, VAT, o	sulation,	(Specify SF or LF)	20	7 R	TCa	nc!
(13)			12)			ther miscellaneou		0. 0. 2 /	Vellioval	Repair	Encapsulate	Enclosure
		Yes	No	N/A					1 =		ate	76
SIDING		-	-	V	TO	ANSITE	-	2750	Sc X	,		\dashv
5101.00	-	-	\dashv	_	1.0	2343110		110	201	+-	\vdash	\dashv
		-	\dashv						-+-	+	\vdash	\dashv
		_	\dashv						-+-	1	\vdash	\dashv
lame of Registered Waşte Had	uler			DEP V		Cubic Yards	Name of Regis	stered Landfill				\dashv
KLEMCO IN	_		Hau	aleg ID	No. o	f Waste	(M. L). K	+	
City, State		1./				isposal Date	City, State :	14	., 0			=
	DE	W.	5				Woo	OBINE	N	.T		
completed By	Title	- 110	L 0			Signature 0	07.	Date	in	. 1	8	
MICHAEL KUM	M _	SUP	LYC			Many	Un	ط_	-11		3	



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



Date of N	lotification		3/18 ification					ner	/ Operator (2)		7	G		E	M
Agencies		pe Noti	mcation			Addre					YF.		DED _ W.		
rigendes	EPA		Emergen	cy Notifica		Addre	SS			Target and the same of the sam	111		1.0.0040	Security of the Parks	
	DEP	200000	Initial Not		111000000000000000000000000000000000000	State &	Zip Cod	P			-	-JUN-	1 8 2018		31
X	DOL	200		Notificati			NJ 070							STATE OF THE PERSON NAMED IN	
X	DOH		Cancellat	tion		of Cor				-		SBESTO	STelephon	e Nun	nber
	DCA				Robe	rt Dug	ghi			acceptant of	<i>/</i> ~u	LIO	€ 908G	m, 0,00	
					FA	CILIT	Y INFO	RM/	ATION	ELIPPE DE	Anna postara		200		
Name of I	Facility Wh			Taking P				Тур	e of Facility (4)						
Street Ad	dress	v	acaill K	esidence	;				School (K-12)	O46 46	1/	40)			
01.001710	41000						- 1	Y	Subchapter 8 (Other (i.e., priv				lings home	o oto	
		ļ					-		are Feet	# of Flo		Clai Dulic	Bldg. Age		<u>. </u>
City (5)			Cot	unty (6)	County C	Code (7		Oqu	2,800	" 01110	2		Diag. Age	50	
	Watchur	ng		merset	innamina.			Curi	rent Use (Prior in	f being o		ished)		50	
		•							mmercial			onou)			
Name of I	Monitoring mental Ta	Firm Hi	ired by Bu	ilding Owr	ner (8)	ASCI			ne of Abatement						
Street Add		400,000,	1110						et Address	it Serv	ices,	LLC			
64 Broad	d Street								Schoolhouse	e Road					
	e & Zip Co								, State & Zip Co						
	n, NJ 077								nroe Townshi		8831				
Tom Gei			ring Firm		Telephone 732-290-2				phone Number -605-9062			License	Number 00714	4	
Scheduled	d Start Dat	e (10)	Sche	eduled Cor	npletion Date	e (11)	1	Nam	ne of OSHA Mor	nitor					
	6/23/18				6/28/18	27 19			bal Abatemer	nt Serv	ices,	LLC			
Occupano X Fa	cy Status Dacility Close	ouring A ed/Vaca	batement ated Durin	(Check or g Entire P	nly one) eriod of Aba	tement			et Address Schoolhouse	Road					
					al Facility Ho	urs -			State & Zip Co	AUGUST CONTRACTOR OF THE PARTY					
	escribe: ther - Desc		solated I	During A	batement		ľ	Mor	roe Townshi	p, NJ 0	8831				
Scope of \	Work (Che	ck all th	nat apply)												
	emolition			Renovat	ion				Full Cont	tainment	t with	Negative	Pressure		
	arge Projec								Mini-Enc		107	3			
	uantity is ≥								X Glovebag	g Proced	dure				
Qı	uantity is 2			LF ACM					Other:	Non-fri	able				
		cation o			Is Location				escription of		100000	nount	Abater		
	Asbesto	erial (AC			Normally U Solely b		А		stos-Containing aterial (ACM)			pecify	(Specify		
		E ABAT			Maintenand		(i		hermal systems	100	Squa	are Feet or		ncaps closur	
		Facility			Custodial S				on, surfacing, VA		Line	ar Feet)	OI LII	Glosui	0)
		(13)			(12)				er miscellaneous			,			
		Base	ment		N/A				TSI Pipe	-	41) LF	Rei	nova	ī
I No.											· '		1101	11014	
	Registered		Hauler		NJDEP Was	te Hau			Cu. Yds. of Wa	ste			stered Lan	dfill	
City, State		9				10000		-	Disposal Date		TRR City,				
	on, NJ								6/28/18			otate ⁄town, F	Pa		
	d By (Print		e)	Title					Signature				-	Date	
	nick Tring		0.000	Pres.					Dominick T	ringal	i				3/18
0.7															

PAID

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

	All the silvery		γ. ω.	ouun	· · · · · <u>·</u>	1.0.71.0	<u> </u>	70 and 12.17	20)		1 5	<u>6</u> <u>B</u>				1
Date of Notification ((1) 6-14-2018			Nam	e of E	Building	g Own	ner / Operato	r (2)		71		2 201	^		
Agencies Notified	Type Notific	ation				Univers dress	sity Ho	ospital				JUN 1	3 201	8	I leaves	
⊠ EPA						pel Hill	Cam	pus								
☐ DEP ☐ DOL	☐ Initia			City,	State	& Zip	Code	1		1	AS	BESTOS	CONTE	OL 8	4	-
☑ DOH		rgency				I, NJ 08 Contact					and the second second second second	LICE	NOING		appearance for	
☐ DCA		ellation		Shar									856-5		Num	oer
				F	ΔΟΙΙ	ITV IN	IEO DI	MATION					000-0	52-0		
Name of Facility Who	ere Abateme	nt is Taking Pla	ace (3)	'	AUIL	_11 1 114		Type of Facil	ity (4)							
Jefferson Hospital-La Street Address	ab						- 1	☐ School (K-12)							
2201 Chapel Hill Car	mpus							Subchar	oter 8 (Other to	han K-1	12)				
	puo						-	Other (i.e. Square Feet	e. priva	# of F		ial buildir	Bldg.		etc.)	
City (5)		County (6)	Co	ounty	Code	(7)		250,000		111 011	2		blug. /	100	2	
Cherry Hill, NJ		Camden						Current Use ((Prior if	being	demolis	shed)				
Name of Monitoring I	Firm Hired by	Building Own	er (8)		IAS	SCM No		Hospital Name of Aba	40.00.0.0	0	-1 (0					
Criterion Laboratorie	s		J. (J)		1	JOIN NO	00000	Resource Ma								
Street Address 3370 Progress Drive, S	uita I						18	Street Addres	SS							
City, State & Zip Cod							_	2115 Hamilto			.02					
Bensalem, PA, 19020	le						T	City, State & 7 renton, NJ 0	Zip Coo	de						
Project Manager for I	Monitoring Fir	rm	Teler	hone	Num	ber	_	elephone Nu				License	Numbo			
Mr. Mike Panepresso				44-13				09-914-4279				Licerise		185		
Scheduled Start Date		Scheduled Con	npletio	n Dat	e (11)		lame of OSH				1				
6-27-2018 Occupancy Status Du		7-3-2018						&S Environm		aborat	ories, I	nc				
☐ Facility Close	ed/Vacated D	uring Entire Pe	y one) riod of	f Abat	emer	nt		Street Addres 333 Route 2								
Abatement P	erformed Out	tside of Norma	Hours	s: 2 nd	shift 4	 4:00pm		ity, State & 2								
12:00am Describe:																
Facility Occup	pied During A	batement					U	Inion, NJ 070	083							
Scope of Work (Chec	k all that app	ly)														
≥3 sf or ≥3 lf				_					\boxtimes	Full Co	ntainm	ent with I	Vegative	e Pre	ssure	
≥160 sf ≥260	lf				ovati					Mini-E		e ocedures				
			_							Non-Ex	cempte	d and No	n-Friabl	e Pro	cedu	re
	cation of os-Containing	g.		Locati nally l			۸۵	Description	of			Amount			ment 7	
Mate	rial (ACM)			olely b			AS	sbestos-Cont Material (AC				(Specify SF or LF)			ш	
	E ABATED Facility			tenan		1	(i.e	e., thermal sy	stems			, o, <u>L</u> , ,	2		n ca	ncl
111	(13)		Custo	odial 9 (12)	мап?			ation, surfaci					To you	Veball	Encapsulate	Enclosure
	2000 1000 		Yes	No	N/A			The Thiodolic	arioodo	,			1 2	-	ate	l e
Lab				\boxtimes		Ceilin	ng pla	ster			36 SF					10
			H	H	님	-	-									
					ᆸ	-					-					ዙ
															HH	H
Name of Registered V	Vasta Haular															
						Waste D No.	Was	ic Yards of	Name	of Reg	istered	Landfill				
Resource Manageme	nt Group, LL0				35218		TBD	1777	Grows	Landfi	II					
City, State Frenton, NJ					and the shall			osal Date	City, S					1,000		
Completed By (Print o	r Type)			Title	<u> </u>		TBD	1	Morris	ville, P	A					
Mr. Brian J. Haney	. , , , , ,				e siden	nt	Sign	ature		Mh.	1 11.		Date) 2018	3	
							11/	7 4 1 M		/ W V			3/14	,2010		

PA	Contraction and a second	NOT	FICATIO	State of No DN OF ASI	BESTOS	ey SABATEMENT nd 12:120)	г		: C	园		\mathbb{V}	
Date of Notification (1) 06/12/2018			Name	of Building nouth Uni	Owner	Operator (2)	neck No. 1135	5117					And the second second
Agencies Notified Type Notification				Address edar Ave	nue			Ped Col	JUI		8 2	018	11
□ EPA □ Initial □ DEP □ Amended □ DOL Amendment #			City, S West	state, Zip C Long Bra	ode nch, Ne	ew Jersey 07	764	AS	BEST	OS (NON SINK	i RO	L & .
 ☑ DOH justification ☑ DCA ☐ Cancellation 	iciualing		120000 Paylores 01	of Contact hy Orr				Telephone 732-571-		ber			
Name of Facility Where Abatement is Takin Monmouth University, Beechwood Ha	ig Place (3)	FAC	CILITY INF	ORMAT	Type of Fac	cility (4)						
Street Address 400 Cedar Street						☐ School ☑ Subcha	(K-12) apter 8 (Other t i.e. private & co	han K-12) mmercial b	uilding	s, hon	nes,	etc.)	
City (5) West Long Branch, New Jersey 07764					50-01/65	Square Fee	t	# of Floors		Blo 50	ig. A	ge	
County (6) Monmouth			County (STATE	Code (7))	Current Use R-2 Reside	e (Prior if being ntial-contains 2	demolished	d) units, d	ccupa	ants i	erma	anent
Name of Monitoring Firm Hired by Building AHERA Consultants, Inc.	Owner (8))	ASC 000	M No. 57			atement Contra						
Street Address P.O. Box 385						Street Addre							
City, State, Zip Code Oceanville, New Jersey 08231						City, State, Z Woodland I	Zip Code Park, New Je	rsey					
Project Manager for Monitoring Firm John Smoyer			Telepho 609-6	one No 52-1833		Telephone N 973-225-84		Licens 0110					
Start Date (10) 06/22/2018	Schedul 06/24/2	ed Co 018	mpletion	Date (11)		Name of OSI	HA Monitor mental Labor	atories, LL	.C				
Occupancy Status During Abatement (Chec						Street Addres	SS						
 ☑ Facility Closed/Vacated During Entire F ☐ Abatement Performed Outside of Norma ☐ Other – Describe: 	eriod of A al Facility	batem Hours	nent			City, State, Z Union, NJ 0	ip Code				V		
Scope of Work (Check All That Apply)				Idite — Av.		<u> </u>	- 2000					nt the	
≥3 sf or ≥3 lf≥160 sf or ≥260 lf		Renova Pemolit				☐ Mir	Il Containment ni-Enclosure ove Bag Proced I-Exempted (*)	dure / Limite	d Con	tainm	ent &	Tent	
	4 22	Locat	3.55377					Amount (Specify		- 7.37	pater Typ		
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility	Use Ma	d Sole intena odial s	ely by nce/	Asbe (i.€	stos Cor e. therma	escription of ntaining Materi al systems insu acing, VAT, or	ai (ACM) ilation,	SF of LF)	Remova			Encl
(13)	Yes	No	N/A		other	miscellaneous)			noval	Repair	Encapsulate	Enclosure
Guite 2nd Floor Mechanical Room	X	(3.62-697).		Ceiling Sh	eetrock	& Joint Compo	ound & Soffit	7	4 SF	X			
Suite 3rd Floor Mechanical Room	Х			Ceiling Sh	eetrock	& Joint Compo	ound & Soffit	7	4 SF	X			
Name of Registered Waste Hauler		Н	JDEP Wauler ID 18724		Cubic Yof Was		Name of Reg		dfill				
City, State Woodland Park, New Jersey					Dispos 06/24/	al Date	City, State Morrisville, I	96,52,1713					
Completed by Adriana Olejarova	Title Pre	siden	t			gnature	100	2	Date 06/	12/20	18		
ASB-41 (R-06-08)					1	* Po not use th	his form for asb	pestos licens	sure e	xempt	ed a	ctiviti	es.



State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

		NOTI (FICATIO	tate of Ne N OF ASE t to NJAC	BESTOS	ABATE	MENT 0)		EC	EI	\mathbb{V}	E	
Date of Notification (1) 06/14/18	Check # 3203			of Building aul the A			(2) Institute		JUN	13	2018		
Agencies Notified Ty	pe Notification		The state of the s	Address				1			2010	-	
□ EPA 区				Old Berge			Table of the Control	L	SBESTO	8 00	UTDO		
DEP X DOL	Amended Amendment #			ate, Zip Co y City, N		200	ŧ	4 15 104	LIC	ENSIN	vino IG	<u>- C</u>	
	Emergency (include	ding		of Contact	13, 0730	00						C. C. STONE .	F
DOH DCA	justification) Cancellation			k Pharol	h			400	elephone N 08-451-1				
			Carrier State	ILITY INF	5.5	ON			00-451-1	307			
Name of Facility Where Aba Infinity Institute	tement is Taking Plac	ce (3)					Type of Faciliti					N	
Street Address 193 Old Bergen Rd					7// 5		Subchap Other (i.e	ter 8 (Ot	her than K	-12) rcial bu	ldings	, hom	es,
City (5) Jersey City							etc.) Square Feet 25,000+	3	of Floors	100	Bldg. A	\ge	
County (6) Hudson				Code (7) USE ONLY)	_	Current Use (I	Prior if b	eing demol	ished)			
Name of Monitoring Firm Hir N/A	ed by Building Owner	(8)	ASCI N/A	M No.		Name EA S	of Abatement C	Contracto	or (9)				
Street Address N/A						Street	Address 9th st						
City, State, Zip Code N/A							tate, Zip Code enberg, NJ, (7093					
Project Manager for Monitoria	ng Firm		Telepho N/A	ne No.		Teleph	one No. 295-1700		License 01074	No.			
Start Date (10) 06/29/18		duled Co	mpletion	Date (11)			of OSHA Monit	or	10.07.				
Occupancy Status During Ab	atement (Check Only	One)				Millionia .	Address						
Facility Closed/Vacated	During Entire Period	of Abater	nent			N/A							
Abatement Performed C Other – Describe: 9am		ility Hour	S		_ [City, St N/A	ate, Zip Code						
Scope of Work (Check All Th	at Apply)												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	×	Renova Demoli				×	Full Contain Mini-Enclose Glovebag Po Non-Exempt	ire ocedure					
		Is Locat	ion				Non-Exemp	led () al	id NOII-FIR	I PIC		ement	
Location of		Norma			Desc	cription	of				Ту	ре	
Asbestos-Containing Mate <u>TO BE ABATEI</u> In Facility (13))	Jsed Sole Maintena Sustodial ((12)	nce/		os Conta thermal s	ining Ma systems ing, VAT	aterial (ACM) insulation, r, or	(Amount Specify F or LF)	Remova	Repair	Encapsulate	Enclosure
*****	Ye	s No	N/A		04101111		5005)			val	ir	ılate	ure
Boiler Room	1	X		Pi	pe Mate	erial @	Boiler		3 SF		Х		
Basement Hall	vay	X		Pipe	e chase	along	hallway		3 SF		Х		
Name of Registered Waste H Tri-State Transfer Associated			IJDEP W lauler ID 9551		Cubic Y of Wast TBD			f Regist va Entr	ered Landf eprise	ill			
City, State Bronx, NY					Disposa TBD	I Date	City, St	ate esburg	ОН		76-2		
Completed by Gina Betances	Title Off	e fice Mar	nager		100000000000000000000000000000000000000	gnature	Blua	L		ate 6/14/	18		

