					•			PER	ا سما محاد	5 % + r-a						
Date of Notification (1) 6/26/14				Name o Stel-O	f Building O	wner/Oper	rator ((2)				VE	OSS V			
Agencies Notified Type Notifi				Street A 600 K	ddress ings High	way N			281	4 JUN	127	PM 6	: 6	9		
DEP X Amer	nded ndment #				ate, Zip Code / Hill, NJ				11.0	E 3	SS (CHIT	Re	1		
☐ DOH ☐ justific	gency (ir cation) ellation	ncluding	100		f Contact n Fryberg	jer				Tele	phone	Number	r.			
				FACI	LITY INFOR	RMATION		99199								
Name of Facility Where Abatement is CVS Pharmacy	s Taking	Place (3	3)						Facility (4 nool (K-1)	85						
Street Address 600 Kings Highway N								Sul	ochapter er (i.e. p	8 (Othe			uildi	ings,	home	es,
City (5) Cherry Hill							1 1	Square 75,000	eet	# of	Floors		BI0	dg. A	ge	
County (6) Camden				County (STATE	Code (7) USE ONLY)				Use (Prio	or if bein	ng demo	olished)				
Name of Monitoring Firm Hired by Bu RT Environmental	uilding O	wner (8)		ASCN	/ No.		ame o		nent Con	tractor	(9)					
Street Address 510 Heron Road	-				-1-5-69-77	Sti	reet A	Address	oln High	nway	Suite	500				
City, State, Zip Code Bridgeport, NJ						Cit	ity, Sta	ate, Zip (Code	iway,	Ouite					
Project Manager for Monitoring Firm		Telepho	ne No. 67-2276	Te	elepho	one No.		T	Licens							
Start Date (10)	ony Alessandrini art Date (10) Scheduler /21/14 7/31/14						ame o	72-888 of OSHA			0116	1				
Occupancy Status During Abatement							MSL	- Address								
Facility Closed/Vacated During Abatement Performed Outside of	Entire Pe	eriod of A	Abatem	ent		20	00 R	loute 1	30 Nort	h						
➤ Other – Describe: in segregated	d areas; 7	1/2 3 am	start			0.000		ate, Zip (iminsor								
Scope of Work (Check All That Apply	/)	_														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		_	Renova Demoliti				×	Mini-E Glove	ontainme nclosure bag Proc xempted	edure					a	
		le	Locati	on				TVOIT-L	.xcmptcu	() and	14011-1	Trable 1			ment	
Location of		1	Normall	у		Descrip	otion c	of						Ту	pe	
Asbestos-Containing Material (AC TO BE ABATED	CM)	Ma	d Solel intenar	ice/		s Containir nermal syst					nount pecify	_	,		Ē	ш
In Facility		Cust	todial S (12)	itaff?		surfacing,	, VAT	, or			or LF)	Kemova		Repair	caps	Enclosure
(13)		Yes	No	N/A	,	other misce	ellane	eous)				\ a	-	¥i.	Encapsulate	ure
Stock Room		103	140	X	Flo	oor tile a	nd m	nastic		22	25 sf	X	+			
Mens Room		X		oor tile a					6 sf	X	+					
Womans Room		Х	Flo	oor tile a	nd m	nastic		12	20 sf	х	1					
Hallway						oor tile a	nd m	nastic		10)6 sf	х	1			
Name of Registered Waste Hauler	a					Cubic Yard	ds	N	lame of F	Register	red Lan	dfill				
ecoservices, LLC			H	auler ID	(of Waste 5 Cy			ROWS		llift					
City, State Exton, PA						Disposal D TBD	Date		ity, State Iorrisvi		4					
Completed by Jack Bally		Title Sr. P	roject	Mana	ger	Signa	ature	Ba	lly.	(A)		Date 6/26/	14			

ecoservices, LLC (contd)

	Abatement Tyne		Repair Encapsulate Enclosure
	<u> </u>		Removal
Amount	(Specify SF or LF)		
Description of	Asbestos Containing Material (ACM) (i.e. thermal systems insulation,	surfacing, VAT, or other miscellaneous	
Is Location Normally	Used Solely by	Custodial Staff	Yes No N/A
Location of Asbestos-Containing Material (ACM)	TO BE ABATED In Facility		

Floor tile and mastic

N/A

Coat Closet / Vestibule

136 sf

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

Date of Notification (1)				Nan	ne of Buildin	g Owner/Operator (2)	1	1.12			
06 /20	/	14		D	unellen Bo	oard of Educatio		06-4778 Chec				
	oe Notifica	ation		Stre	et Address		214	JUN 27 PH	5: 4	E	-	
The state of the s	Initial			Hi	gh and Le	high Streets						
	Amended				State, Zip (-		14 1			
Particular and the second seco	Amendme				unellen, N				HG.			
	Emergen		ding		e of Contac			Telephone Nu	AND ALL OF THE PARTY OF THE PAR			
	justification Cancellat			100000000	rian DeLu				mber			
						FORMATION	C-SCHOOL STATE OF THE STATE OF	L	220-			
Name of Facility Where Abate	ement is T	aking Pl	ace (3)		-CILITI II	er Ortina riore	Type of Facility	(4)				
Dunellen High School			(0,	6			School (K-12					
Street Address		_					Subchapter	8 (Other than K-	12)			
411 1 st Street							Other (i.e., p	rivate and comm	nercial b	uildin	gs,	
							homes, etc.)			teri,		
City (5)							Square Feet	# of Floors		ldg. A	ge	8
Dunellen							81,881	2	200-200	85		1
County (6)				Co	unty Code (7)(STATE USE ONLY)	Current Use (Pr	ior if being demo	lished)		- 2	1
Middlesex				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			High Schoo	·I		(properties	*HITS	
Name of Monitoring Firm Hire	d by Build	ling Own	er (8)	ASC	ЛNo.	Name of Abateme	ent Contractor (9)	(6)				
Environmental Connec	tion, Inc			000	030	AbateTech, I	nc.					
Street Address				1		Street Address			1115		000000	
120 North Warren St.						30 Maple Ave	e. PO Box 25					
City, State, Zip Code						City, State, Zip Co	ode					
Trenton, NJ 08608						Lumberton, N	NJ 08048					
Project Manager for Monitoring	g Firm		T	elephone	e No.	Telephone No.		License No.	75.00			
Dominick Dercole				609-46		609-265-2107		00529				
Start Date (10)	Is	chedule	d Com			Name of OSHA M		10020			75	-
06/30/14	cac a la com				14	EMSL Analyt	20022200					
Occupancy Status During Aba	itement (C	Check on	lv one)		Street Address			-			
☐ Facility Closed/Vacated Du	1.0					200 Route 13	0 North					
☐ Abatement Performed Outs					scribe	City, State, Zip Co						-
Time of Abatement:	_AM	PM/	P	M	_AM	Cinnaminson						
Scope of Work (Check all that	apply)						780 883 - C. J					
☐ >3 sf or >3 lf		X	Renov	ation		⊠ Full Cont ☐ Mini-Enc	ainment with Neg	ative Pressure				
≥160 sf or ≥260 lf			Demo				Procedure					
					-		mpted (*) and No	n-Friable Proced	lure			
200 No. 27 No. 200 No.				cation					Ab	atem	ent T	уре
Location of	-i-1 (A ONA)			nally olely by		Description o			_D	R	ш	ш
Asbestos-Containing Mater TO BE ABATED				nance/		stos Containing Ma ., thermal systems i		Amount (Specify	Removal	Repair	าса	1Clo
IN Facility		С		al Staff?	(surfacing, VAT,		SF or LF)	ova	=	Encapsulate	Enclosure
(13)		Ye	(1 es N		-	other miscellane	ous)				late	0
Cafeteria			is N		Ceiling	Tiloo		2 500 85				
	-		_	1				2,500 SF				
Cafeteria				2 22-21	Libows	/Fittings		160 LF			Ш	
-		$ \perp$ \perp								Ш	Ш	
Name of Registered Waste Ha	uler		#12/1/ACT	NJDEP		Cubic Yards of	Name of Regis	tered Landfill				
AbateTech, Inc.				Hauler 1875	The second second	Waste 40	G.R.O.W.S	. Landfill				
City, State				1010		Disposal Date	City, State					
Lumberton, NJ						7/14/14	Tullytown,	PA				
Completed By (Print or Type)		Title				Signature	1		Date		1.55	_
Jennifer Piraine			ation	s Coord	linator	J. J.	D	- T	1 10	al	116	
ACD 44		Open	auon		an lator	Trunk	21 YHOLK	٩ . ا	60	7	17	

