State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:50 and 12:120)

Date of Notification (1)
06/19/2013

Name of Building Owner/Operator (2)
Greek Development

Street Address
33 Cotters Lane

City, State, Zip Code
East Brunswick, NJ 08816

Name of Contact
Matthew F. Schindelwein

AGENCIES NOTIFIED

- EPA
- DEP
- DOL
- DOH
- DCA

TYPE NOTIFICATION
- Initial
- Amended
- Amendment #
- Emergency (including Justification)
- Cancellation

STREET ADDRESS
536 Dowd Ave

COUNTY CODE (7) (STATE USE ONLY)

CITY (5)
Elizabeth

COUNTY UNION

SQUARE FEET
155,000 SF

FACILITY INFORMATION

NAME OF FACILITY WHERE ABATEMENT IS TAKING PLACE (3)
Former Seafrigo Facility

TYPE OF FACILITY (4)
- School (K-12)
- Subchapter B (Other than K-12)
- Other (i.e., private & commercial buildings, homes, etc.)

CURRENT USE (Prior if being demolished)
Former Warehouse/Office

NAME OF MONITORING FIRM HIRED BY BUILDING OWNER (5)
J & S Environmental Services

ASCM NO.
N/A

NAME OF ABATEMENT CONTRACTOR (9)
DIA General Construction, Inc.

STREET ADDRESS
2333 Rt 22 West

LICENSE NO.
973-389-0089

STREET ADDRESS
1360 Clifton, Avenue, PMB Suite 218

NAME OF OSHA MONITOR
DIA General Construction, Inc.

CITY, STATE, ZIP CODE
Union NJ 07803

PUBLIC PHONE NO.
908-206-0073

OFFICE PHONE NO.
973-389-0089

LICENSE NO.
973-389-0089

NAME OF OSHA MONITOR
DIA General Construction, Inc.

STREET ADDRESS
1360 Clifton, Avenue, PMB Suite 218

CITY, STATE, ZIP CODE
Clifton, NJ 07012

LICENSE NO.
973-389-0089

START DATE (10)
07/08/2013

LICENSE NO.
00693

SCHEDULED COMPLETION DATE (11)
08/09/2013

LICENSE NO.
00693

OCCUPANCY STATUS DURING ABATEMENT (Check only one)
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours
- Other - Describe:

NAME OF REGISTERED WASTE HAULER
Weigel Trucking Company

NJDPS Waste Handler ID No.
17634

CUBIC YARDS OF WASTE
6,000

NAME OF REGISTERED LANDFILL
Minerva Landfill

CITY, STATE
Clifton, NJ 07012

DISPOSAL DATE
08/09/2013

CITY, STATE
Minerva, OH 44688

COMPLETED BY
Krutartrah Jagad

TITLE
Project Manager

SIGNATURE

DATE
06/19/2013

* Do not use this form for asbestos licensure exempted activities.
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:80 and 5:16)

Date of Notification (1)
06 / 13 / 13

Name of Building Owner/Operator (2)
Sussex County Community College

Agencies Notified
☒ EPA
☒ DOLWD
☒ DHSS
☐ DCA

Street Address
One College Hill Road
City, State, Zip Code
Newton, NJ 07860

Name of Contact
Ken Evans

Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
Sussex County Community College - Building E

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

Square Feet
40,000

City (5)
Newton

# of Floors
4

County (6)
Sussex

Bldg. Age
43

County Code (7) (STATE USE ONLY)

Current Use (Prior to being demolished)
College

Name of Monitoring Firm Hired by Building Owner (8)
Whitman

ASCM No.
00110

Name of Abatement Contractor (9)
Superior Abatement Inc

Street Address
7 Pleasant Hill Road

Telephone No.
(732) 390-5858

City, State, Zip Code
Cranbury, NJ 08512

License No.
00411

Start Date (10)
06 / 24 / 13

Name of OSHA Monitor
Superior Abatement Inc

Scheduled Completion Date (11)
07 / 05 / 13

Occuancy Status During Abatement (Check only one)
☒ Facility Closed/Vacated During Entire Period of Abatement
☒ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: AM - PM / 5:00PM - 2:00AM

Scope of Work (Check all that apply)
☒ ≥23 sf or ≥23 if
☒ ≥160 sf or ≥260 if
☐ Renovation
☒ Demolition

Name of Registered Waste Hauler Service Transport Group, Inc
NJ/DEP Waste Hauler ID No.
SW2117

Cubic Yards of Waste
30

Name of Registered Landfill
Minerva Landfill

City, State
New Castle, DE

Disposal Date
7/5/13

Name of Registered Landfill
Minerva Landfill

City, State
Waynesburgh, OH

Completed By (Print or Type)
Nick Petrovski

Title
President

Signature

Date
6-13-13

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

Date of Notification (1)
06 / 20 / 13

Name of Building Owner/Operator (2)
Sussex County Community College

Agencies Notified
☑ EPA
☑ DOLWD
☑ DHSS
☐ DCA

Type Notification
☐ Initial
☐ Amended
☐ Amendment #4
☐ Emergency (including justification)
☐ Cancellation

Street Address
One College Hill Road
City, State, Zip Code
Newton, NJ 07860

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
Sussex County Community College - Building E

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

Square Feet
40,000

County (6)
Sussex

County Code (?)/STATE USE ONLY)
College

Current Use (Prior if being demolished)

Name of Monitoring Firm Hired by Building Owner (8)
Whitman
ASCM No.
00110

Name of Abatement Contractor (9)
Superior Abatement Inc

Street Address
7 Pleasant Hill Road
City, State, Zip Code
Cranbury, NJ 08512

Project Manager for Monitoring Firm
Kevin Lovely
(732) 390-5858

License No.
00411

Start Date (10)
06 / 24 / 13

Scheduled Completion Date (11)
07 / 05 / 13

Name of OSHA Monitor
Superior Abatement Inc

Street Address
2 Henderson Drive
City, State, Zip Code
West Caldwell, NJ 07006

Scope of Work (Check all that apply)
☐ ≥3 sf or ≥3 ft
☐ ≥160 sf or ≥260 ft
☐ Renovation
☐ Demolition
☐ Full Containment with Negative Pressure
☐ Mini-Enclosure
☐ Glovebox Procedure
☐ Non-Exempted (*) and Non-Friable Procedure

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

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

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

Amount
(Specify SF or LF)

Abatement Type
Removal
Repair
Encapsulate
Enclosure

Boiler Room
☒ ☑ ☐ Boiler Pack, Boiler, Tank & Cap Insul.
330 SF
☒ ☑ ☐

Boiler Room
☒ ☑ ☐ Cementitious Elbows
50 EA
☒ ☑ ☐

Boiler Room
☒ ☑ ☐ Fire Brick
100 SF
☒ ☑ ☐

Boiler Room
☒ ☑ ☐ Caulking & Rope Gasket
160 LF
☒ ☑ ☐

Name of Registered Waste Hauler
Service Transport Group, Inc
NJDEP Waste Hauler ID No.
SW2117

Cubic Yards of Waste
30

Name of Registered Landfill
Minerva Landfill

City, State
New Castle, DE
Waynesburgh, OH

Disposal Date
7/5/13

Completed By (Print or Type)
Nick Petrovski
Title
President
Signature

* Do not use this form for asbestos licensure exempted activities.
**NOTIFICATION OF ASBESTOS ABATEMENT**
(Pursuant to NJAC 8:60-7 and 12:120-7)

- **Date of Notification (1):** 6/19/2013
- **Agency Notified:**
  - [x] EPA
  - [ ] DEP
  - [x] DOL
  - [ ] DOH
  - [ ] DCA

- **Type Notification:**
  - [x] Initial Notification
  - [ ] Amended Notification
  - [ ] Cancellation

- **Name of Building Owner / Operator (2):** Bed, Bath and Beyond
- **Street Address:**
  - 650 Liberty Avenue
  - City, State & Zip Code: Union, NJ 07083

- **Name of Contact:** Mr. John Purcell
- **Telephone Number:**

---

**FACILITY INFORMATION**

- **Name of Facility Where Abatement is Taking Place (3):**
  - Bed, Bath and Beyond Property
- **Street Address:** 650 Liberty Avenue
  - City (5): Union
  - County (6): Union
  - County Code (7):
- **Name of Monitoring Firm Hired by Building Owner (8):** ATC Associates, Inc.
  - ASCM No.: 000598

- **Street Address:**
  - 1090 King Georges Post Road, Suite 706
  - Edison, NJ 08837
- **Project Manager for Monitoring Firm:** Pat Sisk
  - Telephone Number: (732) 771-0051
  - Project Duration:
    - Scheduled Start Date (10): 7/3/2013
    - Scheduled Completion Date (11): 6/30/2014
- **Occupancy Status During Abatement (Check only one):**
  - [ ] Facility Closed/Vacated During Entire Period of Abatement
  - [ ] Abatement Performed Outside of Normal Facility Hours
    - Describe: Work Area Vacated - Working Hours from Monday - Saturday 7:00 AM - 3:30 PM

- **Scope of Work (Check all that apply):**
  - [ ] Demolition
  - [x] Renovation
  - [ ] Large Project
  - [ ] Quantity is ≥ 3 SF or ≥ 3 LF ACM
  - [ ] Quantity is ≥ 160 SF or ≥ 260 LF ACM
  - [ ] Is Location Normally Used Solely by Maintenance or Custodial Staff?
    - Describe:
  - [ ] Full Containment with Negative Pressure
  - [ ] Mini-Enclosure
  - [ ] Glovebag Procedure
  - [ ] Other: Tent

- **Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13):**
  - No

- **4th Floor:**
  - No VAT
  - 1,500 SF
  - Removal
  - No Pipe Insulation
  - 60 LF
  - Removal

- **Name of Registered Waste Hauler:**
  - Tri State Transfer
  - NJDEP Waste Hauler ID #: 19551
  - Cu. Yds. of Waste: 600
  - Name of Registered Landfill:
    - Minerva Enterprises, Inc.
- **City, State:**
  - Bronx, NY
- **Disposal Date:** TBD
  - City, State: Wantonsburg, OH

- **Completed By (Print or Type):**
  - ROY JOHNSON
  - Title: PROJECT EXECUTIVE
- **Signature:**

---

**ASB-41 JUN 95 G4667**
State of New Jersey  
NOTIFICATION OF ASBESTOS ABATEMENT  
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)  1/23/13  
Name of Building Owner/Operator (2)  Rutgers University

Agencies Notified  
- EPA  
- DOLWD  
- DHSS  
- DCA (NJAC 5:23-8)

Type Notification  
- Initial  
- Amended  
- Amendment #7-6/21/13  
- Emergency (including justification)  
- Cancellation

Street Address  
#27 Road 1 Bldg 4086  
City, State, Zip Code  
Piscataway, NJ 08854

Name of Contact  
Mike Smith

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)  
15 Washington Street

Street Address  
15 Washington Street  
City (5)  
Newark  
County (6)  
Essex  
County Code (7)  

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

Square Feet  
200,000+  
# of Floors  
19  
Bldg. Age  
60+

Name of Monitoring Firm Hired by Building Owner (8)  
ATC  
ASCM No.  
00098  
Name of Abatement Contractor (9)  
BRISTOL ENVIRONMENTAL, INC.

Street Address  
3 Terri Lane  
City, State, Zip Code  
Burlington Township, NJ 08016

Project Manager for Monitoring Firm  
Brian Kearney  
Telephone No.  
609-386-8800

Start Date (10)  
2/15/13  
Scheduled Completion Date (11)  
9/01/13

Occupancy Status During Abatement (Check only one)  
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours - Describe
  Time of Abatement: 7:00AM - PM / PM-12:00AM

Scope of Work (Check all that apply)  
- >3 sf or >3 If  
- >160 sf or >260 If  
- Renovation  
- Demolition  
- Full Containment with Negative Pressure  
- Mini-Enclosure  
- Glovebag Procedure  
- Non-Exempted (*) and Non-Friable Procedure

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

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

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

Amount  
Specify SF or LF

Abatement Type  
Removal  
Repair  
Encapsulate  
Endorse

Name of Registered Waste Hauler  
SERVICE TRANSPORT GROUP, INC.  
NJDEP Waste Hauler ID No.  
20990  
Cubic Yards of Waste  
1000 Cu Yds  
Name of Registered Landfill  
MINERVA LANDFILL

City, State  
NEW CASTLE, DE 19720  
Disposal Date  
8/16/12  
City, State  
WAYNESBURG, OH 44688

Completed By (Print or Type)  
Gino Pizzigoni  
Title  
General Manager  
Signature  
Gino Pizzigoni  
Date  
6/24/13

* Do not use this form for asbestos licensure exempted activities.
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</tr>
<tr>
<td>Floor Tile</td>
<td>8,250 SF</td>
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<tr>
<td>Double Layer Tile</td>
<td>8,250 SF</td>
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<tr>
<td>Mastic</td>
<td>65,782 SF</td>
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<tr>
<td>Transite Panels</td>
<td>214 SF</td>
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<td>Transite Panels</td>
<td>3,080 SF</td>
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<td>Transite Panels</td>
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<td>Built Up Roofing</td>
<td>1,584 SF</td>
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<td>Triple Layer Tile</td>
<td>3,184 SF</td>
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<td>AHU Cork Sealant</td>
<td>750 SF</td>
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<tr>
<td>White Electrical Wire</td>
<td>30 LF</td>
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<tr>
<td>Boiler Door Refractory</td>
<td>100 SF</td>
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<tr>
<td>Steam Drum Insulation</td>
<td>400 SF</td>
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<tr>
<td>Heat Exchanger Insulation</td>
<td>25 SF</td>
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<tr>
<td>Duct/Boiler Insulation</td>
<td>800 SF</td>
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<tr>
<td>Ceiling Plaster</td>
<td>1,400 SF</td>
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<tr>
<td>Pipe Insulation</td>
<td>1,480 SF</td>
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<td>Pipe Insulation</td>
<td>26,864 SF</td>
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<tr>
<td>Heat Shields</td>
<td>70 Ea</td>
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State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

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<tr>
<th>Date of Notification (1)</th>
<th>1 / 23 / 13</th>
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<td>Amended</td>
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<td>☑ DCA</td>
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<td>☑ (NJAC 5:23-5)</td>
<td>Emergency (including justification)</td>
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<td>Name of Building Owner/Operator (2)</td>
<td>Rutgers University</td>
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<tr>
<td>Street Address</td>
<td>#27 Road 1 Bldg 4086</td>
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<tr>
<td>City, State, Zip Code</td>
<td>Piscataway, NJ 08854</td>
</tr>
<tr>
<td>Name of Contact</td>
<td>Mike Smith</td>
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<td>Telephone Number</td>
<td></td>
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FACILITY INFORMATION

<table>
<thead>
<tr>
<th>Name of Facility Where Abatement is Taking Place (3)</th>
<th>15 Washington Street</th>
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<tbody>
<tr>
<td>Street Address</td>
<td>15 Washington Street</td>
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<tr>
<td>City (5)</td>
<td>Newark</td>
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<tr>
<td>County (6)</td>
<td>Essex</td>
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<tr>
<td>County Code (7) (STATE USE ONLY)</td>
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<tr>
<td>Current Use (Prior if being demolished)</td>
<td>University</td>
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<tr>
<td>Square Feet</td>
<td>200,000+</td>
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<tr>
<td># of Floors</td>
<td>19</td>
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<tr>
<td>Bldg. Age</td>
<td>60+</td>
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Name of Monitoring Firm Hired by Building Owner (8)

<table>
<thead>
<tr>
<th>ASCM No.</th>
<th>Name of Abatement Contractor (9)</th>
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<tbody>
<tr>
<td>00098</td>
<td>BRISTOL ENVIRONMENTAL, INC.</td>
</tr>
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Street Address
3 Terri Lane
Burlington Township, NJ 08016

Project Manager for Monitoring Firm
Brian Kearney
Telephone No.
609-366-8500

Start Date (10)
2 / 15 / 13

Scheduled Completion Date (11)
6 / 28 / 13

Name of OSHA Monitor
BRISTOL ENVIRONMENTAL, INC.

