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

Date of Notification (1)
06 / 22 / 16

Name of Building Owner/Operator (2)
Pennsville School District

Street Address
30 Church Street

City, State, Zip Code
Pennsville, NJ 08070

Name of Contact
Mike Simpkins

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
PENNsville HIGH SCHOOL

Street Address
110 S BROADWAY

City (5)
PENNsville

County (6)
SALEM

County Code (7)(STATE USE ONLY)

Name of Monitoring Firm Hired by Building Owner (8)
PENNoni ASSOCIATES INC

ASCM No.
102

Name of Abatement Contractor (9)
DELTA/BJDS, INC

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

Subchapter B (Other than K-12)

Other (i.e., private and commercial buildings, homes, etc.)

Square Feet
>50,000

No. of Floors
2

Bldg. Age
50+

Current Use (Prior to being demolished)
SCHOOL

Occupancy Status During Abatement (Check only one)

Facility Closed/Vacated During Entire Period of Abatement

Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7AM_11PM/11PM_7AM

Start Date (10)
06 / 25 / 16

Scheduled Completion Date (11)
07 / 30 / 16

Name of OSHA Monitor
CRITERION LABS

Location of Asbestos-Containing Material (ACM)

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

Yes
No
N/A

Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)

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

Amount (Specify SF or LF)

Full Containment with Negative Pressure

Mini-Enclosure

Glovebag Procedure

Non-Exempted (*) and Non-Friable Procedure

BATHROOM (10 LOCATIONS)

PIPE INSULATION

200 LF

Name of Registered Waste Hauler: SERVICE TRANSPORT

NJDEP Waste Hauler ID No. 20990

Cubic Yards of Waste

Name of Registered Landfill
MINERVA LANDFILL

City, State
WAYNESBURG, OH 44888

Disposal Date

Completed By (Print or Type)
MICHAEL PARSON

Title
PROJECT MGR.

Signature

Date
6-22-2016

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

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>06 / 22 / 16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Building Owner/Operator (2)</td>
<td>Pennsville School District</td>
</tr>
<tr>
<td>Street Address</td>
<td>30 Church Street</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Pennsville, NJ 08070</td>
</tr>
<tr>
<td>Name of Contact</td>
<td>Mike Simpkins</td>
</tr>
<tr>
<td>Telephone Number</td>
<td></td>
</tr>
</tbody>
</table>

**FACILITY INFORMATION**

Name of Facility Where Abatement is Taking Place (3)

**PENNsville HIGH SCHOOL**

Street Address

110 S BROADWAY

City (5)

PENNsville

County (6)

SALEM

County Code (7)

SCHOOL

Type of Facility (4)

School (K-12)

Subchapter 8 (Other than K-12)

Other (i.e., private and commercial buildings, homes, etc.)

Square Feet

250,000

# of Floors

2

Occupancy Status During Abatement (Check only one)

Facility Closed/Vacated During Entire Period of Abatement

Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement

Scope of Work (Check all that apply)

23 sf or 23 ft

120 ft or 1200 sf

Renovation

Demolition

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

(Use Location Normally Used Solely by Maintenance/Custodial Staff?)

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

BATHROOM (10 LOCATIONS)

Pipe Insulation

200 LF

|   |   |   |

Name of Registered Waste Hauler

SERVICE TRANSPORT

NRDTEP Waste Hauler ID No.

2020

Cubic Yards of Waste

Disposal Date

City, State

WAYNessburg, OH 44088

Complied By (Print or Type)

MICHAEL PARSON

Title

PROJECT MGR.

Signature

Date

6-2-2016

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

Date of Notification (1)
06 / 22 / 16

Name of Building Owner/Operator (2)
SOUTH JERSEY LEGAL SERVICES

Agencies Notified

- EPA
- DOLVD
- DHSS
- DCA
(NJAC 5:23-8)

Type Notification

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

Street Address
745 MARKET STREET
City, State, Zip Code
CAMDEN NJ 08102

Name of Contact
Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
SOUTH JERSEY LEGAL SERVICES CAMDEN COUNTY OFFICE

Street Address
745 MARKET STREET

City (5)
CAMDEN

County (6)
CAMDEN

County Code (7) (STATE USE ONLY)

Square Footage
>25,000

# of Floors
3

Bldg. Age
50

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

ASCM No.