ASB-41 MAY 11

MAY 11

Date of Notification (1) 06 / 20 /	14			Name	e of Buildin Iantic Car	ng Owner/Operator (pe Community C	2) ollege / Joh#	1/116_4774 Che	ock#			
						pe community c		PIN TIPE PER	PA	5: 1	13	
Agencies Notified	rication				t Address	5"					. 10	
⊠ DOLWD ⊠ Amend	led	atom S			Miles and the Control of the Control	Horse Pike			t . ir-f	T.A.		
☑ DHSS Amend	lment #	1	7	1000	State, Zip		20	⊄ L	1.77	2		
☑ DCA ☐ Emerg		cludin	ig		•	ng, NJ 08330-26	39	I				
(NJAC 5:23-8) justifica	3.511				e of Contac urk Streck			Telephone Num	JPOL			
Cancer	liation		-	1		NFORMATION		L`	. 4			
Name of Facility Where Abatement is	s Takin	n Plac	P (3)	ГА	CILITY	NFORMATION	Type of Facility	(4)			_	
Atlantic Cape Community Co				iton Ca	amnus		School (K-12					
Street Address				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Subchapter 8	(Other than K-12				
1535 Bacharach Blvd.							Other (i.e., p homes, etc.)	rivate and comme	ercial bu	uilding	gs,	
City (5)							Square Feet	# of Floors	B	dg. A	00	
Atlantic City							Oquare 1 cet	# 011 10015	, D	ug. A	ge	
County (6)	100			Соп	nty Code (7	7)(STATE USE ONLY)	Current Use (Pr	or if being demoli	shed)			
Atlantic					ing obdo (, NOTHINE OOL ONLY	College	or it being derrion	Silcuj			
Name of Monitoring Firm Hired by Bu	uildina (Owner	(8)	ASCM	No.	Name of Abateme		-				
TTI Environmental	3		(-)		1.1.000	AbateTech, I						
Street Address						Street Address						
1253 North Church Street						30 Maple Ave	. PO Box 25					
City, State, Zip Code					-	City, State, Zip Co			-			
Moorestown, NJ 08057						Lumberton, N						
Project Manager for Monitoring Firm			Tel	ephone	No.	Telephone No.		License No.				
Mike Stocku			1000	56-985		609-265-2107		00529				
Start Date (10)	Scheo	uled (Comple	etion Da	ate (11)	Name of OSHA M			-		-	
06/17/14:				4_ /		EMSL Analyti	cal					
Occupancy Status During Abatement	_					Street Address					_	
☐ Facility Closed/Vacated During Er				ement		200 Route 13	0 North					
Abatement Performed Outside of	Normal	Facilit	ty Hou	rs - Des	scribe	City, State, Zip Co						
Time of Abatement:AM	P	Λ/	PM		_AM	Cinnaminson						
Scope of Work (Check all that apply)		10000					,					
□ >2 of or >2 If							ainment with Neg	ative Pressure				
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			enovat emoliti			☐ Mini-Encl						
							npted (*) and No	n-Friable Procedu	ire			
		185.0	Loca	150 500 0					Ab	atem	ent T	ype
Location of			Norma	ally ely by		Description of			70	Z,	Ш	Ш
Asbestos-Containing Material (AC TO BE ABATED	ivi)		aintena			stos Containing Mat ., thermal systems i		Amount (Specify	Removal	Repair	Encapsulate	Enclosure
IN Facility		Cus		Staff?	(surfacing, VAT,	or	SF or LF)	Va.	7	bsul	sure
(13)		Yes	(12) No	N/A		other miscellaned	ous)				ate	
Dallas Daniel			-	IVA					-	_	_	
Boiler Room			Ш	\perp	Pipe Ins	sulation, Fittings	, Rope Ins.	150 LF		Ш	Ш	Ш
									П	П	П	П
		$\overline{\Box}$									_	
Name of Registered Waste Hauler		Ш		JDEP (Nasta	Cubic Yards of	Name of Regist	ered Landfill		Ш	Ц	
AbateTech, Inc.			1000	lauler I		Waste		ered Landfill unty Utilities A	uthor	itv		
City, State				18750)	20		anty Junies A	uuiiili	. Ly	1000000	
Lumberton, NJ					/1	Disposal Date	City, State	Tanasaki				
						6/24/14	Egg Harboi	Township, NJ				
Completed By (Print or Type)	Title			_		Signature	Λ.	Da	ite	11	9.	
Jennifer Piraine	0	perati	ions	Coordi	inator	Three	u Inac	me I	40	UII	4	
ASB-41 MAY 11	* [o not	use th	nis form	for ashest	os licensure exempl	ed activities					

MAY 11

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

1/ (/			(P			AC 8:60 and 5:1	9.50	[2]				
Date of Notification (1)	***			Name	e of Buildir	ng Owner/Operator w Jersey, Dept o	(2)	7.16		7 (# 104 m 1.1	
6 /	20 /	14		Sta	ate of Ne	w Jersey, Dept o	of Treasury / Jo	b #1405:4764	, Checl	(#		
Agencies Notified	Type Notifica	ation		Stree	t Address	*************		. 00,		11 ,	5: 4	124
⊠ EPA	Initial	64				Property Manag					1	
☑ DOLWD ☑ DHSS	Amended Amendme			City,	State, Zip	Code		& 1		1121	ř	
☑ DCA	☐ Emergen	(a) (3) (3) (3) (4) (4)) a	Tre	enton, N.	J 08625-0034		-	1 Fig.			
(NJAC 5:23-8)	justification		3	Name	of Contac	ct	,	Telephone Nu	ımber			en company
	☐ Cancellat	ion		Ste	even Piet	rzak, Building M	anager	4				
				FA	CILITY II	NFORMATION		· T			5470-5770	
Name of Facility Where A	batement is T	aking Place	e (3)				Type of Facility	(4)				
NJ State House Ga	rage Mecha	nical Roo	m Re	locatio	on		School (K-12		40)			
Street Address		N. 12-151					Subchapter 8			uildin	as.	
165 West State Stre	et						homes, etc.)				,-,	
City (5)					W. 100.00		Square Feet	# of Floors	BI	dg. A	ge .	
Trenton												
County (6)				Cou	nty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demo	olished)			
Mercer							Utility					
Name of Monitoring Firm		107	(8)	ASCM	No.	A 2000 IS 1000 VI DO	ent Contractor (9)					
USA Environmenta	Manageme	ent, Inc.		0.000		AbateTech, I	nc.					
Street Address						Street Address						
344 West State Stre	et					30 Maple Av						
City, State, Zip Code						City, State, Zip C						
Trenton, NJ 08618	tanian Firm		[T. I			Lumberton,	NJ 08048					
Project Manager for Moni William Weisgarber		<u></u>	and the Contract	ephone 09-65 6		Telephone No.	,	License No.				
Start Date (10)		cheduled C				609-265-2107 Name of OSHA N		00529				
06 /_ 16 /		06/	6			EMSL Analyt						
	ì					1						
Occupancy Status During Facility Closed/Vacate				ment		Street Address 200 Route 13	O North					
☐ Abatement Performed					scribe	City, State, Zip C						
Time of Abatement:						Cinnaminsor						
Scope of Work (Check all	that apply)					Cililatiiiisoi	1, 143 00077		_	-	-	
	aidt appij)						tainment with Neg	ative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			enovat emolitic			☐ Mini-End	closure g Procedure					
<u> </u>			ATTOHER	J11			mpted (*) and Nor	n-Friable Proced	dure			
		10000	Loca						Ab	atem	ent T	уре
Location (Norma ed Sole			Description of			Z	R	ш	ш
Asbestos-Containing N TO BE ABA		Ma	intena	ince/		estos Containing Ma e., thermal systems		Amount (Specify	Remova	Repair	ıcap	Enclosure
IN Facilit	У	Cus	todial (12)	Staff?		surfacing, VAT	, or	SF or LF)	val	,	Encapsulate	sure
(13)		Yes	No	N/A		other miscellane	ous)				ŧ	
Sub Basement					Tank In	sulation		350 SF			П	
											П	片
Sub Basement					-	sulation		70 LF		Ш	Ш	
Sub Basement					Gasket	Insulation		30 LF		Ш	Ш	Ш
Name of Registered Wast	e Hauler		17,775	JDEP \		Cubic Yards of	Name of Regist					
AbateTech, Inc.				lauler II 18750		Waste 15	G.R.O.W.S.	Landfill				
City, State					1	Disposal Date	City, State			====		
Lumberton, NJ					į.	6/25/14	Tullytown,	PA				
Completed By (Print or Ty	pe)	Title				Signature	0 0 -	Ti-	Date	1		
Jennifer Piraine		Operati	ions (Coordi	inator	Qual	der Pudi	1n (10/7	011	4	
SB-41						1 1 1 1 1 1	HOT TOTAL	,,,,	alo	11	1	

MAY 11

		-	(Pu	rsuar	IL TO NO	C 8:60 and 5:16	o) ja j	7:1/6	t m			
Date of Notification (1)	A00-1021					g Owner/Operator (2)	- 1124	at 4.25			
	14	<u> </u>		Sta	te of Nev	v Jersey, Dept of	f Treasury / Jo	b #1405-4764	Check	(#		
Agencies Notified Type Notif				Street	Address	11000		110 111	5. ♦ €			
☐ Initial ☐ Initial	11			Div	ision of l	Property Manage	ement & Const	ruction PO B	ox 0034	1		
☑ DOLWD ☑ Amend ☑ DHSS Amend			Ī	City, S	State, Zip 0	Code	ê.	- 41	1			
□ DCA □ Emerge	57-323	dina	3	Tre	nton, NJ	08625-0034	C2.	L. Partir	ů,			
(NJAC 5:23-8) justifica	ition)			Name	of Contac	t		Telephone Nu	ımber			
☐ Cancell	ation			Ste	ven Pieti	rzak, Building Ma	anager		444	2.000		
				FA	CILITY IN	IFORMATION						
Name of Facility Where Abatement is	Taking P	lace (3	3)				Type of Facility	(4)				
NJ State House Garage Mech	anical R	oom	Rel	ocatio	on		School (K-12		40)			
Street Address				-			☐ Subchapter 8 ☐ Other (i.e., p	ivate and comn	·12) nercial bi	uilding	ıs.	
165 West State Street							homes, etc.)					
City (5)							Square Feet	# of Floors	В	dg. A	ge	
Trenton				,	****							
County (6)				Cour	nty Code (7	')(STATE USE ONLY)	Current Use (Pr	ior if being dem	olished)			
Mercer							Utility			2 11 2 2		
Name of Monitoring Firm Hired by Bu		855	1	ASCM	No.	Name of Abateme	27 5					
USA Environmental Managen	nent, Inc	ě				AbateTech, Ir	1c.					
Street Address						Street Address						
344 West State Street						30 Maple Ave	HE SE WILLIAM TO					
City, State, Zip Code						City, State, Zip Co						
Trenton, NJ 08618						Lumberton, N	IJ 08048					
Project Manager for Monitoring Firm			-4	ohone		Telephone No.		License No.				
William Weisgarber, Jr. Start Date (10)	Cabadata	10			-8101	609-265-2107	7.5	00529				
	Schedule					Name of OSHA M						
				_ ′ -	14	EMSL Analyti	cai					
Occupancy Status During Abatement						Street Address	0 N.I					
☐ Facility Closed/Vacated During En☐ Abatement Performed Outside of I					crihe	200 Route 130						
Time of Abatement:AM	PM/_	Cincy 1	PM	, - DC3	AM	City, State, Zip Co						
Scope of Work (Check all that apply)						Cinnaminson	, NJ 08077					
						☐ Full Cont	ainment with Neg	ative Pressure				
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		Rend				☐ Mini-Encl	osure					
△ ≥100 si 0i ≥200 ii		Dem	OIILIOI	1		☐ Glovebag 図 Non-Exer	npted (*) and No	n-Friable Proce	dure			
		Is Lo	ocatio	on				1-1	Ab	atem	ent Ty	vpe
Location of		No Used	rmall		M. Was to	Description of			1	_		
Asbestos-Containing Material (AC <u>TO BE ABATED</u>	M)	Maint				stos Containing Mat ., thermal systems i		Amount (Specify	Removal	Repair	nca	nclo
IN Facility	(Custoc		taff?	(1.0	surfacing, VAT,	or	SF or LF)	oval	=	Encapsulate	Enclosure
(13)		- 1	12) No	N/A		other miscellaned	ous)				ate	u
1 Window @ Powerhouse		-	NO		Window	v Caulking		34 LF		П	П	П
				2								
1 Window @ Powerhouse		J E	₫		vvindow	v Glazing		70 SF		Ш	Ш	Ш
	L	J L		Ш								
] [
Name of Registered Waste Hauler	-			DEP V	SAME	Cubic Yards of	Name of Regis	tered Landfill				
AbateTech, Inc.			100000	uler ID 18750		Waste 1	G.R.O.W.S	Landfill				
City, State					1	Disposal Date	City, State					
Lumberton, NJ					(6/25/14	Tullytown,	PA				
Completed By (Print or Type)	Title					Signature	1 0	11	Date	- 1	99	\dashv
Jennifer Piraine	Ope	ration	ns C	oordi	nator	NA L	KI. U.	aine l		01	14	
ASB-41						- Line	ger ivi	uvru	ulo	1	1 1	
MAY 11	* Do	not us	e this	s form	for asbest	os licensure exempt	ted activities.					

