Date of Notification (1)	18 / 1	13			Name o	of Building (Owner/ealthc	Operator (2	2) erties	80/3 111.1.	Job # 1306-17	774: CI	ık.	#32	02	
Agencies Notified	Type Notificatio ⊠ Initial		<		Street /	Address Pension I	Road	0-10-20	್ವ	- 000 2	Job # 1306-17		- 82			
⊠ DOLWD	☐ Amended			-	City St	ate, Zip Co	nde			\$ 172 V		-				
☑ DHSS	Amendment	#				lishtown,		726		- LICE	Bullion					
☐ DCA	☐ Emergency		ding	-	7.55	of Contact		120			Telephone Nun	nber	-	-		\neg
(NJAC 5:23-8)	justification)					Leslie Fis				1						- 1
	☐ Cancellation	1											-			\dashv
					FAC	ILITY INF	FORM/	ATION			0		d'a		-	_
Name of Facility Where	Abatement is Tak	king P	lace (3)						of Facility (4						- 1
Gloucester Manor	Nursing Home	•								chool (K-12)	(Other than K-1	2)				
Street Address									⊠ o	ther (i.e., pri	vate and comm	ercial bu	ildi	ngs,		
685 Salina Drive										omes, etc.)						
City (5)									Squa	are Feet	# of Floors		100	Age		1
Sewell										,564 SF	1		40	+-		
County (6)					Coun	ty Code (7)	(STATE	USE ONLY)	Curre	ent Use (Pric	or if being demo	lished)				- 1
Gloucester									Νι	ursing Hon	ne	we (170 o 1 - 100 o				
Name of Monitoring Firm	n Hired by Buildin	ng Ow	ner (8)	ASCM I	No.	Name	of Abateme	ent Co	ntractor (9)						
Criterion Laborato		3	•	·			Ash	estos an	d Mo	Id Services	s, Corp.					
Street Address					100000		Street	Address								
3370 Progress Dri	ve Suite.I						385	9 Sylon E	Boule	vard		28				
	ve, oute o			7.7				State, Zip C								
City, State, Zip Code	20						12500	nesport,		3036						
Bensalem, PA 190			-	Tolo	phone	No	277332	hone No.			License No.					
Project Manager for Mo	nitoring Firm				5-244			-702-0400	0		00862					
Mike Panapresso		L - J - I	- 1 0-	500				of OSHA		r						\neg
Start Date (10)					tion Da			SL Analy								
7 / 2							de la companya de la						-			
Occupancy Status Durin					5000			Address		NA NI4h-						1
	ited During Entire	Perio	od of A	Abate	ment		123.53	U.S. Rou		North			_			-
☐ Abatement Performe Time of Abatement:	ed Outside of Nor AM-	mai F PM/	acility	PM-	s - Des	AM		State, Zip C I naminso		08077						
							Cin	inaminso	11, 145	00077			_	_	-	
Scope of Work (Check	all that apply)							☐ Full Cor	ntainm	ent with Neg	ative Pressure					
☐ >3 sf or ≥3 lf			⊠ Rei					Mini-En	closur	e						
≥160 sf or ≥260 lf] Dei	moliti	on			☐ Gloveba	ag Pro	cedure	n-Friable Proce	dure				
			1-		da.	1		- Non-Ex	Ciripto	a () and He			hat	eme	nt Ty	/pe
				Loca Iorma			ŕ	Description	of					_		-
Location Asbestos-Containing			Use	d Sol	ely by	Asbe	estos Co	ontaining M	laterial	I (ACM)	Amount	êm		Repair	S	ncl
TO BE A					ance/ Staff?	(i.e		nal systems		ation,	(Specify SF or LF)	Kemova		₩	ps(Enclosure
IN Fac			Cusi	(12)				rfacing, VA			31 01 11)	1-			Encapsulate	o o
(13))		Yes	No	N/A		0,110		,							
Boiler Room			\boxtimes	П	$\dagger \Box$	Tank In	nsulati	on			130 SF	×	1 1			
Boiler Room		_			╁	Elbows	14. 15				22 each	Þ	1 1			
		-		F	+=	1		sulation			100 SF	Ø	1			
Boiler Room		_		_	-	Diecon	iiig iii	Juliacion	105				, +	П		П
						10/	Cubic	Yards of	N	ame of Regis	stered Landfill		-		_	
Name of Registered W				102	NJDEP Hauler l		Wast		100000	GROWS L						
Horizon Disposal	, Inc.				2261		5									
City, State						505 m	A secondar	osal Date		ity, State	D4 4000					
Trenton, NJ							7/1	10/13		Morrisville	, PA 19067					
Completed By (Print or	Type)	Title				14		Signature,	.1			Date	1 /	2 1.	1	
Kimberly A. Trum		Of	fice	Coor	dinato	or		XX	11			11	-11	7-1	7	
**************************************	PART STORY TO CO.							1	_/\				-	-	_	

ASB-41 MAY 11 * Do not use this form for asbestos licensure exempted activities.

Date of Notification (1)	_				Safety and some or see	Owner/Operator (2						
	7 /	13		Woo	odstown	-Pilesgrove Reg		ob # 1306-177	2 Chk.	#320)1	
	Type Notification	on			Address	4	Cha.	00 # 1306-177				
	☐ Initial ☐ Amended			4	East Av	1010000	169720 T	00				
⊠ DHSS	Amendment Amendment	t #01			tate, Zip C		14/61	A.				
	☐ Emergency	(including	ĺ	100000	more continued transfer	, NJ 08098	<u> </u>	·				
(NJAC 5:23-8)	justification)				of Contact			Telephone Nu	mber			
	☐ Cancellation	n				Hickman						
N		i Di	(0)	FAC	CILITY IN	FORMATION	Tues of Facility	/A)				
Name of Facility Where Ab		king Place	(3)				Type of Facility School (K-12)	F-12-51				
Woodstown High Sc Street Address	31001		-				☐ Subchapter 8	(Other than K-				
140 East Avenue							Other (i.e., p homes, etc.)	rivate and comm	nercial bu	ilding	s,	
City (5)							Square Feet	# of Floors	Blo	dg. Ag	je	-
Woodstown							50,000 +	3		10+		
County (6)				Coun	ty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demo	olished)			
Salem							High Schoo	I				
Name of Monitoring Firm H	Hired by Buildin	ng Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)	h		200 Miles		
Horizon Environmen	ntal			0007	'3	Asbestos and	d Mold Service	es, Corp.				
Street Address		7027-2				Street Address						
P.O. Box 816						3859 Sylon B	oulevard					
City, State, Zip Code						City, State, Zip Co						
Thorofare, NJ 08080						Hainesport, N	1J 08036					
Project Manager for Monito	oring Firm		0.000	phone		Telephone No.		License No.				
Steve Flanigan				6-848		609-702-0400		00862				
Start Date (10) 6 / 19 /	31	heduled C				Name of OSHA M EMSL Analyti						
		The second secon	20-20-00-0			<u> </u>	icai, iiic.			_		
Occupancy Status During	terme ar area 152 co			ment		Street Address 200 U.S. Rou	to 130 North					
☐ Abatement Performed					cribe	City, State, Zip Co						
Time of Abatement:						Cinnaminson						
Scope of Work (Check all	that apply)											
☐ >3 sf or >3 lf		⊠ Re	novat	on			tainment with Neg losure	gative Pressure				
⊠ ≥160 sf or ≥260 lf			molitic			☐ Glovebag	g Procedure	- Edeble Besse	1			
		1 1	1	ion		☐ Non-Exe	mpted (*) and No	n-Friable Proce		-t	ant T	
Location of	nf .	10	Loca: Norma			Description o	ıf			_	ent T	1
Asbestos-Containing M	flaterial (ACM)		d Sol			stos Containing Ma	terial (ACM)	Amount	Removal	Repair	Encapsulate	Enclosure
TO BE ABAT		VI 500000	iintena todial		(i.e	 thermal systems surfacing, VAT, 		(Specify SF or LF)	ova	¥.	lpsu	uso
(13)			(12)		-	other miscellane			-		late	O)
		Yes	No	N/A						_	_	_
Maintenance Office/A	rt Room 19		Ø		Plaster	Ceiling Material		300 SF			П	
Art Room 19 & Closet			\boxtimes		Floor T	ile & Mastic		40 SF				
Name of Registered Waste	e Hauler	1	11:59	JDEP V		Cubic Yards of	Name of Regis	stered Landfill				
Horizon Disposal, In	c.			lauler II 22612		Waste 5	GROWS L	andfill				
City, State		WELL ASSE				Disposal Date	City, State					
Trenton, NJ						6/24/13	Morrisville	, PA 19067				
Completed By (Print or Type	pe) T	Title				Stonature		-	Date			5
Kimberly A. Trumber	tti	Office	Coor	dinato	•	(Wan U			4-18	-13		
			11000			~ [1]	V					_