Name of Abatement Contractor (9)
DELA/BJDS, INC

Street Address
700 TURNER WAY SUITE

City, State, Zip Code
ASTON, PA 19014

Project Manager for Monitoring Firm
DON HEIM

Telephone No.
610 558-8902

Type of Facility (4)

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

Name of OSHA Monitor
CRITERION LABS

Street Address
1345 INDUSTRIAL BLVD

City, State, Zip Code
SOUTHAMPTON PA

License No.
00783

Start Date (10)
07 / 06 / 16

Name of Abatement Contractor (9)

Scheduled Completion Date (11)
08 / 08 / 16

Scope of Work (Check all that apply)

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

Abatement Type

Location of Asbestos-Containing Material (ACM)

TO BE ABATED

IN FACILITY

(13)

Yes
No
N/A

Is Location Normally Used Solely by Maintenance/Custodial Staff?

(12)

Yes
No
N/A

Description of Asbestos Containing Material (ACM)

(i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)

Amount
(Specify SF or LF)

PIPE INSULATION
145 LF

3rd Floor Mechanical Room

- ☐
- ☒
- ☐

Name of Registered Waste Hauler

SERVICE TRANSPORT

WASTE HAULER ID No.
20990

Cubic Yards of Waste

Disposal Date

City, State
WAYNESBURG, OH 44348

Name of Registered Landfill

MINERVA LANDFILL

Completed By (Print or Type)

JAMES LAVELLE

Title
PROJECT MGR.

Signature

Date

MAY 11

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

Date of Notification (1) 6 / 21 / 16
Name of Building Owner/Operator (2) Point Pleasant Beach School District / Job #1808-5022
Agencies Notified
☐ EPA
☐ DOLWD
☐ DHSS
☐ DCA
☐ (NJAC 5:23-8)
Type Notification
☐ Initial
☐ Amended
☐ Amendment #
☐ Emergency (including justification)
☐ Cancellation
Street Address
299 Cooks Lane
City, State, Zip Code
Point Pleasant Beach, NJ 08742
Name of Contact
Mark McNamara
Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
G. Harold Antrim School
Street Address
401 Niblick Street
City (5)
Point Pleasant Beach, NJ 08742
County (6)
County Code (7) [STATE USE ONLY]
Ocean

Name of Monitoring Firm Hired by Building Owner (8)
RJB Environmental, Inc.
ASCM No.
00149
Name of Abatement Contractor (9)
AbateTech, Inc.
Street Address
58 East Bridge Street
City, State, Zip Code
Morrisville, PA 19067
Project Manager for Monitoring Firm
Richard Beach
Telephone No.
267-951-9212
Name of OSHA Monitor
EMSL Analytical
Occupy Status During Abatement (Check only one)
☐ Facility Closed/Vacated During Entire Period of Abatement
☐ Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: AM-PM-AM
Start Date (10) 7 / 5 / 16
Scheduled Completion Date (11) 7 / 8 / 16
License No.
00529
Telephone No.
609-265-2107

Scope of Work (Check all that apply)
☐ ≥3 sf or ≥3 If
☐ ≥160 sf or ≥200 If
☐ Renovation
☐ Demolition
☐ Full Containment with Negative Pressure
☐ Mini-Enclosure
☐ Glovebag Procedure
☐ Non-Exempted (*) and Non-Friable Procedure

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

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

(2) Team Rooms
☐ ☐ ☐ ☐

Name of Registered Waste Hauler
AbateTech, Inc.