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

Date of Notification (1) Name of Building Owner/Operator (2) AtlantiCare Regional Medical Center / Job#1406-4777 Check 06 24 14 Agencies Notified Type Notification Street Address **⊠** EPA ☐ Initial 65 Jimmie Leeds Road □ DOLWD City, State, Zip Code Amendment #1 □ DHSS Pomona, NJ 08205 ☐ Emergency (including □ DCA Name of Contact (NJAC 5:23-8) justification) Telephone Number ☐ Cancellation Frank Casper FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) AtlantiCare Regional Medical Center - Mainland Campus School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 65 Jimmie Leeds Road homes, etc.) City (5) Square Feet # of Floors Bldg. Age Pomona County (6) County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) Atlantic Hospital Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) TTI Environmental, Inc. AbateTech, Inc. Street Address Street Address 1253 North Church Street 30 Maple Ave. PO Box 25 City, State, Zip Code City, State, Zip Code Moorestown, NJ 08057 Lumberton, NJ 08048 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. James A. Guilardi 609-314-1683 609-265-2107 00529 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 06 / 23 / 14 07 / 02 / 14 **EMSL** Analytical Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North ☐ Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: ____AM-___PM/___PM-__ Cinnaminson, NJ 08077 Scope of Work (Check all that apply) ☐ Full Containment with Negative Pressure ≥3 sf or >3 If □ Renovation ☐ Mini-Enclosure ≥160 sf or ≥260 If ☐ Demolition ☐ Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Location of Description of Used Solely by Removal Encapsulate Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED (i.e., thermal systems insulation, (Specify Custodial Staff? IN Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Ground Floor EVS break room \boxtimes Single Layer Floor Tile 300 SF M П Male Bathroom M Double Layer Floor Tile 80 SF X Female Bathroom Double Layer Floor Tile 80 SF X П П П П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste AbateTech, Inc. Atlantic County Utilities Authority 18750 20 City, State Disposal Date City, State Lumberton, NJ 07/03/14 Egg Harbor Township, NJ Completed By (Print or Type) Signature Date Jennifer Piraine Operations Coordinator nume

ASB-41 MAY 11

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

Date of Notification (1)		Nam	e of Buildin	g Owner/Operator (2)		2 = 10		
	14	St	ate of Ne	w Jersey, Dept o	f Treasury / Jo	b #1405-4764 C	heck#5	:49	
Agencies Notified Type Notif	ication	Stree	t Address			200			Π
⊠ EPA ☐ InitiaL		Di	vision of	Property Manage	ement & Const	ruction PO Box	0034	1	
☑ DOLWD ☑ Amend			State, Zip			- V	1. 1171	-	-
	ment #2	Tr	enton, NJ	08625-0034					
DCA Emerge (NJAC 5:23-8) justification	ency (including ation)		e of Contac			Telephone Numb	er		<u>\</u>
Cancel		St	even Piet	rzak, Building Ma	anager		5		
				NFORMATION	g	1			-
Name of Facility Where Abatement is	Taking Place		CILITI	NFORIVIATION	Type of Facility	(4)			
NJ State House Garage Mech			on		Type of Facility School (K-12				
Street Address	iailicai Rooil	Relocati	OH			:) 3 (Other than K-12)			
165 West State Street					Other (i.e., p	rivate and commer		gs,	
					homes, etc.)				
City (5)					Square Feet	# of Floors	Bldg. A	\ge	
Trenton									
County (6)		Cou	nty Code (7)(STATE USE ONLY)		ior if being demolis	hed)		
Mercer					Utility				
Name of Monitoring Firm Hired by Bu		B) ASCN	l No.	Name of Abateme	ent Contractor (9)				
USA Environmental Manager	nent, Inc.			AbateTech, In	nc.				
Street Address				Street Address					
344 West State Street				30 Maple Ave	e. PO Box 25				
City, State, Zip Code				City, State, Zip Co	ode				
Trenton, NJ 08618				Lumberton, N	NJ 08048				ı
Project Manager for Monitoring Firm		Telephone	No.	Telephone No.		License No.			
William Weisgarber, Jr.		609-65	6-8101	609-265-2107		00529			
Start Date (10)	Scheduled Co	mpletion D	ate (11)	Name of OSHA M	lonitor				-
06 /16 /14	_ 07 _ /	31 /	14	EMSL Analyti	ical				
Occupancy Status During Abatement				Sfreet Address	1.55.27				-
☐ Facility Closed/Vacated During Er				200 Route 13	0 North				
☐ Abatement Performed Outside of			scribe	City, State, Zip Co					_
Time of Abatement:AM	PM/	_PM	_AM	Cinnaminson					
Scope of Work (Check all that apply)				Ommammson	., 145 00077				_
	V	MOREOUS PROCESS			ainment with Neg	gative Pressure			
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		novation molition		☐ Mini-Enc	losure Procedure				
		Homion				n-Friable Procedur	е		
	Is	Location	T			*	Abatem	nent Type	
Location of	0.00	ormally		Description o	f		—	1	-
Asbestos-Containing Material (AC TO BE ABATED		d Solely by ntenance/		estos Containing Ma		Amount	Repair	nce	
IN Facility		odial Staff?	(1.6	e., thermal systems i surfacing, VAT,		(Specify SF or LF)	Remova	Enclosure	
(13)		(12)	4	other miscellane		O. G. L.)	-	Enclosure	
4 Mindow O Down I	Yes	No N/A							_
1 Window @ Powerhouse			Windo	w Caulking	_1	34 LF			1
1 Window @ Powerhouse			Windo	w Glazing		70 SF]
]
Name of Registered Waste Hauler		NJDEP		Cubic Yards of	Name of Regis	tered Landfill			
AbateTech, Inc.		Hauler I		Waste	G.R.O.W.S				
City, State		1875	U	1 Disposal Date	City, State				\dashv
Lumberton, NJ				7/31/14	Tullytown,	ΡΔ			
Completed By (Print or Type)	Title				Tany to will,				4
Jennifer Piraine	Title		!!	Signature	1. 0	Dat	1-01		
Selfiller Piraine	Operation	ons Coord	inator	THIN	ou tra	me le	124	4	