ASB-41 MAY 11

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

Job Number: 1211-1689 Check: #NA

Date of Notification 1/28/13					Joh	nns	Ma	nville	Owner / C	perator	(2)	74	10 m	1	7	1		
Agencies Notified EPA	Type N	otification					Addre	ess t reet				. <	1000	· ''	2.	ô.		
☐ DEP		Initial		1	City	, St	ate 8	Zip C					1/3/2	90		O		
⊠ DOL		Amended #	‡11 ON		Der	ıve	r, C	O 802	02				1.00	67	2/			
□ DOH □ DCA		Emergency Cancellation		- 1				ntact ing, S	ourcing	Mana	ger		7	Tele	phor	e N	ımbe	er
			- II - BI	,,		AC	ILIT	Y INF	ORMAT		(4)						72.00	
Name of Facility Willowship Manville- Street Address			Taking Pl	ace (3)	-				of Facilit chool (k	(-12)	an K-1	12)					
437 North Grove	Street							H NC			1.0		ial buildi	ngs, l	nome	es, e	tc.)	
		Q.							Weather		o	ors		Bldg	Age			
City (5)		Cour	- 1			U	ntil	Furtl	ner Noti	ce	_		T - 1				251-771-1	
Berlin		GLE	<u> </u>	Т					Plant			demoli	snea)					
Name of Monitoring	Firm H	ired by Buil	ding Own	er (8)		_	ASC	CM No.			ement Contra	ctor (9	9)	-				
One Source Safe	ety & H	ealth									Mold Service	ces, C	orp.					
Street Address	e Aven	ue-Suite	130							Addres Svlon	s Boulevard							
City, State & Zip Co									City, S	State & Z	Zip Code							
Exton, PA 19341	on, PA 19341										NJ 08036		License	Num	hor			-
Brian Hovendon	ect Manager for Monitoring Firm							ber		hone Nu '02-040			License		086	2		
Scheduled Start Da	_		duled Con	610- npleti)	Name	of OSH	IA Monitor							
11/19/12	During A	8/18/		lu on	٥١					Analy Addres								
Occupancy Status I Facility Clos						bat	eme	nt		laddon			111/2/2014			-		
Abatement	Perform	ned Outside	of Norma	al Ho	urs						Zip Code	74						
Describe:	unied D	union Abat							West	mont,	NJ 08108							
Scope of Work (Ch			ement													- 1		11000
				200000									nent with	Nega	ative	Pres	sure	(
≥3 sf or ≥3 l				\bowtie			vatio				Mini-En		re ocedures					
≥160 sf ≥26	OU IT			Ш	D	em	olitio	n			Non-Ex		ed and No		iable	Pro	cedu	re
L	ocation	of			Loc					scription	of	Γ	Amount		_		ent T	
	tos-Con terial (A			Non	mall olel					os-Conterial (AC			(Specify SF or LF)				Ш	
	BE ABA			Mair	iten	and	e or		(i.e., th	ermal sy	ystems	,	J. O. L.)		Ren	Re	ncap	Encl
i	n Facilit	у		Cust	odia (1:		taff?		insulation or other						Removal	Repair	Encapsulate	Enclosure
	(13)			Yes	N		N/A	1	or other	macene	aneous)				-		ite	0
"H" Roof					D	1		Tran	site Dec	k Pane	els		0 SF		\boxtimes			
"H" Roof					\triangleright	1		Roof	Field			17,4	00 SF			무		
				H	-	╬	님	-				-			뮈	H	Η	H
				H	+	╁	H	+				-		-	Ħ	H	H	H
				Ĭ	Ė	1												
Name of Registered		Hauler	,		- 10	Наι	ler I	Waste D No.	of Wast	е	Name of Reg			I				
Horizon Disposa	11						226	12	3 Disposa		GROWS La City, State	ınam					-	W
City, State Trenton, NJ									8/18		Morrisville	, PA						
Completed By (Prin	T 7.7	e)				Title			Signatu	e n				10.33	ate	14.5		7
Kim Trumbett	i				4	Adı	nin.	=	(X)	1/1/2		_		6	/18	/13		

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

Date of Notification (1)		Name of Buildin		ator (2)	20 1 2 :		`		
June 18, 2013			Anni V	olkert	20134m. 21	88_	<u>ځ</u>		
	ion Notification ded Notification	Street Address	25	nn Drive	20154y 21	^(k) 2:	50		
[x] DOL Amend	dment # ency (including	City, State, Zip (Dumor	nt, NJ 07628	4 405/6/	The	<u>/</u>		
[x] DOH justific		Name of Contact Ann	t i Volkert	1	Telephone Number	<u>-</u>	*	1700	
		ACILITY INFOR	MATION		× -				
Name of Facility Where Abatement is Taking Residence	Place (3)			Type of Facility (4	School (k-12)				
2,33,3,3				Ĺí	Subchapter 8 (oth				
Street Address 262 West 12 th Street	et			[x]	Other (i.e., privat homes, etc.)			l build	lings,
City	County (6)	County Code (7) (STATE USE ON	ILY)	Square feet 2000 sf	# of Floors	Bldg.	Age 60	5200	
Ship Bottom	Ocean		3	Current Use (Prior Reside					
Name of Monitoring Firm Hired by Building	Owner (8)	ASCM No.	Name of	Abatement Contract	or (9) lian Contracting,	Inc.			
N/A Street Address			Street Ad		nan contracting,	mo.			
Succe Address			Gir Gra		Route 9, Unit 61				
City, State, Zip Code	T. Jackson Mus	uhor.		te, Zip Ode Toms ne Number	River, New Jerse	ey 0875	55-12	71	
Project Manager for Monitoring Firm	Telephone Nur	noer	732-349	9-9932	00624				
Scheduled Start Date (10) 6/19/13	6/20/13	npletion Date (11)			S.L. Analytical		-1-1-2-2-2		
Occupancy Status During Abatement (Check [x] Facility Closed/Vacate	only one) d During Entire Period	of Abatement	Street Ad		Stelton Road				
	Outside of Normal Faci		City, Sta	te, Zip Code					
[] Other – Describe					taway, New Jerse	y 0885	4		
Scope of Work (Check all that apply)			[]	Full Containme	ent with Negative Pre	essure			
Scope of work (Carrier 17 5)			[]	Mini-Enclosure					
[] >3 sf or ≥3 lf	L J	enovation emolition	[x]	Glovebag Proc Non-Exempted	(*) and Non-Friable	Procedur	e		
[X] ≥160 sf or ≥260 lf	[X]	emondon	[.,]					Vina	
			Description	on of		Abate			
Location of	Is Location Normally used		Asbestos-Cor		Amount	R E	R E	E N	E N
Asbestos-Containing Material (ACM)	Solely by		Material (A		(Specify SF or LF)	M	P A	C A	C L
TO BE ABATED in facility	Maintenance/Custo Staff		i.e., thermal nsulation, su		Of LI')	0	I	P	0
(13)	(12)		VAT, o	or		V	R	S U	S
	ALEG NO N	J/A	other miscell	aneous)	1 2	A L		L	R
			dina		1700 sf	X		Е	E
Exterior-house & garage	X	Asbestos si	uing		1700 51	+			
			1000						
Name of Registered Waste Hauler	NJDEP Waste I		Yards of Was		istered Landfill				
Guardian Contracting, Inc. City, State	202	Disposal Date	City, St			_			
Toms River, New Jersey		6/21/13	Tully	town Pennsylva	p ia	Date			
Completed by (Print or Type) Nicholas Fernicola	Title Project Manager	Signature	chol	tel	L.	1075200000000	/2013	Sec	
	*Do not use thi	s form for asbestos li	censure exen	npted activities.					

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

Date of Notification (1) June 18, 2013			Name of Building		erator (2) Marshall 2012	. 11-	218	8		
	l Notificatio		Street Address	289 N	orth Drive	MEL TO AM	2: 31)		
[x] DOL Ame	nded Notific ndment # rgency (incli		City, State, Zip C		Edge, NJ 07661	LESKIME	[.			
	ication) ellation		Name of Contact Allen	Marshall	r	elephone Number			7	
		FAC	CILITY INFORM	ATION				0.00		
Name of Facility Where Abatement is Takin Residence	g Place (3)				Type of Facility (4)	School (k-12) Subchapter 8 (or	her har	. k-12)		
Street Address 7 West Stanton Av	venue				[x]	Other (i.e., priva homes, etc.)				ldings,
City	County (6	6)	County Code (7) (STATE USE ONL	.Y)	Square feet 1500 sf	# of Floors		g. Age (50	
LBI	Ocean	1			Current Use (Prior if)			
Name of Monitoring Firm Hired by Building N/A	Owner (8)		ASCM No.	Name of	Resider Abatement Contractor Guardia		Inc			
Street Address	37.		A STATE OF THE STA	Street Ac	ldress	oute 9, Unit 61				
City, State, Zip Code	-3041-000			City, Sta	te, Zip Code	liver, New Jers	- (755-1	271	
Project Manager for Monitoring Firm	Те	lephone Number		Telephor 732-34	e Number	License N 00624				
Scheduled Start Date (10) 6/19/13		heduled Complet 6/20/13	tion Date (11)	Name of	OSHA Monitor E.M.S.I	L. Analytical				
Occupancy Status During Abatement (Check [X] Facility Closed/Vacate [] Abatement Performed [] Other – Describe	d During Er			Street Ad	1056 St	elton Road	v 088	54		
Scope of Work (Check all that apply)	<u> </u>			[]	Full Containment		1000			
[] >3 sf or ≥3 lf [x] ≥160 sf or ≥260 lf	. []] Renova		[] [x]	Mini-Enclosure Glovebag Procedo Non-Exempted (*		Procedi	ıre		
							Abat	ement	Туре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13)	Norr So Maintena	Location mally used olely by ance/Custodial Staff (12) NO N/A	Asi (i.e ins	Description pestos-Con Material (A ., thermal sulation, sur VAT, o er miscella	taining CM) systems facing, r	Amount (Spécify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E
Exterior	2	X	Asbestos sidir	ıg		1250 sf	X			
No. of the contract of the con										
Name of Registered Waste Hauler Guardian Contracting, Inc.	NJDI	EP Waste Hauler 20223	3	ards of Waste	T.R.R.F.	red Landfill				
City, State Toms River, New Jersey		Dispos 6/21/	sal Date	City, Sta	te wn Aennsylvania	1				
Completed by (Print or Type) Nicholas Fernicola	Title Project N		Signature	Joe de la constitución de la con	- I I I I I I I I I I I I I I I I I I I	/	Date 6/18	/2013	3	

