CK 60282 State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) Date of Notification (1) 22 Pennsville School District 06 16 Agencies Notified Type Notification Street Address **⊠** EPA 30 Church Street □ DOLWD ☐ Amended ASBESTO City, State, Zip Code CONTROL & **⊠** DHSS Amendment #_ Pennsville, NJ 08070 Emergency (including DCA Name of Contact Telephone N nber justification) (NJAC 5:23-8) □ Cancellation Mike Simpkins FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12)Subchapter 8 PENNSVILLE HIGH SCHOOL Subchapter 8 (Other than K 2) Street Address Other (i.e., private and comi ercial buildings, 110 S BROADWAY homes, etc.) City (5) Square Feet # of Floors Bldg. Age 50+ **PENNSVILLE** >50,000 County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being dem lished) SCHOOL SALEM Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. DELTA/BJDS, INC PENNONI ASSOCIATES INC 102 Street Address Street Address 1345 INDUSTRIAL BLVD 515 GROVE STREET SUITE 1B City, State, Zip Code City, State, Zip Code SOUTHAMPTON PA HADDON HEIGHTS, NJ 08035 Project Manager for Monitoring Firm Telephone No. Telephone No. License No 215 322-2900 00783 **BRYAN CLARK** 856 656-2944

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Start Date (10)	Scheduled C	omple	etion Da	te (11)	Name of OSHA Mo	onitor						
06 /25 /16	07/	_ 3	0_/_	16	CRITERION L	ABS						
Occupancy Status During Abatement (Check only	one)			Street Address							
☐ Facility Closed/Vacated During Enti	re Period of	Abate	ement		3370 PROGRE	ESS AVE						
Abatement Performed Outside of No	ormal Facilit	y Hou	ırs - Des	cribe	City, State, Zip Co	de		-				
Time of Abatement: 7AMPN	и/ <u>11</u> РМ	A	M		BENSALEM P							
Scope of Work (Check all that apply)												
≥3 sf or ≥3 lf≥160 sf or ≥260 lf	- American	enova emoliti			☐ Mini-Encl			lure				
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Location of Asbestos-Containing Material (ACM <u>TO BE ABATED</u> IN Facility (13)	1) Use Ma	ainten	lely by ance/ Staff?		Description of estos Containing Mat a., thermal systems in surfacing, VAT, other miscellaneo	terial (ACM) nsulation, or	Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure
()	Yes	No	N/A								· O	
BATHROOM (10 LOCATIONS)		\boxtimes		PIPE IN	ISULATION		200 LF		\boxtimes			
									\boxtimes			
Name of Registered Waste Hauler NJD8				Waste O No.	Cubic Yards of Waste	Name of Regi	stered Landfill					
City, State					Disposal Date	City, State						
58 PYLES LANE, NEW CASTLE	E DE. 1972	20				WAYNESE	BURG, OH 44	88				
Completed By (Print or Type) MICHAEL PARSON	Title PROJE	CT N	MGR.		Signature	al Pars	ć n	Date		2-2	0/4	6

ASB-41 MAY 11

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

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FAX No. 215-332-1616

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	22	/16		l'	Pennsvill	ding Owner/Operat	or (2)	الأحال	IN	4	201	6
Agencies Notified EPA		tification		8	treat Addres	22			V	=		
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Ø DCA	⊠ Emer	nency (in		L	Pennsylle	, NJ 08070	L		IOL	101	10	_
(NJAC 5:23-8)	☐ Canc	ication)		N	ame of Cont			Telephone N	umbe	_		_
	Caric	eliation			Mike Simp			1				
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Streat Address	BUHUU	L					50 School (K-1	٥١				
110 8 BROADWAY							Subchapter	8 (Other than K. Mivate and comm	12)			
City (5)							homes, etc.)	nerois	Dulld	ings.	
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SALEM					ounty Code	(7)(STATE USE ONLY	Current Use (Pr	for if baing demo	ollshe	-	_	_
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PENNONI ASSOCIA	TES INC		ma to	4 (1000)	DIVI NO. 02	Name of Abater	neni Contractor (8)					_
Street Address					92	DELTA/BJD	e, inc					
515 GROVE STREET	T SUITE 1	18				Street Address						_
Cily, State, Zip Code							STRIAL BLYD					
HADDON HEIGHTS,	NJ 0803	5				City, State, Zip C						_
roject Manager for Monit	oring Firm			Telepho	na Na	Telephone No.	TON PA					
BRYAN CLARK					68-2944	215 322-290	•	License No.			15	
Start Date (10)		Schedul	ed Con		Date (11)	Name of OSHA		00783				
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CK 60284 State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) 06 22 16 SOUTH JERSEY LEGAL SERVICES 1 2 4 2016 Agencies Notified Type Notification Street Address **⊠** EPA 745 MARKET STREET ASBEST S CONTROL & ☑ DOLWD ☐ Amended City, State, Zip Code **ENSING ⊠** DHSS Amendment # CAMDEN NJ 08102 □ DCA ☐ Emergency (including) Name of Contact Telephone N mber (NJAC 5:23-8) justification) □ Cancellation **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) SOUTH JERSEY LEGAL SERVICES CAMDEN COUNTY OFFICE School (K-12) Subchapter 8 (Other than K |2) Street Address Other (i.e., private and comercial buildings, 745 MARKET STREET homes, etc.) City (5) Square Feet # of Floors Bldg. Age CAMDEN >25,000 3 50 County Code (7)(STATE USE ONLY) | Current Use (Prior if being den lished) County (6) CAMDEN Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) VERTEX DELTA/BJDS. INC Street Address Street Address 700 TURNER WAY SUITE 1345 INDUSTRIAL BLVD City, State, Zip Code City, State, Zip Code **ASTON, PA 19014** SOUTHAMPTON PA Project Manager for Monitoring Firm Telephone No. Telephone No. License No DON HEIM 610 558-8902 215 322-2900 00783 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 07 / 06 / 16 08 / 08 / 16 CRITERION LABS Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 3370 PROGRESS AVE Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: _____AM-4PM/____PM-7AM BENSALEM PA 19020 Scope of Work (Check all that apply) □ Full Containment with Negative Pressure ≥3 sf or ≥3 lf
 ≥160 sf or ≥260 lf ☐ Mini-Enclosure ☐ Glovebag Procedure □ Renovation Demolition ■ Non-Exempted (*) and Non-Friable Proce Ture Is Location Abatement Type Normally Location of Description of Repair Remova Encapsulate Used Solely by 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 3rd Floor Mechanical Room П \boxtimes X PIPE INSULATION 145 LF П X П П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste SERVICE TRANSPORT MINERVA LANDFILL 20990 City, State Disposal Date City, State 58 PYLES LANE, NEW CASTLE DE. 19720 WAYNESBURG, OH 44 38 Completed By (Print or Type) Title Signature)ate JAMES LAVELLE PROJECT MGR.

