Kaz

Data shire is an							, Ite	1月6日	1 1		3	1
Date of Notification (1)	20	4.0				ng Owner/Operator	2 Marin		11 N	/ 15	3 1 4	11
6 /	/	12		Vir	tua Hea	lth - Facilities De	velopment					
Agencies Notified	Type Notificati	ion		Stree	t Address	7	10	U JUN 2	7 71	112	TÍ.	7/1
⊠ EPA ⊠ DEP	☐ Initial ☐ Amended			-		ow Road - suite :	3	1				
☐ DCA (NJAC 5:16)	Amendmer	nt #2 -6/1	6/12	0 1 5300	State, Zip		- Action	ASSESTION (YMITTY	70-1		į
☐ DHSS	☐ Emergency	(includin		Ma	rlton, N.		Cinc.	LOIN	3.1.3	s. cr		Ì
(NJAC 5:23-8)	justification Cancellatio				e of Conta			Telephone Nun	iber	MATERIAL CO.	ek-maaa	manual
			-		hn Ange			-			- 20	
Name of Facility Miles	<u> </u>			FA	CILITY	NFORMATION		- and a second				
Name of Facility Where			e (3)				Type of Facility	(4)				
Virtua Health - Old Street Address	voornees Ho	spitai					School (K-12	?) 3 (Other than K-1:	2)			
101 Carnie Blvd							Other (i.e., p	rivate & commerc		dings	i.	
City (5)							homes, etc.) Square Feet	The second secon		lala: A		
Voorhees, NJ 0804	3-1548					3 2	90,000	# of Floors	В	ldg. A 50=	.ge	
County (6)				Cou	nty Code	(7)(STATE USE ONLY)	Current Use (Pr	ior if being demoli	shed)	BULCE.		
Camden				C-1			hospital					
Name of Monitoring Firm	Hired by Buildin	ng Owner	(8)	ASCM	No.		ent Contractor (9)					
Criterion Labs						Controlled E	nvironmental S	Systems				
Street Address						Street Address	(8)					
3370 Progress Driv	e Suite J						lehem Pike - S	uite 60				e dinasco —
City, State, Zip Code Bensalem, PA 1902	00					City, State, Zip C						
Project Manager for Mon			To	lephone	No	Spring Hous	e, PA 19477	Triangle N				
Mike Panapresto	itoring i iiii		4.3	215 244		Telephone No. 215-542-7000	18	License No. 00847				
Start Date (10)	Sci	heduled C				Name of OSHA N		00847				-
6 / _25 /				25 /	NG2 - 14	CES						
Occupancy Status During	Abatement (Ch			7		Street Address						
□ Facility Closed/Vacate	ed During Entire	Period of	Abat	ement			lehem Pike - Sı	uite 60				
Abatement Performed	Outside of Norn	nal Facilit	у Но			City, State, Zip Co						
Time of Abatement: 7	8 00-00	M/ <u>7:00</u> P	M	AM		Spring House	e, PA 19477					
Scope of Work (Check all	that apply)		-				N 1 -				a ve	-
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		Re				☐ Mini-End		ative Pressure				
☑ ≥160 St 01 ≥260 II		⊠ De	molit	ion		☐ Gloveba	g Procedure mpted (*) and Nor	n-Eriable Procedu	re			
		Is	Loca	ation		Name of the last o	, ,			atem	ent T	vne
Location			Norm	ally lely by		Description of				_		
Asbestos-Containing I TO BE ABA		Ma	inten	ance/		estos Containing Ma ermal systems insula		Amount (Specify	Rem	Repair	nca	incl
IN Facilit		Cus	todial (12	Staff?	(1.0., 111	VAT, or	2.4	SF or LF)	Remova	H.	Encapsulate	Enclosure
(13)		Yes	No			other miscellane	ous)		-		ılate	Te
Summit surgical cent	er	П			27 fire	doors		27		П	П	П
Detached office					Mastic			120 SF				
Detached office					12 x 12	Tile & Mastic		24 SF		П	П	П
Detached office				M	Back R	oof Seams		70 SF		П		
Name of Registered Wast	e Hauler		1	NJDEP V	Vaste	Cubic Yards of	Name of Regist		1			
Waste Manangemer	1		ŀ	Hauler ID	No.	Waste	GROWS					
City, State						400 yards Disposal Date	City, State		-	-1-1-	-	
Tullytown PA						10/25/12	Tullytown F	PA				
Completed By (Print or Ty	pe) T	itle				Signature	1	Da	ite		,	-
Patricia Visco		Office N	lana	ger		11 -7	neal l	Luca	61	2 i	/,-	
						piere		-30 00	21	-01		200

No checi State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT State of New Jersey (Pursuant to NJAC 8:60 and 5:16) Date of Notification (1) Name of Building Owner/Operator (2) 6 12 Virtua Health - Facilities Development Agencies Notified Type Notification Street Address **⊠** EPA 20 west Stow Road - suite 3 Amended 6/25 **⊠** DEP City, State, Zip Code ☐ DCA (NJAC 5:16) Amendment # ☑ DHSS Mariton, NJ 08503 ☐ Emergency (including ☐ DCA justification) Name of Contact Telephone Number (NJAC 5:23-8) · ☐ Cancellation John Angelucci **FACILITY INFORMATION** Supplement Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Virtua Health - Old Voorhees Hospital School (K-12) Street Address ☐ Subchapter 8 (Other than K-12) Other (i.e., private & commercial buildings, 101 Carnie Blvd homes, etc.) City (5) Square Feet # of Floors Bldg. Age Voorhees, NJ 08043-1548 90,000 50= County (6) County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished) Camden hospital Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Criterion Labs Controlled Environmental Systems Street Address Street Address 3370 Progress Drive Suite J 1121 N. Bethlehem Pike - Suite 60 City, State, Zip Code City, State, Zip Code Bensalem, PA 19020 Spring House, PA 19477 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Mike Panapresto 215 244 1300 215-542-7000 00847 Start Date (10) Scheduled Completion Date (11) Zã Name of OSHA Monitor / 25 / 12 CES Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 1121 N. Bethlehem Pike - Suite 60 Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: 7:00AM-__PM/7:00PM-Spring House, PA 19477 Scope of Work (Check all that apply) Full Containment with Negative Pressure ≥3 sf or ≥3 lf ☐ Renovation Mini-Enclosure ≥160 sf or ≥260 lf □ Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Remova Repair Enclosure Encapsulate Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, surfacing, Custodial Staff? (Specify IN Facility VAT, or SF or LF) (12)(13)other miscellaneous) No Yes N/A Heli Pad Roof П M South Hilver 200 SF M Summit surgical center Roof П M Black roofing material 19,440 SF X П Summit surgical center Roof П Gray/Black Flashing material П X 692 SF M See attached Inventory Table П X See attached table see attached X П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Waste Management Hauler ID No. Waste **GROWS** 400 yards City, State Disposal Date City, State Tullytown, PA 10/26/2012 Tullytown, PA 19067 Completed By (Print or Type) Title Signature Patricia Visco Office Manager