*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)

Date of Notification (1)	6/18/2013	2			Name of Buildi	ng Owner/Ope V W	erator (2) V Construction	Inc 20/3	.01~	2	188	34	
[X] EPA [] DEP [X] DOL	Ame	al Notific nded No ndment	tification #		Street Address City, State, Zip	25 Sh	effield Road e, NJ 07470	*500	^{UN} 21	A)	2. 3.	,	
[x] DOH [] DCA	justif	rgency (i ication) ellation	including		Name of Contac Son	pt .	.,	Telephone	Number-	7/2 A	-/		
				FAC	ILITY INFOR	MATION							
Name of Facility Where Aba Resid		g Place ((3)				Type of Facility [] School	(k-12) apter 8 (otl	her tha	n k12)	0,	
Street Address	Albacore Driv	/e					[x		i.e., privat	te & co	mmerc	ial buil	dings,
City		Count	ty (6)		County Code (7) (STATE USE Of		Square feet 900 sf	# of F	loors 1	Bldg	g. Age	60	
Ortley Beach		Ocea	in -		Si .		Current Use (Pr Res	ior if being de	emolished)			
The property of the second control of the se	ame of Monitoring Firm Hired by Building Owner (8) N/A treet Address						Abatement Contra	octor (9) rdian Cont	racting	Inc			
Street Address	treet Address						idress			me.			
City, State, Zip Code							te, Zip Code	9 Route 9,		0.00	755 1		
Project Manager for Monitor	roject Manager for Monitoring Firm Telephone Nu						1 on ne Number 9-9932		ew Jerse License N 00624			271	
Scheduled Start Date (10) 6/19/13			Scheduled 6/20/1		on Date (11)	_	OSHA Monitor	S.L. Anal	to se				
Occupancy Status During Ab [X] Facility [] Abaten	atement (Check y Closed/Vacate nent Performed - Describe	d Durin	e) g Entire Peri	od of Ab		Street Ad	ddress 1050 te, Zip Code	5 Stelton R ataway, Ne	oad	y 088	54	3	
Scope of Work (Check all the		- 111	[]	Renovat	tion	[] []	Full Contains Mini-Enclosu Glovebag Pro	re	gative Pres	ssure			
[x] ≥160 s	f or ≥260 lf		[x]	Demolit	ion	[x]	Non-Exempte	d (*) and No	n-Friable F	Procedu	ıre		
			Is Location	n		Descriptio	n of				ement		12
Location of Asbestos-Containing Mat TO BE ABATE in facility (13)			Normally us Solely by tenance/Cu Staff (12)		(i	Asbestos-Con Material (A .e., thermal sinsulation, sur VAT, of ther miscella	taining CM) systems rfacing, r	(Spec	ount cify SF LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E
Exterior			X		Asbestos sic	ling		800 s	f	X			
					= X								
Name of Registered Waste Ha Guardian Contr City, State		N	JDEP Wast 20	Dispose	3	Yards of Wast	T.R.R.F	gistered Land	fill				
Toms River, N				6/21/1	13		own, Pennsylva	mia					
Completed by (Print or Type) Nicholas Fernic		Title Proje	ct Manage	er	Signature	idno	14	M		Date 6/18	/2013		

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

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

Date of Notification (1)	une 17, 2013				Name of E	Building O	wner/Oper Bergen	ator (Bui	2) lders	2002/12/21	86	5		
Agencies Notified [x] EPA		ion Notificati			Street Add		28 Pea	ksail	Drive	2002-JUN 21	AM	2. S E		
[] DEP [x] DOL	Amen	dment #_ gency (inc				e, Zip Cod	e Bayvil	le, N	IJ 08721	"CEHS!				
[x] DOH [] DCA	justifi	cation) ellation			Name of (Contact Gene			Tel	ephone Number	-y			
				FACI	LITY IN	FORM	ATION							-
Name of Facility Where Ab Resi	atement is Taking dence	g Place (3)						Тур	įί	School (k-12) Subchapter 8 (oth			2.1	
Street Address	wline Avenue									Other (i.e., privat homes, etc.)			d build	ings,
City		County	(6)		County Co STATE U	ode (7) ISE ONLY	7)	8	nare feet 1200 sf	# of Floors 1	Bldg.	Age 60)	
Brick	2 SEC	Ocean	l.					Cu	rrent Use (Prior if b Residence					
Name of Monitoring Firm		Owner (8	3)	1	ASCM No).	Name of	Abat	ement Contractor (Inc.			
N/A Street Address						Street A	ddress		ute 9, Unit 61					
City, State, Zip Code					30'	City, Sta		Toms Ri	ver, New Jerse	ey 087	<u>55-12</u>	71		
Project Manager for Monit	oring Firm	Telephone				Telepho 732-34	9-99	932	License N 00624	umber				
Scheduled Start Date (10) 6/18/13			Scheduled 6/19/1		on Date (1	1)	Name of			. Analytical			-	
[] Aba	Abatement (Check lity Closed/Vacate tement Performed er – Describe	ed During	Entire Per	iod of Aba	atement ours		City, Sta		1056 Sto	elton Road way, New Jerse	ey 088	54		
Scope of Work (Check all	that apply)						[Full Containment Mini-Enclosure	with Negative Pro	essure			
[]	for≥3 lf 0 sfor≥260 lf		[] [x]	Renova Demoli			[[x]	Glovebag Procedu Non-Exempted (*		Procedu	ire		
[]		1			1						Abat	ement	Гуре	00-07210
Location Asbestos-Containing M TO BE ABA in facilit (13)	Material (ACM) TED		Is Location Is Loc	ised y		As (i.e ins	Descripti bestos-Co Material (, thermal rulation, s VAT, her misce	ntair ACM I syst urfac or	ning (I) eems cing,	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E
Exterior -			Х		Asbe	stos sidi	ng			1100 sf	X	-	-	-
					-									
		+							T.,	T and fill				
Name of Registered Wast Guardian C	e Hauler ontracting, Inc	100	NJDEP Wa	20223		Cubic Y	ards of Wa		Name of Registe T.R.R.F.	ered Landilli		<u> </u>		
City, State Toms River	, New Jersey			Dispo 6/20			City, Tully		n Pennsylvania	a	Date	e		-
Completed by (Print or T Nicholas Fe	ype)		ect Mana		Signa	V	ich	of	ded activities.	1	2000	7/13		

Date of Notification (1)				N	Name of Building	Owner/Ope	rator (2) Lurch Demolit	tion Com	astro, LLC	a	218	863	3
	June 17, 2013					Flank	Luich Demon	tion comp					-
Agencies Notified [x] EPA		ion Notificati ded Notifi			Street Address	2000 HB (25 x 25 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ain Street	£7	1	911 2:	<i>\$0</i>		_
[] DEP [x] DOL [x] DOH	Amen	dment # gency (inc			City, State, Zip Co	Avon	by the Sea, NJ	e succession and a succ	NOW!	They			
[X] DOH [] DCA	justifi	cation) Ilation		1	Name of Contact Frank	Lurch		Telepho	ne Number				
				FACII	ITY INFORM	MATION							
Name of Facility Where	Abatement is Taking esidence	Place (3)					Type of Facility] Scho	ol (k-12) hapter 8 (oth	erthan	k-12)	12	
Street Address	0 8 th Avenue						[x] Othe	r (i.e., privates, etc.)	e & con	nmerci	al build	ings,
City		County	(6)	0	County Code (7) STATE USE ON	. (Y)	Square feet 1000 sf	# 0	f Floors	Bldg.	Age 60)	
Belmar		Monm	outh	(.	STATE OSE ON		Current Use (P.	rior if being sidence	demolished)				
Name of Monitoring Fire	m Hired by Building	Owner (8)	A	SCM No.	Name of	Abatement Conti	ractor (9)	ntracting,	Inc			
Street Address	/A					Street A	ddress			mo.		-10 V - 10	
	40					City Str	188 ate, Zip Code	39 Route 9	9, Unit 61		-		
City, State, Zip Code							To:	ms River,	New Jerse		55-12	71	
Project Manager for Mo	nitoring Firm		relephone N			732-34	19-9932		00624		_		
Scheduled Start Date (10 6/18/1	.3		Scheduled C 6/19/13		n Date (11)			M.S.L. Ar	alytical				
Occupancy Status Durin	ng Abatement (Check acility Closed/Vacate	only one d During) Entire Perio	d of Aba	tement	Street A		56 Stelton	Road				
[] A	batement Performed ther – Describe	Outside o	f Normal Fa	cility Ho	urs	City, St	ate, Zip Code Pis	scataway,	New Jerse	y 088	54		
Scope of Work (Check a	all that annly)						,		Negative Pre	ssure			
Scope of Work (Check a	an mac app.))		72 (20)			[Mini-Enclos						
L 1	3 sf or ≥3 lf		r 1	Renovati Demoliti		[x	Glovebag P Non-Exemp		Non-Friable	Procedu	ire		
[] ≥	160 sf or ≥260 lf		[x]	Demont	011					1	ement	Type	
			· ·			Descripti	on of					Е	Е
Locatio	n of	1	Is Location ormally use		A	sbestos-Co	ntaining		Amount	R E	R E	N	N
Asbestos-Containing	Material (ACM)		Solely by		,	Material ((S	specify SF or LF)	M	P A	C A	C
TO BE AF		Maint	enance/Cus Staff	stodial		sulation, s			Of Ell)	0	I	P	0
in faci			(12)			VAT,	or			V	R	S	S
(,		100		c	ther miscel	laneous)	1		A L		L	R
		YES	NO	N/A								Е	E
Exterior :			X		Asbestos sic	ling		80	00 sf	X			
Name of Registered Wa	aste Hauler Contracting, Inc.		JDEP Waste	Hauler	ID No. Cubic 2	Yards of Wa	T.R.R	Registered I F.	andfill				
City, State				Dispos 6/20/1	al Date	City, S	State /town, Pennsy	lvaniæ				103	
Completed by (Print or	er, New Jersey Type)	Title			Signature	1/20	07	1		Date 6/1	7/201	3	
Nicholas F	Fernicola		ct Manage		for ashartan is	CONSULTO ON	mpted activities			0/1	,,201		
7. TH		*1	o not use t	nıs Jorm	jor aspestos ti	ensure exe	impieu ucitvities						