NJDEP Waste Hauler ID No.
18750
Cubic Yards of Waste
20
Name of Registered Landfill
G.R.O.W.S. Landfill

City, State
Lumberton, NJ
Disposal Date
7/8/16
City, State
Lumberton, NJ
Tullytown, PA

Completed By (Print or Type)
Gwendolyn Trumbetti
Title
Operations Coordinator
Signature

ASB-41
MAY 11

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

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>6 / 21 / 16</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Agencies Notified</th>
<th>Type Notification</th>
<th>Name of Building Owner/Operator (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>☑ EPA</td>
<td>☑ Initial</td>
<td>West Long Branch BOE/ Job #1603-4997</td>
</tr>
<tr>
<td>☑ DOLWD</td>
<td>☑ Amended</td>
<td>Check #8282</td>
</tr>
<tr>
<td>☑ DHSS</td>
<td>☑ Amendment #</td>
<td></td>
</tr>
<tr>
<td>☑ DCA (NJAC 5:23-8)</td>
<td>☑ Emergency (including justification)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>☑ Cancellation</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>135 Locust Avenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>City, State, Zip Code</td>
<td>Long Branch, NJ 07764</td>
</tr>
</tbody>
</table>

**FACILITY INFORMATION**

<table>
<thead>
<tr>
<th>Name of Facility Where Abatement is Taking Place (3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frank Antonides Elementary School</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>135 Locust Avenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>City (5)</td>
<td>West Long Branch, NJ 07764</td>
</tr>
<tr>
<td>County (6)</td>
<td>Monmouth</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Monitoring Firm Hired by Building Owner (8)</th>
<th>Name of Abatement Contractor (9)</th>
</tr>
</thead>
<tbody>
<tr>
<td>TTI Environmental</td>
<td>AbateTech, Inc.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>1253 North Church Street</th>
</tr>
</thead>
<tbody>
<tr>
<td>City, State, Zip Code</td>
<td>Moorestown, NJ 08057</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Project Manager for Monitoring Firm</th>
<th>Telephone No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>James Guliard</td>
<td>856-840-8800</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Start Date (10)</th>
<th>Scheduled Completion Date (11)</th>
</tr>
</thead>
<tbody>
<tr>
<td>7/5/16</td>
<td>7/29/16</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>License No.</th>
<th>Name of OSHA Monitor</th>
</tr>
</thead>
<tbody>
<tr>
<td>00529</td>
<td>EMSL Analytical</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Scope of Work (Check all that apply)</th>
</tr>
</thead>
<tbody>
<tr>
<td>☑ ≥ 3 sf or ≥ 3 If</td>
</tr>
<tr>
<td>☑ ≥ 160 sf or ≥ 260 If</td>
</tr>
<tr>
<td>☑ Renovation</td>
</tr>
<tr>
<td>☑ Demolition</td>
</tr>
<tr>
<td>☑ Full Containment with Negative Pressure</td>
</tr>
<tr>
<td>☑ Full Enclosure</td>
</tr>
<tr>
<td>☑ Glovebag Procedure</td>
</tr>
<tr>
<td>☑ Non-Exempted (?) and Non-Friable Procedure</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)</td>
</tr>
<tr>
<td>Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)</td>
</tr>
<tr>
<td>Amount (Specify SF or LF)</td>
</tr>
<tr>
<td>Abatement Type</td>
</tr>
<tr>
<td>---------------</td>
</tr>
<tr>
<td>Removal</td>
</tr>
<tr>
<td>Repair</td>
</tr>
<tr>
<td>Encapsulate</td>
</tr>
<tr>
<td>Endorse</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>See Attached Scope of Work</th>
</tr>
</thead>
<tbody>
<tr>
<td>☑ ☑ ☑ SEE ATTACHED</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Registered Waste Hauler</th>
<th>Cubic Yards of Waste</th>
</tr>
</thead>
<tbody>
<tr>
<td>AbateTech, Inc.</td>
<td>40</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Registered Landfill</th>
<th>Name of Registered Waste Hauler</th>
</tr>
</thead>
<tbody>
<tr>
<td>G.R.O.W.S. Landfill</td>
<td>NJDEP Waste Hauler ID No.</td>
</tr>
<tr>
<td></td>
<td>18750</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City, State</th>
<th>Disposal Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lumberton, NJ</td>
<td>7/29/16</td>
</tr>
</tbody>
</table>

| Completed By (Print or Type) Title Signature |
|---------------------------------------------|-------|
| Gwendolyn Trumbetti Operations Coordinator |       |

<table>
<thead>
<tr>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>5/21/16</td>
</tr>
</tbody>
</table>

*Do not use this form for asbestos licensure exempted activities.*
c. As part of the abatement work, remove and dispose of the following asbestos-containing materials from the Frank Antonides Elementary School.