ASB-41 JUL 01

* Do not use this form for asbestos licen

ore Champied activities Visco 6/25/1

1206-4507 Check #4257

Date of Notification	(1)			Na	ame	of F	Ruildin	g Owner / Opera	tor (2)	100 mg (4 mg	Substitution of the second	Ningano Pina		
	6/25/12	1		M	iddl	ese	ex Co	unty Vocation	al School	EIWE	7	7		
Agencies Notified	Type Notific	cation		St	reet	Add	dress	unity vocation	Lay (15 11 11/ 17	- IAI	1 2		
⊠ EPA	—	620		_			s Lan				711 11			
DEP DOL	│	al ended #						Code	H H IIII	1 2 7 2012	11111	i		
□ DOH				Ea	est E	3ru	nswi	ck, NJ 08816		· 4 / 2012				
DCA		ergency cellation					Contac		Andrewson	Action to the state of the stat	Teleph	ione	Nun	nber
								ninistration	- ASBES	105 CONTROL &	· } :			
Nome of Facility Ma					FAC	ILI	TY IN	FORMATION	Company of the company of	4461831180	Total I			
Name of Facility Wh Middlesex Count	iere Abatem	ent is Taking P	lace	(3)				Type of Fac		Thus, $ \langle v^{\prime} - v_{1}(x) \rangle \langle u(x) \rangle \langle u(x) \rangle \langle v(x) \rangle $	Al .	- 1		
Street Address	y vocation	iai School						CONTROL OF THE PROPERTY OF THE	(K-12)			- B		
112 Rues Lane								Subch	apter 8 (Other t	han K-12) Unoc	cupied			
								Square Fee		ommercial buildi			etc.)
City (5)		County (6)	IC	OUN	ty C	ode	(7)	Square Fee	t # of F	loors	Bldg. A	ge		
East Brunswick		Middlesex	1	oun	ty O	ouc	(1)	Current He	/Drion if hair-	1 1 1 8				
		illia di Cocx						School	(Prior if being	demolished)				
Name of Monitoring	Firm Hired b	y Building Own	er (8	3)		AS	CM N	The state of the s	atement Contra	actor (O)				
Health & Safety S	ervices	, ,		<i>x</i>			0.1111	AbateTecl	ı. İnc.	acioi (9)				
Street Address					T.			Street Addre					_	
318 12 th Street		*						PO Box 25	i					
City, State & Zip Coo Hammonton, NJ (City, State 8						
Project Manager for		irm I	T .						n, NJ 08048					
Jim Proctor	worldoning r		Tele 609				iber	Telephone 1		License				
Scheduled Start Date	e (10)	Scheduled Com					<u> </u>	609-265-21			005	29	-	
7/9/12	()	oonedaled oon	7/1			(11)	Name of OS EMSL Ana						
Occupancy Status D	uring Abater	ment (Check on	lv on	e)		-	***********	Street Addre						
Facility Close	d/Vacated [During Entire Pe	eriod	of A	Abate	eme	ent	108 Haddo						
	erformed Ou	utside of Norma	l Ho	urs				City, State &						-
Describe:								Westmont	NJ 08108					
Facility Occup Scope of Work (Chec	oled During	Abatement												
ocope of work (Chec	ж ан шагар	bià)												
≥3 sf or ≥3 lf			\square	R	enov	vatio	าก			ntainment with N	Negative	Pre	ssure	Э
≥160 sf ≥260	lf		H		emo					closure Bag Procedures				
										empted and Nor	a Eriable	Dr.	a a d.	
	ation of				atior			Descriptio	n of	Amount		atem		
	s-Containing ial (ACM)	1	Norr			ed		Asbestos-Cor	ntaining	(Specify	7100	Terri	CIIL I	ype
	ABATED		S Main	olely		or		Material (A		SF or LF)	T		Ш	m
	acility		Custo					i.e., thermal s insulation, surfa	systems sing VAT	6 H	Remova	Repa	Encapsulate	nclo
20	(13)			(12	2)			or other miscell	aneous)		ova	bair	sula	Enclosure
			Yes	No	N	I/A					-		ite	(D)
Boiler Room (Boil	ers 1&2)						Spra	yed on Asbes	tos material	20 SF			П	П
				Щ						2800 11300 - 200	TH	Ħ	Ħ	T
			4		L	_							Ħ	
			4	님	1	4								
			-	님	L	4								
ame of Registered W	/aste Haule			INI	IDE	DV	Vosts	Cubic V- 1	IN .					
	Loto Haule						No.	Cubic Yards of Waste	Name of Regi	stered Landfill				
bateTech, Inc.				1		375		6	TRRF Landf	511L				
ity, State								Disposal Date	City, State			91		303
umberton, NJ								7/11/12	Tullytown, F	PA				
ompleted By (Print or	Type)			Ti	tle		-	Signature	, , , , , , , , , , , , , , , , , , , ,		Date	= 1.		
wen Trumbetti				1100000	ffice			1	b	9.3	6/25/	12		
				C	oor	d.		COM	A		01201	. 4		

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 7:26-2.12)

			NOI		N.J.A.C. 7:26-2.				(6) (F	II TVI	7 72	
Date of Notification (1) 1/13/12		HITTANA PERSONAL PROPERTY AND ADMINISTRATION OF THE PERSONAL PROPE			Name of Bu BASF Corpo		er/Operator (2)		<u>6</u> E	<u> </u>	15	The second secon
Agencies Notified (X) EPA (X) DOL (X) DOH		Notification () Initial N (X) Amend () Cancell	otification ed Certific	ation Rev. 6	Street Addre 100 Campus City, State, 2	s Drive Zip Code	2	Tunk E		2 7 20		
() DCA		() Cancell	cu		Name of Co Frank Piech	ntact	2	Tel. 1	Number	ENSINU		
			-	FACILITY	INFORMATION	Octa				15	ngiệnh ro	
Name of Facility Where Aba BASF - Main Production Bo		Taking Place	(3)		Type of Faci () School (I () Subchap	(-12)	than K-12)					
Street Address					(X) Other (i.e	e. private &	commercial bl	dgs., ho	mes, et	c.		
1 James Street					Sq. Feet 1	21700	# of Floo	re 2				
	County (6)		County	Code (7)	- Oq. 1 cot _ 1	21700	# 011 100	15				
Belvidere	Warren		(State U	Jse Only)	Bldg. Age _5 Current Use	50 +/- (prior if beir	ng demolished)vaca	int man	ufacturin	ıg	
Name of Monitoring Firm Hi	red by Bldg	. Owner (8)	ASCM	No.			Name of C			74 20	2002	
V25 N 0000000 700000 7	221 (CO (S)		00104				NCM Demo	olition ar	d Rem	ediation,	LP	
Environmental Health Inves	tigations, In	C.	1		1.64		100	1				
Street Address					Street Addre 404 N. Berry							
655 West Shore Trail					404 N. Deiry	Sueet						
City, State, Zip Code		- dustinus			City State, Zi	ipCode						
					Brea, CA 92							
Sparta, NJ 07871 Project Manager for Monitor	in a Firm	Talaskasa	VI b					1				
William S. Kerbel, CIH	ing riim	<u>Telephone</u> 973-79-564			Telephone N 484-480-893			01066	se Num	ber		E
Scheduled Start Date (10) 1/30/2012		Scheduled (7/27/2012	Completio	n Date (11)	Name of OSI Testor Tech		ente La companya de l	1				
Occupancy Status During Al (X) Facility Closed/Vacated () Abatement Performed O	During Enti	re Period of A	batement		Street Address 10 59 Jackso							
Describe Vacant Bldg. To Be 121,701 sf building to be de					City, State, Zi	ip Code	L.I.C. N	ew York	, 11101		Mineral Physics and Physics and Physics (1994)	
Other - Describe	-4 1 3					· · · · · · · · · · · · · · · · · · ·					201	
(X) Demolition () Renova (X) Large Proj. (>160 SF or X (X) Full Containment with N	ation >260 LF AC legative Pre	ssure (X)	Mini-Enc	losure (X)	Glovebag Proced	dure (X) No		door Wo	F ACM)			
Location of Asbestos- Containing Material (ACM) in Facility (13)		tion Normally by Maint./Cus 12) NO		Description of thermal system surfacing, VA miscell.)	ms insulation,	Amount ((Specify SF or	LF)	Abate Rem.	ment Ty		Enclose
Throughout see attached	X	T		See attached	sheet	See attac	ched sheet		X			T
sheet												
				1				7				
		1										
						ļ						_
Name of Reg. Waste Hauler		NJDEP Wast	e Hauler I	D#	Cubic Yards of	f Waste		Name	of Pos	Landfill		1
Service Transport Group		A901 #209			80	· vvasic	S	Minerva				
City, State					-	1219	Disp. Date 7/27/12		<u>C</u>	ity, State Vaynesb		1
58 Pyles Lane - New Castle,					-		**************************************					
Completed by (Print or Type) Joseph K. White		<u>Title</u> Pro	ject Coor	dinator	Signature	. ,		<u>Date</u> 6/26/12				ren, s
					1 18 mil 11	. white	<u></u>					

