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

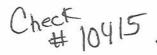
Ck# 3391

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Date of Notification	6/21/18							er / Operato				V) 17 E-	J 17787-4	-1		
Agencies Notified	Type Notific	ation				dress		16	117	TE C) E	W-E	3 1	1		
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LINDLINION		Burnington						OMMUNIC			emonsne	u)				
Name of Monitoring	Firm Hired b	y Building Own	ner (8)		AS	SCM No		ame of Aba			ctor (9)					
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Street Address 8436 ENTERPRIS	E AVE							reet Addres								
City, State & Zip Code								23 BEAV ty, State &	_				-			
PHILADELPHIA PA 19153								RISTOL, F								
Project Manager for Monitoring Firm Telephone Nur							10000	lephone N			Lice	ense Nu	mber			
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City, State	. 5111 6110	01,1110.			330			osal Date	-	State	MINDEIL		-			
NEW CASTLE, DE							TBD				IRG, OH	44688				
Completed By (Print				Tit			Signa	ature	^		1 0		Date	2000		
PATRICK T. DeCA	AKO			Es	tima	ator	1/	trick	He	Care 1	R		6/21/	18		
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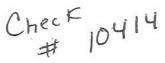
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Name of Facility 1875	AL-1	DI /	-	FAC	ILITY INFO	RMATION					200					
Name of Facility Where Newark Airport - B		ng Place (3)					Туре	e of Facility (School (K-1	2557						
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City (5) Newark								Squa 43,2	are Feet	# of	Floors		2000	ldg. A 5+	ge	
County (6) Union					Code (7) USE ONLY)				ent Use (Pri			olishe	ed)			
Name of Monitoring Firm Matrix New World I		Owner (8)	ASCI	M No.				atement Cor ourg Indus			Cor	npai	ny		
Street Address 26 Columbia Turnp	oike					1	treet A		ess Iman Driv	e						75000
City, State, Zip Code Florham Park, NJ (orham Park, NJ 07932								Zip Code m, PA 180	115						
Project Manager for Mor	ject Manager for Monitoring Firm					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	elepho				Licens		,			
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Facility Closed/Vac Abatement Perform Other – Describe:	ned Outside of Norr	nal Facilit	Abater y Hour	ment s		Ci	ity, Sta	ate, Z	Iman Drive Zip Code m PA 180							
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Roo			-	X		Flasi		- A 1 2	-		00 SF	-	X			
Throughout		+		X	Pipe Sea			nkle	r Heads		Units		X			
		-			ipe dec	aidill OII	Opin	MIG	i i icaus	000	Onits		n.			
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	andenburg Industrial Service Co					of Waste 30			IESI Be	1970						
City, State Bethlehem, PA					(Disposal D 06/11/18	Date 3-07/0	06/1	City, State Bethleh		A					
Completed by Stephen Carne		Title Envir	ronme	ental M	lanager	Signa	ature/	5	a.	-		Date 06/		018		

