

Check No. No Fee - PA Project

Date of Notification (1)			Name of	Building	Owner/Operator	(2) berty Internat	tional Airport				
June 18, 2015 Agency Notified	Type Notification		Street A	ddress		2615 314	74, MH 3-59				
□ EPA □ DCP Not expired per State Play, 10/2004 ☑ DOL	☑ Initial ☐ Amended Amendment #		City, Sta	ng 125 ite, Zip C rk, NJ	ode	A.V					
☑ DOH	☐ Emergency (including justification)☐ Cancellation		THE STATE OF THE STATE OF	f Contact			Telephone Number	er			
			FACIL	ITY INFO	ORMATION						
Name of Escility Where	Abatement is Taking Place	(3)				Type of Facility	(4)				
	ternational Airport -		0. 07			☐ School (K-12)					
Street Address	torriational 7 th part					☐ Subchapter 8	(Other than K-1 2)	hildinaa			
	ard Adjacent to Park	ina I of	t P07			homes, etc.)	vate & commercial	bullalings	,		
	aru Aujacent to Fair	ing Lo				Square Feet	# of Floors	Bldg. A	ge		
City (5)						N/A	N/A	N/A			
Newark			County	Code (7) (STATE USE	(B)	or if being demolis	hed)			
County (6)			ONLY)	0000 (1)) (01/11/2 002	Storage Yai					
Essex		1 400	M No.		Name of Ahaten	nent Contractor (9					
	n Hired by Building Owner					storation Co.,					
PA of NY & NJ		N/A	4		Street Address	Storation Co.,	IIIo.				
Street Address					223 Randol	nh Avenue					
241 Erie Street, R	oom 236				City, State, Zip					77.72	
City, State, Zip Code					Clifton, NJ						
Jersey City, NJ 0		17.1	Na		Telephone No.	07011	License No.			_	
Project Manager for Mo	nitoring Firm	-50500000000	hone No.	10	973-478-468	21	00120				
Ralph Campione		7.1	624-689	70	Name of OSHA		00.120				
Start Date (10)	Scheduled Co		Date (11)				Services, L.L.C				
July 13, 2015	July 27, 20				Street Address		30111000,				
Occupancy Status Duri	ng Abatement (Check only	one)				Brook Avenue	9				
☐ Facility Closed/Vaca	ted During Entire Period o	f Abateme	ent		City, State, Zip				- 16		
Abatement Performe Other - Describe:	d Outside of Normal Facili	ty Hours				NJ 07071-199	98				
	all that apply)	- 1									
Scope of Work (Check	all triat apply)		П г		□ Ful	l Containment witi ii-Enclosure	h Negative Pressure	9			
≥ 3 sf or ≥ 3 lf				novation nolition		vehan Procedure					
≥ 160 sf or ≥ 260 lf					⊠ No	n-Exempted (*) an	d Non-Friable Proc	eaure	A	bater	ment
			cation						222	Тур	е
Loca	tion of		mally Solely by		Description	n of					m
Asbestos-Contain	ning Material (ACM)	Mainte	enance/	Asb	estos Containing e., thermal system	Material (ACM)	Amount (Specify		Re	70	Encapsulate
	ABATED acility	18-s205/e9-1	todial aff?	(1.	surfacing, V	AT, or	SF or LF)	1	Removal	Repair	usa
	13)	18 (17 (17 (17 (17 (17 (17 (17 (17 (17 (17	12)		other miscella	neous)			val	=	ate
"	140.00			+							
		Yes	No N/A	Tuo	nsite pipe			56 In ft	X		
CHIRP Storage Yard Ac	ljacent to Parking Lot P07	\wedge		iidi	isite pipe						
		100 mg		-							
		198		-						\forall	\vdash
				Harris -	Cubic Yards o	f Name of Reg	istered Landfill		_		
Name of Registered V	Vaste Hauler	ID No	EP Waste	nauler	Waste	(i)	h Landfill / Grand	Central	Lai	ndfill	
Two Brothers C	43		6	Grows North		n-Friable	e)				
				Disposal Date	City, State		35.000	52			
City, State	Boulevard, Clifton, I	14-1312		07/16/2015 - 07/31/2015	Morrisvil	le, PA / Penn A	rgyl, F	PA			
Completed by	Title				Signature		and the second second	Date		. –	
G. Roger Wood		lanagei	r		1/1/1	1		6/18/	20	15	

NO CK

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

Date of Notification (1)	Name of Building Owner/Operator (2)	
0161/1191/1151	01 11	
Agencies Notified Type Notification	Thillips 66	2015 JUH 24 AN 3.44
X1EPA 11	1400 Park Aven	1
[]Initial Notification	City, State, Zip Code	10 E 4 10 E CON 1 1111
[X]DOL [√]Amended	Cinden NJ	& LEEFER PA
Notification	Name of Contact	Telephone Number
[]Cancellation	Ben Hines	COO. 5.3 -5 :-
1,7,2011	1007	
Name of Facility Where Abatement is	FACILITY INFORMATION .	acility (4)
21 11	/ 4	chool (K-12)
Street Address	66 [jst	ubchapter 8 (Other than K-12) ther (i.e., private & commer-
1400 Park	AUENRIE	ial buildings, homes, etc.)
, , , , , , , , , , , , , , , , , , ,	1) Utalo	of a of rioots bidg. Age
	(STATE USE ONLY)	se (Prior if being demolished)
		1 refinery
Name of Monitoring Firm Hired by Buil Owner (8)		
NA	New States	Contracting (L)
Street Address	Street Address	,
City, State, Zip Code	City, State, Zip Code	t Extension Suit 10
21-17% 2-1-1-17	11 - 1	NJ 08872
Project Manager for Monitoring Firm	Telephone Number Telephone Number	License Number
	732 525-01	00 007.49
01	pletion Date (11) Name of OSHA Monitor	7 7
0 6 / 0 8 / 5 0 6 / Month / Day / Year Month /	2161/1/151 11ger Envi	conmental
Occupancy Status During Abatement (Ch	eck only one) Street Address	4- 0:-
[]Facility Closed/Vacated During F of Abatement		n noe
[]Abatement Performed Outside of N Hours - Describe:		7 2022
[X]Other - Describe: Normal	work hours Brick NJ	1 08724
Scope of Work (Check all that apply)		t with Negative Pressure
[]Demolition []>3 sf or >3 lf	[]Renovation []Mini-Enclosure Demolition []Glovebag Proced []Non-Frighte Pro	lure
[X]∑160 sf o r ≥260 1f	X Clean up []Non-Friable Pro	
	Is Location	Abatement Type
Location of Asbestos-Containing	Normally Description of Used Asbestos-Containing	Amount E R C C
Material (ACM) TO BE ABATED	Solely Material (ACM) by Main- (i.e., thermal systems	(Specify M E A L SF or O P P O
in Facility (13)	tenance/ insulation, surfacing, VAT, Custodial or other miscellaneous)	LF) V A S. S.
SCrap Kark @ P-66	Staff(12) Yes No N/A	L R L R
	X Surfacing	1200 SF X
Name of Registered Waste Hauler	NJDEP Waste Cubic Yards Name of Re Hauler ID No. of Waste	gistered Landfill
Horwith Trucking In		anced Disposal
City, State	Disposal Date City, Stat	e 01
to Box 7 North	Hampton & 6-26 Ker	Sey 1.4 15846
Completed By (Print or Type) Title	Signature	Date
Kurt Nale Supe	intendent Buth	all 6-19-15
ASB-41 JUN 95	1 7	

CK 66637

State of NJ Notification of Asbestos Abatement

D&S Proj.	#: 2015-208	e		(Pursu	ant to NJAC	8:6	0 and 12:120)	÷					
								Cos-					
Date of Notification	(1)	N	ame of Bu	uilding Owr	ner/Operator (2)			68.15	71-X	fil	- 1	37	
0 6 /1 18			SUE AN	N OHL				. 4				5	
Agencies Notified EPA	Type Notificatio Initial	n St	reet Addr	ess					0.6				
☐ DEP	Amended		274 FRA	ANKLIN '	TURNPIKE							4	
□ DOL	Amendment #:_	_ c	ty, State,	Zip Code									
	Emergency	1	Name and Address of the Owner, where the Owner, which is the Owner, where the Owner, which is th	WOOD, 1	NJ 07450								
M DOH	(including justification)	Na	me of Co	ntact				Telephor	ne Numbe	ŗ			
☐ DCA	Cancellation		SUE A	NN OHL					, 4×18				
				FAC	ILITY INFORM	ATIO	N						
Name of facility wh	nere abatement is	taking pla	ce (3)			-		Type of Facility					
SUE ANN OHI									ol (K - 12)				
Street Address									apter 8 (C (Private/C			12)	
074 ED 43177 F								Bldgs.	/Homes, e				
274 FRANKLI City (5)	N TURNPIKE	Coun	h. (6)			-		Square Feet	# of Floor	S	В	ldg. A	ge
City (5)		Coun	ty (0)				unty Code (7) ate use only)	Current Use (P	rior if boin	a don		od)	
RIDGEWOOD)	BER	GEN			(Current Ose (F	nor ii beiii	y deli	1011511	eu)	
Name of Monitoring	g Firm Hired by Bl	dg. Owne	r (8)		ASCM No.	\neg	Name of Abatement	Contractor (9)					
							D & S RESTOR	ATION, INC.					
Street Address							Street Address						
City, State, Zip Code	9					_	20 California A City, State, Zip Code						
Oity, Otato, Zip Ood	5						Paterson, NJ 07						
Project Manager for	Monitoring Firm		Pi	none Numb	per	-	Telephone Number	7303	License	Numb	oer	_	
							973-345-8020			1169			
Start Date (10)		Sched.	Completi	on Date (1	1)	-	Name of OSHA Mon		-				
06/29/15		07/10/	/15				D & S Restorati	ion, Inc.					
Occupancy Status D	During Abatement			J-36		\dashv	20 California Av	Vanua					
	l/vacated during er						City, State, Zip Code						
Describe:	rformed outside of		acility hou	rs-									
Other-Describ	e: NORMAL HO	URS				_	Paterson, NJ 07	7503					
Scope of Work (che							=	Full Containment v	v/negative	press	ure		
$3 \le 3 \le 5 \le 5$		Renovation	1				the state of the s	Mini-enclosure Glovebag procedu	ra				
≥160 sf or ≥26		emolition						Non-Exempted (*)		friable	proc	edure)
Location of	The second secon	s location by mainter		used solely todial						R e	R	E	E
asbestos-con material (acm) to be	staff(12)			Description material (asbestos-containing	Amount (Specify S	SF or	m o	р	С	n
abated in facil	lity (13)	Yes	No	N/A				LF)		V	i	a p	L
GARAGE							ION	30 L FT		e	T	П	\vdash
										一	宣	盲	t
			-										
Pogiotored Wests III			5.11			7							
Registered Waste Ha D & S RESTORA		NJDE 1350	P Hauler)6	CONTROL IN	ubic Yards of V lyd.	vaste	Name of Registered TULLYTOWN,		ECOVER	Y			
City, State				Disposal D	ate		City, State						
PATERSON, NJ				06/30/1			TULLYTOWN,	, PA					
Completed by (Print or Type) BOGDAN JOLDZIC PRESIDENT Signature									Date 06/18/	/2015			
ASB-41				for asbesto	os licensure exe	empte	ed activities.		00/10/	2013			-

