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

Date of Notification (1) 6	-12) mercial bu	dg. A		
Myomissing, PA Mame of Contact Myomissing, PA Name of Contact Susan Peck Mame of Facility Where Abatement is Taking Place (3) Sovereign Bank Street Address 290 Ferry Street Susan Peck Square Feet # of Floors Newark Square Feet # of Floors Newark Street Address Mame of Monitoring Firm Hired by Building Owner (8) Hillmann Consulting ASCM No. Street Address Street Address JVN Restoration Inc Street Address Street	-12) mercial bu	dg. A		
DHSS DCA	-12) mercial bu	dg. A		
Myomissing, PA Semergency (including justification) Cancellation Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Subchapter 8 (Other than K-12) Cancellation County (5) County (6) County (6) County (7)(STATE USE ONLY) Current Use (Prior if being demonstrated in the prior of	-12) mercial bu	dg. A		31
DHSS DCA	-12) mercial bu	dg. A		
Name of Contact Susan Peck	-12) mercial bu	dg. A		
Cancellation Susan Peck FACILITY INFORMATION	-12) mercial bu	dg. A		
FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Sovereign Bank Street Address 290 Ferry Street City (5) Newark County (6) Essex Name of Monitoring Firm Hired by Building Owner (8) Hillmann Consulting Street Address 1600 Route 22 East City, State, Zip Code Union NJ 07083 Type of Facility (4) School (K-12) Subchapter 8 (Other than K-100 County Code (7) (7) STATE USE ONLY) Subchapter 8 (Other than K-100 County Code (7) (7) STATE USE ONLY) Subchapter 8 (Other than K-100 County Code (7) (7) STATE USE ONLY) Square Feet # of Floors 3,000 1 County Code (7) (7) STATE USE ONLY) Square Feet # of Floors 3,000 1 County Code (7) (7) STATE USE ONLY) Square Feet # of Floors 3,000 1 County Code (7) (7) STATE USE ONLY) Square Feet # of Floors 3,000 1 Street Address 47 Foster Road City, State, Zip Code Union NJ 07083	mercial bu	dg. A		
Name of Facility Where Abatement is Taking Place (3) Sovereign Bank Street Address 290 Ferry Street City (5) Newark County (6) Essex Name of Monitoring Firm Hired by Building Owner (8) Hillmann Consulting Street Address 1600 Route 22 East City, State, Zip Code Union NJ 07083 Type of Facility (4) School (K-12) Subchapter 8 (Other than K-1) Square Feet # of Floors 3,000 1 County Code (7)(STATE USE ONLY) Current Use (Prior if being demonstration of the state of the subchapter of the subchapter of the subchapter of the subchapter 8 (Other than K-1) Square Feet # of Floors 3,000 1 Current Use (Prior if being demonstration of the subchapter of the subchapter of the subchapter of the subchapter 8 (Other than K-1) Square Feet # of Floors 3,000 1 Current Use (Prior if being demonstration of the subchapter of the subchapte	mercial bu	dg. A		
Sovereign Bank Street Address 290 Ferry Street City (5) Newark County (6) Essex Name of Monitoring Firm Hired by Building Owner (8) Hillmann Consulting Street Address 1600 Route 22 East City, State, Zip Code Union NJ 07083 Cother (i.e., private and common homes, etc.) Square Feet # of Floors 3,000 1 County Code (7)(STATE USE ONLY) Current Use (Prior if being demonstrated for the state of the state of the state of the state of the support of the state of the support of the state of the support of the s	mercial bu	dg. A		
Street Address 290 Ferry Street City (5) Newark County (6) Essex Name of Monitoring Firm Hired by Building Owner (8) Hillmann Consulting Street Address 1600 Route 22 East City, State, Zip Code Union NJ 07083 Union NJ 07083 Square Feet # of Floors 3,000 1 County Code (7)(STATE USE ONLY) Current Use (Prior if being demonstrated or special or speci	mercial bu	dg. A		
Street Address 290 Ferry Street City (5) Newark County (6) Essex Name of Monitoring Firm Hired by Building Owner (8) Hillmann Consulting Street Address 1600 Route 22 East City, State, Zip Code Union NJ 07083 City (5) County Code (7)(STATE USE ONLY) County Code (7)(STATE USE ONLY) County Code (7)(STATE USE ONLY) Current Use (Prior if being demonstrated or (9) JVN Restoration Inc Street Address 47 Foster Road City, State, Zip Code Union NJ 07083 Staten Island NY 10309	mercial bu	dg. A		
City (5) Newark County (6) Essex Name of Monitoring Firm Hired by Building Owner (8) Hillmann Consulting Street Address 1600 Route 22 East City, State, Zip Code Union NJ 07083 Square Feet # of Floors # of Floors ASCM No. Name of Abatement Contractor (9) JVN Restoration Inc Street Address 47 Foster Road City, State, Zip Code Staten Island NY 10309		300 mg /	ge	
Newark County (6) Essex Name of Monitoring Firm Hired by Building Owner (8) Hillmann Consulting Street Address 1600 Route 22 East City, State, Zip Code Union NJ 07083 County Code (7)(STATE USE ONLY) Current Use (Prior if being demonstrated of the prior if		300 mg /	ge	
County (6) Essex Name of Monitoring Firm Hired by Building Owner (8) Hillmann Consulting Street Address 1600 Route 22 East City, State, Zip Code Union NJ 07083 County Code (7)(STATE USE ONLY) ASCM No. Name of Abatement Contractor (9) JVN Restoration Inc Street Address 47 Foster Road City, State, Zip Code Staten Island NY 10309		45		
Rame of Monitoring Firm Hired by Building Owner (8) Hillmann Consulting Street Address 1600 Route 22 East City, State, Zip Code Union NJ 07083 ASCM No. 62252 Name of Abatement Contractor (9) JVN Restoration Inc Street Address 47 Foster Road City, State, Zip Code Union NJ 07083 Staten Island NY 10309	olished)			
Name of Monitoring Firm Hired by Building Owner (8) Hillmann Consulting Street Address 1600 Route 22 East City, State, Zip Code Union NJ 07083 ASCM No. Name of Abatement Contractor (9) JVN Restoration Inc Street Address 47 Foster Road City, State, Zip Code Staten Island NY 10309				
Hillmann Consulting 62252 JVN Restoration Inc Street Address 1600 Route 22 East 47 Foster Road City, State, Zip Code Union NJ 07083 City, Staten Island NY 10309				
Street Address 1600 Route 22 East 47 Foster Road City, State, Zip Code Union NJ 07083 Street Address 47 Foster Road City, State, Zip Code Staten Island NY 10309				
1600 Route 22 East 47 Foster Road City, State, Zip Code City, State, Zip Code Union NJ 07083 Staten Island NY 10309				
City, State, Zip Code Union NJ 07083 City, State, Zip Code Staten Island NY 10309				
Union NJ 07083 Staten Island NY 10309			-,	
Project Manager for Manifering Firm Telephone No. Telephone No. License No.				
Project Manager for Monitoring Firm Telephone No. Telephone No. License No.	9 2			
Brian Nemetz 732-616-4092 718-605-6256 00774				
Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor				
07 / 6 / 13 07 / 12 / 13 Testor Tech				
Occupancy Status During Abatement (Check only one) Street Address			-	
 ☑ Facility Closed/Vacated During Entire Period of Abatement 10 59 Jackson Avenue 				
☐ Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code		-		
Time of Abatement:AMPM/PMAM LIC NY 11101				
■ S2490500000 (MISSES				
Scope of Work (Check all that apply) □ Full Containment with Negative Pressure	ż			
□ ≥3 sf or ≥3 lf □ Renovation □ Mini-Enclosure				
□ Slovebag Procedure □ Non-Exempted (*) and Non-Friable Proce	edure			
Is Location		aten	nent	Туре
Location of Normally Description of			T -	
Asbestos-Containing Material (ACM) TO BE ABATED Used Solely by Asbestos Containing Material (ACM) Maintenance/ (i.e., thermal systems insulation, (Specify	Remova	Repair	Encapsulate	Enclosure
TO BE ABATED Maintenance/	ova	=	psu	Sur
(13) (12) other miscellaneous)	-		ate	. "
Yes No N/A		+	-	
Office 1 and 2				
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		+=	+=	
			上	
] 🗆
Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill				
Global Waste Industries Inc. Hauler ID No. Waste G.R.O.W.S., Inc.				
NJ-22147 5		.00	-	
Only, Glade			1	
nacketsterm, no	Date		+	
Completed By (Print or Type) Title Signature	1 / 1	75	1	3
John Tardy Senior Project Manager	16	25)
ASB-41 * Do not use this form for asbestos licensure exempted activities.	1		1	

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STATE OF NEW JERSEY

NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to N.J.A.C. 8:60 AND 12:120)

Date of Notification (1)	6/04	/2012			Name of Buildi	ng Owner/C	perator (2)	7,0	1117 H-	6-6-		
	6/21/	/2013			Trenton Pul	olic Schoo	ols District			- X		10-10-
Agencies Notified		Notification	Туре		Street Address	}	2 14 1	1		4.5		
X EPA		X Initial			108 North C	linton Av	enue 🔠 🗄	. (Gen	e dist	2		
▼ DEP			ed #		City, State, Zip	Code						
X DOL		Emerge	ncy (includ	ling	Trenton, NJ							
X DOH		justificat			Name of Conta	act		Tel Mu	mber			
X DCA		Cancella	ation		Naimish Ka							
Name of Facility Where Abat	ement is T	aking Place /3	Y	FACILITY IN	FORMATION Type of Facility	, (A)						
Trenton Central High S			<u>7</u>			/ (4)						
	SCHOOL VV	esi			School (K	(-12)						
Street Address					Subchapt	er 8 (Other	than K-12)					
1001 State Street				2-1-75	Other (i.e	e private &	commercial b	uildings.				
15	County (6)		County ((State U		homes, e							
1.0	1ercer		*						2			
Name of Monitoring Firm Him	ed by Bldg.	Owner (8)	ASCM N	lo.	Name of Contra							
T&M Associates			00145		MTM Metro	-	on					
Street Address	1 Tindall Road			8	Street Address	Remark to						
					135-137 McBride Avenue							
City, State, Zip Code					City State, Zipo	Code						
Middletown, NJ 07748	•				Paterson, N	J 07501						
Project Manager for Monitori	ng Firm	Telephone N	Number		Telephone Nur	mber		License	e Numb	er		
Kevin Burns		732-676-4	000		973-742-50	30		00809)			
Scheduled Start Date (10)		Scheduled 0	Completion	Date (11)	Name of OSH	A Monitor				-		
7/08/2013	The XIII I desired the D	8/15/2013			MTM Metro	Corporat	ion					
Occupancy Status During Ab	atement (C	heck only one	9)		Street Address							
					135-137 Mc	Bride Ave	enue					
Facility Closed/Vacated	During En	tire Period of	Abatement	ti .	City, State, Zip	Code				-		
Abatement Performed	Outside of i	Normal Facility	Hours									
Other-Describe:					Paterson, N	J 07501						
Source of Work (Check all th	at apply)			100000000000000000000000000000000000000								
> 3 sf or > 3 lf	×	Renovation		☑ Full	Containment wit	h Negative I	Pressure	X Mir	ni-Enclo	sure		
		_		8				ズ Glo	vehan F	Procedu	re	
> 160 sf or > 260 lf		Demolition		X Non	-Exempted(*) &				robug i	100000		
Location of Asbestos- Containing Material (ACM) in		ation Normally by Maint./Cus		Description of a		Amount (S	Specify SF or	LF)	Abate	ment Ty	pe	
Facility (13)	Staff?		iodiai	surfacing, VAT						(728)	383	3000 BB
	YES	NO	N/A	miscell.)					Rem.	Rep.		Enclose
Crawl Space/Basement Crawl Space	X			Pipe and Fitting Insu Duct Insulation	lation	5,060 LF 74 SF			×		X	-
Crawl Space	×			Contaminated Soil		300SF	100 845		X		X	
Name of Dea Wests Houles		I NUDED Was	to Hauler	ID#	Cubic Yards of	Masta		Namo	of Reg.	andfill		
Name of Reg. Waste Hauler NJDEP Waste Hauler ID#			1D #	100	VVasic		Tullytow		Landini			
MTM Metro Corporation . 26552				100		Dian Data	Tunyton		Situ Cto	10		
City, State						Disp. Date 8/16/2013			City, Sta			
	eterson,NJ 07501						07 10720 10					
Completed by (Print or Type)	-	<u>Title</u>			Signature Date							
Elizabeth Maslarkov	14	Business Adm	ninistrator		Elizabeth	Masla	rkov	6/21/20	13			
		- 30300 / idii			Elizabeth Maslarkov 6/21/2013							

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

Date of Notification (1)			Nama	(D. 740 - C		100						
-7				ker & Sor)wner/Operati 1	or (2) . 20	19 1111					
Asencies Notification Type Notification			Street A	Address De Court			14 UUN	25 A	12	: 5	12	
EPA Initial DEP Amended Amended Amended Emergency				ate, Zip Cor ank, Nj 0		wit [1				<u></u>	
DOH justification) Cancellation	100000 000 5 1			f Contact t Pena (E	ngineer)		EL L	Talanhasa Mu	mher	-	i	
Name of Courts 188			FACI	ILITY INFO	RMATION				_	-	98550	
Name of Facility Where Abatement is Takin B-4 Enterprises, LLC (The Clam H	ig Place (ut)	3)				-	Facility (4) neel (K-12)					
Street Address 1 Atlantic Street						☐ Sub	ochapter 8 (i er (i.e. priva	Other than K-1 te & commerci		ldings	, hom	ies,
City (5) Highlands, NJ 07732			-		T	Square		# of Floors		3ldg.	Age	
County (6) Monmouth	-		County (Code (7) USE ONLY)		Current t	Use (Prior if	being demolisi	ned)			
Name of Monitoring Firm Hired by Building GNPATP, LLC Environmental Sen)	ASCN	A No.		e of Abatem Enterpri	nent Contrac ses, Inc.	tor (9)				TE CONT.
Street Address 34 Southview Terrace South						Address 12th Str	eet					
City, State, Zip Code Middletown, NJ 07748						State, Zip (Ode NJ 0803	7				
Project Manager for Monitoring Firm Matthew Bianchi		T	Telepho 973-27	ne No. 70-5248	Tele	ohone No. -567-125		License N 01172	0			
Start Date (10) 06/06/2013	Schedul	ed Cor	npletion I	Date (11)		e of OSHA		122				-
Occupancy Status During Abatement (Cher	- On C	nei		<u> </u>	Stree	l Address		************	-			
Facility Closed/Vacated During Entire I Abatement Performed Outside of Norm Other – Describe:	Period of nal Facility	Abaten Hours	nent			State, Zip C	Code					
Scope of Work (Check All That Apply)					_						50/200III	
23 sf or ≥3 if ≥160 sf or ≥260 if		Renova Demolii				Mini-E	nclosure pag Procedu	vith Negative P re and Non-Friab				
Location of		Locati				The American	1	und redire nac		Abate	ement pe	t
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Ma	ed Sole intena todial S (12)	ly by nce/	(i.e. ti	Descriptions Containing hermal system surfacing. Vother miscella	Material (A) ns insulation AT, or		Amount (Specify SF or LF)	Remova	Repair	Encapsulate	Enclosure
	Yes	No	N/A						/al	٦	date	ure
Between Kitchen and Porch					Brown Line	leum		180 SF	Х			
In Kitchen adjacent to Porch				В	rown Wall	Mastic		400 SF	Х			
In Kitchen & Soda Gun Room					Transite Pa	anels	17-	4X8 Panels	Х			
Above Kitchen					ior & Interi	or Roofing	g 5	,000 SF	X			
Name of Registered Waste Hauler Newark Carting, Inc.		H	JDEP W auler ID		Cubic Yards of Waste	N	ame of Regi	stered Landfill	1	-	لسسا	
City. State Newark, NJ		_ [*			Disposal Date	,	ty, State					
Completed by	Title				Signatur	e 10	·	Dat	6			
Kati DiNatale	Office	e Man	ager		70	KUL)		-2	0-	-/_	3

ASS-41 (R-06-08)

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

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

Date of Notification (1)					Na	me of	f Building	Ow	ner/Operator (2) </th <th>1/2.</th> <th></th> <th></th> <th></th> <th>10000</th>	1/2.				10000
	19 / _	12			۱ ۷	Villin	ngboro l	Bro	ad of Educa	tion	13 July 25 6,				
Agencies Notified	Type Notifica	ation			Str	eet A	ddress			5.5	- 5	14 -			
The state of the s	☑ Initial				4	40 B	Beverly-l	Ran	icocas Rd			'' <:,	5/1		
	Amended Amended	74			Cit		ate, Zip Co				4/1.		0		
☑ DHSS	Amendm						ngboro,				" * 16				
DCA (NJAC 5:23-8)	☐ Emergen justificati		cluding		_		f Contact				Telephone Nu	ımhar			
	☐ Cancellat				1000		n Smith				Telephone 140	arriber			
·								incom.	RMATION						
Name of Facility Where Ab	atement is 1	akino	Place	(3)		ACII	LITTIN	FUF	KIVIATION	Type of Facility	(4)				
Willingboro High Sch			,	(0)						School (K-1					
Street Address											8 (Other than K-	-12)			
20 Kennedy Way											private and comm	nercial	buildi	ngs,	
				-					e	homes, etc.					
City (5)										Square Feet	# of Floors		3ldg.	_	
Willingboro		- 5.466			- 1 -					75,000	2		40+		
County (6)					C	ounty	Code (7)	(STA	TE USE ONLY)		rior if being demo	olished			
Burlington								053		High School					
Name of Monitoring Firm H	-	ding C	Owner (8)	ASC	M No	0.	Nar	me of Abateme	ent Contractor (9)				
TTI Environmental In	ıc.							В	BRISTOL EN	VIRONMENTA	L, INC.				
Street Address								Stre	eet Address						
1253 N. Church St								1	123 BEAVE	RSTREET					
City, State, Zip Code								City	, State, Zip Co	ode					
Moorestown, NJ 080	57							В	BRISTOL, PA	19007					
Project Manager for Monito	ring Firm			Te	lepho	ne No	D.	Tel	ephone No.		License No.		-0515		
Jim Guilardi				8	356-8	40-8	800	2	15-788-6040		00509				
Start Date (10) ON SI	ITE S	Sched	luled C	omp	letion	Date	(11)	Nar	me of OSHA M	lonitor					
6 / 24 /	13	(6_ /	_2	28_	/ _1	13	В	RISTOL EN	VIRONMENTA	L, INC.				
Occupancy Status During A	Abatement (Check	c only c	ne)	V	-		Stre	eet Address						- 1011-0
☐ Facility Closed/Vacated					emen	t	1	1	123 BEAVER	RSTREET					
				Ho:	urs - C	Descri	ibe	City	, State, Zip Co	ode					
Time of Abatement:	AM- <u>4:0</u>	OPM/		PM-	1:00A	M			RISTOL, PA						
Scope of Work (Check all ti	hat apply)														
☐ ≥3 sf or >3 lf			⊠ Re		tion				☐ Full Cont ☐ Mini-Enc	ainment with Ne	gative Pressure				
\(\sum_{\geq} \) ≥160 sf or ≥260 lf			□ De						☐ Glovebag						
											on-Friable Proced	dure			
					ation			30-10-13				A	bater	nent T	уре
Location of		n.			ally lely b	v	Anhan	too /	Description of		A	7	7	ш	m
Asbestos-Containing Ma TO BE ABATI)	Ma	nten	ance/				Containing Mar		Amount (Specify	Kemova	Repair	Encapsulate	Enclosure
IN Facility			Cust		I Staff	?	NAME OF STREET	s	urfacing, VAT,	or	SF or LF)	Va	. ¬	usc	Sun
(13)			Yes	(12 No		/Δ		oth	ner miscellane	ous)				ate	0
Rooms #301A & 302A						-	Eleor tile		nd mastic		177 SF	×	1	1	
	•			22 2		+							+		
Rooms # 405 thru # 409	9								nd mastic		627 SF		+-		
Rooms #219 & #221				\boxtimes					nd mastic		246 SF		+		
Boy's and Girl's locker		ces		\boxtimes		F	Control Sile		nd mastic		380 SF				
Name of Registered Waste		T			NJDE				oic Yards of	Name of Regis					
SERVICE TRANSPOR	RT GROUP	, INC	ς.		Haule 209		NO.	Was	sie		LANDFILL		na zesta		
City, State	was and							Disp	oosal Date	City, State					
NEW CASTLE, DE 19	720									WAYNESE	BURG, OH 446	88			
Completed By (Print or Type	e)	Title						E./85 =	Signature		, [Date ,		,	
Brian Scafiro		E	stimat	or					Brian	Scafiro	1-2	6/0	21/1	3	
-0.000	and the second second									- 1	1 4 -		/		