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Street Address								ī	Subchapter	8 (Othe	than K-1	2) (al brill	dians	hom	25	
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County (6)					Code (7)	ř.		Curre	nt Use (Pri	or if beir	g demolis	hed)				
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Street Address		-					Street									
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City, State, Zip Code Piscataway NJ 088	54								ip Code PA 1843	36						
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Facility Closed/Vac									obb Rd						_	
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Date of Notification (1)	10		Name o	f Building Owner/	1 i.		1) 5	15 1	U		-11
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DOH justification)			-	f Contact M	Gee		Telephone N				
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City, State, Zip Code	NJ		08	533	City, State, Z	ip Code	71A \$ A.	70	24	5.3	3
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Facility Closed/Vacated During Entire P Abatement Performed Outside of Normal					City, State, Z		337		- 34	100	150
☐ Other – Describe:					New 8		LU	08	53	3	
Scope of Work (Check All That Apply)						011					
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City, State	<u> </u>		1700		sal Date	City, Sta	te		• 0		A r
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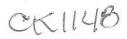
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Data of Name (1)									JARRY 1	K.F.P	E	Π	\mathbb{N}/\mathbb{I}	E	Time
Date of Notification (1)	0-25-	18		Name /	of Building C	7	Operator (2)	1 . 2	De	molitic	5	- in	\!)	ഥ	
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Street Address		,						3 Subc	ol.(K-1 hàpter r (i.e. p	8 (Other than private & comm	K-12) ercia	l buile	dings	, hom	es,
City (5) Cass	Doro	NJ		0	8028	}	: S	Square Fe	et	# of Floors		В	Bldg. A	\ge + -	
County (6) Clauce	sten			County (STATE	Code (7) USE ONLY)		<	Single		or if being demo		1		llin	
Name of Monitoring Firm Hi		wner (8)	<u> </u>	ASC	M No.		Name of	Abateme	nt Con	tractor (9)	i			T)-
Street Address Ro. B	ox 33	37		1			Street Ac	ddress		em em	J			- B	06
City, State, Zip Code	va+	N ₂		90	533	3	City Stat	te, Zip Co	de	A+ 11	7	٥	25	53	3
Project Manager for Monitor	ilgt-irm		- 1	Telepho	one No. 758-3	365	Telephon	ne No.	JT	Licens	e No	7	19	4	
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Occupancy Status During Al			- 7	ent			Street Ad	ldress		337					
☐ Abatement Performed ☐ Other – Describe:						_	City, State	e, Zip Co	de	ALT	α	g.	53	3	7
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Date of Notification (1)		50°	Name of I	Duildie	ng Owner/Operator	(2)	11-41				
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			1	-	ORMATION	MG 14	1007-67	0 /	//		
Name of Facility Where A	Abatement is Taking Pl	ace (3)	TAGILIT	1 1141	OKWATION	Type of Facility	(4)			_	
* /	* Assessment and the state of t		-sch	(2)	/						
Street Address	101	-670	201	000	Land &	School (K-1)	²⁾ 8 (Other than K-12)			
150 N.	MAINS	57				☐ Other (i.e. p homes, etc.	rivate & commercia	l building:	S,		
City (5)	<i>P.Z. II. I I G</i>					Square Feet	# of Floors	Bldg. A	ae		-
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		7	County Co ONLY)	ode (7) (STATE USE	Current Use (P	rior if being demolis	shed)	-		
Name of Monitoring Firm	Hired by Building Own	er ASC	M No.	_	Name of Abatem	ent Contractor (2)			_	
(8) The 1007	Tex do.				CRVA	- 1	1				
Street Address	eo- Co.				Street Address	INVI JUIC	& ENV.		,	-	_
700 TURI City, State, Zip Code	VERL WAY				15-1	Carl	FOREST	Rd	/		
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Project Manager for Moni	· 1901	4			Him	ILION,	11.V.				
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Start Date (10)	Scheduled C	6-5	19-18		607-89	0-1110					
6-19-18	/4/0 = 5		ale (11)		Name of OSHA N	Vionitor					
Occupancy Status During	Abatement (Check on	ly one)	10.		Street Address	· C / -					_
☐ Facility Closed/Vacated		5. (5)			1204	HAMICE	Di Alle				
☐ Abatement Performed	Outside of Normal Fac	lity Hours	IL	Ì	City, State, Zip C	ode	0/0 1/0				\dashv
Other - Describe:	Mide Re	OF 7	TP.		TRENTE	314, N	J. 330	204			1
Scope of Work (Check all	that apply)	d.	2			/	Nati D				
$\square \ge 3$ sf or ≥ 3 lf $\square \ge 160$ sf or ≥ 260 lf			Renovat		☐ Mini-E	Enclosure	Negative Pressure				
X			- Demont		☐ Glove	bag Procedure exempted (*) and	Non-Friable Proce	edure			
		Is Loca	tion						Abate		nt
Location	n of	Norma Used Sol			Description of	f		-	Ту	pe	Н
Asbestos-Containing TO BE AB		Maintena	ance/		tos Containing Mat	terial (ACM)	Amount	-		En	ш
IN Faci	lity	Custoo Staff		(i.e.,	thermal systems i surfacing, VAT,	or	(Specify SF or LF)	Kemova	Repair	Encapsulate	Enclosure
(13)		(12)		<	other miscellaned	ous)	500 VORUME \$	oval	air	sulat	sure
		Yes No	N/A	^						e	.
Koof TOP.			IVI	PAR	ADITI H	achience	GONS F	. 1	į į		
				-	7 / / 2	7773	1000		+		
							1000				
Name of Registered Wast	e Hauler	NJDEP I	Waste Haule	er	Cubic Yards of	Name of Regist	tered Landfill				
Chiampion	Disavest	4-71	3766		Waste	Clen	17/5				
City, State	13/19/20	1 / 1	1000	-+	Disposal Date	City, State	14000	A	A 172-411		-
5900 5	SYLOW R	Lud.			7-2-18	MORRE	Sville	Pa-	-		
Completed by	Title /				Signature	5000	1 10	Date			\top
DAVE DEMUEL	men IRe	5.	m for!		W.g.	Lond	Alla !	6-19	1-1	15	



