NOCK

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

Check # 9726

Date of Notification (1		5		100000000000000000000000000000000000000		g Owne	er / Operator (2))	Official # 51				
Agencies Notified	April 17, 2015 Type Notificati	nn .		Frank S	Sarno Address				9815		_		
Agencies Notified	ype Notificati			Street A	nuuless				2815 JUN 22	AM	2: :	32	
□EPA				305 No	rth Caml	bridge	Avenue		Asses			60	
DEP	100 mm								435E8+03 & LICEN	1777	7.70	31	
DOL	Initial			City, St	ate & Zip	Code			œ i, ICEN	SIN	Ċ.,,	· L	
DOH	Amend	ded dment#	2	Ventno	r, NJ 08	406							
DCA	Cance			Name o	of Contac	t			Те	lephon	e Nur	nber	r
									2 10	- ····			
				EAC	'II ITV	INFO	RMATION						
Name of Facility Whe	re Ahatement is	Taking P	Place (3)	IAC	/ILI1 1		Type of Facility	/ (4)					
Residence	re ribatement is	raking r	1000 (0)				School (K						
Street Address							Subchapt	er 8 (Other than	K-12)				
305 North Cambridge	e Avenue						Other (i.e	e., private & co	ommercial building	s, hom	ne, et	c.)	
							Square Feet	# of Flo	ors Bld	g. Age			
City (5) Ventnor							1,900	Prior if being den	2 nolished)	58	yea	rs	
vention							Residence	nor it being den	iolistica)				
County (6) Atlantic			ounty Code	(7)									
Name of Monitoring F	irm Hired by Bu				ASCM	No.	Name of Abate	ement Contracto	r (9)				
N/A			(0)				Synatech, Inc.						
Street Address							Street Address						
City, State & Zip Code	9						829 Radio Roa City, State & Z	ip Code					
Decised Masses for N	to the dear Floor		IT-	b N				bor, NJ 08087	I inanaa Num	hor		116-5	
Project Manager for N	ionitoring Firm		le	ephone N	lumber		Telephone Nur 609-296-6916	mber	License Num	0081	7		
Scheduled Start Date June 25, 20		Scheduled	Completic	on Date (1	1)		Name of OSHA Synatech, Inc.						
Occupancy Status Du	ring Abatement		nly one)				Street Address	3					
	ed/Vacated Duri	100 m			it		829 Radio Ros City, State & Z					_	
Other – Desc		de of Noti	nai nouis					bor, NJ 08087					
	pied During Aba	atement					Little Lgg Hai	501, 140 00001					
Scope of Work (Chec	· · · · · · · · · · · · · · · · · · ·												
, ,	11.27						\boxtimes	Full Containmen	it with Negative Press	sure			
≥3 sf or ≥ 50 lf				Renovatio	n		1	Mini-Enclosure					
≥160 sf or ≥26	O If			Demolition	n			Glovebag Proce	dure				
								Non-Exempted(*) and Non-Friable P	rocedu	re		
Description for Posts Continued	ation of	022 323		on Norma			Description			Ab	atem	ent T	Гуре
Asbestos-Contai	ining Material (A ABATED	(CM)		y Mainten dial Staff?			Asbestos-Con Material (A		Amount (Specify SF or LF)				
	Facility				(12)		(i.e., thermal					m.	
	(13)						insulation, surfa			Re	70	nca	E
							or other misce	lianeous)		Remova	Repair	aps	clos
			Yes	No	N/A					val	ai-	Encapsulate	Enclosure
Second Floor			-	Х			Drywa	II	1,500 SF	X	_		4
OGGOTIA FIGUR							Diywa		.,000 01	- '\			
							<u></u>			7			
Name of Registered V	Waste Hauler		NJDEP V		Cubic	ards o	f Waste	Name of Regis	tered Landfill				
Synatech, Inc.			Hauler ID	429	20			Grows Landfil	I				
City, State					Dispos	al Date		City, State					
Little Egg Harbor, N	1				July 16	2015		Morrisville, PA	1				
Completed By		Title			Signatu		0.1	, To ville, T	Date				
					1	110	11/n		June 18, 201	5			
Diane Aloia		Executiv	ve Admini	strator	1	· vu	4 Mill		April 17, 2015				

							3:60 and				Check # 9	726			
Date of Notification (1) May 15, 2015 April 17, 2015	5				ng Own	er / Operato	or (2	2)			-			
Agencies Notified	Type Notificat	ion		Frank Street	Address			-	(1)	-	122 KY	2. 0.			
□EPA □DEP	ON HO	_D		305 No	orth Cam	bridge	Avenue		458 8	E5:	03.33 921.374	THOI	į		
☑DOL ☑DOH ☐DCA		ded dment # ellation	2	Ventne	tate & Zip or, NJ 08 of Contac	8406						G	e Nu	mbe	r
				1				_			1				
Nome of Facility Who	Ab-tt	Tables D	N (2)	FA	CILITY	INFO	RMATIO		(4)						
Name of Facility Whe Residence	re Abatement is	s raking P	lace (3)				Type of Fa								
Street Address							Subc	hapt	ter 8 (Other than	K-12)					
305 North Cambridg	e Avenue						Othe	er (i.	e., private & co	mme	rcial buildin	gs, hom	ne, e	tc.)	
01. (5)							Square Fe		# of Floo	rs	В	ldg. Age			
City (5) Ventnor		1,5						900		2	-2\	58	yea	irs	
ventiloi							Residence		Prior if being dem	olisne	a)				
County (6) Atlantic		US	unty Code												
Name of Monitoring F N/A	irm Hired by Bu	ilding Ow	ner (8)		ASCM	No.	Name of A Synatech,		ement Contractor	(9)					
Street Address							Street Add 829 Radio								
City, State & Zip Code	9						City, State	& Z							
Project Manager for N	Monitoring Firm		Те	lephone N	lumber		Telephone 609-296-69	Nur			License Nu	mber 0081	7	<u> </u>	
Scheduled Start Date TBD	(10)	Scheduled		on Date (Name of C Synatech,	SHA							
Occupancy Status Du	ring Abatement		nly one)				Street Add 829 Radio	iress	5						
	erformed Outsi						City, State					1		_	
Other – Desc	cribe: pied During Ab	atement					Little Egg	Har	rbor, NJ 08087						
Scope of Work (Check															
≥3 sf or ≥ 50 lf				Renovatio	n.			$\overline{}$	Full Containment Mini-Enclosure	with N	Negative Pre	ssure			
≥160 sf or ≥260				Demolitio			ı İ	=	Glovebag Proced	ure					
207 CARS AND SHEET STORMAN SHOULD A STRANGE SHOULD							Ì	_	Non-Exempted(*		Non-Friable	Procedur	e		
Asbestos-Contai		CM)	Solely b	on Norma y Mainten	ance or		Descr Asbestos	-Co	ntaining		ount (Specify		atem	ent T	Гуре
	ABATED Facility		Custo	dial Staff	(12)		Materi (i.e., therr				SF or LF)				
((13)					1	insulation, s	surfa	cing, VAT			20	-	Enc	m l
							or other mi	isce	llaneous)			Removal	Repair	aps	clos
			Yes	No	N/A							val	air	Encapsulate	Enclosure
Second Floor				Х			Dr	ywa	II	1	,500 SF	X			
Name of Registered V	Vaste Hauler		NJDEP \		Cubic \	ards of	f Waste		Name of Registe	red L	andfill			_	
Synatech, Inc.			Hauler ID) No. '429	20				Grows Landfill						
City, State					Disposi	al Date	(City, State						
Little Egg Harbor, NJ	ı				June 4	9, 2015			Morrisville, PA						
Completed By		Title			Signatu		. 10.	1551		ate					
Diane Aloia		Executiv	e Admini	strator	/	111-	Alle	76		nell 4	May 15, 20 ⁴ 7, 2015	15			
		-MOOULIV	- mannin	- aracor	1 100	ULL	- 6000	-		PITT	1,2010				

Check # 9726

Date of Notification (1) May 7 201	5		Mam	e of Build	ing Owne	r / Opera	tor (2)			Check # 9	726			
	April 17, 201				k Sarno	ing Owne	i / Opera	tor (2)		201	5 6101.00				
Agencies Notified	Type Notifica	ation		Stree	t Address	5				-	5 CH 22	Air	2:	33	
ПЕРА				305 (North Car	mbridge /	Avanua			100	ESTES & 11051				
DEP				1000	voi ur Cai	iibiiuge /	Aveilue				27/2	CUM	14	71	
⊠DOL .	Initia	al		City,	State & Z	ip Code					<u>VC 1 1 2 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1</u>	·	?	- L	
Дрон		ended endment #	" 0	Vent	nor, NJ (08406									
DCA		cellation	+	Nam	e of Conta	act					ĪΤ	elephor	ne Ni	ımha	or.
											1.1	Cicpiici	ic ivi	111100	21
					CILITY	/ INICOD	BAATIO	NI.							
Name of Facility Miles	^!		51 15		ACILITY	INFOR									
Name of Facility Whe Residence	re Abatement	is laking	Place (3)	1			Type of F	acility (
Street Address									· 2) r 8 (Other than	K-12)					
305 North Cambridg	e Avenue								, private & co		cial building	s. hor	ne.	etc.)	
07. (5)							Square F		# of Flo			dg. Age		,	
City (5) Ventnor						-		,900		2		5	В уе	ars	
							Residen		or if being den	nolishe	1)				
County (6)		(County Co	de (7)											
Atlantic Name of Monitoring F	irm Hired by B	uilding (USE ONL	Υ	ASCM	l No.	Nama of	Abatam	nent Contracto	- (0)					
N/A		diiding C	wilet (0)		ASCIV		Synatech		ient Contracto	r (9)					
Street Address							Street Ad								
City, State & Zip Code)						829 Radi City, State								_
D :						[[Little Egg	g Harbo	or, NJ 08087						
Project Manager for M	lonitoring Firm	l .	. 17	Telephone	Number	1 42	Telephon		per		License Nur		-		12
Scheduled Start Date		Schedule	ed Comple	etion Date	(11)		Name of		Monitor			0081	1	-	
May 18, 20		1 (0)		ne 18, 201	5		Synatech								
Occupancy Status Du Facility Close	ring Abatemer d/Vacated Du	ring Entir	re Period o	of Abateme	ent		Street Ad								
	erformed Outs					-	City, State								
Other - Desc							A STATE OF THE STA	Committee of the second	or, NJ 08087						
	pied During At		1												
Scope of Work (Check	all that apply)													
≥3 sf or ≥ 50 lf				Renovat					II Containment	t with N	egative Pres	sure			
≥3 \$1 01 ≥ 50 11 ≥160 sf or >260) If		-	Demoliti	5/5/6/5			=	ni-Enclosure	2					
<u></u>	,			_ Demont	511				ovebag Proced n-Exempted('		laa Falabia D				
	ation of		Is Loca	ation Norm	ally Used		Desc	ription) allu i	NOII-FIIADIE P		_	ent 7	Туре
Asbestos-Contair	ning Material (ABATED	ACM)		by Mainte			Asbesto				ount (Specify				,,,,,
	acility	92.	Cus	todial Staf	(12)	1	(i.e., ther	rial (ACI mal sys	A Company of the Comp	`	SF or LF)	\vdash		_	_
(13)						sulation,			1		R		Enc	ш
				1		ľ°	or other m	nscellai	neous)			Removal	Repair	aps	nclos
			Yes	No	N/A	l						val	ai-	Encapsulate	Enclosure
Second Floor			-	-								1		0	
Second Floor			_	X			D	rywall		1	,500 SF	- ×			
								-				-			
Name of Registered W	aste Hauler		NJDEP	Waste	Cubic '	Yards of V	Vaste	Na	ame of Registe	ered La	ndfill				
Synatech, Inc.			Hauler				* * 1110 S WAY				200 1 0060€				
City, State				27429	Dispos	al Date			rows Landfill ty, State						
Little Egg Harbor, NJ Completed By		Title			June 1 Signati	9, 2015		M	orrisville, PA) ota					
2000		1100			Signati	lanc	1711	1	-	Date	May 18, 2015	5			
Diane Aloia		Execut	ive Admir	nistrator	10	Mh	alle	16_	- A	pril 17					

Check # 97<u>26</u>

Date of Notification (1)	April 27, 2015 April 17, 2015			of Buildir Sarno	ng Owner / Operat	or (2)	2015	<u>"™ 22 </u>		~		
Agencies Notified	Type Notification		_	Address					1/2	35		
□EPA □DEP			305 No	orth Cam	bridge Avenue		4555	LICENS	14]	101		
⊠DOL	☐ Initial		City, S	tate & Zi	o Code		٠,	1-10-18-XI	*8	- 4-		
	Amended			or, NJ 0								
DOH DCA	Amendmer Cancellatio		Name	-606-				1=				
Шрсх	Cancellatio	n	IName	of Contac	CI			l te	ephon	e Nu	mbe	:r
			FA	CILITY	INFORMATIO	N						
Name of Facility When Residence	e Abatement is Tak	ing Place (3)				acility (4) ool (K-12)						
Street Address					Sub	chapter 8 (O	ther than K-12)					
305 North Cambridge	Avenue				Oth	er (i.e., priv	ate & comme	rcial buildings	s, hon	ne, e	tc.)	-0.0
City (5)					Square F		# of Floors	Bldg	g. Age			
Ventnor							2 peing demolishe	d)	50	3 yea	ers	
County (6) Atlantic		County Code										
Name of Monitoring Fi N/A	rm Hired by Building	Owner (8)		ASCM	No. Name of A		Contractor (9)					
Street Address					Street Ad							
City, State & Zip Code						e & Zip Code				20		
Project Manager for M	onitoring Firm	Те	lephone i	Number		g Harbor, No e Number 6916	3 00007	License Num	ber 0081	7		
Scheduled Start Date May 12, 20		luled Completi	on Date (OSHA Monit	tor			•		
Occupancy Status Dur		ck only one)			Street Ad 829 Radi	dress						
	erformed Outside of	Normal Hours			City, State	e & Zip Code	8					
Other - Desc	ribe: pied During Abateme	ent			Little Egg	g Harbor, N.	J 08087					
Scope of Work (Check		1000										
≥3 sf or ≥ 50 lf			Renovation				ntainment with I	Negative Press	ure			
>160 sf or >260	If	H	Demolitio			Mini-En						
<u></u>			20111011110				ag Procedure xempted(*) and	Non-Friable Pr	ncedu	re		
Loca	ition of	Is Locati	on Norma	ally Used	Desc	cription of	kempted() and	THOTI-I HADIC I I	-	atem	ent 7	Type
	ning Material (ACM)	Solely b	y Mainter	nance or	Asbesto	s-Containing		ount (Specify	-			.
	ABATED acility	Custo	dial Staff	? (12) 		rial (ACM) rmal system:		SF or LF)	\vdash			-
	13)				insulation,	surfacing, V	'AT		l z	_	Enc	匝
					or other n	niscellaneou	s)		Removal	Repair	aps	ıclo
		Yes	No	N/A					oval	air	Encapsulate	Enclosure
Second Floor			Х		D	rywall		1,500 SF	X			\top
Name of Registered W	aste Hauler	NJDEP V Hauler ID	No.	patrices at two	Yards of Waste		of Registered L	andfill				
Synatech, Inc. City, State		27	429	20	al Data		Landfill					
Oity, State				Dispos	al Date	City, S	late					
Little Egg Harbor, NJ					2, 2015	Morris	sville, PA					
Completed By	Title			Signatu	/ 1,7		Date	April 27, 2015				
Diane Aloia	Exe	cutive Admini	strator	1 1/4	hie Clo	<u></u>	April 1	7, 2015			V. 15 (1)	

NOT

FICATION OF ASBESTOS ABATE Pursuant to NJAC 8:60 and 12:120	The safety.
Name of Building Owner / Operator (2) Frank Sarno	2875 JUN 22 CM 2
Street Address	hi 2:30

Date of Notification (1) April 17, 2015			Frank		ig Owner / Opera	tor (2275 . 22	V 22				
Agencies Notified	Type Notification	on		-	Address				N 22 FN 2:3	ŝ			
EPA DEP				305 No	orth Cam	bridge Avenue		4355	1.03, Cultan	<i>(</i>			
⊠DOL	Initial			City S	tate & Zij	n Code	-	Q. [.	TUCKSING "	-			
<u> </u>	Initial Amend	hed			or, NJ 0								
⊠ DOH		iment #		Ventil	JI, 145 U	0400							
DCA	☐ Cancel	llation		Name	of Contac	ot			Tel	ephon	e Nu	mbe	г
									- 1				
				FA	CILITY	INFORMATIO	ON		J.,				
Name of Facility Whe Residence	re Abatement is	Taking Pla	ace (3)			Type of F		ity (4) (K-12)					
Street Address								oter 8 (Other than	K-12)				
305 North Cambridg	e Avenue						-	[[] 12 12 12 12 12 12 12 12 12 12 12 12 12	mmercial buildings	hon	10 0	tc)	
						Square F				. Age		10.)	
City (5)							1,900		2		yea	irs	
Ventnor						Current l Resider		Prior if being dem	olished)		,		
County (6) Atlantic		USE	nty Code	€ (7)									
Name of Monitoring F	irm Hired by Bui	lding Owne	er (8)		ASCM			tement Contractor	(9)				
N/A Street Address						Synatecl					in Dec		
Street Address						Street Ac 829 Radi							
City, State & Zip Code)							Zip Code					
								rbor, NJ 08087					
Project Manager for M				lephone N		Telephor 609-296-			License Numb	oer 0081	7		
Scheduled Start Date May 5, 20		cheduled (on Date (* e 4 , 2015	11)	Name of Synatect		A Monitor					
Occupancy Status Du			ly one)		.+	Street Ad	idres	ss					
<u></u>	erformed Outsid	. T. S.			it.			Zip Code					
Other - Desc		ic or reornic	ai i iouis					rbor, NJ 08087					
	pied During Aba	tement				Little Ly	y ma	11 1001, 143 00007					
Scope of Work (Check							_						
D . 2 . f 50 lf							\bowtie		with Negative Pressi	ıre			
≥3 sf or ≥ 50 lf				Renovatio			Ц	Mini-Enclosure					
≥160 sf or ≥260	זו כ			Demolitio	n		Н	Glovebag Proced					
Las	- N' F	- 1					<u>Ц</u>		and Non-Friable Pro	~	_		
Asbestos-Contai	ation of ning Material (A)			on Norma y Mainten				on of ontaining	Amount (Specify	Aba	atem	ent T	ype
	ABATED			dial Staff				ACM)	SF or LF)				
	acility							systems				Е	
((13)							acing, VAT ellaneous)		교	ZI.	nca	Ē
						or other r	HISCO	ellal leous)		Remova	Repair	sde	000
		- 1	Yes	No	N/A					val	ä,	Encapsulate	Enclosure
Second Floor				Х			Drywa	all	1,500 SF	Х			Т
							,			1 1			
										1			
Name of Registered V	Vaste Hauler	100	NJDEP V		Cubic \	ards of Waste		Name of Registe	ered Landfill				-
Synatech, Inc.				429	20			Grows Landfill					
City, State					Disposi	al Date		City, State					
Little Egg Harbor, NJ	i				luna F	2015		Morriquille DA					
Completed By		Title			June 5 Signatu			Morrisville, PA	ate		E-CEPT-		
					1	// 27							
Diane Aloia		Executive	Adminis	strator	1 11/1	and alla	Ċ	A	pril 17, 2015				