PAII	D (NOTI	FICATIO	State of N ON OF AS	lew Jers BESTOS C 8:60 ai	ABATE	EMENT		5.7)[[C			V	rint F
Date of Notification (1) 06/13/18 Check			Name St. Jo	of Buildin ohn the	g Owner Baptist	Operato /Golde	r (2) n Door	Charter	Scho	oöl _i	JUN	1	8 7	2010	- Christian and
Agencies Notified Type Notificati EPA Initial DEP Amended			3044	Address Kenned State, Zip (ł				ASI	BEST	OS	400 Mist	TRO	il &
X DOL Amendm	ent # cy (includin on)	g	Jerse Name	of Contac Velelis	NJ, 073	306				lephone			424		
Name of Facility Where Abatement is Ta Golden Doors Charter School	king Place	(3)	FAC	CILITY IN	FORMAT	ION		Facility (
Street Address 3044 Kennedy Blvrd City (5)							St. Ot etc	bchapter her (i.e. p c.)	8 (Oth private	& comm	nercial	buil			es,
Jersey City County (6)			0	0 1 (7)			Square 20,000)+	2	f Floors		5	lldg. A	ge	
Hudson			(STATE	Code (7)	Y)		School				olishe	ed)			
Name of Monitoring Firm Hired by Buildir N/A	g Owner (8)	ASC N/A	M No.		Name EA S	of Abater Services	ment Con	tractor	(9)					
Street Address N/A						100000000000000000000000000000000000000	Address 69th st								
City, State, Zip Code N/A							State, Zip enberg,		093						
Project Manager for Monitoring Firm N/A			Telepho N/A	one No.		Teleph	none No. 295-170			Licens		_			
Start Date (10) 06/26/18	Schedul 06/28/		mpletion	Date (11)			of OSHA	AATERO		0107	-				
Occupancy Status During Abatement (Ch Facility Closed/Vacated During Entire Abatement Performed Outside of No Other – Describe: 3:30pm	e Period of	Abater	ment s			Street N/A	Address tate, Zip (Code							
Scope of Work (Check All That Apply) ≥ 3 sf or ≥3 lf ≥ 160 sf or ≥260 lf	promote and the same of	Renova Demoli				× ×	Mini-E Glove	ontainme inclosure bag Proce	edure						
Location of		Locat Vorma			Dog	arintian							Abate Typ	ment	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	ed Sole intena todial ((12)	nce/	Asbes (i.e.	tos Cont thermal surfac	scription aining M systems cing, VAT niscelland	laterial (A insulatio T, or	CM)	(S	mount pecify or LF)		Remova	Repair	Encapsulate	Enclosure
Boiler Room	Yes	No X	N/A	Boiler	Insulati	on & P	ipe Mat	erial	5	SF	1		Х	ate	œ.
					Jaiati	JII W I	.pc ivial	Silai		OF-			^		
Name of Registered Waste Hauler Tri-State Transfer Associates		H	JDEP W		Cubic of Was			ame of R			lifill				
City, State Bronx, NY		13	9551			al Date	С	ity, State							
Completed by Gina Betances	Title Office	e Mar	nager		TBD	gnature	BV.	Vaynest	ourg,		Date 06/1	3/1.	 8		

Print Form-

Ch 4860	(Caranta)		NO	rifi ç (F	ATIO Ursua	ant to NJ	SBE IAC	STOS ABA 8:60 and 5:	16)		EC			/ E	Constant State Sta
Date of Notification (1) 06 /	13 /	18						wner/Operator	75.170		JUN	18	201	8	
Agencies Notified	Type Notifi		_	Accessor.				or Educatio			222				1
⊠ EPA	I ppe Notifi	Cation			100000000000000000000000000000000000000	et Address		•			ASBEST				<u>-</u> !
☑ DOLWD	☐ Amende	ed				8 N. Clin						DENSI		VL G	
⊠ DOH	Amenda			_		State, Zip				- A - CONTRACTOR	Transment and to	9r/m.e-	to the second	the second	Con merin
DCA	☐ Emerge	ency (inc	ludin	g		enton, N.		609							
(NJAC 5:23-8)	justifica Cancell					e of Conta		228		Tele	ephone Nu	ımber			
	☐ Cancell	ation			Ja	yne S. He	owa	rd		60	09-656-4	900			
					F	ACILITY II	NFO	RMATION)::===1 re			
Name of Facility Where A									Type of Facilit	y (4)					
Monument Element	ary Schoo	I & Off	fice	of Ea	rly Ch	ildhood			School (K-	12)					
Street Address									Subchapte	r 8 (Oth	er than K-	12)			
145 Pennington Ave	enue								Other (i.e., homes, etc	private	and comm	nercial b	uildin	gs,	
City (5)									Square Feet		f Floors	TF	Bldg. A	and	
Trenton									100,000	2		-	70	igo	
County (6)					Cou	inty Code ((7)(ST	ATE USE ONLY)		- 1	-	lichad)			-
Mercer									School	HOL II D	enig demo	nisrieu)			
Name of Monitoring Firm I	Hired by Bui	Iding Ov	wner	(8)	ASCN	1 No.	Na	me of Abatem	ent Contractor (9	2)					
Environmental Conr									onmental, LL						
Street Address							_	reet Address	ommemai, LL						
120 N. Warren Stree	t							623 Cutler A							
City, State, Zip Code															
Trenton, NJ 08629								ty, State, Zip C							
Project Manager for Monito	oring Firm			Tal		Na		Maple Shade	e, NJ 08052						
Steve Mania	oning Film				ephone			lephone No.	_	1	ense No.				
Start Date (10)	-	Cabada	1- 1 0	1		2-4200	-	356-755-009		0	0842				
		Schedul 08				ate (11) 18	1000000	me of OSHA I EMSL Analy							
Occupancy Status During	Abatement (Check of	only o	ne)			Str	eet Address					-		
□ Facility Closed/Vacated	During Ent	ire Perio	od of	Abate	ment		2	200 Route 13	0 North						
Abatement Performed (Outside of N	ormal F	acility	Hou	rs - Des	scribe	-	y, State, Zip C							
Time of Abatement:	AM	PM/		_PM		_AM	100000	Cinnaminson							
Scope of Work (Check all t	hat apply)				110-000-000		1		., 110 00017						
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 				novat moliti				☐ Mini-End	tainment with Ne closure g Procedure mpted (*) and Ne			ure			
**	7)		ls	Local	ion				. (,	T			atem	ont T	vne
Location of				lorma				Description of	of				-	1	1
Asbestos-Containing M TO BE ABAT		1)	Mai	d Sole intena	nce/	Asbe	stos	Containing Ma	terial (ACM)	953	Amount	Rem	Repair	nc	nc
IN Facility				odial	Staff?	(1.6		ermal systems surfacing, VAT			Specify F or LF)	Removal	air.	Encapsulate	Enclosure
(13)		1		(12)	1	1	oth	her miscellane	ous)	01	or Li j	=		ulat	ē
		,	Yes	No	N/A			*						(D	
Exterior				\boxtimes		Window	v Ca	ulk		2,	846 LF				
												П	П	П	П
1 1 2	14											10			
				П							504011122			П	П
Name of Registered Waste	Hauler			N	JDEP \	Naste	Cub	oic Yards of	Name of Regis	stered I	andfill				
Freehold Cartage				Н	auler II 15939	200.000.000.000	Was		Fairless L		andilli				
City, State			2000	Oranie I Iranie				oosal Date	City, State						
Freehold, NJ							08	8/10/2018	Morrisville	, PA					
Completed By (Print or Type	e)	Title						Signature		20-1-1	D	ate			_
Christina Lynch		Vice	e Pre	side	nt of (Operation	าร	mste	KZ		1	ace (0/13	18		

Ch 3000		NOT	IFICATIO	State of N ON OF AS at to NJA	BESTOS	ABATE	MEN (0)	т				erne Jakatre	<u>U</u> <u>u</u>	
Date of Notification (1) 06/11/18 Check #	3200		Name St Jo	of Buildin	g Owner/	Operato	r (2)		I La to	 	JN 1	8 2	018_	
Agencies Notified Type Notification			Street	Address Cloud P						ASBE	STOS LIGE	(SIM)	TROL	. Er
DEP Amended Amendme	nt#			tate, Zip (Orange		7052			-	TOTAL CONTRACTOR S. S. S.			Section 2	10.1942.77
DOH Emergence justification	y (includin	g	Name	of Contac		1032	-			elephone		r		
DCA Cancellation			Jim	ILITY INI	FORMAT	ION			2	01-577-	-6797	-		
Name of Facility Where Abatement is Tak FEDCAP	ing Place	(3)						e of Facility	(4)					
Street Address 8 St Cloud Place							×	School (K- Subchapte Other (i.e. etc.)	r 8 (Ot	her than I	K-12) ercial b	uilding	s, hom	nes,
City (5) West Orange					7-10-10-10-10-10-10-10-10-10-10-10-10-10-		10000000	are Feet 000+	2	of Floors		Bldg. 50+	Age	
County (6) Essex			County (STATE	Code (7) USE ONL	Y)		Curi	rent Use (Pr	ior if be	eing demo	olished)	Ĭ		
Name of Monitoring Firm Hired by Building N/A	Owner (8)	ASCI N/A	M No.		Name EA S	of Ab Servi	eatement Co	ntracto	r (9)				
Street Address N/A						Street 426 (
City, State, Zip Code N/A								Zip Code rg, NJ, 07	093					
Project Manager for Monitoring Firm N/A			Telepho N/A	ne No.		Teleph 201-2	none N	No.		License 01074	200000000000000000000000000000000000000	<u> </u>		
Start Date (10) 06/22/18	Schedul 06/23/	led Co	mpletion	Date (11)		12012074		SHA Monitor		0101-				
Occupancy Status During Abatement (Che		35				Street	Addre	ess						
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe: 8 AM	Period of a	Abater y Hour	ment s				tate, 2	Zip Code			-7.9-2-3			
Scope of Work (Check All That Apply)						N/A								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli				×	Mi GI	ull Containme ni-Enclosure ovebag Proc on-Exempted	e cedure				re	
	100	Locat Vorma	0.700.0								labio i i	Aba	tement ype	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Sole intena todial ((12)	ely by nce/	Asbes (i.e.	tos Conta thermal surfac	scription aining M systems sing, VAT niscelland	ateria insul r, or	ation,	(5	mount Specify F or LF)	Removal	T	Encapsulate	Enclosure
	Yes	No	N/A				ĺ	2			a	1	late	лге
Janitors Closet		Χ			9x9	Floor T	ile		3	5 SF	Х			
											-	-		
Name of Device											-	+		
Name of Registered Waste Hauler Tri-State Transfer Associates		H	JDEP Wauler ID 19551		Cubic \ of Was TBD			Name of F Minerva			fill			
City, State Bronx, NY					Dispos	al Date		City, State Waynes		ОН				
Completed by Gina Betances	Title Office	e Mar	nager		Si	gnature	16	Vice	1		Date 06/11/	18		

Ch 3901		NOT	IFICATI	State of N ON OF AS Int to NJA	BESTO	SARATE	ME	it [E C	E		V	Pint
Date of Notification (1) 6/11/2018 Check # 3	onl		Name	of Buildin	g Owne	r/Operato	r (2)			jtj	N 1	8 2	2018	
Agencies Notified Type Notification			-	ohn the I	Baptist	Acade	my							i.
	м			Address	eet					ASSES	TOS	CON	TRO	. 8.
DEP Amended			_	State, Zip C					nome per la m	CHAPTER S	LICE	MEIM	(3) (3)	
DOL Amendme	nt #			dale, NJ		2								
DOH Emergence	n)	ig	Name	of Contac	t				Tele	ephone N	lumbe	r		
DCA Cancellation	on			Ford						1-334-8				
Name of Facility Where Abatement is Tak	ing Place	(3)	FA	CILITY INF	ORMA	TION	_							
St John the Baptist Academy	mg r lacc	(3)					_	e of Facility (4)						
Street Address							X	School (K-12 Subchapter 8) (Othe	or than V	10)			
69 Valley Street							Ħ	Other (i.e. pri	vate &	commer	cial bu	uilding	s, hor	nes,
City (5)							Sau	etc.) are Feet		Floors		Bldg.		0.000
Hillsdale								000	2	1 10013		50+	Aye	
County (6) BERGEN			County	Code (7)	121		Curr	rent Use (Prior		a demoli	shed)	-		
				USE ONLY	0		Scl	hool			/			
Name of Monitoring Firm Hired by Building N/A	Owner (8	3)	ASC	M No.		Name	of Ab	atement Contra	actor (9)				
Street Address								ces Corpora	ation					
						Street							-21111111111111111111111111111111111111	
City, State, Zip Code								Street Zip Code			Q=1550			
								Street						
Project Manager for Monitoring Firm		T	Telepho	one No.		Teleph				License 1	No			
						201-2				01074	VU.			
Start Date (10) June / 23 / 2018				Date (11)		Name o	of OS	HA Monitor						
	June /		2018			Same	as	above						
Occupancy Status During Abatement (Che Facility Closed/Vacated During Entire						Street A	Addre	SS						
Facility Closed/Vacated During Entire Abatement Performed Outside of Non Other – Describe:	nal Facility	Abater y Hour	ment s			City, Sta	ate, Z	ip Code						
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demolif	ation tion			×	Mir	II Containment ni-Enclosure ovebag Proced n-Exempted (*	ure				·a	
	Is	Locati	ion						7 0110 1	101111100	T		ement	
Location of	1 1180	Normal d Sole	ly ly by		Des	scription o	of						/ре	
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	intena	nce/	Asbest	os Cont	aining Ma systems i	terial	(ACM)	Amo				ш	_
In Facility (13)	Cust	todial S (12)	Staff?	(1.6.	surfac	ing, VAT,	, or	ition,	SF o	ecify r LF)	Rem	Repair	ncap	inch
(13)					other m	iscellane	ous)				Remova	pair	Encapsulate	Enclosure
Crowd Co.	Yes	No	N/A								-		te	Ф
Crawl Space	Х				Pipe	Insulati	on		8 L	-F	х			
Name of Registered Waste Hauler		N	JDEP W	acte	Cubic \	/nede		N = 1=						
ri- State Transfer Assoc		Ha	auler ID i		of Was			Name of Reg Minerva E			С			
City, State Bronx, NY					Disposa	al Date		City, State	ıra O					
Completed by	Title					gnature /	M	Waynesbu	ig, O		_			
Gina Betances	Office	Man	ager			(NI	ual-		Dat 06		2018		

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 06/14/2018 North Arlington Board of Education Check No. 1142 Agencies Notified Type Notification Street Address 3 2018 222 Ridge Road **EPA** Initial City, State, Zip Code X DEP Amendment # ASBESTOS CONTROL & DOL North Arlington, New Jersey 07031 Emergency (including justification) Name of Contact Telephone Number X DOH Cancellation Tony Alho 201-991-6800 DCA FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) George Washington Elementary School School (K-12) Street Address Subchapter 8 (Other than K-12) 175 Albert Street Other (i.e. private & commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age North Arlington, New Jersey 07031 10,000 50+ County (6) County Code (7) Current Use (Prior if being demolished) Bergen (STATE USE ONLY) Educational Facility Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) T & M Associates Lilich Corporation Street Address Street Address 40 Monmouth Park Highway, Suite 2 606 McBride Ave City, State, Zip Code City, State, Zip Code West Long Branch, New Jersey 07764 Woodland Park, New Jersey Project Manager for Monitoring Firm Telephone No Telephone No. License No. Kevin Burns 732-676-4000 973-225-8400 01104 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 06/28/2018 06/30/2018 Iris Environmental Laboratories, LLC Occupancy Status During Abatement (Check Only One) Street Address 2333 Route 22 West ☑ Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: 3:30 PM Start Union, NJ 07083 Scope of Work (Check All That Apply) ≥3 sf or ≥3 If IXI Renovation Full Containment with Negative Pressure □≥160 sf or ≥260 If Demolition Mini-Enclosure X Glove Bag Procedure / Limited Containment & Tent П Non-Exempted (*) and Non-Friable Procedure Amount Abatement Is Location (Specify Туре Normally Location of SF of LF) Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Maintenance/ Encapsulate TO BE ABATED Enclosure (i.e. thermal systems insulation, Remova Repair Custodial Staff? In Facility surfacing, VAT, or (12)(13)other miscellaneous) Yes No N/A Pipe insulation & Assoc Pipe Fitting Insulation Basement Hallway X X 35 LF Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Lilich Corporation 18724 Fairless Landfill City, State Disposal Date City, State Woodland Park, New Jersey 06/30/2018 Morrisville, PA Completed by Title Signature Date Adriana Olejarova President 06/14/2018

State of New Jersey

		E Card	Pour	Λ		100									Print F
CH 1740		NOT	Pursual	nt to NJA	€ 8:60 a	ABATE 10 12:12	20)	IT			; C			\mathbb{V}	
Date-of Notification (1) 06/05/2018			Name	of Buildin	g Owner	Operato	r (2)		- Control		JUI	y 1	8 2	2018	
Agencies Notified Type Notificatio	n		-	ens Inst	itute of	recnn	olog	у							į kr
X FPA X Initial	5.4.		0-0-0-	stle Poi	nt on H	udson				ASI	BEST	08	CON	TRO	L&
X DEP Amended	****			State, Zip						nterior e	# *****	CER	JOHA!	4	*
- Emergency		ng		oken, N.											
DOH justification Cancellation	1)			of Contact d Ferna							ne Nu 5-91				
Name of Facility Where Abatement is Taki	ing Place	(2)	FAC	CILITY IN	FORMAT	ION									
School (Howe Center)	ing riace	(3)						e of Facility (4							
Street Address 1 Castle Point on Hudson							×	School (K-12 Subchapter Other (i.e. pr	8 (Othe	er tha	n K-1	2) ial bu	ildina	s hon	nes
City (5) Hoboken							1.200	etc.) lare Feet	# of	Floor			Bldg.		100,
County (6)			County	Codo (7)			N/A		N/A			- 1	N/A		
Hudson			(STATE	Code (7) USE ONL	y)		Sch	rent Use (Prio hool	r if beir	ig dei	molish	ned)			
Name of Monitoring Firm Hired by Building Briggs Associates	Owner (8	3)	000	M No. 4		Name D&S	of Aba	atement Cont atement, Inc	ractor ((9)					
Street Address 3 Crosswicks Street						Street	Addre	ess							
City, State, Zip Code								ngren Aven Zip Code	ue ———				0.000		
Bordentown, NJ 08505 Project Manager for Monitoring Firm						Toto	va, l	NJ 07512							
Michael Hoodak			Telepho 609-2	one No. 98-5520)	Teleph 973-3				Licer 013	nse N	0.			
Start Date (10) 06/22/2018	Schedu 06/30/	led Co 2018	mpletion	Date (11))			SHA Monitor tement, Inc							
Occupancy Status During Abatement (Che	ck Only O	ne)				Street				2000					
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr	Period of nal Facilit	Abater y Hour	ment s					gren Avenu Zip Code	ıe e						
X Other – Describe: Occupied		RR DESCRIPTION			_			NJ 07512							
Scope of Work (Check All That Apply)	-														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli				×	Gl	III Containmen ni-Enclosure ovebag Proce	dure						
	Is	Locat	ion				INC	on-Exempted (r) and	Non-l	Friabl	e Pro		e ement	
Location of		Normal ed Sole	lly		Des	cription	of							/pe	
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	intena	nce/	Asbes	tos Conta	aining Ma	ateria	I (ACM)		ount		_		ш	_
In Facility (13)	Cus	todial 8 (12)	Staff?	(1.0.	surfac	ing, VAT	, or	8		ecify or LF)		Removal	Repair	ıcap	Enclosure
(1-5)	Yes	No	N/A		otner m	iscellane	eous)					oval	air	Encapsulate	sure
Howe Center 6th Floor Lobby	-	X	14//3		Fire	proofin	a		220	SF		Х		W.	
Howe Center 6th Floor Lobby		X				Insula				LF		X			
Howe Center 6th Floor Lobby		X				/ Mast				SF		X			_
									720	OI-		^			
Name of Registered Waste Hauler		1 (2003)	JDEP W	27.57 T.T.	Cubic \			Name of Re	gistere	d Lar	ndfill				\dashv
D&S Abatement, Inc.			auler ID 0996	No.	of Was	te		Fairless L							
City, State Totowa, NJ					Disposa	al Date	B	City, State Morrisville	. PΔ						
Completed by	Title					gnature	10	/ INSTITUTE OF THE	, rA		Date				
Oliver Hegedis	Projc	et Ma	nager			1	0	/-		-			018		