<table>
<thead>
<tr>
<th>Location</th>
<th>Material</th>
<th>Estimated Quantities</th>
<th>Removal Method</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boiler Room</td>
<td>Pipe Fitting Insulation</td>
<td>60 fittings*</td>
<td>Full Containment</td>
</tr>
<tr>
<td></td>
<td>Boiler Breaching</td>
<td>400 sf*</td>
<td>Removal Per NJAC 5:23-8.19 Occupied</td>
</tr>
<tr>
<td></td>
<td>Pipe Insulation</td>
<td>300 ft*</td>
<td>Building Conditions</td>
</tr>
<tr>
<td></td>
<td>Tank Insulation</td>
<td>400 sf*</td>
<td></td>
</tr>
<tr>
<td>Crawlspace</td>
<td>Pipe Insulation</td>
<td>1,100 ft*</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Pipe Fitting Insulation</td>
<td>120 fittings*</td>
<td></td>
</tr>
</tbody>
</table>

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

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

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

f. 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 negative air system that maintains a negative pressure of -0.05 inches of water column (W.C.) at the decontamination unit. The negative air system shall include a digital recording manometer 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.

g. The decontamination unit shall be attached directly to the work area and all means of progress shall be through the decontamination unit. All materials utilized in the construction of the containment will be fire rated in accordance with NJAC 5:23-8. Separation barriers shall 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. Place 2 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 permits, 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)
6 / 21 / 16

Name of Building Owner/Operator (2)
Trustees of Princeton
/ Job #1665-5014 Job # 82816

Agencies Notified
☒ EPA
☐ DOLWD
☐ DHSS
☐ DCA
(NJAC 5:23-8)
Type Notification
☒ Initial
☐ Amended
☐ Amendment #
☐ Emergency (including justification)
☐ Cancellation

Name of Building Owner/Operator (2)
Trustees of Princeton University E.A. MacMillen, BLJ

Street Address
Princeton, NJ 08544

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

City, State, Zip Code
Princeton, NJ 08544

Current Use (Prior if being demolished)

County (6)
Mercer

County Code (7)/STATE USE ONLY

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

Name of Abatement Contractor (9)
AbateTech, Inc.

Name of OSHA Monitor
EMSL Analytical

Street Address
3 Terri Lane

Street Address
30 Maple Ave. PO Box 25

City, State, Zip Code
Burlington, NJ 08016

City, State, Zip Code
Lumberton, NJ 08048

License No.
609-256-2107
609-386-8800
00529

Telephone No.

Telephone No.

Project Manager for Monitoring Firm
Michael R. Koehn

Project Manager for Monitoring Firm
Telephne No.

Start Date (10)
7 / 25 / 16

Scheduled Completion Date (11)
8 / 31 / 16

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

Scope of Work (Check all that apply)
☒ ≥3 sf or ≥3 lf
☒ ≥160 sf or ≥280 lf
☒ Renovation
☐ Demolition
☐ Full Containment with Negative Pressure
☐ Mini-Enclosure
☐ Glovebag Procedure
☒ Non-Exempted(*) and Non-Friable Procedure

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

Location Normally Used Solely by Maintenance/Custodial Staff

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

Amount (Specify SF or LF)

Exterior
Window Caulk & Glazing 1,880 LF

Name of Registered Waste Hauler
AbateTech, Inc.