NO CK

									300	- Che	eck # 98	373		
Date of Notification (1) June 18, 20 June 10, 201 8				of Buildin of Americ		er / Operator	(2)	1 h - 4-1	· ·	n.			
Agencies Notified	Type Notifica	tion		Street	Address				2015 JUN 2	2 AM 2	: 52			
□EPA				4005	:	0 1141-	@ A1-1		CEM JUIL	. C P34 C	√. ⊆			
DEP				4005 F	iignway s	9 NORTH	@ Aldrich F	Road	ACOTOTI	TO CONT	201			
DOL	│	ı		City S	tate & Zip	Code			\$58E\$10 8.1.10	ENSINU STUSINO	1106			-
	Ame			100000000000000000000000000000000000000	I, NJ 077				Q. 1.1	14+11595	3			
DOH	Ame	ndment #_	1_			200								
DCA	Cano	ellation		Name	of Contac	ct					Telephor	ne Nu	mbe	r
				Jim Ka	alafsky									
1				FAG	CILITY	INFO	RMATION							
Name of Facility When Bank of America	re Abatement	is Taking I	Place (3)				Type of Fac							
Street Address									ner than K-12)					
4005 Highway 9 Nort	h @ Aldrich F	Road							te & comme		nas hor	ne e	tc)	
							Square Feet		# of Floors		Bldg. Age		10.)	_
City (5)							1,50	8	1		7.gc	60		
Howell								(Prior if be	ing demolishe	ed)				
County (6)			0 - 1	/ 7 \			Bank							
Monmouth			ounty Code SE ONLY											
Name of Monitoring Fi	irm Hired by B				ASCM	No.	Name of Ab	atement Co	ntractor (9)				_	
Environmental Testin	ng Consultan	ts, LLC				373,179298	Synatech, I	nc.						
Street Address 413 North Black Hors	oo Diko						Street Addre							
City, State & Zip Code	- C - C - C - C - C - C - C - C - C - C						829 Radio F City, State 8							
Runnemede, NJ 080							Little Egg H		08087					
Project Manager for M	onitoring Firm			lephone N			Telephone N	Number		License No				
Howard Zenobi Scheduled Start Date	(10)	Sahadula		6-482-131			609-296-691				0081	7		
June 22, 20		Scriedule	d Completi July	31, 2015	5 (6)		Name of OS Synatech, In							
Occupancy Status Du	ring Abatemer	t (Check o	only one)				Street Addre							
	d/Vacated Du				t		829 Radio F	400-11-01-01-01-01-01-01-01-01-01-01-01-0						
	erformed Outs	ide of Nor	mal Hours				City, State &							
Other – Desc							Little Egg H	larbor, NJ	08087					
	pied During Ab													
Scope of Work (Check	call that apply)					_	_						
M >2 -4> 50 14				D			_	-	ainment with I	Negative Pre	essure			
≥3 sf or ≥ 50 lf ≥160 sf or ≥260	V IE		=	Renovatio Demolitio			<u> </u>	Mini-Encl						
	7 11			Demonition	I.		L		Procedure					
Loca	ation of		Ila Lagati	on Norma	llu I lood		Descrip		mpted(*) and	Non-Friable	-			-
Asbestos-Contair		ACM)		y Mainten			Descrip Asbestos-C		Am	ount (Specif		atem	ent i	ype
TO BE	ABATED	•		dial Staff?			Material	(ACM)		SF or LF)	' L_			
	acility 13)						i.e., therma) nsulation, su		-				П	
	13)					,	or other mise				Re	교	nca	Enclosure
								\$1000000000000000000000000000000000000			Removal	Repair	psu	losı
			Yes	No	N/A						/al	=	Encapsulate	ıre
Exterior Window Ass							1011	2 "		10015				
Exterior willdow Ass	emblies				Х		ACM (Jaulk		100 LF	x			
Name of Registered W	/aste Hauler		NJDEP V Hauler ID		Cubic Y	ards of	Waste	Name of	Registered L	andfill				
Synatech, Inc.		<i></i>	Photosopheratory 2005	429	10			Grows I						
City, State					Disposa	al Date	6 4	City, Sta	te					
Little Egg Harbor, NJ	08087				August	3 204	5	Morrio	illo DA					
Completed By	00001	Title			Signatú		<i>γ</i>	Morrisv	Date					
		L			/	IIn	- ///	0	Date	June 18, 20	015			
Diane Aloia		Executiv	e Adminis	strator	1	Mu	e UN	100	June 1	0, 2015				ĺ

Check # 9873 Date of Notification (1) Name of Building Owner / Operator (2) June 10, 2015 Bank of America Agencies Notified Type Notification Street Address EPA 4005 Highway 9 North @ Aldrich Road DEP XDOL. Initial City, State & Zip Code Amended Howell, NJ 07731 **DOH** Amendment # DCA Cancellation Name of Contact Telephone Number Jim Kalafsky **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Bank of America School (K-12) Street Address Subchapter 8 (Other than K-12) 4005 Highway 9 North @ Aldrich Road Other (i.e., private & commercial buildings, home, etc.) Square Feet # of Floors Bldg. Age City (5) 1,500 60 Howell Current Use (Prior if being demolished) Bank County (6) County Code (7) Monmouth USE ONLY Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Environmental Testing Consultants, LLC Synatech, Inc. Street Address Street Address 413 North Black Horse Pike 829 Radio Road City, State & Zip Code City, State & Zip Code Runnemede, NJ 08078 Little Egg Harbor, NJ 08087 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number Howard Zenobi 856-482-1311 609-296-6916 00817 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor June 20, 2015 July 31, 2015 Synatech, Inc. Occupancy Status During Abatement (Check only one) Street Address Facility Closed/Vacated During Entire Period of Abatement 829 Radio Road X Abatement Performed Outside of Normal Hours City, State & Zip Code Other - Describe: Little Egg Harbor, NJ 08087 Facility Occupied During Abatement Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥ 3 sf or ≥ 50 If Renovation Mini-Enclosure 2160 sf or ≥260 lf Demolition Glovebag Procedure Non-Exempted(*) and Non-Friable Procedure Location of Is Location Normally Used Abatement Type Description of Asbestos-Containing Material (ACM) Solely by Maintenance or Asbestos-Containing Amount (Specify TO BE ABATED Custodial Staff? (12) Material (ACM) SF or LF) IN Facility (i.e., thermal systems Encapsulate insulation, surfacing, VAT (13)Enclosure Remova Repair or other miscellaneous) N/A Yes No Exterior Window Assemblies ACM Caulk X 100 LF X NJDEP Waste Name of Registered Waste Hauler Cubic Yards of Waste Name of Registered Landfill Hauler ID No. Synatech, Inc. 27429 10 Grows Landfill City, State Disposal Date City, State Little Egg Harbor, NJ 08087 August 3, 2015 Morrisville, PA Completed By Title Signature Date 1000 Diane Aloia **Executive Administrator**

June 10, 2015

NOCK

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

CHECK # 21983

Date of Notification (1) 06-15-15					of Building											
Agencies Notified	Type Notification		+	Street A	Address		41	Ť	¥ 22 A	1. Z-	21					
EPA DEP X DOL	Initial Amended Amendment		_	City, St	rk Place ate, Zip Co rk, NJ 0	ode	700 m	2.7	richia.	io.	-					
DOH DCA	Emergency justification) Cancellation	**************************************		Name of Amy E	f Contact Blake					Tel	ephone	Numl	er			
Name of Facility Where	Abatement is Takin	n Place (3)		FAC	ILITY INF	ORMATI	ION	Type	of Facility	(4)						
Vacant Apartment		ig i lace (5)						Туре	School (K-							
Street Address 418-422 South Ora	ange Avenue			25 22 25				×	Subchapte Other (i.e. etc.)	r 8 (Oth	er than & comm	K-12) ercial	buil	dings	, hom	es,
City (5) Newark						*			are Feet	# o	f Floors		200	ildg. A	Age	
County (6) Essex				County (STATE	Code (7) USE ONLY)			ent Use (Pri sidential	or if bei	ing dem	olishe	d)			
Name of Monitoring Firm WCD Group LLC	Hired by Building	Owner (8)		ASC	Л No.				atement Co Environm							
Street Address 23 Route 31 North,	Suite B26						Street 200 E		ss d Street							
City, State, Zip Code Pennington, NJ 085	City, State, Zip Code Pennington, NJ 08534 Project Manager for Monitoring Firm								Zip Code NJ 0707	2						
Project Manager for Mor Mike Garambone		Telepho (212)	ne No. 631-806	5	Teleph 201-9				Licens							
Start Date (10) 06-15-15		Scheduled 07-15-1		npletion	Date (11)		Name Even		HA Monitor nc.				11-			
Occupancy Status Durin	g Abatement (Chec	k Only One)				Street		777A							
× Facility Closed/Vac Abatement Perform	ated During Entire I	Period of At	atem	ent					kson Ave	nue						
Other – Describe:	Area isolated during	abatement	iours			_	1000		ip Code nd City, N	Y 111	01					
Scope of Work (Check A ≥3 sf or ≥3 If ≥160 sf or ≥260 If	ы i nat Арріу)		nova moliti	20,20,00			×	Fu Mir Glo	introlled De Il Containme ni-Enclosure ovebag Prod in-Exempted	ent with e cedure	Negativ				е	
	*		ocati											Abate	ement pe	t
Location Asbestos-Containing		Used		y by	Ashes	Des tos Cont	scription		L(ACM)	Δ	mount	H		1 9		
TO BE AB/ In Facil (13)	ATED `	Custo	tenar dial S (12)		(i.e.	thermal surface	systems cing, VA niscellan	insula T, or	ation,	(S	pecify or LF)		Remova	Repair	Encapsulate	Demolition
		Yes	No	N/A											te	5
Roof				Х		Me	mbran	ie		4,5	00SF					х
Roof				Х		FI	ashing	1		6	00SF					х
Throughout I				Х		FI	looring			1,2	200SF					Х
Baseme				Х		the second	Packi	ng			25SF					х
Name of Registered Was Freehold Cartage	te Hauler		Ha	IDEP Wauler ID 693	aste No.	of Was			Name of I	Registe	red Lan	dfill				
City, State Freehold, NJ				121		Disposa TBD	al Date		City, State Tullytov						21005	
Completed by	1.1 141 1.1	Title		-			gnature	\cap	1	.,.,		Date				
Niamh Fleming		Office	Man	ager		1		iar	4),	26	06-1	5-1	5		

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

NO CE

										VII	1	-	7	TC	
Date of Notification (1) 6/16/15					f Building (amphier		perator	(2)	श्रीह ,	JUN 2	2 14	2.0			
100 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Type Notification		1.5	Street A 5 Goo	^{ddress} dwin Te	rrace			4500	3.50		C. 5	S		
	× Amended Amendment			0.000	ite, Zip Co 100d, NJ				§.	LIC	EARTH	140			
× DOH DCA	Emergency (justification) Cancellation	ncluding	1.3		f Contact amphier					Tel	ephone Ni	ımber			
				FACI	LITY INFO	DRMATI	ON						-		
Name of Facility Where Ab house	patement is Taking	Place (3)					Туре	of Facility (School (K-1						
Street Address 5 Goodwin Terrace								×	Subchapter Other (i.e. p	8 (Oth			dings	, hom	es,
City (5) Westwood	9.000							Squa 200	are Feet	# o	Floors	1 1 1	3ldg. /	\ge	
County (6) Hudson	1				Code (7) USE ONLY			Curr	ent Use (Pri	or if bei	ng demolis	shed)			
Name of Monitoring Firm H	Hired by Building C	Owner (8)		ASCN	No.				atement Cor ronmenta						
Street Address								Addre Box 4	ess 83, 4 E G	ate D	rive				
City, State, Zip Code	city, State, Zip Code								Zip Code d, NJ 074	18					
Project Manager for Monito			Telepho	ne No.		Teleph	none N	lo.		License I	Vo.				
Start Date (10) 6/23/15	*	Schedule 7/23/15		pletion I	Date (11)		Name	of OS	HA Monitor		P		337		
Occupancy Status During	Abatement (Checl	Only On	ne)				Street	Addre	iss .						
Facility Closed/Vacate Abatement Performed Other – Describe:	ed During Entire P	eriod of A	Abatem	ent					Zip Code		-				
Scope of Work (Check All	That Apply)														_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	аст.рруу	and the same of	(enova)emolit				×	Mi GI	III Containme ni-Enclosure ovebag Prod on-Exempted	e cedure				re	
		1.0	Locati	8						7 / / 21.	4 11011 1 110		Abat	emen ype	t
Asbestos-Containing N TO BE ABAT In Facility (13)	faterial (ACM)	Use Ma	Normali d Sole intenar odial S (12)	ly by nce/		tos Cont thermal surfa	scription taining N system cing, VA niscellar	Materia s insul T, or		(5	mount Specify or LF)	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A										te	LD.
basemer	nt			Х		pipe	insula	tion		10	00 LF	Х			
						-						+-			-
							V					+	1		-
Name of Registered Waste	Hauler		N	JDEP W	/aste	Cubic	Yards		Name of	Registe	red Landfi	11	_		
Freehold Cartage			9353	auler ID 5959	No.	of Was	ste		Wester	n Berl	s Landfi				
City, State Freehold, NJ						Dispos TBD	sal Date		City, Stat Birdsbo		4				
Completed by A. Scott Higgins		Title Presi	dent			S	Signature				1	ate /16/1	5		

NO CK

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

Date of Notification (1) 06-16-15					f Building ship of L			(2)		21	15 1110	,			-	
Agencies Notified	Type Notification			Street A	2000	ivingst	OH				Tā JUA	22	E	10	. ~	
EPA	Initial			81 Na	ylon Ave					33	ð£ST	ne,	3 10		. 0	-
DEP X DOL	Amended Amendment				ate, Zip Co ston, NJ)				ŭ 1./(î.H.		14 T	ROL	
DOH DCA	Emergency (i justification) Cancellation	ncluding			f Contact h Greco					Tel	ephone N	Numbe	Γ 4			
					ILITY INFO		ON							-		
Name of Facility Where	Abatement is Taking	Place (3)						Туре	of Facility (
Street Address							-00	H	School (K-1 Subchapter	8 (Oth						
81 Naylon Avenue								×	Other (i.e. p etc.)	rivate 8	& comme	rcial b	uild	ings,	hom	es,
City (5) Livingston		10 #						Squa 500	are Feet SF	# o	Floors			dg. A		
County (6) Essex					Code (7) USE ONLY)			ent Use (Prio	or if bei	ng demol	lished))	10		
Name of Monitoring Firm H2M Associates	Hired by Building C	wner (8)		ASCN	Л No.				atement Con Environme							
Street Address	20							Addre		ontal v	Jui p.		_			
119 Cherry Hill Roa City, State, Zip Code	ad								d Street Zip Code							
Parsippany, NJ 070							Carls	stadt,	NJ 07072	2						
Project Manager for Mor Steven Hearl	nitoring Firm		- 1	Telepho (862) 2	ne No. 207-590	0	Teleph 201-	none N 939-6			License 00756					
Start Date (10) 06-29-15		Scheduled 12-31-15		pletion	Date (11)		Contract of the Contract of th	of OS	HA Monitor Inc.							63
Occupancy Status Durin	g Abatement (Check	Only One)				Street	Addre	ess					1.00		-
X Facility Closed/Vac	ated During Entire P	eriod of Ab	atem	ent			10-5	9 Jac	kson Ave	nue						
Other – Describe:	ed Outside of Norma	al Facility F	lours			_			Zip Code nd City, N`	Y 111	01					
Scope of Work (Check A	ll That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			novat moliti				×	Mi Gl	III Containme ni-Enclosure ovebag Proc	edure						
								_ No	n-Exempted	(^) and	Non-Fri	able P	100	Standards	e ment	
Location	n of	No	ocation rmall	у		Dec	scription	of						Ту		
Asbestos-Containing	Material (ACM)	Used Maint				tos Cont	aining M	/lateria			mount				Ш	
TO BE AB. In Facil		Custo	dial S	\$170 Till	(i.e.	thermal surface	systems cing, VA		ation,		pecify or LF)	Dellova		Repair	тсар	Enclosure
(13)			(12) No	N/A		other n	niscellar	neous)				DVdI		air	Encapsulate	sure
Digester / Heat Exch	nange (Grnd Fl.)		140	X		Pine	Insula	ition			2LF	×				
J						1 ipc	modia				<u> 1</u>	^	+			
												-	+			
							_ ======						+			
Name of Registered Was			2000	JDEP W		Cubic			Name of F	Registe	red Land	fill				
ATC, Inc. / JBT (500	71)			310	140.	of Was	sie		Minerva	Ente	rprises					
City, State Shirley, NY / Bronx,	NY					Dispos TBD	al Date		City, State Waynes		OH 44	688				
Completed by		Title			- January	S	ignature	· X	6		- 1	Date		1 1		-
Joseph Patrick	12	Project	Ma	nager			XS	1/	10	,		06-16	3-1:	5		