ASB-41 MAY 11 B S 12066

Date of Notification (1)		-	-		Mama	of Buildin	- 0		2)		_5	5		
	19 · /	12			12-1-1-1			wner/Operator (4		4	ζ.	
Agencies Notified	Type Notific	ation			Stree	Address	-				£	-	```	27
☐ EPA	Initial				440	Beverly	-Ra	ncocas Rd						
□ DOLWD		_	12000 TH 12000 S			State, Zip (<u> </u>		3	
☑ DHSS	Amendm	177		_		lingboro								
DCA	☐ Emerger justificati		cluding	3		of Contac	•	7 00040		Tolonhana N.				
(NJAC 5:23-8)	☐ Cancella					vin Smit				Telephone Num	Der			
									**					
					FA	CILITY IN	IFO	RMATION						
Name of Facility Where A		Taking	Place	(3)					Type of Facility	(4)				
Willingboro High So	chool								School (K-12		50			
Street Address									☐ Subchapter 8	3 (Other than K-12 rivate and comme	?)	uildin		
20 Kennedy Way	1.51								homes, etc.)		TCIAI D	ullulli	J5,	
City (5)		-							Square Feet	# of Floors	В	ldg. A	ge	
Willingboro									75,000	2		40+		
County (6)					Cour	ty Code (7)(ST	ATE USE ONLY)	Current Use (Pri	or if being demoli	shed)			
Burlington							<i>iii</i>	•	High Schoo					
Name of Monitoring Firm	Hired by Buil	dina C	Owner ((8)	ASCM	No.	Na	me of Abateme	ent Contractor (9)					
TTI Environmental I									VIRONMENTAI					
Street Address				- 1			-	reet Address	AUCHAILLIA	L, INC.				
1253 N. Church St							1		PETPET					
								1123 BEAVE						
City, State, Zip Code	A==						0.000	ty, State, Zip Co						
Moorestown, NJ 080				т=-				BRISTOL, PA	19007			_		
Project Manager for Monit	toring Firm			7002000	phone		1880	lephone No.		License No.				
Jim Guilardi					6-840		2	215-788-6040		00509				
Start Date (10) のん ら	ITE !	Sched				te (11)	Na	me of OSHA M	onitor					
_5 / _3 /	13	:	5/	6	_ / .	13	E	BRISTOL EN	VIRONMENTAL	_, INC.				
Occupancy Status During	Abatement (Check	only o	one)		0	Str	eet Address						-
☐ Facility Closed/Vacate	d During Enti	re Per	riod of	Abate	ment		1	1123 BEAVER	RSTREET					
				y Hour	s - Des	cribe	Cit	y, State, Zip Co	de		-			
Time of Abatement:	AM-2:3	0PM/		PM-12	2:00AN	1	1 3	BRISTOL, PA						
Scope of Work (Check all		ביןי												
Statement State Streets								☐ Full Conta	ainment with Neg	ative Pressure				
☐ ≥3 sf or ≥3 lf			⊠ Re					☐ Mini-Encl	osure					
≥160 sf or ≥260 lf			∐ De	molitic	n			☐ Glovebag		n-Friable Procedu				
			Is	Locat	ion	T	_	M IAOII-EXE	ripted () and Noi	I-Fliable Procedu				
Location of	of			Norma				Description of			Ab	atem	ent Ty	,,,
Asbestos-Containing N		1)		d Sole		Asbe	stos	Containing Mat		Amount	Re	Repair	5	Ē
TO BE ABAT	TED			intena todial s		(i.e		ermal systems i		(Specify	Remova	pair	ap	clos
IN Facility (13)	,			(12)				surfacing, VAT, her miscellaned		SF or LF)	<u> 9</u>		Encapsulate	Enclosure
(10)			Yes	No	N/A	1	Ů.	inci illiscellariec	,43)				ře	
Rooms #301A & 302A	*			×		Floor til	le aı	nd mastic		177 SF	×			
Rooms # 405 thru # 40	09			×		Floor til	le aı	nd mastic		627 SF	Ø			
Rooms #219 & #221						Floor til	e ar	nd mastic		246 SF	Ø			
Boy's and Girl's locke	r room offi	ces		×		Floor til	e ar	nd mastic		380 SF	Ø			
Name of Registered Waste					JDEP \		V. C.	bic Yards of	Name of Regist	ered Landfill	-21-2//625			
SERVICE TRANSPO	RT GROUP	, INC) .	H	auler II 20990		Wa	ste	MINERVA L	.ANDFILL				
City, State					20330		Dis	posal Date	City, State	***************************************			_	\dashv
NEW CASTLE, DE 19	9720									URG, OH 44688	\$			
Completed By (Print or Typ	oe)	Title						Signature	Control of the second		te_/	7		_
Brian Scafiro			stimat	or				Brian	Scolino /	of the	5/2	413)	

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Date of Notification (1)				Nar	ne of Buildin	na Ow	ner/Operator	(a)		<0	2	-		
_10 / _19 /	_ 1	2					ad of Educa				C	1/2		
Agencies Notified Type Noti	fication	1			et Address							, <	<u> </u>	
☐ EPA ☑ Initial							cocas Rd			5				97
☑ DOLWD ☑ Amend				City	, State, Zip									
☐ DCA ☐ Emerg					/illingboro		08046				1		40	
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Alama of Facility IAffrons Above 4				F	ACILITY IN	NFOR	RMATION						_	100-06-100
Name of Facility Where Abatement i Willingboro High School	s I akıı	ng Plac	æ (3)					Type of Facility (
								School (K-12)						
Street Address 20 Kennedy Way								Subchapter 8 Other (i.e., pri	(Other than vate and co	1 K-12) mmercia	lbui	iding	10	
City (5)								homes, etc.)					,.,	
Willingboro								Square Feet	# of Floor	rs	Bld	g. A	ge	
County (6)				-16				75,000	2			0+		
Burlington				Co	unty Code (7	7)(STA)	TE USE ONLY)	Current Use (Pric		emolished	d)			
Name of Monitoring Firm Hired by Bo	ildina	Owner	(8)	ASC	M No	Mom	an of Abotem	High School						
TTI Environmental Inc.		0	(0)	1.00	W 110.	100000		ent Contractor (9)						
Street Address						-		VIRONMENTAL	, INC.					
1253 N. Church St						1 985	et Address	07055						
City, State, Zip Code							State, Zip Co							
Moorestown, NJ 08057						1886	RISTOL, PA							1200
Project Manager for Monitoring Firm			Tel	ephone	e No	_	phone No.	19007	1					
Jim Guilardi			1		0-8800	1	5-788-6040		License N	10.				
Start Date (10)	Sche	duled (Comple	etion D	ate (11)		e of OSHA M	onitor	00509					
12 / 7 / 12	30. 70				12			/IRONMENTAL	INC					
Occupancy Status During Abatement	(Chec	k only	one)			_	et Address							
☐ Facility Closed/Vacated During En	Call - court live			ment			23 BEAVER	STREET						
Abatement Performed Outside of	Vorma	Facili	y Hou	rs - De	scribe		State, Zip Co				_			
Time of Abatement:AM-3:	<u>00</u> PM	11:30	PM	^	M		RISTOL, PA							
Scope of Work (Check all that apply)							D5:10 :							
□ ≥3 sf or ≥3 ff			novat				Mini-Enck	ninment with Nega	tive Pressu	re				
≥160 sf or ≥260 lf		□ De	emoliti	on			☐ Glovebag	Procedure						
		1-1-	Local	lion				opted (*) and Non-	Friable Pro	cedure				
Location of			Norma		1		Description of		(35 - 37) = 3	1	bat	eme	nt T	уре
Asbestos-Containing Material (AC	VI)		d Sole		Asbes	stos Co	ontaining Mate	erial (ACM)	Amount		P	R	m	ū
TO BE ABATED IN Facility			intena todial		(i.e.	., them	nal systems in	sulation,	(Specify	, 3		Repair	Encapsulate	Enclosure
(13)			(12)		4	othe	rfacing, VAT, or r miscellaneo	or us)	SF or LF) 2		,	Sula	sure
		Yes	No	N/A									ē	
Rooms #301A & 302A			×		Floor tile	e and	mastic		177 SF		3 [7		
Rooms # 405 thru # 409			×		Floor tile	e and	mastic	0	627 SF	×] [5		
Rooms #219 & #221			×		Floor tile	e and	mastic		246 SF	×	1 []		
Boy's and Girl's locker room off	ices				Floor tile	e and	mastic		380 SF	×	1 [5		
Name of Registered Waste Hauler			1,000	JDEP I		Cubic Waste	Yards of	Name of Register	red Landfill					_
SERVICE TRANSPORT GROU	, INC			20990		449216	•	MINERVA LA	NDFILL					
City, State	339 75					Dispos	sal Date	City, State						\dashv
NEW CASTLE, DE 19720	1							WAYNESBU	RG, OH 44	688				
Completed By (Print or Type)	Title					S	Signature	1. 0.		Date ,	101	,		\neg
Brian Scafiro	Es	timat	or				Dream	Scofiro		12/0	/	12		

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

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		AIRMA	OW	, State, Zip	Code				<u> </u>	_
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Cancell			1000				Telephone	Number		
				elvin Smi				- The Park		
Name of Facility Where Abatement is	Taking Pla	ice (3)	F.	ACILITY I	NFORMATION	T				
Willingboro High School		(0)				Type of Facilit				
Street Address						School (K-	12) r 8 (Other than	V 401		
20 Kennedy Way						Other (i.e.,	private and cor	n-12) nmercial	buildin	05
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Willingboro						Square Feet	# of Floors		Bldg. A	ge
						75,000	2		40+	•
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Burlington					•	High Scho	ol	Delicaron	1	
lame of Monitoring Firm Hired by Buil	ilding Own	er (8)	ASCA	/ No	Name of Abote					
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1253 N. Church St					Street Address					
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Moorestown, NJ 08057					BRISTOL, PA	19007				
roject Manager for Monitoring Firm			ephone		Telephone No.		License No		_	
Jim Guilardi		1 2								
				0.8800	215-788-6040					
tart Date (10)	Scheduled	Comple	etion Da				00509			
tart Date (10)	Scheduled QN	Comple	etion Da		Name of OSHA M	onitor	00509			
11 / 2 / 12	ON	Comple HOL	etion Da		Name of OSHA MA	onitor	00509			
	ON Check only	Comple HOL one)	etion Da		Name of OSHA MA BRISTOL ENV Street Address	onitor /IRONMENTA	00509			
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NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)									_ ~ \ _	100		
10 / 19	_ /	12	2		William	uilding Owner/Operato	r (2)	Ck-	75			-
Agencies Notified Tvo	e Notifi		-		- venting	boro Broad of Educ	cation	4.	<: s	1/1		
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DHSS 4666 A	Vmendn	nent#			City, State,	Zio Code		· · · · ·	4.			
LI DCA	Emerce	ncv (in	cluding	,	Willingb	oro, NJ 08046						_
(14470 5.25-0)	ustificat	ion)		•	Name of Co	Interd						
По	ancella	ition			Kelvin S		80	Telopho	ne Numi	per		
Name of Facility Where Abaten	nent is	Taking	Place	(3)	TACILIT	Y INFORMATION						_
willingboro High School	1			1-7			Type of Facil	lity (4)				
Street Address	100						School (K	(-12)				
20 Kennedy Way							T C Subchant	07 B /Othor M	n K-12)			
City (5)							homes, et	. Drawin and	commen	d lek	ullding	8,
Willingboro							Square Feet					
County (6)							97.000	1		BI	ldg. Ag	10
Burlington					County Code	(T)(STATE USE ONLY)	Current Head	2		1	40+	
Name of Monitoring Firm Hired b	W D. W					,	Mish o-1	rifor if being d	lemolish	ed)		
TTI Environmental Inc.	y Buildi	ing Ow	mer (8)) A:	SCM No.	Name of Abeter	High Scho)OI				
						Name of Abateme	nt Contractor (9)				
Street Address	DE HELLES					BRISTOL EN	VIRONMENT,	AL, INC.				
1253 N. Church St						Street Address			.			_
City, State, Zip Code						1123 BEAVER	STREET					
Moorestown, NJ 08057						City, State, Zip Coo						_
Project Manager for Monitoring Fire	rm		T	alanh	one No.	BRISTOL, PA	19007					
Jim Guilardi			1.		ne No. 340-8800	Telephone No.		License N	la .			
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Nogheck

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 8:60 and 12:120)

Date of Notification	(1) 6/13/	2013		I N	lame	of C	Bui	ding O	wner / Operato	r (2) ²	413 JUN 20	- No.				
Agencies Notified EPA		Notifica	tion	5	tree ne	t A	ddre	ss Plaza	wner / Operator	A. j	1000 1000	417 2:50				
☐ DEP ☑ DOL ☑ DOH ☐ DCA		Emer	ded R#1-6/21/ gency ellation	13 V	Voo lame	db e of	ridg Cor hilb	Jip Co je, NJ ntact in	07095		ELICENS	11/32	elephor	ne N	umbe	er
		neskwo.		155.22°	FA	CI	LIT	INFO	RMATION							
Name of Facility W Hess Corporation Street Address		bateme	nt is Taking Pla	ace (3)				Type of Facili	K-12)	Other than K-	.12)				
123 Derousse A	ve.									e. priv	ate & commer	cial building	s, home		tc.)	_
City (5)		-	County (6)	Col	intv	Co	de (7)	- Coquaro i cor		01110010		-99			
Pennsauken			Camden			-	uo (.,	Current Use	(Prior	if being demo	lished)				
Name of Monitorin	g Firm I	Hired b	y Building Own	er (8)		1	ASC	M No.	Name of Aba Bristol Env			9)				
Street Address									Street Addres				St. 63			
28 N. Pennell Ro City, State & Zip C	ode		12				-		City, State &	Zip Co	ode					
Media, PA 1906				Tolon	han	- NI	l. mak		Bristol, PA Telephone N			License Nu	ımher			
Project Manager for Dave Turotsy	or Monit	oring F	ırm	Telep 800-				ei	(215)788-60	140		00509				
Scheduled Start D ON HO			Scheduled Con	npletic	n Da	ate	(11)		Name of OSI Bristol Env							
Occupancy Status	During	Abater	nent (Check or During Entire P	nly one	e) of Ah	nate	eme	nt	Street Addres		pet		W 255	100		
Abatemen	t Perfor	med O	utside of Norma						City, State &	Zip C	ode			•	Sind .	
Describe:			oval Abatement: 7	AM –	3:30	PN	Л		Bristol, PA	1900	7					
Scope of Work (C											Full Contain	ment with Ne	egative	Pres	ssure	
☐ ≥3 sf or ≥3	l If			\boxtimes	Re	no	vatio	n			Mini-Enclose		•			
≥160 sf ≥2					De	mo	olitio	n			Glove Bag F Non-Exemp	Procedures ted and Non-	-Friable	Pro	cedu	ıre
	Location	n of		Is	Loca	tio	n	T	Descriptio	n of		Amount	Aba	tem	ent T	уре
Asbe Ma	stos-Co aterial (ntainin ACM)	g		olely	by	,		Asbestos-Cor Material (A (i.e., thermal s	CM)		(Specify SF or LF)	R	70	Enc	En
10	BE AB in Faci (13)	lity		Main		St		i	nsulation, surfa or other miscel	cing, \	/AT		Removal	Repair	Encapsulate	Enclosure
	(13)			Yes	No		N/A								e	
Tank 2021							M	Transi	te Panel			1,760 SF				
Tank 2022							\boxtimes	Transi	te Panel			864 SF	X	H	H	님
		- Kalendara				1							ᆛ片	님	H	H
				H	F	1	井			-			H	H	H	H
				片	H	+	片					1.1	描	Ħ	H	IT
Name of Register	ed Was	te Hau	er					Waste D No.	Cubic Yards of Waste		ne of Register					
Service Transp	ort Inc			W			209	90	20		OWS Landf	ill				
City, State New Castle, De	laware)							Disposal Date 6/28/2013		, State rrisville, PA					
Completed By (Pr	Section Contract Cont				Т	itle)		Signature	٠ ,	. , ,	1	Date	,	,	
Gino Pizzigo		on d				7 C 7 C	ject nage		Lino Pez	zeg	our/y	(6/2	1/	13	

Date of Notification (1)		Nam	e of	Buildin	g Owner / Opera	ator (2)			3		100	-
6/13/2013 Agencies Notified Type Notification		Hes	s Co	orpora	tion			Jana Street	4	分。		
Agencies Notified Type Notification				dress				1//		₹.	50	
	0			ss Pla					4.60		20	
DOL 5308 Amended				e & Zip				•	44/1	1		
☑ DOH5292 ☐ Emergency		Nam	oof	Contac	NJ 07095				.0	1		
□ DOH S292 □ Emergency □ DCA □ Cancellation		0.000		nilbin				_	Teleph	one	Num	ber
			ocose e					L				
Name of Equility Where Abeternation Title		FA	CIL	ITY IN	FORMATION							
Name of Facility Where Abatement is Taking Hess Corporation	Place (3)			Type of Fac				2000			
Street Address						l (K-12)						
123 Derousse Ave.					Subcha	apter 8 (Other than K	(-12)				
123 Delousse Ave.					Other ((i.e. priva	ate & comme	rcial buildir	ngs, hor	nes,	etc.)	
City (5) County (6)	To		<u> </u>	(T)	Square Fee	et	# of Floors		Bldg. A	ge		
	loc	ounty	Cod	e (7)								
Pennsauken Camden	- 1				Current Use	e (Prior i	f being demo	lished)				
Name of Manitoring Firm Ulicad by D. Udi.					Exterior							
Name of Monitoring Firm Hired by Building C AET, Inc.	wner (8)		A:	SCM N		atemen	t Contractor	(9)				
Street Address					Bristol En	vironm	ental, Inc.					
28 N. Pennell Road					Street Addre							
City, State & Zip Code					1123 Beav							
Media, PA 19063					City, State 8							
Project Manager for Monitoring Firm	Teler	hone	Mur	mhor	Bristol, PA							
Dave Turotsy	800-	969-6	SAF	Tiber	Telephone N			License N	lumber			
Scheduled Start Date (10) Scheduled C					(215)788-6 Name of OS		14.	00509				
6/24/2013	6/28/2		(1	.,	Bristol En							
Occupancy Status During Abatement (Check					Street Addre		ental IIIC.					
Facility Closed/Vacated During Entire	Period	of Aba	atem	ent	1123 Beav		of					
Abatement Performed Outside of Nor					City, State &							
Describe: Exterior Removal					Bristol, PA							
Facility Occupied During Abatement:	7 AM -	3:30 F	M			. 10007						
Scope of Work (Check all that apply)												
	400-440						Full Containr	nent with N	eaative	Pres	SUITE	١
≥3 sf or ≥3 lf	\boxtimes		ovat				Mini-Enclosu	re	-3			
≥160 sf ≥260 lf		Den	noliti	on			Glove Bag P					
							Non-Exempte		-Friable	Pro	cedu	re
Location of		ocati			Descriptio	n of		Amount	Aba	teme	ent T	vpe
Asbestos-Containing Material (ACM)		ally L			Asbestos-Con		1	(Specify				7
TO BE ABATED	Maint	olely b		.	Material (A			SF or LF)	71		m	m
in Facility	Custo				(i.e., thermal s insulation, surface	systems	т		l en	Re	car	2
(13)		(12)			or other miscell	laneous	; I		Removal	Repair	Encapsulate	Enclosure
	Yes	No	N/A						=		ate	õ
Tank 2021			X	Trans	ite Panel		1	,760 SF				
Tank 2022	TFI		X	Trans	ite Panel			864 SF		H	뭐	H
	In	n	n					004 31		붜	뭐	Η
	TH	TI	Ħ						ᆛ井	뷔	뮈	뷰
		n	n						ᆛ井	붜	뮈	무
			T						ᆛ井	님	님	片
lame of Registered Waste Hauler		NJE	EP	Waste	Cubic Yards	Name	of Registered	d Landfill			إلا	
				D No.	of Waste	1.100	or registerer	Landin				
Service Transport Inc.			209	90	20	GROV	VS Landfill					- 1
City, State					Disposal Date	City, S	tate				-	\dashv
lew Castle, Delaware	- 52				6/28/2013		sville, PA					
completed By (Print or Type)		Title			Signature	2			Date	_		\dashv
Bino Pizzigoni			ject		/	/ · ·	- /	0		, /		
		Mai	nage	er	Dino Vi	Zzege	me/ y		6/13	1/13	3	
T 40044		-				11111						