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

S. .

Date of Notification (1)	June 17, 2013 ncies Notified Type of Notification BPA Initial Notification DEP Initial Notification Amended Notification Amendment #						Owner/Ope			1.7	۸.	~/	11	
	June 17, 2013						Una O	'Boyle		2013 JUN 21	21	8 4		
Agencies Notified [X] EPA [] DEP	[] Initial	Notifica ded Noti	fication		Street Ac	ldress te, Zip Coo	72.000.1 1-00.001	ergen Avenu	e 🧃	2013 JUN 21	AM	2:5) —	
[x] DOL	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	dment #_ gency (in	200 CO. CO. C.					City, NJ 073	04	LICENS	INT	1.37		
[x] DOH [] DCA	justific	cation)			Name of	Contact Una O	'Boyle		Те	lephone Number	7.7 G			
		- 101		FAC	ILITY I	NFORM	ATION							
Name of Facility Where A	abatement is Taking sidence	Place (3	3)					Type of Facil	ity (4)]]	School (k-12) Subchapter 8 (oth	her thar	ı k12)		
Street Address	2 Eisenhower A	venue						[3	x j	Other (i.e., privat homes, etc.)	e & co	mmerc	al build	lings,
City		County	<i>(</i> (6)		County C (STATE)	ode (7) USE ONLY	r)	Square feet 1200 s	f	# of Floors	Bldg	, Age 6	0	
Ortley Beac	h	Ocean	n	-					Prior if esidence	being demolished ce)			
Name of Monitoring Firm		Owner (8)		ASCM N	0.	Name of	Abatement Cor G		(9) n Contracting,	Inc.			
Street Address							Street Ac		889 Ro	oute 9, Unit 61				
City, State, Zip Code	y, State, Zip Code						City, Sta	te, Zip Code		iver, New Jers	ey 081	755-12	271	
Project Manager for Mon	ject Manager for Monitoring Firm Telephone Nu						Telephor 732-34	ne Number		License N 00624				
Scheduled Start Date (10) 06/17/1			Scheduled 06/18/		ion Date (11)	Name of	OSHA Monitor E		. Analytical				
[] Ab	Abatement (Check sility Closed/Vacate atement Performed her – Describe	d During	Entire Per				Street Ad	te, Zip Code		elton Road way, New Jerse	ev 088	54		
Scope of Work (Check al	l that apply)						[]			with Negative Pre				
[] >3	sf or ≥3 lf 60 sf or ≥260 lf		[] [x]	Renova Demoli			[] [x]	Mini-Encl Glovebag Non-Exen	Procedu	re and Non-Friable	Procedi	ure		
			1								Abat	ement	Туре	
Location Asbestos-Containing 1 TO BE ABA in facili (13)	Material (ACM) ATED	N	Is Locatic Normally u Solely by tenance/C Staff (12)	ised y		Ash N (i.e. inst	Description Descri	ntaining ACM) systems urfacing, or		Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E
Exterior			X		Asbe	stos sidir	ıg			1100 sf	X			
												_		
				-	-						-	-		
Name of Registered Was	te Hauler ontracting, Inc.	1	NJDEP Was	ste Hauler 20223	r ID No.	Cubic Ya	ards of Was	te Name of T.R.F		red Landfill			L	
City, State				Dispo	sal Date		City, St	tate town, Pennsy	dvania					
Toms River Completed by (Print or T Nicholas Fe		Title Proje	ct Manag	06/19 ger	9/13 Signat	eric ((In the	P	Ivailla	1	Date 6/1	7/201	3	

MO#20613928768

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

Date of Notification (1)			-		Name	of Building	Owner/C	Operator (2)					
	18 /	13	_		h. Ac	Adams		,	28/3 ///	21 AM 2: 5				
Agencies Notified EPA	Type Notific Initial	ation				Address			E san	21 AM 2				
☑ DOLWD	Amende	d				aple Stree					n_			
☑ DHSS	Amendm				City,	State, Zip (Code		& LICE	S. Com	C			
☐ DCA	☐ Emerger	ncy (inc	cluding	1		rford, NJ				KSINI TRAIL				
(NJAC 5:23-8)	justificat	ion)			Name	of Contac	t			Téléphone N	umber			
	Cancella Cancella	ition			Sean .	Adams			1		_			
					FA	CILITY IN	IFORMA	TION					-	
Name of Facility Where A	batement is	Taking	Place	(3)					Type of Facility	(4)				
Private house		•		1-7					School (K-1					
Street Address				**					Subchapter	8 (Other than K-	1 2)			
46 Maple Street									Other (i.e.,	private and com	mercial b	uildin	gs,	
City (5)								-	homes, etc.					
									Square Feet	# of Floors		Bldg. A	ge	
Rutherford, NJ 07070 County (6)					Tom	4. Cada (7)	CTATE III	05.044.0						
N SUBSTITUTE WINDS					Coun	ty Code (7)	(STATE U	SE ONLY)	Current Use (P	rior if being dem	olished)			
Bergen	10 d to 5-9			(6)			- 10							
Name of Monitoring Firm	Hired by Buil	laing C	wner	(8)	ASCM	No.	Name o	f Abateme	ent Contractor (9	9)				
							Gr Tecl	1 LLC						
Street Address							Street A	ddress						
							576 Va	lley Rd#	283					
City, State, Zip Code							City, Sta	ate, Zip Co	ode			-		
							Wayne,	NJ 0747	70					
Project Manager for Moni	toring Firm	-		Tele	phone	No.	Telepho			License No.				
							973-638	R-1777		01127				
Start Date (10)	T	Sched	uled C	omple	tion Da	te (11)		f OSHA M	lonitor	01127				
06 / 28 /) /	50 1050								
Occupancy Status During	Abatement (nsultants,Inc					
□ Facility Closed/Vacate					mont		Street A							1
☐ Abatement Performed						crihe			Road, Bldg .#	35 E				
Time of Abatement:	AM-	PN	1/.			AM	1 2000	ate, Zip Co						
Coope of Warls (Observe III							Fair Lav	vn, NJ 0						
Scope of Work (Check all	tnat apply)						Н		and decontami					23.
≥ 3 sf or >3 If ≥ 160 sf or ≥260 If			⊠ Re	novati	on		Н	Mini-Encl	ainment with Ne	gative Pressure				
≥ 160 sf or ≥260 lf				molitic			\boxtimes	Glovebac	Procedure	Tent with Negat	tive Pres	sure		
The state of the same of the state of the st								Non-Exer	mpted (*) and No	on-Friable Proce	dure	r		
1				Locat Norma			::::::::::::::::::::::::::::::::::::::				At	atem	ent T	уре
Location Asbestos-Containing N		0	Use	d Sole	ely by	Ashor		scription o			70	Z	m	Ш
TO BE ABA		· ·		intena					terial (ACM) nsulation,	Amount (Specify	em	Repair	าса	nolo
IN Facilit	у	1	Cust	odial ((12)	Staff?		surfac	ing, VAT,	or	SIF or LF)	Removal	≝	Encapsulate	Enclosure
(13)		-	020		F -	1	other m	niscellaneo	ous)		=		late	o l
		-	Yes	No	N/A									
Basement					X	Pipe ins	ulation			65 LF	X			
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												П		
Name of Registered Wast	e Hauler			NJE	EP Waste	Hauler ID No.	Cubic Yar	ds of Waste	Name of Regis	stered Landfill				-=-
Gr Tech LLC					03378	5			T.R.R.F. Inc					1
City, State				1_0	03310	5	TBD		City, State				money Mil.	
2000-0400-04-00-00-0400-0400-0400-0400-							2)		500 CE0000					
Vayne, NJ 07470		T-7:0					TBD		Tullytown, P.	Α				
Completed By (Print or Ty	pe)	Title					Sign	nature	1 1		Date			
J.Jevtic		Own	er					1/204	re Wer	rad o	06/18/20)13		
SR-41								11						