Street Address
1123 BEAVER STREET
Burlington, PA 19007

Scope of Work (Check all that apply)

- ☑ ≥3 sf or ≥3 If
- ☑ ≥160 sf or ≥260 If

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

<table>
<thead>
<tr>
<th>Location Normally Used Solely by Maintenance/Custodial Staff? (12)</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
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Description of Asbestos Containing Material (ACM)
(i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

<table>
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<tr>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
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See attached

Name of Registered Waste Hauler
SERVICE TRANSPORT GROUP, INC.

<table>
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<th>N.J.DEP Waste Hauler ID No.</th>
<th>Disposal Date</th>
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<td>20990</td>
<td>8/16/12</td>
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Name of Registered Landfill
MINERVA LANDFILL

City, State
NEW CASTLE, DE 19720

Completed By (Print or Type)
Gino Pizzigoni
Title General Manager
Signature

Date
5/8/13

* Do not use this form for asbestos licensure exempted activities.
<table>
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<th>Area</th>
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</table>

**Floor Tile**
- Double Layer Tile: 8,230 SF
- Mastic: 65,182 SF
- Transite Panels: 214 SF
- Transite Panels: 3,080 SF
- Built Up Roofing: 1,584 SF
- Triple Layer Tile: 3,184 SF
- AHU Cork Sealant: 750 SF
- White Electrical Wire: 30 LF
- Boiler Door Refractory: 100 SF
- Steam Drum Insulation: 400 SF
- Heat Exchanger Insulation: 25 SF
- Duct/Boiler Insulation: 800 SF
- Ceiling Plaster: 1,400 SF
- Pipe Insulation: 1,480 SF
- Pipe Insulation: 26,864 SF
- Heat Shields: 70 Ea
**State of New Jersey**

**NOTIFICATION OF ASBESTOS ABATEMENT**
(Pursuant to NJAC 8:60 and 5:16)

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>Name of Building Owner/Operator (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 / 23 / 13</td>
<td>Rutgers University</td>
</tr>
</tbody>
</table>

**AGENCIES NOTIFIED**
- EPA
- DOLWD
- DHSS
- DCA (NJAC 5:23-8)

**Street Address**
#27 Road 1 Bldg 4086
Piscataway, NJ 08854

**Name of Contact**
Mika Smith

**FACILITY INFORMATION**

<table>
<thead>
<tr>
<th>Name of Facility Where Abatement is Taking Place (3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 Washington Street</td>
</tr>
</tbody>
</table>

**City (5)**
Newark

**County (6)**
Essex

**County Code (7) (STATE USE ONLY)**

**Current Use (Prior to being demolished)**
University

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

**Square Feet**
200,000+

**# of Floors**
19

**Bidg. Age**
60+

**Name of Monitoring Firm Hired by Building Owner (8)**
ATC

**ASCM No.**
00098

**Name of Abatement Contractor (9)**
BRISTOL ENVIRONMENTAL, INC.

**Street Address**
1123 BEAVER STREET
Burlington Township, NJ 08016

**City, State, Zip Code**
BRISTOL, PA 08016

**Project Manager for Monitoring Firm**
Brian Kearney

**Telephone No.**
609-386-8800

**License No.**
00509

**Start Date (10)**
2 / 15 / 13

**Scheduled Completion Date (11)**
5 / 31 / 13

**Name of OSHA Monitor**
BRISTOL ENVIRONMENTAL, INC.

**Street Address**
1123 BEAVER STREET

**City, State, Zip Code**
BRISTOL, PA 19007

**Occupancy Status During Abatement (Check only one)**
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7:00AM - PM / PM - 12:00AM

**Scope of Work (Check all that apply)**
- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*) and Non-Friable Procedure

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

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Name of Registered Waste Hauler**
SERVICE TRANSPORT GROUP, INC.

**NJDEP Waste Hauler ID No.**
20990

**Cubic Yards of Waste**
1000 Cu Yds

**Name of Registered Landfill**
MINERVA LANDFILL

**City, State**
NEW CASTLE, DE 19720

**Disposal Date**
8/16/12

**City, State**
WAYNESBURG, OH 44688

**Completed By (Print or Type)**
Gino Pizzigoni

**Title**
General Manager

**Signature**

**Date**
4/25/13
<table>
<thead>
<tr>
<th>Area</th>
<th>Material</th>
<th>Quantity</th>
</tr>
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<tbody>
<tr>
<td>Throughout</td>
<td>Floor Tile</td>
<td>67,282 SF</td>
</tr>
<tr>
<td>Throughout</td>
<td>Double Layer Tile</td>
<td>5,230 SF</td>
</tr>
<tr>
<td>Throughout</td>
<td>Mastic</td>
<td>65,182 SF</td>
</tr>
<tr>
<td>Roof</td>
<td>Transite Panels</td>
<td>214 SF</td>
</tr>
<tr>
<td>Roof</td>
<td>Transite Panels</td>
<td>3,080 SF</td>
</tr>
<tr>
<td>Roof</td>
<td>Built Up Roofing</td>
<td>1,584 SF</td>
</tr>
<tr>
<td>Roof</td>
<td>Triple Layer Tile</td>
<td>3,184 SF</td>
</tr>
<tr>
<td>7th Floor Mech Room</td>
<td>AHU Cork Sealant</td>
<td>750 SF</td>
</tr>
<tr>
<td>7th Floor Mech Room</td>
<td>White Electrical Wire</td>
<td>30 LF</td>
</tr>
<tr>
<td>Sub Basement Mech Room</td>
<td>Boiler Door Refractory</td>
<td>100 SF</td>
</tr>
<tr>
<td>Sub Basement Mech Room</td>
<td>Steam Drum Insulation</td>
<td>400 SF</td>
</tr>
<tr>
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<td>Throughout</td>
<td>Heat Shields</td>
<td>70 Ea</td>
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State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)
1 / 23 / 13

Name of Building Owner/Operator (2)
Rutgers University

Agencies Notified
☑ EPA
ox DOLWD
ox DHSS
☑ DCA (NJAC 5:23-8)
☐ Emergency (including justification)
☐ Cancellation

Type Notification
☑ Initial
☐ Amended
Amendment #4-2/15/13

Street Address
#27 Road 1 Bldg 4086

City, State, Zip Code
City, Piscataway, NJ 08854

Name of Contact
Mike Smith

Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
15 Washington Street

Type of Facility (4)
☐ School (K-12)
☑ Subchapter 6 (Other than K-12)
☐ Other (i.e., private and commercial buildings, homes, etc.)

Square Feet
200,000+

County Code (STATE USE ONLY)

Current Use (Prior if being demolished)
University

City (5)
Newark

City, State, Zip Code
City, Burlington Township, NJ 08016

County (6)
Essex

County Code (STATE USE ONLY)

Name of Monitoring Firm Hired by Building Owner (8)
ACSM No.
00098

Name of Abatement Contractor (9)
BRISTOL ENVIRONMENTAL, INC.

Street Address
3 Terri Lane

Street Address
1123 BEAVER STREET

City, State, Zip Code
City, BRISTOL, PA 19007

Project Manager for Monitoring Firm
Brian Kearney

Telephone No.
609-365-8800

Telephone No.
215-788-8040

License No.
00509

Start Date (10)
02 / 15 / 13

Scheduled Completion Date (11)
05 / 31 / 13

Name of OSHA Monitor
BRISTOL ENVIRONMENTAL, INC.

Time of Abatement: 7:00AM-4:00PM - 5:00PM - 11:00AM

Scope of Work (Check all that apply)
☐ ≥3 sf or ≥3 if
☐ ≥160 sf or ≥260 if
☐ Renovation
☒ Demolition
☐ Full Containment with Negative Pressure
☐ Mini-Enclosure
☐ Glovebag Procedure
☐ Non-Exempted (*) and Non-Friable Procedure

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

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

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

Amount (Specify SF or LF)

Abatement Type
☐ Removal
☐ Repair
☐ Encapsulate
☐ Endorese

Name of Registered Waste Hauler
SERVICE TRANSPORT GROUP, INC.

NJDEP Waste Hauler ID No.
20930

City, State
NEW CASTLE, DE 19720

Cubic Yards of Waste
1000 Cu Yds

Disposal Date
8/16/12

City, State
WAYNESBURG, OH 44688

Name of Registered Landfill
MINERVA LANDFILL

Completed By (Print or Type)
Gino Pizzigoni

Title
General Manager

Signature

Date
2/15/13
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(Pursuant to NJAC 8:60 and 5:16)

**State of New Jersey**

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<th>Agencies Notified</th>
<th>Type Notification</th>
<th>Name of Building Owner/Operator</th>
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<tbody>
<tr>
<td>✡ EPA</td>
<td>✡ Initial</td>
<td>Rutgers University</td>
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<tr>
<td>✡ DOLWD</td>
<td>✡ Amended</td>
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<tr>
<td>✡ DHSS</td>
<td>✡ Amendment #3-2/15/13</td>
<td></td>
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<tr>
<td>✡ DCA (NJAC 5:23-8)</td>
<td>✡ Emergency (including justification)</td>
<td></td>
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<tr>
<td>✡ Cancellation</td>
<td>✡ Cancellation</td>
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<table>
<thead>
<tr>
<th>Street Address</th>
<th>#27 Road 1 Bldg 4086</th>
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</table>

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<thead>
<tr>
<th>City, State, Zip Code</th>
<th>Piscataway, NJ 08854</th>
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<table>
<thead>
<tr>
<th>Name of Contact</th>
<th>Mike Smith</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Telephone Number</th>
<th></th>
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</thead>
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**FACILITY INFORMATION**

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<thead>
<tr>
<th>Name of Facility Where Abatement is Taking Place</th>
<th>15 Washington Street</th>
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<tr>
<th>Street Address</th>
<th>15 Washington Street</th>
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</table>

<table>
<thead>
<tr>
<th>City (5)</th>
<th>New Brunswick</th>
</tr>
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<table>
<thead>
<tr>
<th>County (6)</th>
<th>Essex</th>
</tr>
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<table>
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<tr>
<th>County Code (7)/STATE USE ONLY</th>
<th>Essex</th>
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<table>
<thead>
<tr>
<th>Square Feet</th>
<th>200,000+</th>
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<tr>
<th># of Floors</th>
<th>19</th>
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<table>
<thead>
<tr>
<th>Bldg. Age</th>
<th>65+</th>
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<table>
<thead>
<tr>
<th>Type of Facility</th>
<th>☑ School (K-12)</th>
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</thead>
<tbody>
<tr>
<td>School (K-12)</td>
<td>School (K-12)</td>
</tr>
<tr>
<td>Subchapter 8 (Other than K-12)</td>
<td>Subchapter 8 (Other than K-12)</td>
</tr>
<tr>
<td>☑ Other (i.e., private and commercial buildings, homes, etc.)</td>
<td>Other (i.e., private and commercial buildings, homes, etc.)</td>
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</table>

<table>
<thead>
<tr>
<th>Current Use (Prior if being demolished)</th>
<th>University</th>
</tr>
</thead>
</table>

**Monitoring Firm**

<table>
<thead>
<tr>
<th>Name of Monitoring Firm Hired by Building Owner</th>
<th>ATC</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>3 Terri Lane</th>
</tr>
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</table>

<table>
<thead>
<tr>
<th>City, State, Zip Code</th>
<th>Burlington Township, NJ 08016</th>
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<table>
<thead>
<tr>
<th>Project Manager for Monitoring Firm</th>
<th>Telephone No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brian Kearney</td>
<td>609-368-8800</td>
</tr>
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<table>
<thead>
<tr>
<th>Start Date</th>
<th>2 / 15 / 13</th>
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<tr>
<th>Scheduled Completion Date</th>
<th>5 / 31 / 13</th>
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<table>
<thead>
<tr>
<th>Occupancy Status During Abatement</th>
<th>Check only one</th>
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</thead>
<tbody>
<tr>
<td>☑ Facility Closed/Vacated During Entire Period of Abatement</td>
<td></td>
</tr>
<tr>
<td>☑ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement</td>
<td>7:00AM-10:00PM_12-AM</td>
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<table>
<thead>
<tr>
<th>Scope of Work (Check all that apply)</th>
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<tbody>
<tr>
<td>☑ 3+ ft or ≥ 500 ft</td>
</tr>
<tr>
<td>☑ ≥ 160 sq ft or ≥ 260 ft</td>
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<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility</th>
</tr>
</thead>
<tbody>
<tr>
<td>IN Facility (13)</td>
</tr>
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<table>
<thead>
<tr>
<th>Is Location Normally Used Solely by Maintenance/Custodial Staff?</th>
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</thead>
<tbody>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>------</td>
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<table>
<thead>
<tr>
<th>Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
<th></th>
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<table>
<thead>
<tr>
<th>Amount (Specify SF or LF)</th>
<th></th>
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<table>
<thead>
<tr>
<th>Abatement Type</th>
<th></th>
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<tbody>
<tr>
<td>Full Containment with Negative Pressure</td>
<td></td>
</tr>
<tr>
<td>Mini-Enclosure</td>
<td></td>
</tr>
<tr>
<td>Glovebag Procedure</td>
<td></td>
</tr>
<tr>
<td>Non-Exempted (*) and Non-Friable Procedure</td>
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<table>
<thead>
<tr>
<th>Location of Registered Waste Hauler</th>
</tr>
</thead>
<tbody>
<tr>
<td>SERVICE TRANSPORT GROUP, INC.</td>
</tr>
</tbody>
</table>

<table>
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<tr>
<th>NDEP Waste Hauler ID No.</th>
<th>290990</th>
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<table>
<thead>
<tr>
<th>Cubic Yards of Waste</th>
<th>1000 Cu Yds</th>
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<table>
<thead>
<tr>
<th>Name of Registered Landfill</th>
<th>MINERVA LANDFILL</th>
</tr>
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<table>
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<tr>
<th>Disposal Date</th>
<th>8/16/12</th>
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<table>
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<tr>
<th>City, State</th>
<th>WAYNESBURG, OH 44688</th>
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**Licensing**

<table>
<thead>
<tr>
<th>Completed By (Print or Type)</th>
<th>Gino Pizzigoni</th>
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<table>
<thead>
<tr>
<th>Title</th>
<th>General Manager</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Signature</th>
<th>General Manager</th>
</tr>
</thead>
</table>

<table>
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<th>Date</th>
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*Do not use this form for asbestos licensing exemption activities.*
### NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 8:16)

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#### Name of Building Owner/Operator (2)
- Rutgers University

#### Street Address
- #27 Road 1 Bldg 4088

#### City, State, Zip Code
- Piscataway, NJ 08854

#### Name of Contact
- Mike Smith

#### Name of Facility Where Abatement is Taking Place (3)
- 15 Washington Street

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

#### Square Feet
- 200,000+ | # of Floors | 19 | Bldg. Age | 60+

#### Current Use (Prior to being demolished)
- University

#### County Code (7) (STATE USE ONLY)
- [ ]

#### Name of Monitoring Firm Hired by Building Owner (8)
- ATC
- ASCM No. 00088

#### Name of Abatement Contractor (9)
- Bristol Environmental, Inc.
- Street Address
- 1123 Beaver Street
- City, State, Zip Code
- BRISTOL, PA 18007
- Telephone No.
- 609-385-8800
- License No.
- 00509

#### Start Date (10)
- ON HOLD
- Scheduled Completion Date (11)
- 5 / 31 / 13

#### Occupancy Status During Abatement (Check only one)
- [ ] Facility Closed/Vacated During Entire Period of Abatement
- [ ] Abatement Performed Outside of Normal Facility Hours - Describe
- Time of Abatement: 7:00AM - 4:00PM, PM - AM

#### Scope of Work (Check all that apply)
- [ ] 1000 sf or > 260 sf
- [ ] 160 sf or > 260 sf
- [ ] 160 sf or > 260 sf
- [ ] Renovation
- [ ] Demolition
- [ ] Full Containment with Negative Pressure
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- [ ] Glovebag Procedure
- [ ] Non-Exempted (*) and Non-Fireable Procedure

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

#### Is Location Normally Used Solely by Maintenance/ Custodial Staff?
- [ ] Yes
- [ ] No
- [ ] N/A

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

#### Amount (Specify SF or LF)

#### Name of Registered Waste Hauler
- Service Transport Group, Inc.
- NJDEP Waste Hauler ID No. 20990
- Cubic Yards of Waste: 1000 Cu Yds