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

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ASB-41 MAY 11

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 21 / 16 Point Pleasant Beach School District / Job #1606-5022 Agencies Notified Type Notification **⊠** EPA 299 Cooks Lane S CONTROL & □ DOLWD ☐ Amended City, State, Zip Code ENSING □ DHSS Amendment #_ Point Pleasant Beach, NJ 08742 DCA ☐ Emergency (including (NJAC 5:23-8) Name of Contact Telephone Nu iber justification) ☐ Cancellation Mark McNamara **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) G. Harold Antrim School School (K-12) ☐ Subchapter 8 (Other than K- 2) Street Address Other (i.e., private and comn rcial buildings, 401 Niblick Street homes, etc.) City (5) Square Feet # of Floors Bldg. Age Point Pleasant Beach, NJ 08742 County (6) County Code (7)(STATE USE ONLY) | Current Use (Prior if being demosphere) Ocean School Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) RJB Environmental, Inc. 00149 AbateTech, Inc. Street Address Street Address 56 East Bridge Street 30 Maple Ave. PO Box 25 City, State, Zip Code City, State, Zip Code Morrisville, PA 19067 Lumberton, NJ 08048 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Richard Beach 267-991-9212 609-265-2107 00529 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor __7__ / __5__ / __16__ __7__ / __8__ / __16 **EMSL** Analytical Occupancy Status During Abatement (Check only one) Street Address ☑ Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____ AM-_ PM/ PM- AM Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure Mini-Enclosure $\boxtimes \ge 3$ sf or ≥ 3 lf □ Renovation ≥160 sf or ≥260 If □ Demolition ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procecure Is Location Abatement Type Normally Location of Description of Repair Enclosure Remova Used Solely by 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 X (2) Team Rooms **Fittings** 45 total П П П П NJDEP Waste Name of Registered Waste Hauler Cubic Yards of Name of Registered Landfill

Hauler ID No. Waste AbateTech, Inc. G.R.O.W.S. Landfill 18750 20 City, State Disposal Date City, State Lumberton, NJ 7/8/16 Tullytown, PA Completed By (Print or Type) Title Signature

Gwendolyn Trumbetti

Operations Coordinator

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

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Date of Notification (1)				Т	Name	of Building	Owner/Operator (2)				-		-11-
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Agencies Notified	Type Notificati	ion		+	Street	Address	1 - 1		i J	4	2.4	201	b	
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(110/10 0.20 0)	☐ Cancellatio				Bria	n Keesh	an		4					
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Name of Facility Where A	Abatement is Ta	king Pla	ice (3	3)	1710) I I I I I I I I I I I I I I I I I I I	· Ortination	Type of Facility	(4)	-			EHI	
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Street Address								Subchapter	8 (Other than F					
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City (5)	•							Square Feet	# of Floors	ART C	Blo	dg. Ag	ie .	
West Long Branch	NJ 07764							oqua.o. so.	1 3 1 1 3 1 1			3		
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Monmouth					School						/			
Name of Monitoring Firm Hired by Building Owner (8					ASCM No. Name of Abatement Contractor (9)									
TTI Environmental					ASCM No. Name of Abatement Contractor (9) 0026 AbateTech, Inc.									
TTI Environmental Street Address							Street Address	(1195)		-				
1253 North Church					30 Maple Ave	e. PO Box 25								
City, State, Zip Code							City, State, Zip C			-				7.077
Moorestown, NJ 08	8057						Lumberton, I							
Project Manager for Mon			-	Teler	ohone l	No.	Telephone No:	7.11	License No	0.5				
James Guilardi					6-840		609-265-2107	7	00529					
Start Date (10)	Sc	cheduled	d Con		Service of the service of	Seneralis.	Name of OSHA N	Monitor		35 6				
7 / 5 /		_ 7		350			EMSL Analyt	ical						
Occupancy Status During	a Abatement (Cl	heck on	ly one	e)			Street Address							
☐ Facility Closed/Vacate					nent		200 Route 13	0 North						
Abatement Performed						cribe	City, State, Zip C	ode	<u> </u>	1				
Time of Abatement: _	AM	_PM/_		PM-		AM	Cinnaminsor							
Scope of Work (Check a	I that apply)		-				_			3				
☐ >3 sf or >3 lf			Reno	watio	20		☐ Full Con ☐ Mini-End	tainment with No	egative Pressur					
≥3 \$1 61 ≥3 11 ≥160 sf or ≥260 lf			Dem					g Procedure						
							☐ Non-Exe	empted (*) and N	on-Friable Proc	dure	9			
				ocati rmal							Ab	atem	ent T	уре
Location Asbestos-Containing		l			ly by	Ashe	Description of stos Containing Ma		Amount		Re	Re	En	En
TO BE ABA			Maint	tenar	nce/		., thermal systems		(Specify		Remova	Repair	cap	Enclosure
IN Facil	ity			dial 8 (12)	Staff?		surfacing, VAT other miscellane		SF or LF		al		Encapsulate	ure
(13)		Ye		No	N/A	1	Other miscenane	sous)					e e	
See Attached Scope	of Work		Г	7	П	SEE AT	TACHED		SEE	-		П	П	П
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			l L							Q-	Ш	Ш	Ш	Ш
Name of Registered Was	ste Hauler			10000	JDEP \		Cubic Yards of	Name of Reg	istered Landfill					17
AbateTech, Inc.				H	auler II 18750		Waste 40	G.R.O.W.	S. Landfill					
City, State					10100		Disposal Date	City, State		-				
Lumberton, NJ							7/29/16	Tullytown	ı, PA					
Completed By (Print or T	vpe)	Title					Signature	1.1		Dat	e,	j	-	
Gwendolyn Trumbe	A. 60 (96)		atio	ns C	Coord	inator	Con	M		10	1 2	111	6	
ASB-41		- 1					1 0			-	10-	11	_	
MAY 11		* Do I	not u	se th	is form	for asbes	tos licensure exem _i	pted activities.						