Date of Notification (1) 6/14/15				uilding Ov milton L		erator ((2)	4	8875 JU	# 22	RH.	2		
Agencies Notified Type Notification		0.000	treet Add 536 Wa	iress arren Av	/enue			۵	36531	for i	1117	14 E	S	
EPA Initial DEP X Amended Amendment #1				, Zip Cod vbrook,		046			å. [.]	DENS	143	ROL		
Emergency (inc justification) DOA Cancellation	luding	1000	ame of C				5-11-75-11-1		Teleph	one Num	ber			
L DCA L Carcenation		1		TY INFO	PMATIC	N								
Name of Facility Where Abatement is Taking P	lace (3)		IAOILI	11 110 01	CHIPCITO	1	Туре	of Facility (4	•)					
Hamilton Square								School (K-12	2)					
Street Address 1700 Nottingham Way							X	Subchapter (Other (i.e. pretc.)	8 (Other the rivate & co	nan K-12 ommercia) al buildi	ngs, t	nome	s,
City (5) Hamilton							Squa	re Feet ,000	# of Flo	oors	81d 40	dg. Ag	je	
County (6) Mercer			County Co	ode (7) SE ONLY)	(Curre	ent Use (Prio	or if being	demolish	ed)			
Name of Monitoring Firm Hired by Building Ow	mer (8)	_	ASCM	No.				atement Con					200-1	
Finog Environmental	040.00					0.000.000.000	20222	Environme	ntal Sys	tems, l	nc.			
Street Address 617 Stokes Rd.							Addre East	Union St.						
City, State, Zip Code Medford NJ 08055					a ===			Zip Code ester, PA 1	9382					
Project Manager for Monitoring Firm Mark Rubnitz			Telephon				none N	No. 9000	100	icense N 0508	0.			
AVEN ACCORD SERVICES AND ACCORD.	cheduled		STORES HE			Name	of OS	SHA Monitor						
0/20/10	/15/15							vironment	al					
Occupancy Status During Abatement (Check	Only One))				100000000000000000000000000000000000000	Addre	ess es Rd.						
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma	riod of Ab	atem	ent					Zip Code			-			
Other – Describe:	T dollity T	10010			_			NJ 08055	j					
Scope of Work (Check All That Apply)	_					F	_				± 121,7000,0000,7000			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		nova moliti			W	ll and the second	M G	ull Containme lini-Enclosure lovebag Pro- lon-Exempte	e cedure				e	
	W 68	100					14	OIT-EXCITIPIO	a () and i	101111100	1	Abate	ement	
	107.020	ocati rmall			D-0	aariatia	n of					Ту	ре	
Location of Asbestos-Containing Material (ACM)	Used	Sole	ly by	Asbest	tos Con	scriptio taining	Materi	al (ACM)		ount			Ш	m
TO BE ABATED	Custo	tenar dial S	2000 200000	(i.e.	thermal	system			(Spe		Remova	Re	Encapsulate	Enclosure
In Facility (13)		(12)				miscella			01.0		300	Repair	sula	Sur
	Yes	No	N/A			10.00							ate	е
roof			X		Built	up ro	ofing		195,0	00 SF	X			
Roof deemed unsafe to work on					See	e attac	hed							
by engineering company				Build	ding w	ill be o	demo	lished						
				with	nout re	movin	g roc							
Name of Registered Waste Hauler		100000	JDEP W lauler ID		Cubic of Wa	: Yards		1.0000000000000000000000000000000000000	Registere	ed Landfil	I			
Waste Management of Camden			7273		1000	sal Dat	a /		Landfill					
City, State Camden, NJ					Vario	ous	IN	Palls	fé ownship					
Completed by Robert M. Casciato	Title Presid	lent			5	Signato		4			ate /13/1	5		

Date of Notification (1)	S Conductor Company of the Conductor Conductors		T	Name o	f Building	Owner/C	perator	(2)			-	-	-	
6/18/15			1		2. WHI				2875 11	¥22 ξ;				
Agencies Notified	Type Notification			Street A							10.	31		America de la constante de la
□ EPA	⊠ Initial		1		LEU		15 R	c.410	9385.	100				
□ DEP 図 DOL	☐ Amended Amendment #				ete, Zip Co		117		& [JOEN ST	1	OL		
	☐ Emergency (in		— ļ		f Contact	0,00	70 5				-			
☑ DOH □ DCA	justification) □ Cancellation			Joi)			l le	lephone Num	iber			
			1		LITY INFO	DRMATI	ON		<u> </u>	·	-	-		
Name of Facility Where A		Place (3)		***************************************				Type of Facili	ty (4)	-	-		-	
WHITEMA	U							☐ School (I						
Street Address 3 - EUGENS	Dago							☐ Subchap ☑ Other (i.e	ter 8 (Othe	er than K-12)	huile	linae	home	00
	2 120.70							etc.)						,5,
City (5) 1+0 PAT CON	1G-							Square Feet	# 0	f Floors	E	Bldg. A		
County (6)			1	County	Code (7)			Current Use (Prior if he	2 na demolishe	(d)	ی	5	
MORRIS					USE ONLY)			RE	S.	ng demonsne	iu)			
Name of Monitoring Firm	Hired by Building Ov	vner (8)		ASC	M No.		Name	of Abatement (Contractor	(9)			oles (de la pensa)	
Observa A LL							A. M	AC Contracting	Inc					
Street Address							1	Address /reeland Ave.						
City, State, Zip Code	ty, State, Zip Code						City S	tate, Zip Code				-		
							nd Park, NJ 07	432						
Project Manager for Mon	itoring Firm			Telep	hone No.			none No.		License No				
0. 10. 10. 1	1				-		201-	262-5841		00156				
Start Date (10) 6/29/15		Schedul	ed Cor	npletion 13/13	Date (11)			of OSHA Moni ega Environme		ces Inc.				
Occupancy Status Durin Facility Closed/Vaca	g Abatement (Check	Only Or	ne)					Address						
☐ Abatement Performe	ed Outside of Normal	Facility	Hours	ent				luyer Street tate, Zip Code						
☐ Other - Describe:				-		_		ensack, NJ 076	806					
Scope of Work (Check A	III That Apply)									vol in the second		-		
≥3 sf or ≥3 if			enovat				K	Full Contain	ment with	Negative Pre	ssure	9		
≥160 sf or ≥260 lf			emoliti	on				Mini-Enclose Glovebag P	ıre	1 4 2				
-								Non-Exemple		Non-Friable	Proc	edure		
		4	Locat								OLIN COLOR		emen	t
Location			Normal				scription		and the same of th			T	/pe	1
Asbestos-Containing TO BE ABA			intena	100 miles (100 miles (Material (ACM) insulation.		Amount Specify	R		Enc	E
In Facili (13)		Cus	todial 5 (12)	stan?	,	surfa	cing, VA	T, or		F or LF)	Вэточа	Fopair	aps	Enclosure
(10)		Vee	N-	LAVIA		other	niscellar	eous)			Val	1	ncapsulate	sure
1	A	Yes	No	N/A										
15T AND 2 W	n Fluors			X			COMP	POUND		900 SF	х			
FAMILY ROOM				X		VAT	7	0.15		110 SF	X			
		-		X			-	95716		250 SF	X			
	SARvon						/	9871C	-	1905F	又	-		
7005 6 Hely 1285 14	ame of Registered Waste Hauler						Yards ste	Name	of Registe	red Landfill				
Newark Carting, Inc				04509)	/	0	IE.	SI PA Beti	nlehem Landf	ill Cor	p.		
City, State, Zip Code Newark, NJ 07105							al Date		tate, Zip C ethlehem,	ode PA 18015				
Completed by R. McDonald		Title	nnt.		***************************************	S	ignaturé	DMIS	01	Date		1		
13. MICDUIIAIU		Preside	EUL			-	1/	-1/11 Tor	ald (1	6/1	8/1	5	Mode

CHECK # 8777

Date of Notification (1)	1,-	The second second	Ī	Vame of	Building C	wner/O	perator (2) A, TV	Parameterio	APPR	OWEI)		The second
Agencies Notified	Type Notification		+	Street Ac	OLOB.	معرا مه العني	1000	9017	NIPE	st of Health	& Se	nior S	ervic	68
			1	.3.3	CLIA	הערני	180	200	1-	79/1911	Harch*			91115 3910
D EPA	☑ Initial ☐ Amended		1	City. Stat	te. Zip Coo	te			Date:	1 1	Tin		7.	-/
IN DOL	Amendment : Emergency (in		-			LHUST	ell a	20000	harman	Michigan July will		16;	18	=1
⊠ DOH	Justification)	13,001,19	11		Contact	~ ; ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			Tel	ephone Num	٨٥٢			-
□ DCA	☐ Cancellation				LITY INFO			THE PARTY OF THE P	1	-				
Name of Facility Where	Abatement is Taking	Place (3)		17,011	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	/NAMA IN	214	Type of Facility	(4)		440			
Boulevary	G-ARDEN	7.			LIF.			□ School (K-						
Street Address	as Course							Subchapter Other (i.e.)	8 (Othe	r than K-12)	huild	ione	home	
Dh (5)	PO CO4421				THE STATE OF THE S		-	etc.)				. 7.0		۵,
PAMRA.	5							Square Feet	#0	Floors よっ		idg. A		
County (6) 144850N				County C	Code (7) ISE ONLY)			Gurrent Use (Pr	ior if bein	ng demolishe	(b	7		
Name of Monitoring Firm	Hired by Building O	Wner (8)		ASC	M No.		Name	of Abatement Co	ntractor		رت.	=	117	
						واديال والمراجع والأمراكا	A.M.	AC Contracting In	C	36	7)		
Street Address		24 A TON A STAN A S						Address /reeland Ave,		32	25	3		
City, State, Zip Code							City, S Midle	tate, Zip Code ind Park, NJ 0743	2	53	Ç	્ર	(· ·)
Project Manager for Mon	Itoring Firm		:	Telepi	hone No.		Telepi	ione No.		License No		-5		
Start Date (10) 6 / 1 8	70-	Scheduled	i Com	pletlon/i	Date (11)		1	of OSHA Monitor	-	00156			TO AND	
6/18	113	**************************************	6/	20/1	5		Om:	ega Environment	al Servic	es Inc.				
Occupancy Status Durin El Facility Closed/Vac				ent .				Address luyer Street						
Abatement Performe Other - Describe:							City, S	tate, Zip Code				-	-	
	U(Th1. 2 1-2	***********					Наск	ensack, NJ 07606	5					
Scope of Work (Check A	и тпасирріу)													
125 ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf			novatio nolitio)(a	I Full Containme Mini-Enclosure Glovebag Pro-	ent with I	Negative Pre	SSUTE			
		-	-				Ē	Non-Exempted	(°) and	Non-Friable	Proge	edure		
			ocatio										ëmenl /pe	
Location Asbestos-Containing		Used	Solel	y by	Achae		scription	of Material (ACM)	١,				T	\vdash
TOBEAB	ATED	f Mair	itenan dial Si		(1.0.	thermal	system	s insulation,	(amount Specify	7	Z	Enci	E E
In Faci (13)			(12)				cing, VA Hiscellar		5	For LF)	Encue	Repair	Encapadab	ennscious
t constant to the constant to		Yes	No	N/A							=	,	뮰	8
CRAWL SP	ACE LEFT		1	×	WI-7	10	IPE	W PUI	1	ید در	×			
CRAWL SOM	LE RIGHT			×			102		1	cho cr	×			
										~.1+************************************	مسكم			
						10000								
Name of Registered Was	te Hauler			IDEP VV			Yards	Name of	Registe	red Landfill			-	
Newark Carting, Inc			l ne	04509		of Was	1	IESI	PA Bet	lehem Land!	n Cor	p.		
City, State, Zip Code Newark, NJ 07105				rediffere mellemine		Dispos	ial Date	City, Sta		ode PA 18015				
Completed by		Title				Is	ignatyré	P.M. Jone	21	Dat	2/	1		
R. McDonald		Presider	nt				0	C. III Jone	Bol	6	//	8/1	5	Į.

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

Date of Notification (1) 06/16/2015			Commission of Commission		Building O e Townsl			(2)	2015 J	UN 22	AM 3	: 2	5	
Agencies Notified EPA	Type Notification		-	Street Ad 423 Bi	ddress uckelew /	Avenue	9	1	ISBE:	STOS Lititi	CUNT	RO		
DEP DOL .	Amended Amendment				te, Zip Cod e Townsl		0883	1		lo K	TMG			
DOH DCA	justification) Cancellation		The state of the s	Name of Jerry	Contact Tague			7	Te	lephone l	Viimher			
			-	FACI	LITY INFO	RMATIO	N							
Name of Facility Where Monroe Middle Sch	Abatement is Takin 100l	g Place (3)				-	Type of Facilit						
Street Address 1629 Perrineville F	Road						100	School (k Subchapt Other (i.e etc.)	er 8 (Ott	ner than k & comme	(-12) ercial bu	ilding	s, hon	nes.
City (5) Monroe Township								Square Feet 80000	2	of Floors	ACCOUNT OF THE PERSON OF	Bldg. 50+	Age	
County (6) Middlesex County				County (Code (7) USE ONLY)			Current Use (F Middle Sch	Prior, if be	eing demo	olished)			
Name of Monitoring Firm McCabe Environme	Hired by Building ental Services,	Owner (8) LLC		ASCN 0011				of Abatement C Construction			on, Inc			
Street Address 464 Valley Brook A	venue							Address Route 46 S	uite 3E)	-			
City, State, Zip Code Lyndhurst, NJ 0707	71							ate, Zip Code va, NJ 0751	2					
Project Manager for Mor John Chiaviello	nitoring Firm			Telephor 201-43	ne No. 38-4839			one No. 256-7010		License 0666				
Start Date (10) . 06/27/2015		Schedule 06/28/2	ed Con 2015	npletion [Date (11)			of OSHA Monito		estoratio	n. Inc			
Occupancy Status Durin	g Abatement (Chec	k Only On	e)					Address						
Facility Closed/Vac						1		Route 46 S	uite 3D)				-
Abatement Perform Other – Describe:	ed Outside of Norm	nal Facility	Hours	nent S		_	City, St. Totov	ate, Zip Code va, NJ 0751	2					
Scope of Work (Check A	Il That Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		penerso.	enova emolit				7 7 7	Full Contain Mini-Enclose Glovebag Po	ire rocedure					
		Τ .						Non-Exemp	led () at	IO NOTHE	ISDIE M		ure itemer	nt
1		10 0.0000	Locati Iormal			******	***************************************	0.020			and the second		теппе Гуре	34
Location Asbestos-Containing TO BE AB. In Facil (13)	Material (ACM) ATED	Use Mai	d Sole intenai odial S (12)	ly by nce/	(i.e. th	s Contai	ystems ng, VAT	aterial (ACM) insulation, , or	1 (Amount Specify F or LF)	Remova	Kepair	Encapsulate	Enclosure
		Yes	No	N/A					er akker den erte akker.		-	- Incompany	ate	0
Room			X			Pipe	Elbow	rs .		8 LF	X			
Exteri	Or 		X			3 Fasc	ia Par	nels	- 4	27 SF	X			
70												-		+
Name of Registered Was	ste Hauler	1	IN	JDEP W	aste	Cubic Ya	ards	Name (of Regist	ered Land	4611	1_		1
Bako Construction 8		nc	Н	auler ID 0889		of Waste	0.000		D.W.S	orou Lan	J11111			
City, State Totowa, NJ		Y	-			Disposa 06/29/2		City, St Morri	ate sville, f	PA				
Completed by Damir Valjevac		Title Proje	ct Ma	anager		Sig	nature Qui	V Jake	re C	THE PARTY AND ADDRESS OF THE PARTY AND ADDRESS	Date 06/16	/201	5	

Date of Notification (1)					Building C		perator	(2)							
June 17, 2015			,	Jennife	er Renna	l	45.7	JUN 2	2 6 2		Check #	‡ 217°	1		
Agencies Notified	Type Notification		91 8	Street Ac 36 Sale	idress em Lane		4:4:		- 14.5 2	- 3(
EPA DEP DOL	Initial Amended Amendment	#			te, Zip Cod ilver, NJ		9 Ĝ	: 1.10	EHRING	nu.					
DOH DCA	Emergency (justification) Cancellation	including	1.0		Contact er Renna	n .				Tele	phone Nur	mber			
	- Carroonation			FACIL	LITY INFO	RMATI	ON					136-53/-			
Name of Facility Where Residence	Abatement is Takin	g Place (3)						-	of Facility (4) School (K-12)						
Street Address 36 Salem Lane									Subchapter 8 Other (i.e. pri	(Othe			lings,	home	es,
City (5) Little Silver									e Feet	# of	Floors	8 8	ldg. A	ge	
County (6) Monmouth				County C	Code (7) USE ONLY)				nt Use (Prior dence	if bei	ng demolis	hed)			
Name of Monitoring Firm Management & En				ASCM	l No.				tement Contr						
Street Address PO Box 341								Addres	ss Avenue						
City, State, Zip Code Chesterfield, NJ 08	515						City, S	State, Zi	p Code ide, NJ 08	052					
Project Manager for Mor Bill Weisgarber				Telephor	ne No. 98-4070		Telepi	none No 755-0	0.	-	License N	10.			
Start Date (10)		Schedule	d Con	npletion l	ee veen a		Name	of OSH	A Monitor		00042				
July 7, 2015		July 11,		5					lytical, Inc). 					
Occupancy Status Durin		- 14 5 0 H	(15) (15)					Addres	ss 130 North	1					
	cated During Entire ned Outside of Norm						500000000000000000000000000000000000000		p Code son, NJ 08	077	-				
Scope of Work (Check A							Ollil	iamini	5011, 140 00	1011					-
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		-	enova emolit					Mir Glo	I Containmenti-Enclosure	edure				_	
							- L	il Noi	n-Exempted	() an	u Non-Fila	DIE FIO	70 N.	emeni	
,		100	Locati Iormal			D.	scription	6						<i>r</i> ре	
Locatio Asbestos-Containing TO BE AE In Fact (13)	g Material (ACM) BATED ility	Used Mai Cust	d Sole ntena odial S (12)	ly by nce/ Staff?		tos Cont thermal surfa	taining I	Material is insula AT, or		(5	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
0.15		Yes	No	N/A		l _m	sulatio			11	65 SF	X			
2nd Fl	oor		XXX			ın	sulatio)N		40)) SF	A			
Name of Registered Wa	ste Hauler		N	IJDEP W	/aste	Cubic	Yards		Name of R	Registe	ered Landfi	11			<u> </u>
Freehold Cartage, I			H	lauler ID 2265		of Wa	ste		Cumber				II		
City, State Freehold, NJ							sal Date 2015	•	City, State Newburg						
Completed by Christina Lynch		Title Opera	ation	s Mana	ager	5	ignatur //	e A	100/2		1,522	ate /17/2	015		

Date of Notification (1) 6/16/2015					f Building TE OF N				ES C/O AL	BERT	O RODR	IGUE	Z		4.7
Agencies Notified	Type Notification			Street A 4501 [ddress	/ENUE	 E				Abar	UN 2	2	Bao	
DEP X DOL	Amended Amendmen				ate, Zip Co		J 070	47			ASSE)		R.J. A.	3. 5.
➤ DOH DCA	Emergency justification) Cancellation				f Contact RTO RC	DRIG	UEZ			Tel	ephone Nu	mber-	A.S.	AG.	hC.
				FACI	LITY INFO	ORMAT	ION								
Name of Facility Where RESIDENCE	Abatement is Takir	ng Place (3	3)					T)	ype of Facility School (K-	12)					
Street Address 200 59TH STRÉET	Г							×	Subchapter Other (i.e.) etc.)				ldings	, hom	es,
City (5) WEST NEW YORK	(S	quare Feet	# 0	f Floors	E	Bldg. /	Age	
County (6) HUDSON					Code (7) USE ONLY)		C	urrent Use (Pri	or if be	ing demolis	hed)			
Name of Monitoring Firm	n Hired by Building	Owner (8))	ASCN	ЛNo.				Abatement Co			IG, IN	NC.		
Street Address									dress ELAND AV	ENUE					
City, State, Zip Code									e, Zip Code VA, NJ 075	12					
Project Manager for Mor	nitoring Firm			Telepho	ne No.		Telep	hon			License 1	No.			
Start Date (10) 6/27/2015		Schedul 7/1/20		npletion	Date (11)		Name	e of (OSHA Monitor AS (9) ABC		00434				
Occupancy Status Durin	o Abatement (Che						Stree			/ V L		-			
Facility Closed/Vac Abatement Perform	ated During Entire ned Outside of Norr	Period of	Abaten	nent s					e, Zip Code						
Other - Describe:															
Scope of Work (Check A	All That Apply)						10.								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demoli	510k(D)374					Full Containm Mini-Enclosure Glovebag Pro Non-Exempte	e cedure				·a	
		Is	Locat	ion										emen	t
Location	n of	1	Norma	lly		De	scriptio	n of				_	T	/pe	
Asbestos-Containing TO BE AB In Faci (13)	ATED lity	Ma Cus	ed Sole intena todial ((12)	nce/ Staff?	Asbes (i.e.	thermal surfa	taining l system cing, V/ niscella	ns in AT, d		(\$	mount Specify or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A								-			
BASEM	ENT		X			PIPE II	NSUL	ATI	ON	1:	50 SF	X			
Name of Registered Was	ste Hauler			JDEP W	/aste	Cubic	Yards		Name of	Registe	ered Landfil	1			
TWO BROTHERS		3	1 (9)	lauler ID 8743	No.	of Wa	ste				NAGEME		3.R.C).W.	S.
City, State TOTOWA, NJ						Dispos 17/1/2	sal Date	9 .	City, Stat		LE, PA				
Completed by VIVECA RAMOS		Title PRO	JECT	COOF	RDINAT		ignatur	e	14 /	n	1.000	ate 16/2	015		

