**NOTIFICATION OF ASBESTOS ABATEMENT**
(Pursuant to NJAC 8:60 and 12:4-120)

**State of New Jersey**

**Date of Notification:** 6/18/12

**Name of Building Owner/Operator:** 1600 OLDEN LLC

**Street Address:** 1600 N. OLDEN AVENUE

**City:** EWING

**County:** MERCER

**Type of Facility:**
- □ School (K-12)
- □ Subchapter B (Other than K-12)
- □ Other (i.e. private & commercial buildings, homes, etc.)

**Square Feet:** 6,000

**# of Floors:** 1

**Stg Age:** 52

**Current Use (Prior to being demolished):** STORE

**Name of Facility Where Abatement is Taking Place:** UNIT #5

**Type of Facility:**
- □ School (K-12)
- □ Subchapter B (Other than K-12)
- □ Other (i.e. private & commercial buildings, homes, etc.)

**County Code:** STATE USE ONLY

**Name of Abatement Contractor:** A. MAC Contracting Inc.

**Street Address:**

**City:**

**State:**

**Zip Code:**

**Telephone No.:** 201-262-9841

**License No.:** 00156

**Name of OSHA Monitor:** Omega Environmental Services Inc.

**Street Address:**

**City:**

**State:**

**Zip Code:**

**Scope of Work (Check All That Apply):**
- □ 23 sf or 23 sf
- □ 180 sf or 220 sf
- □ Full Containment with Negative Pressure
- □ TCLP
- □ Gloves Procedure
- □ Non-Exempt (*) and Non-Exempt Procedure

**Location of Asbestos-Containing Material (ACM) TO BE ABATED**

**Main Floor**

- **Location:** Pipe insulation
- **Cubic Yards of Waste:** 2.40

**Name of Registered Waste Hauler:**

**Name of Registered Landfill:**

**Cubic Yards of Waste:** 2

**Description of Asbestos Containing Material (ACM):** (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)

- **Amount:** 450 sf

**Date of Disposal:** 6/16/12

**Signature:** 

**Title:** President

**Completed By:**

**R. McDonald**

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*Do not use this form for asbestos removal exempted activities*
**State of New Jersey**

**NOTIFICATION OF ASBESTOS ABATEMENT**
(Pursuant to NJAC 8:60 and 12:120)

**CHECK #: 7924**

**Date of Notification**: 6-16-12

**Name of Building Owner/Operator**: ALBERT HONG

**Agency Notified**: DOL

**Type Notification**: Initial

**Address**: 470 BERGEN BOULEVARD

**City, State, Zip Code**: PAULSADIES PARK, NJ 07650

**Name of Contact**: ALBERT HONG

**Name of Facility Where Abatement is Taking Place**: PTCL MC

**Street Address**: 470 BERGEN BOULEVARD

**City**: PAULSADIES PARK

**County**: BERGEN

**Current Use**: Residential

**Square Feet**: 1450

**# of Floors**: 1

**Bldg Age**: 54

**Name of Monitoring Firm Hired by Building Owner**: ASCM No.

**Name of Abatement Contractor**: A. MAC Contracting Inc

**Street Address**: 105 Lowell Road

**City, State, Zip Code**: Glen Rock, NJ 07452

**Telephone No.**: 201-262-5841

**License No.**: 00155

**Start Date**: 6-13-12

**Scheduled Completion Date**: 6-13-12

**Occupancy Status During Abatement**
- [ ] Facility Closed/Vacated During Entire Period
- [ ] Abatement Performed Outside of Normal Facility Hours
- [ ] Non-Exempted (*) and Non-Friable

**Scope of Work**
- [ ] Renovation
- [x] Demolition
- [ ] Full Containment with Negative Pressure
- [ ] Mini-Enclosure
- [ ] Glovebag Procedure
- [ ] Non-Exempted (*) and Non-Friable Procedure

**Location of Asbestos-Containing Material (ACM)**

<table>
<thead>
<tr>
<th>Location</th>
<th>Is Location Normally Used Solely by Maintenance/Custodial Staff?</th>
<th>Description of Asbestos-Containing Material (ACM)</th>
<th>Amount (Specify SF or LF)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basement</td>
<td>X</td>
<td>Pipe Insulation</td>
<td>235 LF</td>
</tr>
<tr>
<td>Basement</td>
<td>X</td>
<td>Floor Tile</td>
<td>1503 SF</td>
</tr>
</tbody>
</table>