#### Name of Registered Landfill
- Minerva Landfill
- City, State
- WAYNESBURG, OH 44688

#### Disposal Date
- 8/16/12

#### Completed By (Print or Type)
- Gino Pizzigoni
- Title
- General Manager

#### Signature
- [ ]

#### Date
- 2/7/13
<table>
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<tr>
<th>Material Description</th>
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</tr>
<tr>
<td>Sub Basement Mech Room</td>
<td></td>
</tr>
<tr>
<td>Throughout</td>
<td></td>
</tr>
<tr>
<td>Throughout</td>
<td></td>
</tr>
<tr>
<td>Floor Tile</td>
<td>67,282 SF</td>
</tr>
<tr>
<td>Double Layer Tile</td>
<td>8230 SF</td>
</tr>
<tr>
<td>Mastic</td>
<td>65,182 SF</td>
</tr>
<tr>
<td>Transite Panels</td>
<td>214 SF</td>
</tr>
<tr>
<td>Transite Panels</td>
<td>3,080 SF</td>
</tr>
<tr>
<td>Built Up Roofing</td>
<td>1,584 SF</td>
</tr>
<tr>
<td>Triple Layer Tile</td>
<td>3,184 SF</td>
</tr>
<tr>
<td>AHU Cork Sealant</td>
<td>760 SF</td>
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<tr>
<td>White Electrical Wire</td>
<td>30 LF</td>
</tr>
<tr>
<td>Boiler Door Refractory</td>
<td>100 SF</td>
</tr>
<tr>
<td>Steam Drum Insulation</td>
<td>400 SF</td>
</tr>
<tr>
<td>Heat Exchanger Insulation</td>
<td>25 SF</td>
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<tr>
<td>Duct/Boiler Insulation</td>
<td>800 SF</td>
</tr>
<tr>
<td>Ceiling Plaster</td>
<td>1,400 SF</td>
</tr>
<tr>
<td>Pipe Insulation</td>
<td>1,480 SF</td>
</tr>
<tr>
<td>Pipe Insulation</td>
<td>28,864 SF</td>
</tr>
<tr>
<td>Heat Shields</td>
<td>70 Ea</td>
</tr>
</tbody>
</table>
**State of New Jersey**

**NOTIFICATION OF ASBESTOS ABATEMENT**
(Pursuant to NJAC 8:60 and 8:16)

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>1 / 23 / 13</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Building Owner/Operator (2)</td>
<td>Rutgers University</td>
</tr>
<tr>
<td>Street Address</td>
<td>#27 Road 1 Bidg 4086</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Piscataway, NJ 08854</td>
</tr>
<tr>
<td>Name of Contact</td>
<td>Mike Smith</td>
</tr>
<tr>
<td>Telephone Number</td>
<td></td>
</tr>
</tbody>
</table>

**FACILITY INFORMATION**

| Name of Facility Where Abatement is Taking Place (3) | 15 Washington Street |
| Street Address | 15 Washington Street |
| City (5) | New Brunswick |
| County (6) | Essex |
| County Code (7) | |
| Name of Monitoring Firm Hired by Building Owner (8) | ATC |
| ASCM No. | 00098 |
| Name of Abatement Contractor (9) | BRISTOL ENVIRONMENTAL, INC. |
| Street Address | 1123 BEAVER STREET |
| City, State, Zip Code | BRISTOL, PA 19007 |
| Street Address | 1123 BEAVER STREET |
| City, State, Zip Code | BRISTOL, PA 19007 |

| Start Date (10) | 2 / 6 / 13 |
| Scheduled Completion Date (11) | 5 / 31 / 13 |

**Occupancy Status During Abatement (Check only one)**
- ☒ Facility Closed/Vacated During Entire Period of Abatement
- ☐ Abatement Performed Outside of Normal Facility Hours - Describe
- Time of Abatement: 7:00AM-4:00PM

**Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (12)**

<table>
<thead>
<tr>
<th>Is Location Normally Used Solely by Maintenance/Custodial Staff?</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Scope of Work (Check all that apply)**
- ☐ Renovation
- ☐ Demolition
- ☒ Full Containment with Negative Pressure
- ☐ Mini-Enclosure
- ☐ Glovebag Procedure
- ☐ Non-Exempted (*) and Non-Firable Procedure

**Name of Registered Waste Hauler**

<table>
<thead>
<tr>
<th>SERVICE TRANSPORT GROUP, INC.</th>
</tr>
</thead>
<tbody>
<tr>
<td>City, State</td>
</tr>
<tr>
<td>NJDEP Waste Hauler ID No.</td>
</tr>
<tr>
<td>Cubic Yards of Waste Disposal</td>
</tr>
<tr>
<td>Name of Registered Landfill</td>
</tr>
<tr>
<td>City, State</td>
</tr>
<tr>
<td>Completed By (Print or Type)</td>
</tr>
<tr>
<td>Title</td>
</tr>
<tr>
<td>Signature</td>
</tr>
<tr>
<td>Category</td>
</tr>
<tr>
<td>--------------------------------</td>
</tr>
<tr>
<td>Throughout</td>
</tr>
<tr>
<td>Throughout</td>
</tr>
<tr>
<td>Throughout</td>
</tr>
<tr>
<td>Roof</td>
</tr>
<tr>
<td>Roof</td>
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<tr>
<td>Throughout</td>
</tr>
<tr>
<td>7th Floor Mech Room</td>
</tr>
<tr>
<td>7th Floor Mech Room</td>
</tr>
<tr>
<td>Sub Basement Mech Room</td>
</tr>
<tr>
<td>Sub Basement Mech Room</td>
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<tr>
<td>Sub Basement Mech Room</td>
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<tr>
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<tr>
<td>Sub Basement Mech Room</td>
</tr>
<tr>
<td>Throughout</td>
</tr>
<tr>
<td>Throughout</td>
</tr>
</tbody>
</table>
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:50 and 5:16)

Date of Notification (1)
1 / 23 / 13

Name of Building Owner/Operator (2)
Rutgers University

Agencies Notified
☐ EPA 6.35a
☐ DOLWD 6.33b
☐ DHSS 6.37c
☐ GCA (NJAC 5:23-8)

Type Notification
☐ Initial
☐ Amended
☐ Amendment #_____
☐ Emergency (Including Justification)
☐ Cancellation

Street Address
#27 Road 1 Bldg 4086

City, State, Zip Code
Placatoway, NJ 08854

Name of Contact
Mike Smith

Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
15 Washington Street

Street Address
15 Washington Street

City (5)
New Brunswick

County (6)
Essex

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

Square Feet
200,000+

% of Floors
19

Bldg. Age
60+

Current Use (Prior if being demolished)
University

Name of Monitoring Firm Hired by Building Owner (8)
ATC

ASCM No.
00098

Name of Abatement Contractor (9)
BRISTOL ENVIRONMENTAL, INC.

Street Address
1123 BEAVER STREET

City, State, Zip Code
BRISTOL, PA 19007

Telephone No.
609-336-8800

License No.
215-788-6040

Name of OSHA Monitor
BRISTOL ENVIRONMENTAL, INC.

Street Address
1123 BEAVER STREET

City, State, Zip Code
BRISTOL, PA 19007

Scope of Work (Check all that apply)
☐ ≥3 sft or ≥3 LF
☐ ≥160 sft or ≥260 LF
☐ Renovation
☐ Demolition
☐ Full Containment with Negative Pressure
☐ Mini-Enclosure
☐ Glovebag Procedure
☐ Non-Exempted (?) and Non-Friable Procedure

Start Date (10)
2 / 6 / 13

Scheduled Completion Date (11)
5 / 31 / 13

Occuancy Status During Abatement (Check only one)
☐ Facility Closed/Vacuated During Entire Period of Abatement
☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7:00AM-4:00PM PM AM

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

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

See attached

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

Amount (Specify SF or LF)

Abatement Type

Name of Registered Waste Hauler
SERVICE TRANSPORT GROUP, INC.

NJDEP Waste Hauler ID No.
20996

Cubic Yards of Waste
1000 Cu Yds

Name of Registered Landfill
MINERVA LANDFILL

Disposal Date
8/18/12

City, State
WAYNESBURG, OH 44568

Completed By (Print or Type)
Gino Pizzigoni

Title
General Manager

Signature

Date
1/0
<table>
<thead>
<tr>
<th>Location</th>
<th>Material</th>
<th>Quantity (SF or LF)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Throughout</td>
<td>Floor Tile</td>
<td>27,292 SF</td>
</tr>
<tr>
<td>Throughout</td>
<td>Double Layer Tile</td>
<td>6,326 SF</td>
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<tr>
<td>Throughout</td>
<td>Mastic</td>
<td>65,182 SF</td>
</tr>
<tr>
<td>Roof</td>
<td>Transite Panels</td>
<td>214 SF</td>
</tr>
<tr>
<td>Roof</td>
<td>Transite Panels</td>
<td>3,080 SF</td>
</tr>
<tr>
<td>Roof</td>
<td>Built Up Roofing</td>
<td>1,584 SF</td>
</tr>
<tr>
<td>Throughout</td>
<td>Triple Layer Tile</td>
<td>3,184 SF</td>
</tr>
<tr>
<td>7th Floor Mech Room</td>
<td>AHU Cork Sealant</td>
<td>750 SF</td>
</tr>
<tr>
<td>Sub Basement Mech Room</td>
<td>White Electrical Wire</td>
<td>30 LF</td>
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<tr>
<td>Sub Basement Mech Room</td>
<td>Boiler Door Refractory</td>
<td>100 SF</td>
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<td>Sub Basement Mech Room</td>
<td>Steam Drum Insulation</td>
<td>400 SF</td>
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<td>Sub Basement Mech Room</td>
<td>Heat Exchanger Insulation</td>
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<td>Duct/Boiler Insulation</td>
<td>800 SF</td>
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<tr>
<td>Sub Basement Mech Room</td>
<td>Ceiling Plaster</td>
<td>1,400 SF</td>
</tr>
<tr>
<td>Throughout</td>
<td>Pipe Insulation</td>
<td>1,480 SF</td>
</tr>
<tr>
<td>Throughout</td>
<td>Pipe Insulation</td>
<td>26,864 SF</td>
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<tr>
<td>Throughout</td>
<td>Heat Shields</td>
<td>70 Ea</td>
</tr>
</tbody>
</table>

*Note: The table contains various materials and their corresponding quantities listed for different locations.*
**State of New Jersey**
**NOTIFICATION OF ASBESTOS ABATEMENT**
(Pursuant to NJAC 8:60 and 12:120)

**Date of Notification (1)**
06/13/2013

**Agency Notified**
- EPA
- DEP
- DOL
- DOH
- DCA

**Name of Building Owner/Operator (2)**
Brian Harris

**Street Address**
247 East Glen Avenue

**City, State, Zip Code**
Ridgewood, NJ 07450

**Name of Contact**
Brian Harris

**FACILITY INFORMATION**

**Name of Facility Where Abatement is Taking Place (3)**

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

**Square Feet**

**# of Floors**

**Bldg. Age**
50+

**County Code (7) (STATE USE ONLY)**

**Current Use (Prior or if being demolished)**
Home

**Name of Monitoring Firm Hired by Building Owner (8)**

**ASCN No.**

**Name of Abatement Contractor (9)**
RICI CORP

**Street Address**
41 LIBERTY STREET

**City, State, Zip Code**
PASSAIC, NJ 07055

**Telephone No.**
973-614-1266

**License No.**
00838

**Start Date (10)**
June 18, 2013

**Scheduled Completion Date (11)**
June 20, 2013

**Occupancy Status During Abatement (Check only one)**
- Facility Closed/Nonused During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours
- Other - Describe

**Scope of Work (Check all that apply)**
- 3 ft or 3 ft
- 150 sf or 260 sf
- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*) and Non-Friable Procedure

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

**IN Facility**

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

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

**Amount (Specify SF or LF)**

**Abatement Type**
- Removal
- Encapsulate
- Endorse

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED</th>
<th>Is Location Normally Used Solely by Maintenance/Custodial Staff?</th>
<th>Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
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<tbody>
<tr>
<td>Pipe Insulation</td>
<td>Yes</td>
<td>250 LF</td>
<td></td>
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**Name of Registered Waste Hauler**
NJDEP Waste Hauler ID No.

**Cubic Yards of Waste**
TBD

**Name of Registered Landfill**
G.R.O.W.S. LANDFILL

**Disposal Date**
TBD

**City, State**
MORRISVILLE, PA

**Completed by**
RISTO TRAJKOV

**Title**
PRESIDENT

**Signature**

**Date**
06/13/2013
State of New Jersey - Notification of Asbestos Abatement  
(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)  

**GAC Project # 060-13**

**Date of Notification (1)**  
June 20, 2013  

**Agencies Notified**  
- [ ] EPA  
- [ ] DCA  
- [ ] DOH  
- [X] DEP - No Longer REQUIRED  
- [X] DOH  

**Notification Type**  
- [ ] Initial Notification  
- [X] Amended Notification #1 - additional quantities  
- [ ] Emergency (including justification)  
- [ ] Cancelled  

**Name of Building Owner/Operator (2)**  
RUTGERS, THE STATE UNIVERSITY OF NJ  

**Street Address**  
ENVIRONMENTAL HEALTH & SAFETY DEPT., 27 ROAD 1, BLDG. 4086, LIVINGSTON CAMPUS  
City, State, Zip Code  
PISCATAWAY, NJ 08854  

**Name of Contact**  
MICHAEL SMITH, ENV. HEALTH & SAFETY  

**FACILITY INFORMATION**

**Name of Facility Where Abatement is Taking Place (3)**  
HILL HALL, BLDG# 7225  

**Street Address**  
NEWARK CAMPUS  

**City**  
NEWARK  

**County**  
ESSEX  

**County Code (7) (State Use Only)**  

**Name of Monitoring Firm Hired by Bldg. Owner (8)**  
ATC ASSOCIATES  

**ASCM No.**  
0098  

**Name of Contractor (9)**  
GREENWOOD ABATEMENT CONSULTANTS, INC.  

**Street Address**  
268 MAIN STREET  

**City**  
BURLINGTON, NJ 08016  

**State**  
NJ  

**Zip Code**  
08016  

**Project Manager for Monitoring Firm**  
BRIAN KEARNY  

**Telephone Number**  
609-386-8800  

**Scheduled Start Date (10)**  
06/21/13  

**Scheduled Completion Date (11)**  
06/24/13  

**Occupancy Status During Abatement (Check only one)**  
- [ ] Facility Closed/Vacated During Entire Period of Abatement  
- [X] Abatement Performed Outside of Normal Facility Hours - Describe  
  - Other - Describe: Shift Hours: 4:00 PM - 5:00 AM  

**Scope of Work (Check all that apply)**  
- [ ] ≥ 3 sf or ≥ 3 If  
- [X] ≥ 160 sf or ≥ 260  
- [ ] Renovation  
- [X] Demolition  
- [ ] Full Containment with Negative Pressure  
- [ ] Mini-Enclosure  
- [ ] Glovebag Procedure  
- [X] Non-Exempted (*) and Non-Friable Procedure  

**Location of Asbestos-Containing Material (ACM) in Facility (13)**  

<table>
<thead>
<tr>
<th>Description of Asbestos Containing Material (ACM)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is Location Normally Used Solely by Maint./Custodial Staff? (12)</td>
<td>2800 SF</td>
<td>Remove, Repair Encap, Enclose</td>
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<tr>
<td>YES</td>
<td>NA</td>
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</table>

**5th Floor Offices**  

| VAT | TSI | <9 LF | 2800 SF |

**Name of Reg. Waste hauler**  
See Hauler Below #1 & 2  

**Hauler #1** Greenwood Abatement Consultants, Inc. - Butler, NJ 07405  

**NJDEP Waste Hauler ID #**  
NJDEP # 12061  

**Hauler #2** Horizon Disposal Services, Inc., Trenton, NJ 08611  

**NJ DEP #**  
22812  

**Completed by (Print or Type)**  
RAYMOND C. PEDALINO  
Title  
SENIOR PROJECT MANAGER  

**Signature**  
Raymond C. Pedalino  

**Date**  
June 20, 2013  

**Disposal Date**  
06/24/13  

**City, State**  
160 New Ford Mill Rd. Morrisville, Pa 19067  

**Copy to:** Rutgers, REHS, Attn: Mike Smith  
ATC, Attn: Brian Kearney
State of New Jersey - Notification of Asbestos Abatement  
(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

**GAC Project # 060-13**

**Date of Notification**: June 5, 2013

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<th>Agencies Notified</th>
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<td>□ Initial Notification □ Amended Notification □ Emergency (including justification) □ Cancelled</td>
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</tbody>
</table>

**Name of Building Owner/Operator**: RUTGERS, THE STATE UNIVERSITY OF NJ

**Street Address**: ENVIRONMENTAL HEALTH & SAFETY DEPT.  
27 ROAD 1, BLDG. 4080 - LIVINGSTON CAMPUS

**City, State, Zip Code**: PISCATAWAY, NJ 08854

**Name of Contact**: MICHAEL SMITH, ENV. HEALTH & SAFETY

<table>
<thead>
<tr>
<th>FACILITY INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Name of Facility Where Abatement is Taking Place</strong></td>
</tr>
</tbody>
</table>

**Street Address**: COLLEGE AVENUE CAMPUS

**Type of Facility**

- □ School (K-12)
- □ Subchapter 8 (other than K-12)
- □ Other (i.e. private & commercial buildings, homes, etc.)