Frank Antonides Elementary School TTI Project Number 16-556 June 16, 2016 Page 5 of 43

JUN 2 4 2016

As part of the abatement work, remove and dispose of the following asbestos-comaterials from the Frank Antonides Elementary School.

ASBEST

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taining
IS CONTROL 8
ENSING

Location	Material	Estimated Quantities	Removal Method	11
	Pipe Fitting Insulation	60 fittings*		-
	Boiler Breeching	400 sf*	Full Containment	
Boiler Room	Pipe Insulation	300 lf*	Removal Per NJA	100
	Tank Insulation	400 sf*	5:23-8.19 Occupie	
Crawlspace	Pipe Insulation	1,100 lf*	Building Conditi	
	Pipe Fitting Insulation	120 fittings*		

"Estimated only. Not to be used for bidding purposes. Contractor MUST field verify

A New Jersey Department of Labor and Workforce Development (DLWD) L
Asbestos Abatement Contractor shall perform all asbestos abatement work. ALL
performing asbestos abatement shall hold a valid permit issued by the DLWI
Contractor is advised that work under this contract shall be performed in accordan
the requirements that may be imposed by the New Jersey Department of Health and
Senior
Services (NJDHSS), New Jersey Department of Labor and Workforce Devel
(DLWD), New Jersey Department of Environmental Protection (D.E.P.), New
Department of Education, United States Department of Labor, and the United
Environmental Protection Agency (E.P.A.).

e. Remove and dispose as asbestos-containing, all boiler breech, tank insulations, pipe a 1 pipe fitting insulation from the boiler room and crawlspace under full containment of building conditions per NJAC 5:23-8.19.

All work is to be performed in an occupied building as per NJAC 5:23-8.19 utilizing full containment abatement procedures. The contractor shall provide a fully operational notative air system that maintains a negative pressure of -0.05 inches of water column (WC) at the decontamination unit. The negative air system shall include a digital recording man with a continuous printout, extra recording chart paper and a complete operation instruction booklet. The onsite supervisor shall be familiar with the complete operation of the manometer.

The decontamination unit shall be attached directly to the work area and all means of shall be through the decontamination unit. All materials utilized in the construction for the containment will be fire rated in accordance with NJAC 5:23-8. Separation barriers slightly be constructed by utilizing fire rated 2"x 4" or metal studs and ½ fire rated plywood. The studs will be 16 inch on center with the plywood being placed on both sides of the 2"x 4 and secured on to the studs. All seams shall be caulked with fire rated caulk or foam. P is layers of 6 mil fire rated plastic on both sides of the barrier. The decontamination unit shall be considered as a separation barrier and constructed as such.

h. The Contractor is responsible to complete applications for and secure all necessary penits, approvals, and inspections and pay all required fees. The Contractor is responsible for posting all such permits at the work site and has copies available in the business office.