PAIL

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

CH # 006023

Date of Notification (1)	R. A. SALES			Name	of Building	Owner	Operate	- /0	n .		WEST COLUMN		77			1 200	ب د			
06/14/2018					ville Pub			or (2	(1)	1		C		[] [V	EI				
Agencies Notified	Type Notification			- 200-3	Address				100	4	Mary Interview and		(E)	u	U I	7	1 11			
X EPA	× Initial				Passaic /				A STATE OF THE PARTY OF THE PAR			สัสสาส			3420	- Carrenge				
DEP × DOL	Amended Amendment	ш			tate, Zip C				T II	Ш	3	UU;	1	0 2	18		7)			
	☐ Emergency	(including	_		ville, NJ		9									of building the				
☑ DOH ☑ DCA	justification)				of Contact Henry					۵۰	NSB!	ephon	e-Nu	mber-	ROi	R.	-			
	Canochation				ILITY INF	ORMAT	ION				(20	51) 9	Ub-/	204		O.	- 1			
Name of Facility Where	Abatement is Takin	g Place ((3)		ype of Facili	acility (4)														
Public School #4 -	Belleville Eleme	entary S	Schoo	Scho							ool (K-12)									
Street Address				x Subo							chapter 8 (Other than K-12) er (i.e. private & commercial buildings, homes,									
35 Magnolia Street	ă			Oth etc.						e. pri	vate 8	k COM	merci	ai bui	aings	, nom	es,			
City (5) Belleville				Square F						경향하다					Bldg. Age					
County (6)				County Code (7) Curren							2			- 1	50+					
Essex				County Code (7) Curre (STATE USE ONLY) — Scho						Prior	if beir	ng der	nolisi	ned)						
Name of Monitoring Firm)	ASC	Abatement (Contr	actor	(9)	-	500.00										
McCabe Environme	ental Services,	LLC		118	118 Hazmat Diagr							(0)								
Street Address	reet Address 64 Valley Brook Ave						Street Address													
			16 Glenwild Ave																	
City. State. Zip Code Lyndhurst, NJ 0707						e, Zip Code	. 0-	7400												
Project Manager for Mon		Telepho	ne No		Telep		ngdale, N	JU	7109		na N									
John H. Chiaviello			438-483	9	1		28-3995			011	nse N 81	0.								
Start Date (10)		Date (11)	20	100		OSHA Monit	or		011											
06/25/2018 07/01/2018							Hazı	ma	t Diagnos	tic L	LC									
Occupancy Status During							Street													
Facility Closed/Vaca Abatement Perform	ated During Entire F	Period of	Abatem	nent					nwild Ave											
Other – Describe:	ed Odiside of North	iai raciiit	y Hours	City, State, Zip Co							74.00									
Scope of Work (Check A	Il That Apply)		-		ngdale, N	5, 110 07 100														
≥3 sf or ≥3 If	29 - Carlo Carlo Carlo - I - A 4 040	×	Renova	tion			7	7	Full Contain	mon	. with	with Negative Pressure								
2160 sf or ≥260 lf			Demolit				4	Mini-Enclosi	ure		ivega	ive P	iessu	ie						
							Ė		Glovebag P Non-Exemp			Non-	Friabl	e Pro	cedur	e				
		Is	Locati	on				Non-Exempted (*) and Non-Friable Procedure Abate							t					
Location			Normalled Sole			De	scription	n of							Т	pe				
Asbestos-Containing TO BE ABA		Ma	intenar	nce/	Asbes	tos Cont	taining N	Mate	erial (ACM) sulation,			nount pecify		77		Ш	ш			
In Facili (13)	ty	Cus	todial S (12)	staff?	(surfa	cing, VA	T, c	or		SF	or LF)	Removal	Repair	caps	Enclosure			
(13)		-		Γ	-	other r	niscellar	neou	us)					oval	air	Encapsulate	sure			
		Yes	No	N/A												е				
Boiler Roo		-		X	Demol				tire Boiler	4	4'3"x	3'x5'	6"	X						
Boiler Roo	om #2	-		X		Pipe	Insula	atio	n		15	5LF		X						
Name of Registered Mas	of Registered Waste Hauler NJD						V- ·													
Hazmat Diagnostic L			1000	JDEP W auler ID	Oubic of Was	Yards ste		Name o												
	035440)	TBD			G.R.C		.S.N	orth /	Fai	rless	Lan	dtill							
City, State Bloomingdale, NJ						Dispos	sal Date		City, St Morris		. PΔ	Λ								
Completed by		Title					ignature	9 , ,,		1	-, , ,		Dat	е						
Tatiana Rotaru	a Rotaru Administrative Assistant						-	The	M						2018	Ġ				

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

CH# 006024

	此戶為目					0.00 ui	14.12	.0)		CR	77 0	00	1	~ 7			
Date of Notification (1) 06/14/2018	4 * 19.00.3	the Contract of the Contract o		Name	of Building	Owner	Operato	r (2)	20							-	
	a Nave				dle Brook	Scho	ol Disti	rict	-	1-19	E C	o E	П	17	7 10	2	
	e Notification	1			Address Mayhill S	treet			-	Wr	<u> </u>	0 5	- U		E	The state of the s	
DEP	Amended				State, Zip Co								Senie .			- 111	
⊠ DOL □	Amendmen				dle Brook,		7663		A Paragraphic Control		JU	IN 1	8	201	8		
ĭ DOH ☐	Emergency justification)	(incluain	g		of Contact					Tie	lephone	Numb	er			- Person	
▼ DCA □	Cancellation	า		Mr. k	Keith Sirol	ky					01) 49						
Name of Facility Where Abate	montis Tell			FAC	CILITY INFO	DRMAT	ION				10131101	JOEN	AIR	NIH IG	()L 8	N.	
Franklin Elementary Sc	hool	ng Place	(3)						of Facility			REPORT OF THE PARTY OF THE PART				e NACHTORN T	
Street Address									School (K-	-12)		12 40					
95 Caldwell Ave								Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes,									
City (5)								etc.)									
Saddle Brook								60,0							Age		
County (6)				County	Code (7)			Contract of the		2				0+			
Bergen					USE ONLY)	Current Use (Prior if being demolished School)				
Name of Monitoring Firm Hired	d by Building	Owner (8)	ASC	M No.		Name of Abatement Contractor (9)						_				
EnviroVision Consultant	ts. Inc			000	79		Hazr	zmat Diagnostic LLC									
Street Address	vasaran serakses							reet Address							10.011.00		
20-21 Wagaraw Road -	Bldg.35E						16 G	Glenwild Ave									
City, State, Zip Code							City, S	ity, State, Zip Code									
Fair Lawn, NJ 07410									lale, NJ	07403							
Project Manager for Monitoring Guillermo M. Morales		Telepho	one No. 636-9145	120.02-200-017	-	one No			Licens	e No.							
							(973)	928-	3995		0118	1					
06/27/2018	OCIOZIOS 4 C								A Monitor						-77-59		
Occupancy Status During Abatement (Cheek Oct - O								-	agnostic	LLC							
							Street		~								
Facility Closed/Vacated D Abatement Performed Ou	uring Entire F tside of Norm	Period of	Abater	nent					d Ave								
Other - Describe:		idi i dollitj	rioui				City, St					5					
Scope of Work (Check All That	Apply)						RIOOI	mingd	ale, NJ	07403							
≥3 sf or ≥3 lf	11.77	X		4100			-	1									
≥160 sf or ≥260 lf			Renova Demoli			×	Full	Containme	ent with	Negativ	e Pres	sure	9				
						×	Slovebag Procedure										
		T	06 100			177	L	Non	-Exempted	d (*) and	Non-Fi	riable F	roc	edur	9	-0.0	
l nankin - f			Locat Iormai						ĺ				A		ment		
Location of Asbestos-Containing Materi	ial (ACM)	Use	d Sole	ly by	Ashaata	Des	cription	of				-	Т	Ту	56		
TO BE ABATED	***************************************		intena odial S		Asbesto (i.e. th	nermal :	systems	insulat	ion.		nount pecify		.		En	Ш	
In Facility (13)		0000	(12)	otan:		surfac	ing, VAT	, or			or LF)	Namova		Repair	caps	nclo	
*****		Vac	NI-		,	outer III	iscellane	eous)				DVd		air	Encapsulate	Enclosure	
Ctorr. D		Yes	No	N/A				-							e		
Storage Room				X			Pipe I			3	5LF	X					
Storagr Room				Х	Mud J	oint / I	Fitting	Insula	tion	16	3LF	Х					
Name of Registered Waste Hau	ler		JDEP W	lasta I	Oubia V	'											
Hazmat Diagnostic LLC	NACON		Н	auler ID	No.	Cubic Yards Name of Registered Landfill of Waste											
City, State			00	035440		TBD	G.R.O.W.S. North / Fairless Landfill						dfill				
Sloomingdale, NJ		100.00	Disposal Date City, State														
Completed by	TBD					Morrisvi	lle, PA										
- :: :					rative Assistant Signature						0.4	Date					
	uve As	sistant			Pour	~	ļ		06/14	/20	118						



State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT) E C E I V E []

			(Pursu	ant to NJAC 8:60 a	nd 12:120	NIKI		CK	4		4				
Date of Notification (1)				ng Owner/Operator (2)			JUN: 1		11	11	7				
6/14/18				Township School I	District	In m	OUI: I	8 2018	land the same	/					
Agencies Notified Type Notification			Address	8						- Out					
⊠ EPA ☐ Initial		_	New Ro			f for	ASSESTOS	COSTROL		F					
DEP Amended		1000000	State, Zip (13	·	LICEN	ISING							
□				, NJ 08088			arrive the treatment framework to the transfer to the term.		***************************************	<u>}</u>					
□ DOH justification)			of Contac		1.00		Telephone Numi								
□ DCA □ Cancellation		C/0 1	/aser iv	lechanical - Richard	i Kaser		609-929-876	51							
	115,000		F		_										
Name of Facility Where Abatement is Taking Place (3)					Type of Fac	ility (4)									
Kenneth R. Olson Middle School			School (K-12)												
Street Address					Subchapter 8 (Other than K-12)										
132 New Road					Other (i.e. private & Commercial buildings, homes, etc.)										
City (5)															
Tabernacle					Square Feet		# of Floors	Bldg. Age							
County (6)			County	Code (7)	100,000 1 50+										
Burlington				USE ONLY)	Current Use (Prior if being demolished) School										
Name of Monitoring Firm Hired by Building Owner (8)				ACCAA NI-											
Health & Safety Sevices, Inc.				ASCM No.	The second second second	laisorn Contracting Corp									
Street Address		Unicorn Contracting Corp. Street Address													
PO Box 365		Charles and American	32 Willow Way												
City, State, Zip Code			City, State, Z						-						
Berlin, NJ 08009					NJ 07424										
Project Manager from Monitoring Firm	one No.	Telephone N		147 07424	License No.										
Jim Proctor		52-1311	973-333-			01331									
Start Date (10)		Schedu		letion Date (11)	Name of OSF			101551							
6/20/18		6/29/		Cartonio (17 12) 1879 - 1870 (4 € 1			sultants, Inc.								
Occupancy Status During Abatement (Check Only One)					Street Addre		,								
☐ Facility Closed/Vacated During Entire Peri	od of At	atemer	nt		20-21 Wa	garaw R	Rd., Bldg. 35-E								
☐ Abatement Performed Outside of Normal	Facility	Hours			City, State, Zi		, ,								
Other - Describe: 7 AM- 3:30 PM Occu	pied				Fair Lawn	, NJ 074	410								
Scope of Work (Check All That Apply)										-					
≥3 sf or ≥3 lf		X	Renova	ation	⊠ Full	Containn	ment with Nega	tive Pressure							
≥160 sf or ≥260 If			Demol	ition	☐ Min	i-Enclosu	ire								
					☐ Glov	ebag Pro	ocedure								
					☐ Non	-Exempte	ed (*) and Non-	Friable Procedu	re						
733		Is Locatio Normally								Ab	atem				
Location of Asbestos-Containing Material (ACM)	U	sed Solely		Asheste	Description s Containing N		***		ł	T	Туре	-			
TO BE ABATED	35772	laintenan		17	nermal systems			Amount (Specity							
In Facility	Cu	stodial St	aff?		surfacing, VA		*	SF or LF)		- I	Circ	7 5			
(13)	-	(12)			other miscellar	neous)				Removal	circapsulate	Enclosure			
Poiler Poor	Yes	No	N/A							val	- 2	77			
Boiler Room Boiler Room	X	-			Boiler Breed			250 SF	-	X	_				
Bollet Roofff	X			Boiler Asbe	estos Packi	ng and (Jaskets	30 SF	_	X	_	+			
	-							-	-	-	+	_			
Isma of Degistered West Up 1	me of Registered Waste Hauler DNo.														
Inicorn Contracting Corp.	er ID No.	Cubic Yards of Waste Name of Regustered Landfill													
ity, State		3			Fairless Hills	Land	TIII								
Voodland Park, New Jersey					Disposal Date		11 11	City, State							
ompleted by Title					TBD Signat	ure //	// //	Morrisville, P							
Dimo Golcev		1-15.194	11	1/1/1	/	- 1)ate 5/14/	1.8							

Jun 13 2018 09:25 NJ Asbestos Control 609,633,0664

RECEIVED 06/13/2018 09:30AM

page 1

36								£ 7'	ran F	0	R	Π	\mathbb{W}		
PAJUO	Date of Notification (1)							The second section of the second		C					
08/12/2018						perator (2) nity College	Che	ck No.	1136	JUN		3	ZU18		
Agencies Notified Type Notification EPA E Initial	***************************************		Street A	iddress old Trento	n Road		-==	DOL - 10 DAYos							
☐ DEP ☐ Amended ☐ DOL Amendment#	cludies	Ī		eta, Zip Cor Vindsor To		o, New Jerse	y 08550)		<u>L</u>)	Util	i3lin	1~		
E DOH justification) DCA Gencelletton	ciddii iy		Valerie	f Contact Sessema				Telephone Number 3 608-588-4822 ir 3542							
Name of Facility Where Abetement is Takiry	Place (3	1	FACILITY INFORMATION Type of Facility (4) AND ADDRO									-	-		
Mercer County Community College/Gre	en Hous	E				1	I Y	VAN	ER APP	WY	FU				
Street Address 1200 Old Trenton Road						☐ Subchar	(N. 19) Lit is 8 (Other than K-12) 8. private & commercial buildings, homes, etc.)								
City (5) West Windsor Township, New Jersey C	8550					Square Feet 80,000		2	Floors	50 50	g, Ag +	e			
County (6) Mercer			(STATE	Code (7) USE ONLY)		Current Use	ria: if being demollahed) Community Collage								
Name of Monitoring Firm Hired by Building of The Whitmen Companies		ASC	VI No.		Lilich Corpo	r ition									
Street Address 7 Pleasant Hill Drive					Street Addres 508 McBrld	AV.)									
City, State, Zip Code Oranbury, New Jersey 08572				City, State, Z Woodland S	IK, New	Jersey									
Project Manager for Monitoring Firm Kevin Lovely	ne No 0-5858		Telephone N 973-225-84	()		License No. 01104									
Start Date (10) 06/16/2018	Date (11)		Name of OSI Irls Environ	antal La		ries, LLC									
Occupancy Status During Abatement (Chec			Street Addres 2333 Routs												
Facility Glosed/Vecated During Entire P Abstement Performed Outside of Normal Other – Describe: 8am Start	Facility	Hours	Matri			City, State, 2' Union, NJ (I									
Scope of Work (Check All That Apply)															
□ ≥3 sf or ≥3 if 때 ≥160 af or ≥260 if	10.	lanova Ismolii				D Gid	-Enclosure	e ocedure	Negative Pro / Limited Co.	nlainm	eni a	Tent			
	Is	Locat	tlon				EASTIBLEC		Amount	_	bate		\dashv		
Location of	1	iorma	et.			escription of			(Specify SF of LF)	_	Тур	8	\vdash		
Asbestoe-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	Intens	ince/ Statt?	Asba (i.s	them: surf	nteining Mater al systems inse eding, VAT, or miscelleneous	istion,			Remova	Repair	Encapsulate	Enclosure		
	Yes	No	NA									9	10		
Bathroom	_	X		Wali Boar	d (Trans	ite) Clean Up	k Removal		200 SF	X	-	_			
								_							
			-	-							-				
Name of Registered Waste Hauler	Vaste		Yards	Name of Registered Landfill											
Lilich Corporation			18724	No.	of Wa		Fairless Landfill								
City, State Woodland Park, New Jersey Completed by	Title				08/18	zal Date /2018	City, Sta	Me, PA	Date	9					
Adrianz Ofejarova			WA	> U	2		/12/2	018							