**Name of Registered Waste Hauler**: Rovic Transport

**NJDEP Waste Hauler ID No.**: 20785

**Cubic Yards of Waste**: 2

**Name of Registered Landfill**: IESI PA Bethlehem Landfill Corp

**City, State, Zip Code**: Bethlehem, PA 18015

**Disposal Date**: 5-23-12

**Completed by**: R. McDonald

**Title**: President

**Signature**: [Signature]

**Date**: [Date]

*Do not use this form for asbestos licensure exempted activities.*
Date of Notification: 6/18/12

Name of Building Owner/Operator: JOSEPH CIURCIU

Address: 60 SPENCER PLACE

City, State, Zip Code: GARFIELD, NJ 07026

Type of Facility: Other (i.e., commercial buildings, homes, etc.)

Square Feet: 6000

# of Floors: 3

Bldg. Age: 58

Name of Facility Where Abatement is Taking Place: CIURCIU

County Code (STATE USE ONLY): BERGEN

ASCM No.: Name of Abatement Contractor: A. MAC Contracting Inc

Street Address: 105 Lowell Road

City, State, Zip Code: Glen Rock, NJ 07452

License No.: 00156

Name of OSHA Monitor: Omega Environmental Services Inc.

Street Address: 280 Huyer Street

City, State, Zip Code: Hackensack, NJ 07606

Scope of Work: Full Containment with Negative Pressure, Mini-Enclosure, Glovebag Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED

<table>
<thead>
<tr>
<th>Location</th>
<th>Is Location Normally Used Solely by Maintenance/Custodial Staff?</th>
<th>Description of Asbestos-Containing Material (ACM)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basement</td>
<td>No</td>
<td>Pipe Insulation</td>
<td>200 LF</td>
<td>Removal</td>
</tr>
<tr>
<td>Basement</td>
<td>No</td>
<td>Tank Insulation</td>
<td>172 SF</td>
<td>Reinforce</td>
</tr>
</tbody>
</table>

Name of Registered Waste Hauler: Rovic Transport

City, State, Zip Code: Riverdale, NJ 07457

Disposal Date: 6/18/12

Signature: [Redacted]

Title: President

* Do not use this form for asbestos licensure exempted activities.
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)

CHECK#21991

Date of Notification (1) 6/18/2012

Agencies Notified
☑ EPA
☑ DEP
☑ DOL
☑ DOH
☐ DCA

Type Notification
☐ Initial
☐ Amended Amendment #___
☐ Emergency (including justification)
☐ Cancellation

Name of Building Owner/Operator (2) PRIVATE RESIDENCE

Street Address
185 CEDAR STREET

City, State, Zip Code
RIDGEFIELD PARK, NJ 07660

Name of Facility Where Abatement is Taking Place (3)
PRIVATE RESIDENCE

Name of Monitoring Firm Hired by Building Owner (8)
AMERITECH SERVICES

ASCM No.

Name of Abatement Contractor (9)
CREAM RIDGE ENVIRONMENTAL INC.

Street Address
15 BLACK FOREST ROAD

City, State, Zip Code
HAMILTON, NJ 08691

County
BERGEN

County Code (7) (STATE USE ONLY)

Current Use (Prior if being demolished)

Square Feet # of Floors Bldg. Age

Project Manager for Monitoring Firm
ROD MORRIS

Telephone No. 732-664-7788

License No. 00676

Start Date (10) 6/20/2012

Scheduled Completion Date (11) 6/20/2012

Occupancy Status During Abatement
☑ Facility Closed/Vacated During Entire Period of Abatement
☐ Abatement Performed Outside of Normal Facility Hours

Scope of Work (Check all that apply)
☐ RENOVATION
☐ Demolition

Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)

Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)
Yes No N/A

Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)

Amount (Specify SF or LF)

Abatement Type
Removal Repair Encapsulate Eradicate

BASEMENT ☒ DUCT WRAP 4 SQ. FT. X
BASEMENT ☒ PIPE INSULATION 10 SQ. FT. X
BASEMENT ☒ VAT 600 SQ. FT. X

Name of Registered Waste Hauler
NJDEP Waste Hauler ID No.
17304

Cubic Yards of Waste
2 YDS

Name of Registered Landfill
GROWS

City, State
BELLMAWAR, NJ 08031

Disposal Date 6/21/2012

MORRISVILLE, PA

Completed By DAVID D’ANDREA PRESIDENT

Title Signature Date 6/18/2012

ASB-41

* Do not use this form for asbestos licensure exempted activities
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)  6/15/12