Date of Notification (1) 6/18/2015					f Building					2015	HIE	22				
Agencies Notified	Type Notification			Street A	and the same of the same					1	JUR	12	File .	5:	18	
EPA DEP DOL	Initial Amended Amendment			City, Sta	ate, Zip Co ON, NJ	ode				* <i>31</i>) 3		EH.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	CL	
X DOH X DCA	Emergency justification) Cancellation	, ,			f Contact N L. PE	RKINS				_	ephone			**		
Nome of Facility Wilson		51 10		FACI	LITY INFO	ORMATI	ON								¥2.	
Name of Facility Where SCHOOL #5	Abatement is Takin	g Place (3)						of Facility (School (K-1	NO BOS						
Street Address									Subchapter	8 (Oth						
136 VALLEY ROAI)					55			Other (i.e. p etc.)	orivate i	& comm	nercial	buil	dings,	hom	es,
City (5) CLIFTON								Squa	ire Feet	# 0	f Floors		В	ldg. A	\ge	
County (6) PASSAIC	100				Code (7) USE ONLY)			ent Use (Prid MENTAR				d)			
Name of Monitoring Firm AHERA CONSULT		Owner (8)		ASCN	ИNo.				atement Cor		100	TING	, IN	С.		
Street Address PO BOX 385								Addre	ss _AND AV	ENUE						
City, State, Zip Code OCEANVILLE, NJ	08231						City, S	State, Z	ip Code , NJ 0751		<u> </u>					
Project Manager for Mor	nitoring Firm			Telepho	ne No. 52-1833		Telepi	none N	0.	_	Licens		ž.			
Start Date (10)		Schedule							HA Monitor		0049	14				
6/29/2015		7/17/20	15				SAN	ME AS	(9) ABO	VE						
Occupancy Status Durin			250				Street	Addre	SS							
Facility Closed/Vac Abatement Perform Other – Describe:	ed Outside of Norn	nal Facility	Hours	3	PM		City, S	State, Z	ip Code			DC 8 (1750) 8				
Scope of Work (Check A	II That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	enova emolit				×	Mir	II Containme ni-Enclosure ovebag Prod n-Exempted	edure	*				9	
		Is	_ocati	on				_ 110	T Exomptor	() air	3 140111	nabic		Abate		E .
Location			ormal Sole			Des	scription	of				-		Ту	ре	
Asbestos-Containing <u>TO BE AB</u> , In Facil (13)	ATED	Mair Custo	ntenar	nce/	Asbest (i.e.		aining M systems cing, VA niscellar	s insula T, or	(ACM) ation,	(8	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
50, 50, 50, 50, 50, 50, 50, 50, 50, 50,		Yes	No	N/A											е	
BOILER	ROOM	X					ER R				20 SF		X			
	- Pagaret						ER RO				00 LF	_	Х			
						B	BRICK			8	0 SF	_	Х			
Name of Registered Was	te Hauler		IN	JDEP W	aste	Cubic '	Yards		Name of F	Reniste	red Lan	ndfill				
TWO BROTHERS (Н	auler ID 8743	200	of Was			WASTE				T G	.R.C	.W.S	S.
City, State TOTOWA, NJ						Dispos 7/17/2	al Date		City, State		_E, PA	Ą			- oules:	
Completed by VIVECA RAMOS		Title PROJ	ECT	COOF	RDINATO		ignature	ne A	aka	ny		Date		15		



17	-	14.			
1 3	1	1	- 1	 , these	
	-				1 5

Date of Notification (1) 6/18/15					Building O ury Heig				U	16 JI	N 22	712				
	e Notification		- 1 3	street Ad	dress ademy A	Ave.			<u>F.</u> .	vige :	7.2	£.5.	2.0	19	5000-100	_
EPA DEP DOL	Initial Amended Amendment #_				e, Zip Cod ury Heig		NJ 0809	97		ái	ICEN:	71/1	G	UL		
☑ DOH ☐ DCA	Emergency (in justification) Cancellation	cluding		lame of	Contact		Section 1			Tele	ephone Nu	umbe	r			
				FACIL	ITY INFO	RMAT	ION			-						
Name of Facility Where Abate Woodbury Heights Elm		Place (3)			.5			× S	f Facility (4 chool (K-1) ubchapter	2)	or than V	12)				
Street Address 100 Academy Ave.	*	•						O et	ther (i.e. p	rivate 8	k commerc					s,
City (5) Woodbury Heights NJ (08097							Square 1000-		# of	Floors		35	ig. Ag +	je	
County (6) Gloucester	12			County C STATE U	ode (7) ISE ONLY)			Curren	t Use (Prid	or if bei	ng demoli:	shed)			
Name of Monitoring Firm Hire N/A	ed by Building Ov	wner (8)		ASCM	No.			of Abate	ement Con	tractor	(9)			•		
Street Address								Address Box 32								
City, State, Zip Code								State, Zip	Code NJ 080	91						
Project Manager for Monitoria	ng Firm		1	Telephor	ne No.			hone No 753-98			License 00727					
Start Date (10) 7/1/15		Schedule	d Com	pletion [Date (11)		Name		A Monitor							
Occupancy Status During Ab			e)				Street	t Address	S							
Facility Closed/Vacated Abatement Performed C Other – Describe:	During Entire Pe	eriod of A	batem					State, Zip								
Scope of Work (Check All Th	nat Apply)															
≥3 sf or ≥3 lf ≥ 160 sf or ≥260 lf			enova emoliti	20000000				Mini Glov	Containm i-Enclosure vebag Pro n-Exempte	e cedure					•	
		l lo	Locati	on								T		Abate	ment	
Location of Asbestos-Containing Ma TO BE ABATE In Facility (13)	terial (ACM)	Use Mai	ormalid Sole ntenar odial S (12)	ly ly by nce/		tos Co therm sur	Description Intaining Ital system Itacing, Var Itacing, V	Material ns insula AT, or		(Amount Specify F or LF)		Removal	Ty Repair	e Encapsulate	Enclosure
Doom 100	1	103	140	atsattar		floo	r Tile / r	maetic			900 sf	-	ζ			
Room 103				X		1100	i ille / i	Hastic		,	000 31					-
							State of the state of					\rightarrow		-		-
												_				_
												15				
Name of Registered Waste I United Containers	Hauler		H	IJDEP V lauler ID 2459		SS - SS	oic Yards Vaste		G.R.O.		ered Land	ווזכ				
City, State Elm NJ							oosal Dat	e	City, Sta Morris		J 19067	7				
Completed by		Title				1.,5	Signatu	re /	1		T.	Date				
Anthony T Perna		Presi	dent	-1.11			\mathcal{L}					6/18	3/15)		



& Emergency &

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

CK-4923

Date of Notification (1) 6/18/15					Building Ow a Jenkins				TETS 1111		5-	4.7				
Agencies Notified	Type Notification		855	treet Ad 79 Cle	dress eveland A	ve			PR JUH	22	AH 2	: 40	}			
EPA DEP DOL	Initial Amended Amendment				e, Zip Code erlin NJ (1		3.11		Sign.	701				
DOH DCA	Emergency (i justification) Cancellation	ncluding		ame of						Tele	phone N	umbe	r			
				FACIL	ITY INFOR	MATI	ON									
Name of Facility Where A Amanda Jenkins Pr Street Address		Place (3)		111.5% 11.5%				Sc St	Facility (4) chool (K-12) ubchapter 8	:) 3 (Othe	er than K-	12)				
379 Cleveland Ave								× Of	ther (i.e. pr c.)	ivate 8	commer	cial b				\$,
City (5) West Berlin NJ 0809	91							Square 1000-	-	2	Floors		35	g. Ag +	e	
County (6) Camden			(:	County C	ode (7) SE ONLY)			Curren	t Use (Prio	r if bei	ng demoli	ished)				
Name of Monitoring Firm N/A	Hired by Building (Owner (8)		ASCM	No.		The state of the s	of Abate	ement Cont	ractor	(9)		(19-3)			
Street Address								Address								
City, State, Zip Code							City, S	State, Zip		01						
Project Manager for Mon	itoring Firm		T	Telephor	ne No.		Telep	one No		71	License					
Start Date (10)		Scheduled	d Com	pletion [Date (11)			753-98 of OSH	A Monitor		00727					
6/19/15		6/20/15					sam	Address					-			
Occupancy Status During							Sileei	Address	•							
Facility Closed/Vaca Abatement Perform Other – Describe:	ed Outside of Norn	nal Facility	Hours	ent		_	City, 5	State, Zip	Code							
Scope of Work (Check A	II That Apply)	[Г	7	Cantalana	mt sedtl	Nogotive	o"Dros	CLIF			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enovat emoliti					Mini Glov	Containme -Enclosure vebag Prod -Exempted	edure					e	
		lo.	Locati	on					- 1					Abate	ment	
Location Asbestos-Containing TO BE AB In Faci (13)	Material (ACM) ATED lity	Used Mai	ormali d Solei ntenar odial S (12)	y ly by nce/		os Cor herma surf		Material ns insula AT, or		(Amount Specify F or LF)		Removal	Repair	e Encapsulate	Enclosure
basem	ont	165	140	X		floor	Tile / r	nastic		(300 sf	>	ς .			
Daseill	- Ioni	-		^									/			
Name of Registered Wa	ste Hauler		0.00	JDEP V	200000000000000000000000000000000000000	P. S. W. S. S. S.	ic Yards		Name of		ered Lan	dfill				
United Containers				lauler ID 2459	NO.	of W			G.R.O.							
City, State Elm NJ						Disp 6/22	osal Dat 2/15	e	City, Stat Morrisv		J 1906					
Completed by Anthony T Perna		Title Presi	dent				Signatu	TR S		_		Date 6/18		5		

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

Date of Notification	(1)	1.1			r/Operator		1717	7. 5.			
6-17-15			Janie W	right	& John	Ranson	0.3000				
Agencies Notified	Type Notificati	201100 N 200	reet Addre	79 (TV)	62 0/67		275 THE	ese.	F/2		
[]EPA	[X]Initial		438 Cha	pman S	treet		AR IN	26 1	# 2	1	3
[]DEP	Notificat	ion Ci	ty, State,	Zip Code			441.23			-	
[X]DOL	[]Amended Notificat	ion	Irvingt	on,NJ,	07111		4		4.5	Ĝ	
[X]DOH	110 6111000		me of Cont	act		Telephon	e Number		15.7		
[]DCA	[]EMERGENCY		Janie W	right	& John			J			
No To reason more	[]Cancellati	on R	anson								
				ITY INFOR	MATION						77.00
Name of Facility Who Same as above		Taking	Place (3)			Type of Facil	524	r than	K-12	١	
Street Addres						[X]Other (i.e., priva uildings, h	te & co	ommer		
						Square Feet	# of Floo	rs Bl	dg. A	age	
City (5	Co	ounty (6)	Essex	100 Brown (100 mg) 110	Code (7) USE ONLY)						
				(SIAIE	OSE ONLI)	Current Use (Prior if be	ing der	nolis	hed)	
Name of Monitoring F Owner (8) N/A	Firm hired by Bu	ilding	ASCM No.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		ment Contractor		0			
Street Address					eet Addres	703 m					
				8	6 Chris	topher St	•				
City, State, Zip Coo	le			1 1000000	y, State,						
				M	ontclai	r, NJ 070	42				
Project Manager for	Monitoring Firm	n Telej	phone Numbe		ephone Numi 973)744		L	icense		er	
Scheduled Start Date 6-26-15 Month Day Y Occupancy Status Du	ear Mont	6-29	y Year	N/.		# E #	1201				
[X]Facility Clo of Abatemen []Abatement Pe	sed/Vacated Dur t rformed Outside	ing Enti	re Period		eet Addres						
[]other - Desc	ribe: «OffHours) ribe: «Other Occ										
Scope of Work (Check	all that apply	7)									
[X]>3 sf or []>160 sf			Renovation Demolition		[]Mini- [X]Glove	Containment wi Enclosure bag Procedure riable Procedu		Pressu	ire		
		Too	Is ation					Aba	temer	_	
Location Asbestos-Cor Material TO BE AB In Facil (13)	taining (ACM) ATED	Nor Sc By ten Cus Staf	mally sed lely Main- ance/ todial f (12) No N/A	Asi (i.e insula	Description bestos-Con-Material (c., thermal tion, surfither misce	taining (ACM) systems acing, VAT,	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	ENCAPSUL .	ENCHOSURE
Basement			x	Pipe :	Insulat	ion	115 1:	E X			
Name of Registered V	Jasto Paulos	ht TD	EP Waste	Cubic 1	Vardo	Name of Regi	stored Tand	fill			
AZTECH MANAG		Hau:	Ler ID No.		te 1.5	G.R.O.W.					
City, State Montclair, NJ	07042				al Date 0-15	City, State Morrisvi	lle, PA	1906	7		
Completed By (Print Constantine V		siden			Signature			Date			

Print Form

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

ch#3666

Date of Notification (1) 06/18/2015		Nam Nev	e of Building v Provider	Owner/once Box	Operator ard of E	(2) Educa	tiốnis ii	IU 00 I	tik o.	0.5			
Agencies Notified Type Notification	1	Stree	et Address Elkwood							CE			
EPA Initial Amended Amendmer		City,	State, Zip C v Provider	ode	J 07974		A Suc		HQ.				
X DOH ☐ Emergency justification ☐ DCA ☐ Cancellation)		e of Contact nes Trenci					Teleph	one Nur	nber			
Name of Facility Where Abatement is Tak	ng Place (3)	F	ACILITY INF	ORMAT	ION	Туре	of Facility (4)					
Middle/High School Street Address 35 Pioneer Drive							Other (i.e. p	2) 8 (Other the private & co			ldings	, hom	es,
City (5) New Providence							etc.) e Feet	# of Flo	ors		3ldg. /	Age	
County (6) Union			nty Code (7) TE USE ONL	n		Curre		or if being o	demolish	ed)			_
Name of Monitoring Firm Hired by Building Garden State Environmental	Owner (8)	AS	SCM No.			of Abat	tement Cor	ntractor (9)					
Street Address 555 Broad Street					Street	Addres							
City_State, Zip Code Glen Rock, NJ 07452					City, S	tate, Zi	p Code Park,NJ	07424					
Project Manager for Monitoring Firm Bruce Wolf		100000000000000000000000000000000000000	ohone No. -652-1119)	Teleph	none No 225-84).	Lic	cense No	0.			
Start Date (10) 06/29/2015	Scheduled (Completi			Name	of OSH	IA Monitor	Laborato					
Occupancy Status During Abatement (Che	CONTRACTOR					Addres		Laborate	21162				
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor	Period of Aba	tement ours				1.500	22 west						
Other - Describe: Scope of Work (Check All That Apply)							07083						
≥3 sf or ≥3 If ≥160 sf or ≥260 If	Total Control	ovation olition	r.			Full Min Glo	Containme i-Enclosure vebag Proc					re.	
	140000000	cation		5							Abate	ement	ŧ
Location of Asbestos-Containing Material (ACM)	Used S	nally olely by	Asbes		scription taining M		(ACM)	Amou	ınt		T 13	/pe	
TO BE ABATED In Facility (13)	Custodi (1	nance/ al Staff? 2)	(i.e	thermal, surfa	systems cing, VA niscellan	s insulat T, or		(Spec SF or I	ify	Removal	Repair	Encapsulate	Enclosure
front&rear attic	Yes N	lo N/A		pipe e	lbows(v	wran)		8sf			X		
				p.po o	100110(1	wiapj	-	- 031			^		
N. C.													
Name of Registered Waste Hauler Lilich Corporation		NJDEP Hauler	ID No.	Oubic of Was	Yards ste			Registered V.S. Land		- 200			
City, State Woodland Park, NJ		18724		Dispos n/a	sal Date		City, State Morrisvi)			-		
Completed by Momo Glavatovic	Title vice pre	sident			Signature	G	R		Dat 06/		2015		

Ch#3664

Date of Notification (1) 06/17/2015					Building (Twp. B				n eer-						
Agencies Notified	Type Notification		100	Street A	ddress tford Ro	ad			6.12	out z	ZAH	2: 2	E		
EPA DEP DOL	Initial Amended Amendment				ite, Zip Co , NJ 080							5.0			
X DOH X DCA	Emergency justification) Cancellation				f Contact opher Ru	usso				Tel	ephone Nu	imber			
				FACI	LITY INFO	DRMATI	ION	97.10					7		
Name of Facility Where		g Place (3)						Ту	pe of Facility	(4)					
Delran Middle scho	001							×	School (K-						
Street Address 905 South Chester	Ave								Subchapte Other (i.e. etc.)				lding	s, hon	nes,
City (5) Delran					2			Sq	uare Feet	# 0	f Floors		Bldg.	Age	
County (6) Burlington					Code (7) USE ONLY)				rrent Use (Pri	ior if bei	ng demoli	shed)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	/ No.		Name		batement Co	ntractor	(9)				
Westchester Enviro				0012	.7			n Co	orporation						
307 N. Walnut Stre	et								Bride Ave						
City, State, Zip Code West Chester, PA	09380								, Zip Code nd Park, N	J 074	24				
Project Manager for Mor Paul McCaa	nitoring Firm			Telepho 610-43	ne No. 31-7545		Telepi 973-		No. 5-8400		License 01104	No.			
Start Date (10) 06-29-2015		Schedule 07-12-2		pletion	Date (11)				SHA Monitor		ratories				
Occupancy Status Durin	g Abatement (Chec	k Only One	e)		-		Street								
	ated During Entire	1000-1000/1070-00-000		ont					oute 22 We	st					
land 1	ned Outside of Norn	nal Facility	Hours	ient			60		, Zip Code NJ 07083						
Scope of Work (Check A	All That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			enova emolit				>	×	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure				ıre	
		le	Locati	on							Mariana, a		77	teme	nt
Location	n of	N	ormal	ly		De	scription	n of					_	уре	
Asbestos-Containing	Material (ACM)	Used	d Sole ntenar	ly by		tos Con	taining N	Mate	rial (ACM)	А	mount			m	_
TO BE AB	The state of the s		odial S		(i.e.		system cing, VA				Specify or LF)	Rer	7	nca	Enc
(13)			(12)			other r	niscella:	neou	is)	31	OI LF)	Remova	Kepair	Encapsulate	Enclosure
70000	10	Yes	No	N/A								<u>a</u>		ate	Ге
1st flo	or			X		rc	of dra	in		1	8 LF	×			
1st flo	or			X		rc	of dra	in		6 LF	gloveba	g x			
	2.5													-	
Name of Registered Wa	ste Hauler		N	JDEP W	l /aste	Cubic	Yards		Name of	Registe	ered Landf	īll		-	
Lilich Corporation				auler ID 3724	No.	of Wa n/a	ste		G.R.O.						
City, State Woodland Park, NJ						Dispo n/a	sal Date)	City, Sta Morris		A				
Completed by		Title				1 5	Signature	e /	1	,		Date			
Momo Glavatovic		vice p	resid	lent				(X		(06/17	201	5	