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

City, State
Lumberton, NJ

Disposal Date
8/31/16

Name of Registered Waste Hauler ID No.
18750

Cubic Yards of Waste
40

Completed By (Print or Type)
Gwendolyn Trumbetti

Title
Operations Coordinator

Signature

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

Date of Notification (1)

| 6 | 21 | 16 |

Name of Building Owner/Operator (2)
PSE&G / Job #1606-5024

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

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

Street Address
4000 Hadley Road

City, State, Zip Code
South Plainfield, NJ

Name of Contact
Mark Domingues

Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3)
PSE&G - Delair Substation

Street Address
576 June Road

City (5)
Pennsauken, NJ 08110

County (6)
Burlington

County Code (7) / STATE USE ONLY

Current Use (Prior to being demolished)
Substation

Name of Monitoring Firm Hired by Building Owner (8)
Health and Safety Services

ASCM No.

Name of Abatement Contractor (9)
AbateTech, Inc.

Street Address
30 Maple Ave. PO Box 25

City, State, Zip Code
Lumberton, NJ 08048

Project Manager for Monitoring Firm
Jim Proctor

Telephone No.
856-452-1311

License No.
00529

Start Date (10)
6 / 29 / 16

Scheduled Completion Date (11)
7 / 1 / 16

Name of OSHA Monitor
EMSSL Analytical

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

Time of Abatement: AM- PM- PM- AM

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

Description of Asbestos Containing Material (ACM)
(12)

Amount
(Specify
SF or LF)

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

Exterior

- Excavated Transite Pipe

2,500 LF

Name of Registered Waste Hauler
Waste Management

NUDEP Waste Hauler ID No.
18750

Cubic Yards of Waste
12

G.R.O.W.S. Landfill

City, State
Camden, NJ

Disposal Date
7/1/16

City, State
Tullytown, PA

Completed By (Print or Type)
Gwendolyn Trumbetti

Title
Operations Coordinator

Signature

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

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>6/20/16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Building Owner/Operator (2)</td>
<td>Exeter 319 Richard, LLC</td>
</tr>
<tr>
<td>Agencies Notified</td>
<td>EPA, DEP, DOL, DOH, DCA</td>
</tr>
<tr>
<td>Type Notification</td>
<td>Initial</td>
</tr>
<tr>
<td>Street Address</td>
<td>140 West Germantown Pike suite 150</td>
</tr>
<tr>
<td>City, State, Zip Code</td>
<td>Plymouth Meeting, PA 19462</td>
</tr>
<tr>
<td>Name of Contact</td>
<td>Henry Steinberg</td>
</tr>
</tbody>
</table>

FACILITY INFORMATION

| Name of Facility Where Abatement is Taking Place (3) | 319 Richard Mine RD |
| Street Address | 319 Richard Mine Rd. Suite 500 |
| City, State, Zip Code | Wharton, NJ |
| County Code | 15000 |
| Current Use (Prior to being demolished) | |
| Name of Monitoring Firm Hired by Building Owner (8) | |
| ASCM No. | |
| Name of Abatement Contractor (9) | Yannuzzi Environmental Services |
| Street Address | 135 Kinnelon Rd suite 102 |
| City, State, Zip Code | Kinnelon, NJ 07405 |
| Project Manager for Monitoring Firm | |
| Telephone No. | 908-218-0880 |
| License No. | 01228 |
| Start Date (10) | 6/30/16 |
| Scheduled Completion Date (11) | 7/5/16 |
| Occupancy Status During Abatement (Check Only One) | Facility Closed/Vacated During Entire Period of Abatement |
| Scope of Work (Check All That Apply) | Renovation, Demolition |
| Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility | Office Floor |
| Is Location Normally Used Solely by Maintenance/Custodial Staff? (12) | No |
| Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous) | VAT |
| Amount (Specify SF or LF) | 2000 |
| Name of Registered Waste Hauler | Yannuzzi Group |
| NJ/DEP Waste Hauler ID No. | 17487 |
| Cubic Yards of Waste | 20 |
| Name of Registered Landfill | |
| Disposal Date | 7/5/16 |
| City, State, Zip Code | Morrisville, PA |
| Completed by | John Mucha |
| Title | Project Manager |

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

Date of Notification: 6/21/16

Name of Building Owner/Operator: Gene Limoli

Type of Notification: Initial

Name of Facility Where Abatement is Taking Place: Residence

Type of Facility: Residential

Street Address: Woodbridge, Middlesex

City/State/Zip Code: Woodbridge, NJ 07096

Name of Monitoring Firm Hired by Building Owner: ASCW No.