CIX 006036

D&S Proj. #: 2015-206

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

									Pr					
Date of Notification				uilding Owr I O'CONN	ner/Operator (2	2)			1013	JUH 21	÷ ££	3:	45	
Agencies Notified	Type Notifica	tion	Street Add		NELL							-		
	Initial								2	11				
☐ DEP	Amended			AMS AV	ENUE									
DOL.	Amendment #		City, State,	(9)										
	Emergency (including	1 1	The second second second second	EDGE, N	IJ 07661	-		-			-			eominmon.
■ DOH	justification)		Name of Co	ontact					Telepho	ne Numbe	er			
☐ DCA	Cancellation	n	JOSEP	H O'CON	NELL				212 7					
				FAC	CILITY INFORM	MATIO	N							
Name of facility w	here abatement	is taking pl	ace (3)					П	Type of Facility	(4)				
JOSEPH O'CO									Scho	ol (K - 12 hapter 8 (han k	(10)	
Street Address								-11		(Private/C			(-12)	
204 4 D 4 3 4 2									Bldgs	./Homes,	etc.			
204 ADAMS A	AVENUE		. (0)					_	Square Feet	# of Floo	ors	В	ldg. A	ge
City (5)		Cou	inty (6)				unty Code (7)							
RIVER EDGE	7	DE.	RGEN			(Sta	ate use only)		Current Use (I	Prior if bein	ng den	nolish	ed)	
Name of Monitorin					ASCM No.	1	Name of Abatem	nent C	ontractor (9)					
	·g · ····· · ··· · · · · · · · · · · ·	Diag. Oiii.	0, (0)		AGOINTNO.									
Street Address						_	D & S REST Street Address	ORA	HON, INC.					
Sireet Address														
City, State, Zip Coo	ia .					_	20 Californi City, State, Zip C		·.					_
ony, orato, zip ood							1000		0.2					
Project Manager fo	r Monitoring Fire	,	To	hone Numb	201		Paterson, N. Telephone Numb		03	License	Nive	201		
1 Tojoot Wanager 10	i wontoring r im			none num	Dei		973-345-80)1169			
							Name of OSHA		Ar.		71107		_	
Start Date (10)		Sched	d. Complet	ion Date (1	1)		D & S Resto							
06/23/15		07/1	5/15				Street Address	nutio.	ii, iiic.					
Occupancy Status	During Abateme	nt (Check o	only one)				20 California	a Ave	nue					
	d/vacated during						City, State, Zip C						_	
Abatement per Describe:	erformed outside	of normal	facility hou	ırs-										
	be: NORMAL H	IOURS				_	Paterson, N.	J 075	03					
Scope of Work (ch								ПЕ	III Containment	w/negative	e press	ure		
3 sf or > 3 sf or > 3 lf		Renovation	on						ini-enclosure	mnogauri	p. 000			
≥160 sf or ≥2	_	Demolitio							lovebag procedi					
		100000000000000000000000000000000000000	TIPSE	used solel	v/			ΠИ	on-Exempted (*	and Non	-friable	proc	_	
Location of asbestos-cor	ntaining	by mainte	enance/cus		10		abaata	_	Amount		е	e	E n	E
material (acn	n) to be	staff(12)		1	material		sbestos-containin	9	(Specify	SF or	m o	p	С	C
abated in fac	eility (13)	Yes	No	N/A					ĹF)		v	i	a p	L
ATTIC					1 voenierii	044	impulation		11.050.00.5	T	e	r		-
ATTIC vermiculite							попящаноп		1,050 SQ F	1		무	片	부
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				4		-				-	-12		닏	닏
Registered Waste F	lauler	INUE	EDII- I	10# 10	ubio Vorde = C	Mest	INIama (5.1)					Ш	Ш	
D & S RESTOR		135	EP Hauler 506	100000	Cubic Yards of V 20 YDS	vvaste			andfill ESOURCE R	FCOVE	RY			
City, State				Disposal D			City, State	11, 1	LJOUNCE IX	CCO VEI		-	CONTRACTOR OF THE PARTY OF	
PATERSON, N	J 07503			06/25/1			TULLYTOV	VN. F	PA.					
Completed by (Prin	t or Type)	Title			Signature		1			Date				
BOGDAN JOL		PRESID	ENT		- N					06/18	3/2015			
ASB-41		Do not us	e this form	for asbest	os licensure ex	empte	d activities.			1			A .	THE STATE OF THE S



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Date of Notification (1) 6/19/2015			of Building f Brigant		Operator	(2)		2615 JU	H 24	£1	13:	41.			
Agencies Notified	Type Notification			Street A	Address West Bri	gantin	ne Ave							54	
EPA DEP DOL	Initial Amended Amendment	#	_	City, Sta	ate, Zip Contine NJ	_				4:411	Ċ.		NG.	UL	
DOH DCA	Emergency (justification) Cancellation	including			of Contact Stevens					Telepho	ne Nu				
Name of Facility Misses	AL-1			FAC	ILITY INFO	DRMAT	ION								
Name of Facility Where Former Residence	Abatement is Taking	g Place (3)						-	of Facility (4						
Street Address 852 West Shore Dr	rive								School (K-12 Subchapter of Other (i.e. pr	8 (Other th			dings	, home	es,
City (5) Brigantine									etc.) re Feet	# of Floo	ors		3ldg. <i>A</i>	Age	
County (6)					Code (7))		Curre	ent Use (Prio dential	1 '	emolis)U+		
Name of Monitoring Firm	n Hired by Building (Owner (8)		ASC			Name		itement Cont	tractor (9)					
ACER Associates							Yanr	nuzzi	Environme		vices				
Street Address 1012 Industrial Driv	/e						Street 135 I		ss lon Rd						
City, State, Zip Code West Berlin NJ 080	91								ip Code NJ 07405						
Project Manager for Mor Scott Horn							Teleph 908-2			1.500	ense N	0.			
Start Date (10) 6/30/2015		Con	pletion	Date (11)				HA Monitor Environme	ental Gro	up, Ir	IC.				
Occupancy Status Durin	g Abatement (Check	k Only One)				Street	Addre	SS			1855110		77. 27.	
Facility Closed/Vac	ated During Entire F ned Outside of Norm	eriod of Ab	atem	ent					lon Rd						
Other – Describe:	condemned	at Facility i	iours						ip Code NJ 07405						
Scope of Work (Check A	all That Apply)						_	7							
≥3 sf or ≥3 if ≥160 sf or ≥260 if			nova moliti				×	Mir	Il Containme ni-Enclosure ovebag Proce	edure					
		le l	ocati	on			-	1 1/10	n-Exempted	(*) and No	n-Friad	le Pro		e ement	
Location			rmall	у			scription						Ту	ре	
Asbestos-Containing TO BE AB		Main	tenar	nce/			taining M I systems			Amour (Speci		R	_	Enc	ш
In Facil (13)		Custo	dial S (12)	staπ?		surfa	cing, VA	T, or		SF or L		Remova	Repair	Encapsulate	Enclosure
Control		Yes	No	N/A		Out of 1	moochari	icouoj				/al	=	ılate	ure
Exteri		Х	Transite	Sidin	ng (behi	ind vi	nyl sidir	2,100 \$	SF	х					
Name of Registered Was	ato Haulor		T NI	IDED VA	lanta	O. Ibia	Vasela				1511				
Yannuzzi Group, Inc			H	JDEP W auler ID '467		of Wa			Name of R	10200000 10000	.andfill				
City, State Kinnelon NJ	17	407		20 C' Dispo: 7/05/2	sal Date		City, State								
Completed by					Signature				Da	te		= = = :::			
John Mucha		Ма	nager							11000000	/19/	15			

CK #6359

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3. E. 2. 2.	<u>a Econom</u>	- 17	
2013	JUN 24 AH	3.43	
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É5	Telephone Nun	nber	
	•		nomes,
Feet	# of Floors	Bldg. Ag	je
		7 1. FLA	6 6

Date of Notification (1)	/		110	Name of PSEG	Building	Owner/C	perator (2)		201	18			
Agencies Notified	Type Notification X Initial			Street A	ddress HADLEY	/ ROAI)		15 JUN 24 AH				
DEP DOL	Amended Amendment #		_		te, Zip Co H PLAII), NJ 070		& LICENII		UL		
DOH DCA	Emergency (i justification) Cancellation	ricidaling		RA	Contact FER	. D	ECA	iRES	Telephone Nun	nber			
Name of Facility Where	Abatement is Taking	Place (3	5)	FACI	LITY INF	ORMATI		ype of Facility	(4)				
PSE&G		-						School (K-		i.			
Street Address	ONN 6/16	A	18.				2	Other (i.e. etc.)	r 8 (Other than K-12 private & commercia	al build			es,
1932 7 City (5) NoRTH A County (6) Ha D.	BERGER) /	して					quare Feet	# of Floors	B	idg. A	ige Si	5
County (6) Han	SON	-		County (Code (7) USE ONLY)			or if being demolish		-		
Name of Monitoring Firm	n Hired by Building C	wner (8)		ASCN				Abatement Co	ntractor (9)				
ENVIRONMENTAL Street Address	_ TACTICS			0045	<u>.</u>		Street Ac		S OF AMERICA	٨			
64 BROAD STREE	T							HITEHEAD	AVE.				
City, State, Zip Code MATAWAN, NJ 07	747							e, Zip Code H RIVER, N	J 08882				
Project Manager for Mor TOM GEIGER	nitoring Firm			Telepho 732-29	ne No. 92-2217		Telephor 732-43	ne No. 2-8350	License N 01111	0.			
Start Date (10)	15	Schedule	7/	pletion	Date (11)			OSHA Monitor JE SYSTEM	S OF AMERICA	4			
Occupancy Status Durin	ng Abatement (Check	Only Or	ne)	0 /			Street Ad	dress HITEHEAD	۸\/E				
Abatement Perform	cated During Entire P ned Outside of Norm Mesessessessessessessessessessessessesse	al Facility	Hours	;	ale		City, Stat	e, Zip Code H RIVER, N	991WASS - 49	-	- 77		
Scope of Work (Check A	All That Apply)	/					00011		0 00002				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	Renova Demolit				X	Mini-Enclosur Glovebag Pro				e	
		Is	Locati	on						_	Abate	ement	t
Locatio Asbestos-Containing		Use	Normal ed Sole	ly by	Asbes		scription of	erial (ACM)	Amount	-	l y	ре	T
TO BE AE	BATED	All 655.70	intena todial S			thermal	systems in cing, VAT,	nsulation,	(Specify SF or LF)	Remova	Repair	ncap	Enclosure
(13)		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(12)	T			miscellane		-	oval	oair	Encapsulate	sure
		Yes	No V	N/A	To		A		4/5-				-
Contral	loom	-	\wedge	-	KAI	us;Ti	= PAL	sels	26 SF	× .			-
-										-			
Name of Registered Wa			1000	JDEP W		Cubic of Wa	Yards		Registered Landfill				
WASTE MANAGEN	MENT		1176304	125		App	. 2		/S NORTH	=======================================		111154,500	
City, State ELIZABETH, NJ							sal Date アルム	City, Sta MORR	te ISVILLE, PA				
Completed by CAROL RAIMO							Signature	o Pa	ino Da	16/2	3	/,	<u> </u>
	AROL RAIMO OFFICE						ne c			/	-/	. 6	-

CK# 6358

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

1 111111 1 01111

Date of Notification (1,)			Name	-f D. 'I-I' O	10 .	(4)		14-14				
6/23/15			PSE(of Building Owner G	/Operato	r (2)	f 1 '	1	žu -	a.f		
Agenciés Notified Type Notification EPA Initial			4000	Address HADLEY ROA	AD.		2015 JU	424 F	H 3	: ¢	Š	
DEP Amended Amendment Emergency	(including		SOU.	tate, Zip Code TH PLAINFIEL	.D, NJ (07080	L	JICEM:	14(iku 3	L	
DOH justification) DCA Cancellation			Name	of Contact AD H	EN	BRICKS	Telep	ohone Nur	nber	ر	· ,	
Name of Facility Where Abatement is Takir	g Place (3)	FAC	ILITY INFORMAT	TION	Type of Facility						
PSE&G	,	7.				School (K						
Street Address	. ,	1 /	_			Subchapte Other (i.e.	er 8 (Other	than K-12	2) al bui	ا ما ا	to a second	
640 PASSA; C	1	VE	シ			etc.)						.es,
WEST CALDWE	//					Square Feet	# 01 1	loors		Bldg.	Age	· > 4
County (6)	, ,		County	Code (7) USE ONLY)		Current Use (P				LYPX	9	3 yr
Name of Monitoring Firm Hired by Building	Oumar (0)					S	aB S	TAT	10	N		
ENVIRONMENTAL TACTICS	Owner (8))	004	M No. 5	UNIC	of Abatement Co QUE SYSTEM	ontractor (9	9)				
Street Address 64 BROAD STREET						Address WHITEHEAD	A\/F		7 - 20 1141			
City, State, Zip Code MATAWAN, NJ 07747					City, S	State, Zip Code						
Project Manager for Monitoring Firm TOM GEIGER			Telepho		Telepi	TH RIVER, N		_icense N) .			
Start Date (10)	Schedul	ed Co		92-2217 Date (11)		432-8350		01111				
7/7/15	7	1/1	Inpletion	S (11)		of OSHA Monitor		MERICA				
Occupancy Status During Abatement (Chec						Address WHITEHEAD	∧\/ ⊏					
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm	al Facility	/ Hour	2	0		tate, Zip Code	AVE.					
Scope of Work (Check All That Apply)	aper	sta	s o	nly		TH RIVER, N	J 08882					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	_	Renova			E	Full Containm	nent with N	egative P	ressu	re		
2 100 St 01 2200 II		Demoli	tion			Mini-Enclosur Glovebag Pro	e	a a a saa				
	1 2				×			Non-Friabl		7-67	-	
Location of	1	Locat Normal	lly	De	scription	of					ement pe	
Asbestos-Containing Material (ACM) TO BE ABATED		d Sole intena		Asbestos Con	taining M	laterial (ACM)	Amo				ш	_
In Facility (13)	Cust	todial 8 (12)	Staff?		cing, VA	T, or	(Spe	r LF)	Remova	Repair	ncap	Enclosure
(10)	Yes	No	N/A	other	niscellan	eous)			oval	air	Encapsulate	sure
CONTROL ROOM		X		TRANSITE	PA	NE /s	50	5F	X			
					711	100/3			Δ			
Name of Registered Waste Hauler		IN	JDEP W	aste Cubic	Yards	Nama of	Registered	d I andEll				
WASTE MANAGEMENT		H	auler ID 125		77		S NORT					
City, State ELIZABETH, NJ				Dispos	sal Date	City, Stat		DA				
Completed by	Title			TA	ignature	IVIORRI	SVILLE,	PA	, ,	100	,	
CAROL RAIMO	CE M	GR.		[ar	al Lac.	no	6		3/1	15		
								-		1		