MO 227485 40290

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:20/N.J.A.C. 7:26-2.12)

Date of No 06/15/201	otification (1):				Iding O	wner/Operator (2)								
Agencies	Type Notifica	tion	Street	Addre	ss:				610	JUN 22	TR	-		
Notified	□mitial			nafly R	load Zip Code				-	~ ;	AM	£ .	1_	
ØÉPA □ DEP	☐ Amended Amendment#:				NJ 0763									
₽DOL	☐ Emergency		0.0000000000000000000000000000000000000	of Co				Telephon	e Numl	per:	- A	400	1.	
₽ĎOH	(including justification		Mich	ael Hur	iken			Î	1			3+4		
□DCA	☐ Cancellation	1												
21 05						FACILITY INFO								
	Facility Englev		igh Sch	1001				e of Facility (4):						
276 Knick	terbocker Road	d						chool (K-12) ibchapter 8 (Other than K	(-12)					
City/ (5)		Count				y Code (7):		ther (i.e., private & comn		uildings, ho	omes, e	tc.)		
Englewoo	d	Berge	n		07631		Squ	are Feet:		# of Floo	rs:			
							Bld	g. Age						
21. (2)	f 1: 1 F2:		11 5			1	Cur	rent Use : School						
	Monitoring Fir ter Environme		d by Bu	ııldıng	Owner:	ASCM No.: 00127		ne of Abatement Cont		9):				
C+	1					00127		ex Development, In	ic.					
Street Add	iress: h Walnut Str	eet					Stre	et Address:						
0071,010	ii ii uiiiui bu	001					658	8 Rutgers Place						
	, Zip Code:							, State, Zip Code:						
West Ches	ster, PA 19380)					Par	ramus, NJ 07652						
	anager for Mo	nitoring	g Firm:			Telephone No.:	Tele	ephone No.:	Lice	nse No.:				
Mathew	Abraham					610-431-7545	(973	3) 350-0101	012	15				
Start Date 06/20/15	(10):		Schedul 17/31/1		pletion	Date (11):		ne of OSHA Monitor: ro Analytical Laborate	ories					
	Status During A			853				et Address:					*****	
☐ Facility C	Closed/vacated D	Ouring E	ntire Per	riod of A	Abatemen	t		West 36 th Street, Sui	te 203					
Describe:	nt Performed Ou	itside oi	Normai	racility	Hours			v, State, Zip Code: v York, New York, 10	0018					
☐ Other Describe:							100							
	ork (Check all t	hat appl	y):											_
□ > 3 sf or □ > 160 sf	$0.02 \le 3 \text{ lf}$ or $0.02 \le 260 \text{ lf}$				₽ Keno			□ Full C ⊉Mini- ⊒Glove	Enclos	ment with ure ocedure	Negat	ive Pr	essure	•
			Ie	Locati	ion			□ Non-E	xempte	d (*) and N	lon-Fr	iable P Abate		
L	ocation of		N	Vormal	ly			ion of					/pe	L
Asbestos-0	Containing Ma	iterial		d Sole		Asbestos Con (i.e., therm	taining al syste	g Material (ACM) ems insulation,					ITI	
TO	(ACM) BE ABATED			ustodi		surfa	icing,	VAT, or		mount	Removal	Re	Encapsulat	Enclosure
I	N Facility			Staff?		otner	misce	llaneous)		pecify or LF)	1078	Repair	psu	nso
	(13)		Yes	No	N/A				31	OI LI')	=	8	lat	9.1
CRAWL	SPACE			X		ELBOW & FIT	TINC	G INSULATION	200	LF	*			
MECHA	NICAL RO	OM		X		ELBOW & FIT	TINC	INSULATION	40 I	F ·	* -			
TONNE SPACE	L CRA	WL		X		PIPE INSULA	TION		40 I	_F	*			
TRI-STAT	Registered Was					P Waste Hauler ID	No.:	Cubic Yards of Waste: 30	MIN	e of Regis ERVA OC, INC.			l: ERPR	ISES
City, State Bronx, NY	10474			Dispo	sal Date): 		City, State: Waynesburg, OH 44	4688					
Completed Sylvester (l By: Oraegbunam				Title: Presid	ent	Signa	ature:		Date: 06/15/20	15			

Cherk# 1606

Date of Notification (1) 06/16/2015					Building (perator	(2)	व	8 C F	JH 22 /	N -			
Agencies Notified	Type Notification			Street Ad	ddress				Ąį	-, = :		-t	- /		
EPA DEP	Initial Amended				RD AVE					27	1,20	1	 		
× DOL	Amendment Emergency		- 1		ON HEI		NJ 08	035			*****	8			73-72
DOH DCA	justification) Cancellation	and the control of th	1	Name of BRIAN	Contact					Tel	ephone Nur	ber 7			
Name of Facility Manage	Ab ata as a tip Tallia	- Di (0)	_	FACI	LITY INFO	DRMATI	ON	Т	F 104 - /	4)					
Name of Facility Where RESIDENTIAL	Abatement is Takir	ig Place (3)						Туре	of Facility (4 School (K-1	55					
Street Address 110 3RD AVE.								×	Subchapter Other (i.e. p	8 (Oth			dings,	home	es,
City (5)									etc.) are Feet		Floors		ldg. A	0	1363
HADDON HEIGHT	S		_					227	2472	2			1		
County (6) CAMDEN	XI			County ((STATE L	ise only				ent Use (Prid SIDENTIA		ng demolish	ied)			
Name of Monitoring Firm CONNELL-GREEN		Owner (8)		ASCM	l No.				atement Con D ENVIRO			RVI	CES	INC.	
Street Address 904 KINGS ARM D	RIVE			-			Street 570		ess MS RUN						
City, State, Zip Code DOWNINGTON PA	OOWNINGTON PA 19335								Zip Code A HILL NJ	08062	2				
Project Manager for Mor RICK PELLISSER	40						Teleph 610-		No. 4676		License N 01145	0.			
Start Date (10) 06/18/2015	Com	pletion [Date (11)		Name EMS		SHA Monitor								
Occupancy Status Durin	ng Abatement (Che	ck Only One)				Street		ess 130 NORT	п					
Facility Closed/Vac Abatement Perform	ned Outside of Norr	nal Facility H					80000000000000	MODELLINES A	Zip Code	11					
Scope of Work (Check A		DEIVIENT					CINI	MAV	INSON NJ	0807	7				
≥3 sf or ≥3 lf	на гнаструју	× Re	nova	tion				F	ull Containme	ent with	Negative F	ressu	re		
≥160 sf or ≥260 lf		De	molit	ion				G	ini-Enclosure lovebag Prod	edure					
		T					×	⊴ N	on-Exempted	d (*) an	d Non-Friab	le Pro	cedur Abate		t
Locatio		1	ocati ormal	ly			scription						Ту	ре	
Asbestos-Containing TO BE AB	ATED		tenar	nce/		thermal	system	s insu	al (ACM) lation,	(8	mount Specify	Re	R	Enca	E
In Faci (13)			(12)	ziaii:			cing, VA niscellar)	SF	or LF)	Removal	Repair	Encapsulate	Enclosure
		Yes	No	N/A								_		ite	e
BASEM	ENT			X		FLC	OR T	ILE		39	96 SF	X			
								-	-			-			_
Name of Registered Wa		Transport Day (1900)	1000	JDEP W lauler ID		Cubic of Was	Yards		250000000000000000000000000000000000000		ered Landfill				1
ASSURED ENVIRONMENTAL SERVICES				34895		6					ANDFILL				
City, State MULLICA HILL NJ						06/19	sal Date 0/201 <i>5</i>		City, State						
Completed by RON SWANSON							Signature	all	Mark	W) Da	ite 6/16/2	2015		
ASB-41 (R-06-08)						Do no	ot use	this form for	asbes	tos licensur	e exer	npted	activi	ties.	

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1)	June 17, 2015				Name of	f Building (Owner/Oper Jerry I	ator (2) Kozlowski	NECELVI)	700	00		
Agencies Notified [X] EPA [] DEP	[] Ame	l Notificanded Not	tification		Street A	ddress		ay Divu.	JUN 22 AM	2: 2	2		
[x] DOL	[x] Emer		ncluding		City, Sta	ne, zip coi	Lavall	ette, NJ 08735	& LICENSIN	IG KU	IL.		
[] DCA	1021	ication) ellation			Name of	f Contact Frank	Disantis		Telephone Number		-+		
				FAC	CILITY I	NFORM	ATION						
	patement is Taking idence	Place (3)			2.		Type of Facility (4	School (k-12)				
Street Address	Guyer Avenue	е						[x]	Subchapter 8 (ot Other (i.e., priva homes, etc.)			ial build	lings,
City		Count	y (6)		County C (STATE	ode (7) USE ONL	Y)	Square feet 1500 sf	# of Floors	Bldg	g. Age	50	
Lavallette		Ocea	an					Current Use (Prior Resid	if being demolished)			
Name of Monitoring Firm N/A		Owner (8	3)		ASCM N	lo.	Name of	Abatement Contract		Inc			
Street Address							Street Ad	dress	Route 9, Unit 61				
City, State, Zip Code							City, Stat	e, Zip Code	River, New Jers		755 1	771	
Project Manager for Monitoring Firm Telephone Number				Number			Telephon 732-34	e Number	License N 00624			2/1	
Scheduled Start Date (10) 6/18/15					on Date (1	1)		OSHA Monitor	S.L. Analytical				
[X] Faci	6/18/15 6/22/15 Occupancy Status During Abatement (Check only one)						Street Ad	dress 1056 e, Zip Code	Stelton Road	20202	×2×4×		
Scope of Work (Check all t	=						r 1	901000000000000000000000000000000000000	taway, New Jerse		54		
2 2	63.5.55		r 2				[]	Mini-Enclosure		sure			
5 5	f or ≥3 lf) sf or ≥260 lf		[x]	Renova Demoli			[x]	Glovebag Proce Non-Exempted	dure (*) and Non-Friable	Procedu	ıre		
										Abat	ement	Гуре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED in facility (13) Is Location 4ormally used Solely by Maintenance/Custodia Staff (12) YES NO N/A				sed		Asb N (i.e. inst	Description destos-Conflaterial (A , thermal sallation, sur VAT, o er miscella	taining CM) systems facing, r	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-front house			X		Asbes	stos sidin	g		1400 sf	X			
Exterior back house X					Asbes	stos sidin	g		1000 sf	X			
Name of Registered Waste Hauler NJDEP Waste Hauler				m >1	0.11.11	1 0***	137 25	1,		1	m		
Guardian Contracting, Inc. 20223					17	Cubic Ya	rds of Waste	T.R.R.F.	tered Landfill		1		
Toms River,	City, State Dispo Toms River, New Jersey 6/23				sal Date		City, Sta	te own, Pennsylvan	ia				
Completed by (Print or Type Nicholas Ferr	e)	Title Proje	ct Manage		Signatu	ire \	who	l'Le	/	Date 6/17	7/2015	j	

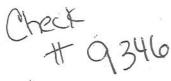
*Do not use this form for asbestos licensure exempted activities.

State of New Jersey NOTIFICATION OF ASSESTOS ABATEMEN (Pursuent to NJAC 8:80 and 12:120) 1039 Date of Notification (1) Name of Bullding Owner/Operator (2) June 12, 2015 Paterson Habitat for Humanity Agencies Notified Type Notification Street Address X PO Box 2685 Initial DEP Amended City, State, Zip Code X DOL Amendment # Paterson, NJ 07509 Emergency (including DOH Name of Contact justification) Telaphone Number DCA Cancellation Project Manager FACILITY INFORMATION Name of Facility Where Abstement is Taking Place (3) Type of Facility (4) Paterson Habitat for Humanity School (K-12) Street Address Subchapter 8 (Other than K-12) 113 N. 3rd St. X Other (i.e. private & commercial building City (5) Square Feet # of Floors Paterson, NJ County (6) County Code (7) (STATE USE ONLY) Current Use (Prior If being demolished) Passaic Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) AET 0021 The MACK Group, LLC. Street Address Street Address 222 Church Road 1500 Kings HWY N, STE 209 City, State, Zip Code City, State, Zip Code Bridgewater, NJ 08807 Cherry Hill, NJ 08034 Project Manager for Monitoring Firm Telephone No. Talephone No. License No. Eric Houseknecht 908-296-1132 (877) 759 - MACK 00781 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 6/15/15 7/31/15 The MACK Group, LLC. Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abstement 1500 Kings HWY N, STE 209 Abstement Performed Outside of Normal Facility Hours
Other - Describe: City, State, Zip Code Cherry Hill, NJ 08034 Scope of Work (Check All That Apply) ≥3 sf or ≥3 H Renovation Full Containment with Negetive Pressure ≥160 sf or ≥260 If Demolition Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure & Location Abatement Normally Location of Type Description of Asbestos-Containing Material (ACM) Used Solely by Asbestos Containing Material (ACM) Maintenance/ Amount IO BE ABATED (i.e. thermal systems insulation, Encapsulate Custodial Staff? (Specify in Facility Hemova eurfacing, VAT, or Repair (12)SF or LF) (13)other miscellaneous) Yes No siding transite siding 3500 s/f roof roof flashing 400 s/f Name of Registered Waste Hauler NJ DEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste Neward / Freehold Carting 15939 39 Cumberland Co./ BFI / GROWS / TRRF City, State Disposal Date City, Siste Newark / Freehold, NJ 7/31/15 Newburg / Imperial / Morrisville, PA Completed by Titie Signature, Date

Mike Cooper

President

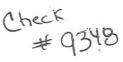
6/12/15



					Y									
Date of Notification (1)	6-18-15	5	Nam	e of E	Building Owner/C	perator (2) Ri	cK	Ma	Rin	0			
Agencies Notified	Type Notification	1 m 18 gar	Stree	et Ado	dress $//2$	1	ini	Del	5	tper	+		46	
□ EPA □ DEP	Initial Amended Amendment#	7	City,	State	e, Zip Code	int	22	1	1.T	0	80	业	7	
DOL	☐ Emergency (in		Nam	ne of (Contact	11911	<u>),)</u>	/\	Telep	hone Nr	imhar	271		4
DOH DCA	justification) □ Cancellation		1,44	Ric	K Mai	Rinc)		1001	1.1		9-6	7. 7.	1
			F	ACIL	ITY INFORMAT			Ta allia. /	4)	's	J -	2		1 /
Name of Facility Where	Abatement is Taking	Place (3)	11.	_			88	Facility (4		5	C	2		
Street Address	family.	VW.	llic	C			☐ St	chool (K-1 ubchapter	8 (Other	than K-	(2)	7		111
103	Juniper	Sta	ee	<u> </u>	¥()		et			-	5-	, ,		S
City (5) Bull	instan	ZIN	(20	3016		Square	Feet	# of [2 2	7	Bldg.9	ge † —	
County (6) Duck	, 10/1	100			ode (7) SE ONLY)		Current	Use (Prid	or if bein	g demolis	shed)			
Name of Monitoring Fire	NSTON m Hired by Building O	wner (8)	A	SCM	No.	Name	of Abate	ment Cor	tractor (9)			_	
EPCT	chnolo	sies		(N/A	E	PC	ST	Lhr	ole	gie	5	In	6
Street Address	Box 33	37				Street	Address O.	Box	33°	7		51		
City, State, Zip Code	2000	MT	0	2	533	City, St	tate, Zip	Code	AL	ALT		2	5.3	3
Project Manager for Mo	peir ri gr-irm	MO	Tele	phon	e No.	Teleph	one No.	5 37	Pi	License	No.	20	L	
Steve S	ehen ken	<u> </u>			758-3365			- 334 Monitor	5	0	Q,	רכ	7	
Start Date (10)	2015	Scheduled (e J	9,	2015	Name	-	Tec	hnol	ogies	s I	nc		
Occupancy Status Duri	ing Abatement (Check	Only One)					Address	BOR	33	7				
Facility Closed/Va Abatement Perform	cated During Entire P	eriod of Aba	tement				tate, Zip		00	Г				_
☐ Other – Describe:		arr aunty ri						SYPT	N	J	08	53	3	
Scope of Work (Check	All That Apply)			*****				018						
≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf	8 20 1		ovation nolition				Mini-	Containm Enclosure ebag Pro	e cedure					
		1					Non-	-Exempte	d (*) and	Non-Fna	able Pi		ement	
	59		cation mally		. 0.	intion	of					Т	уре	
Locati Asbestos-Containir		Used S	Solely b		Asbestos Cor		Material (nount	-		m	m
TO BE A	BATED	Custod	enancei ial Staff		(i.e. therma	al systems acing, VA		ion,		or LF)	Kemova	Repair	caps	Enclosure
(13		(12)		other	miscellar	neous)	*			ovai	air	Encapsulate	sure
		Yes	No N	N/A									0	_
Basemer	rt	X			TSI Pa	pec			130	LF	X	-	-	-
			_				-				+	-	+-	-
			+				7				+	+	+	-
Name of Registered W	laste Hauler			EP W		c Yards		Name of	Registe	red Land	fill			
	chnologies	Ş		er ID 700	00	0	2	Was	teM	anago	ene	nt o	E f	M
City State	J	NJ	×	N	A	osal Date	15	City, Sta		le	PA			
New E	-34br	Title	^			Signature	e	CI	1		Date		_11	_
Steve Sch	en Ker	Pres	iden	1		26	ue)	JCK.	oh		0	-/8	-1_	ر_