PAIN

Date of Notification (1	1)			Name	of Building	Owner	Operator (2)								
06/22//2018							of Educat		3	Check No.	1148				
Agencies Notified	Type Notification Initial				Address High Str	eet		Edition		EC	FI	7	//	F	
☑ DEP ☑ DOL	☐ Amendment : Emergency (tate, Zip C Ridge, Ne		y 07028		閣		The second second second				Callwalle
DOH DCA	justification) □ Cancellation				of Contact Caprio	·		1		Telephone N 973-429-83	lumbër 300	20	18	- I	U
				FAC	ILITY INF	ORMATI	ON				····			+	
Name of Facility Whe Ridgewood Avenue	re Abatement is Takir School	ng Place ((3)				Type of F	Facility (4)		ASBESTO LIC	S CC		ROL	. &	
Street Address 235 Ridgewood Av	е						□ Sub	ool (K-12) chapter 8 (O r (i.e. private			dings,	home	es, e	tc.)	Substantia Diazza
City (5) Glen Ridge, New Je	ersey 07028				***************************************		Square F 10,000	eet	114 8	f of Floors		Bldg 50+	, Ag	е	
County (6) Essex					Code (7) USE ONL)	0	Current L	Jse (Prior if t Ed		emolished) nal Facility					
Name of Monitoring F T & M Associates	irm Hired by Building	Owner (8)	ASC	M No.			Abatement C rporation	ontrac	tor (9)					
Street Address 40 Monmouth Park	Highway, Suite 2						Street Add 606 McB	The state of the s							
City, State, Zip Code West Long Branch,	New Jersey 07764	1	******	_				e, Zip Code id Park, Ne	w Jers	sey					
Project Manager for M Kevin Burns	Ionitoring Firm	***************************************		Telepho 732-67	one No 76-4000		Telephone 973-225-			License 01104	No.				
Start Date (10) 07/05/2018								OSHA Monito onmental L		tories, LLC	;				
	Occupancy Status During Abatement (Check Only One)						Street Add	dress ute 22 Wes	t			_			
☐ Abatement Perfor	med Outside of Norm	al Facility	Hours	3		or discussion	City, State Union, N	e, Zip Code J 07083				-			
Scope of Work (Check	(All That Apply)									······································		***************************************			
≥3 sf or ≥3 If □≥160 sf or ≥260 If			Renov Demol					Full Containr Mini-Enclosu Glove Bag P Von-Exempte	ire rocedi	ire / Limited	Conta	inme		Tent	
		1	s Loca Norma		The state of the s					Amount (Specify		Ab	aten Type		
Locati Asbestos-Containi TO BE A	ng Material (ACM)	Use	ed Sol	ely by		estos Cor	escription of ntaining Mar al systems in	terial (ACM)		SF of LF)					m
In Fa	cility	Cus	todial (12)	Staff?	(1.	surf	acing, VAT, miscellane	or			MANAGEMENT STREET	Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A								-		ate	e e
Basement; Girl's To	oilet Room		X		4		ed aircell e fitting ir			52-75	LF	Х			
Basement; Boy's To	Basement; Boy's Toilet Room X						ed aircell e fitting ir			18-40 L	F.	X			
					madider	<u> </u>	7 1111111111111111111111111111111111111	isdiation .				1			
lame of Registered Waste Hauler			10.00	NJDEP W Hauler ID 18724		Cubic of Was			9 E	stered Landf	ill				
City, State							al Dayé	Fairles City, Sta	185 55557/01	dfill					
Woodland Park, New Completed by	w Jersey	Title				07/19/		Morgist			Date				
Adriana Olejarova			esider	nt 			100	70	dol		06/22	/201	8		
ASB-41 (R-06-08)	B-41 (R-06-08)					1	* Do not us	se this form for	or asb	estos licensu	ıre exe	mpte	ed ac	tiviti	es.