State of New Jersey

No well

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

Check # n/a Name of Building Owner/Operator (2) Date of Notification (1) 6/18/13 Montclair Board of Education Agencies Notified Type of Notification Street Address 22 Valley Road [] EPA Initial DEP Notification [] City, State, Zip Code Emergency DOL Montclair, NJ 07042 Amended DOH Notification Name of Contact Amend #1 DCA [] Cancellation Len Saponara **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private and commercial buildings, Nishuane E. School Street Address 32 Cedar Ave. # of Floors Square Feet Bldg. Age 3 ~ 50 City (5) 90000 County (6) County Code (7) (STATE USE ONLY) Current Use (Prior if being demolished) Montclair Essex educational Name of Monitoring Firm Hired by Building Owner ASCM No. Name of Abatement Contractor (9) Detail Associates, Inc. 00 Jupiter Environmental Services, Inc. Street Address Street Address 300 Grand Ave. 3 Lynn Court City, State, Zip Code City, State, Zip Code Englewood, NJ 07631 Lincoln Park, NJ 07035 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Stephen J. 201-569-6708 973-709-0200 00852 Scheduled Start Date (10) Sched. Completion Date (11) Name of OSHA Monitor J & S Environmental Laboratories, LLC 4/18/13 12/31/13 Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 2333 Route 22 W [x] Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code Describe: evenings Union, NJ 07083 Other - Describe: partially vacated [x] Scope of Work (Check all that apply) Full Containment with Negative Pressure Mini - Enclosure Demolition Renovation [] [x] Glovebag Procedure [X] ≥3 sf or ≥3 lf Non - Friable Procedure ≥160 sf or ≥260 lf [] Is Location Abatement Normally Used Description of Type Asbestos - Containing Amount Location of Solely by R R Е E Maintenance/Cus Material (ACM) N Asbestos - Containing (Specify E C todial Staff (12) (i.e., thermal systems SF or LF) M Material (ACM) C insulation, surfacing, VAT, 0 A TO BE ABATED A L or other miscellaneous) P In Facility V 1 0 R S (13)Yes No N/A A S 8 LF Custodian office and B13 Х Pipe insulation X 120 LF Various Pipe insulation X 300 SF x Floor tile Various Name of Registered Landfill Name of Registered Waste Hauler NJDEP Waste Cubic Yards Hauler ID No. Of Waste Minerva Landfill Jupiter Environmental Services 04782 City, State Disposal Date City, State Lincoln Park, NJ 7/8/13 Waynesburg, OH Completed By (Print or Type) Date Title Signature General Manager Pane Repic 6/18/13 ASB-41

Note: Phased Project. First phase is scheduled to start on 4/18/13 and be completed on/by 4/22/13. It involves removal of 8LF of pipe insulation. Amendments will be sent for other phases. Amendment #1, 6/18/2013: Phase two has been added. Start date is set for 6/28/13 with expected completion on/about 7/1/13. It includes removal of 24 LF of TSI from basement (cafeteria storage and adjacent).

No			NOI				AC 8:60 and 5:1	6)					
Date of Notification (1)					Name	of Buildin	g Owner/Operator (2) 2	21-	7 2 3			-1101
6/		13			So	vereign l	Bank, N.A.	~ 6	AJUN 21 AJ				
Agencies Notified	Type Notific	ation			Stree	t Address	***************************************	100		W _			
⊠ EPA	☐ Initial	2015			113	30 Berks	hire Boulevard		#	15:1	ŝn		
⊠ DOLWD			4		City,	State, Zip	Code	-	Chip Con				
☑ DHSS ☑ DCA	Amendm Emerger			,	Wy	omissin	g, PA		154.77V	1121			
(NJAC 5:23-8)	justificati		iciudini	J	Name	of Contac	zt .		Telephone Numi	ber			-
	☐ Cancella	tion			Su	san Peck	•						
					FA	CILITY IN	NFORMATION				127		
Name of Facility Where	Abatement is	Takin	g Place	(3)				Type of Facility	(4)			-	
Sovereign Bank								School (K-12					
Street Address		-	12.2					Subchapter 8	Other than K-12)			
1600 Corlies Avenu	16							homes, etc.)	rivate and commer	ciai bui	liaing	js,	
City (5)								Square Feet	# of Floors	Blo	dg. A	ge	
Neptune								8,000	2		50		
County (6)					Cour	nty Code (7	7)(STATE USE ONLY)	Current Use (Pri	or if being demolis	hed)		5	
Monmouth							Manager Constant of the Consta		-	0000000			
Name of Monitoring Firm	Hired by Buil	ding (Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
Hillmann Consultin	g				622	52	JVN Restorat	ion Inc					
Street Address							Street Address						
1600 Route 22 East	•						47 Foster Ro	ad					
City, State, Zip Code			();==,!===	110000	73t m		City, State, Zip Co	ode					
Union NJ 07083							Staten Island	NY 10309					
Project Manager for Mon	itoring Firm	13,000		Tele	phone	No.	Telephone No.		License No.			-	
Brian Nemetz				7:	32-616	-4092	718-605-6256		00774				
Start Date (10)				158		te (11)	Name of OSHA M	onitor		- 			
06 /15 /	13		06_ /	17	_ / .	13	Testor Tech						
Occupancy Status During					***************************************		Street Address						- 1
☐ Facility Closed/Vacate							10 59 Jackso	n Avenue					
Abatement Performed	Outside of No	ormal	Facility	y Hou	rs - Des	cribe	City, State, Zip Co	de			- 7.5		-
Time of Abatement: _	AIVI	F	VI/	PIVI-		AW	LIC NY 11101						
Scope of Work (Check all	that apply)												-77
≥3 sf or ≥3 lf			Re	novati	on		☐ Full Cont	ainment with Neg osure	ative Pressure				
≥160 sf or ≥260 lf				molitic			☐ Glovebag	Procedure					
			1-	1	1		Non-Exer	npted (*) and Nor	n-Friable Procedur				
Location	of		110000	Locat Norma	550000		Description of	.		Aba	tem	ent T	уре
Asbestos-Containing I		1)	Use	d Sole	ely by	Asbe	Description of stos Containing Mat		Amount	₽ Pe	Re	Ē	m
TO BE ABA IN Facilit		80. 		intena todial		(i.e	., thermal systems i		(Specify	Removal	Repair	cape	Enclosure
(13)	.y			(12)			surfacing, VAT, other miscellaned		SF or LF)	<u>a</u>		Encapsulate	E E
53 - 63 			Yes	No	N/A							6	
Teller Area, SW Office	е			\boxtimes		VAT/Ma	stic		500SF	\boxtimes			
				×							П		
			Avenue -				-				금	는	
											Ц	Ц	
								1					
Name of Registered Wast		- Calondoda		2000	JDEP V		Cubic Yards of	Name of Regist					
Global Waste Indus	tries, Inc.			Н	auler IE NJ-22		Waste 6	G.R.O.W.S.	, Inc.				
City, State							Disposal Date	City, State					
Hackettstown, NJ							6/17/13	Morrisville,	PA		ı		
Completed By (Print or Ty	pe)	Title			1016	-	Signature) 1	Dat	e	+	8 0	_
John Tardy		Se	enior l	Proje	ct Mar	nager	1704	auch	. 1 /	01	11	13	
SB-41							1	<u></u>	1	٢.	+		-
IAY 11		* L	Do not	use th	is form	for asbest	os licensure)exempl	ed activities.	1		0.5		