Check 9347

Date of Notification (1)	1 10		Na	me of B	uilding Owne	er/Ope	erator (2) M	11	11				
	0 10 1	5	Str	eet Add	ress		/No	IT C	onnelly				-
Agencies Notified	Type Notification		25,	COTTIGO	179	3	West 1	1th)	treet.	2	1		
☐ EPA ☐ DEP → DOL	Initial Amended Amendment #_		Cit	y, State	Zip Code	tac	ناهرې	NJ	8,80	5			
≠ DOH	☐ Emergency (in: justification)	cluding	Na	me of C	Contagt		·11		Telephone Nu	mber =	2		,
□ DCA	☐ Cancellation			FACILI	TYINFORM		119 N 1		- <u> </u>			C,	,
Name of Facility Where	1	Place (3) uelli:	25				Type o	f Facility (4)		Z.	IH 2:		err mari
Street Address	West 4th	Ste) ce	+			≯ € 0	ther (i.e. pr	ivate & commerc	al build	dg. Ag		5,
City (5) Diccol	C111656 1	72	08	38	54		Square	•			75	74-	_
County (6) Middle	sen	0		ounty Co	ode (7) SE ONLY)		Currer	t Use (Prio	r if being demolis	shed)			
Name of Monitoring Fin	m Hired by Building O	vner (8)		ASCM	No.		Name of Abate	TEC	hoole	qies) ,	In	6
Street Address	Box 33	57					Street Addres	Box	337	J			
City, State, Zip Code	evet.	NZ	(180	533		City State, Zip	Equ	of 113	0	35	3	3
Project Manager for Mo	ger for Moeithri lg Firm Telephone No. 609 758-3365							-336	5 License	03	39	4	
Start Date (10) 6-30-15		Scheduled	Comp	O-)ate (11)		Name of OSH		mologies	s I	nc		
Occupancy Status Duri	ing Abatement (Check						Street Addres	S	~				
Facility Closed/Va Abatement Perfor Other – Describe:	med Outside of Norma	eriod of Aba al Facility H	ateme ours	nt			City, State, Zi	-	ALT	085	5.3	3	
Scope of Work (Check								011					
≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf			novati nolitic				☐ Mir	i-Enclosure	cedure			9	
	(4)	1					□ No	n-Exempted	d (*) and Non-Fri	able F10	Abate	ement	t
Locati		No	ocatio rmally	,		Des	scription of				1	rpe	
Asbestos-Containii TO BE A In Fa	ng Material (ACM) BATED cility	Used Main Custo	enan	ce/	(i.e. the	ermal surfa	taining Material systems insula cing, VAT, or miscellaneous)	(ACM) ation,	Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
(1:	3)	Yes	No	N/A			,			=		ate	е
Caulspac	е	X			Pipe	In	sulatio	2	100 L	FX			-
4										+	-		+
			_							+	1		
Name of Registered V	Vaste Hauler			JDEP V auler ID	, acto	Cubic of Wa	Yards		Registered Land		,	0 1	215
EPC Te	chnologie	\$			00	Dispo	sal Date	City, Sta			10	E 1	[ht
City, State	gypt	NJ Title	N			7-	1-15 Signature	Mori	visuille	PA			
Steve Sch	OII		Steve	Sch	ohn	6	18	-/5	>				



		100										
Date of Notification (1)	-18-1	5	N	lame of	Building Owner/C	perator (2)	Rank	Sous	pa			
Agencies Notified Ty	pe Notification		S	street Ac	ddress	111: k	717	Airs				
□ EPA ■ □ DEP	Initial Amended		C	City, Stat	te, Zip Code	VIICI	E 1 1	1100	3 C	i~		
DOL	Amendment #_ Emergency (in		-			een Bl	200 K,	NJ 0	_	12	<	
DOH .	justification) Cancellation			_	Contact S	ousa		17110-09			417	ı
		21 (2)			LITY INFORMATI	ON	e of Facility (P	2		46.3	
Name of Facility Where Aba	tement is Taking	-	انعن	ling			School (K-1	2) Qo [[]	ال			
Street Address	1/ 11	نا ا)	2 0			8 (Other than K-12) rivate & commercia	bulle	ings,	home	s,
City (5)	Kett	MUS				Squ	etc.) are Feet	# of Floors		dg. A	ge	-
GREEN	BROOK		TU		21880			220		-	16	
County (6) Some a S		*			Code (7) USE ONLY)	Cun	rent Use (Prid	or if being demolish	ed)	る	l (bage)	
Name of Monitoring Firm Him		wner (8)		ASCN	No.	Name of Ab	atement Cor		• •	<u> </u>	~	
EPC Tec	hnele	Jie?			MA	Street Addr	C 186	chnolog	163	,	In	6
Street Address R.O. B	0x 33	57				P.O.	Box	337				
City, State, Zip Code		T.VA	- (20	5.33	City, State,	Zip Code	AL ALT	0	RE	13	3
Project Manager for Monifor	i g Firm	110	1	Telepho	ne No.	Telephone		License No	. 9	0	U	
Steve Sch	nen ken				758-3365		8-336 SHA Monitor	5 00) 6	7	7	
Start Date (10) July 20	1		-		Date (11)	A concession of the contract o		hnologies	I	nc		
Occupancy Status During A	batement (Check					Street Addr		~				
Facility Closed/Vacated Abatement Performed	d During Entire Pe Outside of Norma	eriod of A al Facility	batem Hours	ent		City, State,	Zip Code	301				
☐ Other – Describe:						New	Egypt	NJC	185	53	3	-
Scope of Work (Check All T	hat Apply)	□ R	enovat	tion		F	ull Containm	ent with Negative P	ressui	e		
≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf	6	-	emoliti		*	□ N	fini-Enclosure	е			e	
		le	Location	on.			ion-Exempte	a () and Home		Abate	ement	
Location of		N	lormall d Solel	y		escription of	CACAA)	Amount		1 9	ре	
Asbestos-Containing Ma TO BE ABATE		Mai	ntenar odial S	100/		il systems insi	ulation,	(Specify SF or LF)	Ren	Re	Encapsulate	Encl
In Facility (13)		Ouse	(12)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		acing, VAT, or miscellaneous	The same of the sa	Sr ui Lr)	Removal	Repair	sulat	Enclosure
		Yes	No	N/A							6	
Funge + Uti	lity Rm.	X		1	Pipe I	nsulate	01	100 LF	K			
					-					-		
				-			0	-	-		-	
Name of Registered Waste	Hauler		N	JDEP V		c Yards	Name of	Registered Landfill				
	nologies	5	Н	lauler ID	00	ol	Was	te Manager	nen	60	e f	A
	, , ,	NJ			Disp	osal Date - 2-15	City, Sta	te	A	35		2
Completed by	ADT I	Title	^	1		Signature	55.0	/ Da	te	10.	15	_
Steve Schen	Ker	HRe	sid	ent		Deed	S) Che	sky (9-1	0	1_	,

19												Pri	nt F
		ı		CATION	ate of New Jerse OF ASBESTOS to NJAC 8:60 an	ABATE			150 E/3	299	8		
Date of Notification (1) 6/17/15	5				Building Owner/6	Operator	(2)	2015	JUN 22 AM	2: 0	:0		
Agencies Notified	Type Notification			Street A 230 M	^{ddress} endham Road	i		#535			- C		
EPA DEP X DOL	Amended Amendment		100		ite, Zip Code town, NJ			â	LIGEASIN	3.70	5		
DOH DCA	× Emergency justification) Cancellation			Name of M. Rin	f Contact npel				Telephone Nu	imber			
				FACI	LITY INFORMAT	ION						V(=1_128.)	
Name of Facility Where A Room 333	Abatement is Takir	ng Place (3	3)				Тур	e of Facility (4 School (K-1)	25				
Street Address 230 Mendham Road	d				_			Subchapter	8 (Other than K-1 rivate & commerc		dings,	home	ìS,
Dity (5) Morristown							Squ 100	are Feet	# of Floors	1 1	Bldg. A	ge	
County (6) Morris	is the second			Code (7) USE ONLY)		Cur	rent Use (Pric	or if being demolis	shed)				
Name of Monitoring Firm	me of Monitoring Firm Hired by Building Owner (8)							oatement Con vironmental	tractor (9) Services, LL(
Street Address	eet Address							ess 483, 4 E G	ate Drive		7.55		
City, State, Zip Code								Zip Code od, NJ 074	18				
Project Manager for Mon	itoring Firm			Telepho	ne No.	Telepi 973-		No. -2276	License 1	No.			
Start Date (10) 6/17/15		Schedul 8/31/1		npletion	Date (11)	Name	of O	SHA Monitor					
Occupancy Status During	Abatement (Che	ck Only Or	ne)			Street	Addr	ess					
Facility Closed/Vaca Abatement Performed Other – Describe:						City, S	State,	Zip Code	a				_
Scope of Work (Check Al	II That Apply)												_
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	en e		Renova Demolit			>	N G	Mini-Enclosure Blovebag Proc				e	
Location	Locati Vormal	ly	De	escription	n of					ement			
Asbestos-Containing TO BE ABA In Facili (13)	ed Sole intena todial 3 (12)	nce/ Staff?	Asbestos Cor (i.e. therma surfa	ntaining N	Materi is insu AT, or	ulation,	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	CHOINSHIE		
Room 3	333	Yes	No	N/A x	ceil	ing pla	ster		531 SF	x		ro	
					3011		3.01						

Occupano	by Status During Abatement (Check		Street Add	iress										
Abat	ity Closed/Vacated During Entire P ement Performed Outside of Norm r – Describe:					-	City, State	e, Zip Code	4					
Scope of \	Work (Check All That Apply)													-
	f or ≥3 If 0 sf or ≥260 If		Renova Demoliti				×	Mini-Enclosure Glovebag Pro-					е	
	Location of	0.0	Locati Normall	7000		Doo	cription of				F		ement pe	
Asbes	Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Yes					stos Conta thermal s surfaci		or	Amount (Specify SF or LF)		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A							7		te	TD.
	Room 333			×		ceilin	g plaste	r	531 SF	x				
		.00												
Name of F	Registered Waste Hauler		1202	JDEP W	1275000000000000000000000000000000000000	Cubic Y		Name of	Registered Land	dfill				
Freehold	l Cartage		1000	auler ID 5959	No.	of Wast	te	Wester	n Berks Land	llift				
City, State Freehold, NJ						Disposa TBD	al Date	City, Stat Birdsbo						
Completed A. Scott	5	Title President					gnature	D-	_	Date 6/17	/15			
ASB-41 (R-	06-08)						* Do not us	se this form for	r asbestos licens	sure ex	kem	pted	activi	ties.

×

×

(K 000422

										175	- 17 m	955 B	
Date of Notification (1) 06-10-15	3-10-15					ner/Operator	(2)		20	15 JU	The State of the S	11/	in in
Agencies Notified	Type Notification		1	Street Ad	ddress					ia JU	122	A 54	^
□ EPA	Initial			235 M	oore St.				đ. i	& 1 /		HIT .	c: 3
DED	Amended			City, Sta	te, Zip Code				100	UESI	110 x	1,.	
DOL DEP	Amendment		_	Hacker	nsack NJ 0	7601				811	NEW!	UNI	RO
□ DOH	Emergency justification)			Name of	Contact				Telephone	Number	1 12	1140	
DOH DCA	Cancellation			Walt F	. Mueller			1	- '	9			
			_	FACIL	LITY INFORM	ATION							
Name of Facility Where	Abatement is Takin	g Place (3	3)				Туре	of Facility (4)					
Commercial Buildi	ng						П	School (K-12)					
Street Address							-	Subchapter 8		(-12)			
180 Brighton Rd.								Other (i.e. priv			uildings	home	s,
								etc.)	# . [[]		DI-I-		
City (5)							Squa	re Feet	# of Floors		Bldg. A	\ge	
Clifton													
County (6)					Code (7)		Curre	nt Use (Prior	if being demo	olished)			
Passaic			1	SIAIEU	JSE ONLY) _								
Name of Monitoring Fin	m Hired by Building	Owner (8)		ASCM	l No.	Name	of Aba	tement Contra	actor (9)				
N/A						Delfa	a Con	tracting LL	C.				
Street Address						Street	Addres	SS					
						1	7th St						
City, State, Zip Code						City	tate 7	ip Code					-
City, State, Zip Code	ity, State, Zip Code							NJ 07087					
roject Manager for Monitoring Firm				Telephor	ne No.	300000000000000000000000000000000000000	none N		Licens				
						10000000	216-9		0120	0			
Start Date (10)				pletion [Date (11)			A Monitor	_				
06-12-15		06-16-	15			Delfa	a Con	tracting LL	С				
Occupancy Status Duri	ng Abatement (Chec	k Only Or	ne)	-		Street	Addres	ss					
Facility Closed Na	cated During Entire	Period of	Ahatam	ent		522	7th St						
	med Outside of Norr					City, S	State, Z	ip Code					
	7:00 AM- 5:00 PM		(1/2/2005/2006			30000		NJ 07087					
Scope of Work (Check	All That Annly)												
	All That Apply)	-		507		-	7		5 800 200 10	20000			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		all the same of th	Renova			1		II Containmen	it with Negati	ve Pres	sure		
≥160 sf or ≥260 lf			Demoliti	ОП			Glo	ni-Enclosure ovebag Proce	dure				
								n-Exempted (riable F	rocedu	ге	
		le	Location	on.								ement	
Land		1 1133	Normal	7,77		Description	- of				Т	ype	
Location Asbestos-Containing		300000	ed Sole		Asbestos	Containing I		I (ACM)	Amount			m	
TO BE A		100000	intenar todial S			rmal system			(Specify	1 2	7 7	Encapsulate	Enclosure
In Fac		Cus	(12)	nan r		surfacing, VA			SF or LF)	0	Repair	sde	sols
(13	5)		(/	T	Ot	her miscella	neous)	-		1	= =	lat	ure
		Yes	No	N/A								0	
1st fl	oor		x			Pipe Insula	ation		400 LF	X			
1000000				-							-	+	-
1st fl	oor		Х		Pipe Ir	nsulation (vvrap	-cut)	350 LF	X		-	
												1	
		+	-	-									
	1	105511		LIS V		l New 15		- 4511					
Name of Registered Wa	(1) 13/3	JDEP Wauler ID		ubic Yards f Waste			egistered Lar			200	90"		
Delfa Contracting L		3240	No. 0			Tullytown	n Resource	e Reco	overy	Facili	ty		
City State				isposal Date	<u> </u>	City, State							
City, State						6-17-15		Tullytown	n PA				
Union City NJ								runytowi	1, 1 //				
Completed by						Signatur	e /	Q)		Date	0 45		
Jaime Delgado		Mana	ager.			K	4		06-1	U-15			

7-	_ :	_	-4	11	
-1	\Box		C 1	- 34	

Check #	2975	100

Date of Notification (1)	1	Name of	Building (Owner/Op	perator	(2)	24	3	122 F	¥ 2	= 5.)		
06/15/2015		F	ligh P	oint reg	ional S	choo	l Distr	rict				- (
Agencies Notified Type Notifica	ation	100	Street A					fi (o o E S	1,50	4	ลา		
EPA Initial		0.00		geon Ro					2	10=110	010		-	
DEP Amende				ite, Zip Co										
DOL Amenda	ment # ency (including			k, NJ 07	461									
DOH justifica	tion)	100		Contact					Tel	ephone Nur	nber			
DCA Cancell	ation	N		l Parigi					11					
Name of Facility Where Abatement is	Faking Place (2)		FACI	LITY INFO	DRMATIC	ON	Type	of Facility	(4)					
DO NOT THE REPORT OF THE PROPERTY OF THE PROPE	Taking Flace (5)													
High Point Regional School Street Address								School (K- Subchapte		er than K-1	2)			
299 Pidgeon Hill Rd							IFI .	Other (i.e.		& commerci		dings,	home	es,
City (5)								etc.) re Feet	1#0	f Floors	TE	Bldg. A	ae	
Sussex, NJ														
County (6)				Code (7)			Curre	nt Use (Pr	ior if be	ng demolis	ned)			
Sussex			(STATE)	USE ONLY,										
Name of Monitoring Firm Hired by Buil	ding Owner (8)		ASCN	/I No.				tement Co		(9)				
Aero Environmental								oration L	LC_					
Street Address					1		t Addres							
275 Rt 10 East								ide Rd						
City, State, Zip Code								ip Code	00					
Succassuna, NJ 07876			Telepho	no Nie			hone N	NJ 078	69	License N	lo.			
Project Manager for Monitoring Firm		1		20-9061			33-25			01133	10.			
Michael Berta Start Date (10)	Schedule			Date (11)				HA Monito		01100				
06/27/2015	07/03/2		pietion	Date (11)		100000 00000		onment						
Occupancy Status During Abatement (7. 1. 7.			-		t Addre		ui					
			.ont			2333	Rt 22	2 West						
Facility Closed/Vacated During E Abatement Performed Outside of					ŀ	City, S	State, Z	ip Code						
Other – Describe: 3pm					-			07083						
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf	■ R	enova	tion							Negative I	Pressu	ire		
≥160 sf or ≥260 lf	D D	emolit	ion			F	14111	ni-Enclosu ovebag Pro						
							No	n-Exempte	ed (*) ar	d Non-Frial	ole Pro	cedu	re	
	Is	Locati	on										emen	t
Location of		ormal			Des	scriptio	n of					1	ype	
Asbestos-Containing Material (ACI		d Sole			tos Cont	aining i	iviateria		1	Amount	-71		I III	m
TO BE ABATED In Facility	Custo	odial S	Staff?	(i.e.	thermal surface	system cing, V		ation,		Specify F or LF)	(em	Repair	cap	nclo
(13)		(12)					neous)				Remova	air	Encapsulate	Enclosure
17 50	Yes	No	N/A								_		te	(D
Room 315				Transit	te mate	erials			23 S	F	×			
6														
			1			7						\vdash		
Name of Registered Waste Hauler			JDEP V		Cubic			Name o	f Regist	ered Landfil	1			
Nick Restoration LLC	100	lauler ID 03378		of Was	ste		G.R.O	.W.S						
City, State	10	00010	_		al Date	е	City, Sta	ate					- 7 -	
Randolph, NJ				TBD			Tullyto		а					
Completed by	Title	Title					re Al	4160	10.0	D	ate			
Elvira Mrda	Presid	lent					El	MIC	NIG	06	3/15/2	2015	;	