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

Date of Notification (1)					Name	of Buildin	g Owr	ner/Operator (2)				5 50	+
6/	21 /	16	1111			stees of				05-5014 Jd	ecl #	828	16	
Agencies Notified ⊠ EPA	Type Notifica	ation			54,000,000,000	Address stees of	Prin	ceton Unive	rsity E.A. Mac	Millam Bldg.S	25.0	ON	TROI	- &
□ DOLWD	☐ Amended	l				State, Zip (L	DEM		-	
□ DHSS	Amendme					nceton, N		544		L				
DCA	☐ Emergene justification		luding			of Contac				Telephone Nu	ber			
(NJAC 5:23-8)	☐ Cancellat					pert Orte		F		1 Ciopinono 110	1001			
	ouncende				0.0000000									
				(0)	FA	CILITY IN	IFOR	RMATION		440	. 			
Name of Facility Where A		aking	Place	(3)					Type of Facility					
Princeton Universit	ty								School (K-12	(Other than K-))			
Street Address 5 Ivy Lane									Other (i.e., p	rivate and comm		uildi	ngs,	
City (5)									Square Feet	# of Floors	E	ldg.	Age	
Princeton										**				
County (6)	132000				Cour	ntv Code (7	Y)/STA	TE USE ONLY)	Current Use (Pr	ior if being demo	shed)			
Mercer							**	•	,					
Name of Monitoring Firm	Hired by Build	dina Ov	wner (8)	ASCM	No	Nar	me of Abateme	l ent Contractor (9)					
Cardno ATC	Timod by bane	amig O		,	0009			bateTech, li						
Street Address								eet Address			-			
3 Terri Lane							1920700		e. PO Box 25					
			1-2-					, State, Zip Co						
City, State, Zip Code	1.0						0000							
Burlington, NJ 080				T-1-		NI -	-	umberton, N	NJ 00040	Linaman No.	· <u></u>			
Project Manager for Mon	itoring Firm			9088	ephone		7350	ephone No.		License No.				
Michael R. Keehn			1 10	1 2000	09-386	Neida Crassa		09-265-2107		00529				
Start Date (10)7 /25 /					ition Da			ne of OSHA M MSL Analyt						
Occupancy Status During	Abatement (0	Check	only c	ne)			Stre	et Address	741					
☐ Facility Closed/Vacate					ment		20	00 Route 13	0 North					
☐ Abatement Performed							City	, State, Zip Co	ode					
Time of Abatement: _	AM	PM	/	_PM		AM	C	innaminson	. NJ 08077					
Scope of Work (Check al	I that apply)										-	_		
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 	ti aroannaa t a 🗸 🗸		⊠ Re □ De					☐ Mini-Enc ☐ Glovebag	tainment with Neg losure g Procedure mpted (*) and No		ire			
			ls	Loca	tion						A	bate	nent T	vpe
Location	of			Norma				Description o	f		100,000	1		
Asbestos-Containing)		d Sole intena	ely by			Containing Ma		Amount	Removal	Repair	Encapsulate	Enclosure
TO BE ABA					Staff?	(1.6		rmal systems urfacing, VAT,		(Specify SF or LF)	ova	=	psu	Sur
(13)	,			(12)				ner miscellane		,			ate	(D)
9900-254A			Yes	No	N/A									
Exterior						Windov	v Cai	ulk & Glazin	g	1,880 LF		L		
Name of Registered Was	te Hauler			6.83	IJDEP \		27.25.25.50	ic Yards of	Name of Regis	tered Landfill		-1		-
AbateTech, Inc.				H	lauler II 18750		Was		G.R.O.W.S	. Landfill				
City, State					10100			osal Date	City, State		V-			
Lumberton, NJ								31/16	Tullytown,	PA				
Completed By (Print or Ty	ype)	Title						Signature	1		ate (1.	
Gwendolyn Trumbe	VACADAN .	0.0000	erati	ons	Coord	nator		0	M		10/	16	111	1

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

ASB-41

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

		N	1011					:60 and 5:1		MEGI	1	7	V	E [7
Date of Notification (1)	21 /	16			1 100 September 1		Ti man	ner/Operator (1606-5024		k#)8287		, 0	010		
Agencies Notified	Type Notifica					Address 0 Hadley	/ Roa	ad		LL JUN-	_	4 2			
⊠ DOLWD	Amended				City, S	State, Zip C	Code			ASBESTO			TAC	Lα	3
☑ DHSS ☐ DCA	Amendme	Chicago Carlo	udina		Sou	uth Plain	field	, NJ		LIC	IA:	SIN	3		_
(NJAC 5:23-8)	justification		uumg		Name	of Contac	t			Telephone Nu	ibe	er			
4400	☐ Cancellat	ion			Mai	rk Domin	gue	s			-				
					FAG	CILITY IN	IFOF	RMATION			100000				
Name of Facility Where A	batement is T	aking l	Place	(3)					Type of Faci	lity (4)					
PSE&G- Delair Sub	station								School (K	(-12) er 8 (Other than K-	2)				
Street Address										., private and comn		ial bu	ilding	s,	
576 June Road		VA2-5							homes, e	tc.)	_				
City (5)									Square Feet	# of Floors		Blo	dg. A	ge	
Pennsauken, NJ 08	110														
County (6)					Cour	nty Code (7)(STA	TE USE ONLY)	Constitution and the second	(Prior if being demo	sh	ed)			
Burlington									Substatio		(Varia				
Name of Monitoring Firm	Harman Salah Sanagar da arangan sa	ding Ov	vner (8)	ASCM	No.	222	me of Abatem		(9)					
Health and Safety S	Services							\bateTech, I	nc.		32				
Street Address								eet Address	7 <u>.000,000,000,000,000,000,000,000,000,00</u>						
PO BOX 365								0 Maple Ave		5	_				
City, State, Zip Code								y, State, Zip C							
Berlin, NJ 08009				T				umberton, l	NJ 08048	1					
Project Manager for Moni	toring Firm				ephone		1	ephone No.		License No.					
Jim Proctor					56-452			09-265-2107		00529	<u> </u>				
Start Date (10) 6 /29 /	1000000			and the	etion Da	16	1000	me of OSHA N E MSL Analy t							
Occupancy Status During	Abatement (Check	only c	ne)			Stre	eet Address			1		0		
☐ Facility Closed/Vacate								00 Route 13				2755			
Abatement Performed Time of Abatement: _								y, State, Zip Co Sinnaminsor							
Scope of Work (Check all	that apply)				Enderen (☐ Full Con	tainment with	Negative Pressure					
 ≥3 sf or ≥3 If ≥160 sf or ≥260 If 			⊠ Re ☐ De	novat moliti					g Procedure	Non-Friable Proce	ıre	ŧ			
			ls	Loca	tion			31.9 (00-20-33-00-00-00-00-00-00-00-00-00-00-00-00				Ab	atem	ent T	уре
Location Asbestos-Containing I TO BE ABA IN Facilit (13)	Material (ACM TED	1)	Use Ma	intena	nally Description of plely by Asbestos Containing Material (ACM) Amonance/ (i.e., thermal systems insulation, surfacing, VAT, or SF or					Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure
			Yes	No	N/A										
Exterior						Excava	ted '	Transite Pip	е	2,500 LF					
														Ш	Ш
			П	П	\Box							П	П	П	П
Name of Registered Was	te Hauler				AJDEP \	Naste.	Cut	oic Yards of	Name of Re	egistered Landfill	-				
Waste Management				19	lauler II	O No.	Wa 1	ste 2	G.R.O.V	V.S. Landfill	_				
City, State Camden, NJ								posal Date /1/16	City, State Tullytov	vn, PA			-		
Completed By (Print or Ty	(na)	Title						Signature	,		ate				
Gwendolyn Trumbe	13		erati	ons	Coord	inator		J. Signature	Im.			-	21	16	