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 6 22 / Barbara Ward Agencies Notified Type Notification Street Address ⊠ EPA 1514 Emerson Ave ☑ DOLWD ☐ Amended City, State, Zip Code ☑ DOH Amendment #_ Atlantic Clty, NJ 08401 □ DCA ☐ Emergency (including Name of Contact Telephone Number (NJAC 5:23-8) justification) ☐ Cancellation Wayne Shifflet FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Ward Residence -- Block 687 Lot 6 School (K-12) ☐ Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 1514 Emerson Ave homes, etc.) City (5) Square Feet # of Floors Bldg. Age Atlantic Clty 2040 2 50+ County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Atlantic Residence Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Health and Safety Services 117 Controlled Environmental Systems Street Address Street Address PO Box 365 1121 N. Bethlehem Pike - Suite 60 City, State, Zip Code City, State, Zip Code Berlin, NJ 08009 Spring House, PA 19477 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Jim Proctor 609-839-2432 215 542 7000 00847 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 7 / / 15 7 / 2 / 15 CES Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 1121 N. Bethlehem Pike - Suite 60 Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: 7:00AM-5PM/:00PM-Spring House, PA 19477 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ☐ >3 sf or >3 lf ☐ Mini-Enclosure □ Renovation ≥ 160 sf or > 260 lf □ Demolition ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Repair Encapsulate Enclosure Used Solely by Remova Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Attic X ACM Pipe insulation 54 LF X П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste Geppert Recycling Western Berks Communtiy Landfill 2 City, State Disposal Date City. State Hatfield, PA 7/5/15 Birdsboro, PA 19508 Completed By (Print or Type) Title Signature Patricia Visco

Office Manager



The off hota

4-3-15

Date of Notification (1)			Name	of Building	g Owner/Operator (2)	1				3
4////	15		DPI	MC	201	5 JUN 24 A	/ Job #1503-19	72 CI	nk. N	Α	
Agencies Notified Type Notifica	ation		Street	Address							
☑ EPA ☐ Initial			20 \	West Sta	te Street, 3 rd /Flo	OFESTAS PA	MITTON				
☑ DOLWD ☑ Amended			City, S	State, Zip C	Code	& LICENS	MIKUL	7			
☑ DHSS Amendme ☐ DCA ☐ Emergen	- 10 644 - 3 70		Tre	nton, NJ	08625	- LICETIA	MU				
DCA Emergen (NJAC 5:23-8) justification		3	Name	of Contac	t		Telephone Numb	er			E-1 E-2
☐ Cancellat	ion		Dor	n Juechte	er						
			FAG	CILITY IN	IFORMATION						
Name of Facility Where Abatement is T		22.7				Type of Facility	(4)				
CRRNJ Terminal Bulding, Libe	rty State I	Park				School (K-12					
Street Address							8 (Other than K-12) rivate and commerc		ildino	IS.	
1 Audry Zapp Drive						homes, etc.				7//	
City (5)						Square Feet	# of Floors	BI	dg. A	ge	
Jersey City							1		200		
County (6)			Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pr	rior if being demolis	hed)			
Hudson						Vacant					
Name of Monitoring Firm Hired by Build	ding Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9))				
USA Environmental Mgmt, Inc.					Asbestos an	d Mold Service	es, Corp.				
Street Address					Street Address						
344 West State Street					3859 Sylon B	Boulevard					
City, State, Zip Code					City, State, Zip Co	ode					
Trenton, NJ 08618					Hainesport, I	NJ 08036					
Project Manager for Monitoring Firm		Tele	phone	No.	Telephone No.		License No.			-	
John Duggan		60	9.656	.8101	609-702-0400)	00862				
Start Date (10)	Scheduled C	omple	tion Da	te (11)	Name of OSHA N	Monitor					
5 /13 /15	6/	12	2-1	15	EMSL Analyt	ical, Inc.					
Occupancy Status During Abatement (Check only	one)			Street Address						
☐ Facility Closed/Vacated During Entire					200 U.S. Rou	te 130 North					
Abatement Performed Outside of No					City, State, Zip Co	ode					
Time of Abatement:AM	PIVI/	PIVI-		Alvi	Cinnaminsor	n, NJ 08077					
Scope of Work (Check all that apply)					□ Eull Con	tainmant with No	gativa Pragovisa				
≥3 sf or ≥3 lf	⊠ Re	enovati	on		☐ Mini-End	tainment with Ne dosure	gative Pressure				
≥160 sf or ≥260 lf	☐ De	emolitic	on			g Procedure					
		. 1		T	⊠ Non-Exe	mpted (*) and No	on-Friable Procedur	1			
Location of		S Locat Norma			Description	f		Ab	atem	ent T	ype
Asbestos-Containing Material (ACM) Use	ed Sole	ely by	Asbe	Description of stos Containing Ma		Amount	Rei	Repair	Enc	En
TO BE ABATED	Ma	aintena todial			., thermal systems	insulation,	(Specify	Removal	oair	aps	Enclosure
IN Facility (13)	Cus	(12)	otali !		surfacing, VAT other miscellane		SF or LF)	<u>a</u>		Encapsulate	ure
(10)	Yes	No	N/A		other miscellane	ous)				te	
Rooms 105, 106, 106A				Interior	Asbestos Flash	nina	384 LF		П	П	П
					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	9	0012				H
								믐			H
			H					屵			H
Name of Registered Waste Hauler			UDEDA	Monto	Cubia Varda of	Name of Desi			ш	Ш	
Freehold Cartage, Inc.		1000	IJDEP \ lauler II		Cubic Yards of Waste	Name of Regi					
City, State			02265	5	5 Disposal Date	City, State					
Freehold, NJ					6/12/15		e, PA 19067				
Completed By (Print or Type)	Title				Signature	1	Da	te			
Kimberly A. Trumbetti	Office	Coord	dinato	г	1 VA	V-		11-2	7-11	5	i.

GL15-002-11

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

check # 1465 Page 1 of 1

Date of Notification (1) 6-19-2015				Building (argo H				ą	6 15	114 2L	E	14	: ~	2	
Agencies Notified Type Notification			Street Ad	ddress e Camp	us				! 						
EPA X Initial Amended Amendment #			City, Sta	te, Zip Co oines,IA	de	3			. 0	1108	HS	111	G	13.	
Emergency (in justification) DCA Cancellation	cluding		Name of	Contact Overturf					Tel	ephone N	lumb	er			
				LITY INFO		ON						-	11000		
Name of Facility Where Abatement is Taking Residential Street Address	Place (3))		=				of Facility (School (K-1 Subchapter	2)	or than K	12\				
229 Rector Street							x	Other (i.e. petc.)	rivate 8	& comme		build	lings,	home	≅S,
City (5) Perth Amboy		1						re Feet 0 SF	# o	f Floors			dg. A	ge	
County (6) Middlesex			County (Code (7) JSE ONLY,	16			ent Use (Prid idential	or if bei	ng demo	lishe	d)			
Name of Monitoring Firm Hired by Building Ov GL Group, Inc	wner (8)		ASCN	l No.			of Aba Froup	tement Cor , Inc	tractor	(9)					
Street Address 140 Hamburg Turnpike				r ^{al} ,			Addres Hamb	ss ourg Turni	oike						
City, State, Zip Code Bloomingdale, NJ 07403		6	6	7				ip Code dale, NJ 0	7403						
Project Manager for Monitoring Firm- Michael B Solakov		Telephor	ne No. 93-3099			none N 710-9			License 01084						
	Schedule 7/6/201		pletion (Date (11)	10		of OSI Group	HA Monitor , Inc							
Occupancy Status During Abatement (Check	Only On	e)					Addres		att						
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma	riod of A	batem Hours	ent					ourg Turni ip Code	oike						
Other – Describe:		(4)		7 1	-	Bloo	mingo	dale, NJ 0	7403						
Scope of Work (Check All That Apply)	Thomas .														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolit				×	Mir Glo	II Containme ni-Enclosure ovebag Prod n-Exempted	e edure	1.75	34			e e	
	lo	Locati	on				110	II Exompted	() ()	0 1101111	1			ement	
Location of	N	lormal	ly		Des	scription	of				-		Ту	ре	
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	d Sole intenar odial S (12)	nce/		tos Cont thermal surfac	aining N	faterial s insula T, or		(8	mount Specify F or LF)		Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A									- C		te	(D
Basement			X	1	Pipe	Insula	tion		17	55 If		X			
Basement		X		Boiler	Insull	ation		3	0 SF	_	X				
i. P		1													
Name of Registered Waste Hauler GL Group, Inc	50.50	Н	JDEP W auler ID 033034	No.	Cubic of Was TBD			Name of Grows	Registe	ered Land	liil				
City, State Bloomingdale, NJ	4"	9			Dispos TBD	al Date		City, State Morrisv		A					
Completed by Elena Solakov	dent		2 0	S	ignature	3	lem Sh	lla	,	Date 6-1		15			

EDS15-156

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

check #1451 - / / E D

Date of Notification (1) 6-17-2015	Name	of Building Iwell- Wes	Owner/Op st Caldw	perator (2) vell Boar	of Education	on UN 24	1H	1	7 1				
Agencies Notified	Type Notification		Stree	t Address Gray Stre			2 10	1.000			-		
EPA DEP DOL	Initial Amended Amendment #		City,	State, Zip Co st Caldwel	ode	006-769		Z LICEP	SIN	G			
× DOH × DCA	Emergency (in justification) Cancellation	icluding		of Contact k Ennis				Telephon	e Num	her 			
			FA	CILITY INF	ORMATIC								
Name of Facility Where . Jefferson Elementa		Place (3)					ype of Facility (
Street Address								2) 8 (Other tha	n K-12)			
85 Prospect Street							Other (i.e. p	rivate & com	mercia	l build	dings,	home	es,
City (5) West Caldwell							Square Feet 5,000+	# of Floor	rs	91.00	ldg. A	ge	
County (6) Essex				ty Code (7) E USE ONLY)		Current Use (Prio School	or if being de	molish	ed)			
Name of Monitoring Firm Ahera Consultants	The contraction is a property of the contraction of	wner (8)	AS	CM No. 57			Abatement Con	tractor (9)					
Street Address PO Box 385		ja te		- 10 E		Street Ac	idress amburg Turni	oike					
City, State, Zip Code Oceanville, NJ 082	31-0385	-		4		City, Stat	ie, Zip Code ngdale, NJ 0	2					
Project Manager for Mor Krystoff Liz				hone No.	3	Telephor			nse No).			
Start Date (10)	1 5	Scheduled (n Date (11)			OSHA Monitor	010					
6-23-2015 at 2 pm	8	8-7-2015				GL Gro	oup, Inc			5.5			
Occupancy Status Durin		- S - WA		7		Street Ad	Idress amburg Turni	nike					
Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire Pe led Outside of Norma Sub-8 Occupied	eriod of Aba I Facility Ho	tement ours			City, Stat	e, Zip Code		- 222				
Scope of Work (Check A			¥	a de la la		BIOOTH	ingdale, NJ 0						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	iii Triac, ppiy)	(American Control of C	ovation olition			X	Full Containme Mini-Enclosure		ative P	ressui	re		
						H	Glovebag Prod Non-Exempted		-Friabl	e Pro	cedur	2	
		Islo	cation				.voir Example	() and 110	1100		Abate	ement	
Location	n of	Non	nally			cription of					Ту	ре	
Asbestos-Containing TO BE AB		Mainte	olely by nance/			aining Mat systems ir	erial (ACM)	Amoun (Specifi		D	_	Enc	Ф
In Facil	ity	455	al Staff? 2)	(1.0	surfac	ing, VAT,	or	SF or LF		Remova	Repair	Encapsulate	Enclosure
(13)					outer in	niscellanec	ius)			val	=	ılate	ure
Crowlen		Yes N	lo N/A		rmal Cu	(atom İn	sulation	6,475 L	_	X			
Crawlsp			-	- Ine		Sterrin	Sulation	0,473 L		Δ			
· ·											7		
				1		7 1							
Name of Registered Was	ste Hauler			Waste	Cubic \	Yards :	Name of I	Registered L	andfill				
GL Group, Inc	Hauler 00330		of Was	te i	Grows								
City, State Bloomingdale, NJ	23		Disposa TBD	al Date	City, State Morrisvi								
Completed by Elena Solakov	1 ,7 :	Title Preside	nt	15 (16)	Si	gnature	Elenn Solv	lla	Dat 6-1	e 7-20	015		