Date of Notification (1)							ng Owner/Operator	(2) 2013 11	N 21 AM 2					
June 17, 2013	1			-			olutions, Inc.		11 CI AM 2	:50				
Agency Notified	Type	Notification				Address	hany Bood	6 Ja 1						
⊠ EPA	⊠ Initi			-		ate, Zip	bany Road	69 1	TO CHO	5 64				-
Morepied per State Ray, 102004		ended nendment #					n, NJ 08057		I CE WOLK G	77				
23 002	☐ Em	ergency (including		-		of Contac			Telephone Nu	mhor				
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LI DCA	LI Cai	icenation	W-25-		The same						- 1		2.00	- 100
15 774 100	Al -I		(2)		FACIL	LIIYINF	ORMATION	Tuna of Facility	(4)					
Name of Facility Where	Abateme	ent is Taking Place	(3)					Type of Facility	(4)					
N/A								School (K-12		2)				
Street Address								☑ Other (i.e. pr	3 (Other than K-1 ivate & commerci	z) al buildir	ngs,			
275 Omar Avenue	•							homes, etc.)						
City (5)								Square Feet	# of Floors 1 warehouse 3	Bldg	. Age	Э		
Avenel, New Jers	ey, 070	001						400,000	office	43		51,000-00		
County (6)					County ONLY)	Code (7) (STATE USE	Current Use (Pr	lor if being demo	lished)				
Middlesex					04-01-05-07-07-07			Warehouse						
Name of Monitoring Fire		by Building Owner		SCM	No.		VOIDAGE CONTRACTOR AND AND	nent Contractor (9	\$ Sewan was seen					
ALC Environmen							B&N&K Res	storation Co.,	Inc., 22-2674	200				
Street Address	reet Address						Street Address					10		
	21 West 27th Street, Suite 405						223 Randol						8	
City, State, Zip Code							City, State, Zip							
New York, NY 100							Clifton, N.J	07011		12				
Project Manager for Mo		Firm	1170-00-10-00-		ne No.		Telephone No.		License No.					
Robert M. Gardn	er		177		75-554	4	973-478-468		00120					
Start Date (10)		Scheduled Com		n Da	te (11)		Name of OSHA			_				
June 27, 2013		July 21, 201			40.00			vironmental S	Services, L.L.	C.				
Occupancy Status Durin	ng Abate	ment (Check only o	one)				Street Address							
☑ Facility Closed/Vacat								Brook Avenue)					
☐ Abatement Performe ☐ Other - Describe:	d Outside	e of Normal Facility	Hour	S			City, State, Zip	oode NJ 07071-199	IQ.					
Scope of Work (Check a	all that ar	anly)		_			Lynanursi,	145 0707 1-195	10		-		200	-
■ 10 COM 10 COM ■ 10 COM 10 C	an that ap	ppiy)			-		☐ Full	Containment with	Negative Pressu	re				
$\square \ge 3 \text{ sf or } \ge 3 \text{ If}$ $\boxtimes \ge 160 \text{ sf or } \ge 260 \text{ If}$					⊠ Ren	ovation olition	\$2000 BEET STANDERS	-Enclosure rebag Procedure						
23 2 100 SI OI 2 200 II				88			⊠ Non	-Exempted (*) and	Non-Friable Pro	cedure				
			Is L	ocat	ion						A	bate	eme pe	nt
Locat	ion of			rmal			Description	of			Г	Τ.,		
Asbestos-Containi		rial (ACM)	Used Main				stos Containing M	laterial (ACM)	Amount		_		Ē	m
TO BE A	ABATED			stodi		(i.e	., thermal systems surfacing, VA		(Specify SF or LF		en	Re	cap	nclo
(1				taff? (12)			other miscellan		01 01 11		Removal	Repair	Encapsulate	Enclosure
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B&N&K Restorati	ion Co.	, inc.,		o. 395			5	Minerva E	nterprises, In	c.				
22-2674200 City, State	-				-		Disposal Date	City, State						_
Clifton, N.J 07011							7/08/13	Waynesbu	ra. OH					
Completed by		Title					Signature		. 3, •	Date				-
G. Roger Woodm	an	Project Mar	age	г			111	1/2		6/17/	201	3		

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ate of Notification (1)		Na	me of B	uilding Ow	ner/Operator	(2)	3 6 6 M 2.	Berl C	tz	3~	4	_	
gencies Notified Type Notification		Si	reet Add	7 4 E	VELOPA		1 3/W/2	1 /10	signato	16)	Q :2	77	
EPA Initial DEP Amended Amendment #		Ci	DD) ity, State, PAN/	CON C Zip Code 7m US			UE 7652	Date: @	1-2	Time	:1:		
DOM justification) DGA Gancelletton	ICHOINE	N	ame of C				•	Telephone Numb	er,	** -			
4			FACILI	TY INFOR	MATION	1 44	FF 112 / 41			-			
ame of Facility Where Abatement is Taking foud iz freet Address	Place (3)						of Facility (4) School (K-12) Subchapter 8 Other (i.e. pri		bulldi	ngs, h	ows	١.	
227 CONCORD PRIJE							etc.) ire Feel	# of Floors	Ric	lg. Ag			
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County (6) BROCK		(S	STATE US	E ONLY)	If being demolished	70							
Name of Manitoning Firm Hired by Building C		ASCM	No.	A.1	Viac C	atement Cont contracting	inc.						
Street Address		Street Address 105 Lowell Road											
City, State, Zip Code					City, Gle	State, and Roc	Zip Code ck, N.J. 074	152					
Project Manager for Monitoring Firm	1	elephon	e No.		hone I 1-262-		License No 00156				-		
Start Date (10)	Schedule	d Com		ate (11)			HA Manilor Invironmen	ntal Services in	G.				
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Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma Gus	Vormali ed Solet intenar todial S (12)	ly by noe/ Stall?	(i.e. 1	Descriptions Containing terms systematics, to other miscell	Maferi ms insu /AT, or	ulation,	Amount (Specify SF or LF)	Removal	Repair	encapsulate	Endoswe	
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oursill		70		2311 117			7 3						
Name of Registered Waste Haulor		IN	JOEP W	aste	Cubic Yards	5	Name of	Registered Landfill					
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Date of Notification (1)			Name of	Building Owner	Decator (2)		29/2				
, bate of realmodition (1)	6-18-	13	- ramo or	J. Viv		- S.	~ TH	40			
Agencies Notified	Type Notification		Street A			:_	<u> </u>	1/2/			
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Part of the service of the	☐ Emergency (in		Name of	Contact	<u>'</u>	1.1	Telephone N	8	- Trans	gred .	
D DCA	justification) Cancellation		-	azy 1	linch	my	- I relephone w	(HIII)		A. A.	and and
				LITY INFORMAT	ION		· L	;	-		
Name of Facility Where	4		1 .	- 01		of Facility ((4)				
Street Address	Aurther	Reac	her 0	rish 4 Ch	ips	School (K-1 Subchapter	12) r 8 (Other than K-	.12)			
	Brusin	K	atomi &	e	(A)	Other (i.e. p	private & comme		dings,	home	es.
City (5)			r			etc.) ire Feet	# of Floors	В	ldg. A	qe	
Lawre	enceville	N	5 (୨୫୬୫(1		5	0	t -
County (6)			County (Code (7) USE ONLY)	Curre	ent Use (Pri	or if being demol	ished)			
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Street Address	9 9 4	7-		1-10-4	Street Addre	SS.		3,00		411	
P.O.	Box 33	> 4			P.O.	Box	337				
City, State, Zip Code		TIM	09	522	City State, 2	ip Code	- ADT	7 1	06	72	2
Project Manager for Mo	SYPT,	N O	Telephor	933 no.No.	Telephone N	Egy		U	9	J	2
	chenker		3 (2)	7 <i>58-33</i> 65	609 758	-	License	No.	19	Y	
Start Date (10)	SILES I WEST	cheduled C	ompletion I	Date (11)	Name of OS	HA Monitor		~		-	
June:		Jul	v 7.	2013	EP	C Tec	hnologie	SI	ac		
Occupancy Status Durin	ng Abatement (Check	Only One)	1 7	7.	Street Addre	ss	.)				
Facility Closed/Vac	cated During Entire Pe ned Outside of Normal				City, State, 2	BOX	33 F				
Other - Describe:		racility riot				Egypt	4)~~	mal	5 D	7	
Scope of Work (Check /	All That Apply)				1100	TAYPE	700	083	2	<u> </u>	
23 sf or 23 lf		□ Reno	vation		□ Fu	il Containm	ent with Negative	Pressu	re		
2x ≥160 sf or ≥260 lf		Demo	olition		· □ Mi	ni-Enclosur	e		1.6		
						ovebag Pro on-Exempte	d (*) and Non-Fri	able Pro	cedur	9	
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Locatio		Norm Used Sc			scription of		8500	-	1 9	pe	Γ
Asbestos-Containing TO BE AB		Mainter	nance/		taining Materia I systems insul		Amount (Specify	R	_	Enc	ū
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(13))			other	miscellaneous)			Val.	=	ulate	ure
4	ilea	Yes No	o N/A								
Roofing	Dateria	χ		Roofins	Mater	ral	15009	X PC	_		
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Name of Registered Wa	aste Hauler		NJDEP W		Yards	Name of	Registered Land	Ifill			-
FPC TO	chnologies		Hauler ID		32	Was	te Manag	Conda	t	e f	A
City, State	9		1/0	Dispo	sal Date	City, Sta	te				•
New E	Gust 1	VJ		I	dy 8,200	Mozi		PA			
Completed by Sche	. V.	Title	D .4		Signature	5.0		Date	10	-1'	2
Steve Sche	in next	Piresi	denT		Dlesco	Docke	ake	6-	17	,1	2