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 06/12/2018 South Brunswick Board of Education Check No. 1138 15 2010 Agencies Notified Type Notification Street Address 4 Executive Drive ☑ EPA Initial City, State, Zip Code IXI DEP Amended ASSESTOS CONTROL & South Brunswick, New Jersey 08852 X DOL Amendment # Emergency (including Name of Contact Telephone Number **図** DOH iustification) David Pawlowski 732-297-7800 ☑ DCA Cancellation **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Deans School School (K-12) Street Address Subchapter 8 (Other than K-12) 848 Georges Road ☐ Other (i.e. private & commercial buildings, homes, etc.) Square Feet # of Floors Bldg. Age Monmouth Junction, New Jersey 08852 50,000 50+ County Code (7) Current Use (Prior if being demolished) Middlesex (STATE USE ONLY) School Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) **Briggs Associates** Lilich Corporation Street Address Street Address 3 Crosswicks Street 606 McBride Ave City, State, Zip Code City, State, Zip Code Bordentown, New Jersey 08505 Woodland Park, New Jersey Project Manager for Monitoring Firm Telephone No Telephone No. License No. Michael Hoodak 609-298-5520 973-225-8400 01104 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 06/26/2018 07/10/2018 Iris Environmental Laboratories, LLC Occupancy Status During Abatement (Check Only One) Street Address 2333 Route 22 West ☐ Facility Closed/Vacated During Entire Period of Abatement ☐ Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other − Describe: 7am-3:30pm Unoccupied Union, NJ 07083 Scope of Work (Check All That Apply) □ ≥3 sf or ≥3 lf X Renovation X Full Containment with Negative Pressure ≥ 160 sf or ≥ 260 lf Demolition Mini-Enclosure X Glove Bag Procedure / Limited Containment & Tent □ Non-Exempted (*) and Non-Friable Procedure Amount Abatement Is Location (Specify Type Normally SF of LF) Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Encapsulate Maintenance/ Enclosure (i.e. thermal systems insulation, TO BE ABATED Remova Repair Custodial Staff? surfacing, VAT, or In Facility (12)(13)other miscellaneous) Yes No N/A Boiler Insulation 1955 Boiler(Full Containment) 60 SF X Boiler Room X X X Pipe Insulation(Glovebag Procedure) 250 LF Basement Hallway Fitting Insulation (Glovebag Procedure) X Basement Hallway X 10 (ea) Pipe Insulation(Glovebag Procedure) X 3 LF X Supply Room Off Library X Pipe Insulation (Glovebag Procedure) 5 LF X Storage Room X Pipe Insulation(Glovebag Procedure) 160 LF X Cafeteria Kitchen X Pipe Insulation (Glovebag Procedure) 120 LF X Cubic Yards Name of Registered Landfill Name of Registered Waste Hauler NJDEP Waste of Waste Hauler ID No. Fairless Landfill Lilich Corporation 18724 10 Disposal Date City, State City, State 06/18/2018 Woodland Park, New Jersey Morrisville, PA Completed by Signature Title Date Adriana Olejarova President 06/12/2018

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 06/12/2018 South Brunswick Board of Education Check No. 1139 Agencies Notified Type Notification Street Address JUN 18 2018 4 Executive Drive ☐ EPA Initial ☑ DEP Amended City, State, Zip Code X DOL South Brunswick, New Jersey 08852 Amendment # ASBESTOS CONTROL & Emergency (including LICENSING Name of Contact Telephone Number DOH iustification) David Pawlowski 732-297-7800 図 DCA Cancellation **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Constable School School (K-12) Street Address Subchapter 8 (Other than K-12) 29 Constable Road Other (i.e. private & commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age Kendall Park, New Jersey 08824 50,000 50+ County (6) County Code (7) Current Use (Prior if being demolished) (STATE USE ONLY) Middlesex School Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) **Briggs Associates** Lilich Corporation Street Address Street Address 3 Crosswicks Street 606 McBride Ave City, State, Zip Code City, State, Zip Code Bordentown, New Jersey 08505 Woodland Park, New Jersey Project Manager for Monitoring Firm Telephone No Telephone No. License No. Michael Hoodak 609-298-5520 973-225-8400 01104 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 06/26/2018 Iris Environmental Laboratories, LLC 07/10/2018 Occupancy Status During Abatement (Check Only One) Street Address 2333 Route 22 West Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Union, NJ 07083 Other − Describe: 3:30PM - 11 PM Unoccupied Scope of Work (Check All That Apply) □ ≥3 sf or ≥3 lf X Renovation X Full Containment with Negative Pressure ≥ 160 sf or ≥260 lf Demolition Mini-Enclosure Glove Bag Procedure / Limited Containment & Tent Non-Exempted (*) and Non-Friable Procedure Amount Abatement Is Location (Specify Туре Normally Location of Description of SF of LF) Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Maintenance/ Encapsulate TO BE ABATED Enclosure (i.e. thermal systems insulation, Removal Repair Custodial Staff? In Facility surfacing, VAT, or (12)(13)other miscellaneous) Yes No N/A 1962 Boiler Room X Rope Insulation (Full Containment) 40 SF X 1977 Boiler Room 1 X Rope Insulation (Full Containment) X 40 SF 1977 Boiler Room 2 X Rope Insulation (Full Containment) Χ 40 SF NJDEP Waste Name of Registered Waste Hauler Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Lilich Corporation 18724 10 Fairless Landfill City, State Disposal Date City, State Woodland Park, New Jersey 06/18/2018_ Morrisville, PA

Adriana Olejarova

Completed by

Date

06/12/2018

Signature

President

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) Check No. 1137 South Brunswick Board of Education 06/12/2018 JUN 18 Agencies Notified Type Notification Street Address 4 Executive Drive Initial **EPA** City, State, Zip Code Amended X DEP ASBESTOS CONTROL & South Brunswick, New Jersey 08852 DOL Amendment #_ X LICENSING Emergency (including Name of Contact Telephone Number justification) X DOH 732-297-7800 David Pawlowski Cancellation П M DCA FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Dayton School School (K-12) Street Address ☐ Subchapter 8 (Other than K-12) 195 Major Road ☐ Other (i.e. private & commercial buildings, homes, etc.) # of Floors Bldg. Age Square Feet City (5) 50+ 50,000 Monmouth Junction, New Jersey 08852 County Code (7) Current Use (Prior if being demolished) County (6) (STATE USE ONLY) School Middlesex Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) Lilich Corporation **Briggs Associates** Street Address Street Address 606 McBride Ave 3 Crosswicks Street City, State, Zip Code City, State, Zip Code Woodland Park, New Jersey Bordentown, New Jersey 08505 Telephone No. License No. Telephone No Project Manager for Monitoring Firm 973-225-8400 01104 609-298-5520 Michael Hoodak Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) Iris Environmental Laboratories, LLC 07/10/2018 06/26/2018 Street Address Occupancy Status During Abatement (Check Only One) 2333 Route 22 West Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Union, NJ 07083 Abatement Performed Outside of Normal Facility Hours ☑ Other – Describe: <u>7am-3:30pm Unoccupied</u> Scope of Work (Check All That Apply) Full Containment with Negative Pressure Renovation ≥3 sf or ≥3 lf X П Mini-Enclosure Demolition ≥ 160 sf or ≥ 260 lf Glove Bag Procedure / Limited Containment &Tent Non-Exempted (*) and Non-Friable Procedure П Amount Abatement Is Location (Specify Type Normally SF of LF) Description of Location of Used Solely by Asbestos Containing Material (ACM) Asbestos-Containing Material (ACM) Encapsulate Maintenance/ Enclosure (i.e. thermal systems insulation, Remova TO BE ABATED Repair Custodial Staff? surfacing, VAT, or In Facility (12)other miscellaneous) (13)No N/A Yes Boiler Insulation (Full Containment) 260 SF X X Boiler Room Steam Header Insulation (Full Containment) 20 SF X X Boiler Room Pipe Insulation (Full Containment) 120 LF X X Boiler Room 20 LF X Pipe Insulation (Glovebag Procedure) X Storage Room 40 LF X Pipe Insulation (Glovebag Procedure) X Pump Room X 120 LF Pipe Insulation (Glovebag Procedure) Basement Hallway 40 LF X Pipe Insulation (Glovebag Procedure) X Kitchen 30 LF X X Pipe Insulation (Glovebag Procedure) Speech Room 50 LF X Pipe Insulation (Glovebag Procedure) X Media Center Pipe Insulation (Glovebag Procedure) 40 LF X Room 11

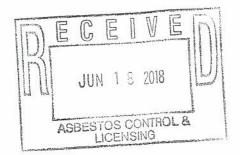
State of New Jersey

TAID

Name of Registered Waste Hauler Lilich Corporation	1.00	NJDEP Waste Hauler ID No. 18724	Cubic Yards of Waste 15	Name of Registered L Fairless Landfill	andfill
City, State Woodland Park, New Jersey			Disposal Date 06/18/2018	City, State Morrisville, PA	
Completed by Adriana Olejarova	Title Presider	nt	Signature	500	Date 06/12/2018

ASB-41 (R-06-08)

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



Print Form

		NOTIF	ICATIO	State of Ne N OF ASE t to NJAC	ESTOS	ABATE	MENT []	7	E (E		7 E	E-management of the state of th		
Date of Notification (1) 06/12/2018				of Building				1					Marine San Company	A CONTROL OF THE PROPERTY OF T	
Agencies Notified Type Notification				ord Lake	es Scho	ool Dis	trict	1	JL	IN 18	201	8			
				^{Address} eeta Trai	il								Demark	The same of the sa	
EPA Initial Amended Amendment		-		tate, Zip Co		- Inc.		<u>L</u>	QREC	TOS C	MITO	01 2	-	- Web	
X DOL Amendment				ord Lake		08055				LICENS		or a	200200000000000000000000000000000000000	ALC: NO.	
DOH Emergency (ncluding	7		of Contact					Tele	phone No	ımber		70.00	SALAN-	
DCA Cancellation				ael Colli	-				609	-654-5	155 E	xt. 2	52.		
Name of Facility Where Abatement is Taking	Place (3)	FAC	ILITY INF	ORMAT	ON Type of Facility (4)									
Nokomis Elementary School		-5.f													
Street Address		-				Subchapter 8 (Other than K-12)									
135 Mudjekeewis Trail						Other (i.e. private & commercial buildings, homes etc.)									
City (5) Medford Lakes, NJ 08055							Square Fee 20,000	t	Floors		Bidg. Age 50+				
County (6)				Code (7)	n		Current Use	(Prior	f being	g demolis	shed)		-		
Burlington	- /2	1	-	USE ONLY		_	school								
Name of Monitoring Firm Hired by Building C TTI Environmental	wner (8)	ASCI	M No.			Name of Abatement Contractor (9) ELCON Environmental Inc								
Street Address 1253 N. Church St.						Street Address 150 Glenwood Dr									
City, State, Zip Code							tate, Zip Cod								
Moorestown, NJ 08057		A CONTRACTOR OF THE PARTY OF TH	hington Cr		PA ·	18977									
Project Manager for Monitoring Firm			one No.			License I	Vo.	-0.00							
Craig Durand		215-	313-7427		(01225									
06/26/2018	07/14/	2018	npletion	Date (11)		Name same	of OSHA Mor	nitor							
Occupancy Status During Abatement (Check	Only O	ne)				Street	Address				-				
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe:	eriod of al Facilit	Abatem y Hours	ent			City, S	tate, Zip Code	Э				// /			
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 If	তা ,	S				F	1								
≥160 sf or ≥260 lf		Renova Demoliti				×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
	Is	Location	on			- Trail Exempted () drid 14011-1 Hable 1 1000db							ment		
Location of		Normall ed Solel	У		Des	scription	of					Ту	ре		
Asbestos-Containing Material (ACM) <u>TO BE ABATED</u>	Ma	aintenar	ice/				aterial (ACM) insulation,			ount ecify	n		回	m	
In Facility (13)	Cus	todial S (12)	itaff?		surfac	cing, VA	Γ, or			r LF)	Remova	Repair	caps	Enclosure	
(10)	Yes	No	N/A		otherm	niscellan	eous)				oval	air	Encapsulate	sure	
Classrooms			Х		FI	oor Tile	9		4,5	71	Х				
								+			+		_		
								-			-		-		
Name of Registered Waste Hauler		N.	JDEP W	/aste	Cubic '	Yards	Name	of Red	nistere	d Landfil	1				
Service Transport Group		1	auler ID W2117		of Was			erva E	3						
City, State New Castle, DE					Dispos TBD	al Date	City, Way	State /nesbi	urg, C	DH					
Completed by Title					Si	ignature	1 1	12		Da	ite			\neg	
Andre Gosek Manager							Lord C			0	3/12/2	2018			

erected y

2018 14:40 NJ Asbestos Contro	1 609.633.	0664		page	4								
6/12/2018 12:16 2012520	321		AMAC			Sec. 39.00	×11- 1 3		PAG	-	32/9		
CK (DY PAID		ICATION I	lo of New Johnson OF ARRESTOS / In MJAC Billip and	MATER		<u> Eoi</u>	10 DA		10	77	2018		
ete of Notification (1)// 5		B	Bulking Owner(O AROUCA	perator /	CAL	الملوم	N 7 2 20 8		· · · · · ·	-	NIA		
Gencies Notified Type Notification EPA Initial Amended Amended Amended Energency (in		City, Span	dress 50 Colc e, zip Code VET Lô	inc	7. S			ED	LICE	NSI			
DOH (Letthoution) Canoellation		Marrie of (50 O	C.		INO		701-28	1/- 3	32	62	- Total		
LATTE OF FACILITY VITAGE ADDITIONAL TO THE TOTAL DISPLAY	Piece (5)	PACIL	TY INPORMATI	OFF	Type of Fi	ACCESSOR AND A				D.40.1944			
2-60 COXUM BIR A	ve				Ophi	(Le. prh	(Caber Elen K-12) Hille & Cocksterciel	i Daniicji:	igi, i	OTENS,	- The second sec		
FORT LEE			and the second s		Bours Fi		& of Floors	-	19. Ag	in the second	Account 1 the San		
BERGER	,		SE CHLY)		571	TR,	Haring demollates	ଣ					
same of Monitoring Firm Filmed by Building O	MAJAR (Q)	ASCM	No.	A.M	of Aberteen BC Contri						-		
Firest Address				185	Address Vreetand						-		
>iy, Siate, Xip Code		Date and all more transferences and accommon production of the second of			nete, Zup Co und Pork,	i, Nati					- Milliagram of		
Project Manager for Monitoring Firm		Telephor		201-	ione No. 262-564 (Utranse No. 00156						
6/12/18	Schoolson/Cz G//9	moletion t	Onto (11)	Ome	-	II mit.r r: mental Services Inc.							
Scurpency Status During Abatement (Check Facility Closed/Vecated During Entire P	end of Abate	mere		280	Address Huyler Si				,				
Abutament Performed Casside of Norm Ottar – Describe:	al Facility Hou	75			teto, ZIO Č CSNSBOK,		605						
Scope of Work (Check All That Apply)	E Ranor		. •	E	Full Ck		d with Negative Pr	यान्धाः	8.		THE RESERVE AND PARTY OF THE PERSON PRINCIPLES.		
2 1180 at or 1200 t	Diemo	Viton			THE THE PARTY OF T		dure (*) and Non-Friebt	-	-	mile and and			
Location of	ie Loo Morre Used So	idon elly fety by	Di Antonios Con		Non-E	Ombles !	(*) and Non-Friebi	-	Typ	Thought to	-		
ALAN MINISTER	ie Lob Norm Used So Aleinan Custodia (12	iction edity feety by: emost Chaff?	Aebestas Con (i.e. thorns euris	acription taining A	Non-E: of futeries (AC) a fraulation of, or	ODD SE		-	Lippin	fragati st	Enclosura		
Location of Aspessor-Contesting Meterial (ACM) TO BE ABATED In Facility	is Loca Morra Vased So Malainten Custodia	iclan elly fety by emos/ Diant?	Ashmatas Con Çi.e, Shorma suria athar t	actipitor taining A I system king, VA	Non-E: of futeries (AC) a fraulation of, or	ODD SE	(*) and Non-Friets Account (Specify		Type Type	Thought to	Burbokati		

MIDEP Wanta Hauser 10 No. 04809

Title President

Cultilo Yarde of Wests

Completed by R. McDonald

City, Stele

Name of Regulated Visual Figure

Newark Carting, Inc.