EDS15-181

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

check # 1463 Page 1 of 1

Date of Notification (1) 6-15-2015	***************************************			of Building rville Pu		Operator (2 chools	2)			+	***	-2'	-		Ü	
Agencies Notified	Type Notification			Street A	Address est Cliff	Street					2015	JUR	21	f A	H 1	: 51
EPA DEP DOL	Initial Amended Amendment #		_	City, St	ate, Zip Co rville, No	ode					453	£5,	() () () ()	UC.	IN I	RÜL
X DOH X DCA	Emergency (in justification) Cancellation	ncluding			of Contact tore Gar	nbino				Tel	ephone			F-01	180	
Name of Facility Where A	hatement is Taking	Place (3)	FAC	ILITY INF	ORMAT		Type	of Facility (4	\						
Van Derveer School		riace (3)				1 -		School (K-12	507						
Street Address 51 Union Avenue					C.				Subchapter 8 Other (i.e. pr etc.)	(Oth				dings	hom	es,
City (5) Somerville									re Feet	# o	f Floors		100	8ldg. <i>A</i> .0+	Age	
County (6) Somerset					Code (7) USE ONLY)		Curre	ent Use (Prior	if bei	ng dem	olishe	d)			
Name of Monitoring Firm Westchester	Hired by Building O	wner (8)		ASCI 0012	M No. 27		Name of GL Gr		tement Cont , Inc	ractor	(9)					
Street Address 307 North Walnut St	reet						Street A		ss ourg Turnp	ike						
City, State, Zip Code West Chester, PA 19	9380					Ž.	City, Sta Bloom		ip Code dale, NJ 07	7403						
Project Manager for Monit	toring Firm		Telepho	one No.		Telepho 201-7				Licens 0108						
Start Date (10) 6-26-2015		ed Cor	mpletion	Date (11)	- 6	Name of		HA Monitor								
Occupancy Status During	Abatement (Check	Only Or	ne)	1 6			Street A									_
Facility Closed/Vacat Abatement Performe						eg save g	140 Ha		urg Turnp	ike						
Other – Describe:					1				dale, NJ 07	7403						
Scope of Work (Check All	That Apply)							(8)	0							
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	30.27 563 13	-	Renova Demolif	ition .	2 692125			Mir	I Containmer ni-Enclosure ovebag Proce		Negativ	ve Pro	essu	re		
				8 80					n-Exempted		d Non-F	riable	Pro	cedur	е	
			Locat											Abate	ement pe	t
Location (Asbestos-Containing N		Use	Normal d Sole	ly by	Ashes		escription o		(ACM)	Α	mount			ĺ	Some	
TO BE ABA In Facility (13)	TED	54455000	intena todial 8 (12)			therma surfa	I systems in acing, VAT, miscellaneo	nsula , or		(S	specify or LF)		Removal	Repair	Encapsulate	Enclosure
10.1.1.1.001		Yes	No	N/A											Ф	
Kindergarten A-9&A-			X		20		e insulatio				00 If	-	X			
Kindergarten A-9&A-	X				e Fitting				5 ea		X					
Kindergarten A-9&A-	10 Bathrooms		X		Pip	e Fitti	ngs Wate	er M	ain	1	0 ea	_		Χ		
Name of Registered Waste	a Hauler		IN	JDEP W	laste	Cubio	Yards		Name of R	ogieto	red Lan	4611				
GL Group, Inc	3 · · · · · · · · · · · · · · · · · · ·		Н	auler ID 033034	No.	of Wa			Grows	cgisic	rou Lan	QIIII				
City, State Bloomingdale, NJ		9	1			Dispo TBD	sal Date		City, State Morrisvill	e, P	4					
Completed by Elena Solakov	dent	(a)			Signature	E	Ceru Stul	la		Date 6-1)15				

EDS15-032

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

Page 1 of 1

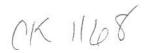
check # 1464

Date of Notification (1) 6-11-2015				of Building Ow olph Towns				11 -	*	Ħ	- L		
Agencies Notified Type Notification EPA Initial			Street A 25 Sc	Address hoolhouse	Road		4	THE JUNE	24	ħĿ,	<i>[::</i>	i B	
DEP Amended DOL Amendment		_		ate, Zip Code olph, NJ 07			4		G .		4	1	
Emergency (justification)	including			of Contact				Telepho			.3		
DCA Cancellation			Andy										
Name of Facility Where Abatement is Taking	Place (3)	1	FAC	ILITY INFOR	MATION	Typ	e of Facility (4	1)					
Shongum Elementary	j i lace (o	,					(F. 89)	55%					
Street Address						×	School (K-12 Subchapter		an K 1	2)			
9 Arrow Place						H	Other (i.e. pr				ldinas	, hom	es.
							etc.)						
City (5) Randolph						1 24000000	are Feet	# of Floo	ors	190	3ldg. /	Age	
						1000	000+	1			10+		
County (6) Morris				Code (7) USE ONLY) _			rent Use (Prio 1001	r if being d	emolis	ned)			
Name of Monitoring Firm Hired by Building C Ahera Consultants Inc	Owner (8)		ASCN 0057				atement Cont	tractor (9)					-
Street Address					0.000	t Addre	the state of the s						
PO Box 385					-		burg Turnp	ike					
City, State, Zip Code Oceanville, NJ 08231-0385							Zip Code Idale, NJ 0	7403					
Project Manager for Monitoring Firm John Smoyer			Telepho (609) 6	ne No. 652-1833		hone 1 -710-			ense N	0.			
	Schedule 7-5-15	d Con	npletion	Date (11)			SHA Monitor						
		- 1					o, Inc				4		
Occupancy Status During Abatement (Check		16			77,27,777	t Addre		iko					
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm	eriod of A	baten	nent				burg Turnp	ike					
Other – Describe:	al Facility	Hours	5				Zip Code	7400					
Scope of Work (Check All That Apply)					DIOC	irmig	dale, NJ 07	7403					
	[200007]				F	-							
\(\sime\) ≥3 sf or ≥3 lf \(\sime\) ≥160 sf or ≥260 lf	-	enova emolit				M	ull Containmer ini-Enclosure		ative F	ressu	re		
					3		lovebag Proce on-Exempted		n-Friah	le Pro	cedur	6	
	lo l	Locati	0.00		_		on Exempted	() and 110	- 1100	10110	- Ville I ha	ement	
Location of		ormal			Description							ре	
Asbestos-Containing Material (ACM)		Sole		Asbestos	Description Containing I		al (ACM)	Amour	nt			m	
TO BE ABATED	2.222.232	ntenar		(i.e. the	rmal system	s insul		(Specif	fy	Re	l z	nca	En
In Facility (13)		(12)			surfacing, VA her miscella			SF or L	F)	Remova	Repair	psı	Enclosure
()			T	0.		neous)				val	=	Encapsulate	ure
4	Yes	No	N/A									(D	
Roof Sections A, B, C		X	/m n		Flashin	g		3,000 5	SF	X			
					1								
Name of Registered Waste Hauler		N.	JDEP W	aste C	ubic Yards	_	Name of R	egistered L	andfill				
GL Group, Inc		H	auler ID 033034	No. of	Waste BD		Grows	9					
City, State Bloomingdale, NJ				D	isposal Date BD		City, State Morrisvill	e, PA					
Completed by Elena Solakov	Title Presid	ent	0 2	7	Signature	Ele	run Stullen		Dai	te 11-15	5		

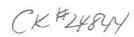
Date of Notification (1)				Name	of Building	Owner/Operator (2) Pharmacy, LCC	2)	1007				
6 /19	9 / 15			New J	ersey CVS	S Pharmacy, LCC	Z + AH 1:	€ <u>P</u> Job #150	6-1990	chk.	#399)4
Agencies Notified Ty	pe Notification			Street	Address	A E -	Triana #					
	Initial			One (CVS Drive		TUS LONTS ICENSING	OL				
2-10 1 2 10 A 10 A 10 A 10 A 10 A 10 A 10	Amended			City, S	tate, Zip C	ode Oct 1.	LENOTH G					
⊠ DHSS	Amendment #_				nsocket, R							
DCA (NJAC 5:23-8)	Emergency (in justification)	cluaing	1	Name	of Contact			Telephone N	umber			
The state of the s	Cancellation					red Developer			.7			
				FAC	CILITY IN	FORMATION		A.	<u> </u>			
Name of Facility Where Abat	ement is Taking	Place	(3)				Type of Facility	(4)				
CVS Property/Campus	•						School (K-12					
Street Address				-			Subchapter 8			25.52		
111 & 119 Beachwood, 300 A	Atlantic City Blvd	i, 110	& 118	Seama	n Ave.		Other (i.e., property) homes, etc.)		mercial bu	illding	S,	
City (5)							Square Feet	# of Floors	Bio	dg. Ag	je	
Beachwood							2400, 1500, 9500, 2800, 1400	2		45, 5		35
County (6)				Cour	ity Code (7)(STATE USE ONLY)	Current Use (Pri	or if being dem				
Ocean						6	Vacant					
Name of Monitoring Firm Hire	ed by Building C)wner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					-
Horizon Environmenta	ıl					DESCRIPTION OF THE PROPERTY OF	d Mold Service	s, Corp.				
Street Address			- 4			Street Address						
PO Box 316						3859 Sylon B	oulevard					
City, State, Zip Code						City, State, Zip Co						
Thorofare, NJ 08086						Hainesport, N						
Project Manager for Monitori	ng Firm		Tele	phone	No.	Telephone No.		License No.			-	
Dave or Steven Flanig	1770)			6-848		609-702-0400		00862				
Start Date (10)		iuled C		tion Da		Name of OSHA M			+			
6 / 29 /	Sec. Annual Contract of the Co			/		EMSL Analyt						
Occupancy Status During Ab	atement (Check	only	one)			Street Address						
☐ Facility Closed/Vacated D			,	ment		200 U.S. Rou	te 130 North					
☐ Abatement Performed Ou	itside of Normal	Facilit	y Hour	s - Des	cribe	City, State, Zip Co	ode					
Time of Abatement:	AMP1	Λ/	_PM-		AM	Cinnaminson						
Scope of Work (Check all tha	at apply)						*				<u> </u>	
□ >2 of oc > 2 if							ainment with Neg	ative Pressure	/Negative	Pres	sure	Enc.
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			novati molitic				osure Procedure					
						Non-Exe	mpted (*) and No	n-Friable Proce	edure			
**See Page 2 for Addition	nal Scope	2.5	Locat						Ab	ateme	ent Ty	уре
Location of			Norma ed Sole			Description of			R	R	Ш	Ш
Asbestos-Containing Mat TO BE ABATE			intena		Asbe	stos Containing Ma ., thermal systems	terial (ACM)	Amount (Specify	Remova	Repair	ıcal	nclo
IN Facility	-	Cus	todial	Staff?		surfacing, VAT	or	SF or LF)	val	_	Encapsulate	Enclosure
(13)		Vac	(12)	NI/A		other miscellane	ous)				ate	1
444 B		Yes	No	N/A	Transite Sidi	ng		3,924 SF			_	
111 Beachwood Blvd.		Ш	Ш	\boxtimes	Multi Layer F			160 SF		Ш	Ц	Ш
119 Beachwood Blvd.				\boxtimes	Transite Sidi			3,222 SF 144 SF	\boxtimes			
119 Beachwood Blvd. (cont)				\boxtimes	Multi Layer F Duct Wrap	Roofing		102 SF 452 LF				
118 Seaman Ave.				\boxtimes	Flue Packing Transite Sidir			2 SF 1,755 SF				
Name of Registered Waste H	lauler		1923	JDEP \	Vaste	Cubic Yards of	Name of Regis					
Freehold Cartage, Inc.			H	auler II		Waste	GROWS La					
City, State				02265)	5 Disposal Date	City, State					
Freehold, NJ						7/17/15	Morrisville	, PA 19067				
Completed By (Print or Type)	Title	1	-			Signature			Date			
Kimberly A. Trumbetti			Coore	linato						0045		
ASB-41			20010			14/			6/19/2	2015		
MAY 11	*	Do not	use th	is form	for asbest	os licensure exemp	ted activities.					

Date of Notification (1)			Nam	e of Buildin	g Owner/Operator (_	
6/19/	15		Ne	w Jersey	CVS Pharmacy	2011Job	#1506-1990	1:68	hk. #	3994	4
Agencies Notified Type Notifica	ation		Stree	et Address	_			2.7			
⊠ EPA ⊠ Initial			Or	ne CVS Dr	ive	₽≎dE3	TOS CON	TOOL			
☐ DOLWD ☐ Amended ☐ DHSS — Amendment			City,	State, Zip (Code	2	TILFRAIL	1 : 1 :			
☑ DHSS Amendment ☐ DCA ☐ Emergen		-	Wo	oonsocke	t, RI 02895			O.			
(NJAC 5:23-8) justification		g		e of Contac			Telephone N	lumber			
☐ Cancellat			Al	Stein, Pre	eferred Develope	er	- Copilotto				
					FORMATION						
Name of Facility Where Abatement is T	aking Plac	e (3)	1.7	COLLI I III	II OKINATION	Type of Facility	(4)				
CVS Property/Campus		(-)				School (K-12					
Street Address			-			☐ Subchapter 8	(Other than K	(-12)			
111 & 119 Beachwood, 300 AC	Blvd 110	2 11	8 500	man Avo		Other (i.e., p	rivate and com	mercial b	uilding	gs,	
City (5)	Diva, i ic	0. 11	o Sea	man Ave.		homes, etc.)					
Beachwood						Square Feet	# of Floors	E	ildg. A	ge	
County (6)			10								
Ocean			Cou	inty Code (/)(STATE USE ONLY)	Current Use (Pri	ior if being den	nolished)			
						Vacant					
Name of Monitoring Firm Hired by Build	ing Owner	(8)	ASCM	No.	Name of Abateme						
Horizon Environmental					Asbestos and	d Mold Service	s, Corp.				
Street Address					Street Address						
PO Box 316					3859 Sylon B	oulevard					
City, State, Zip Code					City, State, Zip Co	ode					
Thorofare, NJ 08086					Hainesport, N	IJ 08036					
Project Manager for Monitoring Firm		Tele	ephone	No.	Telephone No.		License No	1 101			
Dave or Steve Flanigan		8	56-848	3-0800	609-702-0400		00862				
Start Date (10)	cheduled (omple	etion Da	ate (11)	Name of OSHA M	onitor					
6/29/15	_7	1	7_ /	15	EMSL Analyti	cal, Inc.					
Occupancy Status During Abatement (0	heck only	one)			Street Address				V		_
□ Facility Closed/Vacated During Entir	e Period of	Abate	ment		200 U.S. Rou	e 130 North					
Abatement Performed Outside of No	rmal Facilit	y Hou	rs - Des	scribe	City, State, Zip Co						-0.54
Time of Abatement:AM	PM/	PM		_AM	Cinnaminson						
Scope of Work (Check all that apply)						, 110 00017			-	-	
						ainment with Neg	ative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		enovat emolitic				osure					
	2 00	inonti	JI I		⊠ Glovebag ⊠ Non-Exer	npted (*) and Nor	n-Friable Proce	edure			
	Is	Locat	tion			[oateme	ant T	· vno
Location of		Vorma	lly		Description of	.		1	-		Ť
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	ed Sole	ely by ince/		stos Containing Mai		Amount	Removal	Repair	nc	nc
IN Facility			Staff?	(i.e	 thermal systems i surfacing, VAT, 	nsulation,	(Specify SF or LF)	lova	air	aps	Enclosure
(13)		(12)			other miscellane		SF OI LF)	1 2		Encapsulate	re
	Yes	No	N/A							е	
300 Atlantic City Blvd.			\boxtimes	Floor Til			1,438 SF	I IXI		П	
				Sheetro	ck on Joint Compou	nd	2,800 SF				1
110 Seaman Avenue							612 LF				
Southan Averige				Floor Til Transite	e & Mastic		332 SF				
			П	Transite	Ording		455 SF			$\overline{\Box}$	F
Name of Registered Waste Hauler			JDEP 1	Maste	Cubic Yards of	Name of Desire	lored Leadell			Ш	
Freehold Cartage, Inc.		10000	auler II		Waste	Name of Regist					
City, State			02265	5	5	GROWS La	IIIUIIII			1 62-1	
Freehold, NJ					Disposal Date 7/17/15	City, State					
0.00 (0.000) (0.000) (0.000) (0.000) (0.000)					1/11/15	Morrisville,	PA 19067				
Completed By (Print or Type)	Title				Signature			Date			
Kimberly A. Trumbetti	Office (Coord	linato	r				6/19/2	015		
SB-41		_	_								