Check # 7982

Date of Notification (1)				er / Operator ((2) 29/	2											
Agencies Notified	June 18, 2013 Type Notificati			_	of Americ Address	Ca			Wy 2								
□EPA □DEP	EMERGENCY	•		1 Nort	h Main S	itreet		* 20.	10/1/21 AM 2:50	n							
⊠DOL	☐ Initial			City, S	tate & Zip	Code		*	CENSUL								
⊠рон	Amen	ded dment #		Cape	May Cou	rthous	e, NJ 08210		19/16/18								
DCA		ellation	74	Name	ame of Contact Telephone												
8				Jim K	alafsky		And the second second										
				FA	CILITY	INFO	RMATION						2/				
Name of Facility When Bank of America	e Abatement is	Taking F	Place (3)		Type of Facility (4) School (K-12)												
Street Address					Subchapter 8 (Other than K-12)												
1 North Main Street					Other (i.e., private & commercial bu							dings, home, etc.)					
						-	Square Feet 28,00		1978 P. 1978 P. 1982 Control of the	dg. Ag							
City (5) Cape May Courthous	e					2 + Basement demolished)		108									
County (6)			ounty Code				Bank		N								
Cape May Name of Monitoring Fi		ASCM	No	Name of Aha													
Environmental Testin		ASCM No. Name of Abatement Contractor (9) Synatech, Inc.															
Street Address		Street Address 829 Radio Road															
One Mall Drive, Suite 404 City, State & Zip Code							City, State &										
Cherry Hill, NJ 08002							Little Egg Ha	arbor, NJ 080									
Howard Zenobi 85					Number 11		Telephone No 609-296-6916		License Nu	nber	17						
Scheduled Start Date June 21, 20		Scheduled	l Completi June	on Date (22, 2013			Name of OSI Synatech, In										
Occupancy Status Du	ring Abatement d/Vacated Duri			Abateme	nt		Street Addres										
	erformed Outsi	VICE TO THE PARTY OF THE PARTY					City, State &	Zip Code									
Other – Desc	ribe: pied During Aba	atement					Little Egg Ha	arbor, NJ 080	87								
Scope of Work (Check								THE ROLL OF									
								Full Containm Mini-Enclosus	nent with Negative Pres	sure							
≥3 sf or ≥ 50 lf			님	Renovation													
≥160 sf or ≥260) IT			Demolitio	n				ocedure ed(*) and Non-Friable F								
Loca	ation of		Is Locati	on Norma	Ilv Used		Descripti		ed(*) and Non-Friable i		atem	ent	Type				
Asbestos-Contain	ning Material (A	(CM)	Solely b	y Mainter	ance or		Asbestos-Co	ontaining	Amount (Specify								
	ABATED acility		Custo	dial Staff	? (12) 		Material ((i.e., thermal		SF or LF)	-			T				
	13)		1				insulation, surf	acing, VAT		٦	"	E	g				
							or other misc	ellaneous)		Removal	Repair	aps	Enclosure				
			Yes	No	N/A					\\ \frac{\dagger}{a}	#	Encapsulate	sure .				
Boiler Room		х	Pipe	Insulation and	d Assoc. Debri	is 80 LF	X		\vdash	 							
Name of Registered M	Naste (Cubic	Cubic Yards of Waste Name of Registered														
Hauler ID					500 EVSA 6000 0	raius o	i vvasic	Faces and	WAY ASS								
Synatech, Inc. 274 City, State					3 Dispos	al Date		City, State	attil								
City, State								10 30 2000									
Little Egg Harbor, NJ 08087 Completed By Title					June 24, 2013 Signature						_						
Completed By Title Signal				Signate	Jin	è als	7 _	Date									
Diane Aloia		Executiv	e Admini	strator	1 10	ul	u uu	June 18, 2013									

			(Pursua	int to N	JAC 8:00 8	and 12:120)	N. Was		Check	(#7	983		
Date of Notification (1) June 18, 2013	E.		of Buildir	g Owner / Op	perator (2)	71	Tara Tara	e/in				
Agencies Notified	Type Notification			Address	Ja	ZG	13 11111 2	•	2-1			1 24	
□EPA □DEP	3.5		1 Nort	th Main S	treet	634	13 JUN 21	AM 2:	5 ₀				
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⊠DOH □DCA	Amendmen		N	-601-				472			o Niu	b	
ШВСА	Cancellation	1		of Contac alafsky	ST.				Tele	phon	ie ivu	, inbe	H
			FA	CILITY	INFORMA	TION							
Name of Facility Whe	re Abatement is Taki	ng Place (3)				of Facility (4) School (K-12)							
Bank of America													
Street Address				Subchapter 8 (Other than K-12)							2 2	ı_ \	
1 North Main Street				Other (i.e., private & commercial Square Feet # of Floors								(C.)	
City (5)					Basement	Bidg	. Age	108					
Cape May Courthous	se				Curre	28,000 ent Use (Prior i							
County (6) Cape May		County Co USE ONL	de (7)	(7)									
Name of Monitoring F Environmental Testi				ASCM		e of Abatemen tech, Inc.	t Contractor	(9)					
Street Address	Table 100				Stree								
One Mall Drive, Suite City, State & Zip Code				_		Radio Road State & Zip Co	do						
Cherry Hill, NJ 0800				1.0		Egg Harbor,							
Project Manager for M	Project Manager for Monitoring Firm Telep					hone Number		Licer	nse Numb		5550		
Howard Zenobi	(10) Cahad		56-482-13			296-6916 e of OSHA Mo	nitor			0081	7	_	
Scheduled Start Date June 28, 20		luled Comple Ju	ly 20, 2013		100000000000000000000000000000000000000	tech, Inc.	HILOI	8) 8)					
Occupancy Status Du Facility Close	rring Abatement (Che ed/Vacated During Er			nt		t Address Radio Road							
Abatement P	erformed Outside of	Normal Hou	rs		City,	State & Zip Co	de					=1=1,111	
Other – Desc	10.000.000				Little	Egg Harbor,	NJ 08087						
	pied During Abateme	ent											
Scope of Work (Chec ≥3 sf or ≥ 50 lf	k all that apply)	\boxtimes	Renovati	on		Full C	Containment Enclosure	with Negati	ve Pressi	ire			
≥160 sf or ≥26	O If] Demolitic	on		Glove	bag Proced	ure					
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	ABATED Facility	Cus	todial Staff	? (12)		Material (ACM) thermal syste		SF or	LF)	\vdash			_
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					or oth	ner miscellaned	ous)			Remova	Repair	àps	Enclosure
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		Yes	No	INA								9	
2 nd Floor				Х	Floo	or Tile and Mas	stic	2,000	SF	Х			
Name of Registered V	Vaste Hauler	NJDEP Hauler	Waste	Cubic `	ards of Was	te Nam	e of Registe	red Landfill				_	
Synatech, Inc.			27429	10			ws Landfill	100000000000000000000000000000000000000					
City, State	City, State					City,	State						
Little Egg Harbor, N.	ittle Egg Harbor, NJ 08087					lly 22, 2013 Morrisville, PA							
Completed By						Signature Date June 18, 20							
Diane Aloia	Exec	lonce	Ulor_	J	une 18, 201	13							

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1.	GECA Justiculus	MR. BELLE	
5	Name of Facility values Againment in Taking Place (5)	FACELITY INFORMATION	Type of Facility (4)
3	MR Beus	r	
	GREAT Address ,		C Substanting & College With 14-100 College (Le. publish & collegemental buildings.
i	125 VOLHEES ST		Spring Post & of Planto May Ago
9 .	TEANECK		.2100 Z 19.40
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; ·			net Control (f)
	Bank Address	Best R	enoval Inc
:	5 27	450 8.	River St
		Hacken	sack, M.J. 07601
	Project Manager for Mandaday Plan 1989s	201-329-	7444 · 00388
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, ·	(12)		emo
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1		Waste Harder Cable Yards of	Johns of Registered Landill
	Best Removal Inc 1770	9 . 3°7	Minerva Enterprises
	Eackensack, N.J. 07601	4/21/13	Waynesburg , Oh
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Date (Note in the		,		10 NJAC 8:80 a			^		\mathcal{C}	1	1	tó	17
Date of Notification (1) 06/04/13				of Building Owner apo College of		r (2) ersey	2013 J	UN 21	AM.	<i>+</i>			•
Agencies Notified Type Notificat X EPA Initial	ion		17002007.0707.0	Address Ramapo Valley	/ Road	45							
DEP X Amender X DOL Amendm	ent #_01			tate, Zip Code vah, NJ 07430)		the L	ICENS	THE		L.		
DOH justificati		9	1775	of Contact ard M. Roberts			Telephone Number						
Name of Essility Where Abeternatic T	Li- Di-	(0)	FAC	ILITY INFORMA	TION						_		
Name of Facility Where Abatement is Ta Academic Building-G Wing Street Address	aking Place	(3)				Type of Facility (4) School (K-12)							
505 Ramapo Valley Road			- Carlos			Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, hetc.)						, hom	ies,
City (5) Mahwah				22		Square Fee 100,000 -	are Feet # of Floors Bldg			ldg. / 0+	Age		
County (6) Bergen	76		County (STATE	Code (7) USE ONLY)		Current Use (Prior if being demolished)							
Name of Monitoring Firm Hired by Buildi USA Environmental Manageme)	001	M No. 12		of Abatemen mid Contra					79.00			
Street Address 344 West State Street			20		treet Address 63 Sargeant Avenue							-	
City, State, Zip Code Trenton, NJ 08618		70			City, State, Zip Code Clifton, NJ 07013								
Project Manager for Monitoring Firm Mr. William Weisgarber, Jr.		Telepho	one No. 56-8101	0.0000000000000000000000000000000000000	none No. 689-6281		Licen 0109	se No.					
Start Date (10) 06/17/13	Schedu 07/26/		mpletion	npletion Date (11) Name of OSHA Monitor J&S Environmental Laboratorie									
Occupancy Status During Abatement (Cl	neck Only O	ne)			-	Address				-51			
Facility Closed/Vacated During Enti Abatement Performed Outside of N Other – Describe: Mon-Fri 7:00 am	ormal Facilit	Abateı y Hour	ment 's		City, S	Route 22	е						
Scope of Work (Check All That Apply)					Unio	n, NJ 0708	1						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Property	Renova Demoli		J	×	Full Conta Mini-Enclo Glovebag Non-Exen	osure Procedu	re				e	
	Is	Locat	tion									ement	t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	Norma ed Sole aintena todial (12)	ely by ince/ Staff?	Asbestos Con (i.e. therma surfa		laterial (ACM) insulation, T, or		Amount (Specify SF or LF)	I COLITOYA	Domonia	Repair	e Encapsulate	Enclosure
	Yes	No	N/A						-			te	æ
3rd Floor		х		Wind	low Gla	zing		4 Units	х				
4th Floor		X		Wind	low Gla	zing		4 Units	х				
Green House		х		Wind	low Gla	zing		55 Units	х				0
2nd Floor	x		Wind	low Gla	zing		1 Unit	х	1				
Name of Registered Waste Hauler Pyramid Contracting Corp.	F	JDEP W lauler ID 2613		Yards ste	N 60000 5	anara 1771	stered Lan . Landfill						
City, State Clifton, New Jersey		Dispo: 7/19/	sal Date 13	City,		Pennsyl	vania						
Completed by Dimo Golcev	Title Gene	eral M	langer		Signature	11/	. U	1	Date 06/18	/13	 3		

Do not use this form for asbestos licensure exempted activities.