(K 1282

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

RECEIVED

Date of Notification (1)					Building		perator	(2)	q	240					
June 24, 2014				State o	of NJ-DF	PMC				E14 JU	N 27	PM	5.	22	
Agencies Notified	Type Notification			Street Ad 33 W.	^{ddress} State St	treet									
DEP DOL	Initial Amended Amendment				te, Zip Co n, NJ 08					JUFS. & L	TOEN	ton ISIN	G G	\$1.	
DOH DOA	Emergency (justification) Cancellation	including	110		Contact ale V. P	anero				Teleph	one Nu	mhor			
DCA	Cancellation			888 (19			ON .			Ľ					
Name of Facility Where	Abatement is Taking	Place (3)	8 3	FACIL	LITY INFO	DRMAII	ON	Typ	e of Facility (4)						
NJ DOT Toms Rive								.,,,	500000						
Street Address		-						H	School (K-12 Subchapter 8		nan K-1	2)			
739 Route 37 East								×	Other (i.e. pri				dings,	home	es,
City (5)		77.00 100 100						Sai	etc.) ıare Feet	# of Flo	nors	IB	ldg. A	ne	
Toms River								Oqu	aic i cot	# 01110	7013	-	nug. /	ge	
County (6)				County (Code (7)			Cur	rent Use (Prior	if being o	temolis	hed)			
Ocean					JSE ONLY			ou.	1011 000 (1 1101	ii boilig (201110110	,			
Name of Monitoring Firm		Owner (8)	_	ASCM	1 No.		Name	of At	patement Contr	ractor (9)					
Environmental Con	nection Inc.			() ()			Be C	ons	truction Cor	poration	า				
Street Address							Street								
120 North Warren	Street								chung Aven	ue					
City, State, Zip Code Trenton, NJ 08608							10 7 W 7 C 20 C		Zip Code ange, NJ 07	052					
Project Manager for Mor	nitorina Firm		Т.	elephor	no No		Teleph	21,227,22	Control of the Contro		cense N	lo.			
Rick Beach	intoring r intr		6	809-39	2-4200		973-	669-	-2900	1000000	1231	•••			
Start Date (10) July 7, 2014		Scheduled July 14,			Date (11)		Name	of OS	SHA Monitor						
Occupancy Status Durin	g Abatement (Chec	k Only One)				Street	Addr	ess						TATELAN
	ated During Entire F			ent			City, S	State,	Zip Code		-				
➤ Other – Describe:						-									
Scope of Work (Check A	All That Apply)						-	WPI							
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		-	novati molitic					N	ull Containmer lini-Enclosure Blovebag Proce		gative l	Pressu	re		
							×		lon-Exempted		on-Friat	ole Pro	cedur	е	
		ls I	ocatio	n									Abate	ement	t
Location	n of	No	rmally	,		De	scription	n of					T	ре	_
Asbestos-Containing	Material (ACM)	Used	Solely tenan			tos Cont	taining N	Nateri	ial (ACM)	Amo		l Descent		ш	_
TO BE AB In Faci		Custo			(i.e.	thermal	system cing, VA			(Spec		Ren	Re	ncar	nc
(13)	110 * 117		(12)				niscellar			0, 0,	_, ,	Removal	Repair	Encapsulate	Enclosure
20 63		Yes	No	N/A								1 2		ate	œ e
Windo	ws		Х			С	aulkin	g		9801	F	Х			
Windo		Х				Blazing]		3973	LF	х				
Building E		Х			Expar	nsion J	Joint	s	1501	_F	х				
							-					-			
Name of Registered Wa	ste Hauler	1	NJ	DEP W	aste	Cubic	Yards		Name of R	egistered	Landfil	1			
Circle Rubbish Rem	oval		На	uler ID	No.	of Wa	ste		Tullytow	n Facilit	У				
City, State Linden, NJ						Dispos	sal Date		City, State Tullytown	n, PA			11	-781	
Completed by		Title				S	Signature	9		1 0	Da	ate			
Barbara Reed		Preside	ent				au	la	ua Se	ed	06	6/24/2	2014		

CK# 24567

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

MECHIVED

Date of Notification (1)				Name	of Buildin	g Owner/Opera		90	11 1	I ta s			
	6/25/14						McCue	1 40	14 J	UN.	27	DM	6:
Agencies Notified ☑ EPA	Type Notific	cation		Stree	t Address		108 Pinckne	y Rd. 🚑	HF.	114	e en	- 22	
DEP DOL	Amende Amendr		_	City, S	State, Zip C		Red Bank, NJ	07701	Č.	Liô	EN	SIN	G
DOH DCA	justifica Cancella	tion)	9	Name	e of Contac Mi	t r. Paul McC	ue	Telephone N	Vumb		VU1	8	
				FA		ORMATION							
Name of Facility When	e Abatement is	Taking Place	e (3)				Type of Facili	ity (4)	-	/= hu2			
		dential Pr		ty			☐ School (K-	12)					
Street Address							Subchapte	er 8 (Other than , private & comm	K-12) Lbuile	dinac		
	108	Pinckne	y Rd				homes, et		iercia	Dull	ulrigs	1	
City (5)							Square Feet	# of Floors	3	BI	dg. A	ge	
	R	ed Bank,	NJ				2400	_ 2		_	80	+/-	
County (6)	onmouth				nty Code (ONLY)	7) (STATE	Current Use (Prior if being de Residen		ned)			
Name of Monitoring Fir	m Hired by Buil	lding Owner	$=$ Γ	ASCM	No.	Name of Abat	ement Contractor	(9)		>78%			
(8)	MECS						evens Enviro		vice	s, Ir	ıc.	501-J931	
Street Address		AND DESCRIPTION				Street Addres							
	PO Box	x 341					PO	Box 322					_
City, State, Zip Code						City, State, Zip				270			
(Crosswicks,	NJ 0851	5				Allento	wn, NJ 0850)1				
Project Manager for M			1000000	ephone		Telephone No		License N					
Lou	Laureti				8-4070	(609)	259-9688		00)493	3		_
Start Date (10) 7/7/14		Scheduled C	7/11/		ate (11)	Name of OSH.	CONTRACTOR CONTRACTOR	MECS					
Occupancy Status Du	ring Abatement	(Check only	one)			Street Addres		227 27 27		700			
X Facility Closed/Vac							PO	Box 341					_
Abatement Perform			ty Hou	rs		City, State, Zip		Carried Control					
Other - Describe:		m					Crosswi	cks, NJ 085	15				_
Scope of Work (Check ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	all that apply)		enovat emolitic			☐ Mini-E	Containment with N Enclosure Bbag Procedure Exempted (*) and N			e			
	0.200	N	Location or mally	/						Д	bate Typ	ment ce	
Location Asbestos-Containing			d Solel		Asbes	Description tos Containing N		Amount			_		т
<u>TO BE AB</u> IN Facil (13)	ATED ity	C	ustodia Staff? (12)	al		thermal system surfacing, VA other miscellar	s insulation, T, or	(Specify SF or LF)		Removal	Repair	Encapsulate	Enclosure
·		Yes	No	N/A								ate	
Basen	nent		×			Pipe Insul	ation	240 lf		×			
Basen	nent	_				Transi	te	144 sf	_	×			
											19		
Name of Registered W	aste Hauler			JDEP V		Cubic Yards of Waste	Name of Re	gistered Landfill		-			
Stevens 1	Environmer	ntal	_ -	lauler II 182	292	3 CU		T.R.R.F	., In	c.			
City, State	Allentov	vn, NJ				Disposal Date 7/11/14	City, State	Tullytow	/n. F	PΑ			
Completed By Mahlon E. S		Title	rojec	t Mar	nager	Signature		Dat	e	6/25	5/14		
		1	5,00			—L //#							_

Date of Notification (1)	24 /	14	_		Pa	e of Buildii rsippany	ng Owner/Ope /-Troy Hills	erator (Board	2) d of Education	#CE/	/En			
Agencies Notified EPA	Type Notific ⊠ Initial				Stree	t Address				UN 27 PI				
☑ DOLWD	Amended					State, Zip		-		11	1 81 6	0		
☑ DOH ☐ DCA	Amendm Emergen	_	ludine		Pa	rsippany	, NJ 07054		14 - 5 -	Telephone N	ultan			
(NJAC 5:23-8)	justificati		iuainę	1	Name	e of Conta	ct			Telephone N	Jumber			-/
***************************************	☐ Cancella				То	m Gaveg	jlio			(4			
					FA	CILITY I	NFORMATIC	ON		L -				-
Name of Facility Where	Abatement is 7	Taking	Place	(3)					Type of Facility (4)				
Parsippany High S	chool								School (K-12))				
Street Address									Subchapter 8	(Other than h	(-12)			
309 Baldwin Road									Other (i.e., pri	ivate and com	imerciai	bullair	ıgs,	
City (5)				-515	77				Square Feet	# of Floors	- 11	Bldg. /	Age	
Parsippany										1	1	J	-	
County (6)					Cou	nty Code (7)(STATE USE C	ONLY)	Current Use (Price	or if being den	nolished)			
Morris									school		•			
Name of Monitoring Firm	Hired by Build	ding Ov	vner (8)	ASCM	No.	Name of Ab	ateme	ent Contractor (9)					-
Whitman					011	0	Pow/R/S	Save I	nc					
Street Address	70						Street Addr	ess						
7 Pleasant Hill Roa	d						27 West	Stree	et					
City, State, Zip Code							City, State,	Zip Co	ode					
Cranbury, NJ 0851		200					Bloomfi	eld, N	IJ 07003					
Project Manager for Mon	itoring Firm			Tele	phone	No.	Telephone I	No.		License No				
Kevin Lovely				10		14-5418	(973) 68	0-008	8	357	Y			
Start Date (10)07 /10 /					ate (11) 14	Name of OS	SHA M	onitor			2,532			
Occupancy Status During	g Abatement (0	Check of	only o	ne)			Street Addre	ess				-		-
☐ Facility Closed/Vacate	ed During Entir	re Perio	d of	Abate	ment									
Abatement Performed Time of Abatement:	d Outside of No AM	ormal F PM/	acility	Hou PM-	s - Des	AM	City, State,	Zip Co	ode				5.798	
Scope of Work (Check al	I that apply)		-				1							
1 <u></u>		_							ainment with Nega	ative Pressure	1			
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			- Company of the Comp	novati			☐ Glo		Procedure	Edeble Bee				
			Is	Locat	ion	Т	△ NU	II-EXEI	npted (*) and Non	-Friable Proce				
Location			N	orma	lly		Descrip	ation of				batem		
Asbestos-Containing	Material (ACM)		d Sole ntena	ly by	Asbe	estos Containir	ng Mat	erial (ACM)	Amount	Remova	Repair	Encapsulate	Enclosure
TO BE ABA IN Facili					Staff?	(i.e	e., thermal sys surfacing,			(Specify SF or LF)	Noc	횰.	aps	losu
(13)	1	L		(12)			other misce			SF OI LF)	1 20		ulat	9
			Yes	No	N/A								CD	1
main office area				\boxtimes		VAT			*	2676				
		1												
		-	7	_								1	닏	
		_									_ L		П	Ш
N] [
Name of Registered Was				3000	JDEP \		Cubic Yards	of	Name of Registe	ered Landfill			-	
Atlas Disposal Opti	ons			"	auler II 18262		Waste		Tullytown R	esource Re	covery			
City, State							Disposal Dat	te	City, State					
Dover, NJ							1/21/14		Tullytown, F	PA				- 0
Completed By (Print or Ty	rpe)	Title					Signatu	ire	C.1 1	,	Date/			
Sharon Hendee		Sec	/Tre	as				4	16 1.		11.	1.	£	1
SB-41								/	an Mal		44	110	7	
AN 13		* Do	not	ice th	ie form	for achoes	toe liceneure e	vomnt	and postivities		1'/	20.		