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



Date of Notification (1) 06/9/2015					f Building		Operator	(2)	9.0	115 111						
	T N416 - 41				Brigant	ine			28	ווט עון	H 24	£.	EL wa	: 1.	2	
Agencies Notified EPA	Type Notification Initial			Street A	daress West Bri	gantin	e Ave		A.	ν.Ε		i i				
DEP X DOL	Amended Amendment		_		ate, Zip Co ntine, NJ					£ 1,	. IC.E _l	(3)	10			
DOH DCA	Emergency justification) Cancellation				f Contact Stevens					Tele	phone N	lumbe	er			
	L ——			FACI	LITY INFO	ORMAT	ION			-						
Name of Facility Where Former Residence	Abatement is Takin	g Place (3	3)					-	of Facility (4							
Street Address									School (K-12 Subchapter	8 (Othe						
435 Lafayette Boul	evard								Other (i.e. pr etc.)	rivate &	comme	rcial b	uild	lings,	hom	es,
City (5) Brigantine									re Feet	# of 2	Floors			idg. A	ge	
County (6)					Code (7)	Y			ent Use (Prio	r if bein	ng demo	lished)			
Atlantic Name of Monitoring Firm	Lisad by Building	Ouror /0\		ASCN		-	Nema		dential	h	(0)					
ACER Associataes		Jwner (8)	V.	ASCI	A NO.				tement Con Environme			es,In	С.			
Street Address 1012 Industrial Driv	/e			71				Addre Kinne	ss Ion Rd							
City, State, Zip Code West Berlin NJ 080	91						90/08/800		ip Code NJ 07405							
Project Manager for Mor				Telepho			Teleph	none N	0.		License					
Start Date (10)		Schedule	ed Cor		09-1203 Date (11)			218-0	A Monitor		01228					
7/8/2015		7/9/201	15	прісцоп	Date (11)		Yanr	nuzzi	Environme	ental (Group,	Inc.				
Occupancy Status Durin	\$ N	858	53.					Addre	ss Ion Rd.							
Facility Closed/Vac Abatement Perform	ated During Entire I ned Outside of Norn	Period of A	Abaten Hours	nent s					ip Code							
Other – Describe:	condemned						2000000		NJ 07405							
Scope of Work (Check A	II That Apply)						_	_								
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		-	Renova Demolit				i×	Mir	II Containme ni-Enclosure		Negativ	e Pres	sur	е		
							×		ovebag Proc n-Exempted		Non-Fr	iable l	Proc	edur	е	
		2000	Locat											270	emen	t
Location Asbestos-Containing			Normal d Sole		Achoe		escription taining N		L(ACM)	۸۳	nount	-		1 9	pe	
TO BE AB	ATED	0.000000	intena todial s			therma	l system	s insula		(Sp	pecify		Re	Z	Enca	Enc
In Faci (13)			(12)				acing, VA miscellar			SF	or LF)		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A		550.550.550							<u>a</u>		ate	re
1st Floor/k	Citchen			Х	Gray	/Blue1	12"X12	" Floc	or Tile	10	0SF	x				
1st Floor/Laur	A) See See See See See See See See See Se			X	Yel	low Li	noleum	Floo	ring	40	SF	x	8			
Exteri				Х	Wir	ndow (Glazing	caul	king	3 wir	ndows	x				
2nd Floor/Bac			X		Finish	12"X1	2" Flo	oor Tile		0 SF	x					
Name of Registered Was			200	IJDEP W lauler ID		Cubic of Wa	Yards aste		Name of F		ed Land	lfill				
yannuzzi Group, Inc				7467	100 S Tabl	5 CY			GROWS							
City, State Kinnelon NJ						Dispo 7/9/2	sal Date 015		City, State Morrisvi							
Completed by John Mucha		Title Proje	ct Ma	anager			Signature	9				Date 06/1	9/2	015		



Date of Notification (1)	/19/15			Name	e of Buildin	g Owner/Operato	27 0	0 5-					
Agencies Notified	Type Notif	- ication		Stree	t Address		numor	a ye	\$ 400 a	, , , ,	F 4	(W	ć5 (=
EPA	Initial	ICATION		Jules	i Address	1	25 Plainsbo	ro Rd					
DEP DOL	Amend Amend	ment #	_	City,	State, Zip (Code	ranbury, NJ					18	
⊠ DOH	justific	ency (includi ation)	ng	Name	e of Contac		tanoury, 143		ephone Nur	mber			
☐ DCA	Cancel	lation				odd Kearny		101	opriorio (vai	i ibci		8	
				FA	CILITY INF	ORMATION							
Name of Facility Where	Abatement is			0.000			Type of Facili	ity (4)					
		Residen	ial				School (K-						
treet Address	105	D1 1	ח	1			Subchapte Subchapte	er 8 (Oti private	her than K-	12) cial bu	ildina	S.	
City (5)	123	Plainsbo	oro R	<u>a.</u>			homes, et	c.)					
Sity (S)	Cra	nbury, N.	085	12			Square Feet 2100	#	of Floors 2	1	Bidg.	Age 5+/-	
County (6)	/Iercer	10ut y, 11.	005	Cour	nty Code (7) (STATE	Current Use (Prior if I		lished)) T/-	_
Jame of Monitoring Firm		ilding Owno		ASCM	· · ·	Name of Abstan		(0)					
	nvironme			AGOIVI	140.	Name of Abater	vens Enviror		al Servi	nes T	nc		
Street Address						Street Address	, CIIG LIIVII OI		ai SCIVIC	.cs, 1			_
namen mast tissesten skales in katolises (2000)	4 Berkle	y Place					PO	Box 3	322				
City, State, Zip Code						City, State, Zip C	Code						
	reehold, l	NJ 07728					Allentov	vn, N	J 08501				
roject Manager for Mor			90000	ephone	123 Bloomson	Telephone No.	-0.000	Li	cense No.	2010			
D D	unocore		(/.	32) /4	0-8408	(609) 25	9-9688			0049	3		
Dave B		Calcadalad	0	1 D	1- (44)	1110011							
tart Date (10)		Scheduled			ite (11)	Name of OSHA		ÆCS.					
tart Date (10) 7/6/15		\$25-100-100-100	7/8/1		ite (11)			/IECS	ļ				
Start Date (10) 7/6/15 Occupancy Status Durin	ng Abatemen	t (Check onl	7/8/1 y one)	15	ite (11)	Name of OSHA Street Address			Sanger Commencer				_
7/6/15 Decupancy Status Durin Facility Closed/Vacate Abatement Performed	ng Abatemen ed During Er	t (Check onl tire Period o	7/8/1 y one) f Abate	15 ement	ite (11)		A Berk		Sanger Commencer				_
The control of the co	ng Abatemen ed During Er d Outside of 7am to 4p	t (Check onl tire Period o Normal Faci	7/8/1 y one) f Abate	15 ement	tte (11)	Street Address	A Berk	celey	Place				_
7/6/15 Cocupancy Status Durin Facility Closed/Vacate Abatement Performed Other - Describe:	ng Abatemen ed During Er d Outside of 7am to 4p	t (Check onl tire Period o Normal Faci	7/8/1 y one) f Abate	15 ement	tte (11)	Street Address City, State, Zip C	4 Berk Code Freehold	celey d, NJ	Place 07728				_
tart Date (10) 7/6/15 ccupancy Status Durin Facility Closed/Vacate Abatement Performed Other - Describe: cope of Work (Check a	ng Abatemen ed During Er d Outside of 7am to 4p	t (Check onl tire Period o Normal Faci	y one) f Abate ity Hou	ement ers	ite (11)	Street Address City, State, Zip C	4 Berk Code Freehold Intainment with No	celey d, NJ	Place 07728				
tert Date (10) 7/6/15 Occupancy Status Durin Facility Closed/Vacate Abatement Performed Other - Describe: Cope of Work (Check a	ng Abatemen ed During Er d Outside of 7am to 4p	t (Check onl tire Period o Normal Faci	7/8/2 y one) f Abate ity Hou	ement ers	ite (11)	Street Address City, State, Zip C □ Full Cor □ Mini-En: □ Gloveba	4 Berk Code Freehold Attainment with National Streets The procedure of the streets of the street	d, NJ	Place 07728 Pressure	ura.			
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Start Date (10) 7/6/15 Decupancy Status Durin Facility Closed/Vacate Abatement Performed Other - Describe: Coope of Work (Check a	ng Abatemen ed During Er d Outside of I 7am to 4p	t (Check onlitire Period of Normal Facility	7/8/) y one) f Abate ity Hou enovat emolitic Locatic	ement irs	ite (11)	Street Address City, State, Zip C	4 Berk code Freehold trainment with Notosure ag Procedure empted (*) and N	d, NJ	Place 07728 Pressure	T	Abate Tyl		
tart Date (10) 7/6/15 ccupancy Status Durin Facility Closed/Vacate Abatement Performed Other - Describe: cope of Work (Check a 3 ≥ 3 sf or ≥ 3 lf ≥ 160 sf or ≥ 260 lf Location of Asbestos-Containing M	ng Abatemen ed During Er d Outside of I 7 am to 4p all that apply) of Material (ACM	t (Check onlottire Period of Normal Facility)	7/8/3 y one) f Abate ity Hou enovate emolitic Locatic lormally d Sole! intenan	ion on / y by cce/	Asbesto	Street Address City, State, Zip C Full Cor Mini-End Gloveba Non-Exe Description of os Containing Mat	4 Berk Code Freehold Attainment with Noclosure ag Procedure empted (*) and Noceital (ACM)	d, NJ egative	Place 07728 Pressure ble Procedo	/	-	oe T	
tart Date (10) 7/6/15 ccupancy Status Durin Facility Closed/Vacate Abatement Performed Other - Describe: cope of Work (Check a 3 > 3 sf or > 3 lf > 160 sf or > 260 lf	ng Abatemen ed During Er d Outside of 7am to 4p all that apply) of Material (ACM	t (Check onlottire Period of Normal Facility)	7/8/1 y one) f Abate ity Hou enovat emolitic Locatic lormally d Solel	ion on / y by cce/	Asbesto	Street Address City, State, Zip C Full Cor Mini-End Gloveba Non-Exe Description of os Containing Matthermal systems in	A Berk Code Freehold Intainment with Notlosure ag Procedure empted (*) and Notlosure empted (ACM) insulation,	d, NJ egative	Place 07728 Pressure ble Procedo	/	Ту	oe T	
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tert Date (10) 7/6/15 Cocupancy Status Durin Facility Closed/Vacate Abatement Performed Other - Describe:	ng Abatemen ed During Er d Outside of I 7 am to 4p all that apply) of Material (ACM)	t (Check onlitire Period of Normal Facility)	7/8/] y one) f Abate ity Hou enovate emolitic Locatic lormally d Sole! ntenan ustodia Staff? (12) No	ement ion on / y by ce/ al	Asbesti (i.e.,	City, State, Zip C Full Cor Mini-End Gloveba Non-Exe Description of os Containing Mat thermal systems is surfacing, VAT, other miscellaneous	A Berk Code Freehold Attainment with Not closure ag Procedure empted (*) and Not erial (ACM) insulation, or us)	d, NJ egative lon-Fria	Place 07728 Pressure ble Procedo mount specify or LF)	Removal	Ту	oe T	
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Total (10) 7/6/15 Iccupancy Status Durin Facility Closed/Vacate Abatement Performed Other - Describe: Cope of Work (Check a 3 3 sf or 3 lf 1 160 sf or 260 lf Location of Asbestos-Containing M TO BE ABAT IN Facility (13) Baseme:	ng Abatemen ed During Er d Outside of I 7am to 4p ill that apply) of Material (ACM ED	t (Check onlitire Period of Normal Facility) Is Normal Facility Is Normal Facility Yes	7/8/j y one) f Abate ity Hou enovat emolitic Locatic lormally d Solel ntenan ustodia Staff? (12) No	ion on // yy by cce/ all N/A	Asbesti (i.e.,	Cubic Yards of Waste	A Berk Code Freehold Attainment with Not closure ag Procedure empted (*) and Not erial (ACM) insulation, or us)	d, NJ egative lon-Fria A (S	Place 07728 Pressure ble Procedo mount specify or LF)	Removal	Ту	oe T	
To BE ABAT IN Facility Baseme: Baseme: To Be Grey Status Durin Facility Closed/Vacate Abatement Performed Other - Describe: Cope of Work (Check a Second Status Durin Location of Check a Location of Check a Baseme: Baseme: Cope of Work (Check a Second Status Durin Location of Check a Cope of Work (Check a Second Status Durin Location of Check a Cope of Work (Check a Second Status Durin Location of Check a Baseme: Cope of Work (Check a Cope of Work (Check a Second Status Durin Location of Check a Cope of Work (Check a Second Status Durin Location of Check a Cope of Work (Check a Cope of Work (Check a Second Status Durin Location of Check a Cope of Work (Check a Second Status Durin Location of Check a Cope of Work (Check a Second Status Durin Location of Check a Cope of Work (Check	ng Abatemen ed During Er d Outside of I 7am to 4p ill that apply) of Material (ACM ED	t (Check onlitire Period of Normal Facility) Is Normal Facility Is Normal Facility Yes	7/8/j y one) f Abate ity Hou enovat emolitic Locatic lormally d Solel ntenan ustodia Staff? (12) No	ion on / y by oce/ al N/A	Asbesti (i.e.,	Cubic Yards of Waste 2 CU	4 Berk code Freehold trainment with Noclosure ag Procedure empted (*) and Noclosure ag Procedure empted (*) and Noclosure empted (*) and Noclosu	d, NJ egative lon-Fria A (S	Place 07728 Pressure ble Procedi mount specify or LF)	Removal	Ту	oe T	
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Decupancy Status Durin Facility Closed/Vacate Abatement Performed Other - Describe:	ng Abatemen ed During Er d Outside of I 7am to 4p ill that apply) of Material (ACM ED	t (Check only tire Period of Normal Facility) Is Normal Facility Is Normal Facility Yes Vices, Inc.	7/8/j y one) f Abate ity Hou enovat emolitic Locatic lormally d Solel ntenan ustodia Staff? (12) No	ion on // yy by cce/ all N/A	Asbesti (i.e.,	Cubic Yards of Waste 2 CU	4 Berk code Freehold trainment with Noclosure ag Procedure empted (*) and Noclosure ag Procedure empted (*) and Noclosure empted (*) and Noclosu	d, NJ egative lon-Fria	Place 07728 Pressure ble Procedo mount specify or LF)	Remova	Ту	oe T	