No mall

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

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IN FAX affact	neu)
06/19/13	
Chk#1056 UiA FAX attack 06/19/13	ner

Go We	(Pursuant to NJAC 8:60 and 12:120)	
ate of Notification (1)	Name of Building Owner Operator (2) Nedevelopers, LLC	
gency Notified Type Notification	Street Aridress West field Hive. Ste# 202	
EPA DEP DOL Amendment #	City, State, Zip Code Fig. 2 April 115. 07208	37
(Chillippine)	Number of Contact HO SA (SARCIA	1
DOH Justinization DCA D Cancellation	EACH ITY INFORMATION	
ame of Facility Where Abatement is Talong Pl	Time of Earling (A)	
OW WESTFIELD AVE	= 2 (the P (Other than K-12)	
reet Address	DOWN (Let Interest of Control	
	Square Feet # of Floors Blog, Age	
ROSELLE PARK	10/000 Tabadh	
UNION UNION	County Code (7) (STATE USE Current Use (Prior if-being demonstration ONLY)	
	ner ASCM No. Name of Abatement Contractor (9)	
ime of Monitoring Firm Hired by Building Ow	NOVATECH. IDC	
reet Address	10.130x 814	
	City, Siste, Zip Code CID BRIDGE NO: 08857	÷
ity, State, Zip Code .	License No.	
roject Manager for Monitoring Firm	T XX (X)	
Scheduled	Commission Date (11) Name of OSHA Monitor	
tart Date (10) 3 53	(15/13) TOOUTENT	
remancy Status During Abatement Check	P.O. 130x 817	
Facility Closed/Vacated During Entire Perion Abelement Performed Outside of Normal Fa	OID DECISOR P	· •
Scope of Work (Check all that apply)	Differentiation Differentiation	
2 ≥ 3 sf or ≥ 3 lf D ≥ 160 sf or ≥ 260 lf	Mon-Exampled () and recent reason Aha	temen Type
	Is Location .	
Location of	Normally Description of Lisad Solally by Asbestos Containing Material (ACM) Amount (Specify 9)	Encapsulate
Ashestos-Containing Material (ACM) TO BE ABATED	Custodial (i.e., thermal systems insulation, SForLF)	Capsuls
IN Facility (13)	Staff? other miscellaneous)	6
(13)	Yes No MA	士
<u> </u>	N PLAN-OD OF LOOP 3 CYAND	\Box
TOISIDE & INSIDE	ROOF MAIERIAL	+
OF GO		
i Marta Hauler	NIDEP Waste Hauter Cubic Yards of Name of Registered Landfill Waste	
Name of Registered Weste Hauter	1850 3 G.K.O.	<u> </u>
NOVATECY INC	O 08957- Disposal Date Cally State	1
City. State BRIDGE M	Date 1/0	13
Consisted by A.	1 Chal A And Carlot	1
CARIOS HMEXONI !!	not use this form for asbestos licensure exempted activities.	1
ASB-41		

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

2013 JUN 26 417 2:50 (Pursuant to NJAC 8: 60-7 and 12: 120-7) Date of Notification (1) Name of Building Owner/Operator (2) Jersey City Public School District Street Address Agencies Notified 346 Clairmont Avenue [X] EPA [] Initial Notification City, State, Zip Code Jersey City, NJ 07305 [X] DOL X | Amended Notification Amendment Name of Contact [X] DOH | Cancellation Telephone Number [X] DCA Dianne Petolino [] Emergency FACILITY INFORMATION Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) School (K-12) William Dickinson High School [] Subchapter 8 (Other than K-12) Street Address [] [X] Other (i.e., private & commercial 2 Palisades Avenue buildings, homes, etc.) County Code (7) Square Feet # of Floors Bldg. Age City (5) County (6) (STATE USE ONLY) Current Use (Prior if being demolished) Jersey City Hudson Name of Monitoring Firm Hired by Building Owner (8) ASCM Name of Abatement Contractor (9) J.R. Contracting & Environmental Consulting, Inc. USA Environmental Management Inc. Street Address Street Address 344 West State Street 1141 Route 23 City, State, Zip Wayne NJ 07470 Trenton, NJ 08618 Project Manager for Monitoring Firm Telephone Number License Number Telephone Number 973 628-9500 00408 Willie Weisgarber 609-656-8101 Name of OSHA Monitor Scheduled State Date (10) Scheduled Completion Date (11) 7 3 0 0 2 Enviro Vision Consultants, Inc. Day Month Day Year Month Year Occupancy Status During Abatement (Check only one) Street Address [X] Facility Closed/Vacated During Entire Period 20-21 Wagaraw Road, Bldg. #34A of Abatement Abatement Performed Outside of Normal Facility City, State, Zip Code [X] Hours - Describe: 7:00a.m. - 3:30p.m. Fairlawn NJ 07410 Other - Describe: Scope of Work (Check all that apply) [] Demolition Full Containment With Negative Pressure 11 [X] Renovation Mini-Enclosure 1 $[] \ge 3 \text{ sf or } \ge 3 \text{ lf}$ Glovebag Procedure 11 \geq 160 sf or \geq 260 lf [X] Non Exempted (*) and Non-Friable Procedure Abatement Type E E Is N Location N Description of C C Location of Normally Asbestos-Containing Amount E R M E Asbestos - Containing Used Material (ACM) (Specify A P L 0 0 Material (ACM) Solely by (i.e., thermal systems SF or LF) P Maintenance / TO BE ABATED insulation, surfacing, VAT, V S S Custodial or other miscellaneous) A I U U in Facility (13) R Staff (12) Yes No N/A Rooms 331-333-335-336-337 X VAT 3604 SF X Rooms 331-333-335-336-337 150 SF X X Lab Tops 50 SF Rooms 331-333-335-336-337 X Glue Daubs Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Waste Name of Registered Landfill Hauler ID No. 17819 G.R.O.W.S J.R. Contracting & Environmental Consulting, Inc. Disposal Date City, State City, State Morrisville PA Wayne NJ 07470 Completed by (Print or Type) Title Date Signature 6/19/2013

G4667

Jerry Bijelonic

Project Manager

Print Form

State of New Jersey APPROVAL; NJOOL 6/21/13 NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NJAC 8:60 and 12:120)

Date of Notification (1) 6/21/13				Name o Wells	f Building Fargo E	Owner/C Bank	Operator	(2) 2		<u> </u>	~,				22	
Agencies Notified	Type Notification			Street A One V	ddress Vachovi	a Cente	ər	# 3	9 -	6	W 2.	5,,				
X DEP X DOL	Amended Amendment			Oity, Oit	ate, Zip Co otte, NC	Juc		(4 6/6Z/			• '6'				
DOH DCA	in Emergency justification) Cancellation				f Contact Colton					Te	lenhone	Nun	her	9		
Name of Facility Where	Abstament is Takin	a Diago (2)	FACI	LITY INF	ORMATI	ON	T	-6 F W /				-			
Wells Fargo Bank	Abatement is Takir	ig Place (o) 						of Facility (4	2)		V 40				
Street Address 1300 Hamilton Ave	enue							×	Subchapter Other (i.e. p etc.)					dings,	home	es,
City (5) Trenton								Squa 4300	re Feet)	2+	of Floors			ldg. A 0+	ge	
County (6) Mercer					Code (7) USE ONLY)	_	Curre	nt Use (Prid	r if be	ing dem	olish	ed)			
Name of Monitoring Fire Environmental Cor		Owner (8)		ASCN 0003	The state of the s				tement Con vironment							
Street Address 120 North Warren	Street							Addre	ss /er Street							
City, State, Zip Code Trenton, NJ 08608	<u> </u>								ip Code 19007							
Project Manager for Mo			Telepho	ne No.		34.412.432.302.47-22	none N	D114500000000000000000000000000000000000		Licen	se No).		3070		
Richard Beach	2000			92-4200			788-6			0050	9					
Start Date (10) 6/22/13		ed Con 3	Completion Date (11) Name of OSHA Monitor Bristol Environmental Inc Street Address													
Occupancy Status Durin	ng Abatement (Che	k Only O	ne)			1.50										
	cated During Entire med Outside of Norr															
Scope of Work (Check	All That Apply)							101, 1 A 19007								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit	olition					Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure							
		Is	Locati	on								2000		Abate	ment	t
Locatio			Normal ed Sole				scription							1 1 1	ре	
Asbestos-Containing TO BE AB In Fac (13)	BATED ility	Ma	intenar todial S (12)	nce/			s insula T, or		(Amount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure	
		Yes	No	N/A		-									Ф	
HVAC Mecha	nical Room				Pip	e Fittin	gs			7 LF		Х				
Name of Registered Wa Bristol Environment	Н	JDEP W lauler ID 8706		of Was			Name of F			ndfill						
City, State Bristol PA		Disposal Date City, State Morrisville PA														
Completed by		Title	Signature Date Signature 6/21/13													



[D-1-4N-66-4-41]					1	(D. "."	0 10 1 1	0)							
Date of Notification (1) 06 /	11 /	13			100000000000000000000000000000000000000	of Building	g Owner/Operator (
								4013 11:							
Agencies Notified	Type Notifica ☑ Initial	ition			/	Address			36 M 8:50						
⊠ DOLWD	☐ Amended					10th Str		161 E II	1. C. O.	_					
☑ DHSS	Amendme					State, Zip C		& 1 j	Telephone Number						
☐ DCA	☐ Emergend		cluding	1	1999		ghts, NJ 08035	7146	17/125 16						
(NJAC 5:23-8)	justificatio				1877/03/04/05	of Contac			Telephone Number	∋ Γ					
	Cancellat	ion				rgie High				_					
					FA	CILITY IN	IFORMATION								
Name of Facility Where A	batement is T	aking	Place	(3)				Type of Facility	334						
Residence								School (K-12	?) 8 (Other than K-12)						
Street Address									rivate and commerc	ial bu	ilding	S,			
401 10th Street	secong-wwys-contrant							homes, etc.)				38.500			
City (5)								Square Feet	# of Floors	Ble	dg. A	ge			
Haddon Heights								2100Sf	3 Floors	1	B3yr:	3.			
County (6)		0.000			Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demolish	ed)			7.2N9184		
Camden						Residence									
Name of Monitoring Firm I	Hired by Build	ling O	wner ((8)	ASCM No. Name of Abatement Contractor (9)										
MDG Environmenta	l				Graham-Tech Environmental Service, LLC.										
Street Address					Street Address										
1000 Maplewood Dr	ive; Ste 207	7			14 Read Drive										
City, State, Zip Code					City, State, Zip Code										
Maple Shade, NJ 08	052						Sicklerville, I	NJ 08081							
Project Manager for Monit	oring Firm			Tel	ephone	No.	Telephone No.		License No.						
Katy				8	56-755	-9300	856-318-1341		01158						
Start Date (10)	S	Schedu	uled C	omple	etion Da	ite (11)	Name of OSHA M								
06 / 21 /	13	_ 0	7_/	_0	3 / 13 Graham-Tech Environmental Service, LLC.										
Occupancy Status During	Abatement (0	Check	only o	one)			Street Address								
☑ Facility Closed/Vacated					ment		14 Read Driv	е							
☐ Abatement Performed						scribe	City, State, Zip Co	ode .				-			
Time of Abatement: 7/	M- <u>3:30</u> PM/		_PM		AM		Sicklerville, I	NJ 08081							
Scope of Work (Check all	that apply)						1								
			Z 5					tainment with Neg	gative Pressure						
☐ ≥3 sf or ≥3 lf ☐ ≥160 sf or ≥260 lf			Re De De De De Re Re					g Procedure							
									n-Friable Procedure	•					
C				Loca		-				Ab	atem	ent T	уре		
Location of				Norma	ally ely by		Description of		72	Z.	ZD.	ū	Щ		
Asbestos-Containing N TO BE ABA)			ance/		estos Containing Ma e., thermal systems		Amount (Specify	Remova	Repair	car	Co		
IN Facility			Cus		Staff?		surfacing, VAT	, or	SF or LF)	Val	-	Encapsulate	Enclosure		
(13)		+	.,	(12	7	-	other miscellane	ous)				ate			
			Yes	No						_	_	_	-		
Basement						Pipe In	sulation		200lf						
		_													
Name of Registered Wast	e Hauler	1			NJDEP	Waste	Cubic Yards of	Name of Regis	stered Landfill				1		
Graham-Tech Enviro		ervic	e, LL	c.	lauler I		Waste		North Landfill &	Γully	towi	1			
City, State					0004		Disposal Date	City, State	0 07 943 500405	8 88					
14 Read Drive Sickle	erville, NJ 0	8081						1513 Brod	entown Rd. Morr	isvil	le, P	Α			
Completed By (Print or Ty	pe)	Title		ent Signature Date											
Vernice Graham		Pr	reside	ent			Volle	LIA	W 10) - I	1-	13	5		

	N			ON OF ASE					CY	recle	#	9	5	2		
Date of Notification (1) 6–21–13	11 11 11 11 11 11 11 11 11 11 11 11 11			of Building testan				rch	20/	3 11100						
	lotification			Address Stoke	s Roa	ad			4	Ž	o i	ð 2	: 57.	1		
D DEP A	itial mended mendment #	_		tate, Zip C ford,		08055			Ç	LiĜei	4.76	1,0	2)			
XX DOH ju	mergency (including stification) ancellation			of Contact)			Tel	ephone N		Ġ.				
			FAC	CILITY INF	ORMAT	ION					-		, -			
Name of Facility Where Abateme Protestant Communit							☐ Scl	Facility (2)	th 1/	10)					
Street Address 100 Stokes Road							DX Oth etc	ner (i.e. p .)	rivate	er than K- & commer	cial bui			es,		
City (5) Medford							Square 1		# 0	f Floors 2		Bldg. 42 y	Age rs.			
County (6) Burlington				Code (7) USE ONLY)		Current chu		or if bei	ng demolis	shed)					
Name of Monitoring Firm Hired by	Building Owner (8)		ASCI	M No.		Name	of Abaten	nent Con	tractor	(9)						
EHS Environmental,	Inc.		ASCM No. Name of Abatement Contractor (9) Plymouth Environmental Co., Inc. Street Address													
Street Address 411 Southgate Court	. Süite E	Street Address 923 Haws Avenue City, State, Zip Code														
City, State, Zip Code	,															
Mickleton, NJ 08056			T-1	N-		1	ristow	m, PA	194		la.					
Project Manager for Monitoring Fi Jack Carney	rm	Telephone No.						920		License 1						
Start Date (10) 7–8–13	Scheduled 7-22-		3 Plymouth Environmental Co								o.,Inc.					
Occupancy Status During Abatem	ent (Check Only One))	Street Address													
☐ Facility Closed/Vacated Durin ☐ Abatement Performed Outsid ☐ Other – Describe: _work	le of Normal Facility H	lours	ment 923 Haws Avenue													
Scope of Work (Check All That Ap	ply)	To be to the		W.5. 345												
☐ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf		novat moliti					Mini-Er Gloveb	nclosure ag Proce								
	ls Lo	ocatio	on		400							Abate				
Location of	l lload 9	rmall				scription					-	1 1 1	pe			
Asbestos-Containing Material (<u>TO BE ABATED</u> In Facility (13)	Maint Custod	enan lial S 12)	ce/ taff?					nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure				
attic	Yes 1	No	N/A	pipe	fitt	inas		-	1 -		-					
attic	X	-					kota			LF	X					
accic				boiler rib gaskets 50 LF x												
Name of Registered Waste Hauler		I N.	DEP W	/aste	Cubic `	Yards	l Na	me of R	egister	ed Landfill						
Robinson Waste	На	10ler ID 7304	No.	of Was			ROWS,	_								
City, State Bellmawr, NJ	Disposal Date City, State Morrisville, PA															
Completed by Fimothy E. Bryan	Title Vice-I	Dro	eidor	nt 4	Si	gnature /	_	11/3)	Da	te 21-1	3				
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	TE	o ruei	IL !		1-		- 1/2	<u></u>							

CAK# 1857.

Date of Notification (1)			Name of Building Owner/Operator (2) Private Property											
6/17/2013				Privat	e Property									
Agencies Notified	Type Notification			Street A	ddress		201-							
□ EPA	Initial			132 A	xliffe Ave		<013.J	11/1 -						
DEP DOL	Amended Amendment		_ [City, Sta Westfi	ate, Zip Code ield J		1.1.		1/1 2:	şi				
П рон	Emergency justification)		İ	Name o	f Contact		\$c /		lephone N					
DCA	Cancellation			Hanny			-	,01						
Name of Facility Where	Abatament is Takin	a Diana (2		FAC	LITY INFORM	ATION	(=							
Private Property	Abatement is Takin	g Place (3)				Type of Facility	y (4)						
Street Address							School (K		ner than K-	40)				
132 Axliffe Ave							Other (i.e		& commer		ildings	, hom	es,	
City (5)			-				etc.) Square Feet	1#0	f Floors		Bldg.	Δαρ		
Westfield NJ							850	1		- 21	+50	-ge		
County (6)			1		Code (7)		Current Use (F	rior if be	ing demoli			10000		
Union				(STATE	USE ONLY)									
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCN	No.	1	of Abatement C		(9)					
N/A				N/A			Phase Group	o Inc				-510 3336		
Street Address N/A							Address 52nd Street S	i	6					
City, State, Zip Code							tate, Zip Code	oune# i						
N/A	¥7						t New York N	J 0709	3					
Project Manager for Mor	nitoring Firm		T	Telepho	ne No.	Teleph	one No.		License	No.				
N/A	NI .			N/A		201-	758-7158		001144	ŀ				
Start Date (10) 6/27/2013		d Cor 13	odo Environmental Corp											
Occupancy Status Durin	g Abatement (Çhec	k Only One	e)	Street Address										
Facility Closed/Vac	ated During Entire F	Period of A	baten	tement 2333 Route 22 West										
Abatement Perform Other – Describe:	ed Outside of Norm	al Facility	Hours	3		City, S	tate, Zip Code			7				
				Union NJ 07083										
Scope of Work (Check A	II That Apply)	green,	4			_	•							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		and the same of th	enova emolit			H	Full Containr Mini-Enclosu		Negative	Pressu	ıre			
A 2100 01 01 2200 11			SITIONI	3011			Glovebag Pro							
			-			Ā	Non-Exempt	ed (*) an	d Non-Fria	ble Pro				
			ocati									ement /pe	t	
Location Asbestos-Containing	100 .7 0		ormal I Sole			Description				-	Т.	, pc	\vdash	
TO BE AB	ATED		ntena	nce/ Staff?			laterial (ACM) insulation,	1 33.5	mount Specify	Z.	_	E	E I	
In Facil (13)		Cusii	(12)	otan r	Sur	facing, VA r miscellan	T, or	SF	or LF)	Remova	Repair	aps	Enclosure	
(10)		Yes	No	N/A	Oute	miscellan	eous)			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	=	Encapsulate	le l	
		res	INO	1							_			
Basem			X		pestos pa		-	2SF	Х	_				
Roof		X	flashing	around	chinney	(6LF							
			-		*									
Name of Registered Was	1 81	JDEP W	anta I A I	la Varda										
	auler ID I		ic Yards /aste	9000		red Landfil	ŧ							
Asbestos Transporta	1310					rprises								
City, State Shirley NV 11967						Disposal Date City, State								
Shirley NY 11967 Completed by Title						Signature O // Date								
Edwin Precilla		1. Manual 2	t Ma	nager		Signature	en This	llei	1	ate /18/20)13			