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			FICATION	OF AS	lew Jerse BESTOS C 8:60 an	ABATE		2013	JUN 2,C	· / -	#	20	60	
Date of Notification (1) 06/04/13		Ramapo College of New Jersey												
Agencies Notified Type Notifi	cation	Street Address 505 Ramapo Valley Road												
EPA Initial Amen		City, State, Zip Code Mahwah, NJ 07430												
Emerg	dment # gency (including		Name o				Telephone	Numbe	r	-				
	ation) ellation		Richa					E	ii'					
Name of Facility Where Abatement is	Taking Place (3)	FAC	LITY IN	FORMAT	ON	Туре	of Facility (4)						
Academic Building-G Wing Street Address								School (K-12)) (Other than F	C-12\				
505 Ramapo Valley Road	* 1,712,000,7	ti)					X		vate & comme		uliding	s, hor	nes,	
City (5) Mahwah							Squar	e Feet 000 +	# of Floors		Bldg. 50+	Age		
County (6)	78.0		County						if being demo	olished)			5	
Bergen Name of Monitoring Firm Hired by Bu	Ildina Owner (8)		ASC	SCHOOL	·r)	Namo	Name of Abstract Control of (2)							
USA Environmental Managen		•	0011				lame of Abatement Contractor (9) Pyramid Contracting Corp.							
Street Address 344 West State Street	NU				70.700 (11.07)	treet Address 63 Sargeant Avenue								
City, State, Zip Code Trenton, NJ 08618	1		ecks salatemen		City, S	tate, Zi	p Code 07013			HARMAN, A.A.				
Project Manager for Monitoring Firm Mr. William Weisgarber, Jr.		Telepho		4	A VICTORY	one No		License 01099						
Start Date (10)	ed Co	mpletion					A Monitor	01098	,			-		
06/17/13	13					- 22	+11	aboratories	s LLC					
Occupancy Status During Abatement Facility Closed/Vacated During E		*500	ment				Addres Route	s e 22 West				A		
Abatement Performed Outside of X Other – Describe; Mon-Frl 7:00 a	ım - 3:30 pm	/ Hou	rs			S	700 OX 107	Code 07081						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 if ≥160 sf or ≥260 if	× F	Renov Demol	vation lition			×	Mini Glov	i-Enclosure vebag Proce	t with Negativ dure *) and Non-Fr					
	ls	Loca	tion				2 74011	Lexempled	Jana Non-i	laule I	Aba	temer	nt	
Location of Asbestos-Containing Material (AC <u>TO BE ABATED</u> In Facility (13)	M) Use	inten	ely by ance/ Staff?		stos Cont e. thermal surfac	aining M systems	ription of ning Material (ACM) Am ystems insulation, (Sp. 19, VAT, or SF of the control of the c			Remova	T	Encapsulate	Enclosure	
	Yes	No	N/A							<u> </u>	. `	ate	8	
3rd Floor		х				w Gla			3 Units	х				
4th Floor		x				w Gla			3 Units	X				
Green House		X	-		Windo	w Gla	zing		55 Units	X	_	-	-	
Name of Registered Waste Hauler			NJDEP W		Cubic			Name of Re	gistered Land	fill			1_	
Pyramid Contracting Corp.		Hauler ID 32613	auler ID No. of Waste 2613 5				G.R.O.W.S. Landfill							
City, State Clifton, New Jersey				7/3/13	al Date		City, State Montpoille	e, Pennsylv	/ania					
Completed by Dimo Golcev	ral N	/langer		8	ghalure	11	, ll	//	Date 06/04	/13				
ASB-41 (R-06-08)					H	* Do not	use th	is form for as	bestos licens			d activ	itles.	

Check # 4558

Date of Notification (1)					Name o	f Buildin	g Owner/Operator	(2)	S. A.		<u> </u>			
06/10/2013					rian H									
Agency Notified	Type Notifica	ation			Street Address 2913 JUN 21 AM 2: 50									
B	⊠ Initial			2	47 Eas	t Glen	Avenue	M ZI AM Z	?: 5n					
⊠ EPA □ DEP	☐ Amended			1	City, St	ate, Zip (Code	7-1-						
⊠ DOL	Amendm	100000000000000000000000000000000000000		R	idgew	ood, NJ	07450 & 1	TEF EUNI	1781					
ES DON						of Contac		TOE KOING	Telephone Nu	mber			, E) !!	
DOH ☑ DCA	☐ Cancellati			В	rian H	larris			-					
			_		Service Control	300031-0031-00	ORMAT10N							
Name of Facility Where	Abstament is 7	Taking Dlace	(3)	24	IAGIL	-111111111		Type of Facility	(4)					
Name of Facility Where	Abatement is	raking Flace	(5)					School (K-12						
							2)							
Street Address								Other (i.e. p	8 (Other than K-1 rivate & commerc		gs,			
247 East Glen Avenue	9				homes, etc.) Square Feet # of Floors									
City (5)							# Of Floors	Bldg.	Age					
Ridgewood, NJ 07450)			1400					50+					
County (6)	£3					Code (7) (STATE USE		r or if being demo	olished)				
Bergen					ONLY)			Home						
Name of Monitoring Fire	m Hired by Buil	lding Owner	1	ASCM	No.	1	Name of Abaten	nent Contractor (9)					
(0)	2.0						RICI CORP							
Street Address Consultants					Street Address									
20-21 Wagaraw Road		41 LIBERTY STREET												
City, State, Zip Code		City, State, Zip Code												
Fair Lawn, NJ 07410		PASSAIC, NJ 07055												
Project Managerfor Mo	lephon	one No. Telephone No. License No.												
973-6							973-614-1266		00838					
Start Date (10)	Sch	heduled Com	1300000				Name of OSHA	Monitor	100000					
			p.0		- ()		RICI CORP							
June 12,2013 Occupancy Status Durin		Check only	ne)			-	Street Address					_		_
							41 LIBERTY S	TREET						
☐ Facility ClosecNacat	ed During Entir	re Period of	Abate	ement			City, State, Zip				_			
☐ Abatement Performe ☐ Other - Describe	d Outside of No	ormai Facility	HOL	ırs			PASSAIC, NJ							
	all that analy)						PASSAIC, NJ	07055						
Scope of Work (Check	all that apply)					3000 AND 1000 AND 100			h Negative Pressu	ure				
□ ~: 3 sf or ~: 3 lf					Ren Dem	ovation		-Enclosure relbag Procedure						
⊠ ~: 1 60 sf or ~: 260 lf					e Don	ionaon	□ Non	-Exempted (*) an	d Non-Friable Pro	ocedure	20 - 0.2			
			le	Locati	on						A	bate Ty		nt
Name = 1		1	١	Normal	ly		D					, y	pe	
Locat Asbestos-Containi	tion of ing Material (A(CM)		d Sole intena		Asbe	Description stos Containing M		Amount	t			ш	m
	ABATED	····/		ustodi			., thermal systems	s insulation,	(Specify		Rer	Z.	car	ncl
35 STORY 15 STORY	acility			Staff?			surfacing, VA other miscellan		SF or LF	-)	Removal	Repair	Encapsulate	Enclosure
()	3)			(12)							<u>a</u>	7	ate	e
		,	es	No	N/A							ĝ.		
Basement				x		Pipe In	sulation		250 LF		x			
Basement						1								
					 									
			-								\vdash			
Name of Decistered W	asta Haulas		I NI	DEDV	Vaste F	lauler	Cubic Yards of	Name of Reg	stered Landfill		_			
Name of Registered W	aste nautei			No.	vasic i	iduloi	Waste	11.0						
RICI CORP 29051			151			TBD	G.R.O.W.S.	LANDFILL						
City, State			,,,,			Disposal Date	City, State					07		
PASSAIC, NJ							TBD()	MORRISVII	LE, PA					
Completed by Title							Signature //	(V)		Date			-	
o mplotter by						INVO	46		06/10/2	2013	3			
RISTO TRAJKOV PRESIDENT * Do not use this form				nis form	n for as	bestos li	censure exempted	activities.		1				