Newark, N.J. 07105

Ni ne of Registered Landin

Ci , Siste Fi n Argyl, FA 08072

Gi and Central Senitery Landfill

1.6073

	PAID	State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)												$\overline{\mathbb{V}}$			
Date of Notification (1) 6/12/18					Building Cree Man			(2)		1	8815	, 1	0 0	010	CHILDREN TO ALL		
Agencies Notified	Type Notification			Street Ad	ddress Madison	Ave,	Suite 1	6		1	JUN	4	U	018	Elentronio e unio	أحسا	
DEP DOL	Initial Amended Amendment	#			te, Zip Coo ood, NJ		1		-	A	SBEST	OS (NOC	TRO	L &		
☑ DOH DCA	Emergency justification) Cancellation	•		Name of Ari					1000		ephone 2-534-	Numb	er		garantal Africa		
Ц вод	Caricellation			Charles	LITY INFO	RMAT	ION				2110000000000	227.030	2002				
Name of Facility Where	Abatement is Takin	g Place (3))	24 - 25 - 4B		Type of Facility (4) School (K-12)											
Street Address							Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, ho								home	s,	
City (5) Keyport								2000	Square Feet # of Floors Bldg. Age						ge		
County (6) Monmouth				County (Code (7) JSE ONLY)			Curre	ent Use (Pri	or if be	ing dem	olishe	d)				
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	1 No.				tement Contractor (9) D PROFESSIONALS								
Street Address	eet Address							t Address HITE DOVE COURT									
City, State, Zip Code						Zip Code	8701										
Project Manager for Monitoring Firm Telephon								hone N			Licens 1200		80				
Start Date (10) 6/22/18		Schedule 6/26/18		npletion I	Date (11)				HA Monitor D PROFE		NALS						
Occupancy Status Durin	g Abatement (Che	ck Only On	e)					Addre			-		1				
Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire ned Outside of Nor	Period of A	Abater Hour	nent s			City, S	State, 2	DOVE CO								
Scope of Work (Check A	(II That Apply)			LAKEWOOD, N						113 007 01							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ш тпас другу)		Renova Demoli				2	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure						a			
		le	Local	tion					on Exemple	u ,) u.	10 110111	TIGOR		Abate	ment		
Locatio Asbestos-Containing TO BE AB In Faci (13)	Material (ACM) ATED lity	Use Ma	Norma d Sole intena	lly ely by ince/ Staff?		tos Co therm surf	escription ntaining I al system facing, VA	Materia ns insu AT, or	lation,	(Amount Specify F or LF)		Remova	Repair	e Encapsulate	Enclosure	
(10)		Yes	No	N/A					,				a		ate	rē	
INTER	IOR						Floorin	g		1	150SF		х				
Name of Registered Wa	ata I lavilar		L.,	NJDEP V	Vacto	Cub	ic Yards		Name of	Paniet	tered I a	ndfill		<u></u>		<u> </u>	
NEWARK CARTING				Hauler ID 14509			/aste		IESI	rtogici	0.00 20						
City, State NEWARK, NJ	17						osal Date 6/18	е	City, Sta BETHL		M PA						
Completed by JOSEPH PERLSTE	IN .	Title OWNER					Signatur	re	Date								

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60-7 and 12:120-7) Date of Notification (1) 6/13/18 Name of Building Owner / Operator (2) Type Notification Rishrah Corporation Agencies Notified Street Address ASBESTOS CONTROL & **EPA** Emergency Notification 6 Aldrich Rd DEP Initial Notification City, State & Zip Code DOL Amended Notification X Kendall Park, NJ 08824 DOH Cancellation Name of Contact Telephone Number DCA Hitesh Patel **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Vacant Residence School (K-12) Street Address Subchapter 8 (Other than K-12) 6 Aldrich Rd X Other (i.e., private & commercial buildings, homes, etc. Square Feet # of Floors Bldg. Age City (5) County (6) County Code (7) 1.500 50 Kendall Park Middlesex Current Use (Prior if being demolished) Commercial Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) **Environmental Tactics** Global Abatement Services, LLC Street Address Street Address 64 Broad Street 443 Schoolhouse Road City, State & Zip Code City, State & Zip Code Matawan, NJ 07747 Monroe Township, NJ 08831 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Tom Geiger 732-290-2217 732-605-9062 00714 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 6/23/18 6/28/18 Global Abatement Services, LLC Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 443 Schoolhouse Road Abatement Performed Outside of Normal Facility Hours -City, State & Zip Code Describe: Area Isolated During Abatement Monroe Township, NJ 08831 Other - Describe: Scope of Work (Check all that apply) Demolition X Renovation Full Containment with Negative Pressure Large Project X Mini-Enclosure Quantity is ≥ 3 SF or ≥ 3 LF ACM Glovebag Procedure Quantity is ≥ 160 SF or ≥ 260 LF ACM X Other: Non-friable Location of Is Location Description of Amount Abatement Type Asbestos-Containing Normally Used Asbestos-Containing (Specify: Removal, (Specify Material (ACM) Solely by Material (ACM) Square Feet Repair, Encapsulation TO BE ABATED Maintenance or (i.e., thermal systems or or Enclosure) in Facility Custodial Staff? insulation, surfacing, VAT Linear Feet) (13)(12)or other miscellaneous) Exterior N/A Siding shingles 1,200 SF Removal Name of Registered Waste Hauler NJDEP Waste Hauler ID# Cu. Yds. of Waste Name of Registered Landfill Freehold Carting 18693 20 TRRF City, State Disposal Date City, State

6/28/18

Dominick Tringali

Signature

Tullytown, Pa

Date

6/13/18

State of New Jersey

Trenton, NJ

Completed By (Print or Type)

Dominick Tringali

Title

Pres.

1,275	000	24	5000	200	100	2011	460
2793	D	**	-		~	-	~
	68	и	nt		U	Ħ	н

			decine)	1	\ Π		No. of Lot		. [-	-	7 0			166		1111
ch 6819		ı	(F	CATION	ate of No. OF ASB to NJAC	ESTOS	ABATE	MEN [°]	r		E C			\mathbb{V}_{-}	E	Comment of the second
Date of Notification (1) 6/12/18					f Building er Green				1		JUN	1.8	2	110		111
	Type Notification		-	Street A		riivai	e non	ie	100	Hand I	54.52(1)	1.0	L	J10	- [1	enser!
X EPA	X Initial								1	AS	BESTO	19 00	TIME	E/Nr	- 1.	
DEP DOL	Amended Amendment	. #	ſ		ite, Zip Co town NJ		,		1	1.000 1.00		11151		_	525	
⊠ DOH	Emergency	(including	-	000000000000000000000000000000000000000	Contact	08758	5			Ιτ	elephone	Numb	or			
DCA DCA	justification) Cancellation			Roger						, "	ciopitorio	TVUTTID	-			
Name of Facility Where A	hatement is Takir	na Place (3	,	FACI	LITY INFO	ORMAT	ION	Tun	e of Facility	(4)						
Roger Green Privat		ig i lace (5	,					Т	School (K-	10.00						
Street Address									Subchapte	er 8 (Ot	her than	K-12)				
								X	Other (i.e. etc.)							es,
City (5) Waretown NJ 08758	3							100	are Feet 00 +	# 2	of Floors		1000	dg. A 5+	ge	
County (6)				County (rent Use (Pi		77	olished	1	5 +		
Ocean		(*2)		(STATE L	JSE ONLY)			100 menters	use				,			
Name of Monitoring Firm I N/A	Hired by Building	Owner (8)	150a-116W	ASCM	l No.		- Carried Communication		atement Co	ontracto	or (9)					
Street Address							Street	Addr	27.17.70						-	_
								Box								
City, State, Zip Code							10000		Zip Code rlin NJ 08	3091		10-23115-3				
Project Manager for Monit	oring Firm			Telephor	ne No.		Teleph 856-		No. -9800		Licens 0072		0100			
Start Date (10) 6/22/18		Schedule		mpletion [Date (11)				SHA Monito	r						
Occupancy Status During	Abatement (Cher	6/27/18	834				Sam	0.755	966		171					_
Facility Closed/Vacat				nent			Otreet	Addit	533							
Abatement Performe Other – Describe:							City, S	State,	Zip Code	,	•					
Scope of Work (Check All	That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Distriction of	enova emoli				×	M G	ull Containn ini-Enclosu lovebag Pro on-Exempte	re ocedure	9				_	
		Is	Locat	ion				21 10	on-Exemple	Ju () a	nu Non-r	riable			ment	
Location of		N	orma				scription					-		Ту	ре	
Asbestos-Containing N TO BE ABA		Mai	ntena	nce/			taining N system:		al (ACM) lation.	1	Amount (Specify		_D	_	Enc	щ
In Facility (13)	У	Custo	(12)	Staff?		surfa	cing, VA niscellar	T, or		5	SF or LF)		Remova	Repair	Encapsulate	Enclosure
, ,	Yes								,				/al	=	ılate	ıre
Exterior sid		x		Exte	rior sic	ding			50 sf	1	х					
Name of Registered Waste United Roll Off	e Hauler		F	JDEP W. Hauler ID		of Wa	Yards ste		Name of		tered Lar	ndfill				
City, State	2	22459		1 Dispos	sal Date		City, Sta		5) 					_		
Elm NJ				6/27/			- 1		PA 1960	0						
Completed by		Title	-1 - ·	-		18	Signature		7			Date				
Anthony T Perna		Presi	aent				/	/				6/12	2/18	3		

		dines		-								L	E 2 21	III I OII
Ch 1693	1	vo I	ursuant	TE OF NO OF ASE TO NVAC	STOS A 8:60 and	13:120	9)		DE	C	EI	\mathbb{V}	E	The second secon
Date of Notification (1) 05-23-18				f Building (Istein Pr			(2)	and the second	A CONTRACTOR OF THE PARTY OF TH	JUN	18	2018	Sale in months	
Agencies Notified Type Notification			Street A	ddress ast Main	St							· Parame super		
EPA Initial DEP Amended		F		ite, Zip Co					AS	BESTO LIC	S COI		i_ &	200 Sec. 1
DOL Amendment Emergency (-	124	alls, NJ	07424				T = 1					
DOH justification) Cancellation				f Contact Burkart						hone Nu) 256-6				
Name of Facility Where Abatement is Taking	Place (3	3)	FACI	LITY INFO	ORMATIO	N	Type	of Facility (4)					
Commercial Property Building # 37								School (K-1	2)					
Street Address 20 Wagaraw Rd.							F (Subchapter Other (i.e. p etc.)				dings,	home	es,
City (5) Fair Lawn								re Feet	# of F	loors	В	ldg. A	ge	
County (6) Bergen			County (Code (7) USE ONLY))	_	Curre	nt Use (Pri	or if being	demolis	hed)			
Name of Monitoring Firm Hired by Building C	Owner (8)		ASCN	No.				tement Cor tracting L)			-	
Street Address			1			Street	Addres	ss						
City, State, Zip Code						City, S	tate, Z	ip Code	. 7		-			
Project Manager for Monitoring Firm		T	Telepho	ne No.			n City none No	NJ 0708		icense N	No.			_
						201	216-9	603		1206				
Start Date (10) 05-23-18	Schedule 07-30-		npletion I	Date (11)				HA Monitor tracting L	LC					
Occupancy Status During Abatement (Check	Only On	ie)			1		Addres	1070						
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: 7:00 am- 5:00 pm	eriod of A al Facility	Abatem	nent			City, S		ip Code NJ 0708						\dashv
Scope of Work (Check All That Apply)			****					7.0 0.00						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Pemolit					Mir Glo	l Containment-Enclosure	e cedure					
	ls	Locati	ion				1 140	n-Exempted	a () and r	ion-Friai	Die Pro	Abate	ment	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	lormal d Sole intenai odial S (12)	ly by nce/		Desc tos Contai thermal s surfacii other mis	ystem: ng, VA	faterial s insula T, or		Amo (Spe SF o	ecify	Removal	Repair	e Encapsulate	Enclosure
445	Yes	No	N/A	5:			107		100		-	The second second	Ф	
1st Floor		Х		Pipe	e Insulat	tion /	vvrap	-cut	400	LF	X			
									/ ·· . •					
					10				*					
Name of Registered Waste Hauler Delfa Contracting LLC		0.0000	JDEP W	No.	Cubic Y of Waste				Registere vn Resc			erv F	acili	tv
City, State			3524	U	10 Disposa	I Date		City, Stat		uice N		OI y I	- CONT	J
Union City, NJ					06-15			Tullytov						

Signature

Title

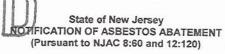
Proj. Manager.

Completed by

Date

06-11-18





Check # 10406

Date of Notification (1)			Nome	of Duilding Own	(01(0)	9					
6-14-	8			of Building Own	outi's	BRO	s. Dis	265	2/		
Agencies Notified Type Notification □ EPA ■ Initial	74 July 1		Street	Address 1/2	State	e Ro	oute 3	34			(C.) (2. 4.)
DOL Amended Amendment			City, S	tate, Zip Code		1.	MIT	77	7	7	
☐ Emergency (includin	g	Namo	of Contact	ingola	16	145 6	, , ,	_	7	
DOH justification)			T	- L	- I	ζ_	Telephone	Number		1/	-
2 John Dancellaudi			<u> </u>	CILITY INFORM	a Kou H	12	111/127	60 625	11 4	16	Or.
Name of Facility Where Abatement is Taking	Place	(3)	FAC	JETT INFORM		e of Facility	y (4)	9 5	11	7 [3//
LORIEN Bart	tota					School (K	(-12)	9			
Street Address 507 East	F 0	Jai	A .	Street	2	Subchapt Other (i.e etc.)	er 8 (Other than) private & comm	K-12)1 (ercial bu	3 20 ildings	18 , hom	ies.
City (5) Bound BROW	V 000	x 1	· —	-	. Squ	are Feet	# of Floors	STOS	Bldg	Age	2
County (6)	~	_/\	County	0880 Code (7)		ent Use (P	nor if being dem	STOS C LICENS	10	107	OF.
Domerset			_	USE ONLY)	_ (ONN	en Bar	/11	te	1	
Name of Monitoring Firm Hired by Building C	wner (8) S	ASC	M No.	Name of Ab	atement C		pqie	5	T	8 8
Street Address R.O. Box 3	37				Street Addre	ROY	337	3.0	•	- N	16
City, State, Zip Code	M.	/mo	09	533	City, State,	Zip Code	A)	71	0	5 2	2
Project Manager for Monifiering Firm	/ 4 6	-	Telepho	one No.	Telephone N	No. 3	Licens	e No.	0	33	2
Steve Schenken	<u> </u>		609	758-336	5 609 758	3-33	65 ()0.	34	4	
Start Date (10) 6-22-18	Schedu 7	led Con	ipletion $3-$	Date (11)	Name of OS	-	hnologie	, T	`~		
Occupancy Status During Abatement (Check	Only O	ne)			Street Addre	ess	21 10.0 716	ـ در	ne		
Facility Closed/Vacated During Entire Po	eriod of	Abatem	ent				337	1		enega.	1 of 2
☐ Abatement Performed Outside of Norma ☐ Other – Describe:	al Facilit	y Hours			City, State, 2					i.	-51
Scope of Work (Check All That Apply)					Ivew	Egypt	- NJ	08	53	3	
X ≥3 sf or ≥3 lf	п	Renovat	tion		□ Fu	II Containm	nant with Manati	D			
≥160 sf or ≥260 lf		Demoliti			□ Mi	ni-Enclosu	nent with Negativ re	e Pressu	ire		
·	/-				□ GI	ovebag Pro	ocedure				
· · · · · · · · · · · · · · · · · · ·					No. No.	n-Exempte	ed (*) and Non-Fi	riable Pro			
*	4	Location								ernent /pe	t
Location of	\$300.00	Normalled Solel	T0.0000		escription of		1	-	Τ'		
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	intenan	ice/		ntaining Materia al systems insul		Amount (Specify	73		E	m
In Facility	Cus	todial S (12)	taff?	sur	facing, VAT, or		SF or LF)	em	Repair	cap	nclo
(13)		(12)		othe	miscellaneous)	•		Removal	air	Encapsulate	Enclosure
	Yes	No	.N/A							ite	В
Room # 11		X		Floor	Tiles		150 St	= x			
exterior				Siding S	Shingles		5000 SE	= X			
				J							
Name of Registered Waste Hauler		1.61	JDEP W	facts Cub	- Vd-	1 11		1611			
Name of Registered Waste Hauler			auler ID		c Yards aste	T cooperation	Registered Land				.
EPC Technologies			1700	00	24	Was	te Manag	enen	to	F P	A
City, State	UT	`		12000	osal Date	City, Sta	te	PA			
Completed by	Title	۸		1000	Signature	C 0		Date	. 3		
Steve Schenker	HRe	side	nt		Steres	DOKE	cha	6-1	14-	-18	3



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

Date (National)			NOTII (I	Pursuan	ON OF ASB	ESTOS 8:60 ar	ABATE 1d 12:12	(0)	- (le	ck	10	(i)	8/	
Date of Notification (1) 6/14/18					of Building									1	
Agencies Notified	Type Notification				te of Mar	jorie A	Cantw	vell			EC	15			
				Street	Address					IKI			Carlos -		7
EPA DEP				City S	tate, Zip Co	nde				1111		4.0			
× DOL	Amendment				Bridge, N		57		the state of the s		JUN	18	50,	8	
× DOH	Emergency justification)	includin	9		of Contact					_ The	ephone N	lumber			-
DCA	Cancellation				Cantwe	11				-	epriorie i		WIR	01 0	-J
				FAC	ILITY INFO	ORMAT	ION				1.10	BENE	VQ	ULC	*
Name of Facility Where A	Abatement is Takin	g Place	(3)					Туре с	f Facility	(4)	200000000000000000000000000000000000000			Thomas .	-
home								□ s	chool (K-	12)					
Street Address								S X	ubchapte	r 8 (Oth	er than K- & comme	-12) rcial bui	ldings	, hom	ies,
City (5)								Square		# 0	f Floors		Bldg. /	Age	
Bloomfield								2200		2			71	•	
County (6)					Code (7)			Curren	t Use (Pr	ior if bei	ng demol	ished)			
Essex					USE ONLY	-	_	home	9						
Name of Monitoring Firm	Hired by Building (Owner (8)	ASCI	M No.				ment Co nmenta		(9) rices, LL	.C			
Street Address								Address Box 48	3, 4 E C	Sate D	rive		TO STATE		
City, State, Zip Code						1		State, Zip	37						
							Glen	wood,	NJ 074	418`					
Project Manager for Monit	toring Firm			Telepho	one No.		Teleph	none No.			License	No.			
C+-+ D-+ (40)							973-	764-22	76		703				
Start Date (10) 6/26/18		7/8/18		npletion	Date (11)		Name	of OSHA	Monitor						
Occupancy Status During	Abatement (Check	Only O	ne)				Street	Address							
Facility Closed/Vacati Abatement Performe Other – Describe: bt	d Outside of Norm	eriod of al Facilit	Abaten y Hours	nent			City, S	tate, Zip	Code						
Scope of Work (Check All						_									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	тпат Арріу)	generated.	Renova Demolit		11		×	Mini- Glove	Enclosure bag Pro	e cedure	Negative				
		Is	Locati	on										emen	t
Location			Normal d Sole			Des	scription	of					Ту	ре	,
Asbestos-Containing M <u>TO BE ABA</u> In Facility (13)	TED	Ma	intenar todial S (12)	nce/	Asbest (i.e.	thermal surfac	aining M systems sing, VA niscellan		ACM) on,	(S	nount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A								<u>a</u>		late	ıre
baseme	nt		X			insulat			50) LF	х				
				Х		pip	e fitting	gs			10	X			
Name of Registered Waste	e Hauler		1.03553	JDEP W	S000000000	Cubic '		1	Name of	Register	ed Landfi	11			
Freehold Carting	17/20/33	auler ID 5939	No.	of Was	te	4		332	s Landf						
City, State Freehold NJ					Dispos TBD	al Date		City, State Birdsbc					all,		
Completed by A. Scott Higgins		Title Pres	dent			Si	gnature		$\overline{}$		D	ate 5/14/18	3		