ASB-41 MAY 11

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

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CK-2282

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

Ot D				BESTOS C 8:60 an			In	E (. П	W/	FI		
Date of Notification (1) 6/20/16					g Owner/0 Richard,		(2)	118			Ш	U	5	
Agencies Notified Type Notified	cation		Street A		ermanto	wn Pike	e suite 150	111	Ji	11 2	4	2016	1	
EPA Initial Amen	ded dment #		City, Sta	ate, Zip				1	SBES	TISI	CON	ITROI		
Emerging justific	ency (including ation)		Name o	f Contac	at	A 1940			lephone	N nbe	SIN	G	- α	
DCA Cance	llation		Henry		erg FORMAT	ON								
Name of Facility Where Abatement is 319 Richard Mine RD	Taking Place (3)	FACI	LIIYIN	FORMA	ION	Type of Facilit			-				
Street Address 319 Richard Mine Rd. Suite 5	00						School (H Subchap Other (i.e	ter 8 (Oth	ner than I & comm	<- <u>2</u>) er al b	uildin	gs, hor	nes,	
City (5) Wharton, NJ							etc.) Square Feet 15000	# 0	of Floors	_	Bldg. Age			
County (6) Morris	그 보통이 살고 있다. 주어가						Current Use (F		ing demo	oli ned)			
	ne of Monitoring Firm Hired by Building Owner (8						ASCM No. Name of Abatement Contractor (9) Yannuzzi Environmental Service							
Street Address						The state of the s	Address Kinnelon Rd	suite 1	02					
City, State, Zip Code		City, State, Zip Code Kinnelon, NJ 07405							_	-				
Project Manager for Monitoring Firm			Telephone No. Telephone No. Licens 908-218-0880 0122											
Start Date (10) 6/30/16	Schedul 7/5/16		mpletion	Date (11)		of OSHA Monito		Servic	 e:				
Occupancy Status During Abatement	120						Address							
Facility Closed/Vacated During E Abatement Performed Outside of Other – Describe:	ntire Period of A	Abater y Hour	ment s			City, St	Cinnelon Rd tate, Zip Code elon, NJ 074		02	_			-	
Scope of Work (Check All That Apply)		-				Killik	51011, 140 074							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	COMMENSAGE	Renova Demoli	307474			×	Full Contain Mini-Enclose Glovebag Pr	ure ocedure						
	Is	Locat	ion	 			Non-Exempt	ed (*) an	d Non-Fr	ia le F		dure atemer	nt.	
Location of	1	Norma	lly		Des	scription	of					Туре		
Asbestos-Containing Material (ACI TO BE ABATED In Facility (13)	Ma Ma	intena todial ((12)	nce/		e. thermal surface			(5	mount Specify or LF)	remove	Repair	Encapsulate	Enclosure	
- EF:	Yes	No	N/A							2		late	lire	
office floor			X			VAT		2	2000	x	+		-	
										+				
Name of Registered Waste Hauler		N	IJDEP W	aste	Cubic `	Yards	Name o	f Registe	ered Land	Ifi				
Yannuzzi Group			lauler ID I 7467	No.	of Was		Grows							
City, State Kinnelon, NJ					Dispos 7/5/16	al Date	City, Sta	ate ville, P	Ą					
Completed by John Mucha	Title Proje	ct Ma	ang		3	gnature	4			D e 6 !0/	16			
ASB-41 (R-06-08)				(0	* Do not	use this form for	or asbest	os licens	ur ex	empte	d activ	ities.	