Agencies Notified
- EPA
- DEP
- DOL
- DOH
- DCA

Type Notification
- Initial
- Amended
- Amendment #
- Emergency (including justification)
- Cancellation

Name of Building Owner/Operator (2)
North Hanover Board of Education
Street Address
46 Schoolhouse Road
City, State, Zip Code
Wrightstown, NJ 08562
Name of Contact
Jayne Glover
Telephone Number

FACILITY INFORMATION
Name of Facility Where Abatement is Taking Place (3)
Atlantis Elementary School
Street Address
3 School Road
City (5)
McGuire AFB, NJ
County (6)
Burlington
County Code (7) (STATE USE ONLY)

Type of Facility (4)
- School (K-12)
- Subchapter 8 (Other than K-12)
- Other (i.e., private & commercial buildings, homes, etc.)

Square Feet
# of Floors
Bldg. Age

Current Use (Prior to its being demolished)
School

Name of Abatement Contractor (9)
Stevens Environmental Services, Inc.
Name of Monitoring Firm Hired by Building Owner (8)
TTI Environmental
ASCM No.

Street Address
1253 North Church Street
City, State, Zip Code
Mooresown, NJ 08057

Project Manager for Monitoring Firm
Michael Stockin
Telephone No.
(856) 840-8800

Start Date (10)
7/9/12
Scheduled Completion Date (11)
7/9/12

Occupyony Status During Abatement (Check only one)
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours
- Other - Describe: 7 AM - 3:30PM

Scope of Work (Check all that apply)
- More than 3 sq ft or more than 3 if
- 160 sq ft or more than 260 if
- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED
IN Facility
(13)

Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)
- Yes
- No
- N/A

Description of Asbestos Containing Material (ACM)
(i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

Amount (Specify SF or LF)

Abatement Type

Name of Registered Waste Hauler
Stevens Environmental Services Inc.
NJDEP Walet Hauler ID No.
18292
Cubic Yards of Waste
1/2 CU
Name of Registered Landfill
T.R.R.F., Inc.
City, State
Allentown, NJ
Disposal Date
7/10/12

Completed By
Mahlon E. Stevens
Title
Project Manager
Signature
Date
6/15/12

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

<table>
<thead>
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<th>Date of Notification (1)</th>
<th>6/15/12</th>
</tr>
</thead>
</table>

Name of Building Owner/Operator (2)  
North Hanover Board of Education

Name of Facility Where Abatement is Taking Place (3)  
Discovery Elementary School

Street Address  
46 Schoolhouse Road

City, State, Zip Code  
Wrightstown, NJ 08562

Name of Contact  
Jayne Glover

FACILITY INFORMATION

Type of Facility (4)  
School (K-12)  
False

Square Foot  
0

Current Use (Prior if being demolished)  
School

Name of Monitoring Firm Hired by Building Owner (8)  
TTI Environmental

ASCM No.  
NAME ONLY

Name of Abatement Contractor (9)  
Stevens Environmental Services, Inc.

Street Address  
PO Box 322

City, State, Zip Code  
Allentown, NJ 08501

License No.  
00493

Name of OSHA Monitor  
MECS

Street Address  
P.O. Box 341

City, State, Zip Code  
Crosswicks, NJ 08515

Project Manager for Monitoring Firm  
Michael Stocku

Telephone No.  
(856) 840-8800

Start Date (10)  
7/9/12

Scheduled Completion Date (11)  
7/9/12

Occupancy Status During Abatement (Check only one)  
Facility Closed/Vacated During Entire Period of Abatement  
False

Abatement Performed Outside of Normal Facility Hours  
False

Other - Describe:  
7 AM - 3:30PM

Scope of Work (Check all that apply)  
Renovation  
False

Demolition  
False

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)  
None

Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)  
N/A

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)  
None

Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)  
N/A

Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)  
Pipe insulation

Amount (Specify SF or LF)  
5 LF

Abatement Type  
Enclosure

Name of Registered Waste Hauler  
Stevens Environmental Services Inc.

NJDEP Waste Hauler ID No.  
18292

Cubic Yards of Waste  
1/2 CU

Name of Registered Landfill  
T.R.R.F., Inc.

City, State  
Allentown, NJ

Disposal Date  
7/10/2012

City, State  
Tullytown, PA

Completed By  
Mahlon E. Stevens

Title  
Project Manager

Signature  

Date  
6/15/12

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