MO#20613923842

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	g Owner/0	Operator (2	2)					
	21 / _	13		E	Bill Bo	ockman			49.7 J.	9 <u>50</u> 47, 2,				
Agencies Notified	Type Notificat	tion			Street	Address				TO 1/1 2.	. 15			
☐ EPA	Initial			1	25 H	arvard Re	oad		****	4.9	47 -			
☑ DOLWD ☑ DHSS	Amended Amendme	nt #			City, S	itate, Zip (Code		di j					
□ DCA	Emergence		na	F	air H	aven, NJ	07704		C: 1,1,	-47,5	4			
(NJAC 5:23-8)	justification		.5		Name	of Contac	t			Telephone Nu	mber			
	Cancellation	on		F	Bill B	ockman								
					FAG	CILITY IN	FORMA	TION						
Name of Facility Where A	Abatement is Ta	aking Pla	ce (3)					Type of Facility	(4)			11730	
Private house									School (K-12		0.1			
Street Address		51 (41)								3 (Other than K-1 private and comm		ildina	ıs	
125 Harvard Road									homes, etc.)		ici olai b	an an ig		
City (5)	•								Square Feet	# of Floors	В	ldg. A	ge	
Fair Haven, NJ 07704														
County (6)					Coun	ty Code (7)	(STATE U	SE ONLY)	Current Use (Pr	ior if being demo	lished)			
Monmouth														
Name of Monitoring Firm	Hired by Build	ing Owne	r (8)	A	ASCM	No.	Name o	of Abateme	ent Contractor (9)			-		
200				Gr Tech LLC										
Street Address				Street Address										
							576 Va	lley Rd#	283					
City. State, Zip Code				City, State, Zip Code								-		
							Wayne	, NJ 0747	70					
Project Manager for Mon	itoring Firm		- 1	Tele	ohone	No.	Telepho	one No.		License No.				
							973-63	8-1777		01127				
Start Date (10)		cheduled				- 25 - 35	Name o	of OSHA N	lonitor	201/201	- 70			
	13	07	1_	02	_ / .	13	Enviro	vision Co	nsultants.Inc					
Occupancy Status During	g Abatement (C	Check onl	y one	e)	Envirovision Consultants,Inc Street Address									
	ed During Entir	e Period	of At	aten										
Abatement Performed	Outside of No	rmal Fac	ility l	lours	s - Des			ate, Zip Co				-		-
Time of Abatement: _	AIVI	PM/	-	NI	C180	AM	Fair La	wn, NJ 0	7410					
Scope of Work (Check al	I that apply)				ACCRET STOR				and decontamin	nation				
		N	Done	watio			Н	Full Con Mini-Enc	tainment with Ne	gative Pressure				
> 160 sf or >260 lf			Reno Dem				×	Gloveba	g Procedure	Tent with Negati	ive Pres	sure		
								Non-Exe	mpted (*) and No	n-Friable Proced	dure	1 -		
				ocati rmal							A	atem	ent T	ype
Location Asbestos-Containing	10.00	, (ly by	Ash		scription o	of terial (ACM)	Amount	R	R	m	g
TO BE ABA			Main						insulation,	(Specify	Removal	Repair	cap	Enclosure
IN Facili	ity			มลเ 5 (12)	Staff?			cing, VAT		SIF or LF)	va	=	Encapsulate	sure
(13)		74			T		otner	miscellane	ous)				ē	
		Ye	s	No	N/A	1000 DE	48 3300				100	-		
Crawl space			- L		X	Pipe in	sulation			100 LF	X	14	Ш	Щ
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						-						H		量
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Name of Registered Was	NJU	EP Wast	e Hauler ID No	Cubic Y	ards of Wast	le Name of Regi	stered Landfill							
Gr Tech LLC	0033785 TBD T.R.R.F. Inc						OF STREET	and the same of th						
City, State	Disposal Date City, State													
Wayne, NJ 07470	TBD Tullytown, PA													
Completed By (Print or T	ype)	Title	Signature Date											
N.Jevtic		Owner						1%.	ate we	nad	06/21/2	013		

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

2013-97A

B & G proj. #:	2010-077			**	*** Addition	al foot	age *****	Check #	5977	_		
Date of Notification	(1)	LLN	lama of 6		er/Operator (2		1 1/1/19	5				
10 16 1/12 11				ary Urban		,		*0 %, p				
Agencies Notified	Type Notificati	on S	treet Ado				4 410%	4,7				
 EPA	☐ Initial			bany Stre	et		SILL	4.				
☐ DEP		l c		, Zip Code				16 ·				
X DOL	X Amenda				NJ 08901			E91/1/57/- 11				
M DOH	On hold	N:	ame of C	ontact				Telephone	Number			
☐ DCA	Cancella	ation	Meris	sa Buczny	/) =		
				FAC	ILITY INFORM	MATION						
Name of facility wh	ere abatement is	s taking pla	ace (3)				1	Type of Facility (4				
A CHINA DON THE CONTRACTOR OF THE CONTRACTOR OF THE		,						1 =	(K - 12)		V 40	
Vacant Buildir	ng								pter 8 (Other Private/Comn			.)
Street Address									lomes, etc.		10	
564 George S	Street							Square Feet	# of Floors		Bldg.	Age
City (5)		Cour	nty (6)			0.0000000000000000000000000000000000000	nty Code (7) te use only)	Current Use (Pr	ior if being de	molis	hed)	
New Brunsw	ick, NJ 08901	Mic	ddlesex			(Sta	te use only)	residential ho				
Name of Monitorin	g Firm Hired by I	Bldg. Owne	er (8)		ASCM No.		Name of Abatement	Contractor (9)	3/1/2-2-07			
The Louis Be	erger Group, I	Inc.					B & G Restora	tion, Inc.				
Street Address							Street Address	Pood	HI-CUITAN AND AND AND AND AND AND AND AND AND A			
	Cemble Avenu	ie					105 Ryerson					
City, State, Zip Coo Morristown,	e NJ 07960						City, State, Zip Code Lincoln Park,					
Project Manager for	r Monitoring Firm		1	Phone Numi			Telephone Number (973)696-686	39	License Nur 0037			
Craig Napoli	itano	A		973-407-1			Name of OSHA Mor			_		
Scheduled Start Da	ite (10)	Sched	I. Comple	etion Date (1	1)		B & G Restora					
05/28/2013		08/0	03/2013	3	_		Street Address					
Occupancy Status							105 Ryerson F	Road				
Facility close	d/vacated during erformed outside	entire peri	od of aba	atement.			City, State, Zip Code					
Describe:		OI HOITHAI	racinty in			_	LincolnPark, N	J 07035				
Other-Descri												- 13
Scope of Work (ch	neck all that apply	Renovation	nn.			XF	ull Containment w/ne	egative pressure	Glovebag	proce	dure	
>3 sf or >3 lf	X X	>160 sf or					Mini-enclosure		Non-friable	e pro	cedui	re
	FD.			ly used sole	y				IR	R	0.00	E E
Location of asbestos-cor	ntaining	by mainte				tion of a	sbestos-containing	Amount	e m	e p	٠,	n
material to be abated in fac	e	staff(12)	Π.,	Т	- material	(ACM)		(Specify S LF)	r or o	a	1 7	a C
abated in fac	anty (10)	Yes	No	N/A					е	عل		-
SEE ATTACHE				X	SEE ATT			attached	X	쓔	갂늗	쉬뷰
with Locations	& quantities				with Loca	tions &	& quantities	_		뉴	╬	ϯ┼┼
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				=	1	With the second	and the second				ite	
Registered Waste H	Hauler	INJD	EP Haule	er ID#	Cubic Yards of	Waste	Name of Registere	d Landfill				
B & G Restorat	ion, Inc.		19563		250	o dom.		Resource & Rec	overy Cen	er		
City, State Lincoln Park, I	N I	5711		Disposal 5/28	Date 3/13 - 08/03	/13	City, State Tullytown	, PA				1.
Completed by (Prin		Title			Signature				Date			
Gordana Luna	1	Secreta	ry/Trea	surer			Gordana Luna		06/21/2	.013		

From: B & G Restoration, Inc., 105 Ryerson Road, Lincoln Park, NJ 07035

W13 JULY 26 JULY 5.

Attachment to Amended 10-day notification (Amendment #3 dated June 20, 2013)

102/2001

Re: 564 George Street, New Brunswick, NJ 08901

All of the following materials shall be removed.

Location of asbestos- containing material to be abated in facility	Is location normally used solely by maintenance/custodial	Description of asbestos- containing material (ACM)	Amount (Specify SF or LF)	Remove
Trash enclosure roof	N/A	Roof membrane	125 SF	Yes
M	N/A	Tar on drain	15F 4	Yes
	N/A	Tar on cap flashing	44 LF	Yes
1				

itle:	
signature:	
Date:	

State of NJ Notification of Asbestos Abatement

RECEIVED

B & G proj. #:	2013-97A	_	(P	ursuant	to NJAC 8: * Additional	60-7 : foota	and 12:120-7) age *****		Check #	5958							
Date of Notification		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	me of Buildi		r/Operator (2)		2013		7 500			. respectan	er ettergene				
0 16 1/11 12	1/1131				(Ellewai			X	1 FH 5	- 24							
Agencies Notified EPA	Type Notification	11	et Address 20 Alban		t		Alix	iui.	Vanit.	-		Y					
☐ DEP	О	Cit	, State, Zip	Code													
X DOL	✗ Amendme	ent	New Brun	swick,	NJ 08901				· · ·	Museba							
X DOH	On hold	Nar	ne of Conta	ct					Telephone	Number		は意					
□ DCA	Cancellat	ion	Merissa E	Buczny								C)		==			
				FACIL	LITY INFORM	ATION		TT.m.	e of Facility (4	4)							
Name of facility wh	nere abatement is	taking plac	e (3)					Тур	School	(K - 12)							
										apter 8 (C			12)				
Vacant Buildin	ig						·		Other (Private/C Homes, e	ommer						
Street Address	Stroot							Sa		# of Floo		Bld	g. Age	e			
564 George S	Street					Cour	nty Code (7)	54	uaic i ooi								
City (5)		Count	y (6)			2000	e use only)	Cu	rrent Use (Pr	ior if bein	g dem	olishe	d)				
New Brunsw	ick, NJ 08901	Mide	dlesex				7.										
Name of Monitorin		idg. Owner	(8)	T	ASCM No.	П	Name of Abatemen	nt Contra	actor (9)								
The Louis B	erger Group, I	nc.					B & G Restor	ation, l	nc.								
Street Address							Street Address										
	Kemble Avenu	е	To 11 - 11 - 12 - 12 - 12 - 12 - 12 - 12	UC-VANSING BA		105 Ryerson Road											
City State, Zip Coo	de			*/			City, State, Zip Coo Lincoln Park		7035								
Morristown,							Telephone Numbe	License	Numb	er							
Project Manager fo	r Monitoring Firm		11 11 11 11 11	ne Numb			(973)696-68	369			0378						
Craig Napol	itano			407-10		_	Name of OSHA Me	onitor	and the same of th	4.							
Scheduled Start Da	ate (10)	Sched.	Completion	Date (11	1)		B & G Restor	ation,	Inc.								
05/28/2013			3/2013				Street Address	Dand									
Occupancy Status	During Abatemen	t (Check or	nly one)				105 Ryerson										
Facility close	ed/vacated during	entire perio	d of abatem	nent.			City, State, Zip Coo	de									
Abatement p Describe:	erformed outside	OI HOITHAI I	aomy nouro			-	LincolnPark,	NJ 07	035								
Other-Descr														-			
Scope of Work (c	heck all that apply					X F	ull Containment w/	negative	pressure	☐ Glove	ebag pr	ocedu	re				
Demolition		Renovatio					Mini-enclosure			-	friable						
$\square > 3 \text{ sf or } > 3 \square$	f 🗶	≥160 sf or				Ц,	Mill-endosare	—т			TR	R	E	E			
Location of		Is location	normally unance/custo	sed solel) odial		on of a	sbestos-containing		Amount		e m	e p	n	n			
asbestos-co material to b		staff(12)			material		spesios-containing		(Specify S	SF or	0	a	a	L			
abated in fa	cility (13)	Yes	No	N/A					_, ,		e e	r	Р.	L			
OFF ATTACLU	ED TABLE			X	SEE ATTA	ACHE	D TABLE		attached		X		Π.	旦			
SEE ATTACHI					- The second sec		& quantities						\Box	빝			
With Locations	& quartitico										10	닏	ᆜ	님			
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						TAT -	Name of Register	redian	-fill				Ш,	سا			
Registered Waste	Hauler		P Hauler II 9563	D# C	Cubic Yards of 250	vvaste	Tullytowr	n Reso	urce & Re	coverv	Cente	er					
B & G Restora	uon, inc.			Disposal	Date		City, State										
Lincoln Park,	NJ			5/28	3/13 - 08/03	/13	Tullytow	II, FA		Date			<u> </u>				
Completed by (Pr Gordana Lun	int or Type)	Title Secreta	ry/Treasu	rer	Signature		Gordana Lun	a			12/20)13					

From: B & G Restoration, Inc., 105 Ryerson Road, Lincoln Park, NJ 07035

2013 JUN 26 和 2:50

& LICERANIE

Attachment to Amended 10-day notification (Amendment #2 dated June 12, 2013)

564 George Street, New Brunswick, NJ 08901

All of the following materials shall be removed.

Eacade	Facade					apared in facility	The state of the s	0	containing material to be		Location of asbestos-	7	
N/A	N/A	NI/A		Stall	2006	Illallication Canada and an	maintenance/custodial		Soleiy by	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	IS location normany used	is location normally used	
Transite Panels		Window glazing							Containing marchar freeze,	Containing material (ACM)	Courbandi or manager	Description of aspestos-	
1,214 SF	2	3,600 LF										Amount (Specify Shor Lh)	
g	Voc	Yes	W-									Netticad	Domouo

Signature:	Completed by:

Date of Notification (1)			- 1		Building (perator	(2)							
6/17/2013			1		Proper	ty		- 5	10.1						
Agencies Notified	Type Notification		- 1	Street A					My JUN S						
□ EPA	M Initial				orian Ro				, (A)	0 /	7. D. 1				
DEP DOL	Amended		- 1	100	te, Zip Co	de						U			
☑ DOL	Amendment Emergency		- L	Westfi					6 / m						
☐ DOH	justification)	The state of the s			Contact				1. 7. 1	Tele	phone N	umber	_		
☐ DCA	Cancellation			Hanny						LAND					
N of Parallia . 18th and	Abatamant in Takin	- Dlace (2)		FACI	LITY INFO	RMATI	ON	T	of Facility (4)						
Name of Facility Where	Abatement is Takin	g Place (3)					χ	Type o	of Facility (4)						
Private Property									chool (K-12)			40)			
Street Address									Subchapter 8 Other (i.e. priv				ldina	s. hom	es.
857 Dorian Road								e	tc.)						
City (5)								Square	e Feet		Floors	- 1	Bldg.	Age	
Westfield NJ								850		2			+50		
County (6)					Code (7) JSE CNLY)			Currer	nt Use (Prior	if beir	ng demoli	shed)			
Union			L'			-	_				- 5				
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	l No.				ement Contra		(9)				
N/A				N/A					Group In	С					
Street Address								Addres							
N/A									Street Suite	e#16	j				
City, State, Zip Code							4 5 3 1 5 T	tate, Zip			75				
N/A	•						West	t New	York NJ 0	7093	3				
Project Manager for Mon	itoring Firm	- Carlotte Carlotte	- 1 -	Telephor	ne No.			one No			License	1,000			
N/A			d Completion Date (11) Nam					758-71	158		001144	4			
Start Date (10)				pletion [Date (11)				A Monitor						
6/27/2013		6/29/201											1		
Occupancy Status During	g Abatement (Chec	k Only One)	Street Address												
Facility Closed/Vaca	ated During Entire I	Period of Ab	atem	ent			2333	Route	e 22 West						
Abatement Perform		al Facility H	ours				City, S	tate, Zip	Code						
Other – Describe: 8	nours		-			-	Unio	n NJ 0	7083						
Scope of Work (Check A	ll That Apply)		ě			A CONTRACTOR OF THE PARTY OF TH	5000a								
23 sf or ≥3 lf		Rer	novat	ion				Full Containment with Negative Pressure							
≥160 sf or ≥260 lf		N Der	noliti	on			-	Mini-Enclosure Glovebag Procedure							
		le L	ocatio	\n								T	Aba	temer	t
Location	of	A 77/01/07	mall	35,500		Doc	cription	of					1	ype	
Asbestos-Containing		Used			Asbest	os Cont			(ACM)	Ar	nount			m	
TO BE ABA		Maint Custoo			(i.e.	thermal			ion,		pecify	₽	20	20	1 5 1
In Facil (13)	ity		12)				ing, VA			SF	or LF)	Removal	Repair	Encapsulate	Enclosure
(10)		h. T		T		ou loi II	iloooilai	ioouo,				à	=	late	2
		Yes	No	N/A									_		
basemo			x		Pipe	Insula	tion		20	OLF	x				
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			1000000												
Name of Registered Was	10000	IDEP W auler ID	TOTAL TOTAL	Cubic of Was			Name of Re	gister	red Landf	fill					
Asbestos Transporta		310	140.	OI WAS			Minerva E	Enter	prises						
City, State	127			Dispos	al Date		City, State				5-04		$\neg \neg$		
Shirley NY 11967	waynesburg OH 44688							1							
Completed by		Title	Claration												
Edwin Precilla		Project	Ma	nager			81.	1	16			5/18/2	013		

W786

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

	of Notification (1) /21/13			ı	Name of I Myrna	Building C & Martir	owner/O n Tamr	perator ly	(2)		* :						
Age	ncies Notified	Type Notification			Street Ad 363 Du	dress irie Ave				1.11	$\eta_{j_{i_j}}$	17	26 -				
\ \ \	EPA DEP DOL	Initial Amended Amendment	#	-	City, State	e, Zip Coo ,NJ,076				4			V //	: 5i2)		
₹	DOH	Emergency (justification)	-	- -	Name of Martin	Contact					E	ملم	nhone Num	bor			
	DCA	Cancellation		\perp			DALATI	ON									
Nan 36	ne of Facility Where 3 Durie Ave	Abatement is Taking	g Place (3)		FACIL	ITY INFO	RMATI	ON	Ту	pe of Facilit							
	et Address 3 Durie Ave								2		ter 8 (O	the e &	r than K-12 commercia) I build	lings,	home	es,
City	(5) oster									quare Feet 388	# 2		Floors		ldg. <i>A</i> 939	ge	
	inty (6) ergen	<u> </u>			County C	ode (7) SE ONLY)			Ci	urrent Use (I Residence	Prior if b	ein	g demolish	ed)			
O November	ne of Monitoring Firm	n Hired by Building (Owner (8)		ASCM	No.				Abatement C Arrow Indi							
Stre	eet Address				l			Street 730		dress Dadway					110,000,000		
City	, State, Zip Code									e, Zip Code on,NJ,075	14				-		
Pro	ject Manager for Mo	nitoring Firm		T	Telephon	ne No.		Telepl	hone			T	License No).			
	rt Date (10) 7/05/13	Schedule 08/05/1		pletion D	Date (11)				OSHA Monit Arrow Indi			30.000					
	cupancy Status Durii	ng Abatement (Chec		VTLEX				Street	t Ad	dress							
H	Facility Closed/Vac Abatement Perfort Other – Describe:	Period of A	batem	nent resent.			City, S	State	oadway e, Zip Code on,NJ,075	14							
S.C.	ope of Work (Check							rate	5150	011,140,070							
8	≥3 sf or ≥3 if ≥160 sf or ≥260 if		lenoted.	enova emolit	77 NOTE 1 ON			-		Full Contain Mini-Enclos Glovebag F Non-Exemp	ure rocedu	re	35.83				
-					1					Non-Exemp	neu ()	and	1 NOII-F Hab	1		emen	t
			F/. 1153.5533	Locati ormal	200.000				_							уре	
	Location Asbestos-Containin TO BE AI In Fact (13	g Material (ACM) BATED cility	Used Mai	i Sole ntenar odial S (12)	ly by nce/		tos Con thermal surfa		Matens in AT,	erial (ACM) sulation, or		(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
			Yes	No	N/A									ļ	_	L	
	Atti	С		Х			Ve	rmicul	lite		-	1(00 sf	x		-	-
_									+			-	-	-			
-				-						-	-		-	-	+	+	
No	me of Registered W	acte Hauler		IN	JDEP W	/aste	Cubic	Yards		Name	of Rea	iste	red Landfill	<u></u>			
	antic Carting	aste Hadioi		H	lauler ID 6085	No.	of Wa TBD			Was	te Mai		gement Ir	IC .			
City, State Wayne,NJ							Dispo TBD	sal Date	е	City, S Tully	tate town,	PA				of all the	
	mpleted by oran Igev		Title Secre	etary				Signatur	re	14	1		Da 06	te 5/21/	13		32.
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ch: 4522