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

				٠,			40 0.00 and 3.1		Promoter -	/ 17	1.		
Date of Notification (1)							ng Owner/Operator (5225					
	24 /	14			Di	vision of	Property Manag	ement & Const	ruction				
Agencies Notified	Type Notif	ication	3775		Stree	t Address			M JUN 27 F	M	5: 5	2	- 300
⊠ EPA					33	West Sta	ate Street						
□ DOLWD	☐ Amend					State, Zip				4716	18		
☑ DOH	Amend					enton, N.			å l	114	4		
☐ DCA (NJAC 5:23-8)	⊠ Emerg		cludin	g		e of Contac							
(NOAC 5.25-6)	justifica Cancel	35				and the state of t	-		Telephone Numb				
	Caricei	iation				ck Ferrer			<u> </u>	,			
					FA	CILITY II	NFORMATION						
Name of Facility Where	Abatement is	Takin	g Place	e (3)				Type of Facility (4)				
Residential House								School (K-12))				
Street Address								Subchapter 8	(Other than K-12)) cial b	مناطنہ		
58 MacArthur Aven	iue					12		homes, etc.)	ivate and commer	Ciai D	unqiri	gs,	
City (5)						1815-7		Square Feet	# of Floors	ТВ	ldg. A	ae	
Sayreville								•			- J.	.5-	
County (6)					Cou	nty Code (7)(STATE USE ONLY)	Current Use (Price	or if being demolis	hed)			
Middlesex						. ,	,		or in boaring dominate	nou)			
Name of Monitoring Firm	Hired by Bu	ilding (Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
Bio Terra Solutions				(-)		,,,,,		NAGEMENT LL	C				
Street Address			p 100	-			Street Address	MANGEMICIAL FE	.0				
P.O. Box 1224							CONTRACTOR SERVICES	l and					
City, State, Zip Code							27 Outwater					-	
Union, NJ							City, State, Zip Co						
Project Manager for Moni	tada - Fire			-			Garfield, NJ	07026					
	toring Firm				lephone		Telephone No.		License No.				
Rick Eustaquio					973-494		973-928-4888		1188				
Start Date (10)					etion Da		Name of OSHA M					1150	
06 /25 /			/-	. 2 - 1	0_ /	14	ALL PRO MA	NAGEMENT LL	.C				
Occupancy Status During							Street Address					-	
☑ Facility Closed/Vacate	d During En	tire Per	riod of	Abat	ement		27 Outwater I	_ane					
☐ Abatement Performed	Outside of I	Vormal	Facilit	у Ног	ırs - Des	scribe	City, State, Zip Co			-		-	-
Time of Abatement: _	AM	PN	Λ/	PN	1	AM	Garfield, NJ						15
Scope of Work (Check all	that apply)	-											_
	,		_					ainment with Nega	ative Pressure				
 ≥3 sf or ≥3 If ≥160 sf or >260 If 			☐ Re ☑ De				☐ Mini-Encl	osure					
23 _ 100 01 01 <u>- 2</u> 00 11			<u>⊠</u> De	HIOIL	IOH		☐ Glovebag	npted (*) and Non	-Friable Procedure				
			Is	Loca	ation	1		inprod () direction	Triable Frocedure	_	atam	ont T	
Location				Vorm.			Description of	f		-	atem		<u> </u>
Asbestos-Containing N		M)	Use	d So	lely by ance/		stos Containing Mat	terial (ACM)	Amount	Reg	Repair	팔	E
<u>TO BE ABA</u> IN Facilit					Staff?	(i.e	 thermal systems i surfacing, VAT, 		(Specify	Removal	8	ap	Enclosure
(13)	,			(12)		other miscellane		SF or LF)	80		Encapsulate	le l
, NEW 1220			Yes	No	N/A						1	đ	
Throughout House					×	Drywall	& Joint Compou	ınd	3100 SF	M	П	\boxtimes	
Throughout House					-						무		
							ile & Mastic		1100 SF	×	Ш	Ø	Ш
Exterior					\boxtimes	Caulkin	g		60 LF	\boxtimes			
						55.77			•	П	П	П	
Name of Registered Wast	e Hauler		2453 <u>-</u> 34	72.0	NJDEP N	Vaste	Cubic Yards of	Name of Registe	ered Landfill				
Newark Carting				0.8	Hauler II	No.	Waste	IESI Landfill					
City, State					04509		As Needed						
Newark, NJ							Disposal Date	City, State					
		-					TBD	Bethlehem,	PA				
Completed By (Print or Ty	pe)	Title					Signature	1/1	Date	e /		1 -	\Box
Zvonko Veskov		Pr	eside	nt			12.11	126		6	SL	11	U
SB-41			93983	-			//			-1		4	-

ASB-41 JAN 13

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

Date of Notification (1)	24 /	14					g Owner/Operator (: Property Manag e		uction	15			
Agencies Notified ☑ EPA	Type Notific	cation			0.0000000000000000000000000000000000000	Address West Sta	te Street	7814 C	IUN 27 PM	5: 5	2		
☑ DOLWD	Amende	0000000			City, S	State, Zip (Code	- A Cont	Dirini Gui	i T et di	4		
☑ DOH ☐ DCA	Amendm Emerger				Tre	nton, NJ	08608	2	. Tutuch	117			
(NJAC 5:23-8)	justificat		Jaani	,	Name	of Contac	t t		Telephone No.				
,	☐ Cancella	ation			Ric	k Ferrera	a		2.				
	- V - 195		0,000		FA	CILITY IN	FORMATION						_
Name of Facility Where A	batement is	Taking	Place	(3)	-			Type of Facility (4	4)	-			
Residential House				2007/				School (K-12)	pato				
Street Address					-			Subchapter 8	(Other than K-	12)			
86 MacArthur Aven	ue							Other (i.e., pri homes, etc.)	vate and comm	ercial b	uilding	gs,	
City (5)								Square Feet	# of Floors	В	ldg. A	ae	
Sayreville												90	
County (6)					Cour	tv Code (7	7)(STATE USE ONLY)	Current Use (Price	or if being demo	lished)			
Middlesex						., (n/						
Name of Monitoring Firm	Hired by Bui	Idina O	wner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
Bio Terra Solutions				(-/				NAGEMENT LL	С				
Street Address			<u> </u>				Street Address						-
P.O. Box 1224							27 Outwater	Lane					
City, State, Zip Code							City, State, Zip Co						
Union, NJ							Garfield, NJ						
Project Manager for Monit	toring Firm			Tele	ephone	No.	Telephone No.		License No.				_
Rick Eustaquio		1,000,000	73-494		973-928-4888		1188						
Start Date (10)		Sched	uled C	3	etion Da		Name of OSHA M	lonitor					
06 /25 /							ALL PRO MA	NAGEMENT LL	.c				
Occupancy Status During	Abatement	(Check	only	one)		72	Street Address						
☑ Facility Closed/Vacate							27 Outwater	Lane					
☐ Abatement Performed							City, State, Zip Co	ode					
Time of Abatement:	AM	PN	Λ/	PM		AM	Garfield, NJ	07026					
Scope of Work (Check all	that apply)						1						
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 				enovat emoliti			☐ Mini-End	tainment with Negatiosure g Procedure mpted (*) and Non		dure			
				Loca							patem	ent T	ype
Location				Norma	ally ely by		Description of				-	-	-
Asbestos-Containing N TO BE ABA		IVI)		intena			estos Containing Ma e., thermal systems		Amount (Specify	Removal	Repair	ncal	- C
IN Facilit			Cus	todial (12)	Staff?		surfacing, VAT	, or	SF or LF)	NA NA	=	Encapsulate	Enclosure
(13)		1	Yes	No	N/A		other miscellane	ous)				ate	
Futuria				-		T	- Cidina		4000 05	57	-		
Exterior					Ø	iransn	e Siding		1600 SF	Ø		Ц	
												П	
Name of Registered Wast	o Haulas		Ц		JUEP V	Mosto	Cubic Yards of	Name of Regist	orod Landfill			Ш	Ш
Newark Carting	e naulei			27.5	Hauler II		Waste	IESI Landfil					
					04509		As Needed		"				
City, State Newark, NJ	8:						Disposal Date TBD	City, State Bethlehem,	DΛ				
West characters to the Management								Deulienem,					
Completed By (Print or Ty	rpe)	Title					Signature	1/1		Date			
Zvonko Veskov		Pr	resid	ent			1511	lest		6	24	11	4
ASB-41 JAN 13		* 1	Do noi	use t	his form	for asbes	tos licensure exemp	oted activities.		(Ι,	•