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

PAIU		NOTI	FICATIO Pursuan	N OF ASB	ESTOS 8:60 ar	ABATE	MENT 0)	Loo	. ()	1070	72	7	
Date of Notification (1) 6/14/18				of Building				I		L/		_ n Fr	- F
Agencies Notified Type Notification				Environi Address	пепта	a Sar	ety, LLC	HD),	EG	<u>E</u>	1 //		
EPA X Initial DEP Amended				enningtor		are							Party and
▼ DOL Amendment				tate, Zip Co ettstown,		7840			JUN	1 1 8	20	18	
DOH Emergency justification)		9		of Contact				Te	lephone N	lumber		2001	
DCA Cancellation				n Carito	DMAT	TON		1	E.	(14 P.J.)		OL.	E4
Name of Facility Where Abatement is Takin home	g Place	(3)	170	ALLET INI	JKWAI	ION	Type of Facili	ty (4)	1				-V.2
Street Address							School (I	K-12)					
							X Other (i.e	ter 8 (Otr e. private	er than K- & commer	·12) cial bu	ildings	, hom	ies,
City (5)							etc.) Square Feet	# 0	f Floors		Bldg. /	Age	
Phillipsburg County (6)			0 .	0 1 (7)			2100	2			68		
Warren				Code (7) USE ONLY)			Current Use (I	Prior if be	ing demoli	shed)			
Name of Monitoring Firm Hired by Building	Owner (8)	ASCI	M No.			of Abatement C						
Street Address						-	Environmen Address	ital Serv	rices, LL	.C			
Subject Control of the Control of th							Box 483, 4 E	Gate D	rive				
City, State, Zip Code							tate, Zip Code						
Project Manager for Monitoring Firm	1		Telepho	ne No			wood, NJ 0	7418`	Line	NI -			10=-50
_			5.5			110000000000000000000000000000000000000	764-2276		License 703	No.			
Start Date (10) 6/25/18	Schedul 7/7/18		mpletion	Date (11)		Name	of OSHA Monito	or		101			
Occupancy Status During Abatement (Chec	1000000					Street	Address						
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: basement	eriod of al Facilit	Abater y Hour	nent s				tate, Zip Code						
Scope of Work (Check All That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demoli				×	Full Contain Mini-Enclosu Glovebag Pr Non-Exempt	ire ocedure				e	
		Locat Normal									Abate	ment pe	į.
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Sole iintena todial S (12)	ly by nce/	(i.e. t	os Cont hermal surfac		aterial (ACM) insulation, Γ, or	(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
b = = = = = = 1	Yes	No	N/A									te	
basement			X		pipe	insulat	ion	15	0 LF	Х			
										-			
										-			
Name of Registered Waste Hauler		1775.000	JDEP W	Sec. 12.7.7.	Cubic		Name o	f Registe	red Landfi	1			
Freehold Carting		10000	auler ID 5939	No.	of Was	ste	Weste	ern Berk	s Landfi	II			
City, State Freehold NJ					Dispos	al Date	City, Sta	ate oro PA					
Completed by A. Scott Higgins	Title	dort				ignature	(2)	JOIOFA	D	ate			
cook i liggilio	Presi	uent				/			6	/14/18	3		

The same of the sa	\cap	-												Pr	INLF
		D		ICATIO	tate of New N OF ASBE t to NJAC 8	STOS A	BATE		1/20	A	10°	7=	3/	7	
Date of Notification (1) 6/14/18					of Building C			(2)	Tin	E	CE		V		חחח
Agencies Notified Type	Notification				Address	a riony				/					100
X EPA X	Initial							+	allocation of the second	A STATE OF THE STA	IIN 1	8	20	18	1
DEP DOL	Amended				ate, Zip Coo	de			tel i		118		7.0	10	11.
	Amendment #_ Emergency (inc	luding	_		mus, NJ					L	CONTRACT LETS	ודים ותפ	erio/as	nemotion w	
DOH DCA	justification) Cancellation				of Contact ua Marks				T	elephone	Numb	ic.	IN H NG	K.H.	ζ/n
	Cancellation				ILITY INFO	PMATIO)NI		Lamen	108-240	-08//	-			
Name of Facility Where Abater	ment is Taking P	Place (3)	170	ALITT INTO	KWIATIO	714	Type of Facili	ty (4)		-				
Home								School (K-12)						
Street Address								Subchar	oter 8 (O	ther than e & comm	K-12)	اء اند		h	
Cit //FV								etc.)	e. private	e & comm	ierciai t	oulla	ings,	nome	es,
City (5) Paramus								Square Feet	1000	of Floors			dg. A	ge	
County (6)				County	Code (7)			2100	Drive if h		المائلة	68	3		
Bergen					USE ONLY)		_	Current Use (Prior ir b	eing aem	olisnea)			
Name of Monitoring Firm Hired	by Building Ow	ner (8))	ASCI	M No.		Name (of Abatement (Contracto	or (9)			-		
								Environme			LC				
Street Address							Street	Address							
City State 7in Code								ox 483, 4 E	Gate	Drive					
City, State, Zip Code								ate, Zip Code	7440						
Project Manager for Monitoring	Firm	-		Telepho	ne No		-	wood, NJ 0	7418	Literan	- h1-				
, , , , , , , , , , , , , , , , , , , ,				relepine	7116 TVO.			64 - 2276		Licens 703	se No.				
Start Date (10)	Sc	chedul	ed Cor	npletion	Date (11)		Service III	of OSHA Monit	tor	100					
6/19/18		/24/1	200												
Occupancy Status During Abate	ement (Check O	nly Or	ne)				Street A	Address					77		
Facility Closed/Vacated Do Abatement Performed Out Other – Describe: attic	uring Entire Peri side of Normal I	od of A	Abaten / Hours	nent			City, St	ate, Zip Code							
Scope of Work (Check All That	Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	10.000000000000000000000000000000000000		Renova Demolit				×	Full Contair Mini-Enclos Glovebag P	ure rocedure	9					
		200		Wares				Non-Exemp	ted (*) a	nd Non-F	riable F				
Location of			Locati Vormal									,		ment pe	
Asbestos-Containing Materi	al (ACM)	Use	d Sole	ly by	Asbesto		ription on ning Ma	of aterial (ACM)		Amount				m	
TO BE ABATED In Facility			todial S		(i.e. th	nermal sy surfacin		insulation,		(Specify SF or LF)	3	Der	Re	Encapsulate	Enclosure
(13)			(12)			other mis				or of Lr)	1	Removal	Repair	psul	nso
		Yes	No	N/A							1	-		ate	ē
attic				х		verm	niculit	Э	7	750 SF	x				
Name of Registered Waste Hau	ler		9.000	JDEP W auler ID		Cubic Ya		Name	of Regis	tered Lan	dfill				
Freehold Cartage			F 50:33	5939	10000000	of Waste TBD	3	West	ern Be	rks Land	dfill				
City, State Freehold NJ		11000				Disposal TBD	l Date	City, S	tate boro P	Α				141	
Completed by		Title				100	nature	/)	DOIO F		Date			7	
A. Scott Higgins		Presi	dent				-	fler	_		6/14/	18			

P		NOTIF	EICATIO	tate of N N OF ASI	ew Jerse BESTOS	y ABATE	MEN.	T Q	1	から	C	/ 	Pr	int F
Date of Notification (1) 06/11/18	Cond back	5m3 (F	Name	of Building	Owner/0		45:		2000		6	<u>E</u>		<u> </u>
Agencies Notified Type Notificat	ion		The contract	Address	i. LLC.						JUN	1.8	-20	18
				Broad St	t.				See all					
DEP Amende			City, St	tate, Zip C	ode					ASE	ESTO	S CC	INT	301
Emerger	ent # cy (including	-		mfield, N				0.8	ļ.	Anthony of the same of	LIC	ENS	NG	TNP IN
DOH justificati	on)			of Contact ony Pisa					Te	ephone Nu	mber			
Cancella	don	1	75 200000	ILITY INF	960000000000000000000000000000000000000	ON					, +			
Name of Facility Where Abatement is Ta	aking Place (3	3)	1710	, LL 1 1141	OKWATI	OIY	Тур	e of Facility (4)			-		
Auto Parts Equipment LLC.								School (K-1						
Street Address 223 Broad St.							×	Subchapter Other (i.e. p etc.)	8 (Oth rivate	er than K-1 & commerc	(2) cial bui	dings,	hom	es,
City (5) Bloomfield					- 3/1007/00-3		Squ 240	are Feet	# o	f Floors		3ldg. <i>A</i> 50+	ge	
County (6) Essex				Code (7) USE ONL	n	 21		ent Use (Prio to Parts St		ng demolis	hed)			
Name of Monitoring Firm Hired by Buildi N/A	ng Owner (8)		ASCI	M No.				atement Con		(9)				
Street Address						Street				3-2-1-0		_	_	
City Chata 7:- Cod-							-	le Ave.						
City, State, Zip Code								Zip Code n, NJ 070	57					
Project Manager for Monitoring Firm		Т	Telepho	one No.		Teleph				License N	No.			
					12			9092		01107				
Start Date (10) 06/25/18	Schedule 06/30/1		npletion	Date (11)				HA Monitor						
Occupancy Status During Abatement (Ci						Street		alodka						
Facility Closed/Vacated During Enti Abatement Performed Outside of N.	re Period of A	baten	nent			156	Mapl	e Ave.						
Other – Describe:	omiai i aciiity	riours	•					Zip Code n, NJ 0705	57					
Scope of Work (Check All That Apply)						rrain	ingto	11, 140 0100	-					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolit				×	Mi Gl	III Containme ni-Enclosure ovebag Proc on-Exempted	edure	20				
	Is	Locati	ion						(/ 5		1	Abate		
Location of		ormal i Sole				cription					<u> </u>	Ту	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Maii	ntena odial S (12)	nce/	Asbes (i.e.	tos Conta thermal: surfac other m	systems ing, VA	insul T, or	ation,	(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A										te	TD.
front roof			*		roof	flashi	ng		35	50 sf.	*			
front roof			*		roof n	nembr	ane		12	00sf.	*			
Jame of Registered Waste Hauler			IDEC											
lewark Carting Inc.		1,500	JDEP W auler ID		Cubic Y of Was			Name of R	egiste	red Landfill				
		0.5	5409		20			GCSL						
City, State Jewark, NJ					07/02/			City, State Pen Arg	yl, PA					

Newark, NJ

Completed by

Leslaw Nalodka

Title

President

Date

06/11/18

Signature

1434001		N	ЮТ		ATION	n OF AS	lew Jersey BESTOS ABA AC 8:60 and 5:1	6)	DEG		V		Property of the Comment
Date of Notification (1) 06 / 1	3 /	18					ontracting, LLC	(2)	II LI JUN	18	201	8	Propriestory of
			_			1000	mitracting, LLC			1			-
	ype Notific Initial	ation			NO ESTATIONS	t Address	d Dood		ASBESTO	OS CO	NTH	OL 8	1
	Amende	d				3 Halyaro State, Zip		-	LIC	ENSI	YG		*=-
☑ DOH	Amendm				1		code ch, NJ 08751						
□ DCA (NJAC 5:23-8)	Emerger justificat		uding	I		of Contac			T-I N				_
] Cancella	60.			0.000	nk Disar	VESS		Telephone Nun	nber).			
					FA	CILITY II	NFORMATION		L	1=1 O.W.O.			-
Name of Facility Where Aba	tement is	Taking F	Place	(3)				Type of Facility	(4)		1500		-
Residence								School (K-1	* - * ·				
Street Address								☐ Subchapter	8 (Other than K-12	2)			
								M Other (i.e., phomes, etc.	orivate and comme	ercial bu	uildin	gs,	
City (5)								Square Feet	# of Floors	RI	dg. A	ge.	
Eagleswood								700 sf	1		ag. /- 65	30	
County (6)					Cour	nty Code (7)(STATE USE ONLY)		rior if being demoli		-		_
Ocean								Residence	zomig domon	500)			
Name of Monitoring Firm Hir	red by Buil	ding Ow	ner (8)	ASCM	No.	Name of Abatem	AUG. 3000, 3000, 3000, 3000, 3000)				_
N/A			- constitution	,				ntracting, Inc.	5				
Street Address							Street Address	g, mo.					_
							1889 Route 9	9. Unit 61					
City, State, Zip Code				307			City, State, Zip C	200 1000 0000 0000					_
S 59								New Jersey 08	3755				
Project Manager for Monitori	ing Firm			Tele	ephone	No.	Telephone No.	00.009 00	License No.				_
					,		732-349-9932	,	00624				
Start Date (10)		Schedul	ed Co	omple	etion Da	te (11)	Name of OSHA N		00024				_
06 /23/					9 /	37 .	E.M.S.L. Ana						
Occupancy Status During Ab							Street Address	,					_
☐ Facility Closed/Vacated D					ment		1056 Stelton						
Abatement Performed Ou						cribe							
Time of Abatement:	AM	PM/		_PM		AM	City, State, Zip C		9954				
Scope of Work (Check all that	at apply)	S-1-1-1-1-					riscataway,	New Jersey 08	0004				
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf		_		novat molitic			☐ Mini-End ☐ Gloveba	g Procedure	gative Pressure	Ire			
				Loca					l laster record		atem	ent T	VE
Location of Asbestos-Containing Mat	orial /ACN			lorma d Sole	illy ely by		Description of		2007	D	Z	ш	Ė
TO BE ABATE	D (ACIV		Mai	ntena	nce/		stos Containing Ma e., thermal systems		Amount (Specify	Removal	Repair	Encapsulate	
IN Facility	_		Cust		Staff?		surfacing, VAT	, or	SF or LF)	oval	=	psu	
(13)		,	Yes	(12) No	N/A	1	other miscellane	eous)	15			ate	
exterior]	NO NO	IN/A	ashest	os siding		300 sf	NZI.			-
			5			uobeoli	oo olullig		300 SI				1
					+=-						Ш	Ш	l
			_]
Name of Decistors (187)													[
Name of Registered Waste H Guardian Contracting,				7.1	IJDEP V lauler ID 20223	No.	Cubic Yards of Waste	Name of Regis	stered Landfill				
City, State			HEAD.T		20223		3 Disposal Date	City, State					-
Toms River, New Jerse	ey						06/29/18		Pennsylvania				
Completed By (Print or Type))	Title					Signature	1		ate /	1		_
Nicholas Fernicola		Pro	ject	Man	ager			4.		11/	1	4	

0.7		<u>(</u>	State of N				_		E	C	E		₩ Pr	int F
Date of Notification (1)	N	(Pursu	ION OF AS aut to NJAC ie of Building	C 8 60 an	1-12/12	0)	г			JUN	1	8 2	018	
06/12/2018		Jan	nes Ceccl					100 (m.)						
1000			et Address						ASBI	ESTO LIC	S C	ON	TROI	. &
X DOL Am	ended endment #		State, Zip Coex Fells,		21									
DOH just	ergency (including tification) ncellation	Nam	e of Contac	t				Telep	phone	Numb	er			
Name of Facility Manage Alex		F	ACILITY IN	FORMATI	ON			1						
Name of Facility Where Abatemen House	t is Taking Place (3)					Тур	e of Facility (650						
Street Address						×	School (K-1 Subchapter Other (i.e. p	8 (Other			ouilo	dings	, hom	es,
City (5) Essex Fells						Squ N/A	etc.) are Feet	# of F N/A	Floors		58.15	ldg. /	Age	
County (6) Essex			ity Code (7) TE USE ONL		_	Ho		3	7	olished	1)			
Name of Monitoring Firm Hired by N/A	Building Owner (8)	AS	SCM No.				atement Con tement, In		9)					
Street Address						oser	ngren Aver	iue						
City, State, Zip Code					50000000000		Zip Code NJ 07512							
Project Manager for Monitoring Fire			hone No.		Teleph 973-3			1000	Licens 0131					
Start Date (10) 06/22/2018	06/23/2	018	on Date (11))			SHA Monitor tement, Inc	C.						
Occupancy Status During Abateme	820 (5)	0.0			Street						-144(1)			
Facility Closed/Vacated Durin Abatement Performed Outside Other – Describe:	g Entire Period of Al e of Normal Facility	oatement Hours			City, S	tate, 2	igren Aven Zip Code NJ 07512	ue						
Scope of Work (Check All That App	oly)				1010	vva, i	10 0/012							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enovation emolition			×	Mi Gl	ull Containme ini-Enclosure ovebag Proc	edure						
	ls L	ocation				2 100	on-Exempted	() and i	NON-F	nable i			ement	
Location of	No	ormally Solely by	20020		cription					-		Ту	ре	
Asbestos-Containing Material (/ <u>TO BE ABATED</u> In Facility (13)	Mair Custo	tenance/ dial Staff? (12)				insul T, or	ation,	(Spe	ount ecify or LF)		Remova	Repair	Encapsulate	Enclosure
2: 8	Yes	No N/	Α								/al	Ŧ	ilate	ıre
1st Floor		x		Pipe	Insula	tion		70	LF	2	ζ.			
											-			
Name of Registered Waste Hauler		I NUMBER	110/2-1	1011	, .									
D&S Abatement, Inc.		Hauler 20996		of Was			Name of R				Α			
City, State Totowa, NJ					al Date		City, State				2-5-5			
Completed by	Title			TBD	anaturo		Morrisvil	ie, PA		Deta				
Ned Joksimovic		t Manage	er	31	gnature		III			Date 06/12	2/2	018		