6-19-2013		Mame	of Building Owner/Op	orator (2) TA			
Agency Nettled Type Nettlication		Street	Address	4413.11	2000		
D SPA D DSP D Amended Amendment 8			ate, Zip Code .	I=VECT	STREE 07027	<u>(, ,)</u>	
C Emergency (incl	uding		tir VIEU	2104	1 Falming	<u> </u>	
DOH justification is particular in the particul		II	TAKATA	<u>t</u>			
	Pie es MA	FACI	LITY INFORMATION	Type of Facility	160		
T. TAKATA	race (3)			© School (K-1			
Street Address		· · · · · · ·	"	D Subchapter	& (Other than K-12) rivate & commorcial	buildings.	
374 ROOSEVELT	STR	EFI		homes, etc.)		
FAIRVIEW .	•			.1700	# of Floors	70 YA	这
BERGEN		Count	Code (7) (STATE U		rior if boing demolis HOCE	ked) /	
Manne of Monitoring Firm Hired by Building O	Mar ASC	M No.		batement Contractor (9)		
Start Address	<u> </u>		Be's:	Removal I	inc		
2 77		*		S.River St			
City, State, Zip Code			City, State	Zip Code censack, N.	T 07601		
Project Manager for Monibolog Firm	Telept	one No.	Telephone		License No.		
				9-7444 -	00388		
	completion E		Name of O	SHA Monitor Environmen	tal Inc	∌	
Occupancy Status During Abatement (Check		-	Street Add	ess			
G Facility Closed/Vacated During Entire Perio G Abatement Performed Quinide of Normal Fa	of Abateme	at	City, State,	huyler St	,		
ACOM - Describe: 8AM 5P/	N			Hackensac	k, N.J. 0	7606	
Scope of Work (Check all that apply) 272 3 of or 2 3 ff 12 2 160 of or 2 260 ff		Renc Cl Dem	metion (2)	Full Containment with film-Englesure Slovebyg Procedure Non-Exempted (*) and	Negative Pressure	•	
	ls Loca	tion			,	Abatos	eset
Location of Authoritic Containing Material (ACM) TO BE ABATED IN Facility (13)	Used Sei Mainten Custed Staff (12)	oly by	Descrip Ashestes Containin (i.e., thornal syst surficing, other misce	g Mintorial (ACM) oms insulation, VAT, or	Amount (Specify SF or LF)	Repair	ennecions
00001 6000	Yes No	N/A	F1 = 2		· · · · · · · · · · · · · · · · · · ·		4
PRAWL SPACE		1	THERMAL)	NSULA/1070	30	LFX	H
							H
Name of Registered Waste Hauter	I N Pose			- 1 N			
Best Removal Inc	1710	Naste Ha	Waste	W=	Enterpris	es	
Caly, State			Disposal Dat	e City, State		-	-
Hackensack, N.J.	0/601		7-6-13	waynesbu	irg , Oh		_
R. VELDRAN Estin			Ribels	lran	16	-19-13	3
ASPLAS *Do no	Paten Chie Gam	See sele	olea Sassanna cui	and another trans			

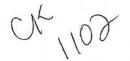
ch: 4523

Daily of Notice (1) 0-19-13				NFS	F (2)	- 13 Mr.			500000	
Agency Notified Type Notifiestion	•	7		AREMOR	UT AVE	NUE	5 Afr	3		
USEPA USEP STEP STEP STEP STEP STEP STEP STEP S	8	Cily	State Zip Co	MIR, 1		\$11		÷30		
SECON : C Emergency (note	ing	Nam	e of Combat		<u>v v</u>	19-6			5315.6	
G DCA Concellation			BAR		,					- =
Name of Facility Where Abelement is Taking P	lace (3)				Type of Facil	N (4)			0 400.30	
G. BARNES .	:	· · · · · · ·		<u> </u>	C School (Ke	12) r 8 (Other than K private & commo	-12) mini build	laces.		
118 CLAREMONT AV	FUUE				homes, el Square Foot	e)		3. Ago		
MONTCLAIR.	*				2900	2	7	8.4	RS	2
ESSEX		Cour	ay Code (7) r)	STATE USE		Prior II being don	relished) •	٠.		
Name of Monitoring From Hirod by Building Out	ner AS	CM No.	·	Name of Abates	ment Contractor	(9)				
Sing Aldres				Best R	Removal .	Inc				
7 92		•		450 S.	River S	t				200
Cay, State, Zip Code				City, State, Zip (Code ·	.J. 0760	1 .			
Project Manager for Monthing Pain	Telepl	home No.		Telephone No.	isca, a	License No.			d a Principal or	
		5		201-329-		00388				
7-17-13 7-1	9-13		. 6	mega En	Monitor Vironne	ntal Inc	0.5			
Occupancy Status During Abatement (Check or				Street Address						
G Facility Closed/Vacated During Entire Period G Abatement Performed Outside of Normal Fac	of Abateme	nt	-	280 Huy						
FOR - December 8 AM 5 PM						ck, N.J.	0760	16		
Scape of Work (Check all that apply) 2 3 of or 2 3 ff C 2 160 of or 2 280 ff		Res Cl Des	novelien notion	Se Glove	Enclosum abay Procedure	h Nogativo Pressi , ad Nein-Friable Pr	•			
	is Lea			•				Aba	hane	est
Location of Asbestos-Containing Maharial (ACM) TO BE ARATED M Facility (13)	Veed Se Maintain Custo Stall (12)	loly by timeo/ dial ?	En. 2	Description of S Containing Ma normal systems surfacing, VAT, other miscellane	totial (ACM) * insulation, or_	Asnount (Specify SF or LF		Reméval	Energeulate	Endouse
BASEMENT	Yes No	N/A	-10:0		1.45.	. 1//0	1=		Н	Ц
194364166	+	+	7 1168	MAC INS	WL 471010	140	LF	4	Н	Н
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Name of Registered Wasto Hauler	MIDED				N					
Best Removal Inc	1710	Waste H	W	thic Yards of Insta	Name of Regi	Enterpr	ises			Marine Control
Hackensack, N.J.	07601		Di	2-19-13	Cay, State Waynesh	ourg , Oh				1
R. VELDRAN Estima	ator		S	Weldran	1		6-1	9-1-	3	

Name of Building Owner/Operator (2) Date of Notification (1) Leo Clossey Agencies Notified Street Address Type Notification 37 Madisonville Road **EPA** Initial City, State, Zip Code DEP Amended Basking Ridge, NJ 07920 × DOL Amendment # Emergency (including Name of Contact DOH justification) Leo Clossey DCA Cancellation **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, 37 Madisonville Road City (5) Square Feet # of Floors Bldg. Age 22-00 2 50 Basking Ridge Current Use (Prior if being demolished) County (6) County Code (7) (STATE USE ONLY) Somerset Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) ABS Environmental Services, LLC Street Address Street Address 4 E Gate Drive, PO Box 483 City, State, Zip Code City, State, Zip Code Glenwood NJ 07418 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. 703 973-583-8500 Scheduled Completion Date (11) Start Date (10) Name of OSHA Monitor Occupancy Status During Abatement (Check Only One) Street Address Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code × Other - Describe: Scope of Work (Check All That Apply) ≥3 sf or ≥3 If Full Containment with Negative Pressure Renovation Mini-Enclosure ≥160 sf or ≥260 If Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Type Normally Description of Location of Used Solely by Asbestos Containing Material (ACM) Asbestos-Containing Material (ACM) Amount Encapsulate Maintenance/ TO BE ABATED (i.e. thermal systems insulation, Enclosure (Specify Remova Repair Custodial Staff? surfacing, VAT, or SF or LF) In Facility (12)(13)other miscellaneous) Yes No N/A basement pipe insulation 25 LF x X NJDEP Waste Cubic Yards Name of Registered Landfill Name of Registered Waste Hauler Hauler ID No. of Waste Minerva Enterprises Tri State Transfer 02325 10 City, State Disposal Date City, State Bronx NY TBD Waynesburg OH Completed by Title Signatur Andrew Scott Higgins President/owner 678-13

CK 4525

Date of Notification (1)	2121.2		N		AS:	g Owner/Operator	(2)		. 0 .7/7	Ů,	6	.* .
	21.20/13		4									77
Agency Notified	Type Notification	•	S	treet / 2	Address 5	1100 LÉSE.	> ESCEX	O TPK	ELL.			
O EPA	☑ Initial □ Amended		6		. = .	2-de			0	54	Line.	11
D DEP M DOL	Amendment #			15	ELIN	NJ	08830		•		1/5	4
	☐ Emergency (including	19	N	ame o	of Contac	ž		Telephone Numb	er			
E DCA	justification) Cancellation					BEBULGE	R					
				FACH	LITY INF	ORMATION	,					
Name of Facility Where /		ce (3)			•		Type of Facility	(4)				
BAS Street Address	F				<u>, , , , , , , , , , , , , , , , , , , </u>		School (K-12) Subchapter 8	6 (Other than K-12)			SF.	
ZE MIDDLES	er esser 1	PK	10				homes, etc.)					
City (5)	e ize i w						Square Feet	1	Bidg.	SO.	-	APS
1566	:N						100,000				10	LKC.
County (6)			10	ounty	Code (7) (STATE USE	Current Use (P	rior if being demolis	hed)			
MI ODG				WLY)		3%		OFFICE/C	-A13			
Name of Monitoring Firm	Hired by Building Owne	r A	SCM P	io.			nent Contractor (S					
(A)	9 15	1				Best R	emoval I	nc				
Street Address						Street Address	•					
655 WEST	SHORE TRAIL	_		*			River St					
City, State, Zip Code						City, State, Zip C	Code	- 07/01				
SPARTA.	NJ. 078	71					sack, N.	J. 07601				
Project Manager for Mon			phone			Telephone No.	7111	00388				
BILL KERD	EC Scheduled Co				649	201-329-		1 00300				
Start Date (10)		111)		(11)		Omega En	vironmen	tal Inc				
Occupancy Status During						Street Address 280 Huy						
D Facility Closed/Vacate												
☐ Abatement Performed ☐ Other - Describe: 74	Outside of Normal Faci みでもくひみ	illy Hour	S .			City, State, Zip C	ackensac	k, N.J. 0	7606	6		
Scope of Work (Check a			- 100									
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62100000	٠,		*	· E .	ii ii	≥ Non-	Exempted (*) and	l Non-Friable Proce	dure	48	-	
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Locatio		- No	arma lly	,		Description				T	T	T
Asbestos-Containin			Solely		Asbe	stos Containing Mi	atorial (ACM)	Amount		_	5	
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(13		VIII 200	42		2.0	surfacing, VAT other miscelland		φ. σ. π. γ	1	Removal		. 8
	• • •		(12)				and the state of t		1	-1	8	1
· ·		Yes	No	N/A						-	+	+
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Name of Registered Was	ste Hauter		EPW	aste I	lauler	Cubic Yards of	Name of Regis	aered Landilli				
Best Remova	1 Inc	10 N	109)	, .	Waste 1 1/2 c7		Enterpri	ses			
City, State	sack, N.J.	0760)1			Disposal Date	City, State Waynesh	ourg , Oh				
1	Title	3,00				Signature /	1		Date .		,	
Completed by J. Maiorano	Estim	ator	:				هد عمص	1	6/2	29	13	5



Date of Notification (1) 06/20/2013					f Building				2.	9/3 //					
Agencies Notified	Type Notification			Street A	39 A W - 5 - 1 A W - 1 T				× 3	3 %	// 35 _{//}	Ü 2,	<i>t</i> ~		
EPA X DEP X DOL	Initial Amended Amendment	:#		City, Sta	ate, Zip C	ode		08810)	4 4/6			<u>673</u>		-
☑ DOH DCA	Emergency justification) Cancellation			Name o	f Contact AEL DE					•	onhono Ni	imhor	-		ķ.
				FACI	ILITY INF	ORMAT	ION								
Name of Facility Where PRIVATE	Abatement is Takir	g Place (3	3) .					Туре	of Facility School (K-	004500					1
Street Address 298 FRIENDSHIP I	RD								Subchapte Other (i.e. etc.)				dings	hom	es,
City (5) SOUTH BRUNSWI	CK,NJ		-						are Feet 50 SF	# 0	f Floors		Bldg. /		
County (6)					Code (7) USE ONLY)		Curre N/A	ent Use (Pr	ior if bei	ng demolis	shed)			
Name of Monitoring Firm	Hired by Building	Owner (8)		ASCN	/ No.				atement Co			TION	110	:	
Street Address						1	Street	Addre							
City, State, Zip Code					-		City, S	state, Z	ip Code SACK,NJ				22-300		-1000
Project Manager for Mon	itoring Firm	4		Telepho	ne No.		Teleph		lo.	,0700	License I	No.			
Start Date (10) 06/29/2013		Schedule 07/01/2		mpletion	Date (11)		Name	of OSI	HA Monitor						
Occupancy Status During	Abatement (Chec						Street			LOGII	LO LAD	*****			
Facility Closed/Vaca Abatement Perform	ated During Entire I ed Outside of Norn	Period of A	Abater Hour	nent s					BRIDGE	DR.,	SUITE B				
Other - Describe: _						_	POW	/HAT	AN,VA,2	3139					
Scope of Work (Check A	ll That Apply)						ı	7							
≥3 sf or ≥3 if ≥160 sf or ≥260 if		-	Renova Demoli				×	Min	II Containm ni-Enclosur ovebag Pro	e cedure	8			200	
		Is	Locat	ion				1 140	n-Exempte	d (*) and	Non-Fria	DIE Pro	Abate		
Location		1	Vorma	lly		Des	scription	of					Ту	ре	
Asbestos-Containing TO BE ABA In Facili (13)	TED	Ma Cust	d Sole intena todial ((12)	nce/ Staff?				s insula T, or		(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
DACEM	APP	Yes	No	N/A										œ	
BASEME			X			PIPE IN	L BOI		1		0 LF B SF	X			
Name of Registered Was	te Hauler		IN	JDEP W	aste	Cubic	Yards		Name of	Registe	red Landfil	1			
SHARON QUALITY	CONSTRUCTION	ON LLC		lauler ID 033967	No.	of Was			- partition of the control		ITERPR		IC.		
City, State HACKENSACK,NJ						Dispos TBD	al Date		City, State		RG,OHIC)	***		
Completed by CARLOS ESQUIVEL		Title SAFE	TY N	/ANAG	ER	5	ignature	Pu	DA	Euc.	//	ate 3/20/2	013		
ASB-41 (R-06-08)	to the state the three to the state of the s				<u> </u>	7	* Do no	t use t	his form for	asbesto	os licensur	e exem	pted :	activit	ies.

	State of New Je
Project #	NOTIFICATION OF ASBEST
Project #	(Pursuant to NJAC 8:60

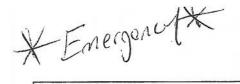
Check # 2044

Date of Notification (1)		IN	Name of	Building C	Owner/Op	perator	(2)	N 26							
06/19/2013		В	ergen	Region	al Med	dical (Center	49.26	411	2:50					
Agencies Notified Type Notification		- 18	Street Ac	Idress			/			40			W-1-8-		35-01
		2	30 Ea:	st Ridge	ewood	Aven	ue .		*						
EPA Initial Amended				e, Zip Cod		-	44 (JUEN.	7001	75.1					
DEP Amended Amendment	#			is NJ 07				for d is	1111	2					
Emergency				Contact					Tel	ephone Nu	ımber				
DOH justification)		100		Rocca											
DCA Cancellation				ITY INFO	PMATIC	ON							-		
Name of Facility Where Abatement is Takir	g Place (3)	_	1 AUI	- III IIII C	T COLOR TO		Type o	f Facility (4)						
Bergen Regional Medical Center								chool (K-1	2)						
Street Address			-				T S	ubchapter	8 (Oth	er than K-	12)				
								ther (i.e. p	orivate	& commerc	cial bui	lding	s, h	ome	s,
230 East Ridgewood Avenue								tc.)	1#6	f Floors		Bldg.	Δαι	9	
City (5) Paramus, NJ 07652								e Feet				olug.			
County (6)			County C				Curren	nt Use (Pri	or if be	ing demolis	shed)				
Bergen		- 1	STATE	ISE ONLY)		-									_
Name of Monitoring Firm Hired by Building	Owner (8)		ASCN	No.		Name	of Abate	ement Co	ntracto	r (9)	-500		9747		(0)
AHERA	ind.					Nick I	Resto	ration L	LC						
Street Address		72.5				Street	Address	s							
ou doi? Addisos						72 Br	ooksid	de Rd							
City, State, Zip Code						City, S	State, Zip	Code							
City, Ctate, 21p Code				87		3500		NJ 078	69						
Project Manager for Monitoring Firm		-1-	Telephor	ne No			none No			License	No.				_
		100		52-1833	,		33-25	1755-127		01133					
John Smoyer	Schedule				<u>,</u>	200000000000000000000000000000000000000		A Monitor	-	101100					
Start Date (10)	1000715-00110719-001	CENTRAL	piedon	Date (11)				nmenta							
07/01/2013	07/03/2						Addres				-		_		_
Occupancy Status During Abatement (Che	ck Only On	e)					RT 22								
Facility Closed/Vacated During Entire	Period of A	batem	ent												
Abatement Performed Outside of Nor Other – Describe: 4pm-11.3Upr	nal Facility	Hours					State, Zij								
						Unior	n, NJ (07083					_		_
Scope of Work (Check All That Apply)											9	1			
≥3 sf or ≥3 lf	■ R	enova	tion							Negative	Press	ure)		
≥160 sf or ≥260 lf	☐ D	emoliti	ion			li i	IVIII)	i-Enclosur vebag Pro		Company of the Compan					
							Nor	n-Exempte	d (*) a	nd Non-Fri	able Pr	oceo	lure		
	1													nent	
	1.00	Locati Iormali					12						Тур	е	
Location of		d Sole		Achon	De: tos Cont	scription		(ACM)		Amount				ш	
Asbestos-Containing Material (ACM) TO BE ABATED	Mai	intenar	nce/		thermal					(Specify	7	١ ,	.	ä	5
In Facility	Cust	odial 9 (12)	staπ?	,		cing, VA			8	F or LF)	Remova	Copan	3	sde	Enclosure
(13)		(1-)			other n	niscella	neous)				<u> </u>	=		Encapsulate	ure
	Yes	No	N/A										_	ω	
Boiler Room 2nd floor	×		TSI- w	rap & o	cut			15 e	lbows			\perp			
5		Γ													
				III	How william						3110-2				
Name of Registered Waste Hauler		17.55	JDEP W		0.000	Yards		Name of	Regis	tered Land	Ifill				
Nick Restoration LLC		0.000	lauler ID 3782	NO.	of Wa	ste		G.R.O.	W.S						_
City, State Randolph, NJ 07869					Dispos	sal Date	9	City, Sta			- 333				
	444				TBD			Tullyto	wn, F		D. (_			_
Completed by							e C	, /	role		Date	100	10		
Elvira Mrda	Presid	dent				EU	enla	1	100	4 10	06/19	20	3		