Date of Notification (1) 06 /	14			Name of Building Owner/Operator (2) Division of Property Management & Construction										
Agencies Notified Type Notification ☑ EPA ☑ Initial					The second second	t Address West Sta	ate Street			¥27	PH	5: 5	2	
3 - 0 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	Amende					State, Zip			- 61.5	1	1 2	1 10 8	11	
☑ DOH □ DCA	Amendr			-		enton, NJ		& Think Coultier						
(NJAC 5:23-8)			ciuain	g		of Contac	7,233,0					- 1		
			Ric	k Ferrer	a	Telephone Number								
	12				FA	CILITY IN	NFORMATION							
Name of Facility Where Ab	atement is	Taking	Place	e (3)				Type of Facility (4)					_
Residential House								School (K-12)						
Street Address					1000	-1770		Subchapter 8				.n.an	20	
98 MacArthur Avenue	е							Other (i.e., pr homes, etc.)	ivate and	commerc	iai bu	ındıng	js,	
City (5)								Square Feet	# of Flo	ors	BI	dg. A	ge	
Sayreville								45						
County (6)					Cou	County Code (7)(STATE USE ONLY) Current Use (Prior if being demolished)								
Middlesex														
Name of Monitoring Firm H	ired by Bu	ilding C	wner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)						
Bio Terra Solutions							ALL PRO MA	NAGEMENT LL	.c					
Street Address						A60160851 L	Street Address							
P.O. Box 1224							27 Outwater	Lane						
City, State, Zip Code						-	City, State, Zip Co	ode					-	
Union, NJ							Garfield, NJ 07026							
Project Manager for Monito	ring Firm			Tele	ephone	No.	Telephone No.		License	No.				
Rick Eustaquio			9	73-494	-3762	973-928-4888		1188						
Start Date (10)06 /25 /	(2.V2)(V	Sched 0				ite (11) 14	Name of OSHA M	lonitor NAGEMENT LL	.c					
Occupancy Status During A	batement	(Check	only	one)			Street Address				G = 100-90			_
☑ Facility Closed/Vacated					ment		27 Outwater I	ane						
☐ Abatement Performed O	utside of N	Vormal	Facilit	y Hou	rs - Des		City, State, Zip Co	75212 jij.						
Time of Abatement:	AM	PN	Λ/	PM		AM	Garfield, NJ							
Scope of Work (Check all th	nat apply)		-		-									_
≥3 sf or ≥3 if≥160 sf or ≥260 if				enovat e moliti o										
2.33.55.5				Loca							1	atem	ent T	vne
Location of				Norma			Description o				-			
Asbestos-Containing Ma TO BE ABATE		M)		ed Sole intena			estos Containing Ma e., thermal systems i		Amor		Remova	Repair	Encapsulate	Enclosure
IN Facility			Cus	todial	Staff?	(1.0	surfacing, VAT,		SF or		OVa	₹	psu	Sur
(13)			Yes	(12) No	N/A		other miscellane	ous)					ate	0
Exterior						Transit	e Siding		1000	SF				
Interior Various Location	ons					Floor T	ile & Mastic		500	SF	×		×	
									55,000,000	*				
				H	-	-					-] [
Name of Design and March			Ц			<u>. </u>	10111111						Ш	Ш
Name of Registered Waste Newark Carting	nauler			15000	JDEP V lauler II 04509	O No.	Cubic Yards of Waste As Needed	Name of Regist		TIII				
City, State Newark, NJ							Disposal Date TBD	City, State Bethlehem,	PA					
Completed By (Print or Type	e)	Title					Şignaturə	///		Date	e .		1	-
Zvonko Veskov		Pr	eside	ent			3-1	leh		(2	2 U	1	4_
ASB-41 JAN 13		* [Do not	use th	is form	for asbest	tos licensure exemp	ted activities.			,		1.	

9				(1 4			40 0.00 and 5.1	950	PER	· 11	FE	* 4*4			
Date of Notification (1)		Name of Building Owner/Operator (2)													
06/	24 /	14	-		Name of Building Owner/Operator (2) Division of Property Management & Construction Street Address										
Agencies Notified	Type Notifi	ication			Street	Address			ALL SELL	27 M	4	5: 5	7		
	✓ Initial		33 West State										-		
☑ DOLWD	Amende	ded				COLUMN CHURC			hali C. va	.			1-1		
☑ DOH	Amendr	ment#	City, State, Zip Co					7. I HILL STATE							
		ency (including				- 100 months (100 months)				ar Pe E		1			
(NJAC 5:23-8)	1.00	fication)				of Contac			Telephone	Number					
	☐ Cancellation					k Ferrer	a			B					
					FA	CILITY IN	NFORMATION								
Name of Facility Where Ab	atement is	Taking P	lace (3	3)				Type of Facility	(4)						
Residential House								☐ School (K-12							
Street Address					200			Subchapter 8	Other than	K-12)		4011			
115 MacArthur Aven	ue						2	homes, etc.)		mmercial buildings,					
City (5)								Square Feet	# of Floors	. 1	Ric	lg. A	ne .		
Sayreville								oquaio i cot	# 01 1 1001S	,	Dic	.y. A	ge		
County (6)		-		_	Cour	aty Code (7)(STATE USE ONLY)	Current Use (Pri	or if boing do	maliabas	1/				
Middlesex					Cour	ity Code (I JOINTE OSE ONET)	Current Ose (Fil	or ir being de	monsnec	1)				
Name of Monitoring Firm H	lirad by Du	ildina Our	202 (0)	- 1	ASCM	N-	TN	10 1 10							
Bio Terra Solutions	ired by Bu	iliding Owr	ner (8)	1	ASCM	No.	The second secon	ent Contractor (9)							
					61			NAGEMENT L	LC						
Street Address							Street Address								
P.O. Box 1224							27 Outwater Lane								
City, State, Zip Code															
Union, NJ							Garfield, NJ	07026							
Project Manager for Monitoring Firm Tel						No.	Telephone No.		License N	0.					
Rick Eustaquio 9						-3762	973-928-4888	3	1188					*	
Start Date (10)		Schedule	d Con	plet	ion Da	te (11)	Name of OSHA N	Monitor							
06 /25 /	14	07	_ / _	30	_ /	14	ALL PRO MA	NAGEMENT LI	LC						
Occupancy Status During A	Abatement	(Check or	nly one	2)			Street Address								
□ Facility Closed/Vacated					nent		27 Outwater	Lano							
☐ Abatement Performed C						cribe			······································						
Time of Abatement:							City, State, Zip C								
Coops of Work (Chook all th	ant analys						Garfield, NJ	07026							
Scope of Work (Check all the	nat apply)						☐ Full Con	tainment with Neg	ative Pressur	·e					
≥3 sf or ≥3 If			Reno				☐ Mini-End		auve i ressui	C					
≥160 sf or ≥260 lf		\boxtimes	Demo	olitio	on Glovebag Procedure										
			Is Lo	oofi	00		IXI Non-Exe	mpted (*) and Nor	n-Friable Prod						
Location of				mal			Description				Aba		ent Ty		
Asbestos-Containing Ma		M)	Used :	Sole	ly by	Asbe	Description of estos Containing Ma		Amount	Removal		Repair	m	Enclosure	
TO BE ABATE			Maint Custoo		CT 150 C		, thermal systems	insulation,	(Specify	,	3	pair	сар	clos	
IN Facility (13)				12)	olan :		surfacing, VAT other miscellane		SF or LF	·) i	100		Encapsulate	ure	
(13)		Y		No	N/A		Other miscellane	ous)					ě	3.576	
Exterior				20,00		Chiman				-	7				
Exterior			1]	Ø	Chimne	ey Flashing		6 SF	12	3	Ш			
] [\boxtimes					10					
			1 [7						Ī	7	П		П	
						-14.49						_			
21]	Ш			
Name of Registered Waste	Hauler			100000	JDEP \		Cubic Yards of	Name of Regis	tered Landfill						
Newark Carting	20			10000	auler 10 0450 9		Waste As Needed	IESI Landfi	II						
City, State					J-7505		Disposal Date	City, State			_				
Newark, NJ							TBD	Bethlehem	, PA						
Completed By (Print or Type	9)	Title		_			Signature			Date .			1		
Zvonko Veskov	-,	100000000000000000000000000000000000000	ident	8			Signature	1/1-1		Date					
		Fies	nucill				3.1	lac		16	9	4	16	1	
ASB-41 IAN 13		* * D-	not us	o thi	s form	for achoe	tos licensure exemp	ated activities			•				

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

内部のサルカサハ

Date of Notification (1) 06 /	24	/ 14			Name	of Buildin	g Owner/Operator (2)	ruction	- 1./_			_		
Agencies Notified EPA	Type No	tification	-		Division of Property Management & Construction Street Address 33 West State Street										
☑ DOH		ndment#			City, State, Zip Code Trenton, NJ 08608										
DCA		gency (in	cluding	1		Name of Contact Telephone Number									
(NJAC 5:23-8)	☐ Cano	cation)			// / / / / / / / / / / / / / / / / / / /	k Ferrer			All years and the second and second	Der					
20072	L Cano	Cliation								7-					
					FA	CILITY IN	NFORMATION								
Name of Facility Where A Residential House	Abatement	t is Taking	g Place	(3)				Type of Facility ()						
Street Address 85 Weber Avenue									(Other than K-12 ivate and comme		ilding	s,			
City (5)	ll somewalt							Square Feet	# of Floors	Blo	ig. Ag	ge			
Sayreville															
County (6)		U.			Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demoli	shed)					
Middlesex								=							
Name of Monitoring Firm	Hired by	Building (Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)							
Bio Terra Solutions	3						The second of th	NAGEMENT LI	_C						
Street Address				_			Street Address		***************************************						
P.O. Box 1224						27 Outwater Lane									
City, State, Zip Code						***	City, State, Zip Co	ode							
Union, NJ							Garfield, NJ								
Project Manager for Mon	itoring Firr	n		Tele	phone	No.	Telephone No.		License No.				_		
Rick Eustaquio	0720			97	73-494	-3762	973-928-4888		1188						
Start Date (10)		Sched	duled C	omple	tion Da	ite (11)	Name of OSHA M	Ionitor				1010	10.20		
06 /25 /	14					14	ALL PRO MA	NAGEMENT LI	_C						
Occupancy Status During	a Abateme	ent (Checi	k only o	one)			Street Address								
☑ Facility Closed/Vacate	PROGRAMME LA				ment		27 Outwater	Lane							
☐ Abatement Performed	Outside o	of Normal	Facilit	y Hour	s - Des	cribe	City, State, Zip Co					200			
Time of Abatement: _	AM-	PI	W/	_PM-		AM	Garfield, NJ								
Scope of Work (Check al	I that apply	y)				-									
≥3 sf or ≥3 lf≥160 sf or ≥260 lf			□ Re	novati molitic			☐ Mini-Enc	tainment with Neg losure g Procedure mpted (*) and Nor		ıre					
				Local						Aba	ateme	ent Ty	уре		
Location Asbestos-Containing TO BE ABA IN Facili (13)	Material (A	ACM)	Use Ma	Norma ed Sole intena todial (12)	ly by		Description of estos Containing Ma e., thermal systems surfacing, VAT other miscellane	terial (ACM) insulation, , or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure		
(.0)			Yes	No	N/A		outer missenans	000)				e l			
Throughout House					\boxtimes	Drywal	l & Joint Compo	und	4600 SF	⋈		\boxtimes			
						1									
				П			444				П	П			
Name of Registered Was	te Hauler				JDEP '	Waste	Cubic Yards of	Name of Regis	tered Landfill	لالا					
Newark Carting				1932	auler II	O No.	Waste	IESI Landfi							
City, State					04509)	As Needed								
Newark, NJ							Disposal Date TBD	City, State Bethlehem	DΛ						
		1						Detilletiem	-			(5)			
Completed By (Print or Ty Zvonko Veskov	ype)	Title	e reside	ent			Signature	Mal	, Da	G(ąυ	di	щ		
ASB-41 JAN 13		*	Do not	use th	is form	for asbes	tos (cepsure exemp	oted activities.		- (1,	_		