NOUTICATION OF Demolitio X. Description of Planned Den Building will be demolished us	nolition or Renovation Work a	and Methods to be	Used: inical means	& methods,
XI. Description of Engineering Demolition or Renovation Site. Wet materials during cutting of hoists or lifts or use dust-tight VAT and chemical removals fo transite and caulking etc. & Mi.	; perations, use rotary roof cut chutes.Use glovebagging for r mastics. Non-friable remova	ting instruments, l r pipe & fitting insu	lower the ma	aterials to the ground using I negative air containments for
XII. Waste Transporter#1 Wast				
Address: 100 Ave. A				
City: Newark	County: Essex		State: NJ	Zip: 07114
Contact: Susan Rubinetti (Layton)			Telephone: 20	- J ·
Waste Transporter#2 Service	ce Transport Group, Inc.			
Address 58 Pyles Lane			**************************************	
City New Castle	County New Castle		State DE	Zip 19720
Contact Tom Gaudet		H # 1	Telephone 30	
XIII. Waste Disposal Site Mine	rva Enterprises		EPA Certificati	on Number: PO104984
Address: 9000 Minerva Rd			1	
City: Waynesburg	County: Stark		State: OH	Zip: 44688
Contact: Sara Pomera			Telephone: 330	1-866-3435
XIV. If the Demolition was Orde	red by a Government Agency	Please Identify th	The same of the same of the same of	Continent of the reservoir of the second of
lame	, , , , , , , , , , , , , , , , , , ,	Title	re rigericy D	
Authority				
Date of Order (MM/DD/YY)		Date Ordered to	Begin (MM/DD/Y	Υ)
KV. For Emergency Renovation	S:			
DATE and HOUR of Emergency: (MM/DD/Y		(HH:MM) 9:00 am		-
Description of SUDDEN, UNEXPECTED EV			xisting ceiling o	f EMT Rm.
xplanation of how the Event caused unsa	ne conditions, or a serious disruption o	f industrial operations		
(VI. Description of Procedures Friable Asbestos Material Becor Restrict work area and regulate, nethods.	nes Crumbled, Pulverized or I	Reduced to Powde	er	
(VII. I Certify that an Individual, During the Demolition or Renova Person will be Available for Insp	ation, and that Evidence that t	the Required Train	ing has Bee	n Accomplished by this
		of Owner/Operator)	(Dat	6) 6/28/12 5 (F E I W E
VIII. I Certify that the Above Info	ormation is Correct	,	3	
	do	ap le bald		[] [] JUN 2 7 2012
	(Signature o	of Owner/Operator)	(Date	e) 6/26/12
		### (#Inches 200 (#INC) Existence (#INC)		ASBESTOS CONTROL & LIGENSIMO

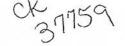
520290

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 7:26-2.12)

04-							1000	P M	15	n W		1	1 4
Date of Notification (1) 2/06/12					Name of Build BASF Corpor		Operator (2)	E W	10	II W	L	And the second s	
Agencies Notified (X) EPA		Notification () Initial No			Street Address 100 Campus City, State, Z	Drive		111	11 2	7 20	n2		
(X)DOL				ion Rev. #3	City, State, Z	ip Code							M
(X)DOL (X)DOH		() Cancelle		ion Nev. #3	Florham Park	N107033		L	27.00	DOUT DO	VI 0	i.	1.1
() DCA		() Garicein	Ju		Name of Con			Tel. Nu		CONTRO	14 Es		-
() 20/1					Frank Piecho			I IEL IN	инилень.	1.40		erseign (B.P. of Fried	Agree SP
	-			EACH ITY IN	NFORMATION	Cta	X			1.15.63	act to be the	alestres to	÷.
Name of Facility Where A	hatement is	Taking Place	(3)	TACILITI	Type of Facili	ity (A)	750						and the
BASF – Powerhouse Buil		raking riace	707		() School (K () Subchapte	-12) er 8 (other tl							
Street Address					(X) Other (i.e.	. private & c	ommercial blo	lgs., hom	es, etc	;.			
					Ca Foot 1	E000	# of Floor	2 1 505	tial ma	~~			
1 James Street					Sq. Feet1	5000	# of Floors	5 2 + par	tiai me	22			
City (5)	County (6)		County C		Bldg. Age _60	0 +/							
Belvidere	Warren		(State Us	e Only)	Current Use (demolished)	Powe	rhouse				
No. of Manager Firm	Band his Dida	Outras (0)	A C C NA NI		Current ose (prior ii being	Name of Co		-			3995	
Name of Monitoring Firm			ASCM No 00104	<u>.</u>			NCM Demo			ediation	, LP		
Environmental Health Inve	estigations, In	C.			T 01 1 1 1 1								- 2
Street Address					Street Addres 404 N. Berry								
655 West Shore Trail													
City, State, Zip Code	55				City State, Zin Brea, CA 928								
Sparta, NJ 07871													
Project Manager for Monit	oring Firm	Telephone			Telephone Nu			License	e Num	ber			
William S. Kerbel, CIH		973-79-564	9		484-480-8931			01066					
Scheduled Start Date (10)		Scheduled	Completion	Date (11)	Name of OSF	A Monitor							
2/21/2012		8/17/2012			Testor Tech								
												2015	
Occupancy Status During					Street Addres		628 N						
(X) Facility Closed/Vacate	ed During Ent	ire Period of A	Abatement		10 59 Jackson	n Ave.	200						
() Abatement Performed	Outside of N	ormal Facility	Hours -										
Describe Vescat Bldg. To	Da Damaliah				City, State, Zi	p Code	L.I.C. N	lew York,	11101	l,			
Describe Vacant Bldg. To 15,000 sf building to be d													
Other – Describe	emonshed in	its entirety											
Source of Work (Check al	that apply)			-									
Source of Work (Check an	that apply)												
(X) Demolition () Rend	ovation												
(X) Large Proj. (>160 SF of		CM) ()Small I	Proi (>25<1	60 SF or >10 <	260 LF ACM)	() Minor I	Proj. (<25 SF	or <10 LF	ACM)			
(X) Full Containment with			Mini-Enclos		lovebag Proced					·			
Location of Asbestos-		ation Normally		Description of			Specify SF or			ement T	уре		41
Containing Material (ACM		by Maint./Cus		thermal syster		1			35-2-11072	W48F-0-00-1			
Facility (13)	Staff?			surfacing, VA					108 Exercise				W000000000
	YES	NO	NA .	miscell.)					Rem.	Rep.	Encar	Enc	lose
Throughout Interior &	X			Pipe Insulation	1	2,700 lf			X				
Exterior Pipe Racks													
Windows	X			Glazing on Wi	ndows	150 ea	ch		X	1			
Throughout	X		in ear	Debris on Floo	or	500 sf			Χ				
Mezzanine Deck	X			Tank Insulatio	n	800 sf			Χ.				The state of
Top Tier & @ Boilers	X			Wire Wrap		150 lf			Χ				
Boilers	X			Block Insulation	on	18,000 sf			Χ				
South Side & Elec. Switch				Transite & Bla		5,100 sf			Χ	1			
Roof	X	- 9		Flat & Flashing		13,000 sf			Χ				0.00
Name of Reg. Waste Haul	and the same of th	NJDEP Was	te Hauler II		Cubic Yards o		1	Name o	of Reg.	Landfi	11	-	
Service Transport Group			990 / SW21		120			Minerva			The state of		
City, State							Disp. Date			City, St	tate sburg, 0	JH.	
58 Dulas Lana May Cas	tle DE						8/17/12			vvayne	sourg, C	Л	
58 Pyles Lane – New Cast Completed by (Print or Type		Title			Signature			Date					
Joseph K. White	26)	<u>Title</u>	oject Manag	ner		2779		6/26/12	r.				
osoph it. winte			ojoot mana	, , ,	1640	a. wh	80	5.25/12					