Ux 1161

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

Date of Notification (1) 06/19/2013					f Building				2010				8		
	T = 1				VELLA	CONT	RACT	URS	100	/// A.	F(
Agencies Notified EPA	Type Notification			Street A	Address FRANK	LIN ST	REET		i gym	- 0	M 2.	50			
DEP DOL	Amended Amendmen		_ [ate, Zip C		5		Pr Ly	Com		- 4			
Ĭ DOH	Emergency justification			Name o	of Contact					Tel	enhone N	imber		-	
DCA	Cancellation			MICH	AEL DE	JESUS	S								
				FAC	ILITY INF	ORMATI	ION			_			_		
Name of Facility Where PRIVATE	Abatement is Takir	ng Place (3	3)					Туре	of Facility	(4)					
Street Address									School (K-						
1467 FRANKLIN S	TREET								Subchapte Other (i.e. etc.)				ldings	, hom	es,
City (5) HILLSIDE,NJ			10.700			***************************************			are Feet 00 SF	# o	f Floors		Bldg. 58 Yl		
County (6)					Code (7)	0		Curre N/A	ent Use (Pr	ior if bei	ng demoli	shed)			
Name of Monitoring Firm	n Hired by Building	Owner (8)		ASCN	d No.			of Aba	atement Co						
N/A Street Address							SHA		QUALIT	Y CON	NSTRUC	MOITS	LLC	;	
									RDEN P	LACE					
City, State, Zip Code									ip Code SACK,NJ	1.0760	1				
Project Manager for Mor	nitoring Firm		T	Telepho	ne No.		Teleph	one N	o.		License	No.			
Start Date (10)		Cabadula	d Car	mplation	D=t= (44)		201-				01135				
06/28/2013		06/29/2	2013	npietion	Date (11)		70000000000000000000000000000000000000		HA Monitor TECHNO		ES LAB				
Occupancy Status Durin Facility Closed/Vac							Street 1551		ss (BRIDGE	DR	SUITE E	3		********	
Abatement Perform Other – Describe:	ned Outside of Norr	nal Facility	Hours	nent s			City, S	tate, Z	ip Code				***		
Scope of Work (Check A	II That Apply)		-				POW	/HAT	AN,VA,2	3139					
≥3 sf or ≥3 lf		П	enova	tion			Г	1	II O t - i		N	_	o-aron		
≥160 sf or ≥260 lf		and the same of th	emolit					Mir	II Containm ni-Enclosur		Negative	Pressu	ire		
		1000					×	ų – · · ·	ovebag Pro		4 N 5-i-	ble De			
	···	Τ	1 4					1 1/10	n-Exempte	d (*) and	Non-Fria	DIE Pro		ement	
Location	o of	100.000	Locat Iormal	N. F. C. 1950		D								/ре	
Asbestos-Containing	Material (ACM)	Use	d Sole	ly by	Asbes	tos Cont	scription aining M		(ACM)	A	mount		T	m	
TO BE AB		1 Dec 1951	odial S	070000000000000000000000000000000000000	(i.e.	thermal			ation,		pecify	Re	70	Encapsulate	Enclosure
(13)	ı.y		(12)				cing, VA			51	or LF)	Remova	Repair	psu	losu
		Yes	No	N/A								<u>a</u>		ate	Ге
BASEMI	ENT		Х			PIPE IN	NSULA	TION	1	TE	D LF	х	\vdash		
Name of Registered Was	te Hauler		TN	JDEP W	aete	Cubic `	Vardo		Nome of	Dogisto	rad Landfi				
SHARON QUALITY		ON LLC	Н	auler ID 033967	No.	of Was					red Landfi ITERPR		NC.		
City, State HACKENSACK,NJ						15011200000	al Date		City, State		RG,OHIC				_
Completed by		Title	3			L STATE WIGHT ACK	ignature	/3		20		ate			
CARLOS ÉSQUIVE	_		TY N	MANAG	ER	19	P	/	In	f 9ë		6/19/2	2013		
ASB-41 (R-06-08)							* Do not	use t	nis form for	asbesto	os licensur	e exen	npted	activit	ies.



CK 3328

Date of Notification (1) 6/20/13		N A	lame of April ar	Building Ov nd Ken Di	vner/	Operator on Priv	(2) rate Ho	ome ⁰ /3	777.						
Agencies Notified Type Notification	3.11	S	treet Ad 71 Lexi	dress ington Av	e.			i de la		o iji	2: 1				
EPA Initial Amended Amendment #	ı	10	nly, Stat	e, Zip Code rton NJ 0	-			& L/	CEN	i ag		4			
DOH justification) DCA Cancellation	ncluding	100	lame of Ken	Contact				S. Marie S.		ephone N	lumb	er			
			FACIL	ITY INFOR	RMAT	ION			-						
Name of Facility Where Abatement is Taking April and Ken Dickson Private Hom								of Facility (4 School (K-12	2)	4h 1/	400				
Street Address 71 Lexington Ave.			50				×	Subchapter Other (i.e. pi etc.)	rivate	& comme	rcial I				s,
City (5) Lumberton NJ 08048				Ţ.			Squar 1000	e Feet +	# o 2	f Floors		35	dg. Ag 5∔	ge	
County (6) Burlington	0		County C	ode (7) ISE ONLY)			Curre	nt Use (Prio	r if be	ng demo	lished	d)			
Name of Monitoring Firm Hired by Building C N/A	Owner (8)		ASCM	No.			of Abat naco In	ement Con	tractor	(9)			•		
Street Address							Addres				,				
City, State, Zip Code							State, Zi	p Code n NJ 080	91						
Project Manager for Monitoring Firm		T	Γelephor	ne No.		100000000000000000000000000000000000000	hone No 753-9			License 00727		i i	X-14-F		
Start Date (10) 6/21/13	Schedule		pletion [Date (11)		Name		A Monitor				-			
Occupancy Status During Abatement (Check	k Only One	e)			1000	Street	Addres	S			-1		100 N		-
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe:	Period of A	batem	ent			City, S	State, Zi	p Code		*	-				
Scope of Work (Check All That Apply)															
≥3 sf or ≥3 lf ≥ 160 sf or ≥260 lf	Section 1	enovat emoliti	0.000000				Mir Glo	l Containme ni-Enclosure ovebag Prod n-Exempted	e cedure	•				Э	
	T le	Locati	on										Abate	ment	
Location of	l N	ormali	y		D	escriptio	n of				-		Ту	pe	_
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Mai	d Solel ntenar odial S (12) No	nce/	(i.e. t	os Co herm surl	ntaining al system facing, Va miscella	Material ns insula AT, or		(Amount Specify F or LF)		Removal	Repair	Encapsulate	Enclosure
Basement			х		Flo	or Tile	only		8	00 SF					
							-				-				
										UNITED TO SECTION					
Name of Registered Waste Hauler			JDEP W			ic Yards		Name of		ered Lan	dfill				
United Containers			auler ID 2459	140.	3	/aste		G.R.O.	11-11-11-11-11						
City, State Elm NJ					6/2 ⁴			City, Stat Morrisv		A 1906					
Completed by Anthony T Perna	Title Presi	dent				Signatu	PL				Date 6/2		3		

Date of Notification (1)		- T	Name of	Building (Owner/	Operator	(2)	20.							
June 20, 2013		S	Sandvik	. Inc.				2013) Mir.						
Agencies Notified Type Notification	-		Street Ac					, č	1/2	₹6° .					
⊠ EPA □ Initial		1	702 Ne	vins Ro	ad					4,,	2				
DEP Amended			City, Sta	te, Zip Co	de			Ce /	100	1	٠,	13	77.00	-77	
DOL Amendment		— F	airLaw	n, NJ 07	410				1650			t _a			
DOH Emergency (i	ncluding		Name of		STREET,				Te	lephoneN	lumbe	er			
DCA Cancellation		F	acility I	Enginee	ring N	/lanage	r	,	1						
				LITY INFO											
Name of Facility Where Abatement is Taking	Place (3	3)					Type of	Facility (4	4)						
Sandvik								hool (K-1							
Street Address										er than Kan Kan Kan Kan Kan Kan Kan Kan Kan K		uild	inge	home	
1702 Nevins Road							Ot etc		iivale	& Comme	i Ciai C	unc	mys,	Home	3,
City (5)							Square	Feet	# 0	f Floors		В	ldg. A	ge	
FairLawn															
County (6)			County C				Current	Use (Pric	or if be	ing demol	ished)			
Bergen			(STATE U	SE ONLY)						Facility					
Name of Monitoring Firm Hired by Building (wner (8)		ASCM	No.		Name	of Abate	ment Con	tracto	(9)					
Hillmann Consulting, LLC						The M	IACK G	roup, L	LC.						
Street Address							Address								
1600 Route 22 East						1500 I	Kinas H	IWY N,	STE	209					
City, State, Zip Code				-3-20			State, Zip		W = I						
Union, NJ 07083						Cherry	v Hill. N	J 08034	1						
Project Manager for Monitoring Firm		Telephor	ne No.		-	none No.			License	No.					
Project Manager	9	08.688	7800		(973)	759 - 5	000		00781						
Start Date (10)	Schedule			Date (11)	-	-		Monitor							
6/24/13			7-31-13	3		The M	ACK G	roup, L	LC.						
Occupancy Status During Abatement (Check	Only Or					_	Address			9					
Facility Closed/Vacated During Entire F	eriod of	Δhatem	ent			1500 I	Kinas H	IWY N,	STE	209					
Abatement Performed Outside of Norm Other - Describe: Start 4pm	al Facility	Hours	ient				State, Zip		7.00						
Other - Describe: Start 4pm					_	500,0000		J 08034	1						
Scope of Work (Check All That Apply)						10	,								
23 sf or ≥3 lf		Renova	tion				X Full (Containme	ant wit	h Negative	e Pres	SSIII	Δ.		
≥160 sf or ≥260 lf	-	Demolit					🛛 Mini-	Enclosure	9		0 1 100	,			
						-	Glov	ebag Prod	edure	l Non-Frial	blo Dr		duro		
	T	100 000	1		-		Non-	Exempled	() and	I NOII-FIIAI	ble Fit		John St.	ement	
	0150	Locati Normal	10.00											pe	5
Location of		d Sole		Ashasi		escription		A CAA)		Amount					
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	intena	nce/			ntaining Mal systems				Specify		Z		Enc	g
In Facility	Cus	todial S (12)	staff?			acing, VA		0.000.00	S	F or LF)		Remova	Repair	aps	Enclosure
(13)		()			other	miscellar	neous)					ova	air	Encapsulate	ure
	Yes	No	N/A									-		Ф	
various	X	3		nin	e insula	ation		2	,835 l/f		<				
Various	$\angle \Delta$			Pip	C IIIOUIC	20011			,000 111		_				
										-	_			-	
Name of Registered Waste Hauler		N	J DEP W	aste	Cubi	c Yards		Name of	Regist	ered Land	fill				
		H	lauler ID		of Wa										
Rovic / Newark Carting			450)9		28.4				T.R.R.F	Lan	dfil		- CO 1100000	
City, State					0.5	osal Date	. 6.	City, State			20	1/1200			
Riverdale / Newark, NJ	Title					7-31-13		/lorrisvil	le, P	A / Tully		, P	A		
Completed by				Signature	1//	1		202	Date						
Mike Cooper			1	1-2		-1.45	6	3/20/	13						

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

Date of Notification (1) June 20, 2013				Building (leasant				Check # 5901				
Agencies Notified Type Notification		1	Street Ad		٤.	20 8 1	1126 Miz					
EPA Initial DEP Amended Amendment #				e, Zip Co leasant		742	(*************************************			10788201		
Emergency (ii justification) DCA Emergency (ii justification) Cancellation	ncluding		Name of D. Dero	1202/2012/2012/1			11/1/2	Telephone Num	ber			
			FACIL	ITY INFO	RMATIC	ON						
Name of Facility Where Abatement is Taking Memorial Middle School	Place (3)						Type of Facility (4		1			
Street Address 808 Laura Herbert Drive							Other (i.e. p	rivate & commercia	al build			ıs,
City (5) Point Pleasant, NJ 08742							Square Feet 10,000	# of Floors 2		dg. A 00	ge	
County (6) Ocean			County C	ode (7) SE ONLY)		_	Current Use (Prio School	or if being demolish	ed)			
Name of Monitoring Firm Hired by Building O Environmental Design Inc.	wner (8)		ASCM	No.			of Abatement Con e Environmen					
Street Address 5434 King Avenue, Suite 101	H						Address Cutler Ave.			-23%-95		
City, State, Zip Code		-25				City, St	ate, Zip Code e Shade, NJ (18052				
Pennsauken, NJ 08109 Project Manager for Monitoring Firm			Telephor			Teleph	one No.	License N	ö.			
Tom Pruno Start Date (10)	Schedule	- 2-20		6-4545			755-0099 of OSHA Monitor	00842				
June 20, 2013	June 28	, 20		, and (11)		EMS						
Occupancy Status During Abatement (Check							Address Haddon Ave					
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norm Other – Describe:	al Facility	Hours	ient		_		ate, Zip Code mont, New Je	ersey 08108				
Scope of Work (Check All That Apply)	WALKE											
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Name of the last o	enova emolit				×	Mini-Enclosure				re.	
	1			-			14011-Exemple	a () and Horri Had	1		ement	t
	1000	Locati ormal								Ty	ре	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Used Mai	d Sole ntena odial S (12)	ly by nce/		tos Conta thermal surfac		laterial (ACM) s insulation, T, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
Rooms 102 and 104		X			Transite	e Table	e Tops	512 SF	XXX			
Name of Registered Waste Hauler		TN	JDEP W	/aste	Cubic	Yards	Name of	Registered Landfil	<u> </u>			<u></u>
Freehold		H	lauler ID 2253		of Was	ste	Grows	Landfill				
City, State Mount Holly, New Jersey 08060					Dispos 6/28/2	sal Date 2013		e wn, PA.	579.5			
Completed by Christina Lynch	Title Opera	ation	s Mana	iger	(8		trall	10.757	ate une 2	0, 2	013	

Check # 7990

Date of Notification (1					Owner / Operator (2)					
	June 20, 2013			eign Bank, l Address	NA	<0/13 Jilly -					-
Agencies Notified EPA DEP	Type Notification EMERGENCY			er Road	6	2) 2013 31/11/26	16 2 50				
DOL			City, St	ate & Zip C	ode	e the time			18		
	Amended		The second second	Arlington, N		11.17	(a) 4				
⊠DOH	Amendment #_		Name	of Contact				ephone	Nur	nber	r
DCA	Cancellation		Name	or Contact						_	
			FAC	CILITY IN	FORMATION						
Name of Facility Whe Sovereign Bank	re Abatement is Taking P	lace (3)			Type of Facil						
Street Address						pter 8 (Other than	K-12)				
65 River Road					Other (i.e., private & co	mmercial buildings	, hom	e, et	c.)	
					Square Feet		ors Bldg	g. Age			
City (5)					5,000	D (Prior if being dem	1		50	-	
North Arlington	<u> </u>				Bank	(Filor ii beilig deili	olished)				
County (6) Bergen		unty Code	(7)								
Name of Monitoring F Hillman Consulting	Firm Hired by Building Own	ner (8)		ASCM No	Name of Aba Synatech, In	itement Contractor	(9)				
Street Address	AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	_			Street Addre	ss					
1600 Route 22 East, City, State & Zip Cod	Ste. 107				829 Radio R City, State &			-			
Union, NJ 07083	е				Little Egg H	arbor, NJ 08087					
Project Manager for I	Monitoring Firm		ephone N 3-686-263		Telephone N 609-296-691		License Num	ber 00817	7		
Brian Nemetz Scheduled Start Date	(10) Scheduled				Name of OS						
June 22, 2	2013	June	24, 201		Synatech, Ir						
Occupancy Status Do	uring Abatement (Check of ed/Vacated During Entire	nly one) Period of	Abateme	nt	Street Addre 829 Radio R			-10			
Abatement I	Performed Outside of Norr	mal Hours			City, State &						
Other – Des	cribe: upied During Abatement				Little Egg H	arbor, NJ 08087					
Scope of Work (Che											
			Renovati	on		Full Containmen Mini-Enclosure	t with Negative Press	ure			
≥3 sf or ≥ 50 lf ≥160 sf or ≥26	on if		Demolitic		F	Glovebag Proced	dure				120
2160 SI 01 220	50 II		D0111011111		×		*) and Non-Friable Pr	ocedu	re		
Lo	cation of			ally Used	Descrip		1/0	Aba	atem	ent 7	Туре
	aining Material (ACM) E ABATED		y Mainter dial Staff		Asbestos-C Material		Amount (Specify SF or LF)				
	Facility	- Cusic		'-/	(i.e., therma	al systems	300 Carlotte - 100 Ca			ш	
	(13)				insulation, sur or other mise			Re	Re	ncar	Enclosure
								Removal	Repair	Sula	osu
		Yes	No	N/A				=		ate	9
Sales Floor (next to	Entrance & Mgr's Ofc)		7	х	Floor	Tile	700 SF	Х			
										L	
Name of Registered	Waste Hauler	NJDEP Hauler II		Cubic Ya	rds of Waste	Name of Regist					
Synatech, Inc.		27	7429	4 Diagram	Data	Grows Landfil City, State	<u> </u>				
City, State				Disposal							
Little Egg Harbor, I	NJ 08087			June 25 Signature		Morrisville, PA	Date			-	
Completed By		92. 32. 33. 3	g_gc_eser =		ani alla	100					
Diane Aloia	Executi	ve Admin	istrator	1.00	en uc		June 20, 2013				1500

Uia FAX ch.#1057

	(Pursuant to NOAC 6.6	-therefor(2)	Dot	Place
Date of Notification (1) 6 5 13	Name of Building O	SON. GUEV		4001-
Agency Notified Type Notification	Striket Address	ARRISON F	10E	
Q EPA Initial Q Amended	City, State, Zip Cod		7029-1328	2
Liver Amendment#	HARRIS	30.	100/2/00	
Michigano (manum	Name of Contact	JEVARA_		7
DDCA Cancellation	FACILITY INFOR	MATION		
Name of Facility Winere Abatement is Taking Plac		Type of Facility		
Name of Facility What AARRISON	AUE	O School (K-12)		
Street Address		Other (i.e. pri	Latie & Continues con posterior	<u>'</u>
	-:	Square Feet	# of Floors Bldg. A	5
HARRISON NE).	9500	or if being demolished)	200
County (6)	County Code (7) (S ONLY)	TATEUSE CUITATIONS	£ 13051	NESS
HIMSON		lame of Abatement Contractor (S	22	
Name of Monitoring Firm Hared by Building Owner (8)		NOVIHEOU	<u> </u>	
Street Address	S	Street Address	- **.	
	- 5	ity. State, Zo Code	NO 085	157
City, State, Zip Code	- [(Felephone NOA A A A A C NA	License No. R.	
Project Manager for Monitoring Firm-	Telephone No.	132 23XX/SOL	00 000	
Check Dada (ED) Scheduled Q	implifition Date (11)	Name of OSHA Monikur	NU	
Start Date (10)	(0 13)	Street Address	<u>(· </u>	
Occupancy Status During Abatement (Check on	& Ahalemant	City State, Zip Gode	O ARRS	2
Di Facility Closed/Vacated During Enline Period of Abatement Performed Outside of Normal Facility Other - Describe:	Ry Hours	UD RUDGE	NO-000	
Scope of Work (Check all that apply)	DiRenovation	D Full Containment wit	II Medana	
0 ≥ 3 st or ≥ 3 lf 0 ≥ 160 st or ≥ 260 lf	Demottion	Glovebag Procedure Non-Exempted (*) 3	nd Non-Friable Procedure	Abatement
/ 15 16U S 0: 2200 1	Is Location			Type
	Normally Head Salely by	Description of tos Containing Material (ACM)	Amount	2 2 2 5
Location of Asbestos-Containing Material (ACM)	Maintenance/ Custodial Assess (i.e.,	thermal systems insulation, surfacing, VAT, or	(Specify SF or LF)	Encapsulate Repair Removal
TO BE ABATED IN Facility	Staff?	other miscellaneous)		2 3
(13)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	Yes No N/A		K3 CYANG	X
Daniel	X CL	AN OF HOTE	13 1.7 M. W.	
DISEMENT	1.100	SE DEDKIS		
	NJDEP Waste Hauler	Cubic Yards of Name of Re	gistered Landfill	
Name of Registered Waste Hauter	ID No. O COL	Waste 2 6.R	O.W.S.	
NOVATECH INC	18201	Distrosa Date City State	CO-VA	c 1
Sity, State Och Co 110	02257	FIFTISATORU	Date Date	5-13
DID BRIDGE DA	NOT	Signature	Wi 16	12/15
Completed by DACIDA ME	Of use this form for asbestos lic	ensure exempted activities		11
Don Don	Of USE UIS JOHN TO CONTROL		A	