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

Name of Building Owner/Operator (2)

	EG	<u> </u>	087
. 11 1	JUN	4 2016	2
TAI	ASBESTOS LICE 0886 1 ephone Number	CC ITROL	&
c.)	er than K-12) & commercial bu ('Floors'	ings homes. dg. Age + SO	The second secon
t Use (Prior if he ES ID ON T) ment Contractor ntracting inc. and Ave.	4(.		averi
Cade rk. NJ			
841	License No 00156		
a Monitor vironmental S	ervices	112	
St.			
Code			

Date of Notification (1)			Nan	me of B	uilding Owt	i i i i i i i i i i i i i i i i i i i	121		LUL	JL	N	4	2011	J
6/21/	16				GEN	e L	-IMO	<u>L</u>	12 .	1	,,,			
gencies Notified	Type Notification		Stre	eet Add	iress	ł	•		4					
T EPA	Initial				<u> </u>	1			7	ASBES		00	TB	OL
DEP	Amended	u	City	/. State	Zip Code	2.0	`	4			LICE	3.	<u>G</u>	1
g nor	Amendment Emergency				UITIST	رسه	N	<u> </u>	170	O88	CONTRACTOR STATE	Married		
DOH	ustrication)			me of C		LIMOU			1	-trumpe race	100			
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aine of Facility Where	Abatament is Takin	n Place (3)		FAUILI	TY INFORI	MATIUN	Type	of Facility	(4)					
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Treet Adoress	SINCALL						177	Sunchapte	8 (Oth	er than K-13	2)			
HISELF PARTS CAN								Other (i.e.	private à	sommerci	al bu	ings	home	5,
NV /5\								etc.) re Feet	# 0	Floors		dg. A	qe.	
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WOOD BL	DO			univ Co	04z /7)	waa			ior if hei	ng demolisi	ned)	-		
MIDDLESE					E ONLY)	No. of Spirit Street Conference (Spirit Spirit Spir	1	ESIDI						
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Ireat Accress	Market Market Control of the Control						: Addre							
meet MUNESS						1		and Ave.						
ity State, Zip Code						1 0000000	Rimonaco	ip Code			-	***********		
aty State, ZIP GRIE								ark. NJ						
rolect Manager for Mo	nitarina Carr		Tel	ephane	- No	Talan	hane N	n		License N	io.	-		Proceedings of
raise: Manager let wit	authing rain		1 153	CPHAIR	190.		1)262-			00156				
lart Daje (10)		Schedule	N Comple	ation O	oto (11)			HA Manitoi	·			-		e, sienes i i i i
		Committee of the control of the cont	4 3 V V 114 V 11	DATE OF BUILDING	\$1.5 St. 10 To P. F.			the section transfer						
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6/30/16	na Abstance (Cha	7/1	0/16					nvironme ss	ental S	ervices	a-1-1-a-1-111140	personal designation	***************************************	usions a s aco
6/30/16 Deguatory Siletus Duri		7/1 ck Only Ons	0/16			Stree	t Addre	ss	ental S	ervices	na talanga erranga	seem vier worde		us) or a do
6/30/16 Occupancy Sibius Duri	caled During Entire	ck Only Ons	0/16 n) patemen			Stree 280	t Addre Huyle	ss r St	ental S	ervices		10 TO THE SECOND		
6/30/16 Occupancy Sibius Duri	cated During Entire ned Outside of Nort	ck Only Ons	0/16 n) patemen			Stree 280 City	t Addre Huyle State, 2	ss or St op Code		ervices	mi tul nepřistří sep	painting of the parameters		
6 30 16 Decupancy Sietus Durk Facility Closed/Va Abatement Perfort Other - Describe:	cated During Entire ned Outside of Nort	ck Only Ons	0/16 n) patemen			Stree 280 City	t Addre Huyle State, 2	ss r St		ervices	and the supplemental of th			
6 30 16 Decupancy Status Durk Facility Closed/Val Abatement Perform Other - Describe: Scope of Work (Check	cated During Entire ned Outside of Nort	ck Only One Period of Al mal Facility	batemen Hours	ſ	Marco de la companya del companya de la companya del companya de la companya de l	Stree 280 City	t Addro Huyle State, 2 kensa	ss or St op Code ock, NJ 0	7606					
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	NOTIFICATION OF ASB	ESTOS ABATEMENT 8 60 and 12:120)	IID)-E-1		<u> </u>	\mathbb{W}
Date of Hollification (1)	Name of Building	Overstroppirator (2)			<u>N2</u>	1	2016
Cremies Notified Type Notification	Syne of Accessors	T Management (1984) Representation of the control o				Let Sandre 198	
Amended Amendment 9 Emergency (40	City State Ze Co		0709	ASBEST	OS Ç	10: 31N	NTROI IG
X DOH Districation) DCA Darcehation	ERW FACILITY INF	BELF)					*
Name of Facility Where Abatement is Taking	Place (3)		of Facility (4) School (K-12) Supphapter 8 (C)		ts.		
Etreel Address		×	Other (i.e. crivale etc.)	: & commerce	al truito		
WEST FIELD.		13	350	2 Floors 2	3	-20	
UNION	County Octour (GTAST USE CON	7	RESIDENT	TAL	1001		
Trame of Rondonng Part, Hikou by Bullting C	wner (8) ASCM No	A MAC C	nement Contract ontracting Inc.				
Sirces Address		Sedec 17 drs 185 Vree	and Ave				a service
City, State. Zip Code		usy State Midiand F	Park, NJ	way our reasons on the			ne w
Project Manager for Monitoring Firm	Talegrane No	Telephone ! (201):262	-584 °	00156	VD	-	_
Start Date, (10)	Screduled Corrolnyco I'm	Omega S	nvironmental	Services		_	
Cocupancy Status During Abatemant (Check Fucility Classed Viscotted Coming Entire F	lened of Abalement	Street Addr 280 Huyl	er St			_	
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Scope of Work (Check All That Apply) 29 91 or 23 U 2166 of or 2260 H	Renovation Demokings	K N	uil Contemment v lail-Ericlosure Jevebag Procedu		Pressi	3	
information materials to the second s	is cacabar		en-Exempled (*)	<u>siri Nor-Fric</u>	bie Pri	iban	ement
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			and the second s			***************************************	
Newark Garling . Inc.	04509	Come Yards of Waste	Issine of Reg IESI PA Be	alered Landf ethlenem L		Cor	D
Chy State Newark NJ		6/16/16	City State Bethlehem				
Completed by Joseph Vocaturo	Title Vice President	to andrea (Vorateu		6/2	166	