Notification of Demolition or Renovation			
X. Description of Planned Demolition or Renovati	on Work and Meth	ods to be Used:	
Building will be demolished using wet dust suppr	ression methods w	ith Mechanical mear	ns & methods.
XI. Description of Engineering Controls and Work	Practices to be Us	sed to Control Emmi	sions of Ashestos at the
Demolition or Renovation Site:			orono or riosestos at are
Full negative air containments for interior abatem	ent. Wet removal n	nethods. Vacumms	will be equipped with hepa filters.
Regulate areas using signage and use drop poly a	and wet methods fo	or Window Caulking	. Exterior piping utilizing glovebag
methods.			
VII Mosto Transporte Hd 14/2 d 18/			
XII. Waste Transporter#1 Waste Management			
Address: 100 Ave. A			
City: Newark County: Esse	ex	State: NJ	Zip: 07114
Contact: Susan Rubinetti (Layton)		Telephone:	201-206-2258
Waste Transporter#2 Service Transport Group	, Inc.		
Address 58 Pyles Lane			
City New Castle County New C	Castle	State DE	Zip 19720
Contact Tom Gaudet		Telephone	302-778-5930
XIII. Waste Disposal Site Minerva Enterprises		EPA Certific	ation Number: PO104984
Address: 9000 Minerva Rd	- Marine Transport (1985)		
City: Waynesburg County: Stark		State: OH	Zip: 44688
Contact: Sara Pomera		Telephone:	330-866-3435
XIV. If the Demolition was Ordered by a Governme	ent Agency, Please	Identify the Agency	Below:
Name	Titl		
Authority	F1 1/2		
Date of Order (MM/DD/YY)	Dat	e Ordered to Begin (MM/DI	D(YY)
XV. For Emergency Renovations:		CONTRACTOR DESCRIPTION	
DATE and HOUR of Emergency: (MM/DD/YY)	Існи	:MM)	-
Description of SUDDEN, UNEXPECTED EVENT	10	,	Francisco Company
Explanation of how the Event caused unsafe conditions, or a seriou	s disruption of industrial	operations	
XVI. Description of Procedures to Be Followed in the	he Event that Unex	pected Asbestos is	Found, or that Previously Non-
Friable Asbestos Material Becomes Crumbled, Pulv	verized or Reduced	l to Powder	
Restrict work area and regulate, wet material, notify	y appropriate regui	atory agencies, con	nmence cleanup using wet
methods.			
XVII. I Certify that an Individual, Trained in the Prov	visions of this Real	lation (40CFR Part	61 Subpart M) Will be On Site
During the Demolition or Renovation, and that Evid	lence that the Regu	ired Training has B	een Accomplished by this
Person will be Available for Inspection During Norn	nal Business Hour	6 (Required one (1) year aft	er promulgation).
	1.11.11	with	
	(Signature of Owner)	i Phili	C. L. C.
KVIII. I Certify that the Above Information is Correct	(Signature of Owner/O	perator) ;	Date) 6/26/12
come recently that the Above information is correct	, ,		
TOTAL TO THE PARTY OF THE PARTY	1 / 12.9.11.	6-10	
			2 7 Why 4 4
	(Signature of Owner/O	perator) (L	Date) 6/26/12
		- 1 to	102310 - 7
			10.7 (10.7)

a 686 STATI	E OF NE	W JERSEY	DEPAR	TMENT OF	LABOR NOTIFICA	TION OF ASBI	ESTOS ABA	TEME	NT	NA.	
Date of Notification (1)				-	Name of Build	ing Owner/Operat	or (2)		Aprilled Street		j.,
06/26/12					3 Star Constru	ction,Inc			ř.l.	W E	
Agencies Notified (X) EPA		otification Type X) Initial		tion	Street Address 580 Mor	ntgomery St.	Shop 7	- E (2.7	peng	
(X) NJDEP (X) NJ DOL () DOH () DCA) Amend) Emerg	ded Cer gency N ding jus	rtification otification tification)	Jersey C	ity,NJ,07302			oli Üün Historia		The second second second
				EVOILI	I Monan	mad Malik	<u>, , , , , , , , , , , , , , , , , , , </u>				
Name of Facility Where Abate	ement is T	aking Place ((3)	FACILI	Type of Facility						
Residential Property Street Address				-	() School (K-1 () Subchapter		2) cial bldgs., ho	mes, etc	.		
183 Arlington Avenue	e					0		_			
City (5)	County (Code (7) Ise Only)	50 39	00_# of Floors <u>2</u>		<u>U</u>			
Jersey City	Huds	on			Current osc (p	nor it being derior	isiica)				
Name of Monitoring Firm Hire N/A	d by Bldg	. Owner (8)	ASCM	No.	Name of Contra ISES, Inc.	actor (9)					
Street Address					Street Address						
City, State, Zip Code					3300 Huds City State, Zipo		10.00				
N/A					Union City	, NJ					
Project Manager for Monitorin David Camacho	g Firm	Telephone (201) 32			Telephone Nur (201)325-0	nber	Licen 011	se Num	<u>oer</u>		
Scheduled Start Date (10) 07/05/12		Scheduled 07/05/12		n Date (11)	Name of OSHA ISES, Inc.	Monitor					
Occupancy Status During Aba (x) Facility Closed/Vacated () Abatement Performed C Describe: Residential structu Other:	During Er outside of	ntire Period of Normal Facili	Abatementy Hours -	nt	Street Address 3300 Hudse City, State, Zip Union City	on Avenue					
Source of Work (Check all tha	f annly)			*****	Cilion City	, 143 07007					
7.	(apply)										
≥ 3 SF or ≥ 3 LF □ ≥ 160 SF or ≥ 260 LF		Reno	ovation olition		☐ Full Containm ☐ Mini-Enclosur ☐ Glovebag Pro ☐ Non-Exempte	re ocedure			е		
Location of Asbestos- Containing Material (ACM) in Facility (13)		tion Normally by Maint./Cus (12) NO		thermal sy	n of ACM (i.e. /stems insulation, VAT, or other)	Amount (Specifi	y SF or LF)	Abate	ment Ty	- T	Enclose
Basement		X		TSI Pip	e insulation	50 Lft		X		T	
		-		Boiler b	lock Insulation	30 Sft		X			9.700
	-							-		ļ	
Name of Reg. Waste Hauler Newark Carting Inc		NJDEP Was 04509	te Hauler	ID#	Cubic Yards of Was	l te	Name of Re			Land	fill
City, State		3,307			Disp. Date		City, State	und C	Junty	Land	
369 Raymond Blvd,Ne	work N	JI 07105						- DA	17040		
Completed by (Print or Type)	wark P	Title			07/05/12 Signature	· · · · · · · · · · · · · · · · · · ·	Newburg Date	3, PA	1/242		
Jorge Delgado		Superviso	or		Fort	20	06/26/12				