MO#20613928781

MAY 11

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

			\1 u			10 0.00 ar							
Date of Notification (1)				Name	of Building	g Owner/Op							
	20 / 13			Richa	rd Renzel	lla ZUI.	3 JUH	26 All 2:	h. 12 ()				
Agencies Notified	Type Notification	-			Address		I CONSTRUCTION OF THE PERSON O		.16				
☐ EPA	✓ Initial			2 Reio	Street	4.1		Transcourse.					
☑ DOLWD	☐ Amended				State, Zip (Code	da 11	14.11	·:	1			7.00
☑ DHSS	Amendment #	S					: (V (1 - 1) 1 1 2					
□ DCA	Emergency (ir iustification)	cluding	1		of Contac	NJ 07740			Telephone Nun	nher	-		
(NJAC 5:23-8)	Cancellation			100] relephone itali	ibei			
	Cancellation				rd Renze							<u> </u>	
				FA	CILITY IN	NFORMAT	ION						
Name of Facility Where	Abatement is Takin	g Place	(3)					Type of Facility					
Private house								School (K-1)	2) 8 (Other than K-1	2)			
Street Address								Other (i.e., r	private and comme	ercial bu	ildin	1 5.	
2 Reid Street								homes, etc.				* CS.E.	
City (5)								Square Feet	# of Floors	В	dg. A	ge	
Long Branch, NJ 077	40										. *	S	
County (6)				Cour	ty Code (7)	(STATE USE	ONLY)	Current Use (P	rior if being demol	ished)		38	
Monmouth				İ									
Name of Monitoring Fir	m Hired by Building	Owner	(8)	ASCM	No.	Name of	Abateme	ent Contractor (9)				-
						Gr Tech			•				
Street Address	332					Street Ad							
0.0007.1007.000								202					
City, State, Zip Code				2000000		City, State							
Oity, State, Zip Code						The second second							
Project Manager for Mo	nitarina Eirm		1 Tale	ahana	No	Wayne, N		70	License No.				
Froject Manager for Mc	antoning Firm		Tele	phone	NO.	Commission of the Commission							
			1			973-638-			01127				
Start Date (10)					ite (11)	Name of	OSHA M	lonitor					
00 / 30	/	07		/	13	Envirovis	sion Co	nsultants,Inc					
Occupancy Status Duri	ng Abatement (Chec	k only	one)			Street Ad	dress		3 (3-2) (3-2) (3-2)		-		
▼ Facility Closed/Vaca						20-21 Wa	agaraw	Road, Bldg .#	35 E				
Abatement Perform						City, State							
lime of Abatement:	AMp	'IVI/	PIVI_		_AM	Fair Law	n. NJ 0'	7410					
Scope of Work (Check	all that apply)			DESCRIPTION OF THE PERSON NAMED IN	CONTROL STATES			and decontamin	nation			-	
57.0 /		-						tainment with Ne	gative Pressure				
>3 sf or >3 lf = 160 sf or >260 lf			enovati emolitic			K-2	Mini-Enc	losure	Tent with Negativ	e Pres	SIIFA		
			, iiioiitic	21)			Non-Exe	mpted (*) and No	n-Friable Proced	ure			
		Is	Locat	ion	T			The second second		AF	atem	ent T	vne
Locatio			Norma			Desc	ription o	of		-	_	1	Ť
Asbestos-Containing			ed Sole					terial (ACM)	Amount	Remova	Repair	nc	Enclosure
TO BE AS		100000000000000000000000000000000000000	todial		(1.6	e., thermal s	ystems i ng, VAT,		(Specify SIF or LF)	δ	a	sde	uso
(13)			(12)			other mis			011 01 21)	<u> </u>		Encapsulate	ਰ
		Yes	No	N/A								10	1
Basement				\boxtimes	Pipe ins	sulation			60 LF	X	П		Im
		+											H
Crawl space				×	Pipe ins	sulation			120 LF	X			
			П	ĪП							\Box		In
Name of Registered Wa	este Hauler	1	<u> </u>		Haular ID Na	Cubia Vard	e of Meat	e Name of Regi	stored Landfill	ليال			
	aste Haulei					1	S UI VVASII		stered Landini				
Gr Tech LLC			(003378	35	TBD		T.R.R.F. Inc			a departu	NOTE OF STREET	-annu
City, State						Disposal [Date	City. State					
Wayne, NJ 07470						TBD		Tullytown, P	A				
Completed By (Print or	Type) Titl	е				Signa	atur			ate			
N.Jevtic	Ow	ner			6 (4.0)		1800	the we	20 1	5/20/20)13		
ASB-41	<u> </u>			V			//	, , 5450	00	J. 2012(, 1, 3		

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

CK 45.26

Date of Notification (1)	3		T	Name (of Buildin	g Owner/Operator	DANOWS	Ko ²⁰¹³ JUN	26.				
	otilisation	•			Address	JEHERSE			Na .	17	?; <u>;</u>	U	
D DEP D Ame	nded		T	City, S	tate, Zip	Code	. Al 7	~10 ₁	n. i.v.		17		
2 Ecae	ndiment # rgency (includir	19	F		uffs of Conta	LOE PARK	<u> no.</u>	Tahahana Mi	mber	()	* ć,		
	lication) cellation					DA NOWSKI							
						ORMATION	,						
Name of Facility Where Abateme	nt is Taking Plac	œ (3)					Type of Facility	y (4)					
Mg. ZO	ANOWS	sk	6	- 	<u> </u>		School (K-1	2) 8 (Other than K-1 rivate & commen	2)			ē	
756 JE	HERSO	مما	A	J &			homes, etc						
CLIFSIDE.	W. 1922						Square Feet	2	4		Β > γ•	en A	N
County (6) BEILGEN				County ONLY)	Code (7	(STATE USE	. B=	Prior if being dome SIOEN CE	dished)	• •	-		
Name of Manilosing Firm Hired by	Building Owne	f .	ASCM	No.		Name of Abates							
(a) .						Best R	emoval :	Inc					
Street Address	3.8						River St						
City, State, Zip Code	W	esan es				City, State, Zip C	Code					-	-
						Hacken	sack, N	J. 07601					
Project Manager for Manibring Fi	ino .	Te	lephor	e No.		Telephone No.	71.66	00388					
Start Date (10)	Scheduled Co	moleti	bh Dad	n (11)		201-329- Name of OSHA		00300					-
7/2/13	7	//3	1/:		× 5	Omega En	vironmen	ntal Inc		VI 3-5-5			
Occupancy Status During Abatem	nent (Check only	(ane)	1	-		Street Address	7 0+					,lwie	
C) Facility Closed/Vacated During	Entire Period o	f Abat	ement			280 Huy					-		-
Char-Describe: 714 T	of Normal Facili	ily Ho	2 5					ck, N.J.	0760	6			
Scope of Work (Check all that app													_
E2340231					ovation	-2 Mini-	Enclosure	Negative Pressu					
□≥160 afor≥260 #	•			□ Deπ	roffice	,⊒-Glow □ Mon-	ebag Procedure Exempled (*) an	d Non-Friable Pro	cedure				
		ls	Locati	DO:						A	bate	700	nt
- Location of		- N	lonnail d Soloi	У		Description of	af			H	ΓÏ		
'Anhestes-Containing Materia TO BE ABATED	il (ACM)	- Mai	ntonia	ice/		stos Containing Ma _ thermal systems	rential (ACM)	Amount (Specify		R	23	Eno	5
. ' .'			usbdi Stali?			surfacing, VAT	, or	SForLF)	Removal	Ropair	ncapsulate	Enclosure
(13)			(12)			GENERAL RESOLUTION	ious)	ec .		2		8	3
		Yes	No	N/A					1 -	-	Н	-	_
GASEMENT		7	THE	chal insula	71011	25	LF	X	Н	-			
<u> </u>			<u></u>							-	H	-	-
										-	H	-	\dashv
Name of Registered Waste Haule	r	NJ	DEPW	faste H	auter	Cubic Yards of	Name of Regi	stored Landill		1	1		7
Best Removal In			No 710	9	_, -	Waste 1 F7	1	a Enterpr	ises				
Caly, State Hackensack	, Ņ.J. (076	01			Disposal Date	Waynes	ourg , Oh					
Completed by J. Maiorano	Tage Estima	ato	r	-		Signature	ייאסתר.	9	Date 6	120	/1.	3	

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CIL 4527

Date of Notification (1)	120/13		-	Name	of Buildin	S Owner/Operator	E CHO	10 JUL 26 AL	,			
Agency Notified	Type Notification	-:	\dashv	Street	Address				3.	3/3		
DEPA	De Fritzel					WILLIS	RD	<i>₹//</i> 5		0		
E DOL	☐ Amended			City, S	tate, Zip	Code .		. 7540	07		- 2000 -	100 to 100
	Amendment #	ing	L	٧.	000	4 Allin	JGTON	Tolophone Mumi	0/6	28	<u> </u>	
D DCA	justification) Cancellation			Name	of Conta	CItO		1	427	-		6 00
900	- Contraction			EAC		FORMATION		_1				
Name of Facility Where	Abatement is Taking Pl	ace (3)		1740	-	OKEAT TORK	Type of Facility	y (4)		-		
Street Address	YS. CHO		 :	. "£	<u>.</u> .		School (K-1		buildin	gs,		
	WILLIS +						homes, etc Square Feet		Bldg.	Acc		
Cay (5)	ETH. ARL	۵,	,	·			Z ZOO	1				MRS
County (6)	CC IFF. ATCL	1110) (STATE USE		rior if being demolis			-	110
BEV	LGEN		Ī	ONLY)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		\$105N G	1,75%	• •		
Name of Monitoring Firm	Hired by Building Own	er	ASCM	No.		Name of Abaten	nent Contractor	(9)				
(S) .			20				emoval 1	[nc				
Street Address		11.10-E-12.20				Street Address						
City, State, Zip Code						450 S.	River St					
City, State, 24 Code						Hacken	sack. N.	J. 07601	20			
Project Manager for Mon	aloring Firm	T	elephor	ne No.		Telephone No.		License No.				
		-				201-329-	7444 -	00388				
Start Date (10)	Scheduled C		1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3			Name of OSHA	Monitor					
7/11/13	7/		13			Omega En	Vironmen	ital inc				
Occupancy Status During						Street Address 280 Huy	ler St					
Pacility Closed/Vacate Abatement Performed	Outside of Normal Fac	ality Ho	lement uss			City, State, Zip C						-
2 Other - Describe: 7	SM TO SP.	ri .				South H	ackensac	k, N.J. 0	760	6		
Scope of Work (Check at □ ≥ 3 of or ≥ 3 if ☑ ≥ 160 of or ≥ 260 if	ll that apply)			12 Ren 13 Den	ovation	□ Mini-	Enclosure abag Procedure	Negative Pressure		0.625		
				· ·		O Non-	Exempted (*) an	d Non-Friable Proce	dure	Ab	dem	teo
• .	**		Locati Normali			ās				2000	Type	
Locatio Anhestes Containin TO RE AL IN Fac (13)	g Material (ACM) <u>PATED</u> January	· Ma	d Solo intenta Justodi Staff? (12)	ly by nce/ al		Description of store Containing Ma thermal systems surfacing, VAT other miscellane	ntorial (ACM) insulation, , or	Amount (Specify SF or LF)		Removal	Encapsulate	Enciosuro
0.45		Yes	No	NA					_	-	+	H
BASETCE	34.		-		<u> </u>	YAT		6009	SF.	X	+	H
<u> </u>		_		-				_ ,		+	+	H
			-	-	-				-+	+	+	H
Name of Registered Was	te Hauler	I NL	DEPW	Vaste H	auler	Cubic Yards of	Name of Regis	stered Landilli				니
Best Remova		ID	No 710		, ,	Waste 2 º/2	1	Enterpri	ses			
City, State Hacken	sack, N.J.	076	01			Disposal Date 7/12/13	City, State Waynesh	ourg , Oh				
Completed by J. Maiorano	Title Estim					Signature /	رعدد	1	6/	20	11:	3
ACD 41	* 02 20					V						

MO#20613928770

MAY 11

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

Date of Notification (1)			i	Name	of Building	Owner/Operator	(2) 201n					
	19 /1	3		Matth	ew Sulliy	an	4#/J _{U[]}	726 M 2:50				
Agencies Notified	Type Notification				Address	-		All Den				
☐ EPA	Initial			75 Mi	ne Moun	t Road	-	. 50)			
□ DOLWD □	☐ Amended				State, Zip (411	KHONNING			×	
□ DHSS	_ Amendment #			555-5	Vende district in			Kan nat				
	Emergency (i justification)	ncluding	3		rdsville,		9	\.\display	Δr			1000.00 1
(NJAC 5:23-8)	Cancellation							Telephone Numb	-			
	Cancellation			200000000000000000000000000000000000000	ew Sulliv							
				FA	CILITY	IFORMATION					17,000	
Name of Facility Where Al	patement is Takir	ig Place	(3)				Type of Facility					
Private house						II II	School (K-1					
Street Address								8 (Other than K-1 2) private and commerce		ildin	ns.	
75 Mine Mount Road							homes, etc				, ,	
City (5)							Square Feet	# of Floors	В	dg. A	ge	
Bernardsville, NJ 07924	1											
County (6)				Cour	ity Code (7)	(STATE USE ONLY)	Current Use (F	Prior if being demolis	hed)			
Somerset					1.72							
Name of Monitoring Firm I	Hired by Building	Owner	(8)	ASCM	No	Name of Ahaten	nent Contractor (2)				
	•		`			Gr Tech LLC	none ountractor (,				
Street Address						Street Address						-
oli oci Addi oco							#2.02					
City, State, Zip Code						576 Valley Rd	WHITE THE PARTY OF					
City, State, Zip Code						City, State, Zip						
Decised Marris for Maril		******				Wayne, NJ 074	170	·				
Project Manager for Monit	oring Firm		Tele	phone	No.	Telephone No.		License No.				
						973-638-1777		01127				
Start Date (10)		duled C				Name of OSHA	Monitor					
	13	06_ /	30	<u> </u>	13	Envirovision C	onsultants,Inc					
Occupancy Status During	Abatement (Ched	ck only	one)			Street Address			-			
□ Facility Closed/Vacated						20-21 Wagaray	v Road, Bldg .#	35 F				
Abatement Performed	Outside of Norma	al Facilit	y Hour	s - Des	scribe	City, State, Zip (33 L				-
Time of Abatement:	AIVIF	PM/	PM_		_AM	Fair Lawn, NJ						
Scope of Work (Check all	that apply)						up and decontam	ination				
•							ntainment with Ne					
≥ 3 sf or >3 If ≥ 160 sf or >260 If			enovati			Mini-En	iclosure	Tont with Negative	D			
		□ 06	emolitic	011		Non-Ex	ag Procedure Lempted (*) and N	Tent with Negative on-Friable Procedure	Piess	sure		
		Is	Locat	ion	T			The state of the s	_			
Location of			Normai	ly		Description	of			_	ent T	-
Asbestos-Containing M			ed Sole			stos Containing M	aterial (ACM)	Amount	Re	Re	E	Enclosure
TO BE ABAT IN Facility		100000000000000000000000000000000000000	todial S		(i.e	thermal systems		(Specify	Removal	Repair	ap	los
(13)			(12)			surfacing, VA other miscellan		SIF or LF)	<u>a</u>		Encapsulate	ure
10.0		Yes	No	N/A		outer impoonan	ouds,				te	
Danamant	_			×	n				[2]			1
Basement		\perp	닏	N	Pipe ins	ulation		180 LF	X	Ш	Ш	Ш
		П	П						I_{\Box}			
		+=-		+						П		Ш
								1				
Name of Registered Waste	Hauler		NJC	EP Waste	Hauler ID No.	Cubic Yards of Wa	ste Name of Reg	istered Landfill				
Gr Tech LLC			0	03378	35	TBD	T.R.R.F. Inc					
City, State				33376		Disposal Date	City, State		- Contract			_
2050					10		Commence of the Commence					
Wayne, NJ 07470 Completed By (Print or Type	oe) Titi	^				TBD	Tullytown, F				-	
) III	C				Signature	who we	Dat				
N.Jevtic	Ow	ner				1/2	who We	mad 06/	19/20	13		
ASB-41			1000	1-000		//						

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1) June 20, 20	13	Name of Buildin				(04)		11	
			Wend	ly Machos	ù	2	(9	11	
[] DEP [] An [X] DOL An	tial Notification nended Notification nendment #	Street Address City, State, Zip	Code	Linden Avenue		2 //C		6 <i>47</i>)	(3.50
	nergency (including tification)	NGG		Plainfield, NJ 07			14.	14:1	Ž.
	ncellation		dy Macho	s	Telephone Numb	er		V	٠.
Name of Facility Where Abatement is Tak	F (2)	ACILITY INFOR	MATION						
Residence	ing Place (3)			Type of Facility (4					
Street Address 41 Bay Shore Dr	ive			[x]	School (k-12) Subchapter 8 (Other (i.e., pri- homes, etc.)				uildings
City	County (6)	County Code (7) (STATE USE ON	I Y)	Square feet	# of Floors	В	ldg. Ag		
Toms River	Ocean	(0.11.2.002.01	21)	1000 sf Current Use (Prior	f being &molishe	(d)	_	60	
Name of Monitoring Firm Hired by Buildin	g Owner (8)	ASCM No.	II Nama at	Reside	nce				
N/A	(o)	ASCIVI NO.	Name of	Abatement Contracto Guardi	r (9) an Contracting	Inc			
Street Address			Street Ac	ldress					
City, State, Zip Code			City, Star	1889 R te, Zip Code	oute 9, Unit 6	1			
Project Manager for Monitoring Firm	T.1.1. \\			Toms I	River, New Jer	sey 0	8755-	1271	
	Telephone Numb	ber	732-349	e Number	License 00624	Numbe	er		
Scheduled Start Date (10) 6/21/13	Scheduled Comp	oletion Date (11)		OSHA Monitor					
Occupancy Status During Abatement (Check [X] Facility Closed/Vacat [] Abatement Performed [] Other – Describe	6/24/13 k only one) ed During Entire Period of Outside of Normal Facility	Abatement y Hours	Street Ad	dress 1056 St e, Zip Code	L. Analytical celton Road				
Scope of Work (Check all that apply)			L		way, New Jers		854		
[] >3 sf or ≥3 lf [x] ≥160 sf or ≥260 lf		ovation olition	[] [] [x]	Full Containment Mini-Enclosure Glovebag Procedu Non-Exempted (*	ire		lure		
					T T T T T T T T T T T T T T T T T T T				
Location of Asbestos-Containing Material (ACM)	Is Location Normally used Solely by	Ast	Description pestos-Cont Material (AC	aining	Amount (Specify SF	Aba R E	R E	E	E
TO BE ABATED in facility (13)	Maintenance/Custodia Staff (12)	d (i.e. insu	, thermal synlation, surf VAT, or er miscellan	extems acing,	or LF)	M O V A	P A I R	C A P S U	C L O S U
Exterior						L		L E	R E
EXICIO	X	Asbestos sidin	g		800 sf	X			
Name of Registered Waste Hauler	NJDEP Waste Haule	er ID No. Cubic Yar	ds of Waste	Name of Registere	ed I andfill				
Guardian Contracting, Inc. City, State	20223	2		T.R.R.F.					
Toms River, New Jersey	6/25	osal Date /13	City, State	e vn. Aennsylvania					
Completed by (Print or Type) Nicholas Fernicola	Title Project Manager	Signature	last.	Je I		Date 6/20	/2013		
	*Do not use this for	m for ashestos licens	June or ament	ad matinisis		-			