CK 3409

Date of Notification (1) 06/17/2015			Name of Monm	f Building outh Re	Owner/C	perator High S	(2) School B	oard of	Educ	cation '				-	
Agencies Notified Type Notificati	on		Street A						Æ			211			4
EPA Initial Amended Amendm		_	City, Sta	ite, Zip Co Falls, N	ode				FIF.	5			2		1.
➤ DOH justification ➤ DCA Cancellati				Contact Anne Pa	arry				Tele	ephone N	li imbor				
			FACI	LITY INFO	ORMATI	ON									
Name of Facility Where Abatement is Ta Monmouth Regional High School		3)						Facility (4)							
Street Address			====					nool (K-12 ochapter 8		er than K	-12)				
One Norman J. Field Way								er (i.e. pri				ildin	gs, h	nome	es,
City (5)							Square F	eet	# of	Floors		Bldg	. Ag	je .	
Tinton Falls							90,000		2			30)	/ea	rs	
County (6) Monmouth			County (Code (7) USE ONLY)			Use (Prior High Sc		ng demo	lished)				
Name of Monitoring Firm Hired by Buildin AHERA Consultants	ng Owner (8)	ASCN 0057				of Abaten c Constr			(9)					
Street Address							Address								
PO Box 385 City, State, Zip Code							Route 46 State, Zip 0		15				1 2 7 7 7		_
Oceanville, NJ, 08231-0385						Toto	wa, NJ (
Project Manager for Monitoring Firm John Smoyer			Telephoi 609-65	ne No. 52-1833		200 May 200 Ma	none No. 339-973	5		License 01034					
Start Date (10) 06/29/2015	Schedul 08/14/		mpletion I	Date (11)	99		of OSHA c Constr		orp						
Occupancy Status During Abatement (C	neck Only O	ne)					Address		70.			1100			
Facility Closed/Vacated During Enti	re Period of	Abater	ment				Route 46		15						
Abatement Performed Outside of N Other – Describe: occupied building	from 6am to	y Hour 2:30pi	s m				State, Zip (wa, NJ (
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	-	Renova Demoli				×	Full Co	ontainmer nclosure		Negative	e Press	ure			
							Non-E	pag Proce xempted		Non-Fri	iable Pi	oceo	lure		-
	20.0	Locat										Ab	ater Typ	ment	
Location of Asbestos-Containing Material (ACM)		Norma ed Sole		Achor		scription	of Material (A	CNA)	۸۰	mount		Т	Ť		
TO BE ABATED	100 000000000	intena todial			thermal	system	s insulatio		(S	pecify	F G	١,		Enca	Enc
In Facility (13)		(12)				cing, VA niscellar			SF	or LF)	Remova	Ixeball		Encapsulate	Endosure
	Yes	No	N/A								<u>a</u>			ate	re
A602,G305,G322JC-A H-Hall H E	3/G	X		Р	ipe-Fitt	ing ins	sulation		42	20 LF	×		>	(
D500A,D502 D-Wing 504-529		X		F	loor Ti	le and	Mastic		154	70 SF	x		>	<	
Library and offices, H401, 401A	/B	Х		F	loor Ti	le and	Mastic		23	50 SF	X)	(
D500A, Library, D508,D501, 50	3	X		Р	ipe-Fitt	ing ins	sulation		46	0 LF	x		>	<	
Name of Registered Waste Hauler		100	JDEP W lauler ID		Cubic of Was		N	lame of Re	egiste	red Land	fill		2011		
Newark Carting			4509	. 10.	O. VVas	310	0	BROWS							
City, State Newark NJ						al Date /2015		ity, State Iorrisevi	ille, F	PA					
Completed by Milos Savic	Title Proje	ect Ma	anager		s	ignature	11	/	K		Date 06/17	201	5		

Date of Notification (1) 06/19/2015				f Building Ow Brigantine		tor (2	?)	20	15 14	7400				
Agencies Notified Type Notification			Street A					(1)	TE JU	14 21		111	1 - :	- 1
EPA Initial DEP Amended			1417 V	Nest Briga		е		10						.) (4
DOL Amendment #				ite, Zip Code itine NJ)				έį	ÛĔ	ų.	144	int.)L
DOH justification Cancellation	ncluding			f Contact Stevens				Teler	ohone I	Mumbo				
Cancellation				LITY INFOR	MATION				- 12 /	. 555				
Name of Facility Where Abatement is Taking	Place (3)		1 701	LITT IN OIL	MATION	T	ype of Facility	(4)						
Former Residence						F	School (K-1	12)						
Street Address 401 Sheridan Place							Subchapter Other (i.e. petc.)				uild	ings,	home	es,
City (5) Brigantine							Square Feet 75 SF	# of F	Floors			dg. A	ge	
County (6) Atlantic				Code (7) USE ONLY)		+	Current Use (Pri	or if being	g demo	olished				
Name of Monitoring Firm Hired by Building O	wner (8)		ASCM		Nan	1	Abatement Cor	ntractor /	0)					
ACER Associates	wrici (0)		7001	ii No.			zzi Environm			es				
Street Address 1012 Industrial Dr							ddress nnelon Rd							
City, State, Zip Code West Berlin							te, Zip Code on NJ 07405	i						
Project Manager for Monitoring Firm Scott Horn			Telephoi 856-80	ne No. 09-1203	1100000	*	ne No. 8-0880	1	License 01228			1		
	Scheduled 7/14/201		pletion I	Date (11)	0.000,000		OSHA Monitor zzi Environm		Group,	Inc.				
Occupancy Status During Abatement (Check	Only One)			Stre	et A	ddress						-	
Facility Closed/Vacated During Entire Pe	eriod of Ab	atem	ent				nnelon RD.							
Abatement Performed Outside of Norma Other – Describe: Condemned	I Facility I	Hours			respectively.		te, Zip Code on, NJ 0740:	5						
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	promote and the second	novat moliti				×	Full Containm Mini-Enclosure Glovebag Pro	е	Negativ	re Pres	sur	е		
				1910		×	Non-Exempte		Non-Fr	iable F	roc	edure	е	
	1000000	ocatio	5000										ment	
Location of Asbestos-Containing Material (ACM)	Used	ormall Solel		Ashastas	Descripti		f terial (ACM)	A	ount	-	Т	ı y	pe	
TO BE ABATED	Main Custo	tenan	200	(i.e. the	ermal syste	ms in	nsulation,		ecify	1 2	0	20	Enc	Ē
In Facility (13)		(12)			surfacing, \ ther miscell			SF o	or LF)		Pamova	Repair	Encapsulate	Enclosure
	Yes	No	N/A				,			2	<u> </u>	-	late	ire
Bathroom/Utility Room			х	٦	Tan wall I	Mas	tic	35	SF	x				
Bathroom/Utility Room			Х		Drywa	all		40	SF	x				
											4			
Name of Registered Waste Hauler		N.	JDEP W	aste C	Cubic Yards		Name of	Registere	ed Land	dfill				
Yannuzzi Group, Inc.		5001	auler ID 467		of Waste CY		GROW							
City, State Kinnelon NJ					Disposal Da 1/14/2015		City, Stat Morrisv							
Completed by John Mucha	Title Proiect	t Ma	nager		Signatu	ıre			100	Date 06/19	3/2	015		



Date of Notification (1) 6/19/2015					f Building C f Brigatine		perator (2)		Si	li Ju	1 21	LU	
Agencies Notified	Type Notification			Street A	ddress West Brig	gantine	Ave		Ę.	i t			
EPA DEP X DOL	Initial Amended Amendment				ate, Zip Coo ntine NJ	de				5. [4.7	
DOH DCA	Emergency justification) Cancellation				f Contact Stevens				Telephone	Numbe	г		
				FACI	ILITY INFO	RMATIC							
Name of Facility Where Former Residence	Abatement is Takir	ig Place (3)				Ту	pe of Facility (School (K-1	10.000 10.000				
Street Address 40 Heald Road							×		8 (Other than rivate & comm		uilding	s, hom	es,
City (5) Brigantine								uare Feet 300	# of Floors		Bldg 50+	Age	
County (6) Atlantic					Code (7) USE ONLY)			urrent Use (Prio esidential	or if being dem	nolished)			
Name of Monitoring Firm ACER Associataes		Owner (8)		ASCN	И No.			Abatement Cor zi Environm		ces, In	C.		
Street Address 1012 Industrial Dr							Street Add	dress nelon Rd					
City, State, Zip Code West Berlin NJ 080	91							e, Zip Code n, NJ 07405	;				
Project Manager for Mor Scott Horn	nitoring Firm			Telepho 856-80	ne No. 09-1203		Telephone	No.		se No.			
Start Date (10) 7/03/2015		Schedule 7/9/20		npletion	Date (11)			SHA Monitor zi Environm	ental Grou	o. Inc.			
Occupancy Status Durin	g Abatement (Che	k Only Or	ne)			-	Street Add						
Facility Closed/Vac Abatement Perform Other – Describe:	ed Outside of Norr	Period of A	Abatem Hours	nent			City, State	nelon Rd	•				
Scope of Work (Check A							Kinnelo	n, NJ 07405)				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	(, , , , , , , , , , , , , , , , ,	-	Renova Demolit					Full Containme Mini-Enclosure Glovebag Prod Non-Exempted	e cedure			ure	
1		10000	Locati					TVOTI EXCHIPTION	. () a.i.a i i ai	TIGOTO !	Aba	atemen Type	t
Location Asbestos-Containing <u>TO BE AB</u> In Faci (13)	Material (ACM) ATED	Use Ma Cus	d Sole intenar todial S (12)	ly by nce/ Staff?		os Conta thermal s surfaci	cription of aining Mate systems ins ing, VAT, of iscellaneou	or	Amount (Specify SF or LF)	Nemoval	Repair	Encapsulate	Enclosure
4		Yes	No	N/A							_	- 0	
1st flo				X			Compour		2,160 SF		-	-	
2nd flo	oor			X		Joint C	Compour	nd	640 SF	x		-	
91												+	
Name of Registered Was	ste Hauler		70000	JDEP W		Cubic Y		Name of	Registered La	ndfill			
Yannuzzi Group, Inc	:. -			auler ID 7467	No.	of Wast		GROW	9000				
City, State Kinnelon NJ						Disposa 7/09/2		City, State Morrisv					
Completed by John Mucha		Title Proje	ct Ma	nager		Sig	gnature			Date 6/19/	2015		