Date of Notification (1) 6-25-12						ner/Operator		EG			E		n	1 30 40
			Street 250 City, S	Address	Fowr Code	Center, I		Route 23	and W	/illowb	roc	ok E	lvd	
DOH Em	ergency (including ification) acellation	3	Name	of Contac Dinenbe	t		1	ASSES	elephor	ne Num	ber		P.49.408	
Name of Facility Where Abatement Wayne Town Center Fortun Street Address 250 Wayne Town Center	is Taking Place off	(3)	FA	CILITY INI	FORM	MATION	School Subcl	ocility (4) ol (K-12) hapter 8 (Of	her tha	n K-12)	bui	Idino	ıs, ho	mes.
City (5) Wayne							Square Fe 220,000		of Floor		I	3ldg	Age	
County (6) Morris			County (STATE	Code (7)	Y) _		Current Us Not in us	e (Prior if be	eing der	molishe	d)			
Name of Monitoring Firm Hired by E Certified Environments Inc.	Building Owner (8)	ASC	M No.		Name Gram	of Abatemer nercy Gro	nt Contracto up Inc.	or (9)					
Street Address 136 West 83rd Street, Suite	1				- 0.6	1.0000000000000000000000000000000000000	Address Burns Av	enue						
City, State, Zip Code New York NY, 10024							ate, Zip Coo agh NY 1							
Project Manager for Monitoring Firm Greg Paulay			301-3	one No. 346-5005			one No. 76-0020		Licen 0108	nse No. 35				
Start Date (10) 7-9-12	12-31-	12	mpletion	Date (11)		11 12 120	of OSHA Mo ercy Grou							
Cocupancy Status During Abatemer Facility Closed/Vacated During Abatement Performed Outside Other Describe: Vacant Reta	Entire Period of A of Normal Facility Il Store	Abater	ment			City, St	Address Burns Ave ate, Zip Cod agh, NY 1	е				_		
Scope of Work (Check All That Appl ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	F	lenova emoli				×	Mini-Enclo Glovebag	ainment with osure Procedure npted (*) an					re	
Location of	1	Locat	lly			Description o						Abat	emen /pe	ıt
Asbestos-Containing Material (Ad <u>TO BE ABATED</u> In Facility (13)	Mai Cust	d Sole ntena odial ((12)	nce/ Staff?	Asbes (i.e.	tos Co thern sui	ontaining Ma nal systems i rfacing, VAT er miscellane	terial (ACM) nsulation, or	(8	mount Specify or LF)		Removal	Repair	Encapsulate	Enclosure
South East Corner of Stor	Yes Yes	No	N/A X	Unstal	ble S	Spray on fi	reproofing	1 30	00 sf	X	+			
3 locations throughout the s	tore		X			pray on F			9 sf	X	-		X	
Delaminated Fireproofing on D	ouctwee		X		-	ed spray o			3 sf	X	+			
Column Bases and Broken \	/AT		Х	Debri	s cle	an up and	disposal	4,5	00 sf	-	-	<	X	
Name of Registered Waste Hauler Horwith Trucks Inc.		Н	JDEP W auler ID 3227			ic Yards /aste		of Register	red Lan					
City, State Northampton, PA 18067						osal Date 31-12	City, S Way	State nesburg (DH .		-11 -22		_	
Completed by Robert Lewin	Title Enviro	nme	ntal Co	ordinato	or	Signature		- 1, 1, 1, 1, 1	T	Date 6-25-	12			

NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 7:26-2.12)

								147	1 ir	11 17		W =	11-1	į
Date of Notification (1)					Name	of Building	Owner/Op	erator (2)	11				-11 11	I
00/45/0040		59			Winst	anley Ente	rprises, LL	.C	51.				#1 []	į
06/15/2012		T						111_	111				11 11	l
Agencies Notified		Notification	1 lype			Address eorge Stre	et	113	Ш	HIN	27, 8	012		SECTION
()EPA		(X)Initial	Notificatio	n		state, Zip Co		-	7			100	1	i
(X) DOL			ed Notifica	ition -		laven, CT			1,000	epretar	0.03070		-3	Į.
(X) DOH		() Cance	lled			of Contact	***			ne Hon		UL 5	-	1
() DCA					Adam	Winstanle	У	Low years	-				2 1 4 4 1 1 1 1 1	No.
				FACILITY	INFORMA	TION							_	
Name of Facility Where A		Taking Place	(3)		Type	of Facility (4	1)							_
Former Pathmark Supe	rmarket				() Sc	nool (K-12)	other than I	< 12\						
Street Address					(x) o	her (i.e. pri	vate & com	mercial b	ldas: h	omes, et	c.)			
130 White Horse Pike N	orth				51 18	3350 - 35								
City (5)	County (6)		I County	Code (7)	- Sq. Fe	et 61,160 s	or NO	of Floor	5. 4		70			
Lawnside	Camden			Ise Only)	Bldg. /	Age: 40 yea t Use (prior	ars r if being de	molished) Build	ing Cur	rently V	acant		
Name of Monitoring Firm	Hirod by Blde	Oumor (9)	ASCM	vlo.		1000 	LKI			- (0)				_
Smith & Wessel Associa		g. Owner (a)	ASCIVIT	NO.	133			ame of C uperior A						
Street Address			-		Street	Address					-			-
8 Church Street	28				2 Hend	derson Driv	ve, Ste A							
City, State, Zip Code					City St	ate, Zip Coo	dè			-				_
Merrimac, MA 01860	80					aldwell, N								
Project Manager for Monit	toring Firm	Telephone	Number		Teleph	one Numbe	er		Licen	se Num	ber			-
Eric Hanson		(978) 346-4	800			08-1616			0041		,			
Scheduled Start Date (10) 6/26/2012		Scheduled 9 7/25/2012	Completion	n Date (11)		of OSHA Mo								
Occupancy Status During	Abatement (e)			Address	orit, mor							
(X) Facility Closed/Vacate() Abatement Performed	d During Enti	re Period of A	batement			erson Driv	e, Ste. A	15						
() Other – Describe:		54				ate, Zip Co aldwell, N								
Source of Work (Check all	that apply)													_
Source of Work (Offeck all	triat apply)													
() Demolition (X) Ren														
(X) Large Proj. (>160 SF	or >260 LF A	CM)()SMP	roj. (>25<1	160 SF or >10 <	260 LF AC	M) () N	/linor Proj. (<25 SF o	r <10 L	F ACM)	~			
(X) Full Containment with	Negative Pr	essure ()	Mini-Enclo	sure () Gloveb	ag Procedi	ire () Non	-friable Pro	cedure fo	r Asbes	tos Roo	f Remo	val,		_
Location of Asbestos-Cont Material (ACM) in Facility (aining is L	ocation Norm	ally Used	systems insu	if ACM (i.e.	thermal	Amount (Sp	ecify SF	or LF)	Abate	ment T	pe		
iviaterial (ACIVI) III I acility (ely by Maint./0 ff? (12)	Justoulai	VAT, or other	r miscell \	acing,	¥.							
	NA NA		NO	VAI, or ourse	miscen.			74		Rem.	Rep.	Encap	Enclose	į.
1 st Floor	Х			Mastic with	2 lavers FI	por Tile	36	,000 SF		X	T	T	T	-
2 nd Floor Employee Loun				Mastic with				500 SF		X	-	1	_	-
Exterior Front of Buildin				Gray Window				100 LF		X		1	+	=
				Oray William	- Guarting			100 Li		-		1	_	-
														_
		NUDEDIN			1 2									_
Name of Reg. Waste Haule Service Transport Group		NJDEP Was SW2117	te Hauler I	D#	400	ards of Was	ste			of Reg. rva Lan				
City, State						Disp. Dat	е	1	organisation of			-		-
New Castle, DE						7/25/2012				Minerva esburgh		600		
Completed by (Print or Typ	e) T	Title			Signatur	Pa 1 1			Date	candigii	O11 44	1000		-
Nick Petrovski	-/	President			Jigriaidi	7//	///		06/15/	2012				
	- 1				1/1	11/1								
					100	in V	MIN	m						



NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to N.J.A.C. 7:26-2.12)