CK#25/95

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

			(, ,				' II	UĮF							
Date of Notification (1)	21/16			Name	of Building	g Owner/Operato					0.0				
	21/16	f'	_	C/	A alcles		Doerl		JUN 3	<u> </u>	50,	15	Hom	1	
Agencies Notified	Type Notifica	ation		Street	Address									1	
EPA DEP	Initial Amended	l.	-	0:4 0	1-1- 7:- 0			-AS	BEST	=		ROL	2.	=	
⊠ DOL	Amendme	ent #	.	City, S	tate, Zip C		renton, N		1 1		3	IOL	a		
⊠ DOH	☐ Emergen justificati		-	Nome	of Contac		renton, 145		Telephone Nu	be	25			=	
DCA DCA	Cancellat					ney - Herrs I	Dumhing		relephone Nu	De	21				
							Tumomg	-		- 1 <u></u>				_	
				FAC	ILITY INF	ORMATION									
Name of Facility Where							Type of Fac)						
	<u>F</u>	Residentia	11				School (Other than K	. 21					
Street Address							Other (i.e	e., priv	ate & comme	ia	ial buildings,				
City (5)							homes, Square Fee		# of Floors	- 12	Bldg. Age				
Oity (5)	Yardy	ville, NJ (0862	0.0		2200 2						90+/			
County (6)				Cour	ity Code (7	e (7) (STATE Current Use (Prior if being den									
	Burlington				ONLY)					_				_	
	Name of Monitoring Firm Hired by Building Owner				No.	Name of Abate									
(8) DB E	8) DB Environmental					Ste	vens Envir	onme	ental Serv	i e	s, In	c.		_	
Street Address	Street Address					Street Address		20.0225							
4 Berkeley Place								О Во	x 322	=				_	
	City, State, Zip Code Freehold, NJ 07728					City, State, Zip		own	NJ 08501						
Project Manager for Mo		J 07720	Tolo	nhono	No.	Talanhana Na	Allent	O W11,						_	
	Bunocore		11.00	Felephone No. Telephone No. License No. (732) 740-8408 (609) 259-9688)(
Start Date (10)		Scheduled C	_			Name of OSHA			_	=	7 10 0		_		
6/30/16	1		7/8/1		ie (11)	TVallic of COLD		Envir	onmental						
Occupancy Status Durin	ng Abatement			. 0		Street Address								_	
☐ Facility Closed/Vaca				ment			4 Be	erkele	ey Place						
Abatement Performe						City, State, Zip	Code							_	
Other - Describe:	8am - 4pm							old,	NJ 07728						
Scope of Work (Check	all that apply)				100									_	
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≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			novat			Glove	oag Procedure								
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Name of Registered Wa	este Hauler	_	11	JDEP V	Naste	Cubic Yards	I Name of F	— L – Registe	ered Landfill	-				_	
B		T	1	Hauler ID	No.	of Waste	Traine or i		\		a£:11				
Stevens Environ	mental Ser	vices, inc	<u>. </u>	182	292	1 CU	City, State		ROWS L		dfill			_	
City, State	Allentor	m NII				Disposal Date 7/15/16 /	City, State	1	Morrisvil	,	PA				
Completed By	Allentow	Title				Signature/	1	7	Date		. 17			_	
Mahlon E. St	evens	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	oiec	t Mar	nager	Signature/	' //		Date		6/21	/16			
ASB-41	-, 0110		5,00	- 4-444					_	=					
MAR 00		* Do not u	se thi	s form	for asbest	os licensure exe	mpted-activitie	es.							