Name of Abatement Contractor: A.MAC Contracting Inc.

Street Address: 185 Weelant Avenue

City/State/Zip Code: Midland Park, NJ 07432

Start Date (DD): 6/30/16

Scheduled Completion Date (DD): 7/10/16

Occupancy Status During Abatement (Check Only One):

- Renovation
- Demolition

Location of Asbestos-Containing Material (ACM) to Be Abated in Facility:

Yes: Kitchen

Vendor: VAT

Amount: $2556

Name of Registered Waste Hauler: NJDEP Waste Hauler LLC

City/State/Zip Code: Newark, NJ

Compiled by: Joseph Vocatura

Title: Vice President

Signature:

Date: 6/21/16

Notes: This form is for asbestos license excepted activities.
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:58 and 12:12E)

Date of Notification: 6/17/16

Name of Business Concern/Project: [REDACTED]

Address: WESTFIELD, N.J.

Project Manager/Supervising Firm: [REDACTED]

Type of Facility: [REDACTED]

Name of Owner/Person in Charge: ERNO BELFI

Date of Notice: JUN-21-2016

Name of Facility (Where Abatement is Taking Place): 

1. RESIDENCE

   Westfield,

2. UNION

   Westfield,

Address:

1. Westfield,

2. Westfield,

County:

1. Union

2. Union

City:

1. Westfield

2. Westfield

State/Zip Code:

1. 07091

2. 07091

Facility Information:

Facility Type:

1. RESIDENTIAL

2. RESIDENTIAL

Name of Management Contractor:

1. MAC Contracting Inc.

2. MAC Contracting Inc.

Name of CBIA Number:

1. Omega Environmental Services

2. Omega Environmental Services

Schedule of Completion:

1. 6/28/16

2. 6/28/16

Occupancy Status:

1. Full Occupancy

2. Full Occupancy

Other (Check All that Apply):

1. Repainting

2. Repainting

Location of Location:

1. Basement

2. Basement

Abatement Material (ACM) (Check All that Apply):

1. PIPE INSULATION

2. PIPE INSULATION

Name of Responsible Official/Firm:

1. [REDACTED]

2. [REDACTED]

Date: 6/16/16

Title: Vice President

REDACTED
# State of New Jersey
**NOTIFICATION OF ASBESTOS ABATEMENT**
(Pursuant to NJAC 8:80 and 5:16)

<table>
<thead>
<tr>
<th>Date of Notification (1)</th>
<th>Name of Building Owner/Operator (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>6/21/16</td>
<td>Docent</td>
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</table>

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<thead>
<tr>
<th>Agencies Notified</th>
<th>Name of Facility Where Abatement is Taking Place (3)</th>
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<tbody>
<tr>
<td>EPA, DEP, DOL, DOH, DCA</td>
<td>Residential</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>City, State, Zip Code</th>
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<tbody>
<tr>
<td></td>
<td>Trenton, NJ 08620</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>County (6)</th>
<th>County Code (7) (STATE USE ONLY)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Burlington</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Monitoring Firm Hired by Building Owner (8)</th>
<th>Name of Abatement Contractor (9)</th>
</tr>
</thead>
<tbody>
<tr>
<td>DB Environmental</td>
<td>Stevens Environmental Services, Inc.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>City, State, Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 Berkeley Place</td>
<td>Freehold, NJ 07728</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Telephone No.</th>
<th>License No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>(732) 740-8408</td>
<td>00493</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Name of OSHA Monitor</th>
<th>Street Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>DB Environmental</td>
<td>4 Berkeley Place</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City, State, Zip Code</th>
<th>Name of Registered Landfill</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allentown, NJ 08501</td>
<td>GROWs Landfill</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Cubic Yards of Waste</th>
<th>Disposal Date (16)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 CU</td>
<td>7/15/16</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Registered Waste Hauler</th>
<th>Hauler ID No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stevens Environmental Services, Inc.</td>
<td>18292</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)</th>
<th>Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)</th>
<th>Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)</th>
<th>Amount (Specify SF or LF)</th>
<th>Abatement Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basement</td>
<td>X</td>
<td>Boiler Insulation 30 sf</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Project Manager</th>
<th>Title</th>
<th>Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mahlon E. Stevens</td>
<td>Project Manager</td>
<td>6/21/16</td>
</tr>
</tbody>
</table>