Date of Notification (1)		Name of Build	dina O	wner / Operato	r (2)	04 1. 6	XVDIO		
2/9/15				Public Scho		1			
Agencies Notified Type Notifi	cation	Street Addres	SS			UN 22 AM 2	36		
☐ EPA ☐ Initi		440 Beverly							
= =		City, State &	*		7.000	1	701		
		Willingboro Name of Con		08046	Ct.		Talaabaaa	h I !	
		Kelvin Smit				1	Telephone	Numi	per
			3033/2			1			
Name of Equility Where Abeter	antin Talian Diana (FACILITY	INFO	RMATION					
Name of Facility Where Abater Levitt Middle School	nent is Taking Place (3)		Type of Facili		B-CHAPTER 8			
Street Address					ter 8 (Other th				
50 Rev. Dr. MLK Jr. Drive						mmercial buildin	as homos	oto)	
or non bit market, bitte				Square Feet	# of Flo		Bldg. Age	, etc.)	
City (5)	County (6) Co	ounty Code (7)	150,000	a produce a constant and a constant	1)+	
Willingboro	Burlington	, (1,	<i>I</i> :		Prior if being of	demolished)	41	JΤ	
	Burnington			School	r nor ii boing c	zemononea)	*		
Name of Monitoring Firm Hired	by Building Owner (8)	ASCN	/I No.		tement Contra	ctor (9)			
AHERA Consultants Inc	, , ,				ironmental,				
Street Address		7-2		Street Addres					
36 North Quail Hill Blvd				1123 Beave					
City, State & Zip Code				City, State & 2					
Galloway, NJ 08205 Project Manager for Monitoring	Cierra IT-1-	- b NI b	200	Bristol, PA					
Eric Clarkson		ohone Numbe 652-1833	er.	Telephone Nu (215)788-60		License N 00509	lumber		
Scheduled Start Date (10)	Scheduled Completic			Name of OSH		00303			
6/22/15	6/26				ronmental li	nc.			
Occupancy Status During Abate	ment (Check only one	e)		Street Addres					
Facility Closed/Vacated				1123 Beave					
Abatement Performed (urs – 7am to 3	3pm	City, State & 2					
	- 3:30 PM			Bristol, PA	19007				
Facility Occupied During Scope of Work (Check all that a									
Coope of Viola (Officer all that e	ppiy)				☐ Full Cor	ntainment with N	legative Pr	essure	9
≥3 sf or ≥3 If	\boxtimes	Renovation			Mini-En		-3		
≥160 sf ≥260 lf		Demolition				ag Procedures			
						empted and Non	-Friable P	rocedu	ıre
Location of		Location		Description		Amount	Abate	ment 7	уре
Asbestos-Containi	9	nally Used		Asbestos-Cont		(Specify		T	I
Material (ACM) TO BE ABATED		olely by tenance or		Material (AC (i.e., thermal sy		SF or LF)	. 및	Enc	E
in Facility		odial Staff?		sulation, surfaci			Remova	capsul	clso
(13)		(12)		or other miscella		50	val	Encapsulate	Enclsoure
	Yes	No N/A						O	3570
Exterior Window Caulk				Window Ca	ıulk	7000 LF			
Boiler Room				er Doors (Wr		150 SF			
Classroom			Pipe I	Insulation (W	rap & Cut)	30 LF			
									Ц
Name of Registered Waste Hau	lor	NIDED W	4- 0	Subje Varda	Name (D	-111 15"			
Name of Registered Waste Hat	ier	Hauler ID N	-0100	Cubic Yards f Waste	Name of Regi	stered Landfill			
Service Transport Inc.		20990		Cu Yd	Minerva Lar	ndfill			
City, State				isposal Date	City, State				
New Castle, DE				/27/15	Morrisville,	PA			
Completed By (Print or Type)		Title	277	ignature	7 .	1	Date		
Gino Pizzigoni		Project		21: F	1	.1:0	6/18/1	5	
VIII-A		Manager	/	peno 1)	Lackou	171			



Date of Notification (1)		Name	of Buildin	g Owner / Operat	or (2)						
6/5/	15			School District	01 (2)	कर गा। राष	n.				
	Notification		Address	טווסטו בוסנווסנ		PTS JUM 22	88 2: 37				
☐ EPA		500 R	Rhoads A	ve	6	21,000					
☐ DEP ☐	Initial		State & Zip	Code		3571530	UN 1201				
□ DOL □	Amended R#1-6/18	3/15 West	mont, NJ	08108		a LIGENS	CAR INT				
□ DOH □	Emergency		of Contac				Telephone Number				
□ DCA □	Cancellation	C/O F	Robert DI	nan							
		FAC	CILITY IN	FORMATION							
Name of Facility Where Ab	atement is Taking F	Place (3)	OILII III	Type of Faci	lity (4)						
Van Sciver ES	J	3-7				UB-CHAPTER 8					
Street Address					pter 8 (Other ti						
625 Rhoads Avenue							ngs, homes, etc.)				
				Square Feet			Bldg. Age				
City (5)	County (6)	County C	Code (7)	60,00		1	40+				
Haddonfield	Camden				(Prior if being	demolished)	40.				
				School	(z z g	aciriolici ica)					
Name of Monitoring Firm H	ired by Building Ow	ner (8)	ASCM N		atement Contra	actor (9)					
Epic Environmental Se	rvices				rironmental,						
Street Address				Street Addre							
1930 Brown Road				1123 Beav	er Street						
City, State & Zip Code				City, State &	Zip Code						
Newfield, NJ 08344			2	Bristol, PA							
Project Manager for Monito	ring Firm	Telephone		Telephone N		License 1	Number				
James Eberts		856-205-1		(215)788-6		00509					
Scheduled Start Date (10)	Scheduled Co		e (11)	Name of OS							
6/25/15	- E	6/25/15		rironmental	lnc.						
Occupancy Status During A	Abatement (Check o	nly one)	Street Addre								
	ated During Entire F ed Outside of Norm			1123 Beave							
	AM – 3:30 PM	al Hours – /	am to 3pn								
Facility Occupied D				Bristol, PA	19007						
Scope of Work (Check all the											
	iai appij)				☐ Full Co	ntainment with N	Negative Pressure				
≥3 sf or ≥3 lf		⊠ Reno	ovation			nclosure					
≥160 sf ≥260 lf			olition			Bag Procedures					
							n-Friable Procedure				
Location		Is Location	on	Descriptio		Amount	Abatement Type				
Asbestos-Conf		Normally U			Asbestos-Containing (Specify						
Material (A0 TO BE ABA		Solely b		Material (A		SF or LF)	20 m				
in Facility		Maintenand Custodial S		(i.e., thermal s insulation, surface			Enclsoure Encapsulate Repair Removal				
(13)		(12)	tair:	or other miscell			sula ova				
			N/A		anocac _j		ate e				
Exterior Doorways			\Box	Door Car	ılk	144 LF					
			Ħ	Door out	air	144 21					
		HH	Ħ				- - - - - - - - - -				
		HIH	Ħ								
		HH	H								
		TIT	Ħ								
Name of Registered Waste	Hauler	NJE	EP Waste	Cubic Yards	Name of Rec	istered Landfill					
			iler ID No.			, Larraini					
Service Transport Inc.		209	90	1 Cu Yd	Minerva La	ndfill					
City, State				Disposal Date	City, State						
New Castle, DE					Waynesbur	rg, OH					
Completed By (Print or Type	(*)	Title)	Signature	2	1.5	Date				
Gino Pizzigoni		Pro	ject		ezzegone	. / 2	6/5/15				
(A)		Mar	nager	Mena 1.	Lidon	-14					

(K006033

D&S Proj. #: 2015-200

ASB-41

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

							21	115 1111	" to b	<i>J.</i>			
Date of Notification (1)	Na	ame of Bu	ilding Owne	er/Operator (2)				MESTAL C & LICENS	BM 2.	۵.			
0 6 /1 2 /1 5		ARNOL	D SERET	ΓE			AS	45000		64			
	Street Address Street Address							& 11,52,C	UNTR	71			
_ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	11 3	52 MON	TCLAIR .	AVENUE				一つして様う	ING "	/ !.			
Amendment #:	Ci	ty, State,	Zip Code										
Emergency				J 07042									
	Na	me of Co	ntact					Telephon	e Numbe				
☐ DCA ☐ Cancellation		ARNOI	LD SERET	TE .)				
0.85			FACII	LITY INFORM	ATION	١							
Name of facility where abatement is	taking plac	ce (3)					TT.	Type of Facility	(4) ol (K - 12)				
ARNOLD SERETTE								=	apter 8 (C)thar th	an K	-12)	
Street Address							=		(Private/C			12)	
52 MONTOL AID AVENUE								Bldgs.	Homes, e		RI	dg. Ag	76
City (5)	Count	v (6)			Col	inty Code (7)	=	Square Feet	# 01 1100	5	Di	uy. A	ge.
Oity (5)	000	., (0)				ate use only)	-	Current Use (P	rior if bein	g dem	olishe	ed)	
MONTCLAIR	ESS	EX								-	Wiselin (Vol. 1)		
Name of Monitoring Firm Hired by E	Bldg. Owner	(8)		ASCM No.		Name of Abatem	nent Co	ontractor (9)					
						D & S REST	ORA?	TION, INC.					
Street Address						Street Address							
01 01 7 0		ži.			_	20 Californi	-					-	
City, State, Zip Code						City, State, Zip C		\2					
Project Manager for Monitoring Firm		I pi	hone Numbe	er	-	Paterson, N. Telephone Numb)3	License	Numb	er		
r roject Manager for Monitoring Film		1.	none rumb	GI.		973-345-80			THE RESERVED IN THE PARTY OF TH	1169	•		
Start Date (10)	Isched	Completi	on Date (11	1	_	Name of OSHA	Monito	r					
20 000 000 000 000 000 000 000 000 000	200000000000000000000000000000000000000		ion Bato (11	1		D & S Resto	oration	ı, Inc.					
06/24/15		20010-000			_	Street Address	19						
			ement			20 California City, State, Zip C		nue					
Abatement performed outside	7.0					City, State, Zip C	oue						
Describe: NORMAL H	OURS				-	Paterson, N	J 0750)3					
Scope of Work (check all that apply							ПFu	Il Containment v	v/negative	press	ure		
$\boxtimes > \underline{3} \text{ sf or } > \underline{3} \text{ If}$	Renovation	1					☐ Mi	ni-enclosure					
≥160 sf or ≥260 lf	Demolition							ovebag procedu on-Exempted (*)		friable	proc	edure	
Location of	Is location	normally	used solely	1				Sir Exempted ()	and mon	IR	R	E	E
asbestos-containing		nance/cus	stodial			asbestos-containin	ıg	Amount	25	e m	e p	n c	n
		No	N/A	material (ACM)			(Specify S	or or	o v	a	а	C L
	100	140	INA							е	r	р	
BASEMENT BOILER ROOM		X		PIPE INSU				40 L FT			Ц	Ц	닏
		X		PIPE INSU				27 L FT			ᆜ	片	H
basement bathroom		X		PIPE INSU	Select 1	The state of the s		3 L FT		X	부	片	片
basement storage room		X		PIPE INSU	_			6 L FT 91 L FT			片	H	H
basement FAMILY/STORAGE RM Registered Waste Hauler	INIDE	P Hauler	ID# LC	PIPE INSU		Name of Regist	ered L	_				Ш	Щ
D & S RESTORATION, INC.	1350			yds.				ESOURCE RI	ECOVE	RY			
City, State			Disposal D			City, State		20.12					
PATERSON, NJ 07503			06/25/13			TULLYTO	WN, P	A	T				
Completed by (Print or Type) BOGDAN JOLDZIC	Title PRESIDI	ENT		Signature					Date 06/12	/2015			
			for asbesto	s licensure ex	empte	ed activities.			1.00/12				

Date of Notification (1)				Building		Operator	(2)	0015	****							
6/17/2015			Danie	Garcia				2015	JUN	22 AM	3:	24				
Agencies Notified Type Notificat	ion		Street A													
EPA Initial				tgers Av				Abij	£. S. I	OS CO	HTR	01				
DEP Amender DOL Amender				te, Zip Co		05		6	£ [.]	CONSI	√ G	J.				
Emerger	cy (including	- -		City, N	0/30	J5			1 75-1	h1						
DOH justificati		- 1							1 el	ephone Nu	mper					
BCA Cariceria	HOH	Daniel Garcia FACILITY INFORMATIO						ON								
Name of Facility Where Abatement is Ta	aking Place (3)		I AGI	LITT INFO	JINIMI	ION	Туре	of Facility (4	-)			-				
Residence							School (K-12)									
Street Address							Subchapter 8 (Other than K-12)									
42 Rutgers Avenue							Other (i.e. private & commercial build etc.)					dings, homes,				
City (5)								re Feet	# 0	f Floors	E	3ldg. /	Age			
Jersey City							200		3		1	80+				
County (6)				Code (7)				ent Use (Prio	r if bei	ng demolis	ned)					
Hudson		(STATE USE ONLY)				1,000	idence									
Name of Monitoring Firm Hired by Build N/A		ASCN	1 No.		E		tement Cont									
Street Address						Street		ral Constr	ucuc	n, mc.						
Street Address								ss on Avenue	a PI	IR Suite	218					
City, State, Zip Code								ip Code		ib oute i						
,,,,,,,,,						7.00		J 07012								
Project Manager for Monitoring Firm		1	Telepho	ne No.	V	Teleph				License N	lo.					
							389-0			00693						
Start Date (10) 06/27/2015	Scheduled 06/28/20		npletion	Date (11)		10		HA Monitor eral Constr	ruotio	n Inc						
Occupancy Status During Abatement (C						Street			uctic	11, 1116.						
		500						on Avenue	a. PN	1B Suite :	218					
Facility Closed/Vacated During Ent Abatement Performed Outside of N	ire Period of Ab Iormal Facility F	atem lours	ient			Service Servic	State, Zip Code									
Other - Describe:			5.000 A 1.000					J 07012								
Scope of Work (Check All That Apply)											79.71					
≥3 sf or ≥3 lf	ズ Re	nova	tion				Ful	I Containme	nt with	Negative F	ressu	ire				
≥160 sf or ≥260 lf	De	moliti	ion			×	Mir	ni-Enclosure ovebag Proce	adusa							
							9	n-Exempted		d Non-Friat	le Pro	cedu	e			
•	ls L	ocatio	on			Abate							t			
Location of		rmall			De	scription	of					T	/pe	_		
Asbestos-Containing Material (ACM) TO BE ABATED	Used Main					taining M I systems				mount			四	m		
In Facility	Custo	dial S (12)	Staff?	(1.6.		cing, VA		auori,		Specify or LF)	Remova	Repair	cap	nclo		
(13)		(12)			other r	miscellan	eous)				oval	air	Encapsulate	Enclosure		
	Yes	No	N/A										te			
Basement			Х	Р	ipe/elb	oow Ins	ulatio	n	5	0 LF	K					
		.00,-00												24 7,77		
Name of Registered Waste Hauler		1170000	JDEP W		(ACC) 2-14-27-4-27-5	Yards		Name of R	egiste	red Landfil		1		-		
Service Transport Group		1000000	auler ID 0990	No.	of Wa	ste		Minerva	Lan	dfill						
City, State						Disposal Date City, State										
New Castle, DE		06/28/20						Waynes	burg	, OH						
Completed by	Signature					_		Pate 06/17/2015								
Krutarth Jagad	Title Presid	10.70.00			8	Signature	1	- 1	1	1				1		

D&S Proj. #: 2015-202

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

										Dan		The flor				
Date of Notification		1 1	Name of B	uilding Ow	ne	r/Operator (2)			4	# JUN 22	AM	2 0				
0 6 1/1 5			LEYTO:	N MURR	RA.	Y			A .		Pil I	J. 6.	9			
Agencies Notified	Type Notificat Initial	tion	Street Addr	ess					. 1	& LICE	171781	7.77				
☐ EPA	Amended		420 ST.	MARKS	A	VENUE				à LICE	1215	1401				
☐ DEP	Amendment #:	110	City, State,								11114	-				
DOL	Emergency	- 11		FIELD, N	TT (07000										
DOH	(including		lame of Co		(J (07090				I Teleni	none Nu	ımher	K) British	water and	date to	-
	justification)		varrie or oc	maoi						Tolopi	10110 140	iniboi				
☐ DCA	☐ Cancellation	n	LEYTO	ON MUR	R	ΑY										
				FAG	CIL	LITY INFORMA	NOITA									
Name of facility wi	nere abatement i	is taking pl	ace (3)						T	Type of Facil		10)				
LEYTON MUI	DDAV									=	nool (K		·			
Street Address	XXAI								=		ochapte er (Priva				-12)	
Street Address											gs./Hom			Clai		
420 ST. MARI	KS AVENUE									Square Feet	# of	Floors		Bl	dg. A	ge
City (5)		Cou	nty (6)				Cou	nty Code (7)			_					
							(Sta	te use only)		Current Use	(Prior i	f being	dem	olishe	ed)	
WESTFIELD			IION													
Name of Monitorin	g Firm Hired by	Bldg. Own	er (8)		T	ASCM No.		Name of Abateme	ent C	Contractor (9)						
					1.			D & S RESTO	ORA	ATION, INC.						
Street Address							7	Street Address							3-1-1-17	V
								20 California	_	e.						
City, State, Zip Coo	le							City, State, Zip Co	ode							
								Paterson, NJ	075	503						
Project Manager fo	r Monitoring Firm	1	P	hone Num	be	er	_	Telephone Number	er		Lic	ense l	lumb	er		
								973-345-80	20			01	169			
Start Date (10)		ISched	d. Complet	ion Date (11)		Name of OSHA M	/lonit	or						
70 832			58			50		D & S Restor	ratio	on, Inc.						
06/25/15	D -1 - 11 -1	07/1			_		_	Street Address								
Occupancy Status								20 California		enue						
	d/vacated during erformed outside							City, State, Zip Co	ode							
Describe:							_	D	074	-02						
Other-Descri	SS99811 SS						<u>- 1</u>	Paterson, NJ								
Scope of Work (ch		y)						Į	_	ull Containme	nt w/neg	gative	ress	ure		
\times >3 sf or >3 lf	\boxtimes	Renovation	on						_	Mini-enclosure Blovebag proce	adu ira					
≥160 sf or ≥2	260 If	Demolitio	n							Non-Exempted		Non-fr	iable	proce	edure	9
Location of			n normally		ely						()		R	R	Е	1
asbestos-cor	ntaining		enance/cu	stodial	- 22	Description	n of a	sbestos-containing	1	Amour	nt	- 1	e m	е	n	E n
material (acn		staff(12)	Г	Т -	-	material ((Speci	fy SF or		0	p a	a	С
abated in fac	anty (13)	Yes	No	N/A						LF)			v e	i	р	L
BASEMENT BOILE	ER & REC RMS		X		7	PIPE INSU	LATI	ON		131 L FT		-	X		П	
J. J. J. J. J. DOILL					=				-				Ħ	Ħ	Ħ	市
				#	=					-			Ħ	Ħ	Ħ	青
				-	뒥								븕	一	H	H
				4	4						- Carrier		븕	븕	븕	H
Registered Waste H	lauler	IN ID	EP Hauler	ID# T		ibic Yards of V	Vaste	Name of Registe	red	Landfill						1_
D & S RESTOR			506			yds.		TULLYTOW			RECO	VER	Y			
City, State				Disposal	PARTITION	ALCOHOLD STATE OF THE STATE OF		City, State	STATE OF THE PARTY OF					-		A CONTRACTOR AS
PATERSON, N	J 07503			06/25/	15	5		TULLYTOW	VN,	PA						
Completed by (Prin		Title			T	Signature					D	ate				
BOGDAN JOL		PRESID			_		<u> </u>				00	6/15/	2015			
ASB-41		* Do not us	se this form	for asbes	sto	s licensure exe	empte	d activities.								