Date of Notification (1)				1 7	Name of Bu Winstanley		wner/Operator (2)		- 13 - 1		Description of the second	1
06/25/2012		N CC C	T		Ctra at Addr				a may you	510.00	444	
Agencies Notified		Notification			Street Addre 300 George	Street	1 1	JIM Z	2.7.2	012.	L	7.
() EPA (X) DOL		()Initial No (X) Amend		tion # 1	City, State, New Haven		00511		TO SHARE THE TWO		Ì	
(X) DOL		() Cancell		1011 11	Name of Co		00011	Phone	CONTRI	OL a	See	1
()DCA		* *			Adam Wins		The second control of			Market Land	· catternance]
				FACILITY IN	FORMATION				UNDER SELE	- 1000 V 1920	August -	- 9
Name of Facility Where Aba	atement is Tal	king Place (3)	17,000111111	Type of Fac					1 4	107 - 1456	ET 2
Former Pathmark Superm		,	•		() School (K-12)	her than K-12)	54				
Street Address							te & commercial blo	igs., hom	ies, etc.	.)		
130 White Horse Pike Nor	th				Sq. Feet 61	1,160 SI	No. of Floors	: 2				
City (5)	County (6)		County C					3911 W. C.				
Lawnside	Camden		(State Us	e Only)	Bldg. Age: Current Use		<u>'s</u> f being demolished)	Buildin	g Curre	ently Va	acant	
Name of Monitoring Firm H		Owner (8)	ASCM No	o.	I		Name of Co					
Smith & Wessel Associate	es, Inc.						Superior A	batemen	t, Inc.			
Street Address		-	L		Street Addre		T Comment of the Comm					
8 Church Street					2 Henderso	on Drive	e, Ste A					
City, State, Zip Code					City State, 2			5.00 m				
Merrimac, MA 01860					West Caldy	well, NJ	07006					
Project Manager for Monito		Telephone			Telephone I	Number	2-11-11-11-11-11-11-11-11-11-11-11-11-11		e Numb	er		
Eric Hanson		(978) 346-4	800		(973) 808-1	616		00411				
Scheduled Start Date (10) 6/26/2012		Scheduled 7/25/2012	Completion	Date (11)	Name of OS Superior A							
Occupancy Status During A			ne)	2	Street Addre		114 1110.			11.		
(X) Facility Closed/Vacated () Abatement Performed C	During Entire	Period of A	batement	,	2 Henderso	on Drive	e, Ste. A					
() Other – Describe:		,			City, State,							
					West Caldy	vell, NJ	07006					
Source of Work (Check all t	that apply)						w .		-			
() Demolition (X) Reno	vation											
(X) Large Proj. (>160 SF o (X) Full Containment with	r >260 LF AC	M) () SM F	Proj. (>25<1	60 SF or >10 <2	260 LF ACM)	() M	inor Proj. (<25 SF o	r <10 LF	ACM)	Pemo	ıal	
Location of Asbestos-Conta	negative Pre	cation Norm	nally Used	Description of	ACM (i.e. ther	mal	Amount (Specify SF	or LF)	Abate	ment Ty	ne.	-
Material (ACM) in Facility (1		ly by Maint./		systems insula	ition, surfacing	19 (COCCOS)	cane (opeon) or	,				
		? (12)	NO	VAT, or other	miscell.)				Rem.	Rep.	Encap	Enclose
1 st Floor	NA X	YES	NO	Mastic with 2	lavers Floor	Tile	36,000 SF		X	1,50	T	T
2 nd Floor Employee Loung				Mastic with F			500 SF		X			
											ļ	
											+	-
Name of Reg. Waste Haule		NJDEP Wa	ste Hauler I	D#	Cubic Yards	s of Was	ste		of Reg.		(107,00 — 14 — 1 — 1)	
Service Transport Group,	Inc.	SW2117			400			Miner	va Lan	dfill		
City, State		_			Di	isp. Date	e					1 1 1 1
New Castle, DE		ä			7/	25/2012			linerva			
Completed by (Drint or Tra	-	Title * /			Signature			Wayne	sburgh	UH 44	1088	
Completed by (Print or Type Nick Petrovski	e)	Title President			Signature	A STATE OF THE PARTY OF THE PAR	11/1	06/25/2	012			
					111	///	Shith.					
					MA	a p	C:\WORL	D/MYDO	CSIASE	ESTOS	9/18	/00

Amended Notification No. 1: Reducing the scope of work and removing the 100 LF of window caulking from the notification.

17078 OK

Date of Notification (1) 6/25/2012					of Building				Ha II		-\\\\\-	-15		Statement of the statem
Agencies Notified X EPA DEP X DOL	Type Notification Initial Amended Amendmen			Street 214 (Address CENTEF tate, Zip C DOLPH,	R GRO	VE RO	1 201		N 27				And Assessed State of Landson, State of
☑ DOH DCA	Emergency justification Cancellatio	(includin	g	Name	of Contact EPH PO	1			Te	STOS CON lephone N				Carantina Carantina
Name of Facility Where COUNTY COLLECT	GE OF MORRIS	ng Place S DEMA	(3) ARE H		CILITY INF	ORMAT	TION	Type of Facility School (K.	-12) er 8 (Oth				r ev	
214 CENTER GRO City (5) RANDOLPH	OVE ROAD	_						Other (i.e. etc.) Square Feet		& commer		ildings Bldg.		ies,
County (6) MORRIS					Code (7) USE ONLY	n		Current Use (P	rior if be	ing demolis	shed)			
Name of Monitoring Firm		Owner (8	3)	ASC	M No.			of Abatement Co BROTHERS		(1) (b)	NG			
Street Address 7 PLEASANT HILL	ROAD						250	Address RUTHERFOF	RD BLV	/D.				
City, State, Zip Code CRANFORD, NJ 0 Project Manager for Mor							CLIF	tate, Zip Code TON, NJ 070	14					
KEVIN LOVELY Start Date (10)	nitoring Firm	Sahadu	lod Co		one No. 90-5858 Date (11)		973-	one No. 956-8700		License I	No.			
7/6/2012 Occupancy Status Durin	a Abatamant (Char	7/16/2	012	mpletion	Date (11)	5 iz	SAM	E AS (9) ABC				4121		
Facility Closed/Vac Abatement Perform Other – Describe:	ated During Entire I ned Outside of Norn Friday 4:30 PM, Sat	Period of nal Facility	Abater v Hour	ment rs				Address ate, Zip Code	-		-	-		
Scope of Work (Check A ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	ll That Apply)		Renova Demoli				×	Full Containm Mini-Enclosur Glovebag Pro Non-Exempte	e cedure				e	
Location	n of	1	Locat	lly		De	scription (Abate	emeni pe	
Asbestos-Containing TO BE AB/ In Facil (13)	ATED	Ma	ed Sole iintena todial ((12)	nce/		tos Cont thermal surfa	taining Ma	aterial (ACM) insulation, , or	(S	mount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
SEE ATTA	CHED	103	X	IN/A							X			
	<u> </u>												-	
Name of Registered Was	te Hauler		N	JDEP W	aste	Cubic	Yards	Name of	Register	ed Landfill				
TWO BROTHERS C	ONTRACTING		30. 576	auler ID I 8743	No.	of Was	ste		12//	AGEME		.R.O	.W.S	3.
City, State CLIFTON, NJ						Dispos 7/16/2	al Date 2012/	City, State MORR		E, PA				
Completed by VIVECA RAMOS		Title SECI	RETA	ARY		(6)	ignature (1)	recal	an	Da 6/	te 25/20)12		

COUNTY COLLEGE OF MORRIS - DEMARE HALL

Phase II Start Date	Classroom No.	ACM Material	Quantity (SF)
7/6/2012	DH208	VAT & Mastic	597
	DH260	VAT & Mastic	597
	DH259	VAT & Mastic	567
		Total	1761
Phase III Start Date			
7/13/2012	DH261	VAT & Mastic	567
	DH263	VAT & Mastic	567
	DH265	VAT & Mastic	567
	DH267	VAT & Mastic	550
		Total	2251