Date of Notification (1) 06 /	24 /	14	15		Name of Building Owner/Operator (2) Division of Property Management & Construction									
Agencies Notified	Type Notif		_		Street Address 2014 JUN 27 PM 5: 52									
⊠ EPA	☐ Initial	ICation					ite Street	FULL C.	, 111 A. 67					
☑ DOLWD	☐ Amend	ed			1	State, Zip		-4.	1					
☑ DOH	Amend				ornes e cos	nton, NJ		9 1 10 1	TOWN TOWN					
DCA	⊠ Emerge		cludin	g		of Contac		4,6 =		h				
(NJAC 5:23-8)	justifica					k Ferrer			Telephone Num	iber				
	L Cancer	iauon			1					7				
Name of Facility Where	Abatament is	Taking	Diag	(2)	FA	CILITY	NFORMATION	Type of English /	4)					
Residential House		s raking	Place	3 (3)				Type of Facility (School (K-12)						
Street Address							Silving Co.) (Other than K-12	2)				
								Other (i.e., pr	ivate and comme		uilding	js,		
88 Weber Avenue								homes, etc.)		1.20				
City (5)								Square Feet	# of Floors	BI	dg. A	ge		
Sayreville									1					
County (6)					Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demoli	shed)				
Middlesex														
Name of Monitoring Firm		uilding C	wner	(8)	ASCM	No.	Name of Abateme							
Bio Terra Solutions					ALL PRO MA	NAGEMENT LI	LC							
Street Address		3/		Street Address										
P.O. Box 1224							27 Outwater	Lane						
City, State, Zip Code						City, State, Zip Code								
Union, NJ							Garfield, NJ	07026						
Project Manager for Mon	itoring Firm			Tele	ephone	No.	Telephone No.		License No.					
Rick Eustaquio				9	73-494	-3762	973-928-4888		1188					
Start Date (10)		Sched	uled C	Comple	tion Da	te (11)	Name of OSHA M	onitor						
06 /25 /	14	_0	7	30	/	14	ALL PRO MA	NAGEMENT LL	_C					
Occupancy Status During	g Abatement	(Check	only	one)			Street Address							
☑ Facility Closed/Vacate					ment		27 Outwater	Lane						
☐ Abatement Performed	C					cribe	City, State, Zip Co							
Time of Abatement: _	AM	PN	Λ/	PM		AM	Garfield, NJ							
Scope of Work (Check a	II that apply)	3												
	,							tainment with Neg	ative Pressure					
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 				enovat emoliti			☐ Mini-Enclosure							
≥ 100 SI OI ≥200 II			Мъ	HIOHU	lition ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure									
			Is	Loca	tion	1				1	atem	ent T	vne	
Location	of			Norma			Description of				-		1	
Asbestos-Containing		CM)		ed Sole			estos Containing Ma		Amount	Removal	Repair	ng.	Enclosure	
TO BE ABA					Staff?	(1.6	e., thermal systems surfacing, VAT		(Specify SF or LF)	8	=	psu	nso	
(13)	8			(12)		-	other miscellane	ous)	10 Ex 50 C 10050	-		Encapsulate	0	
			Yes	No	N/A						-			
Throughout House					\boxtimes	Drywal	l & Joint Compo	und	4300 SF	Ø		Ø		
Throughout House						Floor T	ile & Mastic		470 SF	\boxtimes				
								a l						
							Collection (2							
Name of Registered Waste Hauler					JDEP '	Waste	Cubic Yards of	Name of Regist	tered Landfill					
Newark Carting				F	lauler II		Waste	IESI Landfi	II					
City, State					04509	,	As Needed Disposal Date	City, State		-				
Newark, NJ							TBD	Bethlehem	PA					
Completed By (Print or T	vne)	Title	vi e				Signature			ate			_	
Zvonko Veskov	ype)		resid	ont.			Signature	1/0. 1		1		1.		
			CSIU	ent			1.	VIAL		6	aL	24114		
ASB-41 JAN 13		*	Do noi	use th	nis form	for asbes	tos licensure exemp	oted activities.		1		(1,5	

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

OFCINET Name of Building Owner/Operator (2) Date of Notification (1) Division of Property Management & Construction 06 24 1 14 Street Address Agencies Notified Type Notification **⊠** EPA 33 West State Street **⊠** DOLWD ☐ Amended City, State, Zip Code 11,10 Amendment # ☑ DOH Trenton, NJ 08608 ☐ DCA Name of Contact Telephone Number (NJAC 5:23-8) justification) Cancellation Rick Ferrera Coo 20= ... **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) School (K-12) Residential House Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 97 Weber Avenue homes, etc.) # of Floors Bldg. Age City (5) Square Feet Sayreville County Code (7)(STATE USE ONLY) | Current Use (Prior if being demolished) County (6) Middlesex Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. ALL PRO MANAGEMENT LLC **Bio Terra Solutions** Street Address Street Address P.O. Box 1224 27 Outwater Lane City, State, Zip Code City, State, Zip Code Garfield, NJ 07026 Union, NJ Telephone No. Project Manager for Monitoring Firm License No. Telephone No. 1188 Rick Eustaquio 973-494-3762 973-928-4888 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 07 / 30 / 14 ALL PRO MANAGEMENT LLC 06 / 25 / 14 Street Address Occupancy Status During Abatement (Check only one) ☑ Facility Closed/Vacated During Entire Period of Abatement 27 Outwater Lane ☐ Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: AM- PM/ PM- AM Garfield, NJ 07026 Scope of Work (Check all that apply) ☐ Mini-Enclosure ☐ Renovation ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf □ Demolition ☐ Glovebag Procedure ☐ Non-Exempted (*) and Non-Friable Procedure Is Location Abatement Type Normally Description of Location of Remova Enclosure Used Solely by Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) ncapsulate Maintenance/ (i.e., thermal systems insulation, (Specify TO BE ABATED Custodial Staff? SF or LF) surfacing, VAT, or IN Facility (12)other miscellaneous) (13)Yes No N/A X 4300 SF \boxtimes Throughout House \boxtimes **Drywall & Joint Compound** X X П П \Box NJDEP Waste Name of Registered Landfill Cubic Yards of Name of Registered Waste Hauler Hauler ID No. Waste IESI Landfill **Newark Carting** 04509 As Needed City, State Disposal Date City, State Bethlehem, PA TBD Newark, NJ Signature, Completed By (Print or Type) Title

ASB-41 JAN 13

Zvonko Veskov

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

President

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

PEACHIES

Date of Notification (1)			Name of Building Owner/Operator (2)										
	14		Divi	ision of F	Property Manage	ment & Const	ruction						
Agencies Notified	ion		Division of Property Management & Construction Street Address										
Control of the Contro	Initial			1 11 522 (2) 20 1									
	Amended			City, S	33 West State Street City, State, Zip Code Trenton, NJ 08608								
Ø DOH	Amendme	_		Tre	nton, NJ	08608	& LA CASING						
DCA (NJAC 5:23-8)	Emergency justification		3	Name	of Contact		1.00	Telephone Numb	er				
	Cancellatio			Ric	k Ferrera			· .	7				
				FAC	CILITY IN	FORMATION					1997//		
Name of Facility Where Ab	atement is Ta	aking Place	(3)				Type of Facility	(4)					
Residential House							School (K-12)					
Street Address							Subchapter 8	(Other than K-12) !!		_		
105 Weber Avenue							homes, etc.)	rivate and commer	ciai bui	liaing	S,		
City (5)							Square Feet	# of Floors	Blo	ig. Ag	ie.		
Sayreville										3			
County (6)				Cour	nty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demolis	hed)	-			
Middlesex					ity code (i	(OTATE ODE ONET)		or it boiling domain	.,,,,				
	Name of Monitoring Firm Hired by Building Owner (8)					Name of Abatem	ent Contractor (9)						
Bio Terra Solutions					No.	The state of the s	NAGEMENT L						
Street Address						Street Address	WAOLINETT L			-			
P.O. Box 1224						27 Outwater	l ano						
								7.0			_		
City, State, Zip Code					City, State, Zip Code Garfield, NJ 07026								
Union, NJ	aring Firm		Tal	ephone	No	Telephone No.	07020	License No.			_		
Project Manager for Monito	oning Firm			73-494		973-928-4888	1	1188					
						Name of OSHA N		1100					
Start Date (10) Scheduled Comp 06 / 25 / 14 07 / 3							NAGEMENT L	ıc					
			P.Z.	<u> </u>		7.74 5.5 50.7 511 5150.7 515.7 55.0 50.0 50.0 50.0 50.0 50.0 50.0 5	MAGLINILITI						
Occupancy Status During						Street Address							
 ☐ Facility Closed/Vacated ☐ Abatement Performed 					cribe	27 Outwater							
Time of Abatement:						City, State, Zip C							
					-	Garfield, NJ	07026				- 100		
Scope of Work (Check all	that apply)					☑ Full Con	tainment with Neg	ative Pressure					
≥3 sf or ≥3 lf			enova			☐ Mini-End	☐ Mini-Enclosure						
≥160 sf or ≥260 lf		⊠D	emolit	ition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
		1 1	s Loca									vne	
Location of	of		Norm	ally		Description of	of.			_		1	
Asbestos-Containing M	Naterial (ACM		ed So ainten	lely by		estos Containing Ma		Amount	em	Repair	nce	nc	
TO BE ABAT				Staff?	(1.6	e., thermal systems surfacing, VAT		(Specify SF or LF)	Removal	=	Encapsulate	Enclosure	
(13)	9		(12			other miscellane			_		ate	O.	
		Yes	No						4	_		_	
Throughout House				\boxtimes	Drywal	8 Joint Compo	ound	4300 SF	\boxtimes		Ø		
						18-53		0	\boxtimes		\boxtimes		
	2000 - 1000		100000						П	П	П		
									+=] [屵		
10											Ш		
Name of Registered Wast	e Hauler	2000-000		NJDEP		Cubic Yards of	Name of Regis						
Newark Carting				Hauler I 0450		Waste As Needed	IESI Landi	fill					
City, State						Disposal Date	City, State				la la		
Newark, NJ						TBD	Bethlehen	n, PA			810		
Completed By (Print or Ty	pe)	Title			-	Signature	1/1	D	ate /	١	1		
Zvonko Veskov		Presid	lent			6	Vent.		(0)	DL	111	U	
ASB-41						1			~	_	7		
		* Da	4	this fa	a for oakas	too likanaika ayam	ntod activities				-		