CK#25/91

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

Date of Notification (1)				Name	of Building	Owner/Operato	r (2)	$+\Pi\Pi$	100			0046	_				
6/21/16				Name of Building Owner/Operator (2) J& J Builders							4	2016)				
Agencies Notified	Type Notificat	ion		Street	Address												
⊠ EPA	Initial			315 E. Mill Rd. ASBE													
□ DEP	Amended Amendmen	nt #		City, State, Zip Code								LICENSING					
	☐ Emergency	y (including		Maple Shade, NJ 08052									_				
DOH DCA	justification Cancellation	i							be	r							
Прак	Our localities	,,,				Joe Angelo		_				_					
				FAC	CILITY INF	ORMATION											
Name of Facility Where Abatement is Taking Place (3) Residential Type of Facility (4)																	
		<- 2) e ial buildings,															
Street Address																	
City (5)							homes, etc.	# of Floors	100	Blo	dg. A	ge					
	Maple S	Shade, N	JJ 00.	52			1800	2	_		85	+/-	_				
County (6)	2000			Cour	nty Code (7) (STATE	Current Use (P	ish	ed)								
	ırlington			USE	ONLY;								_				
Name of Monitoring Firm	이 없는 사람들이 없는 사람들이 하는 사람들이 되었다.	ng Owner	1	ASCM	No.	Name of Abatement Contractor (9)											
(8)	N/A		_ .			Stevens Environmental Serv					c.		_				
Street Address				Street Address													
								Box 322	_				_				
City, State, Zip Code						City, State, Zip		n, NJ 08501									
						T-1N-	_				_						
				ephone No. Telephone No.			lo. License Ne			00493							
(609) 259-968						Name of OSHA	1	=	473	,	_	_					
Start Date (10) Scheduled Completion Date (11) 7/5/16 7/15/16					ite (11)	Name of OSHA		rironmental									
7/5/16	ing Abatement (10		Street Address	=										
Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement						Otreet Address	eley Place										
Abatement Performe	T 1000					City, State, Zip		0.0) 11.00	_		_		_				
Other - Describe:		V-01010210110 - 0000000000000000000000000	•011010000	900				i, NJ 07728									
Scope of Work (Check	all that apply)												_				
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				on n		☐ Mini-Er ☐ Gloveb											
						Non-E	Non-Exempted (*) and Non-Friable Proc										
Is Local Norma Location of Used Sol									Α	bate:	nent						
				y by		Description of		88-0 F9	-								
IN Facility Sta			ntenan ustodia			tos Containing Ma thermal systems		Amount (Specify		-		En	П				
			Staff?		(1.0.,	surfacing, VAT	SF or LF)		Removal	Repair	Encapsulate	nclo					
			(12)			other miscellane	· · · · · · · · · · · · · · · · · · ·		oval	air	sula	Enclosure					
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Exterior ;			×			Transite Sic	1700 sf	I	×								
		_							1								
									+								
Name of Registered Wa	aste Hauler			JDEP V		Cubic Yards	Name of Reg	istered Landfill									
Stevens Environmental Services, Inc. Hauler ID No. 18292					292	of Waste GROWS I					L ndfill						
City, State Disposal Date City, State							100										
Allentown, NJ					7/15/16	AN .	/Morrisvill	, P	Α		n.						
Completed By Title				Signature	1 1 /	Date											
Mahlon E. St	evens	Project Manager					1/11 /					6/21/16					

ASB-41 MAR 00 * 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)

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CHEC	1	0600

Date of Natification (4)		LNI		1."		(0)	CHEC	777	_	16	20	,	. 1		
Date of Notification (1) 06/22/16				Iding Owner		(2)	11 1-15	, 6, 1	-		y II	٠			
			175 Crooks Ave LLC						-				111		
	EPA Initial				Street Address 175-177 Crooks Ave)16				
DEP Amended		City, State, Zip Code						47.54	-						
X DOL Amendme	ent # cy (including	Paterson, NJ							***	e - 1 5x 5-1	Er en	1			
DOH justification DCA Cancellat	on)	Na	ime of Cor	ntact		Telephone				imber G					
			FACILITY	INFORMA	TION						_				
Name of Facility Where Abatement is Ta	king Place (3)					Type of	Facility (4)								
Residential House							nool (K-12)	4 14	10)						
Street Address							ochapter 8 (Other (i.e. private				linas.	home	es.		
011 /01				-		etc.	.)		_		-7-30		7/		
City (5)			et.				1 325	# of Floors		Bldg. Age		ge			
Paterson								2			0+				
County (6)			County Code (7) (STATE USE ONLY)			Current Use (Prior if being de			she	ed)					
Passaic		2.5				Residential House									
Name of Monitoring Firm Hired by Buildin n/a	ng Owner (8)	100	Files Market Mar			lame of Abatement Contractor (9) Harmony Contracting Inc							*		
Street Address			n/a			and the last of th	ontracting in	IÇ	-						
n/a							et Address 0 Palisade Ave								
City, State, Zip Code									E.				220-200		
n/a			17.50				city, State, Zip Code Garfield, NJ 07026								
Project Manager for Monitoring Firm	·	To	Telephone No.						No.						
n/a		1	The state of the s			973-460-6026									
Start Date (10)					973-460-6026 0125 Name of OSHA Monitor			9				-			
07/01/16	6				larmony Contracting Inc										
Occupancy Status During Abatement (C					et Address										
Facility Closed/Vacated During Enti			. 6		A 100 CO 100 CO	Palisad	e Ave								
Abatement Performed Outside of N					City, State, Zip Code					-					
Other - Describe:				-	Garfield, NJ 07026										
Scope of Work (Check All That Apply)									1						
≥3 sf or ≥3 if	☐ Re	novatio	n			Full C	ontainment wi	th Negativ	Pr	essu	re				
≥160 sf or ≥260 lf Der			nolition			Mini-Enclosure Glovebag Procedure									
							exempted (*) a		ıble	e Pro	cedur	е			
	ocation							100 10	Abatement						
Location of	ormally			Description of					Туре						
Asbestos-Containing Material (ACM) Used S				Asbestos Co	os Containing Material (ACM) hermal systems insulation,			Amount				ш	m		
In Facility Custon		dial Sta			al system facing, V			(Specify SF or LF)		Ren	Re	ıca	incl		
		(12)			her miscellaneous)			0. 0. 2. /		Remova	Repair	Encapsulate	Enclosure		
	Yes	No	N/A							=		ate	9		
Front Porch			х	Roo	fing Ma	terial	-	100 SF	-	×					
Rear Porch			х	Roo	fing Ma	iterial		100 SF		x					
Name of Registered Waste Hauler						Vaste		e of Registered Lan							
Harmony Contracting			033137 TBD			GROWS Landfill									
City, State					osal Date	4.3	City, State	DΛ							
Garfield, NJ		TBD			Morrisville, PA			N-1							
Completed by Tina Caporino	tary	Signatur)ate 06/22/16					
Tina Caporino Secretary					lina Caparno					06/22/16					