Grand Total



4012 SF

Date of Notification (1)				0.00 and 12.1	20)	78 (8) E	3 11	G /7		2000	
(e-25-	10		Name	of Building Owner/Operate	- (-)	A G E	1 13	₩-	5	P	
Agencies Notified Type Notification	1 2		Street	Jeanne	Hel	dK		** ** ** ** *** ***			
□ EPA			1.464	Address IR	ving Au	EL JUN :	2.7	2012			
DOL Amendme	nt#	- 12. . 	- PACKET	State, Zip Code Merchantuill	i i	- 00100					
■ Emergenc justification		ng	Name	of Contact	le NO		CONT	ROLE			
□ DCA □ Cancellation			Je	anne Held		Telephone	Yumbe	er		-	
Name of Facility Where Abatement is Tak	ing Place	(3)	FA	CILITY INFORMATION	T =				-		
Single family	D	ابري	11:00		Type of Facili	N N N N N N N N N N N N N N N N N N N	and the same	1 55 =	S. Andrews	1.000	
					School (ter 8 (Other than K	-12\				
6522 IRUN	٦٩	AU	٤		Other (i.	e. private & comme	rcial bi	uilding	s, hor	nes	
				68100	Square Feet	# of Floors		Bldg.	Age		
Merchantuil	le	-10	Count	Code (7)		2	1	80	34	-	
Candes			(STATE	USE ONLY)	Current Use (Prior if being demol	ished)			7000	
ame of Monitoring Firm Hired by Building	Owner (8	3)	ASC	M No Name	of Abatement (Contractor (9)					
EPC Tech				N/A E		chnol	86	in			
P.O. Box 337				Street	A CO	CD CD CD	·	-6	_		
ty, State, Zip Code				City	State, Zip Code	337	6				
New Egypt No bject Manager for workthring Firm	1	08	23	13 No	WE9	vot N	T	08	5	2	
Steve Schenke			Telepho	one No. Teleph	none No.	License		-			
art Date (10)	Schedu	led Co	mpletion	Date (11) Name	133-3	365	0	13	91	4	
7-5-12	7	-6	-12	Name	of OSHA Monito		0				
ccupancy Status During Abatement (Che	ck Only O	ne)		Street	Address	solowing	065	<u> </u>		-	
Facility Closed/Vacated During Entire Abatement Performed Outside of Norr	Period of	Abater	ment	P.	0. Bas	2337°					
Abatement Performed Outside of Norr Other – Describe:	nai Facilit	y Hour	S	City, S	tate, Zip Code						
cope of Work (Check All That Apply)				Me	W Egy	pt NJ	0	85	3	3	
2 ≥3 sf or ≥3 lf		Renova	ation		E #0	•					
≥160 sf or ≥260 lf	222	Demoli			Mini-Enclosu	nent with Negative	Pressu	ire			
						ocedure ed (*) and Non-Fria	blo Dra				
		Locat				/ Jana Non-Fria	Abatement				
Location of Asbestos-Containing Material (ACM)		Normal d Sole		Description	of		Туре				
TO BE ABATED	Ma	intena	nce/	Asbestos Containing Ma (i.e. thermal systems	aterial (ACM)	Amount	_	1 1	m		
In Facility (13)	Cus	todial S (12)	statt?	surfacing, VAT	, or	(Specify SF or LF)	Remova	Repair	псар	nck	
,	Yes	No	N/A	other miscellane	eous)		oval	air	Encapsulate	Enclosure	
2	-	140	IN/A					-	Ф		
Basement	×	4/		Pipe Insul	ation	100 LF	X				
ne of Registered Waste Hauler											
			JDEP Wa			Registered Landfill	* -				
PC Tech.			700	0 2	Was	ste Man	9	eaa	ea	P	
State ALT				Disposal Date	City, Stat	e aaa	1			0	
npleted by	Title			7-6-67	2 Mode	pisville	r	1	5005		
Steve Schenken	Pr.	و در ا	len t	Signature	15.1	Q Dat			,		
		9.0	- 1	- Leter	J Server	<u> </u>	. 9	5-1	L		

Date of Notification (1)		Maro	e of Buildir	o Owner	/Operato	(2)	5860	110			111			
6-25-12			BEHRI							No.	The state of the s			
Agencies Notified Type Notification	Street	et Address				JUN 2	1 2	112	1	0.1	esta de la constantina della c			
O BPA DK Initial	151	101 CENTRAL AVENUE												
DEP DEP Amended Amendment	Amended Amendment & DEMorgancy (including					City, State, Zip Code								
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E DCA justification)		e of Contac			Law repaired Control	Telep	hone R	lumbe	r	27			
S ACK B CORRESPONDED		101	BEHRE	US DADELAS	TOPOS.		4	/			L			
Name of Facility Where Abatement is Tald	ng Place (3)	F	ALLII III		AAT	Type of Facili	by (4)	+				_		
C BAHRAUS						☐ School (14		. •			
Street Address				AND DESCRIPTION		Subchap SK Other (i.e.	ter 8 (Other	Chain K	-12)		4			
10 1 CENTRAL AVENUE				15		en)	r bivato g c	ontme	rcial b		je, bo	mad		
CBy (5)						Square Feet	#of F	ioolis .	7.1	Bldg	. Aga			
HASBROUCK HEIGHTS						2100	12.				> 4/6			
County (8)		Coun	ly Code (7)	10		Current Use (demai	ished)		-	-		
BERGER Name of Monitoring Firm Hired by Building	Owner 60			-		RESIDENC	<u> </u>							
s and and and and a sure a made by thought	OWERE (6)	AS	CM No			of Abatement C								
Street-Address			·		-	t Remova	il Inc		-					
					1	O South	Dimon				٠			
City, State, Zip Code						inte, Zip Code		DE	<u> </u>					
•						ckensack		10	176	01	. •			
Project Manager for Monitoring Firm		Telepi	hone No.		Teleph	one No.	Li	28788	No.			-		
Start Date (19)	0-1-11-1				A CONTRACTOR OF THE PARTY OF TH	-329-744		903	888		į.			
7-5-12	Scheduled C		n Dale (11)	•	Name	of OSHA Monito ga Envir	(13	G					
Occupancy Status During Abatement (Chec	k Only One)	12			Street /		OHMEN	-ar	261	AI	ces			
D Facility Closed Macellari Profess Entire I	Dominal of Above	amant.			280	Huyler	St			*		1		
Abutement Performed Outside of Norm	al Facility Ho				City, St	mie, Zip Code		1-	-		- Cartesian	-		
Scope of Work (Check All That Apply)				-	Sout	h Hacke	nsack	IN:	J.	07	506	Name (a		
Separate interest		• /				• ! • .						i		
□ >100 stor >200 f	T Reno				. 0	Full Committee Mini-Enclosus	ont with Ne		Press	m.	Ċ			
					沤	Glovebag Pro	cedum					-		
	D		T			Non-Exemple	d (*) and No	a-Fried	to Pa	COMPANIES PROPERTY.	9	-		
Lecuitor	Is Local	ally								omeri Pe	in leading to			
Achestos-Contololog Material (ACM) TO REARATED	Used So Mainten	inly by	Asbes	ins Conte	cription o sining Ma	Sectol (ACSA)	Amous	-		T		T		
In Facility	Custodia	Staff?	(te	ENGRESSE!	systems i ing, VAT,	asulation.	(Speci		Re	7	Encapeulate	MIN		
(13)	(12). 		other mi	scellane	ous)	SP OF E		Remove	Repair	med	amediane		
-**	Yes No	· N/A					•)		E		ata			
BASEMENT		X	THE	mal	IN Se	LATION	. 7/	LP	X		-	-		
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Best Removal Inc.	i	hader ID	No.	of Wast	9	Number of i	Registered L	POST .				-		
Best Kemoval Inc.		1710)9	1/2	YD	1.Mine	rva Er	iter	pr	ise	ST	ייי		
Hackensack, NJ				Disposa		GOY, SERE		1				-		
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			Pursuar	nt to NJA	C 8:60 ar	nd 12:120	0)	Mlos	此	.114	٥Ĉ	}		39		
Date of Notification (1)				of Buildin ony Dole			(2)		10		117					
Agencies Notified Type Notification	Street Address 15 Highland Avenue															
DEP Amended Amendme			City, State, Zip Code Montvale, NJ 07645													
DOH justification Cancellation	1)	ıg	The state of the s	of Contac	Те	Telephone Number										
				CILITY IN			<u>[</u>	The property of the same of th	1.	remarks.			-			
Name of Facility Where Abatement is Tak house	ing Place	(3)					Тур	e of Facility School (K-	(4)	or facility	14 - 14 - 16 - 16 - 16 - 16 - 16 - 16 -					
Street Address 404 St. Louis Avenue							×	Subchapte Other (i.e. etc.)	er 8 (Oth	ner than K- & commer	12) cial bu	lding	, hon	nes,		
City (5) Point Pleasant Beach			10.0		110000000	Square Feet # of Floor				Bldg. 70	Age					
County (6) Ocean			County Code (7) (STATE USE ONLY)					ent Use (Pr	rior if be	ing demoli	shed)					
Name of Monitoring Firm Hired by Building	Owner (8	3)						ne of Abatement Contractor (9) S Environmental Services, LLC								
Street Address								pet Address East Gate Drive, PO Box 483								
City, State, Zip Code	City, S					y, State, Zip Code enwood, NJ 07418										
Project Manager for Monitoring Firm	Telepho	one No.		Teleph	phone No. License No. 703											
Start Date (10) 7/18/12	7/23/1		mpletion	Date (11))	Name	ne of OSHA Monitor									
Occupancy Status During Abatement (Che	ck Only C	ne)				Street /	Addre	ss								
Facility Closed/Vacated During Entire Abatement Performed Outside of Nor Other – Describe:	Period of mal Facilit	Abater ty Hour	ment s			City, St	ate, Z	ip Code					March No.			
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	Enemania.	Renova Demoli				×	Min	Il Containm ni-Enclosum ovebag Pro n-Exempte	e cedure				e			
i i i i i i i i i i i i i i i i i i i	1	s Locat Norma									Abatement Type					
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	ed Sole aintena stodial ((12)	ly by nce/ Staff?		stos Conta thermal surfac	Description of Containing Material (ACM) rmal systems insulation, surfacing, VAT, or her miscellaneous)			Amount (Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure			
basement	Yes	No	N/A		nino	lasulati		- 1	7	- 1 -	-					
basement			X		pipe	insulati	on			5 LF :	x					
Name of Registered Waste Hauler		l N	JDEP W	/aste	Cubic	Yards		Name of	Register	ed Landfill						
reehold Cartage	1 1	Н	auler ID 5939	Control of the Contro	of Was	30.0.00				2001						
City, State Freehold NJ	8	1 8	715		Disposa TBD	al Date	te City, State Tullytown PA									
Completed by Andrew Scott Higgins	Title Owne	er			Sig	gnature				Da	te /	5-	r: >			