JAN 13

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

Agencies Notified Typs Notification E PA Street Address 1958 Hytton Road The Amendment # 1958 The Amendme	Date of Notification (1)				Name of Building Owner/Operator (2)											
B PA	06/24	/	1		Per	nnsauke	n Board of Educa	ation / Job #1	405-4769 CI	neck #6	404					
Carry Code (7) Carr		al			「											
Emergency (including Cancellation Cancellatio																
Name of Facility Where Abstement is Taking Place (3)	L3 200												1111			
Cancellation			nciuaing	3				Telephone Numb								
Name of Facility Where Absternert is Taking Place (3)					Jac	k Killior	1			-0000						
Name of Facility Where Absternert is Taking Place (3)					FΔ	CILITYII	NEORMATION		L				-			
AE Burling Elementary School Street Address School (K-12) Other (i.e., private and commercial buildings, booke, etc.) Other (i.e., private and commercial buildings, etc.) Other (i.e., private and	Name of Facility Where Abateme	nt is Takin	a Place	(3)	' ^	OILIT I	W OKWATION	Type of Facility	(4)	-1115-1116						
Size Address	10		9 1 1000	(0)				L_33	• •							
City (5) Pennsauken	1. The contract of the contrac							Subchapter 8	Other than K-							
Cluy (5) Pennsauken																
Pennsauken		_	-			(191)			T-000	IR	da A	70				
County (6)	100							Oquare r eet	# 01 1 10013		ug. /	ge				
Camden Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) AbateTech, Inc.	1.000.000.000.000.000				Cour	aty Code (7\/STATE LISE ONLY	Current Hee (Pri	or if hoing dom	olichod)						
Name of Monitoring Firm Hired by Building Owner (8)					Cour	ity Code (I NOTATE OSE ONET)		or it being dem	olistied)						
AbateTech, Inc. Street Address Street Address 30 Maple Ave. PO Box 25		Duilding	Oumor	'O\	ASCNA	No	Nome of Abstone									
Street Address 1253 North Church Street City, State, Zip Code Moorestown, NJ 08057 Project Manager for Monitoring Firm James A. Guillardi Start Date (10) O7 / 08 / 14 O7 / 21 / 14 Cocupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement AM- PM PM- AM Scope of Work (Check all that apply) Staft of or 23 if Asbestos-Containing Material (ACM) OS EASATED IN Facility (13) Boiler Room Solier Room Sol		Dulluling	Owner	(0)	ASCIN	NO.	MARK MANAGES SA AND									
1253 North Church Street						¥		nc.								
City, State, Zip Code Moorestown, NJ 08057								DO Pay 25								
Moorestown, NJ 08057																
Project Manager for Monitoring Firm James A. Guilardi																
Start Date (10)				Tal		Na	100	NJ U6U46	I tierene Nie		-					
Start Date (10)			The county													
O7		م لم ما را				20000 NO. 10000 NO. 1000 NO.		00529								
Occupancy Status During Abatement (Check only one) Facility Closed/Vacated During Entire Period of Abatement Check only one) City, State, Zip Code Cinnaminson, NJ 08077 City, State, Zip Code City, State, Zip Code Cinnaminson, NJ 08077 City, State, Zip	E 50.000		. 3		25,722,8	ANNERSON TOUR REPORTED	4 (0.00)									
Facility Closed/Vacated During Entire Period of Abatement 200 Route 130 North								icai								
Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: AM- PM PM- AM			STATE OF THE STATE													
Time of Abatement:AMPMPMAM						oribo	The state of the s									
Scope of Work (Check all that apply) Stope of Work (Check all that apply) Stope of Work (Check all that apply) Stope of Work (Check all that apply) Stope of Work (Check all that apply) Stope of Work (Check all that apply) Stope of Work (Check all that apply) Stope of Work (Check all that apply) Stope of Work (Check all that apply) Stope of Work (Check all that apply) Stope of Work (Check all that apply) Stope of Work (Check all that apply) Stope of Work (Check all that apply) Stope of Work (Check all that apply) Stope of Work (Check all that apply) Stope of Work (Check all that apply) Stope of Work (Check all that apply) Mini-Enclosure Mini-Enclosure Mini-Enclosure Mini-Enclosure Mini-Enclosure Mini-Enclosure Mini-Enclosure More by and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Type Roll of Manual (ACM) Amount (Specify Stope of Wastemans) Roll of Wastemans (Specify Stope of Wastemans) Roll of Wastemans (Specify Stope of Wastemans) Roll of Wastemans (Specify Stope of Wastemans (Specify Specify Stope of Wastemans (Specify Specify Specify Specify Stope of Wastemans (Specify Specify Speci																
≥3 sf or ≥3 lf					77		Cinnaminson	, NJ 08077								
Senovation Demolition Description of Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Exempted (*)	Scope of vvork (Check all that app	oly)					⊠ Full Cont	ainment with Neg	ative Pressure				- 1			
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Boiler Room Boil					tion Mini-Enclosure											
Location of Asbestos-Containing Material (ACM) Normally Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A Boiler Room Boi	≥160 sf or ≥260 lf		∐ De	moliti	on Glovebag Procedure											
Location of Asbestos-Containing Material (ACM) Used Solely by Maintenance/ Custodial Staff? (12) Yes No N/A			le	Loca	tion		-4	ant T								
Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13) Boiler Room Boi	Location of		1	Norma	ally		Description o	f		-	_	_				
SF or LF Signature Signa		(ACM)					estos Containing Ma	terial (ACM)	Amount	l den	₹ep	l iii	inc			
Boiler Room						(i.€				NOU	a÷.	aps	losu			
Boiler Room	1								SF OI LF)	<u>m</u>		ulat	6			
Boiler Room Boiler Insulation Boiler Insulation Boiler Ribbing Gasket Material Boiler Room Boiler Ribbing Gasket Material Boiler Ribbing Gasket Material	504.000		Yes	No	N/A							Œ				
Boiler Room	Boiler Room					Boiler	Breeching		140 SF							
Name of Registered Waste Hauler AbateTech, Inc. City, State Lumberton, NJ Completed By (Print or Type) Jennifer Piraine NJDEP Waste Hauler ID No. 18750 Name of Registered Landfill G.R.O.W.S. Landfill G.	Boiler Room					Boiler	Insulation		85 SF							
Name of Registered Waste Hauler AbateTech, Inc. City, State Lumberton, NJ Completed By (Print or Type) Jennifer Piraine NJDEP Waste Hauler ID No. 18750 Name of Registered Landfill Waste G.R.O.W.S. Landfill City, State City, State Tullytown, PA Signature Operations Coordinator Name of Registered Landfill G.R.O.W.S. Landfill Signature Opate Date	Boiler Room					Boiler	Ribbing Gasket N	Material	100 LF							
Name of Registered Waste Hauler AbateTech, Inc. City, State Lumberton, NJ Completed By (Print or Type) Jennifer Piraine NJDEP Waste Hauler ID No. 18750 Name of Registered Landfill G.R.O.W.S. Landfill G.R.O.W.S. Landfill City, State Tullytown, PA Signature Operations Coordinator Name of Registered Landfill G.R.O.W.S. Landfill G.R.O.W.S. Landfill G.R.O.W.S. Landfill Disposal Date Title Operations Coordinator			П	П	П						П	П	П			
AbateTech, Inc. Hauler ID No. 18750 Some state Som	Name of Registered Waste Haule					Vaste	Cubic Yards of	Name of Regist	tered Landfill	1-1						
City, State Lumberton, NJ Completed By (Print or Type) Jennifer Piraine Disposal Date Title Tullytown, PA Signature Operations Coordinator Date				1333	lauler II	No.	Waste				8		1			
Lumberton, NJ Completed By (Print or Type) Jennifer Piraine Title Operations Coordinator Title Operations Coordinator				18750)			ACA ESTUDENCIA (1)				-				
Completed By (Print or Type) Jennifer Piraine Title Operations Coordinator Signature Operations Coordinator									DΛ							
Jennifer Piraine Operations Coordinator	Co. Heath St. visioners, J. A. and C.	7000						ranytown,		D-4-						
Things Villium		AVESSA.			^·	mat	Signature	1 0 -		Date						
	ASB-41		perati	UNS	Coord	Hator	Min	per MACA	ing							

ASB-41 MAY 11