CK7301

PAID

State of NJ

E	C	E		\mathbb{V}	E	In
	- Common of the	1		2018	of the administract of the plant and the	
ASB	ESTC LIC	JS (NOS	ITRO G	L&	_

D&S Proj. #: 18-122	A & A A A .					os Abatement 60 and 12:120)		The state of the s		delen en manuel en manuel en en	The second second
Date of Notification (1) 0 6 / 1 1 / 1 7 Agencies Notified Type Notific		IOHN B	ARONE	ner/Operator (2	2)			Comments of the comments of th	8 2	010	14
☐ EPA ☐ Initial ☐ DEP ☐ Amended		reet Addre					AS	LICE/ BESTOS	CONT	ROL	<u>ş</u>
Amendment: Emergence (including justification)	y	NUTLE me of Cor	Y, NJ 0	7110			Telepho	ne Number			
DCA Cancellatio	on .	JOHN B	BARONE	<u> </u>							
Name of facility is			FAC	ILITY INFORM	MATIO	N					
Name of facility where abatement	is taking plac	ce (3)					Type of Facility Scho	(4) ol (K - 12)			
JOHN BARONE Street Address								hapter 8 (Ot)
3.000, 1.000								(Private/Co ./Homes, et		ial	
City (5)	County	/ (6)			Co	unty Code (7)	Square Feet	# of Floors	3	Bldg.	Age
NUTLEY	essex				(St	ate use only)	Current Use (F	rior if being	demo	ished)	
Name of Monitoring Firm Hired by				ASCM No.	\vdash	Name of Abatement	Contractor (9)				
Street Address						D & S RESTOR	ATION, INC.				
						20 California A	VA				
City, State, Zip Code						City, State, Zip Code	Y C.		OCT COL		-
Project Manager for Monitoring Firm	n	I Dhe	one Numb	0.5	_	Paterson, NJ 07	7503	T			
, and a second of the		1	nie Numb	ы		73-345-8020		License N	Numbei 169		
Start Date (10)	Sched. 0	Completion	n Date (1	1)	-	Name of OSHA Mon		-			
06/20/1818	07/18/1					D & S Restorati	on, Inc.				
Occupancy Status During Abateme Facility closed/vacated during Abatement performed outside	entire period	of abaten	nent.			20 California Av City, State, Zip Code	/enue				
Describe: NORMAL F					-	Paterson, NJ 07	503				
Scope of Work (check all that apply ≥ 3 sf or > 3 lf	y) Renovation Demolition						Full Containment v Mini-enclosure Glovebag procedu	re			
Location of	Is location n						Non-Exempted (*)	and Non-m	RI	R E	
asbestos-containing material (acm) to be abated in facility (13)	staff(12) Yes	No	N/A	Descriptio material (/	n of a ACM)	sbestos-containing	Amount (Specify S LF)	F or	m	e n c a a	n c L
basement 2 CLOSETS		X		PIPE INSUI	LATI	ON	63 L FT		e I		+
										計	甘
									井		뷰
Registered Waste Hauler D & S RESTORATION, INC.		Hauler ID		ibic Yards of W	laste	Name of Registered				1 _]
Dity, State PATERSON, NJ 07503	13506	D	isposal Da			TULLYTOWN, City, State		COVERY		-	
Completed by (Print or Type)	Title		06/21/18	Signature		TULLYTOWN,	PA	To.			
BOGDAN JOLDZIC	PRESIDEN	T						Date 06/11/2	010		

			N		ICATI	ON ASBI	ew Jersey ESTOS ABATEN 8:60 and 12:120	DEC	E		<u> </u>					
Date of Notification (1) 6/14/20	018					e of Buildi athan Fe	ng Owner/Operator inman	(2)	III JUN	18	20	18	City of the Control o			
Agencies Notified	Type Notific				Stree	et Address		of Bennady, or com-	ACDEST	23.00	\		Ī			
DEP DOL	Amende Amendm Emergen	nent #_ ncy (inc	luding	ī	Sale	State, Zip em, NJ		l	LIC	CENS	ING		Gt			
DOH DCA	justificat Cancella	tion)			Jona	ne of Con than Fein	man		Telephone Nur	nber =						
Name of Facility Where	A batament is	Tokina	Diono	(2)	FA	CILITY IN	FORMATION	Type of Facilit	b. (A)							
Residence Street Address	- Datement 13	Taking	riace	(5)				School (K-								
Oib. (a)								homes, etc	c.)							
City (s) Salem, NJ								Square Feet 4500	# of Floors	_ 8	lldg. 5 yrs					
County (6) Salem					USE	ONLY)	(7) (STATE	Residence	Prior if being demo	ished)						
Name of Monitoring Firm (8)	Hired by Build	ding Ov	vner		ASCM	No.	AEi2, LLC	nent Contractor ((9)							
Street Address							Street Address 361 E. Flemin	g Pike								
City, State, Zip Code							City, State, Zip Hammonton,									
Project Manager for M	onitoring Fir	m		Tele	ephone	No.	Telephone No. 609-481-212	2	License No. 00689							
Start Date (10) 6/22/18		Schedul 5/30/18		mple	tion Da	ite (11)	Name of OSHA N AEi2, LLC	/onitor								
Occupancy Status During Facility Closed/Vacate			7.1	5.0	tement		Street Address 361 E. Flemi	ng Pike								
Abatement Performed Other - Describe;	Outside of No	ormal F	acility	Hou	rs		City, State, Zip Code Hammonton, NJ 08037									
Scope of Work (Check al	I that apply)						Full Cor		Negative Pressure							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		2	Rer	novati	on n		☑ Gloveba	g Procedure	Non-Friable Proced	lure						
Location	£			cation mally	,						Abate Typ					
Location of Asbestos-Containing Ming Ming Ming Ming Ming Ming Ming	aterial (ACM)		Maint Cus St	enan stodia taff? 12)	ce/		Description of cos Containing Mate thermal systems ir surfacing, VAT, other miscellaneo	erial (ACM) nsulation, or	Amount (Specify SF or LF)	R e m o v a 1	Repair	H f C c D n H I s	Enclosur			
Basement		Y	'es	No	N/A	TS	T		300 LF	-		t				
		+	\dashv	-	X	15	1		300 LF	X						
Name of Registered Waste Hauler					IDED:	Nost-	Ouble Vest	I No								
AEi2, LLC	te Hauler			Н	JDEP V auler ID 1376	AND THE PROPERTY OF	Cubic Yards of Waste	ACUA	stered Landfill							
City, State						Disposal Date	City, State	12.								
Hammonton, NJ						TBD	TBD	100				_				
Completed By Title Wm Minnick Program Mor							Signature	mi	Date 6/14/18	3						

		NOT	IFIC	STIC	State of N	ew Jers	sey OS ABAT	CRACALT									
MO#25131050471) and 5:16		MEGE	= n	W	F	-				
Date of Notification (1)	- PA		70	Name	of Buildin	a Owner	Operator (2	2)		a [[V	L					
06	14/18	3			ermina Va		82 7725	1									
Agencies Notified	Type Notification				t Address	alenzue	la		III JUN I	8	2018		Ш				
☐ EPA									Metable and a second a second and a second a				PROPERTY				
☑ DOLWD ☑ DHSS	Amended			City,	State, Zip (Code			ASBESTOS	CON	ITDA	1 0	-				
□ DCA	Amendment #			Clifto	n, NJ 070)11			LICE	VSIN	G	i_ či					
(NJAC 5:23-8)	justification)	·oraam	3		of Contac				Telephone Numb	er		-	Acque to an				
	Cancellation			Guille	ermina Va	lenzuel	a		4								
				FA	CILITY IN	FORM	ATION										
Name of Facility Where A	batement is Takin	g Place	(3)					Type of Facility	(4)				-				
Private house Street Address								School (K-1	2) 8 (Other than K-1 2)								
Street Address								Other (i.e.,)	private and commer	cial bu	uilding	IS,					
City (5)								homes, etc.		15							
Clifton, NJ 07011								Square Feet	# of Floors	BI	dg. A	ge					
County (6)				Cour	nty Code (7)	(STATE L	ISE ONLY)	Current Use (P	rior if being demolis	hed)							
Passaic						•			nor in boing domono	1100)							
Name of Monitoring Firm	Hired by Building	Owner	(8)	ASCM	No.	Name	of Abateme	nt Contractor (9)								
6:						Gr Tec	ch LLC										
Street Address						Street	Address										
City, State, Zip Code							alley Rd #										
9.15, Gtato, E.P GGGG							tate, Zip Co										
Project Manager for Moni-	toring Firm		Tele	phone	No.		one No.	0	License No.								
							8-1777		01127								
Start Date (10)					ite (11)		of OSHA M	onitor	01127								
	- 19-70			_ / _	18	Enviro	vision Co	nsultants,Inc									
Occupancy Status During							Address										
	d During Entire Pe	riod of	Abate	ment	arib a			Road, Bldg .#	35E								
Time of Abatement:	AMP	M/	PM_		AM			ite, Zip Code									
Scope of Work (Check all	that apply)					Fair La	wn, NJ 07	07410 up and decontamination with negative pressure									
		_				ㅂ	Full Cont	ainment with Ne	gative Pressure	press	sure						
>3 sf or >3 If > 160 sf or >260 If			novati			X	Mini-Encl		Tent with Negative	Press	ure						
-							Non-Exer	npted (*) and No	on-Friable Procedur	е	1						
Location	of		Locat							Ab	ateme	ent Ty	уре				
Asbestos-Containing N	Material (ACM)	Use	ed Sole	ly by	Asbes		escription of taining Mat	f erial (ACM)	Amount	Re	Re	Ē	En				
TO BE ABA		- CONTRACTOR	intena todial :		(i.e	., therma	al systems in	nsulation,	(Specify	Remova	Repair	Encapsulate	Enclosure				
(13)	,		(12)				acing, VAT, miscellaned		SIF or LF)	/al	,	ulat	ure				
		Yes	No	N/A								ro .					
Basement				\boxtimes	Pipe insu	ılation			70 LF								
										П	П	П	П				
		П	П	П						I							
										17							
Name of Registered Wast	e Hauler		NJC	EP Waste	Hauler ID No.	Cuhic Ya	ards of Waste	Name of Regis	stered andfill		Ш	Ц	Ш				
Gr Tech LLC	19. 19. 19. 19. 19. 19. 19. 19. 19. 19.			03378		TB			Norea Landilli								
City, State		<u> </u>	10	03316	,,,	Disposa		T.R.R.F. Inc									
Wayne, NJ 07470						ТВ		Tullytown, P.	Δ								
Completed By (Print or Ty	pe) Title						gnature /	i unytown, F.	Dat	e							
N.Jevtic	Owi	ner					T. (1)	wic Wena		14/18	2						
ASB-41	15.11		11-110-					- Vona	00/	* 1/10							

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

MITTERIAL STATES

NOTIFICATION OF ASBESTOS ABATEMENT FOR Add Frank
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1)		Name of Building Owner/Operator (2)															
5/29/18			Joh	in Sant	oro Priv	nOperate	or (2)				W	E	1				
Agencies Notified Type N	Votification			et Addres			iic iic	ILUT	ACCORDED OF THE SECOND				The same of				
DEP DOL A	nitial mended mendment # 1 mergency (includir stification) ancellation	ng	City, Bea	State, Zinch Have of Cont	p Code ven Cres	t NJ 08	008	1	JUN.	1 8	201		Company of the compan				
					NFORMA	TION			-	-	1						
Name of Facility Where Abateme John Santoro Private Hor	nt is Taking Place	(3)		OILITI	NIORWA	HON	Type of Facil	ity (4)									
Street Address	ne ——————						School	5.05									
City (5)							Subcha	oter 8 (Ot	her than K & comme	-12) rcial b	uilding	ildings, homes,					
Beach Haven Crest NJ 08	008						Square Feet 1000+	# 0	of Floors		Bldg.	Age					
County (6) Ocean			Count	y Code (7)		Current Use (Prior if being demolished)										
Name of Monitoring Firm Hired by	Puilding O	.,		E USE ON	(LY)		House & C	arage		isneu)							
N/A	building Owner (8	3)	ASC	CM No.			of Abatement	Contracto	r (9)				-				
Street Address						-	ernaco Inc.										
City Ct. 1 The						1	eet Address O Box 329										
City, State, Zip Code					1	tate, Zip Code											
Project Manager for Monitoring Fire	Piect Manager for Monitoring Firm						t Berlin NJ 0	8091									
	•••		releph	one No.			one No. 753-9800		License	No.							
Start Date (10) 6/7/18	Schedul	ed Co	mpletion	Date (1	1)		of OSHA Monit	or	00727								
Occupancy Status During Abateme	6/14/1		0.00			Sam		J1									
X Facility Closed/Vacated During Abatement Performed Outside Other – Describe:	g Entire Period of A e of Normal Facility	A 6-1	ment 's				Address ate, Zip Code										
Scope of Work (Check All That App	ly)	-															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renova Demoli				X	Full Contains Mini-Enclosu Glovebag Pr Non-Exempt	ire ocedure									
9.00000		Locati						T Tana	NOII-FIIAL	T Pro	Abate		t				
Location of Asbestos-Containing Material (A	CM) Use	lormal d Sole	ly by	Acho	Des	cription o	of				Ту						
TO BE ABATED In Facility (13)		ntenar odial S (12)	Staff?	(i.e	thermal s surfaci	systems in ing, VAT, iscellane	or	(Sp	nount pecify or LF)	Remova	Repair	Encapsulate	Enclosure				
Exterior Siding	res	No	N/A							-		te	œ				
ant 0 4	,		X			or Sidir		210	0 SF	х			- French				
out Cottage Sid	(2)			Ex	tecion	5,0	1,-	1500	OSF	X							
							J										
ame of Registered Waste Hauler		TN.	JDEP Wa	aste	Cubic Y	ordo											
nited Roll Off	auler ID N		of Waste		140 page trousance		ed Landfill		-								
ty, State	2459		Diana.	10-1	G.R.O												
Elm NJ					Disposal 6/14/18		City, Stat	e /ille PA	10007								
Completed by Title President						nature-	WOTTS	me PA		Date							
ony i reina	Presid	lent					-<		3 E-12	0/10							

Print Form

2(-(13))

10	PAID		NOTIF	State of New Jersey DTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120) E G E W E F											In	T- Constable & Add	
Date of Notification (1) 6/12/18				Name	of Building	Owr	ner/Operato	r (2)		-		hadrat ett here lævet jur	-			CARD IN	
Agencies Notified	Type Notification				Address	it P	rivate Ho	me		JI	IN 1	8 20	10			Makesage	
⊠ EPA	✓ Initial			Otroot	Address				Table Table					4400 market	recount.	A STATE OF THE STA	
DEP	Amended		İ		tate, Zip C			ASBESTOS CONTROL &									
	Amendment Emergency (#_ includin			h Haven		80080		- Spanner and representative		ICENS	SING	1676	- Ct			
DOH DCA	justification) Cancellation			Name Jim	of Contact			Telephone Number									
				100,000,000	ILITY INF	ORM	ATION			_!						10	
Name of Facility Where A	Abatement is Taking	Place	(3)				, tilon	Type of Facility (4)									
Street Address	ate nome							School (K-12) Subchapter 8 (Other than K-12)									
								X	Other (i.e. p	8 (Oth	er than & comm	K-12) nercial	buile	dinas	hom	es	
City (5)								etc.) Square Feet # of Floors						975007			
Beach Haven NJ 0	8008								00+	2	rioors			ldg. /	Age		
County (6) Ocean					Code (7)	^		Curr	ent Use (Pri	or if be	ing dem	olished	1			-	
Name of Monitoring Firm	Hirad by Building C				USE ONLY			Ho									
N/A	Timed by Building C	wher (a)	ASC	M No.		-	of Aba	atement Cor Inc.	ntractor	(9)					*	
Street Address							Street		1000								
City, State, Zip Code								O Box 329 y, State, Zip Code									
9900 V9 104								West Berlin NJ 08091									
Project Manager for Moni	toring Firm			Telepho	one No.		Teleph				Licens	se No.			C. II C. T.	-	
Start Date (10)		Sahadu	lad Can	!	D-1 (44)	1000011		856-753-9800 00727 Name of OSHA Monitor									
6/21/18	-	6/26/1	8	npietion	Date (11)		Name		HA Monitor								
Occupancy Status During	Abatement (Check	Only O	ne)				Street	Addre	SS						-		
Facility Closed/Vaca Abatement Performs	ted During Entire Po	eriod of	Abatem	ent						*							
Other – Describe:	ed Outside of Norma	al Facilit	y Hours				City, S	tate, Z	ip Code				2.77				
Scope of Work (Check All	That Apply)															-	
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demoliti				×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
		Is	Location	on					- Externation	() dire	14011-1	nable r			ment		
Location Asbestos-Containing I			Normall ed Solel				Description					-		Ту	ре		
TO BE ABA	TED	Ma	intenar todial S	ice/	Asbest (i.e.	tos Co thern	ontaining M nal systems	aterial insula	I (ACM)		nount pecify	١,			En	ш	
In Facilit (13)	У	Ous	(12)	lalli		su	rfacing, VA	T, or			or LF)	, and a second	080	Repair	Encapsulate	Enclosure	
S- 69		Yes	No	N/A		(F.17) 107	· · · · · · · · · · · · · · · · · · ·	0000)				ğ		₹	ulate	ure	
Utility Room				×		Tra	nsite pan	els		60	0 SF	×					
Utility Room sm	all heater			х			TSI			30	SF	x	7				
													1				
and the second s																	
Name of Registered Waste	e Hauler		0.000	JDEP W	77.77.77		ic Yards		Name of F	Register	ed Land	dfill				\dashv	
United Roll Off			100	2459	INU.	3	/aste		G.R.O.\	V.S.							
City, State Elm NJ				oosal Date		City, State		1000	7								
Completed by							6/26/18 Morrisville PA 19067 Signature Date										
Anthony T Perna												6/12/18					