**Sq. Feet**: N/A  
**# of Floors**: 3  
**Bldg. Age**: 70+ years

**Current Use (prior to being demolished)**: ACADEMIC

**Name of Contractor**: GREENWOOD ABATEMENT CONSULTANTS, INC.

**Street Address**: 268 MAIN STREET  
**City, State, Zip Code**: BUTLER, NJ 07405

**Telephone Number**: 973-492-0477  
**License Number**: 00840

**Name of GSHA Monitor**: ENVIROVISION, INC.

**Street Address**: 20-21 WARGARAW ROAD  
**City, State, Zip Code**: FAIRLAWN, NJ

**Telephone Number**: 609-386-8800  
**License Number**: 0098

**Name of GSHA Monitor**: ATC ASSOCIATES

**City, State, Zip Code**: BURLINGTON, NJ 08016

**Name of Contractor**: GREENWOOD ABATEMENT CONSULTANTS, INC.

<table>
<thead>
<tr>
<th>OCCUPANCY STATUS DURING ABATEMENT (Check only one)</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Facility Closed/Vacated During Entire Period of Abatement</td>
</tr>
<tr>
<td>□ Abatement Performed Outside of Normal Facility Hours - Describe</td>
</tr>
</tbody>
</table>

**Shift Hours**: 4:00 PM - 5:00 AM

<table>
<thead>
<tr>
<th>SCOPE OF WORK (Check all that apply)</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ ≥ 3 sf or ≥ 3 li</td>
</tr>
<tr>
<td>□ ≥ 160 sf or ≥ 260</td>
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</table>

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

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) in Facility</th>
<th>Location Normally Used Solely by Maint./Custodial Staff? (12)</th>
</tr>
</thead>
<tbody>
<tr>
<td>202, 203, 234, 235, &amp; 236</td>
<td>YES NA</td>
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<table>
<thead>
<tr>
<th>TYPE OF ABATEMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Full Containment with Negative Pressure</td>
</tr>
<tr>
<td>□ Mini-Enclosure</td>
</tr>
<tr>
<td>□ Glovebag Procedure</td>
</tr>
<tr>
<td>□ Non-Exempted (*) and Non-Friable Procedure</td>
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</table>

<table>
<thead>
<tr>
<th>DESCRIPTION OF ASBESTOS CONTAINING MATERIAL (ACM)</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Renovation</td>
</tr>
<tr>
<td>□ Demolition</td>
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<table>
<thead>
<tr>
<th>AMOUNT (Specify SF or LF)</th>
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<tbody>
<tr>
<td>1200 SF</td>
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<thead>
<tr>
<th>NAME OF REG. WASTE HAULER</th>
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<tbody>
<tr>
<td>See Hauler Below #1 &amp; 2</td>
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<table>
<thead>
<tr>
<th>DISPOSAL DATE</th>
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<table>
<thead>
<tr>
<th>NAME OF REGISTERED LANDFILL</th>
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<tbody>
<tr>
<td>G.R.O.W.S. North Landfill</td>
</tr>
</tbody>
</table>

<table>
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<tr>
<th>NAME OF BUILDING OWNER/OPERATOR</th>
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</thead>
<tbody>
<tr>
<td>RUTGERS, THE STATE UNIVERSITY OF NJ</td>
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</table>

<table>
<thead>
<tr>
<th>SIGNATURE</th>
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</thead>
<tbody>
<tr>
<td>Raymond C. Pedalino</td>
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</table>

<table>
<thead>
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<th>Copied To:</th>
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<tbody>
<tr>
<td>Rutgers, REHS, Attn: Mike Smith and ATC, Attn: Brian Kearney</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>June 5, 2013</td>
</tr>
</tbody>
</table>

**Copies To**: Rutgers, REHS, Attn: Mike Smith and ATC, Attn: Brian Kearney
State of New Jersey - Notification of Asbestos Abatement

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

**Date of Notification (1):**
June 18, 2013

**Name of Building Owner/Operator (2):**
The Village School

**Street Address:**
100 West Prospect Street

**Waldwick, NJ 07463**

**Name of Contact:**
Marilyn Larkin

---

### FACILITY INFORMATION

**Name of Facility Where Abatement is Taking Place (3):**
The Village School

**Street Address:**
100 West Prospect Street

**City:**
Waldwick

**County:**
Bergen

**County Code:** (State Use Only)
Unknown

**Name of Monitoring Firm Hired by Bldg. Owner (8):**
EnviroVision Consultants inc.

**ASCM No.:**
00079

**Type of Facility (4):**
School (K-12)

**Subchapter 8 (other than K-12):**
Other (i.e., private & commercial buildings, homes, etc.)

**Sq. Feet:**
Unknown

**# of Floors:**
3

**Bldg. Age:**
50 years

**Current Use (prior if being demolished):**

---

**Name of Contractor (9):**
GREENWOOD ABATEMENT CONSULTANTS, INC.

**Street Address:**
268 MAIN STREET

**City:**
Butler, NJ

**State:**
07405

---

**Project Manager for Monitoring Firm:**
Fred Larson

**Telephone Number:**
973-636-9145

**Street Address:**
20-21 Wagaraw Road, Bldg # 34A

**City:**
Fair Lawn

**State:**
NJ

**Zip Code:**
07410

**Telephone Number:**
973-492-0477

**License Number:**
00840

**Name of OSHA Monitor:**
EMSL inc.

**Street Address:**
1056 Stelton Road

**City:**
Piscataway

**State:**
NJ

**Zip Code:**
08854

---

**Occupancy Status During Abatement (Check only one):**

- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours - Describe
- Other - Describe: Vacant
- **Sub Chapter 8 - Non-Occupied**

---

**Source of Work (Check all that apply):**

- ≥ 3 sf or ≥ 3 if
- ≥ 160 sf or ≥ 260

**Renovation:**

**Demolition:**

---

**Location of Asbestos-Containing Material (ACM) in Facility (13):**

**Is Location Normally Used by Maintenance/Custodial Staff? (12):**
YES

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

**Amount (Specify SF or LF):**

- 1,031 sf
- 2,850 sf

**Abatement Type:**

- x Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*) and Non-Firable Procedure

---

**Name of Req. Waste Hauler:**

See Hauler Below # 1 & 2

**Name of Registered Landfill:**
Meadowfill Landfill

**Disposal Date:**
July 12, 2013

---

**Completed by (Print or Type):**
Marin Graure

**Title:**
SENIOR PROJECT MANAGER

**Signature:**
Marin Graure

**Date:**
June 18, 2013

---

**GAC # 2013-384 Note: New Start Date**
State of New Jersey - Notification of Asbestos Abatement

(Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

Date of Notification (1) May 14, 2013

Name of Building Owner/Operator: The Village School

Name of Facility Where Abatement is Taking Place (3)
The Village School

Street Address: 100 West Prospect Street
City, State, Zip Code: Waldwick, NJ 07463

Name of Contact: Marilyn Larkin
Telephone Number:

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
The Village School

Street Address: 100 West Prospect Street
City, State, Zip Code: Waldwick, NJ 07463

Name of Monitoring Firm Hired by Bldg. Owner (8)
EnviroVision Consultants inc.

ASCM No. 00079

Name of Contractor (9)
GREENWOOD ABATEMENT CONSULTANTS, INC.

Street Address: 268 MAIN STREET
City, State, Zip Code: Butler, NJ 07405

Telephone Number: 973-492-0477
License Number: 00840

Street Address: 1056 Stelton Road
City, State, Zip Code: Piscataway, NJ 08854

Project Manager for Monitoring Firm
Fred Larson
Telephone Number: 973-636-9145

Scheduled Start Date (10)
June 22, 2013

Scheduled Completion Date (11)
July 12, 2013

Occupancy Status During Abatement (Check only one)
Facility Closed/Vacated During Entire Period of Abatement
Abatement Performed Outside of Normal Facility Hours - Describe
Vacant
Sub Chapter 8 – Non-Occupied

Source of Work (Check all that apply)

Renovation Demolition

Full Containment with Negative Pressure
Mini-Enclosure
Glovebag Procedure
Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) in Facility (13)

Is Location Normally Used Solely by Maint./Custodial Staff? (12) YES NO NA

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

Amount (Specify SF or LF) Abatement Type

x 1,031 sf

x 2,860 sf

x Full Containment with Negative Pressure

x Mini-Enclosure

x Glovebag Procedure

x Non-Exempted (*) and Non-Friable Procedure

x Remove, Repair Encap, Enclose

Hauler #1: Greenwood Abatement Consultants, Inc. – Butler, NJ 07405
NJ DEP # 12561
Disposal Date: July 12, 2013

Hauler #2: Newark Carting, Inc. – Newark, NJ 04509, NJ DEP # 19551
City, State Route 2, Box 68
City, State, Zip Code: Bridgeport, WVA 304-942-2764

Completed by (Print or Type)
Marin Grauer
Title: SENIOR PROJECT MANAGER
Signature: Marin Grauer
Date: May 14, 2013

GAC # 2013-384
**Notice of Asbestos Abatement**

**State of New Jersey**

**Name and Address of Building Owner:**

- **Name:** Patricia D. Dembrowski
- **Address:** 2100 Panther Path
- **City, State, Zip Code:** Point Pleasant, NJ 08742

**Name of Facility Where Asbestos is Taking Place:**

- **Name:** Memorial Middle School
- **Address:** 806 LaRue Herbert Drive
- **City, State, Zip Code:** Point Pleasant, NJ 08742
- **County:** Ocean

**Name of Monitoring Firm Hired by Building Owner:**

- **Name:** Shade Environmental, LLC
- **Address:** 5434 King Avenue, Suite 101
- **City, State, Zip Code:** Pennsauken, NJ 08110

**Name of Asbestos Contractor:**

- **Name:** Shade Environmental, LLC
- **Address:** 623 Cutter Ave.
- **City, State, Zip Code:** Maple Shade, NJ 08052

**Renovation Disturbance:**

- **Location:** Rooms 102 and 104
- **Transmit Table Topps:** 512 SF

**Disposal:**

- **Name of Registered Waste Hauler:** Shade Environmental, LLC
- **Hazard ID No.:** 012-35
- **City, State, Zip Code:** Mount Holly, NJ 08060
- **Date:** June 17, 2013

**Notices:**

- **Do not use this form for asbestos or asbestos-related activities.**
Date of Notification (1)  
June 19, 2013

Name of Building Owner/Operator (2)  
Township of Moorestown

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

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

Street Address  
2 Executive Drive, Suite 9

City, State, Zip Code  
Moorestown, NJ 08057

Name of Contact  
Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)  
North Church Street Recreation Center

Street Address  
111 N. Church Street

City (5)  
Moorestown, NJ 08057

County (6)  
Burlington

County Code (7)  
(State Use Only)

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

ASCM No.  
Name of Abatement Contractor (9)  
Shade Environmental, LLC

Street Address  
133 Jackson Road

City, State, Zip Code  
Medford, NJ 08055

Project Manager for Monitoring Firm  
Telephone No.  
609-714-2141

Start Date (10)  
July 1, 2013

Scheduled Completion Date (11)  
July 4, 2013

Name of OSHA Monitor  
EMSL

Street Address  
107 Haddon Ave

City, State, Zip Code  
Westmont, New Jersey 08108

Occupancy Status During Abatement (Check Only One)  
☐ Closed/Vacated During Entire Period of Abatement  ☑ Abatement Performed Outside of Normal Facility Hours

Other – Describe:

Scope of Work (Check All That Apply)  
☐ ≥3 sf or ≥3 if  ☑ ≥160 sf or ≥260 ft

☐ Renovation Demolition  ☑ Full Containment with Negative Pressure

Glovebag Procedure  ☑ Non-Exempted (*) and Non-Friable Procedure

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

<table>
<thead>
<tr>
<th>Room/Site</th>
<th>Type</th>
<th>Description</th>
<th>Amount</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rooms 203/205</td>
<td>X</td>
<td>Pipe Insulation (Wrap &amp; Cut)</td>
<td>30 LF</td>
<td>xxx</td>
</tr>
<tr>
<td>Rooms 203/205</td>
<td>X</td>
<td>Tile and Mastic</td>
<td>900 SF</td>
<td>xxx</td>
</tr>
</tbody>
</table>

Name of Registered Waste Hauler  
Freehold

NJDEP Waste Hauler ID No.  
22253

Cubic Yards of Waste  
9

Name of Registered Landfill  
Grows Landfill

Disposal Date  
7/4/2013

City, State  
City, State

Tullytown, PA.

Completed by  
Christina Lynch  
Operations Manager

Signature  
Date: June 19, 2013

* Do not use this form for asbestos licensure exempted activities.
Date of Notification (1) | June 06, 2013
---|---

Name of Building Owner/Operator (2) | Avison Young

Name of Facility Where Abatement is Taking Place (3) | Green Village Apartments

Green Village Apartments | Name of Monitoring Firm Hired by Building Owner (8) | ASCM No. | The MACK Group, LLC. (9)
---|---|---|---
907 Doolittle Drive | 1500 Kings HWY N, STE 209 | 1500 Kings HWY N, STE 209 |

Citi: State, Zip Code | Telephone No. | Telephone No. | Street Address |
Morristown, NJ 07960 | (908) 218-1108 | (973) 759 - 5000 | Cherry Hill, NJ 08034 |

Project Manager for Monitoring Firm | License No. | Name of OSHA Monitor |
| Eric Houseknecht | 00781 | The MACK Group, LLC. |

Start Date (10) | 6-20-13 | Scheduled Completion Date (11) | 7-31-13 |

Occupancy Status During Abatement (Check Only One) | Full Containment with Negative Pressure |
- Facility Closed/Vacated During Entire Period of Abatement | Mini-Enclosure |
- Abatement Performed Outside of Normal Facility Hours | Glovebag Procedure |
- Other - Describe: |

Scope of Work (Check All That Apply) | Non-Exempted (*) and Non-Friable Procedure |
- Renovation Demolition |

Location of Asbestos-Containing Material (ACM) | Description of Asbestos Containing Material (ACM) |
TO BE ABATED | (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) |
IN FELIXITY | Amount (Specify SF or LF) |
(13) | (12) |

N/A | 510 sf |

Yes | No |

basement | VAT/linoleum only |

Kitchens | VAT w/mastic |

throughout | Pipe & fittings |

Name of Registered Waste Hauler | NJ DEP Waste Hauler ID No. | Cubic Yards of Waste | Name of Registered Landfill |

City, State | Disposal Date | City, State |
Freehold / Riverdale, NJ | 7-31-13 | Morristown, PA / Tullytown, PA |

Completed by | Title | Signature | Date |
Mike Cooper | President | | 6/6/13 |

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

<table>
<thead>
<tr>
<th>Date of Notification</th>
<th>6/19/13</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agencies Notified</td>
<td>EPA, CEP, DOL, DOH, DCA</td>
</tr>
<tr>
<td>Type Notification</td>
<td>Initial</td>
</tr>
<tr>
<td>Name of Building Owner/Operator</td>
<td>JONATHAN L. HALL</td>
</tr>
<tr>
<td>Address</td>
<td>40, BOX 198</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>CAMDEN, NEW JERSEY</td>
</tr>
<tr>
<td>Name of Contact</td>
<td>JAME</td>
</tr>
<tr>
<td>Telephone Number</td>
<td></td>
</tr>
</tbody>
</table>

**FACILITY INFORMATION**

| Name of Facility Where Abatement Is Taking Place | RESIDENCE |
| Street Address | 294 MIDDLE TOWNSHIP |
| City (5)       | MIDDLE TOWNSHIP |
| County (6)     | CAMDEN |
| Name of Monitoring Firm | N/A |
| Name of Abatement Contractor | KLEMCO INC. |
| Street Address | 369 S. SPRUCE AVE, MAPLE SHADE, N.J. 08052 |
| City, State, Zip Code | MAPLE SHADE, N.J. 08052 |
| License No.    | 006044 |
| Telephone No.  | 856-779-0422 |
| Current Use (Prior to being demolished) | VACANT |

**Dates**

| Start Date (10) | 7/1/13 |
| Scheduled Completion Date (11) | 7/1/13 |

**Occupancy Status During Abatement**

- [X] Facility Closed/Vacated During Entire Period of Abatement
- [ ] Abatement Performed Outside of Normal Facility Hours
- [ ] Other - Describe:

**Scope of Work**

- [ ] 23 s.f. or 23 ft
- [X] 2160 s.f. or 2260 ft
- [ ] Renovation
- [ ] Demolition
- [ ] Full Containment with Negative Pressure
- [ ] Non-Enclosure
- [ ] Glovebag Procedure
- [ ] Non-Exempted 163 and Non-Flammable Procedure

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

<table>
<thead>
<tr>
<th>Location Normally Used Solely by Maintenance/ Custodial Staff?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description of Asbestos-Containing Material (ACM)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Amount (Specify SF or LF)</td>
<td>800</td>
<td></td>
</tr>
</tbody>
</table>

**SANDING**

- [X] TRANSITE

**Name of Registered Waste Hauler**

- [ ] DEP Waste Hauler ID No.: 12345
- [ ] Cubic Yards of Waste: S
- [ ] Name of Registered Landfill: C.M.C., M.U.A.
- [ ] City, State: MIDDLE TOWNSHIP, N.J.