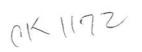


Date of Notification (1) 6/19/15					Building Brigant		Operator	(2)			8	0			
Agencies Notified	Type Notification			Street A	ddress Vest Bri	gantir	ne Ave			FE 10	14 3	4	4.7	: 5,5	
DEP X DOL	Amended Amendment				ite, Zip Co itine NJ	ode						ř 10			
DOH DCA	Emergency justification) Cancellation				f Contact Stevens					Telep	hone N	umber			
			_	FACI	LITY INFO	ORMAT	TION			1					
Name of Facility Where Former Residence		ng Place (3)						Тур	e of Facility (4	500 500					
Street Address 1307 East Shore I)r							×	School (K-12 Subchapter 8 Other (i.e. pr etc.)	(Other			ldings	s, hom	es,
City (5) Brigantine								1000	are Feet 00 sf	# of F	Floors	- 1	Bldg. 50+	Age	
County (6) Atlantic				County (Code (7) USE ONLY)			rent Use (Prio idential	r if being	g demoli	shed)			
Name of Monitoring Fir ACER Associatae:		Owner (8)		ASCN	/ No.				atement Cont i Environme			s, Inc			
Street Address 1012 Industrial Dr							Street 135		ess elon Rd						
City, State, Zip Code West Berlin NJ 08	3091								Zip Code , NJ 07405						
Project Manager for Mo Scott Horn	onitoring Firm			Telepho 856-80	ne No. 09-1203		Telepi 908-		No. 0880	11/2	License	No.			
Start Date (10) 6/29/15		Scheduled 7/2/5	Cor	npletion	Date (11)		1.377300000		SHA Monitor i Environme			Inc			
Occupancy Status Duri	ng Abatement (Che	ck Only One)				Street			Jinai o	, roup,				
☐ Facility Closed/Va	cated During Entire	Period of Ab	aten	nent			135	Kinn	elon Rd.		u		<u> </u>		
X Other – Describe:		nai Facility F	iours	5					Zip Code , NJ 07405						
Scope of Work (Check	All That Apply)						12	ล _				_			
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf		-	nova molit	ation tion				M G	ull Containme lini-Enclosure llovebag Proce on-Exempted	edure					
		ls L	ocat	ion			fea		on Exempted	() and i	TROTT-1 TIE	DIC 1 1	Aba	temen	t
Locatio		No Used	rma Sole				escription			40.0000			T -	уре	Т
Asbestos-Containin TO BE Al In Fac (13	BATED	Main Custo	tena dial S (12)	nce/ Staff?		therma surfa	ntaining Nal system acing, VA miscellar	s insu T, or		(Sp	ount ecify or LF)	Removal	Repair	Encapsulate	Enclosure
F		Yes	No	N/A								-	-	1	-
κ First F	loor			X	Di	ywall	joint co	mpo	und	94	5 sf	х	-		
N- CD			_												
Name of Registered Wa Yannuzzi Group, In			H	IJDEP W lauler ID 7467		of Wa			Name of R	50	ed Landf	ill			
City, State Kinnelon NJ			1.			1	osal Date		City, State Morrisvil		!				
Completed by John Mucha		Title Project	Ma	anager		10000 2000	Signature	9		-, -, -,		ate 5/19/1	5	888	

1 I I I I O I I I

CK 2829 RECEIVED

Date of Notification	25 20		N	lame	of Buil	ding C	wner / Operato	or (2)		2815 11	IN OI	61.				
Agencies Notified	6/19/15	ation	3	Souti	n Hunt	erdo	n Regional S	chool	Distric	feels of	四 24	AM	1: :	16		1
EPA	Type Notifica	auon	93		Addres		rbourton Roa	ad		A						
□ DEP	☐ Initia				State &			au		<u> </u>	1 1 5 5	1.14	Thi	11		
□ DOL	Amer						08530			在!	-ICEN	SHAC)	-		
□ DOH		gency			of Con		00330	-				eleph			mhe	or
☐ DCA		ellation	99		Sevil						la la la	siepii	OHIC	3(21
			<u>. I</u>				ORMATION								_	-
Name of Facility Wh	nere Ahatem	ant is Taking DI	200 /3		JILII I	INFC	Type of Facil	lity / / / \	-			-				
South Hunterdor			ace (5)			School (NON SII	R_CHAD	TED 0					
Street Address	ritogionar	110					Subchap				LICO					
301 Mt Airy - Hai	rhourton Re	ad					Other (i.e.				huilding	e hor	mac	oto	. 1	
oo i merary	bourton ix	Jau					Square Feet		# of Flo			dg. A		, 610)	
City (5)		County (6)	Col	inty (Code (7	1	_		# 01 1 10	4	DIG	ıy. A				
Lambertville			000	arity C	700e (1	,	40000		f balas s	J Innasiint			61)+		
Lambertville		Hunterdon					Current Use	(PHOI	i being d	iemolisne	ea)					
Name of Monitorina	Firm Hirad b	Duilding O	(0)		TAGON	4 N.L.	School		10 1	. (0)						
Name of Monitoring RJB Environmen		y Bullaing Own	ier (8)		ASC	/I No.	Name of Aba									
Street Address	itai						Street Addres		ientai, i	nc.						
56 East Bridge S	treet						1123 Beave	53.5%	204							
City, State & Zip Co				/T1-117			City, State &								_	
Morrisville, PA 19							Bristol, PA									
Project Manager for		irm	Teleni	hone	Numbe	or .	Telephone N			Lic	ense Nu	mhor	_			
Richard Beach	g.		267-9				(215)788-60			100000	509	HIDEI				
Scheduled Start Da	te (10)	Scheduled Con	npletio	n Dat	e (11)		Name of OSH		nitor							
7/1/15			7/3/	15			Bristol Env	ironn	nental Ir	ic.						
Occupancy Status [Street Addres	SS								
		During Entire P					1123 Beave		-							
Abatement I	Performed Or	utside of Norma	al Hou	irs – 7	7am to	3pm	City, State &									
	7am to 3pm						Bristol, PA	19007	7							
Scope of Work (Che	upied During				575-7-19											
ccope of work (che	on all triat ap	(Piy)							Full Cor	ntainmen	t with Ne	nativ	a Pr	200	ıre	
≥3 sf or ≥3 l	f		\boxtimes	Ren	ovation			H	Mini-En			guar		000	410	
≥160 sf ≥26	O If		Ħ		nolition			H		ag Proce	edures					
_								X		empted a		Friabl	e P	roce	dur	re.
Lo	cation of		ls L	ocati	on		Description	n of		Am						
	os-Containin	g	Norm				Asbestos-Con	taining	1		ecify		T	7		
	erial (ACM)			lely b			Material (A			SF	or LF)	1 -			m	Ш
	BE ABATED r Facility		Mainte				(i.e., thermal s					\en		D	cap	nck
11	(13)		Custo	(12)	stair?		sulation, surfactor other miscella					Remova	1	nair.	Encapsulate	Enclsoure
	()			No	N/A		or other miscen	aricou	3)			-			ate	G
Locker Rooms						-	Wrap & Cut F	itting	9		50		+	1/	7	П
			Ħ		Ħ		watap a out i	itting	3	`	70		+	╬	#	片
			H	Ħ	H							뮴	+	1+	╡┼	片
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			H	H	H							ዙ	╁┾	╬	┽	H
			H	H	H							井	lþ	╬	╡┼	井
Name of Registered	Waste Haule	er		NJI	DEP W	aste (Cubic Yards	Name	e of Regi	stered La	andfill		1			ш
				1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	uler ID	100000000000000000000000000000000000000	of Waste	rtarri	o or recgi	Stored L	ariann					
Service Transpor	t Inc.				990		10	GRO	WS Lan	dfill						
City, State						[Disposal Date	City,	State							
New Castle, DE						7	7/3/2015		isville l	PA						
Completed By (Print				Title		5	Signaturę /	/)	0.00			Date				
Gino Pizzigoni	i				oject		91. /	/	, .			7/3/	15			
				Ma	nager		Lyting 12	XII	,							



Date of Notification (1) 06/19/2015					of Building of Brigant		/Operator	(2)				e 14.,	. 12			
Agencies Notified	Type Notification				Address West Br	gantii	ne Ave			2615	JUK	24	Al	1:	56	
EPA DEP DOL	Initial Amended Amendmen				ate, Zip Contine NJ	ode				400		to de	76 P	=7	OL.	
DOH DCA	Emergency justification) Cancellation				of Contact Stevens						ephone		oer i	100		
	- Sanconator				ILITY INF	JEMA.	TION									
Name of Facility Where Former Residence	Abatement is Takir	ng Place (3)	-,147,250	1 40	ILIT I INC.	JUNIA	ITON	Тур	e of Facility (
Street Address 103 North 12th Stre	eet							×	Subchapter Other (i.e. p	8 (Oth				dings,	hom	es,
City (5) Brigantine									are Feet 70 sf	# o	f Floors			ldg. A	ge	
County (6) Atlantic					Code (7) USE ONLY				rent Use (Prio	or if bei	ng dem	olishe	d)			
Name of Monitoring Firm ACER Associataes		Owner (8)		ASCI	M No.				oatement Cor i Environm			ces,	nc.			
Street Address 1012 Industrial Dr							Street 135 I		ess elon Rd							
City, State, Zip Code West Berlin NJ 080	91								Zip Code , NJ 07405	5						
Project Manager for Mor Scott Horn	nitoring Firm			Telepho	one No. 09-1203		Teleph 908-2		No. -0880		Licens 0122		000	722-732-		-
Start Date (10) 7/9/2015		Scheduled 0713/20		pletion	Date (11)		Name	of OS	SHA Monitor i Environm	ental	/					
Occupancy Status Durin	g Abatement (Che			-			Street		- 1. 32/m. No. 1882 - No. 1810	Ornical	Oroup	, 1110	•			
☐ Facility Closed/Vac	V250 V	-		ont.					elon Rd.							
Abatement Perform	ned Outside of Norr	nal Facility h	Hours	lent			City, S	tate,	Zip Code							
Other – Describe:	Condemned	***************************************				_	Kinn	elon	, NJ 07405	5						
Scope of Work (Check A	II That Apply)							=0								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	nova moliti				×	M G	ull Containme lini-Enclosure lovebag Prod lon-Exempted	edure					2	
		le l	ocati	on			_	- 10	ON Exemples	/ / arm	3 14011-1	Habit		Abate		
Location	n of	No	rmall	У		D	escription	of						Ту	ре	
Asbestos-Containing TO BE AB In Facil (13)	ATED	Used Main Custo	tenar	nce/		tos Cor therma surfa	ntaining M al systems acing, VA miscellan	lateri s insu T, or	ulation,	(S	mount Specify or LF)		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A									=		ate	ė
Exteri	or			Х		Gray T	ransite	Sidi	ng	1,2	00 SF		x			
1st Floor/Livi	ng Room			х	Tan9"X	9" Flo	or Tile(Bott	om Lay	30	00 SF		ĸ			
1sy Floor/Middl	e Bedroom			Х	Tan 9">	(9"Flo	or Tile(Bott	om Lay	12	0 SF		ĸ			
1st Floor/K	litchen			Х	Tan 9">	(9"Flo	or tile (l	Botte	om Laye	15	0 SF		K			
Name of Registered Was	ste Hauler	-		JDEP W		11.100.000.000.000	c Yards		Name of F	Registe	red Lar	ndfill				
Yannuzzi Group, Inc				auler ID 7467	No.	of Wa	Υ		GROW							
City, State Kinnelon NJ							osal Date 3/2015		City, State Morrisvi		4					
Completed by John Mucha		Title Project	t Ma	nager			Signature					Date 06/		015		

State of NJ Notification of Asbestos Abatement

B & G proj. #: 2015-117

(Pursuant to NJAC 8:60-7 and 12:120-7)