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

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

Date of Notification (1)	Date of Notification (1) June 20, 2013						erator (2) Butler	2013 111	21	910	/	
Agencies Notified [X] EPA	Type of Notifica	tion Notifica	ation	+	Street Address	2.535355	Oorchester Drive	2013 May 20	4/7 .)		
[] DEP [x] DOL	[] Amen	ided Not idment #j	ification	-	City, State, Zip Co	de	vood, NJ 08701	- 6 4 Ch. 11		**}		
[x] DOH [] DCA	justifi	ication) ellation	ioraamig		Name of Contact John I	Butler		Telephone Number	V	(
		17		FACI	LITY INFORM	IATION	36.15					
Name of Facility Where A	batement is Taking sidence	g Place (3	3)				Type of Facility	School (k-12)				
Street Address	Vanard Drive		***************************************				[x]	Subchapter 8 (ot Other (i.e., priva homes, etc.)			ial buil	dings,
City		County	y (6)		County Code (7) STATE USE ONL	Y)	Square feet 1500 sf	# of Floors	Bldg.	Age 6	0	
Brick		Ocea	n		•		Current Use (Price	or if being demolished dence)			
Name of Monitoring Firm		Owner ((8)		ASCM No.	Name of	Abatement Contract		Inc		700	
Street Address	1					Street Ac	ddress	-	4110.		S	
0': 0: 7': C-1-				to was		City Sta	1889 te, Zip Code	Route 9, Unit 61				
City, State, Zip Code					no orde S. iz november i i i san iz iz i i i i	City, Sta		s River, New Jers	ey 087	55-12	271	
Project Manager for Moni	Project Manager for Monitoring Firm Telephone Nu Scheduled Start Date (10) Scheduled Co					Telephor 732-34	ne Number 9-9932	License N 00624	lumber			
Scheduled Start Date (10) Scheduled Co. 6/21/13 6/24/13					on Date (11)	Name of	OSHA Monitor E.M.	S.L. Analytical				
Occupancy Status During				l of Abo	tamont	Street A		Stelton Road		- 3		
	ility Closed/Vacate tement Performed					City St.		- Stelloll Road				
	er – Describe					City, Sta	te, Zip Code Pisca	ntaway, New Jerse	y 088	54		
Scope of Work (Check all	that apply)					[]		ent with Negative Pre	essure			
[x] >3 s	sf or ≥3 lf		[]	Renovati	ion	[]						
1	0 sf or ≥260 lf			Demoliti		[x]		d (*) and Non-Friable	Procedu	re		
									Abate	ment '	Гуре	-
	84		Is Location			Description			R	R	Е	Е
Location		N	lormally used	d		oestos-Cor Aaterial (A		Amount (Specify SF	Е	Е	N	N
Asbestos-Containing N TO BE ABA		Main	Solely by tenance/Cust	odial		, thermal		or LF)	M	P A	C A	C L
in facilit			Staff			ulation, su	rfacing,		O V	I	P	OS
(13)			(12)		oth	VAT, of er miscella			A	R	S U	U
		YES	NO	N/A	Our	ei illiseetti	ancous)		L		L E	R E
Exterior X					Asbestos sidir	ıg		1250 sf	X		_	-
Exterior												
Name of Degistered Waste	Name of Registered Waste Hauler NJDEP Waste Hau				D No. Cubic Ya	ards of Was	te Name of Reg	istered Landfill				l
Guardian Contracting, Inc. 20223				223	3		T.R.R.F.					
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				Disposa 6/25/1		City, St	ate own, Pennsylva	nia				
Completed by (Print or Ty	Completed by (Print or Type) Title				Signature	/ /	/ /	1	Date	/2010		
Nicholas Fer						hol	ter	/'	6/20	/2013)	

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

CK#2709

Date of Notification (1) 06/19/13			N E	lame of Beacon	Building C Redev	wner/O lopme	perator nt LLC	(2) <i>[[]</i>	¹³ JUW 2	6 10		-/-			
Agencies Notified	Type Notification		8	treet Ad Beac	dress on Way	, Suite	16	4		717	<:50				
EPA DEP DOL	Initial Amended Amendment	The second secon	_ J	lersey	e, Zip Coo City, NJ		4	Ā	s ting,						
DOH DCA	justification) Cancellation	o.cog	100	lame of Nick All	Contact legretta,	P.M.				Telep	hone Nur	nber			
				FACIL	ITY INFO	RMATI	ON								
Name of Facility Where A Paramount Building Street Address		g Place (3)						A S	of Facility (4 School (K-1: Subchapter	2) 8 (Other	than K-12	2)			
114-126 Clifton Pla	ce								Other (i.e. p						es,
City (5) Jersey City								230,	re Feet 000	# of F	ioors		dg. A 0+	ge	
County (6) Hudson County	ATC			County C	ode (7) SE ONLY)			Curre	nt Use (Pric	or if being	demolish	ned)			
Name of Monitoring Firm	Hired by Building (Owner (8)		ASCM	No.		10 Date 30		tement Con Contracting		30				
Street Address	XXX action							Addres	ss ant Aven	ue					14
City, State, Zip Code				***************************************			City, S	State, Z	ip Code I 07013						
Project Manager for Mor	nitoring Firm		T	elephon	e No.		S 2000000000000000000000000000000000000	none N 689-6			License N 01099	0.			
Start Date (10) 06/20/13		Scheduled 06/25/13		pletion D)ate (11)				HA Monitor onmental	Labora	atories L	.LC			
Occupancy Status Durin	g Abatement (Chec	k Only One)					Addres							
Facility Closed/Vac Abatement Perform Other – Describe:	ned Outside of Norm	Period of Ab nal Facility F	ateme Hours	ent		10	City, S	State, Z	te 22 Wes ip Code 07081	SI					
Scope of Work (Check A	All That Apply)	- 4						.,		-					$\neg \neg$
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			novat				2	Mir	Il Containme ni-Enclosure ovebag Proc	e cedure					
		Т	9092	T				_I No	n-Exempted	d (*) and	Non-Friat	le Pro	Abate		
Landin	6	1007.00	ocation	10.00		Do	scription	o of					Ту	ре	
Locatio Asbestos-Containing TO BE AB In Faci (13)	Material (ACM) ATED lity	Used Main Custo	Solel ntenan odial S (12)	y by ce/ taff?		tos Con thermal surfa		Materia s insula AT, or		(Sp	ount ecify or LF)	Removal	Repair	Encapsulate	Enclosure
D.		Yes	No	N/A		Duoi	Insula	otion		200) SF	x		10070	
Roo	of		X			Duci	Insula	allon		300) SF	, A			
Name of Registered Wa	ste Hauler		1,100,000	JDEP W		Cubic of Wa	Yards		Name of						
Pyramid Contracting	g Corp.			2613	140.	1	000.00		G.R.O.		nc.				
City, State Clifton, New Jersey						06/25	sal Date	17	City, Stat	e ille, pe	nnyylva	nia			
Completed by Dimo Golcev		Title Gener	ral Ma	anger		\$	Signatur	IN	14		/	ate 6/19/1	3		
ASB-41 (R-06-08)	*****						Do n	ot use	this form for	asbesto	s licensur	e exen	npted	activi	ties.

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CIC. 4524

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Date of Notification (1) 6/20//3		Name	of Buildin	g_Owner/Operator	JINCEN	1. 26 Air 20 8				
Agency Notified Type Notifi	cation	Street	Address	00000		11 AH 2:	50			
DEPA Similari DEP DOL Amendo		1	12	OICUINIC	7 2,			-		_
	ncy (including	Name	of Contact	FRECIO Y	A/UC ,	NJ 076	<u>ල.</u> ල ස			_
□ DCA □ Cancell				IN CENT			-	_		_
		FACE	LITY INF	ORMATION	1					
Name of Facility Where Abatement is TS.T. Street Address 72 ORCH	VINCER				Type of Facility School (K-1 Subchapter Other (i.e. p	2) 8 (Other than K-12) rivate & commercial	buildings	•		
City (5)					Square Feet	# of Floors	Bidg. Ac			
12000FIE	CD PARK	<u></u>			.1800	2		57	'ET	Ac.
County (6) BERGEN		County ONLY)		(STATE USE	Current Uso (F	rior if being demolish スi o e N C E	16G)			
Name of Monitoring Firm Hired by Bu		CM No.		Name of Abatem	ent Contractor	9)				
Street Address				Best R	emoval 1	Inc			_	_
Street Address		2			River St					
City, State, Zip Code				City, State, Zip C	code					-
					sack, N.	J. 07601				
Project Manager for Monitoring Firm	Telep	hone No.		Telephone No. 201-329-	7444 -	00388				
Start Date (10)	sheduled Completion			Name of OSHA	Monitor	tal Inc				-
7/12/13 Occupancy Status During Abatement	7/13/1	13		Omega En	Vironmen	ital inc				
D Facility Closed/Vacated During En	•			280 Huy	ler St					
D Abatement Performed Outside of P DrOther - Describe: 7AM TO	tonnat Facility Hours			City, State, Zip C		k, N.J. 0	7606			
Scope of Work (Check all that apply)	31.1		لنننا			~ `				-
#23 sf or ≥ 3 lf □ ≥ 160 sf or ≥ 280 lf		D Rem	ovation rollion	-E Mini-	Enclosure abag Procedure	Negative Pressure d Non-Friable Proces	fure			
	Is Le	cation	Ī					bate	mes	25
Location of Asbestos-Containing Material (A TO BE ABATED IN Facility (13)	CM) Non Used 8 Mainte Cust St.	mally iolely by mance/ bdial as?		Description of the Containing Ma., thermal systems sufficing, VAT other miscellane	iterial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Ropair	Encapsulate	Enclosure
846-4434	Yes N	to N/A	-11-	:11 0:15	0031)	5051	= x	H	\dashv	\dashv
BASELLENT		~	1460	inal surf	HUPG	2021	+	H	\dashv	\dashv
		+					十	H	1	\dashv
,	.								1	T
Name of Registered Waste Hauler		P Waste H	auter	Cubic Yards of	Name of Regi	stered Landill		-	-	٦
Best Removal Inc	10 No.			14/2C7	Minerva	Enterpri	ses			
City. State Hackensack,	N.J. 07601	L		7//3//3	City, State Waynesi	ourg , Oh			-	- Contraction
Completed by J. Maiorano				Signature	مصحنو	2007	6/2	1,	2	1
o. Halorano	TO CTWG COT			VO			1	71	٢	١

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

Ďate of Notification (1)		Name of	Building (Owner/Open			20.		1/2		2				
	June 21, 2013						DnA D	em	olition	2013	11/2	19	15	1	
Agencies Notified [x] EPA [] DEP	[] Amen	Notificat ded Notif	ication		Street A	te, Zip Co		Cam	plain Road	7.77	· < c	46	2	.	
[x] DOL [x] DOH	[x] Emerg	dment #_ gency (inc	Carry No.	1				orou	igh, NJ 0884		$\langle \zeta_{ij} \rangle$				
[] DCA		cation) llation			Name of	Contact Anton	io Dimuz	io		Telephone	Number	()	_		
				FACI	LITYI	NFORM	ATION								
Name of Facility Where Ab	atement is Taking	Place (3))	11101	21111			Ту	pe of Facility (4		W 0123				
Resi	dence								[]	School (1.10		
Street Address	Durborow Ave	enue							[x]		oter 8 (oth e., privat			ial buil	dings,
City		County	(6)		County C	ode (7) USE ONL	y)	Sq	uare feet 600 sf	# of Fl		Bldg	. Age	0	
Ortley Beach		Ocean	ı	. '	JIML	ODD OND	.,	Cu	arrent Use (Prior Resid		nolished)				
Name of Monitoring Firm I		Owner (8	3)		ASCM N	0.	Name of	Aba	tement Contract		acting	Inc			
N/A Street Address							Street Ac	dres	is	Route 9, U		me.			
City, State, Zip Code							City, Sta	te, Z	ip Code	River, No	50.53	v 087	755-13	271	
Project Manager for Monito	Project Manager for Monitoring Firm Telephone N						Telephor		umber	L	icense N 00624		<u> </u>		
Scheduled Start Date (10)	Completio	on Date (11)		_	IA Monitor	S.L. Analy		930						
Occupancy Status During A	6/21/13 6/21/13 Decupancy Status During Abatement (Check only one)						Street Ac	9	s 1056	Stelton Ro	1.02	F 486	ii i		
	r – Describe		2 Troffinal T				City, Sta	te, Z		taway, Ne	w Jerse	y 088	54		
Scope of Work (Check all t	that apply)	10000			-		[]		Full Containme		ative Pre	ssure			
[] >2.ef	or≥3 lf		r 1	Renovat	ion		[]		Mini-Enclosure Glovebag Proc						
	of ≥3 if sf or ≥260 lf		[x]	Demolit			[x]		Non-Exempted		Friable I	rocedi	ire		
[]												Abat	ement	Type	
			Is Location	1			Descriptio	n of	f						E
Location o	of		ormally us			Asl	estos-Cor	ntain	ing		ount	R E	R E	E N	N
Asbestos-Containing M			Solely by				Material (A				ify SF	М	P	C	C
TO BE ABA		Maint	enance/Cu Staff	stodial			., thermal ulation, su			or	LF)	0	A	A P	L
in facility (13)			(12)			1113	VAT, o		6,			V	R	S	S
(13)						oth	er miscell	anec	ous)			Α		U L	U R
		YES	NO	N/A								L		E	E
Exterior		Asbe	stos sidir	ıg	100		700 s	f	Х						
Name of Registered Waste Hauler Guardian Contracting, Inc. NJDEP Waste Hauler 20223					ID No.	Cubic Ya	ards of Was	te	Name of Regi	stered Landi	fill				
City, State Dis					al Date		City, St Tullyt		n, Pennsylvar	nia "					
Completed by (Print or Typ	Completed by (Print or Type) Title					nte /	1	1	1	1	W.	Date		,	
Nicholas Ferr	nicola	3.5	et Manage			YC	ano	1	Th	_		0/2	1/2013	,	-
	*Do not use th						ısure exen	npte	d activities.						

State of New Jersey

NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1) June 21, 2	June 21, 2013						rato Con:	struction Corp	7 // 1	L	21	9	18	7
[] DEP []	tification Initial Notific Amended No Amendment	otification		Street A	ddress ite, Zip Co	de	- Idol	- Trivende	26	40 E	?: _S	<u>)</u>		
[x] DOH [x]	Emergency (including			95.	Mantu	a, ì	NJ 08051	500 AT					
I I I I I I A I I	ustification) Cancellation			Name of	Contact Nick				releph <u>one Num</u>	iber		_		
			FAC	ILITY I	NFORM	IATION								
Name of Facility Where Abatement is T Residence	aking Place	(3)					T	ype of Facility (4)	School (k-12					
Street Address 142 E. Hudson	n Drive							[x]	Other (i.e., p homes, etc.)	0.50		200	ial bui	ldings,
City	Coun	ty (6)		County C	ode (7) USE ONL	Y)	So	quare feet 1200 sf	# of Floors		Bldg.		0	
Little Egg Harbor	Ocea	an		,		-/	C	urrent Use (Prior	f being demols	hed)				
Name of Monitoring Firm Hired by Bui	lding Owner	(8)		ASCM N	0.	Name of	Aba	atement Contracto		ng. Ir	ıc.			
Street Address			-	***		Street Ac	ldres	SS						
City, State, Zip Code						City, Sta	te, Z	Cip Code	Loute 9, Unit					
Project Manager for Monitoring Firm	Т	Telephon	e Number			Telephor		umber		se Nun		55-12	271	-
Scheduled Start Date (10)		ion Date (1	1)	732-34 Name of		HA Monitor	0062							
Occupancy Status During Abatement (C	6/24/13 6/25/13 ccupancy Status During Abatement (Check only one)					Street Ad	idres	SS	L. Analytica telton Road	11				
Abatement Perfor Other – Describe	med Outside	of Normal	Facility H	ours		City, Star	te, Z		way, New Je	ersey	0885	64		
Scope of Work (Check all that apply)						[]		Full Containmen	t with Negative	Pressu	ıre			
$\begin{bmatrix} \\ \\ \\ \\ \\ \end{bmatrix} > 3 \text{ sf or } \ge 3 \text{ lf}$ $\begin{bmatrix} \\ \\ \\ \\ \\ \end{bmatrix} \ge 160 \text{ sf or } \ge 260 \text{ lf}$		[] [x]	Renova Demoli			[x]	5-0000	Glovebag Proced Non-Exempted (ble Pro	cedur	e		
	T			T							Abate	ment '	Гуре	
Location of Asbestos-Containing Material (ACI TO BE ABATED in facility (13)	on used by Custodial		Ask N (i.e inst	Description pestos-Con Material (A ., thermal sulation, sur VAT, o er miscella	tain CM systerfac	ning (1) ems ing,	Amount (Specify S or LF)	SF 1	R E M O V A	R E P A I R	E N C A P S U L E	E N C L O S U R E		
Exterior		Asbes	tos sidin	ıg			1000 sf		X					
	-	-					-	+	-			-		
	-	-			1					+	+	-	-	-
Name of Registered Waste Hauler Guardian Contracting, I		NJDEP Wa	ste Hauler 20223	ID No.	Cubic Ya	ards of Wast	e	Name of Registr	ered Landfill					1
City, State Toms River, New Jerse				al Date		City, Sta	ate	1)Pepasylvani	a .					
Completed by (Print or Type) Nicholas Fernicola		Signatu	ire ,	1/1	1		1	2.00	Date 6/21/	13				
	Nicholas Fernicola Project Manager *Do not use this j						ptec	d activities.						

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

Date of Notification (1)		Name of	Building (Owner/Ope Messer	rator rcol	(2) a Enterprises	1, 2	110	11	7				
Agencies Notified [x] EPA [] DEP [x] DOL [x] DOH	Amer Amer [X] Emer justifi	tion Notificated Notificated Notificated Notificated Notification) Industry (industry) Ind	fication		Street Ad City, Sta	te, Zip Co	549 Ea de Plainfi	ast 3	, NJ 07060	4/1 2: SU eléphone Number	•			
[] DCA				EACL	I ITY I	MEODM	ATION				-	-	-	ليحت
Street Address	batement is Taking sidence Sylvia Lane	g Place (3		FACI	LIIYI	NFORM	ATION	Ту	/pe of Facility (4) [] [] [x]	School (k-12) Subchapter 8 (oth Other (i.e., private			ial buile	dings,
City Manahawkii		County	\$7.65V.		County C	ode (7) USE ONL	Y)		quare feet 1200 sf urrent Use (Prior if			. Age 6	0	
Name of Monitoring Firm		Owner (8	3)		ASCM N	0.	Name of				Inc.			
Street Address City, State, Zip Code	0 _ =						City, Star		1889 Ro	oute 9, Unit 61	ev 087	755-12	271	
							Telephor 732-34	9-9	umber 932	License N 00624	umber			
Scheduled Start Date (10) 6/24/13 Occupancy Status During Abatement (Check only one) [x] Facility Closed/Vacated During Entire Period						.1)	Street Ac	-0000	SS	Analytical elton Road				
[] Aba	atement Performed er – Describe						City, Sta	te, Z	Lip Code	way, New Jerse	y 088	54		
1 1	sfor≥3 lf			enovati emoliti			[] [] [x]		Full Containment Mini-Enclosure Glovebag Procedo Non-Exempted (*	ire		ıre		
[]						Ast N (i.e. inst	Description pestos-Cor Material (A ,, thermal ulation, su VAT, of er miscella	ntain ACM syst arfac or	ning I) ems ing,	Amount (Specify SF or LF)	R E M O V A L	R E P A I R	E N C A P S U L E	E N C L O S U R E
Exterior		Asbes	stos sidir	ıg			1100 sf	X						
Guardian Co						Cubic Ya	City, St	tate	Name of Registe T.R.R.F.					
Toms River, Completed by (Print or Ty	Toms River, New Jersey Completed by (Print or Type) Nicholas Fernicola Title Project Manager					ire (Tullyt	owi //	Pennsylvania		Date 6/2	1/201	3	
	Nicholas Fernicola Project Manager *Do not use th						isure exen	npte	d activities.					