**Committed By**

- [ ] Owner: JAME
- [ ] Signature: JAME
- [ ] Date: 6/19/13

*Do not use this form for asbestos licensure exempted activities*
### NOTIFICATION OF ASBESTOS ABATEMENT

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

**State of New Jersey**

**FACILITY INFORMATION**

<table>
<thead>
<tr>
<th>Name of Facility (11)</th>
<th>Clinton Avenue School</th>
</tr>
</thead>
<tbody>
<tr>
<td>534 Clinton Avenue</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City (5)</th>
<th>Newark</th>
</tr>
</thead>
<tbody>
<tr>
<td>County (6)</td>
<td>Essex</td>
</tr>
<tr>
<td>County Code (7)</td>
<td>07108</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Monitoring Firm Hired by Building Owner (8)</th>
<th>TTI Environmental, Inc.</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASCM No. (9)</td>
<td>00003</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Street Address (10)</th>
<th>1253 North Church Street</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Current Use (11)</th>
<th>School</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bldg. Age</td>
<td>98 years</td>
</tr>
<tr>
<td># of Floors</td>
<td>3rd</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Project Manager for Monitoring Firm (12)</th>
<th>James A. Guiardi</th>
</tr>
</thead>
<tbody>
<tr>
<td>Telephone No. (13)</td>
<td>856-840-8808</td>
</tr>
</tbody>
</table>

| Start Date (14) | 06/28/13 |
| Scheduled Completion Date (15) | 06/04/13 |

<table>
<thead>
<tr>
<th>Occupancy Status During Abatement (Check only one)</th>
<th>Facility Closed/Vacated During Entire Period of Abatement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Describe:</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
</tr>
<tr>
<td>Scope of Work (Check all that apply):</td>
<td></td>
</tr>
<tr>
<td>□ A &gt; 3 sf or A &gt; 3 if</td>
<td>□ Renovation</td>
</tr>
<tr>
<td>□ A ≥ 160 sf or A ≥ 260 sf</td>
<td>□ Demolition</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility: (16)</th>
<th>Pipe joint insulation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Registered Waste Hauler (17):</td>
<td>Newark Carting</td>
</tr>
<tr>
<td>NJDEP Waste Hauler ID No. (18)</td>
<td>4506</td>
</tr>
<tr>
<td>Cubic Yards of Waste: (19)</td>
<td>30</td>
</tr>
<tr>
<td>Name of Registered landfill: (20)</td>
<td>Tullytown Re. Facility</td>
</tr>
<tr>
<td>City, State: (21)</td>
<td>Tullytown, PA</td>
</tr>
</tbody>
</table>

| Completed By (22) | Samuel Ilounoh |
| Title (23) | President |
| Signature |  |
| Date (24) | 06/17/2013 |
**NOTIFICATION OF ASBESTOS ABATEMENT**

**Date of Notification (1)**
06/17/2013

**Name of Building Owner/Operator (2)**
3 DOTTS LLC

**Street Address**
6505 ATLANTIC ST

**City, State, Zip Code**
VENTNOR, NJ, 08406

**Name of Contact**
BRIAN SANTORA

**FACILITY INFORMATION**

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

**Square Feet**
3,600 SF

**# of Floors**
4

**Bldg Age**
74 YRS

**Current Use (Prior if being demolished)**
N/A

**Name of Monitoring Firm HIred by Building Owner (8)**
N/A

**ASCM No.**
N/A

**Name of Abatement Contractor (9)**
SHARON QUALITY CONSTRUCTION LLC

**Street Address**
22 VAN ORDEN PLACE

**City, State, Zip Code**
HACKENSACK, NJ, 07601

**Telephone No.**
201-708-4270

**License No.**
01135

**Name of OSHA Monitor**
SAN AIR TECHNOLOGIES LAB

**Street Address**
1551 OAKBRIDGE DR., SUITE B

**City, State, Zip Code**
POWHATAN, VA, 23139

**Start Date (10)**
6/26/2013

**Scheduled Completion Date (11)**
06/27/2013

**Occupancy Status During Abatement (Check Only One)**
- [x] Facility Closed/Vacated During Entire Period of Abatement
- [ ] Abatement Performed Outside of Normal Facility Hours
- [ ] Other – Describe: (12)

**Scope of Work (Check All That Apply)**
- [x] 23 sf or 23 ft²
- [ ] 2160 sf or 2260 ft²
- [ ] Renovation
- [x] Demolition
- [ ] Full Containment with Negative Pressure
- [ ] Mini-Enclosure
- [ ] Glovebag Procedure
- [ ] Non-Exempted (*) and Non-Friable Procedure

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

<table>
<thead>
<tr>
<th>In Facility</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>BASEMENT</td>
<td>X</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**9X9 FLOOR TILE**

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

**Amount (Specify SF or LF)**
900SF

**Abatement Type**

- [ ] Removal
- [ ] Repair
- [ ] Encapsulate
- [ ] Endure

**Name of Registered Waste Hauler**
SHARON QUALITY CONSTRUCTION LLC

**NJDEP Waste Hauler ID No.**
0033957

**Cubic Yards of Waste**
TBD

**Name of Registered Landfill**
MINERVA ENTERPRISE INC

**City, State**
WAYNESBURG, OHIO

**Completed by**
CARLOS ESQUIVEL

**Title**
SAFETY MANAGER

**Signature**

**Date**
06/17/2013

*Do not use this form for asbestos licensure exempted activities.*
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:66 and 12:1I6.9)

Notified: 6-18-13

Notification Type: Amendment
City: Toms River
Name of Building Owner/Manager: Toms River
Street Address: 1866 Compass Ct.
County: Ocean
Tel: Joe Brenner
License No: 00029

Facility Information

- Name of Facility Where Abatement is Taking Place: FastoK
- Facility Type: Abatement of Nuisance Facility
- Street Address: 1866 Compass Ct.
- City: Toms River
- State: NJ
- Zip Code: 08753

Residence

- Name of Abatement Contractor: ACE INSULATION
- Street Address: 95 Montross Rd.
- City: Colts Neck
- State: NJ
- Zip Code: 07722

ASCM No: ACE INSULATION Co Inc

Project Manager for Monitoring

- Start Date: 6-18-13
- Scheduled Completion Date: 7-2-13
- Monitoring Period: 7AM - 7PM
- Occupancy Status During Abatement: Vacated
- Type of Facility: Nuisance

Location of Asbestos-Containing Material (ACM):

- Facility: Outdoors

Abatement Type

- ACM Containing Material: Siding
- ACM Quantity: 1400 ft.

Name of Nearest Waste Handler:

- Name: GROWS
- City: Toms River
- State: NJ
- Zip Code: 07722

- Signature: Jack Grall
- Date: 6-18-13

*Do not use this form for asbestos material exempted activities.
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 6:60 and 12:120)

Date of Notification (1)
6/17/2013

Check #2434

Name of Building Owner/Operator (2)
St Valentine Parish

Agencies Notified
EPA
DEP
DOL
DOH
DCA

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

Street Address
125 North Spring Street

City, State, Zip Code
Bloomfield, NJ 07003

Name of Contact
Rev. Juancho de Leon

Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
St Valentine School

Street Address
236 Hoover Avenue

City (6)
Bloomfield, NJ 07003

County (8)
ESSEX

County Code (7)

Current Use (Prior if being demolished)
School

Name of Monitoring Firm Hired by Building Owner (5)
EnviroVision Consultants, Inc

Name of Asbestos Contractor (9)
EA Services Corporation

Street Address
20-21 Wagaraw Road- Bldg 35-E

City, State, Zip Code
Fair Lawn, NJ 07410

Telephone No.
973-636-9145

License No.
201-295-1700

Start Date (10)
6/24/2013

Scheduled Completion Date (11)
7/1/2013

Name of OSHA Monitor
Same as above

Occupancy Status During Abatement (Check Only One)

- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours
- Other – Describe: Regular hours w/evenings & weekends

Scope of Work (Check All That Apply)

- ≥3 sf or ≥3 If
- ≥160 sf or ≥260 If
- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*) and Non-Friable Procedure

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

Is Location Normally Used Solely by Maintenance/Custodial Staff?

Yes
No
N/A

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

Amount (Specify SF or LF)

Abatement Type
Removal
Repair
Encapsulate
Endorse

Name of Registered Waste Hauler
Freehold Cartage

NJDEP Waste Hauler ID No.
15939

Cubic Yards of Waste
Disposal Date

Name of Registered Landfill
Waste Management

City, State
Tullytown Landfill

PO Box 5010

Completed by
Gina Salvador

Title
Office Manager

Signature

Date
6/17/2013

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

Date of Notification: 6/18/13
Agencies Notified: EPA, DEP, DOL, DOH, DCA
Type Notification: Initial
Street Address: 128 Doremus Ave
City, State, Zip Code: Ridgewood, NJ 07450
Name of Building Owner/Operator: Mrs. Montau

ASBESTOS CONTROL & LICENSING

FACILITY INFORMATION

Name of Facility Where Abatement Is Taking Place: Montau
Street Address: 128 Doremus Ave
City, State, Zip Code: Ridgewood, NJ 07450
County Code: Bergen

Name of Monitoring Firm Hired by Building Owner: ASCM No.
Street Address: 105 Lowell Road
City, State, Zip Code: Glen Rock, N.J. 07452
Project Manager for Monitoring Firm: Telephone No.
Name of Abatement Contractor: A. Mac Contracting Inc.
Street Address: 280 Hayler Street
City, State, Zip Code: Hackensack, NJ 07606

Start Date: 6/19/13
Scheduled Completion Date: 6/19/13
Name of OSHA Monitor: Omega Environmental Services Inc.

Occupy Status During Abatement: Vacate During Entire Period of Abatement
Abatement Performed Outside of Normal Facility Hours

Scope of Work: 23 sf or less
Renovation/ Demolition
Full Compliment with Negative Pressure

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

Yes No N/A
Natural Used Safely by Maintenance/ Custodial Staff?
(13)

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

Amount (Specify SF or LF)

Abatement Type

Name of Registered Waste Hauler: Rovic Transport
Waste Hauler ID No.: 20765

Name of Registered Landfill: IESI PA Bethlehem Landfill Corp.
City, State: Bethlehem, PA 18015

Completed by: R. McDonald
Title: President
Signature: Date: 6/18/13

* Do not use this form for asbestos license exempted activities.
**NOTIFICATION OF ASBESTOS ABATEMENT**

(Pursuant to NJAC 8:60 and 12:262)

**State of New Jersey**

**Name of Building Owner/Operator:**

**Name:** Goldberg Realty

**Address:** 33 Clinton Road

**City:** West Caldwell

**State:** NJ

**Zip Code:** 07006

**Name of Contractor:** Rich & Sons

**Date of Notification:** 6/18/13

**Agency Notified:** EPA

**Type of Notification:** Initial

**Street Address:** 40 Cross Road

**City:** Matawan

**County:** Monmouth

**Name of Monitoring Firm:** ASCM No.

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

**Street Address:** 165 Lowell Road

**City:** Glen Rock

**State:** NJ

**Zip Code:** 07452

**Telephone No.:** 201-282-6541

**Telephone No.:** 00158

**Start Date (10):** 6/19/13

**Scheduled Completion Date (11):** 6/20/13

**Project Manager for Monitoring Firm:**

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

**Address:** 1280 Huyler Street

**City:** Hackensack

**State:** NJ

**Zip Code:** 07606

**Scope of Work (Check All That Apply):**

- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Double Bag Procedure
- Non-Exempted CT and Non-Friable Procedure

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

**Description of Asbestos-Containing Material (ACM):**

- Location: Boiler Room #10
- Description: Pipe
- Amount: 400 ft x

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

**Hauler ID No.:** 20786

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

**City:** Bethlehem

**State:** PA

**Zip Code:** 18015

**Disposal Date:** 6/19/13

**Completed by:** R. McDonald

**Title:** President

**Signature:**

**Date:** 6/18/13

---

*Do not use this form for asbestos licensure exempted activities.*
**NOTIFICATION OF ASBESTOS ABATEMENT**
(Pursuant to NJAC 8:60-7 and 12:120-7)

**State of New Jersey**

**Name of Building Owner/Operator (2)**
Newark Public Schools

**Address**
2 Cedar Street
Newark, NJ 07102

**Telephone Number**

**Name of Contact**

**FACILITY INFORMATION**

**Name of Facility Where Abatement is Taking Place (3)**
Quitman Street School
21 Quitman Street
Newark, NJ 07103

**City (4)**
Newark
**County (5)**
Essex
**County Code (7)**

**Type of Abatement Contractor (9)**
Four Strong Builders, Inc.
180 Sargent Avenue
Clifton, NJ 07013

**License Number**
00807

**Name of Registered Landfill**
G.R.O.W.S., Inc.

**Disposal Date**
Tullytown, PA

**Date**
6/18/13

**Scope of Work (Check all that apply)**

- Renovation
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Friable Procedure

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

<table>
<thead>
<tr>
<th>Location</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Floor Tile and Mastic</td>
<td>2,247 SF</td>
</tr>
</tbody>
</table>

**Amount (Specify SP or LF)**

- REMOVAL
- REPAIR
- CAPSULE
- SURGE

**Completed By (Print or Type)**
Bilyana Kulakovskia
Office Administrator

**JUN 95**
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60-7 and 12:120-7)

Date of Notification (I):
[06/18/13]

Name of Building Owner/Operator (2):
Newark Public Schools

Street Address:
2 Cedar Street
City, State, Zip Code:
Newark, NJ 07102

Name of Contact:

AGENCIES NOTIFIED:
[X] EPA
[X] DEP
[X] DOL
[X] DOH
[X] DCA

Type Notification:
[X] Initial Notification

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3):
Bragaw Avenue School

Street Address:
103 Bragaw Avenue
City (5) County (6) County Code (7)
Newark, NJ 07103 Essex

Name of Monitoring Firm Hired by Building Owner (6):
Whitman Companies, Inc.