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

Date of Notification (1)					f Building	Owner/(Operator	(2)		28	18 4 m	11 -			-	
6/17/2015	T				ardner					2	·- uc/	155)	M.	_	
Agencies Notified	Type Notification			Street A 23 Fa	iddress irmont A	venue	9			45	18 JUN			41	y: 3,	9
DEP DOL	Initial Amended Amendment	#		5000	ate, Zip Co rville, N						G. 1.7	TEA	90 37	ŲÁ.	401	
	Emergency	(including	-		f Contact					LTal	anhana l	Urmah		141		
DOH DCA	justification) Cancellation				_ardner					I Tel	ephone f		400			
	D odriocilation				LITY INFO	DMAT	ION					120	-			
Name of Facility Where	Abatement is Takin	g Place (3)	FAC	ILII INF	JKIMAI	ION	Туре	of Facility ((4)	9				-	
Residence								П	School (K-1	(2)						
Street Address									Subchapter	8 (Oth						
23 Fairmont Avenu	ie							×	Other (i.e. petc.)	orivate a	& comme	ercial	buil	dings,	, hom	es,
City (5)								Squa	are Feet	# 0	f Floors		В	ldg. A	Age	
								200	00	3			8	30+		
County (6) Somerset					Code (7) USE ONLY)		19-20-7	ent Use (Pri sidence	or if bei	ng demo	lishe	d)			
Name of Monitoring Firm	Owner (8)		ASCN	A No.		Name	The state of	atement Cor	ntractor	(9)				9411646		
N/A							eral Cons									
Street Address							Street									
City State Zin Code									ton Avenu Zip Code	ie, PN	1B Suit	e 21	8			
4							1		J 07012							
Project Manager for Mor	nitoring Firm			Telepho	ne No.		Teleph 973-		√o. 0089		License 00693					
Start Date (10) 06/27/2015		Schedule			Date (11)				HA Monitor eral Cons	tructio	n. Inc.					
Occupancy Status Durin	g Abatement (Chec	k Only On	e)		-		Street									
Facility Closed/Vac	ated During Entire I	Period of A	haten	nent			1360	Cliff	ton Avenu	ie, PN	1B Suite	e 21	8			
Abatement Perform	ed Outside of Norm	nal Facility	Hours	3					Zip Code							
						_	Clift	on, N	J 07012							
Scope of Work (Check A	II That Apply)															
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		THE REAL PROPERTY.		ovation olition					ill Containme		Negativ	e Pre	ssu	е		
10000-00							×	Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
		Τ.						_ INC	on-Exemple	() and	I NON-FI	lable		nsversons	ement	
1			Locati ormal	tion											pe	
		Used	Sole	ly by	Asbes		scription taining M		I (ACM)	Amount		Amount			_	
TO BE AB.	ATED	170000000	ntena	50707000		therma	systems	s insul		(S	pecify		Re	D	nca	E
WWW. 1980.	ity		(12)				icing, VA miscellar			SF	or LF)		Removal	Repair	Encapsulate	Enclosure
23 Fairmont Avenue City (5) Somerville County (6) Somerset Name of Monitoring Firm Hired by Build N/A Street Address City, State, Zip Code Project Manager for Monitoring Firm Start Date (10) 06/27/2015 Occupancy Status During Abatement (in the project Manager for Monitoring Firm) Start Date (10) 06/27/2015 Occupancy Status During Abatement (in the project Manager for Monitoring Firm) Start Date (10) 06/27/2015 Occupancy Status During Abatement (in the project Manager for Monitoring Firm) Start Date (10) 06/27/2015 Occupancy Status During Abatement (in the project Manager for Monitoring Firm) Start Date (10) 06/27/2015 Occupancy Status During Abatement (in the project Manager for Monitoring Firm) Start Date (10) 06/27/2015 Occupancy Status During Abatement (in the project Manager for Monitoring Firm) Start Date (10) 06/27/2015 Occupancy Status During Abatement (in the project Manager for Monitoring Firm)		Yes	No	N/A		00.101	moodiidi	100407					/al	Ξ'	llate	лге
Basem	ent			X	Р	ipe/elt	oow Ins	sulatio	on	9	0 LF	,				
												+				
										+						
												+				
Name of Registered Was	ste Hauler			NJDEP Waste Cubic Yard					Name of	Registe	red Land	ifill		-		
Service Transport G	iroup		193399	auler ID 0990	No.	of Wa	ste		Minerva	a Land	dfill					
						sal Date		City, State		01:						
						8/2015	- N	Wayne	spurg.							
		Title President	dont			5	Signature	1/1		()		Date	71	2015		
Tadiai iii Jayau		riesi	Jeni					V	100	عوسل		06/	1/2	2015		

		1		ICATION	ate of Nev I OF ASB to NJAC	ESTOS	ABATE		т		9	1	-		13/			
Date of Notification (1) 06/17/2015					f Building Orange				rd of Educa	ation	- (2)	1/(142	2	en.	?: ;		
	ype Notification			Street A	ddress cademy	Street					ار و لکر د	53	103		/	4		
EPA DEP DOL	Initial Amended Amendment	#		City, Sta	ate, Zip Co wood, N	ode						- /	10-	14,31	NG	HOL		
X DOH	Emergency justification) Cancellation	(including		Name o	f Contact I Schnei					Telephone Number								
	_ Caricellation			FACILITY INFORMATION						1								
Name of Facility Where Aba Columbia High School Street Address		g Place (3	3)					Typ	School (K-1 Subchapter	2)	er than I	K-12	()					
525 Academy Street								Ī	Other (i.e. p etc.)	rivate	& comm	ercia	al buil	dings	home	es,		
City (5) Maplewood								1000	uare Feet 0,000	# o 3	f Floors			ldg. A				
County (6) Essex				Code (7) USE ONLY)			rent Use (Pric blic High S			olish	ed)						
Name of Monitoring Firm Hir AHERA Consultants	,	ASCN 0057			100000 000			ent Contractor (9) uction Corp										
Street Address PO Box 385		Street Address 205 Route 46 Suit						te 15										
City, State, Zip Code Oceanville, NJ, 08231	-0385			City, State, Zip Code Totowa, NJ 07512														
Project Manager for Monitor Domenic D'Errico	ing Firm			Telepho 609-65	ne No. 52-1833		Teleph 973-3		No. -9735		Licens 0103		0.					
Start Date (10) 06/29/2015		Schedule 07/31/2							SHA Monitor	Corp								
Occupancy Status During Al	batement (Chec	k Only Or	ne)	Street Address														
Facility Closed/Vacated Abatement Performed (Other – Describe: OCCL	Outside of Norn	nal Facility	Hour	S			205 Route 46 Suite 15 City, State, Zip Code Totowa, NJ 07512											
Scope of Work (Check All Th							1010	wa,	NJ 0/512									
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Property .	Renova Demoli				×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure										
		Is	Locat	ion					ion-Exempled	() all	d INOTIFI	Habi	110	Abat	ement			
Location of Asbestos-Containing Ma		Use	Norma d Sole intena	ely by	Asbes		scription taining M		ial (ACM)	А	mount			Ty	rpe m			
TO BE ABATE In Facility (13)	<u>ED</u>	100000	todial (12)	Staff?	(i.e.	surfa	systems cing, VA niscellar	T, or			Specify or LF)		Removal	Repair	Encapsulate	Enclosure		
		Yes	No	N/A									=		ate	ē		
See Attached 2	sheets		Χ		1	Well/C	eiling F	Plast	er	16	31 SF		x		x			
See Attached 2	Χ				TSI			38	2.5 LF		Х		X					
Namo of Pagintary J.Mart.	Jaulan			1055.	(n = 4 -	I C · ·	V- 1		I N			.15						
Name of Registered Waste H Newark Carting	nauler		F	IJDEP W lauler ID 4509		Cubic Yards Name of Registered Landfill GROWS												
City, State Newark NJ						1 - CHECKER STREET	sal Date /2015		City, State Morrise		PA							
Completed by Milos Savic		Title Proje	ct Ma	anager		8							Date 06/17/2015					



28% JUN 22 AM 3-31

Columbia High School

Columbia High School				Kututaa aassa
AREA	EAST TIEM IN THE	Amount	AMOUNT / % TYPE	TYPE OF ABATEMENT
		melana.		
Main Office Suite - Copy Room A103C	Wall plaster	2 SF	2% Chrysotile	Full Containment
Main Office Suite - Book Keeper Room A103D	Wall plaster/TSI	2 SF / 24 LF	2-14% Chrysotile	Full Containment
Main Office Suite - Asst. Principal's Office A103E	Wali plaster	2 SF	2% Chrysotile	Full Containment
Main Office Suite A103	Wall plaster	2 SF	2% Chrysotile	Full Containment
Main Office Suite - Asst. Principal's Office A103F	Wall plaster/TSI	2 SF / 12 LF	2-14% Chrysatile	Full Containment
Main Office Suite – Secretary's Office A103G	Wall plaster	2 SF	2% Chrysotile	Full Containment
Main Office Suite - Principal's Office A105	Wall plaster	2 SF	2% Chrysotile	Full Containment
Main Office Suite - Principal's Office A105 Toilet	Wall plaster	1 SF	2% Chrysotile	Full Containment
Office A102A	Wall plaster/TSI	1 SF / 10 LF	2-14% Chrysotile	Full Containment
Art Gallery A104	Wall Plaster	2 SF	2% Chrysotile	Full Containment
witch Board Office A106	Wall Plaster	1 SF	2% Chrysotile	Full Containment
Office A110B	Wall Plaster	1 SF	2% Chrysotile	Full Containment
Nurse Suite Toilet A112E	Wall Plaster	2 SF	2% Chrysotile	Full Containment
Nurse Suite Resting Room A112D	Wall Plaster	2 SF / 50 LF	2-14% Chrysotile	Full Containment
Vurse Suite Resting Room A112C	Wall Plaster	2 SF/15	2-14% Chrysotile	Full Containment
Vurse Suite Toilet A112B	Wall Plaster	2 SF / 15	2-14% Chrysotile	Full Containment
Vurse Suite Office A112F	Wall Plaster	2 SF/15	2-14% Chrysotile	Full Containment
tage Dressing Room A114B	Wall Plaster	2 SF/15	2-14% Chrysotile	Full Containment
Old Stage Toilet A114A	Wall Plaster	1 SF	2% Chrysotile	Full Containment
		oje Esval		
lassroom A203	Wall plaster/TSI	1 SF / 48 LF	2-14% Chrysotile	Full Containment
lassroom A205	Wall Plaster	2 SF	2% Chrysotile	Full Containment
lassroom A207	Wall plaster/TSI	1 SF / 26 LF	2-14% Chrysotile	Full Containment
lassroom A209	TSI	24 LF	14% Chrysotile	Limited Containment Glove Ba
lassroom A204	Wall plaster/TSI	1 SF / 12 LF	2-14% Chrysotile	Full Containment
lassroom A206	Wall plaster/TSI	2 SF/12 LF	2-14% Chrysotile	Full Containment
lassroom A208	Wall plaster/TSI	1SF/6LF	2-14% Chrysotile	Full Containment
ffice B203	TSI	10 LF	14% Chrysotile	Limited Containment Glove Bag
assroom A216	Wall plaster/TSI	1 SF / 12 LF	2-14% Chrysotile	Full Containment
assroom A218	Wall plaster/TSI	1SF/30LF	2-14% Chrysotile	Full Containment
assroom A220 / A222	Wall plaster/TSI	1 SF/36 LF	2-14% Chrysotile	Full Containment

RECEIVED

28% JUN 22 AM 3: 31

AREA	TEM	Amount	AMOUNT /% TYPE	TYPE OF ABATEMENT
	27-4	on ever		
Classroom 221 (Match penetration elevation of A219)	Wall plaster	1 SF	2% Chrysotile	Full Containment
Book Storage Room A215 – A219	, TSI	70.5 LF	14% Chrysotile	Full Containment
	35	ಣ-ಅತ್ಯ		
Classroom A301 (2 ea. wall penetrations 36" from door opening at ceiling height)	Ceiling /Wall plaster	6 SF / 2 SF	2% Chrysotile	Full Containment
Classroom A303 (Wall penetrations at ceiling height)	Ceiling /Wall plaster	6 SF / 2 SF	2% Chrysotile	Full Containment
Office A305 (1 ea. wall penetration at ceiling height & 1 ea. at floor elevation)	Wall plaster	2 SF	2% Chrysotile	Full Containment
Dept. Office A307	Wall plaster	1 SF	2% Chrysotile	Full Containment
Classroom Science Lab A300/ Prep Room A302	Ceiling /Wall plaster	6 SF / 2 SF	2% Chrysotile	Full Containment
Classrpom Science Lab A306/ Prep Room A304	Ceiling /Wall plaster	6SF/1SF	2% Chrysotile	Full Containment
Classroom B340	Wall plaster	1 SF	2% Chrysotile	Full Containment
Classroom B338	Wall plaster	2 SF	2% Chrysotile	Full Containment
Classroom B336	Wall plaster	1 SF	2% Chrysotile	Full Containment
Classroom A312	Wall plaster	1 SF	2% Chrysotile	Full Containment
Classroom A314	Wall plaster	2 SF	2% Chrysotile	Full Containment
Classrpom A316	Wall plaster	2 SF	2% Chrysotile	Full Containment
Classroom A318	Wall plaster	3 SF	2% Chrysotile	Full Containment
Classroom A317	Wall plaster	1SF	2% Chrysotile	Full Containment
Classroom A315	Wall plaster	2 SF	2% Chrysotile	Full Containment
Classroom A313	Wall plaster	2 SF	2% Chrysotile	Full Containment
Classroom A311	Wall plaster	2 SF	2% Chrysotile	Full Containment
Hallway B300D junction between A311/A335A	Wall plaster	2 SF	2% Chrysotile	Full Containment
Dept. Office A335A	Wall plaster	1 SF	2% Chrysotile	Full Containment

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

			(Pu	ırsuaı	nt to NJA	AC 8:60	and 5:1	6)	Jen . Serg .		- 0/02					
Date of Notification (1)				Name	e of Buildin	ng Owner	/Operator	(2)	15		- 1) jar				
6 / 17 /	15			Pri	inceton U	Jniversi	ty-Office	of Design and	Construction	١,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
Agencies Notified Type Noti	fication			Stree	t Address				4 8 18 O	13 22	171	3:	34			
☐ EPA ☐ Initial				200	0 Elm Dr				A	Trav II			4			
☐ DOLWD ☐ Amend	ed ment #_			City,	State, Zip (Code			2 1	700	- ·	7 . 7	01			
	ency (includ	ling		Pri	nceton, l	NJ 0854	0 / //Ct/ / / / / / / / / / / / / / / / /									
(NJAC 5:23-8) justific	ation)	iiig		Name	e of Contac	ct			Telephone Nu	ımber						
☐ Cance	lation			Ro	bert Orte											
	7			FACILITY INFORMATION												
Name of Facility Where Abatement i		ace (3	3)					Type of Facility	(4)							
Princeton University- Fine H	all							School (K-1		F. F. F. G						
Street Address								Subchapter	8 (Other than K- private and comm	12) percial h	uildia	~~				
Washington Rd								homes, etc.		iciciai L	unun	ys,				
City (5)								Square Feet	# of Floors	E	ldg. A	Age				
Princeton																
County (6)	State Contract			Cou	nty Code (7	7)(STATE	USE ONLY)	Current Use (Prior if being demolished)								
MERCER																
Name of Monitoring Firm Hired by Bu	er (8)		ASCM	No.	Name	of Abateme	ent Contractor (9)								
ATC Associates Inc					BRIS	STOL EN	VIRONMENTA	L, INC.								
Street Address					Street Address											
Bromley Corporate Center-Ti	ree Terri	Lan	е	1123 BEAVER STREET												
City, State, Zip Code			-31	City, State, Zip Code												
Burlington, NJ 08016						BRIS	STOL, PA	19007								
Project Manager for Monitoring Firm			Tele	phone	No.	Teleph	one No.		License No.							
Michael Keehn					-8800	215-	788-6040)	00509							
Start Date (10)	Scheduled		200		18 89	Name	of OSHA N	Monitor								
6 /27 /15	7	/_	10	_ / .	15	BRIS	BRISTOL ENVIRONMENTAL, INC.									
Occupancy Status During Abatement					Street Address											
Facility Closed/Vacated During Er						1123	BEAVE	R STREET								
Abatement Performed Outside of Time of Abatement: 7:00AM-3:3	Normal Fac	ility F	lour	s - Des	scribe	City, St	ate, Zip Co	ode		3000						
	21 100	L IVI-		Aivi		BRIS	STOL, PA	19007								
Scope of Work (Check all that apply)							7 - " 0 '		en 20							
≥3 sf or ≥3 If	\boxtimes	Reno	vatio	on] Full Cont] Mini-Enc	tainment with Ne	gative Pressure							
≥160 sf or ≥260 lf		Demo					Glovebag	g Procedure								
		1- 1	- 47		T		Non-Exe	mpted (*) and No	n-Friable Proced							
Location of		Is Lo	rmal			De			-	At	_	ent T	1			
Asbestos-Containing Material (AC		sed S	Sole	ly by	Asbe		scription o taining Ma	terial (ACM)	Amount	Rer	Repair	Enc	En			
TO BE ABATED		/lainte		nce/ Staff?		., therma	l systems i	insulation,	(Specify	Remova	pair	caps	Enclosure			
IN Facility (13)			12)	idii:		other r	cing, VAT, miscellane	or ous)	SF or LF)	<u>a</u>		Encapsulate	ure			
, · · · ·	Ye	s I	No	N/A		oution i	moodiland	ous)				fe				
Room 602		D	<u> </u>		Floor til	le			30 SF		П					
Room 1208		E	J.S		Floor til	26			30 SF							
					1 1001 111				30 31							
		-	_													
Name of Posistered Mr. 1.11												Ш				
Name of Registered Waste Hauler BRISTOL ENVIRONMENTAL,	NC.		Ha	JDEP V auler ID	No.	Cubic Y Waste	ards of	Name of Regis								
City, State				18706	i	G.R.O.W.S. LANDFILL Disposal Date City, State										
BRISTOL, PA 19007						Disposa	ii Date	City, State	I I E DA 4000	,						
	Lagrand							MORKISVI	LLE, PA 19067							
Completed By (Print or Type)	Title					Sig	nature	0 1-	/ .	Date /	./	~				
Brian Scafiro	Estim	ator				Brien Scofino/il 6/17/15										

ASB-41 MAY 11 B 5 15 0 6 5

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