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

### Date of Notification (1)
6/21/16

### Name of Building Owner/Operator (2)
J & J Builders

### Street Address
315 E. Mill Rd.

### City, State, Zip Code
Maple Shade, NJ 08052

### Name of Contact
Joe Angelo

### Telephone Number

### FACILITY INFORMATION

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

**Street Address**

**City (5)**
Maple Shade, NJ 0052

**County (6)**
Burlington

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

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

**Street Address**
PO Box 322
Allentown, NJ 08501

**City, State, Zip Code**

**Project Manager for Monitoring Firm**

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

**Start Date (10)**
7/5/16

**Scheduled Completion Date (11)**
7/15/16

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

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

- ≥ 3 sf or ≥ 3 if
- ≥ 160 sf or ≥ 260 if
- Renovation
- Demolition
- Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility
- N/A
- Is Location Normally Used Solely by Maintenance/Custodial Staff?
  - Yes
  - No
  - N/A
- Exterior
- Transite Siding
- Renovation
- Demolition

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

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

**Amount (Specify SF or LF)**
1700 sf

**Name of Registered Waste Hauler**
Stevens Environmental Services, Inc.

**NJDEP Waste Hauler ID No.**
18292

**Cubic Yards of Waste**
5 CU

**Name of Registered Landfill**
GROWS Landfill

**City, State**
Allentown, NJ

**Disposal Date**
7/15/16

**City, State**
Morrisville, PA

**Completed By**
Mahlon E. Stevens

**Title**
Project Manager

**Signature**

**Date**
6/21/16

---

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

**NOTIFICATION OF ASPEROS ABATEMENT**

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

**Check #: 0258**

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**Date of Notification:** 06/22/16

**Name of Building Owner/Operator:** 175 Crooks Ave LLC

**Street Address:** 175-177 Crooks Ave

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

**Telephone Number:**

---

### FACILITY INFORMATION

- **Name of Facility Where Abatement is Taking Place:** Residential House
- **Type of Facility:** Residential House
- **Square Feet:** 2000
- **# of Floors:** 2
- **Bldg. Age:** 50+

---

### Name of Monitoring Firm Hired by Building Owner

- **Name:** Harmony Contracting Inc
- **Address:** 360 Palisade Ave
- **City, State, Zip Code:** Garfield, NJ 07026

---

### Project Manager for Monitoring Firm

- **Name:** Harmony Contracting Inc
- **Address:** 360 Palisade Ave
- **City, State, Zip Code:** Garfield, NJ 07026

---

### Scope of Work

- **Location of Asbestos-Containing Material (ACM) TO BE ABATED:**
  - Front Porch
  - Rear Porch
- **Renovation:**
  - Roofing Material: 100 SF
- **Demolition:**
  - Roofing Material: 100 SF

---

**Name of Registered Waste Hauler:** Harmony Contracting

**City, State:** Garfield, NJ

**Waste Hauler ID No.:** 033137

**Cubic Yards of Waste:** TBD

**Disposal Date:** TBD

**Name of Registered Landfill:** GROWS Landfill

**City, State:** Morrisville, PA

---

**Completed by:** Tina Caporino

**Title:** Secretary

**Date:** 06/22/16

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