Address:
116 Ticas Lane, Unit B-1
City, State, Zip Code:
Clifton, NJ 07013-1935

Name of Abatement Contractor (9):
Four Strong Builders, Inc.

Address:
180 Sargeant Avenue
City, State, Zip Code:
Clifton, NJ 07013

Scope of Work (Check all that apply):
[X] Demolition
[X] Renovation
[X] Full Containment with Negative Pressure
[X] Mini-Enclosure
[X] Gluebag Procedure
[X] Non-Friable Procedure

Tunnel Area
Pipe Insulation

Location of Asbestos-Containing Material (ACM)
Location Normally Used
Description of Asbestos-Containing Material (ACM)
Amount (Specify SF or LF)

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

Information Provided by:
Bilyana Kulakowska, Office Administrator

Companion Docket
ASS-41
JUN 95

[Handwritten Signature] 6/18/13
**State of New Jersey**
**NOTIFICATION OF ASBESTOS ABATEMENT**
(Pursuant to NJAC 8:60 and 12:120)

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>6-18-13</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Building Owner/Operator (2)</td>
<td>Randolph Township Board of Education</td>
</tr>
<tr>
<td>Street Address</td>
<td>25 Schoolhouse Road</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Randolph, NJ 07869</td>
</tr>
<tr>
<td>Name of Contact</td>
<td>Andy Hurd</td>
</tr>
</tbody>
</table>

**FACILITY INFORMATION**

| Name of Facility Where Abatement Is Taking Place (3) | Randolph Middle School |
| Street Address | 507 Millbrook Avenue |
| City (5) | Randolph |
| County Code (7) | Morris |

<table>
<thead>
<tr>
<th>Name of Monitoring Firm Hired by Building Owner (8)</th>
<th>ASCM No. 0057</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Abatement Contractor (9)</td>
<td>GL Group, Inc</td>
</tr>
<tr>
<td>Street Address</td>
<td>140 Hamburg Turnpike</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Bloomingdale, NJ 07403</td>
</tr>
<tr>
<td>Telephone No.</td>
<td>(609) 652-1833</td>
</tr>
<tr>
<td>License No.</td>
<td>01084</td>
</tr>
<tr>
<td>Street Address</td>
<td>140 Hamburg Turnpike</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Bloomingdale, NJ 07403</td>
</tr>
</tbody>
</table>

| Start Date (10) | 6-21-13 |
| Scheduled Completion Date (11) | 6-24-13 |

<table>
<thead>
<tr>
<th>Occupancy Status During Abatement (Check Only One)</th>
<th>Facility Closed/Vacated During Entire Period of Abatement</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Scope of Work (Check All That Apply)</th>
<th>Renovation Demolition</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Girls Locker Rm/Storage Rm</td>
</tr>
<tr>
<td>Girls Locker Room Bathroom</td>
</tr>
<tr>
<td>Girls Store Room (Inside Gym)</td>
</tr>
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<td>Girls Store Room (Inside Gym)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Description of Asbestos-Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pipe Insulation</td>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Amount (Specify SF or LF)</th>
</tr>
</thead>
<tbody>
<tr>
<td>25 Fittings</td>
</tr>
<tr>
<td>6 Fittings</td>
</tr>
<tr>
<td>28 Fittings</td>
</tr>
<tr>
<td>8 LF</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Removal</td>
</tr>
<tr>
<td>Repair</td>
</tr>
<tr>
<td>Encapsulate</td>
</tr>
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<td>28 Fittings</td>
</tr>
<tr>
<td>8 LF</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Registered Waste Hauler</th>
</tr>
</thead>
<tbody>
<tr>
<td>GL Group, Inc</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NJDEP Waste Hauler ID No.</th>
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<tbody>
<tr>
<td>0033034</td>
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<table>
<thead>
<tr>
<th>Cubic Yards of Waste</th>
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<tbody>
<tr>
<td>TBD</td>
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</table>

<table>
<thead>
<tr>
<th>Name of Registered Landfill</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grows</td>
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<table>
<thead>
<tr>
<th>City, State</th>
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<tbody>
<tr>
<td>Bloomingdale, NJ</td>
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<table>
<thead>
<tr>
<th>Disposal Date</th>
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<tbody>
<tr>
<td>TBD</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>City, State</th>
</tr>
</thead>
<tbody>
<tr>
<td>Morrisville, PA</td>
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</table>

<table>
<thead>
<tr>
<th>Completed by</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elena Solakov</td>
</tr>
</tbody>
</table>

| Title |
| President |

<table>
<thead>
<tr>
<th>Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elena Solakov</td>
</tr>
</tbody>
</table>

| Date |
| 6-18-13 |

*Do not use this form for asbestos licensure exempted activities.
<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)</th>
<th>Is Location Normally Used Solely by Maintenance Custodial Staff (12)</th>
<th>Description of Asbestos-Containing Material (ACM) (i.e. thermal systems, insulation, surfacing, VAT, or other miscellaneous)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Girls Locker Rm/Coach Office</td>
<td>X</td>
<td>Pipe Insulation</td>
<td>8 fittings</td>
<td>X</td>
</tr>
</tbody>
</table>

Completed By: (Print or Type)
Elena Solakov  
Title: President  
Signature:  
Date: 6-18-13
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 8:16)

Date of Notification (1) 6/20/13

Name of Building Owner/Operator (2)
Nassau Presbyterian Church

Agencies Notified
- DOH
- DCA

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

Name of Facility Where Abatement is Taking Place (3)
Nassau Presbyterian Church

Street Address
61 Nassau Street

City, State, Zip Code
Princeton, NJ 08540

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

Square Feet
10000 SF

Name of Abatement Contractor (5)
Stevens Environmental Services, Inc.

County (6)
Mercer

County Code (7) (STATE USE ONLY)

Current Use (Prior if being demolished)
Church

City, State, Zip Code
Princeton, NJ

Name of Monitoring Firm Hired by Building Owner (8)
MECS

County Code

Name of OSHA Monitor
MECS

Address
PO Box 371

City, State, Zip Code
Crosswicks, NJ 08515

Project Manager for Monitoring Firm
William Weigarter Jr.

Telephone No.
(609) 298-4070

Start Date (10)
7/1/13

Scheduled Completion Date (11)
7/12/13

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

Scope of Work (Check all that apply)
- ≥30 sf or ≥3 If
- ≥160 sf or ≥260 If
- Renovation
- Demolition

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

IN Facility

(13)

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

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

Amount (Specify SF or LF)

Abatement Type

Name of Registered Waste Hauler
Stevens Environmental Services, Inc.

City, State
Allentown, NJ

Cubic Yards of Waste
1/2 CU

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

City, State
Tullytown, PA

Disposal Date
7/12/13

Completed By
Mahlon E. Stevens

Title
Project Manager

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

Date of Notification (1) 6/19/2013
Name of Building Owner/Operator (2) JOE FILOON/AGENT FOR HOMEOWNER

Agencies Notified
- EPA
- DOL
- DOH
- DCA
- DEP
- Amended Amendment
- Initial
- Emergency (including justification)
- Cancellation

Type Notification

Street Address
51 Marina LANE
BEACH HAVEN WEST, NJ

City, State, Zip Code

Name of Contact
DAVID J. D’ANDREA

FACILITY INFORMATION

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

Street Address
51 Marina LANE

City (5)
BEACH HAVEN WEST, NJ

County
OCEAN

County Code (7) (STATE USE ONLY) N/A

Current Use (Prior if being demolished) N/A

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

Square Feet

# of Floors

Bldg. Age

Name of Monitoring Firm Hired by Building Owner (8) ASCM No.
CREAM RIDGE ENVIRONMENTAL INC.

Name of Abatement Contractor (9)

Street Address
15 BLACK FOREST ROAD

City, State, Zip Code
HAMILTON, NJ 08691

License No.
00676

Telephone No.
609-890-7110

Name of OSHA Monitor
N/A

Start Date (10) 6/20/2013
Scheduled Completion Date (11) 6/20/2013

Occupancy Status During Abatement (Check only one)
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement performed outside of working hours

Street Address

City, State, Zip Code

Scope of Work (Check all that apply)
- ≥ 3 sf or ≥ 3 lf
- ≥ 160 sf or ≥ 260 lf

Renovation

Demolition

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

Exterior X TRANSITE SIDING 1000 S.F.

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

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

Amount (Specify SF or LF)

Abatement Type

Removal

Repair

Encapsulate

Endure

Name of Registered Waste Hauler
NJDEP Waste Hauler ID No.
21079

Cubic Yards of Waste
5 YD.

Name of Registered Landfill
GROWS

City, State

WEST CREEK, NJ

Completed By
DAVID D'ANDREA

Title
PRESIDENT

Signature
27-May-2013

Date
6/19/2013

* Do not use this form for asbestos licensure exempted activities
**Date of Notification (1):** 6/21/13

**Name of Building Owner/Operator (2):** Kathleen Taylor

**Street Address:** 1313 Linden Ave.

**City, State, Zip Code:** Voorhees, NJ 08043

**Type of Notification (3):** Initial

**Type of Facility (4):** Residential

**Square Feet:** 1600

**# of Floors:** 2

**Bldg. Age:** 60

**Current Use (Prior if being demolished):** Residential

**Name of Facility Where Abatement is Taking Place (5):** Residential

**Street Address:** 1313 Linden Ave.

**City:** Voorhees

**County:** Camden

**Name of Monitoring Firm Hired by Building Owner (6):** MECS

**Street Address:** PO Box 341

**City:** Crosswicks

**State:** NJ

**Zip Code:** 08515

**Name of Abatement Contractor (7):** Stevens Environmental Services, Inc.

**Street Address:** PO Box 322

**City:** Allentown

**State:** NJ

**Zip Code:** 08501

**License No.:** 00493

**Telephone No.:** (609) 259-9688

**Name of OSHA Monitor:** MECS

**Street Address:** PO Box 341

**City:** Crosswicks

**State:** NJ

**Zip Code:** 08515

**Start Date (8):** 7/10/13

**Scheduled Completion Date (9):** 7/11/13

**Occupancy Status During Abatement (Check only one):**

- [ ] Facility Closed/Vacated During Entire Period of Abatement
- [ ] Abatement Performed Outside of Normal Facility Hours
- [X] Other - Describe:

**Scope of Work (Check all that apply):**

- [X] Removal
- [X] Demolition

**Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (10):**

<table>
<thead>
<tr>
<th>Location</th>
<th>Is Location Normally Used Solely by Maintenance/ Custodial Staff?</th>
<th>Description of Asbestos-Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basement</td>
<td>No</td>
<td>Thermal Duct Insulation</td>
<td>4 sf</td>
<td>Removal</td>
</tr>
<tr>
<td>Crawl space</td>
<td></td>
<td>Thermal Duct Insulation</td>
<td>45 sf</td>
<td>Encapsulate</td>
</tr>
</tbody>
</table>

**Name of Registered Waste Hauler:** Stevens Environmental

**NCDEP Waste Hauler ID No.:** 18292

**Cubic Yards of Waste:** 2 CU

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

**City, State:** Allentown, NJ 08501

**Disposal Date:** 7/11/13

**City, State:** Tullytown, PA

**Completed By:** Mahlon E. Stevens

**Title:** Project Manager

**Signature Date:** 6/21/13

---

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

Date of Notification (1)
6/19/2013

Name of Building Owner/Operator (2)
JOE FILOMO/AGENT FOR HOMEOWNER

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

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

Street Address
3 WEST HARMONY AVENUE
City, State, Zip Code
BRANT BEACH, NJ

Name of Contact
DAVID J. D'ANDEA
Telephone Number

FACILITY INFORMATION

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

Street Address
3 WEST HARMONY AVENUE

City (5)
BRANT BEACH, NJ

County
OCEAN
County Code (7) (STATE USE ONLY)

Name of Abatement Contractor (8)
CREAM RIDGE ENVIRONMENTAL INC.

ASCM No.

Street Address
15 BLACK FOREST ROAD

City, State, Zip Code
HAMILTON, NJ 08691

License No.
00676

Start Date (10)
6/20/2013

Scheduled Completion Date (11)
6/20/2013

Name of OSHA Monitor
N/A

Occuancy Status During Abatement (Check only one)
☐ Facility Closed/Vacated During Entire Period of Abatement
☐ Abatement performed outside of working hours

Scope of Work (Check all that apply)
☐ ≥ 3 sf or ≥ 3 lf
☐ ≥ 160 sf or ≥ 260 lf
☐ Renovation
☐ Demolition
☐ Full Containment with Negative Pressure
☐ Mini-Enclosure
☐ Glovebag Procedure
☐ Non-Exempted (*) & Non-Friable Procedure

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

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

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

Amount (Specify SF or LF)
1000 S.F.

Abatement Type
X

EXTERIOR

X

TRANSITE SIDING

Location of Registered Waste Hauler
NJDEP Waste Hauler ID No.
21079

Cubic Yards of Waste
5 YD.

Name of Registered Landfill
GROWS

City, State
WEST CREEK, NJ

Completed By
DAVID D'ANDEA
Title
PRESIDENT
Signature
Date
27-Mar-13
6/19/2013

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

Date of Notification (1) 6/19/13

Name of Building Owner / Operator (2)  
State of NJ Dept of Children and Families Office of Education

Agency Notified Type Notification
☐ EPA  ☑ Initial
☐ DEP  ☑ Amended
☐ DOL  ☑ Emergency
☐ DOH  ☑ Cancellation
☐ DCA

Name of Facility Where Abatement is Taking Place (3)  
Regional Schools – Burlington Campus

Street Address  
704 Woodlane Road

City (5)  
Mount Holly

County (6)  
Burlington

County Code (7)

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

Square Feet

# of Floors

Bldg. Age

Current Use (Prior if being demolished)  
School

Name of Abatement Contractor (8)  
Bristol Environmental, Inc.

Street Address  
1123 Beaver Street

City, State & Zip Code  
Bristol, PA 19007

Telephone Number  
(215)798-6040

License Number  
00509

Name of OSHA Monitor  
Bristol Environmental Inc.