р. од			엉						Check	#7272	-			_
Date of Notification	J/1 <u>1 5</u>		-		7.	er/Operator (2) of Education			Win July 2	4 4	1.	~ >		
Agencies Notified EPA DEP	Type Notification			Elm St		N			4.55 4.7183					
☑ DOL	Amen	dment	1000000	ate, Zip stfield	Code					11-11-11	i.			
☑ DOH	Cance	llation	Name o			usiness Adr	nin.		Telephon	e Numbe	Г			
			-		FAC	ILITY INFORM	ATIO	N						
Name of facility who			AT 5005	Ž.					=	(K - 12)		L 1/	40)	
Street Address 641 Willow Gr	ove Road					•			Other (Bldgs./	apter 8 (C Private/C Homes, e	omme etc.	ercial	-351	
City (5)		C	ounty (6)					unty Code (7)		# of Floo	3000		dg. A	.ge
Westfield			nion	IE.		7.	(51	ate use only)	Current Use (P	rior if bein	ig den	nolish	ed)	
Name of Monitoring Enviro Vision	-		vner (8)			ASCM No. 0079		Name of Abatement of B & G Restoration	2.5					
Street Address 20-21 Wagara								Street Address 105 Ryerson Roa	d					
City, State, Zip Code Fair Lawn, NJ								City, State, Zip Code Lincoln Park, NJ	07035					
Project Manager for	Monitoring Fir	m	-3	Phone	e Numb	er	-	Telephone Number	07033	License	Numb	per		
Guillermo Mora	les			973-6	36-91	145		973-696-6869		0378				
Scheduled Start Dat	te (10)	Sch	ned. Com	pletion [Date (11	1)		Name of OSHA Monit						
07/06/2015			07/10/2	015				Street Address	m, me.		-			
Occupancy Status D								105 Ryerson Roa	ıd				-	
Facility closed Abatement pe Describe:					nt.			City, State, Zip Code						
Other-Describ	e:						-	Lincoln Park, NJ	07035				100000	
Scope of Work (che	eck all that app						_			wrap				
☐ Demolition	V	Renova	ation					Full Containment w/neg	ative pressure	Glovel				
✓ > <u>3</u> sf or > <u>3</u> If			or <u>≥</u> 260 l			,	Ш	Mini-enclosure	L	Non-fi				
Location of asbestos-cont material to be abated in facil			tion norm ntenance 2) N	/custodi		1		asbestos-containing	Amount (Specify S LF)	For	e m o v	R e p a :	Enca	E n c L
5 : 5		1	1		IN/A	nine elbow	e io	ints insulation	00.15		е	-	р	
Boiler Room Boiler Room		X	4			breeching i			90 If 40 saft		V	片	H	ዙ
Boller Noolli		X	+	-		Di ccoming i	iiioui	dion	40 3911		V	H	Ħ	ਜ
		1	1					TANKS OF THE PARTY						1
									- 4					
Registered Waste Ha B & G Restoratio			JDEP Hai 9563			ubic Yards of V 4 yards	Vaste	Name of Registered Tullytown Resou		Center				
City, State Lincoln Park, NJ	I 07035			Dis	posal D 07/0	ate 7-10/2015		City, State Tullytown, PA						
Completed by (Print		Title				Signature		Gordana Luna		Date	100			
Gordana Luna		Secret	ary/Trea	surer				Zerawna Lund		06/18	1201)		

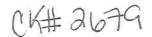
State of NJ Notification of Asbestos Abatement (Pursuant to NJAC 8:60-7 and 12:120-7)

B & G proj. #: 2015-116

*** F M F R G F N C Y ***

Check #7263

					LIVILK	GL	IN C I		77200						
Date of Notification (1)	111	Name of Building Owner/Operator (2)													
0 6 / 1 5 / 1															
	e Notification	on S	Street Address 1106 Old White Horse Pike N												
LI EPA	Initial		1106 Old White Horse Pike N												
L DEP			City, State, Zip Code												
☑ DOL □	Amendm	nent	Waterfor	d, NJ 0	3089	& LICENSING ROL									
☑ DOH		N	ame of Cont	act			Telephone Number								
□ DCA □	Administrator		33												
				FAC	LITY INFORMA	ATIO	N				- 1				
Name of facility where all	patement is	taking pla	ace (3)			70=		Type of Facility (4			-				
Atco Elementary S	chool-SL	JB 8							(K - 12)	ther f	nan K	.12\			
Street Address					Subchapter 8 (Other than K-1 Other (Private/Commercial										
2162 Cooper Road	d							Bldgs./l	Homes, e	tc.	**********	dg. A	ne .		
City (5)		Cou	nty (6)		1	Co	unty Code (7)	Square reet	# UI F1001	5		ug. A	ge		
Waterford							ate use only)	Current Use (Prior if being demolished)							
Name of Monitoring Firm	Hired by B	ldg. Own	er (8)	ASCM No.		Name of Abatement Co	ntractor (9)								
AHERA CONSULT		2.T	0.5000		0057		B & G Restoration, Inc.								
Street Address			10.00	=	Street Address										
P.O. Box 385					105 Ryerson Road										
City, State, Zip Code	C794.50. DC20000.20000		_	City, State, Zip Code											
Oceanville, NJ 082	arran Santanina		10	Lincoln Park, NJ 07035											
Project Manager for Monitoring Firm Phone Number							Telephone Number								
John Smoyer 609-652-1833							973-090-0809 0378 Name of OSHA Monitor								
Scheduled Start Date (10)		Sched	l. Completion	Date (1)		B & G Restoration								
06/19/2015	105	06	/26/2015				Street Address	, IIIO.							
Occupancy Status During	Abatement	(Check o	only one)				105 Ryerson Road						20		
Facility closed/vaca				City, State, Zip Code											
Abatement performed Describe: 0/19/15	facility hours	i.mა:ა	up.m.												
Other-Describe:						-	Lincoln Park, NJ 0	7035			-				
Scope of Work (check al	that apply								wrap	& cu	t				
Demolition	\checkmark	Renovation	n			\checkmark	Full Containment w/negat	ive pressure	Glove	ag pr	oced	edure			
$\sqrt{} > \underline{3} \text{ sf or } > \underline{3} \text{ If}$	□ ≥	160 sf or	≥260 If				Mini-enclosure		Non-fr	iable	огосе	dure			
Location of			n normally u		1					R	R	E	E		
asbestos-containing material to be	7	staff(12)	enance/custo	odiai			asbestos-containing	Amount (Specify SF or		m	p	n	n		
abated in facility (13	3)	Yes			material (ACM		l)	LF)		0	a	a	L		
			,,,,		Boiler rib packi		na	EO aaft		e	<u></u>	П			
Boiler Room Boiler Room		X			Boiler door			50 sqft 20 sqft			늠	H	H		
Boiler Room		X					skets, & bricks	40 sqft	Z			Ħ	Ħ		
Boller Room						, 94	onoto, a priono	TO SQIE				Ħ	Ħ		
						-				Ħ	Ħ	Ħ			
Registered Waste Hauler		NJDI	EP Hauler ID	# C	ubic Yards of V	Vaste	Name of Registered La	indfill							
B & G Restoration, In-	c	195	563		7 yards		Tullytown Resourc	e & Recovery	Center		-	*			
City, State Lincoln Park, NJ 070	35			isposal D 06/2	ate 2-26/2015		City, State Tullytown, PA								
Completed by (Print or Type) Title					Signature		Date								
Gordana Luna Secretary/Treasurer					Gordana Luna 06/15/2015										



Date of Notification (1) 6/22/15	1777.25	Name of Building Owner/Operator (2) 254 LLC																
Agencies Notified		Street Address 254 Jimmy Leeds Rd							EEE JULY 24 AV 24 AG									
X EPA	× Initial					1		<u> </u>										
× DEP × DOL	Amended Amendment		1	City, State, Zip Code Galloway Township, New J					Jersey				frenet is but I					
NOH	Emergency (justification)	including	Name of Contact							Telephone Number								
DCA	Cancellation	E	Betty				C00 00221/02											
Name of Facility Where A		FACI	LITY INFO	RMATI	ON	Type of Facility (4)												
254 LLC Property							School (K-12											
Street Address							Subchapter 8				linas	home	20					
254 Jimmy Leeds F	Rd							etc.)	er (i.e. private & commercial buildings, homes,									
City (5) Galloway									re Feet	# of FI	oors		ldg. A 5+	.ge				
County (6)				County Code (7)					ent Use (Prior	if being	demolish			-				
Atlantic			(5	(STATE USE ONLY)					residence									
Name of Monitoring Firm	Hired by Building (Owner (8)		ASCN	No.			lame of Abatement Contractor (9)										
Street Address								Insulation Co., Inc.										
							95 M	Montrose Road										
City, State, Zip Code							5500	State, Zip Code										
De le Meser fa Mas	Made - Fine		1 =	-15	na Nia		Colts Neck, N.J. 07722											
Project Manager for Mon	1	Telephone No.			Telephone No. License No. 732-294-1757 00029													
Start Date (10) 7/1/15	Comp	ompletion Date (11) Nam				e of OSHA Monitor												
Occupancy Status During		Stree					et Address											
Facility Closed/Vaca										A V E								
Abatement Perform Other – Describe: 7	ours				City, S	tate, Z	ip Code											
Scope of Work (Check A																		
23 sf or ≥3 lf	novatio	vation					Full Containment with Negative Pressure											
× ≥160 sf or ≥260 lf	nolitio	plition					Mini-Enclosure Glovebag Procedure											
					×	Non-Exempted (*) and Non-Friable P					2007 297 179							
	ocatio									Abatement Type								
Location Asbestos-Containing	rmally Solely	by	Asbest		Description of Containing Material (ACM) ermal systems insulation, surfacing, VAT, or			Amount (Specify										
TO BE ABA	enanc			thermal						Rei	R	inca	Enc					
In Facili (13)	12)				niscellar		SF or LF)		(LF)	Remova	Repair	Encapsulate	Enclosure					
		Yes	No	N/A								=		ate	œ			
outside				х	sidin			g		1700sf		x						
														,				
	46)																	
Name of Registered Waste Hauler					aste No.	Cubic of Was		Service of the Foundation of the Control of the Con										
Ace Insulation Co., I	37 V200.00	086	110.	3	0.0	Chrins												
City, State Colts Neck, New Jer					sal Date		City, State											
Contis Neck, New Jer		7/6/15 Signature				Easton,, PA												
Bree McGuire	ary T	y Treasurer R					6/22/15											

CHECK # 8573

												_				
Date of Notification (1) 06 / 17 / 15					10000		ng Owner/Operator (wn Public Schoo	(2) ols	13124 (1	2.	- 2					
Agencies Notified Type Notification ⊠ EPA					Street Address 315 Washington Street											
□ DOLWD	☐ Amende				City,	State, Zip	Code									
⊠ DHSS	Amendr			-	На	ckettsto	wn, NJ 07840									
□ DCA (NJAC 5:23-8)	☐ Emerge justifica		Ciuain	g	Name	e of Conta	ct	Telephone Num	ber							
(1.101.10 0.120 0)	ation			Mr	. John B	owker	500-0									
					FΔ	CILITY	NFORMATION									
Name of Facility Where	Ahatement is	Taking	Place	e (3)		OILIT I	TI OTTIVITOTI	Type of Facility	(4)							
Name of Facility Where Abatement is Taking Place (3) Hatchery Hill Elementary School								School (K-12)								
Street Address							Subchapter 8	Other than K-12		11.45.						
389 5th Avenue									Other (i.e., private and commercial buildings, homes, etc.)							
City (5)	0.5							Square Feet	В	Bldg. Age						
Hackettstown								80,000 SF	1		40+					
County (6)					Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demoli	shed)						
Warren							V. 4504									
Name of Monitoring Firm	Hired by Bui	ilding O	wner	(8)	ASCM	No.	Name of Abatement Contractor (9)									
Westchester Enviro				2000	002	7	East Coast Haz Mat Removal, Inc.									
Street Address							Street Address	200000000000000000000000000000000000000								
307 N. Wanut Street							494 E. 41 Stre	reet								
City, State, Zip Code							City, State, Zip Co	ode								
West Chester, PA 1						Paterson, NJ	J 07504									
Project Manager for Mon	William Control of the Control of th			Tel	ephone	No.	Telephone No.		License No.	License No.						
Paul F. McCaa			6	10-431	7545	973-345-0022		00507								
Start Date (10)		Schedu	uled C	omple	etion Da	ite (11)	Name of OSHA Monitor									
07 /06 /	0	7_ /	_ 2)_/	15	East Coast Ha	az Mat Remova	al, Inc.								
Occupancy Status During Abatement (Check only one)							Street Address			-						
Facility Closed/Vacated During Entire Period of Abaten							494 E. 41 Stre	eet								
Abatement Performed Outside of Normal Facility Hours					rs - Des		City, State, Zip Co	ode								
Time of Abatement: 7:00AM-4:00PM/PM							Paterson, NJ	07504								
Scope of Work (Check al	I that apply)							97. 97. 97.1 (1).	(1980 VIII)							
□ ≥3 sf or ≥3 lf ⊠ Renovation ⊠ ≥160 sf or ≥260 lf □ Demolition							ative Pressure									
						1	☐ Non-Exer	ripled () and Nor	-Friable Procedu	Abatement Type						
Landina				Loca Norma			Description of				-	1				
Location Asbestos-Containing	(5.0)	/I)	Use	d Sol	ely by	Asbe	stos Containing Mat	#1.00.000 te30.600 ftc.0	Amount	Remova	Repair	Encapsulate	Enclosure			
TO BE ABA	TED		11/2/2027	intena	ince/ Staff?	(i.e	thermal systems in		(Specify SF or LF)	1000	ar.	apsı	uso			
IN Facility (13)				(12)	Otali.		surfacing, VAT, other miscellaned		SF OI LF)	=		ulate	ē			
(13)				No	N/A							Ψ				
Halls & Rooms						Ceiling	Tiles		17,202 SF							
Library					VAT/Ma	stic		1,978 SF								
Parameter Company (1)																
=																
Name of Registered Wast	e Hauler			N	JDEP V	Vaste	Cubic Yards of	Name of Regist	ered Landfill							
Freehold Cartage				H	auler II 13206		Waste 100	GROWS, In	с.							
City, State							Disposal Date	City, State								
Freehold, NJ 07728							07-17-2015	Morrisville,	PA 12506							
Completed By (Print or Ty	pe)	Title					Signature	01.11	Da	220						
Leslie Olszewski		Pro	oject	Man	ager		IMA	/ MAKAN/	6	06-	17-	20	15			