	7417-7-1008		(Pursuai	nt to NJAC	8:60 and 12:1	20)	clar	le, 111	Al	3		*******		
Date of Notification (1) 6/25/12	Name of Building Owner/Operator (2) Nathan Barry Inc.													
Agencies Notified Type Notificati	on		Street	Address lain Street								The state of the s		
EPA Initial DEP Amended			City, S	State, Zip Co	de	- []		UN 2.7	2012			1		
DOL Amendme	ent # cy (includir	ng			NJ 07052			and the control of the control of		M.T. Marriago	ti ti			
DOH justification Cancellat	n)		200000000000000000000000000000000000000	of Contact I Reed		1	AS	Telephor	ne Nur	nber		The state of the s		
Name of Facility Where Abatement is Ta	kina Dia	(0)	FAC	CILITY INFO	RMATION	ea.		name and a Military transfer	or, in chariefu	tinebeut		edut-7	-	
Traine of Facility Where Abatement is Ta	king Place	(3)				Processor Services	of Facility	A State of the Sta	alla megasi	in any are	er - Sare	are a construction	ar ^{ger} in	
Street Address 529 Route 22 West	School (K-12) Subchapter 8 (Other than K-12) Other (i.e. private & commercial buildings, homes, etc.)													
City (5) North Plainfield		re Feet	# of Floo	rs	- 1	Bldg. 40	Age							
County (6) Somerset				Code (7) USE ONLY)		Curre	nt Use (Pri	or if being de	molish	ed)		11		
Name of Monitoring Firm Hired by Buildin	g Owner (8)	ASC	M No.	Nam ABS	e of Aba S Envir	tement Cor	Contractor (9) ntal Services, LLC						
Street Address					Stree	et Address								
City, State, Zip Code				-		4 E Gate Drive, PO Box 483 City, State, Zip Code								
		Glenwood, NJ 07418												
Project Manager for Monitoring Firm	one No.		hone No -764-2		Licer 703	nse No).							
Start Date (10) 7/9/12	mpletion	Date (11)			A Monitor	100								
Occupancy Status During Abatement (Che	7/30/1 eck Only C	0.00			Stree	et Address								
Facility Closed/Vacated During Entire Abatement Performed Outside of No Other – Describe:	Period of rmal Facilit	Abater ty Hour	ment s		City, S	State, Zij	o Code		1,000					
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf	Designation of the last of the	Renova Demoli			2	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure								
The state of the s		s Locat Normal								Abatement Type				
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	ely by nce/ Staff?	(i.e. th	Description S Containing Nermal system surfacing, VA other miscellar	//aterial (s insulat .T, or	(ACM)	Amount (Specify SF or LF)		Remova	Repair	Encapsulate	Enclosure			
main floor	Yes	No	N/A						- 1-			te		
roof	-		X		floor tile			8250 SF		x				
1001			X		flashing			390 LF		x				
					-)				-					
Name of Registered Waste Hauler	JDEP W	9999999	Cubic Yards		Name of R	egistered Lar	ndfill							
reehold Cartage			auler ID I 5939	3	of Waste 0									
City, State Freehold NJ		Disposal Date BD		City, State										
Completed by Andrew Scott Higgins	Title Presi	dent		- 15-3	Signature	Date 6/25/12								



Date of Notification (1) 06/22/12					of Building Ov O MARTIN	wner/Operato NEZ	r (2)		56	5 1	W/	E				
Agencies Notified	Type Notification			Street A	Address EDMOND	STREET	No. of Action Control of the Control		JUN	2 7	2012	-				
DEP DOL	Amended Amendment		_		ate, Zip Code BRUNSW		C XXIIIX	i.		No.		The second second	steened!			
DOH DCA	Emergency justification) Cancellation		1		of Contact SRVIER		ASSESTOS CONTROL & Telephone Number									
				FAC	ILITY INFOR	MATION	PONNING PONNING			To the	14/2/2016	Paris				
Name of Facility Where A N/A	Abatement is Takir	ng Place (3	3)				Type of Facility School (K	000000			737-0	· · · Cook is	161601 <u>14</u> -			
Street Address 304 REDMOND ST	REET						Subchapte	er 8 (Oth	ner than K- & commer		ldings	, hom	ies,			
City (5) NEW BRUNSWICK	Square Feet 200	2	of Floors		Bldg. 74	Age										
County (6)		Current Use (Prior if being demolished) RESIDENTIAL														
Name of Monitoring Firm ABE ENVRONMEN				ASC	И No.		Name of Abatement Contractor (9) TURNINGPOINT CONTRACTING CORPORATION									
Street Address 84 VERMONT AVE	NUE				77	55-515	Street Address 51 BERKELEY TERRACE 1ST									
City, State, Zip Code FLANKLIN PARK NJ 08823							City, State, Zip Code IRVINGTON NJ 07111									
Project Manager for Monitoring Firm DON ANIGBOGU					ne No. 22-0733		hone No. License No372-2177 00113									
Start Date (10) 06/23/12		Date (11)		Name of OSHA Monitor JLC ENVIRONMENTAL, INC												
Occupancy Status During Abatement (Check Only One)						Street Address 30 WEST 25TH STREET										
Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours Other – Describe:						City, S	state, Zip Code NY 10007					1219				
Scope of Work (Check Al	That Apply)			-	-		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						_			
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	enova emolit			×	Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
F1	**************************************		Locati				- Hon Exemple	d North IId	Al			t				
Location			lormal d Sole			Description					Туре					
Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Osed So Mainten Custodial (12)					(i.e. the	Containing Nermal systems surfacing, VA ther miscellan	T, or	(5	Amount (Specify SF or LF)		Repair	Encapsulate	Enclosure			
BASEME	NT	Yes	No *	N/A	PIF	PE INSULA	TION		35	*						
and the																
										-						
Name of Registered Wast	e Hauler		IN	JDEP W	aste C	ubic Yards	Name of	Registe	red Landfil							
NEWARK CARTING,INC Hauler ID No. 0506						f Waste			ACILITY							
City, State NEWARK NJ 07102	- H - H	. 2			0	isposal Date	City, Stat TULLY		I. PA							
Completed by EMEKA OKEKE		Title PRES	SIDE	NT	- E	Signature	Date 06/22/1:					/12				