Street Address  
1123 Beaver Street

City, State & Zip Code  
Bristol, PA 19007

Name of Registered Waste Hauler  
NJDEP Waste Hauler ID No. 20990

Cubic Yards of Waste  
20

Name of Registered Landfill  
Minerva Landfill

City, State  
Waynesburg, OH

Disposal Date  
TBD

Completed By (Print or Type)  
Gino Pizzigoni

Title  
Project Manager

Signature  
Gino Pizzigoni

Date  
6/19/13

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED in Facility (13)</th>
<th>Is Location Normally Used Solely by Maintenance or Custodial Staff? (12)</th>
<th>Description of Asbestos-Containing Material (ACM) (i.e., thermal systems, insulation, surfacing, VAT or other miscellaneous)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lobby and interior/exterior window banks</td>
<td>☑ Transite Panels</td>
<td>400 SF</td>
<td>☑</td>
<td></td>
</tr>
</tbody>
</table>

FACILITY INFORMATION

ASBESTOS CONTROL & LICENSING

RECEIVED JUN 24 2013

Telephone Number

GI 13080
State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:80 and 5:16)

Date of Notification (1) 06 / 19 / 13

 Agencies Notified:
- EPA
- DOLWD
- DHSS
- DCA (NJAC 5:23-8)

Name of Building Owner/Operator (2)
St. Clare's Health Systems

Street Address
400 Blackwell Street

City, State, Zip Code
Dover, NJ 07801

Name of Contact
John J. Aryes

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
St. Clare's Hospital - Dover Campus

Street Address
400 Blackwell Street

City (5)
Dover

County (6)
Morris

County Code (7)/STATE USE ONLY

Current Use (Prior if being demolished)
Hospital

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

ASCM No.
00104

Name of Abatement Contractor (9)
Superior Abatement Inc

Street Address
665 West Shore Trail

City, State, Zip Code
Sparta, NJ 07871

Project Manager for Monitoring Firm
John A. Sekelsky

Telephone No.
(973) 651-2039

License No.
00411

Start Date (10) 06 / 29 / 13
Scheduled Completion Date (11) 06 / 30 / 13

Occupancy Status During Abatement (Check only one)
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours - Describe
- Occupied BLDG- Construction barriers will isolate work areas from occupied portion of building

Time of Abatement: ____________________________________________

Scope of Work (Check all that apply)
- ≥3 sf or ≥3 If
- ≥160 sf or ≥260 If
- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*) and Non-Frangible Procedure

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

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

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

Amount (Specify SF or LF)

Abatement Type
- Removal
- Repair
- Encapsulate

Name of Registered Waste Hauler
Service Transport Group, Inc

NJDEP Waste Hauler ID No. SW2117

Cubic Yards of Waste
5

Name of Registered Landfill
Minerva Landfill

City, State
Waynesburgh, OH

Disposal Date
6/11/13

Completed By (Print or Type)
Nick Petrovski

Title
President

Signature

Date 6-19-13

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

**Date of Notification (1)**  
06 / 05 / 13

**Name of Building Owner/Operator (2)**  
St. Clare's Hospital

**Agencies Notified**  
- [x] EPA  
- [ ] DOCDW  
- [ ] DHSS  
- [ ] DCA  
  (NJAC 5:23-6)

**Type Notification**  
- [ ] Initial  
- [ ] Amended  
- [ ] Emergency (including justification)  
- [ ] Cancellation

**Street Address**  
400 Blackwell Street

**City, State, Zip Code**  
Dover, NJ 07801

**Name of Contact**  
John J. Ayres

**Telephone Number**

**FACILITY INFORMATION**

**Name of Facility Where Abatement is Taking Place (3)**  
St. Clare's Hospital - Dover Campus

**Street Address**  
200 Blackwell Street

**County Code (STATE USE ONLY)**
Morris

**Square Feet**  
100,000

**Current Use (Prior to being demolished)**
Hospital

**Type of Facility (4)**  
- [ ] School (K-12)  
- [ ] Other (i.e., private and commercial buildings, homes, etc.)

**Occupancy Status During Abatement (Check only one)**  
- [ ] Facility Closed/Uploaded During Entire Period of Abatement  
- [ ] Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: Occupied BLDG. Construction barriers will isolate work areas from occupied portion of building

**Scope of Work (Check all that apply)**  
- [ ] >3 sf or >3 ft  
- [ ] >160 sf or >260 ft
- [x] Renovation  
- [x] Demolition  
- [x] Full Containment with Negative Pressure  
- [ ] Mini-Enclosure  
- [ ] Glovebag Procedure  
- [ ] Non-Exempted (*) and Non-Friable Procedure

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

<table>
<thead>
<tr>
<th>Location</th>
<th>ACM TO BE ABATED</th>
</tr>
</thead>
<tbody>
<tr>
<td>IN Facility</td>
<td>(13)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Center Wing Sleep Room</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
<th>VAT &amp; Mastic</th>
<th>225 SF</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Name of Registered Waste Hauler Service Transport Group, Inc</th>
<th>NJDEP Waste Hauler ID No. SW2117</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>City, State</th>
<th>New Castle, DE</th>
</tr>
</thead>
</table>

**Complied By (Print or Type)**  
Nick Petrovski

**Title**  
President

**Signature**

**Date**  
6-6-12

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

**Date of Notification (1)** 6/20/13

**Name of Building Owner/Operator (2)** Beverly Crawford

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

**Square Feet** 1400

**# of Floors** 2

**Bldg. Age** 75

**Residential**

**Name of Facility Where Abatement is Taking Place (3)** Residential

**Street Address** 22 Waker Ave.

**City (5)** Allentown, NJ

**County (6)** Monmouth

**Name of Monitoring Firm Hired by Building Owner (8)** MECS

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

**Address** PO Box 341

**City, State, Zip Code** Crosswicks, NJ 08515

**Telephone No.** (609) 298-4070

**License No.** 00493

**Occupancy Status During Abatement (Check only one)**
- □ Facility Closed/Vacated During Entire Period of Abatement
- □ Abatement Performed Outside of Normal Facility Hours
- □ Other - Describe: 8am - 4:30 pm

**Scope of Work (Check all that apply)**
- □ ≥3 sf or ≥2 If
- □ ≥160 sf or ≥260 If
- □ Renovation
- □ Demolition

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

<table>
<thead>
<tr>
<th>Location</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basement</td>
<td></td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

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

**Amount (Specify SF or LF)** 145 If

**Name of Registered Waste Hauler** Stevens Environmental

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

**City, State** Allentown, NJ 08501

**Disposal Date** 7/10/13

**Signature**

---

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

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>6/20/13</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Building Owner/Operator (2)</td>
<td>Jean Keil</td>
</tr>
<tr>
<td>Street Address</td>
<td>1005 Riverview Drive</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Brielle, NJ - 08730</td>
</tr>
<tr>
<td>Name of Contact</td>
<td>Jean Keil</td>
</tr>
<tr>
<td>Telephone Number</td>
<td></td>
</tr>
</tbody>
</table>

**FACILITY INFORMATION**

| Name of Facility Where Abatement is Taking Place (3) | Residential |
| Street Address | 1005 Riverview Drive |
| City (5) | Brielle, NJ |
| County (6) | Monmouth |
| Name of Monitoring Firm Hired by Building Owner (8) | MECS |
| Name of Abatement Contractor (9) | Stevens Environmental Services, Inc. |
| Street Address | PO Box 341 |
| City, State, Zip Code | Crosswicks, NJ 08515 |
| Project Manager for Monitoring Firm | William Weisgerber Jr. |
| Telephone No. | (609) 298-4070 |
| Start Date (10) | 7/9/13 |
| Scheduled Completion Date (11) | 7/10/13 |
| Occupancy Status During Abatement (Check only one) | 8am - 4:30 pm |
| Scope of Work (Check all that apply) | X Demolition |
| Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) | Crawl space |
| Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous) | Thermal Piping, 18 ft |
| Name of Registered Waste Hauler | Stevens Environmental |
| City, State | Allentown, NJ 08501 |
| Cubic Yards of Waste | 1CU |
| Name of Registered Landfill | T.R.R.F., Inc. |
| Disposal Date | 6/28/13 |
| City, State | Tullytown, PA |
| Completed By | Mahlon E. Stevens |
| Title | Project Manager |
| Signature | Date | 6/20/13 |

*Do not use this form for asbestos licensure exempted activities.*
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAIC, 7:26-2.12)

Date of Notification (1)
6/19/13

Name of Building Owner/Operator:
Psalmboro Refining Company

Agencies Notified
- EPA
- DEP
- (X) DOL
- (X) DOH
- DCA

Notification Type
- (X) Initial Notification - Emergency
- (X) Amended Certification
- (X) Cancelled

Street Address
800 Billingsport Rd

City, State, Zip Code
Psalmboro, NJ 08066

Name of Contact
Ravi Jarecha

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
Psalmboro Refining Company

Street Address
800 Billingsport Rd

City (5)
Psalmboro

County (6)
Gloucester

County Code (7)
(State Use Only)

Name of Monitoring Firm Hired by Bldg. Owner (8)
ASCM No.

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

Sq. Feet

# of Floors

Bldg. Age

Current Use (prior if being demolished)
Oil Refinery

Name of Contractor (9)
KA Industrial Services LLC

Street Address
800 Billingsport Rd

City State, Zip Code
Psalmboro, NJ 08066

Project Manager for Monitoring Firm

Telephone Number

License Number

Scheduled Start Date (10)
7/3/13

Scheduled Completion Date (11)
7/3/13

Occupancy Status During Abatement (Check only one)
- ( ) Facility Closed/Vacated During Entire Period of Abatement
- ( ) Abatement Performed Outside of Normal Facility Hours

Other – Describe – Removal within restricted work area in outside areas

Source of Work (Check all that apply)
- ( ) Demolition
- (X) Renovation
- ( ) Large Proj. (>160 SF or >260 LF ACM) ( ) SM Proj. (>25<160 SF or >10 <260 LF ACM)
- (X) Minor Proj. (<25 SF or <10 LF ACM)
- ( ) Full Containment with Negative Pressure
- ( ) Mini-Enclosure
- (X) Glovebag Procedure

Location of Asbestos-Containing Material (ACM) in Facility (13)

Is Location Normally Used Solely by Maint./ Custodial Staff? (12)
- YES
- NA

Description of ACM (i.e. thermal systems insulation, surfacing, VAT, or other misc.)
Pipe Insulation

Amount (Specify SF or LF)
<10 LF

Abatement Type

Locker Room Closet
X

Name of Reg. Waste Hauler
Waste Management, Inc.

NJDEP Waste Hauler ID #
17273

Cubic Yards of Waste
<1 CY

Name of Reg. Landfill
Gloucester County Landfill

City, State
South Harrison, NJ

Disp. Date
Various

Completed by (Print or Type)
ANDREW GREEN

Title
MANAGER - KENNY ATLANTIC

Signature

Date
6/19/13

Mail to:
NJDEP-DSHW-BRRTP
401 E. State St., PO 414
Trenton, NJ 08625-0414

Telephone 609-984-6620

C: WORD/ MYDOCS/ ASBESTOS

9/18/00
State of NJ  
Notification of Asbestos Abatement  
(Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1):
2013-6-14

Agencies Notified:
- DOL
- DOH

Type Notification:
- Initial
- Emergency (including justification)

Name of Building Owner/Operator (2):
- Tracey Abernethy

Street Address:
- 384 Hamilton Road, Ridgewood, NJ 07450

City, State, Zip Code:
- Ridgewood, NJ 07450

Name of Contact:
- Tracey Abernethy

FACILITY INFORMATION

Name of facility where abatement is taking place (3):
- Tracey Abernethy

City (5):
- Ridgewood

County (6):
- Bergen

County Code (7):

Name of Abatement Contractor (5):
- D & S Restoration, Inc.

Street Address:
- 20 California Ave, Paterson, NJ 07503

City, State, Zip Code:
- Paterson, NJ 07503

Telephone Number:
- 973-345-8020

License Number:
- 01169

Name of OSHA Monitor:
- D & S Restoration, Inc.

Start Date (10):
- 06/27/13

Occupancy Status During Abatement (Check only one):
- Facility closed/evacuated during entire period of abatement
- Abatement performed outside of normal facility hours
- Other: Normal Hours

Scope of Work (check all that apply):
- Demolition
- Renovation

Location of asbestos-containing material (ACM) to be abated in facility (13):
- Basement: Duct Insulation (35 sq ft)

Registered Waste Hauler:
- D & S Restoration, Inc.

Disposal Date:
- n/a

Completed by (Print or Type):
- Bogdan Joldzic

Title:
- President

Signature:
- n/a

Date:
- 06/14/2013

* Do not use this form for asbestos licensure exempted activities.
**State of NJ**
**Notification of Asbestos Abatement**
(Pursuant to NJAC 8:60 and 12:120)

**Date of Notification (1)**
10/16/14

**Name of Building Owner/Operator (2)**
jorge novura

**Street Address**
352 north 11th street

**City, State, Zip Code**
NEWARK, NJ 07104

**Name of Contact**
jorge novura

**FACILITY INFORMATION**

**Name of facility where abatement is taking place (3)**
jorge novura

**Street Address**
352 north 11th street

**City (5)**
NEWARK

**County (6)**
 Essex

**County Code (7)**
07104

**Type of Facility (4)**
- [ ] School (K - 12)
- [x] Subchapter 8 (Other than K-12)
- [ ] Other (Private/Commercial Blogs/Homes, etc.)

**Square Feet**

**# of Floors**

**Bldg. Age**

**Current Use (Prior if being demolished)**

**Name of Monitoring Firm Hired by Bldg. Owner (8)**

**ASCM No.**

**Name of Abatement Contractor (9)**
D & S RESTORATION, INC.

**Street Address**
20 California Ave.

**City, State, Zip Code**
Paterson, NJ 07503

**Telephone Number**
973-345-8020

**License Number**
01169

**Name of OSHA Monitor**
D & S Restoration, Inc.

**Street Address**
20 California Avenue

**City, State, Zip Code**
Paterson, NJ 07503

**Start Date (10)**
06/28/13

**Sched. Completion Date (11)**
07/12/13

**Occupancy Status During Abatement (Check only one)**
- [ ] Facility closed/vacated during entire period of abatement.
- [x] Abatement performed outside of normal facility hours.

**Other-Describe:** NORMAL HOURS

**Scope of Work (check all that apply)**
- [ ] >3 sf or >3 if
- [x] Renovation
- [ ] >160 sf or >260 if
- [ ] Demolition

**Location of asbestos-containing material (acm) to be abated in facility (13)**

<table>
<thead>
<tr>
<th>Location</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basement boiler room</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Basement living rm above ceiling</td>
<td></td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

**Description of asbestos-containing material (ACM)**

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount (Specify SF or LF)</th>
</tr>
</thead>
<tbody>
<tr>
<td>PIPE INSULATION</td>
<td>24.1 ft</td>
</tr>
<tr>
<td>PIPE INSULATION</td>
<td>30.1 ft</td>
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</table>

**Registered Waste Hauler**
D & S RESTORATION, INC.

**NJDEP Hauler ID#**
13506

**Cubic Yards of Waste**

<table>
<thead>
<tr>
<th>1 yd</th>
</tr>
</thead>
</table>

**Name of Registered Landfill**
TULLYTOWN, RESOURCE RECOVERY

**City, State**
PATerson, NJ 07503

**Disposal Date**
06/29/13

**Completed by (Print or Type)**
BOGDAN JOLDZIC

**Title**
PRESIDENT

**Signature**

**Date**
06/14/13

*Do not use this form for asbestos licensure exempted activities.*
State of NJ
Notification of Asbestos Abatement
(Pursuant to N.J.A.C. 8:58-20 thru 20)

Date of Notification (1)
06/13/13 2013

Name of Building Owner/Operator (9)
PAGE GAINES

ASBESTOS CONTROL & LICENSING

City, State, Zip Code
WESTFIELD, NJ 07090

Name of Contact
MARIE EVARESTO

Agencies Notified Type Notification
☑ EPA Initial
☑ DEP Amended
☑ DOL Amendment #:
☑ DOH Emergency
☑ Cancellation

FACILITY INFORMATION

Name of facility where abatement is taking place (3)
PAGE GAINES

Street Address
200 WOODLAND AVENUE

City (5) Country (6) County Code (7)
WESTFIELD UNION (State use only)

Name of Monitoring Firm Hired by Bldg. Owner (8)
ASCM No.

Name of Abatement Contractor (9)
D & S RESTORATION, INC.

Street Address
20 California Ave.

City, State, Zip Code
Paterson, NJ 07503

Telephone Number
973-345-8020

License Number
01169

Type of Facility (4)
☑ Other (Private/Commercial Bldgs./Homes, etc.)

Square Feet # of Floors Bldg. Age

Current Use (Prior if being demolished)

Start Date (10) Sched. Completion Date (11)
07/01/13 07/12/13

Occupancy Status During Abatement (Check only one)
☐ Facility closed/vacated during entire period of abatement.
☐ Abatement performed outside of normal facility hours-
Describe:
☑ Other-Describe: NORMAL HOURS

Scope of Work (check all that apply)
☐ >2 sf or >2 if
☐ >160 sf or >260 if
☐ Demolition

Location of asbestos-containing material (acm) to be abated in facility (13)

Is location normally used solely by maintenance/custodial staff (12)
Yes No N/A

Description of asbestos-containing material (ACM)
PIPE INSULATION PIPE INSULATION

Amount (Specify SF or LF)
170 LF 230 LF

Registered Waste Hauler
D & S RESTORATION, INC.