PAID

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

Print For	

Name of Racility When Abstement is Taking Place (3) Sinset Address 145Plainfield Ave. 150Plainfield Ave.			10.75	(Pu	rsuant t	to NJAC 8	:60 and	12:120)		5	5/6	\	y [5 1	m		
Separation		29222		Brothers of the Sacret Heart - JUN 1 9 2019														
DDP		===2		1000			ve.			Sol land		on i	7 20	10	-	7		
DOH	DEP	Amended	_		-				1.		ASBES	TOS CO	ONTE	ROL	3	The workship and		
Name of Facility Where Abatement is Taking Place (3)	1 Table 1	Emergency					00040	<u> </u>		-		LICENS!	NG	-	CONC. CO.	moul.		
Name of Facility (Where Abatement is Taking Place (3) Title Taking Place (3) Type of Facility (1) Storage House Type of Facility (1) Subchapter 6 (Normal Facili	DOH DCA																	
Surce Address Surce Addres	None of Facility W/hara A	hotomont in Takin	a Diago (2)		FACIL	LITY INFO	RMATI	ON	Type	f Facility (4)								
Subchalpare 8 (Other than K-12)	53	ibatement is Takin	g Place (3)						permana									
Metuchen						OWNERS OF THE SECOND			S	ubchapter 8	(Other							
Metuchen	145 Plainfield Ave.			LI CONTROL					et	tc.)			1000	buildings, homes,				
County (6) County (6) County Code (7) Code										Feet .	1	loors	1000		ge			
Name of Monitoring Firm Hired by Building Owner (8) Name of Monitoring Firm Hired by Building Owner (8) N/A Street Address Street Address 156 Maple Ave. City, State, Zip Code Wallington, NJ 07057 Project Manager for Monitoring Firm Telephone No. Start Date (10) Scheduled Completion Date (11) Ob(18/18) Occupancy Status During Abatement (Check Only One) Stagetlity Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Store 25 for ≥3 if Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Dasement Dasement Name of Registered Waste Hauler Numer of Status During Abatement (Action of Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Name of Registered Landfill													ed)		-			
Street Address Stre				(STATE U	JSE ONLY)	Storage											
Street Address Street Address Street Address 156 Maple Ave. City, State, Zip Code City, State, Zip Code Wallington, NJ 07057 Project Manager for Monitoring Firm Telephone No. Scheduled Completion Date (11) 06/18/18 Name of Registered Waste Hauler Newark, NJ Name of Registered Maste Hauler Newark, NJ Name of Registered Maste Hauler Newark, NJ Street Address 156 Maple Ave. City, State, Zip Code Wallington, NJ 07057 Street Address 156 Maple Ave. City, State, Zip Code Wallington, NJ 07057 Street Address 156 Maple Ave. City, State, Zip Code Wallington, NJ 07057 Scope of Work (Check All That Appty) Street Address 156 Maple Ave. City, State, Zip Code Wallington, NJ 07057 Scope of Work (Check All That Appty) Street Address 156 Maple Ave. City, State, Zip Code Wallington, NJ 07057 Full Containment with Negative Pressure Mini-Endosure Normally Used Solely by Maintenancy Custodial Staff? (12) Yes No N/A Description of Asbestos-Containing Material (ACM) (i.e. thermal systems insulation, Specify Signature Name of Registered Landfill GCSL Name of Registered Landfill GCSL City, State Disposal Date Of Waste Disposal Date Of N/8/18 Pen Argyl, PA Completed by Title Signature Date	7 1 7 7	Hired by Building	Owner (8)		ASCM	1 No.					actor (9)						
156 Maple Ave.	1150000000						(1)-11				<u> </u>			100		-		
Project Manager for Monitoring Firm	Street Address							CATCOLINE TO STATE										
Telephone No. Telephone No. Scheduled Completion Date (11) Scheduled Completion Date (11) O6/16/18 O6/16/18 O6/16/18 O6/16/18 O6/16/18 O6/16/18 O6/16/18 O6/16/18 Occupancy Status During Abatement (Check Only One) Street Address 156 Maple Ave. Other Obscribe: Office Obscribe: Offic	City, State, Zip Code							T 500 10 10 10 10 10 10 10 10 10 10 10 10 1										
Start Date (10)	Project Manager for Moni	itorina Firm		Т	elenhor	ne No						icense No).			_		
D6/16/18	Project Manager for Morn	toring r irm			оюрно	10 110.												
Occupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours	(3 S				pletion (Date (11)												
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe: Scope of Work (Check All That Apply) Sa sf or ≥3 If ≥160 sf or ≥260 If Renovation Demolition Sa sf or ≥3 If ≥160 sf or ≥260 If Sa so to ≥3 If ≥160 sf or ≥260 If Sa so to ≥3 If ≥160 sf or ≥260 If Sa so to ≥3 If ≥160 sf or ≥260 If Sa so to ≥3 If ≥160 sf or ≥260 If Sa so to ≥3 If ≥160 sf or ≥260 If Sa so to ≥3 If ≥160 sf or ≥260 If Sa so to ≥3 If ≥160 sf or ≥260 If Sa so to ≥3 If ≥160 sf or ≥260 If Sa so to ≥3 If ≥160 sf or ≥260 If Sa so to ≥3 If ≥160 sf or ≥260 If Sa so to ≥3 If ≥160 sf or ≥260 If Sa so to ≥3 If ≥160 sf or ≥260 If Sa so to ≥3 If ≥170 st observed (*) and Non-Friable Procedure Non-Exempted		Abstament (Char	- Average Control					311,210 25,000 537										
Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Wallington, NJ 07057 City State, Zip Code			75 IV		ant													
Scope of Work (Check All That Apply) Scope of Work (Check All That Apply) 23 sf or 23 lf	Abatement Performe				Sint.						. 230							
Salid or ≥3 if	A 24 (1) (1) (1) (2) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4						_	Wall	ington	, NJ 0705	7							
≥160 sf or ≥260 lf		I That Apply)	Пъ		ion			Г	Full Containment with Negative Pressure									
Substitution of Asbestos-Containing Material (ACM) Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A N/A Discription of other miscellaneous Normally Used Solely by Maintenance/Custodial Staff? (12) Yes No N/A N/A N							.70	Mini-Enclosure										
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A Name of Registered Waste Hauler Newark Carting Inc. Name of Registered Waste Hauler Newark Carting Inc. Name of Registered Waste Hauler Newark Carting Inc. Name of Registered Waste Hauler Newark, NJ Completed by Title Newark Carting Inc. Is Location of Normally Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Amount (Specify SF or LF) Republic In Registered (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) Amount (Specify SF or LF) Republic In Registered (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) For LF Republic In Registered (ACM) (Specify SF or LF) Specify SF or LF) (Specify SF or LF) (Specify SF or LF) (Specify S	Control Control							Cidyebag i locedare						cedur	е			
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes No N/A Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Name of Registered Waste Hauler Newark Carting Inc. Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A ** pipe insulation ** Pipe ins			100.000															
Maintenance/ Custodial Staff? (12) Wes No N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A		1977.0				Ashasi				(ACM)	Am	nunt		, 				
Name of Registered Waste Hauler Newark Carting Inc. Name of Registered Waste Hauler Newark, NJ Completed by Title No N/A pipe insulation Cubic Yards of Waste 2 Cubic Yards of Waste 2 City, State Disposal Date O6/18/18 Pen Argyl, PA Date	TO BE ABA	ATED					thermal	system	s insulat		(Spe	ecify	Rer	Re	nca	End		
Name of Registered Waste Hauler Newark Carting Inc. Name of Registered Waste Hauler Newark, NJ Completed by Title No N/A pipe insulation Cubic Yards of Waste 2 Cubic Yards of Waste 2 City, State Disposal Date O6/18/18 Pen Argyl, PA Date	0232233	ty	((12)							01 0		nova	pair	sula	osure		
Name of Registered Waste Hauler Newark Carting Inc. City, State Newark, NJ Completed by Title Disposal Date Dots Do			Yes	No	N/A								1		te	Ψ		
Newark Carting Inc. Hauler ID No. 05409 Of Waste 2 GCSL	baseme	ent			*		pipe	insula	tion		60	lf.	*					
Newark Carting Inc. Hauler ID No. 05409 Of Waste 2 GCSL																		
Newark Carting Inc. Hauler ID No. 05409 Of Waste 2 GCSL																		
Newark Carting Inc. Hauler ID No. 05409 Of Waste 2 GCSL					- - 													
Newark Carting Inc. O5409 2 GCSL City, State Newark, NJ Completed by Title O5409 2 GCSL City, State City, State Pen Argyl, PA Date	6273	te Hauler		1,500,00			\$1700 PARKET				egistere	d Landfill						
Newark, NJ Completed by Title O6/18/18 Pen Argyl, PA Date	Newark Carting Inc.			2			39.34.000.00.10											
Completed by Title Signature Date	18.5						0.000											
		6.	Title				- Sec. 1805	estimative system	3	/	J1, 1 A		te					
			Presid	ent				1		NAV		06	5/06/	18				

PAID

C+6.11(5)

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (2) TO THE STATE OF THE ST

			(Pursu	ant to NJAC 8:60 a	and 12:120)												
Date of Notification	n (1)		Name	of Buildin	ng Owner/Operator (2)	5100			0,1	-11	H	1	3				
06/11/18			Dan	nian Fil	lardo			Sept.	1 1 7 2019			and a grant					
Agencies Notified	Type Notification		Street	Address		-	1			1	1		-				
□ EPA										- Alle		and					
□ DEP	☐ Amended			tate, Zip (1	ASBES	TOS CONTROL	2							
⊠ DOL	Amendment #				08809		1	· · · · · · · · · · · · · · · · · · ·	ICENSING	CR							
⊠ DOH	Emergency (including			of Contac				Telephone Numb	oer	Mantanana.	Partie and						
□ DOH	justification) Cancelation		Dan	nian Fil	ardo												
DCA DCA	La Cancelation			F	ACILITY INFORMAT	CION							_				
Name of Facility Wi	nere Abatement is Taking Place (3)				ACIEITI IN ORMAI	Type of Facility (4)											
Residence								21									
Street Address						School (K-12) Subchapter 8 (Other than K-12)											
						,											
					The Market Control of the Control of	Other (i.e. private & Commercial buildings, homes, etc.)											
City (5)	00000					Squa	are Feet	# of Floors Bldg. Age									
Highbridge, NJ	08829					1,0		2	90+								
County (6)					Code (7)	Curr	ent Use (Prior if b	eing demolished)									
Hunterdon				STATE	USE ONLY)	Home											
Name of Monitoring	Firm Hired by Building Owner (8)				ASCM No.	Name of Abatement Contractor (9)											
						Uni	icorn Contrac	ting Corp.									
Street Address						Stree	et Address										
		-			32 Willow Way												
City, State, Zip Code						City,	State, Zip Code			-							
						Wo	odland Park,	NJ 07424									
Project Manager fo	Monitoring Firm			Telepho	one No.	Telep	phone No.		License No.								
				1		973	-333-9176		01331								
Start Date (10)			Schedu	led Compl	letion Date (11)	Name	e of OSHA Monito	r				-					
06/23/18			06/23	3/18		Env	irovision Con	sultants, Inc.									
	ring Abatement (Check Only One)					Stree	t Address										
☐ Facility CI	osed/Vacated During Entire Pe	riod of Ab	atemer	nt		20-2	21 Wagaraw I	Rd., Bldg. 35-E									
	nt Performed Outside of Norma	I Facility	Hours			City, State, Zip Code											
☑ Other - De						Fair Lawn, NJ 07410											
Scope of Work (Chec	k All That Apply)																
≥3 sf or ≥3			X	Renova	ation	☐ Full Containment with Negative Pressure											
≥160 sf or	≥260 If			Demol	ition	×	Mini-Enclosu	ure									
						□ Non-Exempted (*) and Non-Friable Procedure											
			Is Locatio							F		ment	duna				
Ashesto	Location of s-Containing Material (ACM)	U	Normalls sed Solely		Ashusta		cription of	C4.41		1	Ty	oe					
	TO BE ABATED	1.0	laintenan				aining Material (At systems insulation		Amount (Specity								
	In Facility	Cu	stodial St	aff?	0.5383350		cing, VAT, or	,	SF or LF)	22	- 1	Enca					
	(13)	-	(12)	Ι		ther m	niscellaneous)			Removal	Repair	Enclosure	•				
		Yes	No X	N/A						val	air	ate					
	Basement		Asbestos c	ontai	ining Pipe Ins	ulation	120 LF	X									
								-	1								
		- Augusta															
Provide the company of the company o					4500-2010 M		Yards of Waste		Name of Regustered								
Jnicorn Contracting Corp. 0035						3			Fairless Hills La	ıdfill							
Noodland Bark Now Jarsey					1		al Date	1	City, State								
Noodland Park, New Jersey						TBD	Signature	1	Morrisville, PA	_							
ompleted by Dimo Golcev Title General Manager							Signature	4 . 17	//	Date		_					
TITIO GOICEV		al ivian	ager				1/11/		06/1	1/1	8						

Print Form

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

	٨		CATION	ate of New I OF ASBE to NJAC 8	STOS	ABATE	V.O	DE	CE		y I		-	The second secon	
Date of Notification (1) 6/12/18	77.50			f Building (ottenber		Operator	(2)	200 A	JUN 1	8 20)18	The section of the se	IJ		
Agencies Notified Type Notification			Street A	ddress								Kapana			
☐ EPA ☒ Initial								ASI	BESTOS C			8			
DEP Amended Amendment #				ite, Zip Co rood, NJ		1			LICEN	SING		erture pro re	м.н.		
Emergency (in justification) DCA Emergency (in justification) Cancellation	cluding			f Contact Oorfman					Telephone	Num	ber				
			FACI	LITY INFO	RMAT	ION			1						
Name of Facility Where Abatement is Taking	Place (3)					Туре	of Facility (4)							
Street Address					-			school (K-12) Subchapter 8 Other (i.e. pri	(Other than			lings,	home	es,	
City (5) Lakewood								tc.) e Feet	# of Floors	,	Bldg. Age				
County (6)		10	County (Code (7)		Current Use (Prior if being der					(d)			_	
OCEAN				USE ONLY)			home	100	ii being den	10115116	u)				
Name of Monitoring Firm Hired by Building On	wner (8)		ASCN	/I No.				ement Contr		3					
Street Address						Street Address 6 WHITE DOVE COURT									
City, State, Zip Code					0 0000000000000000000000000000000000000	state, Zi	o Code DD, NJ 08	701							
Project Manager for Monitoring Firm		Telepho	ne No.		Teleph	none No),		se No						
	Schedule		pletion	Date (11)		100000000000000000000000000000000000000		A Monitor PROFES	SIONALS						
Occupancy Status During Abatement (Check	Only Or	e)				Street	Addres	s							
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma	eriod of A	Abatem Hours	ent			City, S	state, Zi								
Other – Describe:						LAKEWOOD, NJ 08701									
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	enovat emoliti				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Proce									
	lo	Location					1 1401	i-Exempled	() and Non-	FIIable			ement		
Location of	1	Normall	у		De	escription	of					Ту	ре		
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Ma	d Solel intenan odial S (12)	ice/		tos Cor therma surfa	ntaining Nal systemacing, VA	Material s insula T, or		Amount (Specify SF or LF		Removal	Repair	Encapsulate	Enclosure	
	Yes	No	N/A								1250		te	10	
EXTERIOR						Siding			2500SF		х				
Name of Registered Waste Hauler NEWARK CARTING		H	JDEP W auler ID 1509	10.000	of W	c Yards aste		Name of R	egistered La	ndfill					
City, State NEWARK, NJ	41		v=3545/35/.		Dispo	osal Date /18		City, State BETHLE	HEM PA	-					
Completed by JOSEPH PERLSTEIN	Title OWN	IER				Signature	Э			Dat	е				



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

Clock 17726

Date of Notification (1) 6/11/18		Name of Building Owner/Operator (2) Jeydel Estate													
Agencies Notified X		- V	Nestfie	dress e, Zip Code eld, NJ Contact Gleason	9			The second of the common step. The second of the common second of the c		Decorate September	JN Number	1 8	20	18	Committee description of the committee o
Name of Facility Where Abatement is Taking home Street Address	Place (3)		CONTRACTOR OF	ITY INFOR	RMATIO		Sch Sub	ool (K-12) chapter 8 (er (i.e. privi	(Other		LICE -12)	ENS	ING	-	36944×1-
City (5) Westfield County (6)			County C	ode (7)			Square F 2000		# of F		lisher	68	dg. Aç	je	
Union Name of Monitoring Firm Hired by Building O	wner (8)			SE ONLY)			Name of Abatement Contractor (9)								
Street Address						ABS Environmental Services, LLC Street Address PO Box 483, 4 E Gate Drive									
City, State, Zip Code					Glen		Code IJ 07418								
Project Manager for Monitoring Firm Start Date (10)		elephor	Date (11)		973-7	one No. 764-227 of OSHA	E		License 703	e No.					
6/20/18 Occupancy Status During Abatement (Check	7/1/18 Only One)				Street	Address								
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe:	eriod of At al Facility I	Hours	ent		_	City, S	tate, Zip C	Code							
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Renovation Demolition				×	Mini-E Glove	ontainment inclosure bag Proced ixempted (1	dure						
	7,000,000	ocatio	0.000		Day	scription	a f						Abate Ty	ment oe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Mair	Solel tenan dial S (12)	y by ce/	(i.e. t	os Cont hermal surfa	aining M	taterial (A s insulatio T, or		(Sp	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
basement					pipe	insula	tion		14	5 LF		х			
Name of Registered Waste Hauler		99.00	JDEP W	200000000	Cubic of Wa	Yards	1	Name of Re	egister	ed Lan	dfill				
Freehold Cartage	auler ID 7787	IVO.	TBD			Western	Berk	s Lan	dfill						
City, State Freehold, NJ			Dispo:	sal Date	- C - 20	City, State Birdsbore	o, PA								
Completed by A. Scott Higgins				Signature		1			Date 6/1	∍ 1/18	3				