Disposal Date
07/02/13

City, State
Paterson, NJ 07503

Name of Registered Landfill
TULLY TOWN, RESOURCE RECOVERY

City, State Paterson, NJ 07503

Cubic Yards of Waste
4 YDS

Name of Registered Landfill
TULLY TOWN, RESOURCE RECOVERY

City, State
TULLY TOWN, PA

Completed by (Print or Type) BOGDAN JOLDZIC
Title PRESIDENT
Signature

Disposal Date
07/02/13

Date 06/2013

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

Date of Notification (1)
06/19/2013

Name of Building Owner/Operator (2)
Carteret Board of Education

Agencies Notified

- EPA
- DEP
- DOL
- DOH
- DCA

Type Notification

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

Street Address
599 Roosevelt Blvd

City, State, Zip Code
Carteret NJ 07008

Name of Contact
Mr. Nilkanth Patel

FACILITY INFORMATION

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

Street Address
1 Carteret Avenue

City (5)
Carteret

County (6)
Middlesex

County Code (7) (STATE USE ONLY) 0090

Name of Monitoring Firm Hired by Building Owner (6)
R & K Occupational & Environmental

ASCM No. 0090

Name of Abatement Contractor (9)
Savic Construction Corp

Street Address
205 Route 46 Suite 15

City, State, Zip Code
Totowa, NJ 07512

Project Manager for Monitoring Firm
Jonathan S. Gilbert

Telephone No. 908-454-6316

Start Date (10) 07/02/2013

Scheduled Completion Date (11) 07/26/2013

Occuancy Status During Abatement (Check Only One)

- Facility Closed/Vacated During Entire Period of Abatement
- Abatement performed outside of normal facility hours

Other – Describe:

Scope of Work (Check All That Apply)

- 300 sf or more
- 1600 sf or more
- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*) and Non-Friable Proceduce

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

Is Location Normally Used Solely by Maintenance/Custodial Staff?

Yes No N/A

In Facility

(13)

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

Amount (Specify SF or LF)

Abatement Type

Removal
Repair
Encapsulation
Endorse

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

Multiple classroom windows X Exterior asbestos caulking 45 openings

Name of Registered Waste Hauler

Newark Carting

NJDEP Waste Hauler ID No. 04509

Cubic Yards of Waste

Disposal Date 07/26/2013

City, State Morristown, PA

Name of Registered Landfill

GROWS

City, State
Newark NJ

Completed by
Milos Savic

Title Project Manager

Signature

Date 06/18/2013

* Do not use this form for asbestos licensure exempted activities.
Date of Notification (1) 06 / 19 / 13

Name of Building Owner/Operator (2) Adriana Santos

Agencies Notified
- EPA
- DOLWD
- DOH
- DCA (NJAC 5:23-8)

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

Street Address
327 Brightwood Ave

City, State, Zip Code
Westfield NJ

Name of Contact
Adriana Santos

Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
House

City (5)
Westfield

County (6)
Union

County Code (?)(STATE USE ONLY)

Name of Monitoring Firm Hired by Building Owner (8)
Bio Terra Solutions

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

ASCM No.

Name of Abatement Contractor (9)
ALL PRO MANAGEMENT LLC

Street Address
P O Box 1224

City, State, Zip Code
Union NJ

Bidg. Age

Telephone No.
973 494 3762

ASCM No.

Name of OSHA Monitor
ALL PRO MANAGEMENT LLC

Street Address
27 Outwater Lane

City, State, Zip Code
Garfield NJ 07026

License No.
1188

Start Date (10) 06 / 29 / 13

Scheduled Completion Date (11) 7 / 1 / 13

Scope of Work (Check all that apply)
- ≥3 sf or ≥3 If
- ≥160 sf or ≥260 If
- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*) and Non-Friable Procedure

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

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

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

Amount (Specify SF or LF)

Abatement Type

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

<table>
<thead>
<tr>
<th>Location</th>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>basement</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>floor Tile</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Name of Registered Waste Hauler
ALL PRO MANAGEMENT LLC

Cubic Yards of Waste
As Needed

Name of Registered Landfill
IESI Landfill

City, State
Garfield NJ

Disposal Date
TBD

Completed By (Print or Type) Zvonko Veskov
Title
President

Signature

Date  6/9/13

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

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>06 / 18 / 13</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Building Owner/Operator (2)</td>
<td>Monmouth County Prosecutors Office</td>
</tr>
<tr>
<td>Agencies Notified</td>
<td>Type Notification</td>
</tr>
<tr>
<td>EPA</td>
<td>Initial</td>
</tr>
<tr>
<td>DEP</td>
<td>Amended</td>
</tr>
<tr>
<td>DCA (NJAC 5:16)</td>
<td>Amendment #</td>
</tr>
<tr>
<td>DHSS</td>
<td>Emergency (including justification)</td>
</tr>
<tr>
<td>DCA (NJAC 5:23-8)</td>
<td>Cancellation</td>
</tr>
<tr>
<td>Street Address</td>
<td>132 Jersey Ville Avenue</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Freehold NJ 07728</td>
</tr>
<tr>
<td>Name of Contact</td>
<td>Tom Alola</td>
</tr>
<tr>
<td>FACILITY INFORMATION</td>
<td></td>
</tr>
<tr>
<td>Name of Facility Where Abatement Is Taking Place (3)</td>
<td>Jerseyville Complex Bldg B</td>
</tr>
<tr>
<td>Street Address</td>
<td>132 Jersey Ville Avenue</td>
</tr>
<tr>
<td>City (5)</td>
<td>Freehold NJ 07728</td>
</tr>
<tr>
<td>County (6)</td>
<td></td>
</tr>
<tr>
<td>Monmouth</td>
<td>County Code (7)(STATE USE ONLY)</td>
</tr>
<tr>
<td>Name of Abatement Contractor (9)</td>
<td>APS Contracting Inc.</td>
</tr>
<tr>
<td>Street Address</td>
<td>155-161 Pennsylvania Avenue</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Paterson, NJ 07503</td>
</tr>
<tr>
<td>Project Manager for Monitoring Firm</td>
<td>Ryan Broadwater</td>
</tr>
<tr>
<td>Telephone No.</td>
<td>609-352-4200</td>
</tr>
<tr>
<td>Start Date (10)</td>
<td>07 / 22 / 13</td>
</tr>
<tr>
<td>Scheduled Completion Date (11)</td>
<td>08 / 05 / 13</td>
</tr>
<tr>
<td>Street Address</td>
<td>1056 SHELTON AVE</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Piscataway NJ 08854</td>
</tr>
<tr>
<td>OSHA Monitor</td>
<td>EMSL ANALYTICAL, INC</td>
</tr>
<tr>
<td>Telelphone No.</td>
<td></td>
</tr>
<tr>
<td>License No.</td>
<td>000875</td>
</tr>
<tr>
<td>Scope of Work (Check all that apply)</td>
<td></td>
</tr>
<tr>
<td>≥3 sf or ≥3 If</td>
<td>Renovation</td>
</tr>
<tr>
<td>≥160 sf or ≥260 If</td>
<td>Demolition</td>
</tr>
<tr>
<td>Location of Asbestos-Containing Material (ACM)</td>
<td></td>
</tr>
<tr>
<td>TO BE ABATED</td>
<td>Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)</td>
</tr>
<tr>
<td>IN Facility (13)</td>
<td>Yes No N/A</td>
</tr>
<tr>
<td>Thruout Bldg</td>
<td>VAT</td>
</tr>
<tr>
<td>Room 1003</td>
<td>1 Sink - BasinMastic Soundproofing</td>
</tr>
<tr>
<td>Room 1012</td>
<td>Flooring Material</td>
</tr>
<tr>
<td>Description of Asbestos-Containing Material (ACM) (i.e., thermal insulation, surfacing,</td>
<td></td>
</tr>
<tr>
<td>VAT, or other miscellaneous)</td>
<td></td>
</tr>
<tr>
<td>Amount (Specify SF or LF)</td>
<td>8,120 sf</td>
</tr>
<tr>
<td>Scheduled Cancellation Date (11)</td>
<td>08 / 05 / 13</td>
</tr>
<tr>
<td>Name of Registered Waste Hauler</td>
<td>Atlantic Carting, Inc.</td>
</tr>
<tr>
<td>NJDEP Waste Hauler ID No.</td>
<td>26085</td>
</tr>
<tr>
<td>Cubic Yards of Waste</td>
<td>30 Yards</td>
</tr>
<tr>
<td>Name of Registered Landfill</td>
<td>Grows Landfill</td>
</tr>
<tr>
<td>City, State</td>
<td>Wayne, NJ 07470</td>
</tr>
<tr>
<td>Completed By (Print or Type)</td>
<td>Svetozar Savreski</td>
</tr>
<tr>
<td>Title</td>
<td>President</td>
</tr>
<tr>
<td>Signature</td>
<td>Date 6/18/13</td>
</tr>
</tbody>
</table>

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

**NOTIFICATION OF ASBESTOS ABATEMENT**

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

**Date of Notification (1)**
06/20/2013

**Name of Building Owner/Operator (2)**
KEAN UNIVERSITY

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

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

**Street Address**
100 MORRIS AVENUE

**City, State, Zip Code**
UNION, NJ 07083

**Name of Contact**
ADAM VARAVA

**Telephone Number**

**FACILITY INFORMATION**

**Name of Facility Where Abatement is Taking Place (3)**
KEAN UNIVERSITY-EAST CAMPUS

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

**Square Feet**

**# of Floors**

**Bldg. Age**

**Current Use (Prior if being demolished)**

**Name of Monitoring Firm Hired by Building Owner (6)**
TTI ENVIRONMENTAL

**ASCM No.**

**Name of Abatement Contractor (9)**
KIELCZEWSKI CORPORATION

**Street Address**
1253 NORTH CHURCH STREET

**City, State, Zip Code**
MOORESTOWN NJ 08057

**Telephone No.**
856-840-8800 x 31

**License No.**
01171

**Name of OSHA Monitor**
SCHNEIDER LABORATORIES

**Street Address**
235 WATCHUNG AVE

**City, State, Zip Code**
WEST ORANGE NJ 07052

**Name of OSHA Monitor**
SCHNEIDER LABORATORIES

**Street Address**
2512 W. CARY STREET

**City, State, Zip Code**
RICHMOND, VA 23220

**Start Date (10)**
07/01/2013

**Scheduled Completion Date (11)**
07/05/2013

**Scope of Work (Check All That Apply)**
- Renovation
- Demolition
- Full Containment with Negative Pressure
- Mini-Enclosure
- Glovebag Procedure
- Non-Exempted (*) and Non-Friable Procedure

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

**TO BE ABATED**

**In Facility**

**Yes**

**No**

**N/A**

**Cubical Yards (Specify SF or LF)**

**Amount**

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

**Name of Registered Waste Hauler**
KIELCZEWSKI CORPORATION

**NJDEP Waste Hauler ID No.**

**Cubic Yards of Waste**

**Name of Registered Landfill**
CONESTOGA LANDFILL

**City, State**
WEST ORANGE NJ

**Disposal Date**

**Name of Registered Landfill**

**City, State**
MORGANTOWN, PA

**Completed by**
SLAWOMIR KIELCZEWSKI

**Title**
PRESIDENT

**Signature**

**Date**
06/20/2013

* Do not use this form for asbestos licensure exempted activities.
NOTIFICATION OF ASPEROS ABATEMENT
(Pursuant to NJAC 8:90 and 12:120)

Date of Notification (1)
06/20/2013

Agencies Notified
\[X\] EPA  \[X\] DEP  \[X\] DOL  \[X\] DOH  \[X\] DCA

Type of Notification
[ ] Initial  \[X\] Amended  \[X\] Amendment #1  \[X\] Emergency (including\njustification)  \[X\] Cancellation

Name of Building Owner/Operator (2)
White Township Board Of Education
Street Address
565 County Road 519
City, State, Zip Code
Belvidere, NJ 07823
Name of Contact
Dawn Huff

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
White Township Consolidated School
Street Address
565 County Road 519
City (5)
Belvidere
County (6)
Warren

County Code (7) (STATE USE ONLY)

Name of Monitoring Firm Hired by Building Owner (8)
RKO Environmental Analysis, Inc
ASCN No.
0090

Name of Abatement Contractor (9)
Bako Construction & Restoration, Inc.
Street Address
265A Route 46 Suite 3D
City, State, Zip Code
Totowa, NJ 07512

Telephone No.
908-454-6316

License No.
00666

Name of OSHA Monitor
Bako Construction & Restoration, Inc.
Street Address
265A Route 46 Suite 3D
City, State, Zip Code
Totowa, NJ 07512

Start Date (10)
07/15/2013

Scheduled Completion Date (11)
07/29/2013

Occupancy Status During Abatement (Check Only One)
[ ] Facility Closed/Vacated During Entire Period of Abatement
[ ] Abatement Performed Outside of Normal Facility Hours
[ ] Other – Describe:

Scope of Work (Check All That Apply)

\[X\] <3 sf or <3 if
\[X\] <160 sf or <260 sf
\[X\] Renovation

Description of Material (12)

Is Location Normally Used Solely by Maintenance/Custodial Staff?

<table>
<thead>
<tr>
<th>Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Window Caukl</td>
<td>1136 LF</td>
<td>Removal</td>
</tr>
<tr>
<td>Transite Fascia</td>
<td>360 SF</td>
<td>Encapsulation</td>
</tr>
<tr>
<td>Window Caukl</td>
<td>548 LF</td>
<td></td>
</tr>
<tr>
<td>Transite Fascia</td>
<td>265 SF</td>
<td></td>
</tr>
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Location of Asbestos-Containing Material (ACM) TO BE ABATED

<table>
<thead>
<tr>
<th>Rooms</th>
<th>Location Normally Used Solely by Maintenance/Custodial Staff?</th>
</tr>
</thead>
<tbody>
<tr>
<td>200,210,220,230,240 &amp; 250</td>
<td>Yes</td>
</tr>
<tr>
<td>200,210,220,230,240 &amp; 250</td>
<td>Yes</td>
</tr>
<tr>
<td>300,310,320,330,540 &amp; 560</td>
<td>Yes</td>
</tr>
<tr>
<td>300,310,320,330,540 &amp; 560</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Name of Registered Waste Hauler
Bako Construction & Restoration, Inc.
NDEP Waste Hauler ID No.
20889

Disposal Date
07/29/2013

Name of Registered Landfill
G.R.O.W.S.

City, State
Totowa, NJ

Completed by
Damin Valjevac
Title
Project Manager
Signature
06/20/13

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

Date of Notification (1)  
06/06/2013

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

Type Notification  
- Initial
- Amended
- Emergency (Including Justification)

Name of Building Owner/Operator (2)  
White Township Board of Education

Address  
565 County Road 519

City, State, Zip Code  
Belvidere NJ 07823

Name of Contact  
Dawn Huff

Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)  
White Township Consolidated School

Street Address  
565 County Road 519

City (5)  
Belvidere

County (6)  
Warren

County Code (7)  
STATE USE ONLY

Square Feet  
50000

# of Floors  
2

Bldg. Age  
50

Current Use (Prior if being demolished)  
School

Name of Monitoring Firm Hired by Building Owner (8)  
RKO Environmental Analysis, Inc.

ASCN No.  
0090

Name of Abatement Contractor (9)  
Bako Construction & Restoration, Inc.

Street Address  
265 Route 46 Ste 3D

City, State, Zip Code  
Totowa NJ 07512

Project Manager for Monitoring Firm  
Jon Gilbert

Telephone No.  
908 454 6316

Telephone No.  
973 256 7010

License No.  
00666

Name of OSHA Monitor  
Bako Construction & Restoration, Inc.

Street Address  
265 Route 46 Ste 3D

City, State, Zip Code  
Totowa NJ 07512

Occupancy Status During Abatement (Check Only One)  
- Facility Closed/Vacated During Entire Period of Abatement
- Abatement Performed Outside of Normal Facility Hours

Other — Describe:

Scope of Work (Check All That Apply)  
- ≥23 sq or ≥53 sf
- ≥600 sq or ≥620 sf
- Renovation
- Demolition

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

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED</th>
</tr>
</thead>
<tbody>
<tr>
<td>In Facility (13)</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Is Location Normally Used Solely by Maintenance/ Custodial Staff? (12)</td>
</tr>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>------------------------------------------------------------</td>
</tr>
<tr>
<td>Rooms 200,210,220,230,240 &amp; 250 Window Caulk</td>
</tr>
<tr>
<td>Rooms 200,210,220,230,240 &amp; 250 Transite Facia</td>
</tr>
<tr>
<td>Rooms 300,310,320,330,340 &amp; 560 Window Caulk</td>
</tr>
<tr>
<td>Rooms 300,310,320,330,340 &amp; 560 Transite Facia</td>
</tr>
</tbody>
</table>

Name of Registered Waste Hauler  
G.R.O.W.S. Inc.

Hauler ID No.  
20889

Disposal Date  
07/08/2013

Name of Registered Landfill  
G.R.O.W.S. Inc.

City, State  
Totowa NJ

Completed by  
Goran Kojic

Title  
Project Manager

Signature

Date  
06/06/2013

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