nocal

Date of Notification (1 06/22/2018)			Name of South I	f Building Owner/0 Brunswick Board	Operator (d of Educ	2) cation	Check No. 11	37			
Agencies Notified	Type Notification			17.00	ddress utive Drive ate, Zip Code		77.0000	ECEI	W II	3	1 00	T. Land
☑ DEP ☑ DOL	Amended Amendment#	2_		South I	Brunswick, New	Jersey 0			U L	-		
⊠ DOH	☐ Emergency (ir justification) ☐ Cancellation	ncluding			f Contact Pawlowski			Telephone Numb 732-297/7800/	er ()18	the contraction of		
☑ DCA	□ Cancellation				LITY INFORMATI	ON	Ind took o			l be		
Name of Facility Whe Dayton School	re Abatement is Takir	ig Place (3))	170		Туре о	f Facility (4) A	SBESTOS CONT		&		
Street Address 310 Georges Road						□ St	bchapter 8 (Other ner (i.e. private & co	than K-12)	the section of	es, e	tc.)	
City (5) Dayton, New Jerse	y 08852					Square 50,000		# of Floors 2	Bldg 50+	g. Ag	е	
County (6) Middlesex					Code (7) USE ONLY)	Curren	t Use (Prior if being School					
Name of Monitoring F Briggs Associates	irm Hired by Building	Owner (8)		ASCN	Л No.		f Abatement Contr Corporation	actor (9)				
Street Address 3 Crosswicks Stree	et .					STORY OF THE PARTY	Address Bride Ave					
City, State, Zip Code Bordentown, New J	lersey 08505		×		City, St Woodl	ate, Zip Code and Park, New Je	ersey					
Project Manager for M Michael Hoodak					ne No 8-5520	Telepho 973-22	one No. 25-8400	License No. 01104	8			
Start Date (10) 06/26/2018	tart Date (10) Scheduled				Date (11)		of OSHA Monitor vironmental Labo	oratories, LLC				
Occupancy Status Du	iring Abatement (Che	ck Only On	e)			Street A	Address Route 22 West					
□ Facility Closed/V □ Abatement Perfor ☑ Other – Describe	acated During Entire I rmed Outside of Norm : _7am-3:30pm _ I	al Facility I	Hours	nent		City, St	ate, Zip Code NJ 07083					
Scope of Work (Chec	k All That Apply)											
☐ ≥3 sf or ≥3 lf ☑ ≥160 sf or ≥260 lf			lenova emoli				Mini-Enclosure Glove Bag Proc	nt with Negative Pro edure / Limited Co *) and Non-Friable	ntainm	ent &	≩Ten	t
		le	Loca	tion				Amount		bate		
Asbestos-Contain TO BE	tion of sing Material (ACM) ABATED acility	Use Ma	Norma d Sole intena todial	ely by ence/ Staff?	Asbestos Co (i.e. therm	al system facing, V	Material (ACM) is insulation, AT, or	(Specify SF of LF)	Remova	Typ. Repair	Encapsulate	Enclosure
(*	13)		(12)		othe	r miscella	neous)		oval	air	sulate	sure
		Yes	No	N/A	Boiler Insulation	/F. II C		260 SF				
Boiler Room		X		-			W. C.	97019040160000	X		-	-
Boiler Room		X					Full Containment)		X	-		-
Boiler Room		X	iii		Pipe Insulation	•		120 LF	X			-
Storage Room					Pipe Insulation			20 LF	1		-	-
Pump Room					Pipe Insulation	A		40 LF			-	
Basement Hallway	•			X	Pipe Insulation			120 LF			-	
Kitchen					Pipe Insulation			40 LF			-	
Speech Room			Х		Pipe Insulation			30 LF			-	
Media Center			X		Pipe Insulation			50 LF		-	-	
Room 11			X	1	Pipe Insulation	(Gloveb	ag Procedure)	40 LF	X	1		

Name of Registered Waste Hauler Lilich Corporation	NJDEP Waste Hauler ID No. 18724	Cubic Yards of Waste 15	Name of Registered Landfill Fairless Landfill
City, State Woodland Park, New Jersey		Disposal Date 07/10/2018	City, State Morrisville, PA
Completed by Adriana Olejarova	Title President	Signature	Date 06/22/2018

ASB-41 (R-06-08)

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



					NJAC 8:60 an		T CATCOM PRODUCT	A Software Commencer Comme	7.7.	-1	1	
Date of Notification (1) 06/19/2018			5	Name of B South Br	Building Owner/C runswick Board	Operator (2) I of Education	ID)_E	CHECK No. 1/3			1	
Agencies Notified Ty	pe Notification			Street Add 4 Execut	dress ive Drive			JUN 272	NTO	Andrew Lands		
E EPA □ ☑ DEP ☑ ☑ DOL	Amended Amendment #_		C	City, State South Br	e, Zip Code runswick, New	Jersey 08852	The state of the s	engang Rosses Superage Superage States (Superage Superage)		The state of the s	2	
☑ DOH ☑ DCA □	justification)	cluding		Name of O David Pa	Contact wlowski		A.D.	elephone Numbe 32-297-7800 \	ract.	E.	10000	
			-	FACIL	ITY INFORMATI	ON						
Name of Facility Where A Dayton School	batement is Taking	g Place (3)				Type of Facility (☐ School (K-12 ☐ Subchapter	2) 8 (Other that	n K-12)				
Street Address 310 Georges Road						☐ Other (i.e. pr	rivate & comr	mercial buildings,			.)	
City (5) Monmouth Junction, N	lew Jersey 08852	2				Square Feet 50,000	2		Bldg. 50+	Age		
County (6) Middlesex				County C (STATE U	ode (7) SE ONLY)	Current Use (Pri	School	17,500				
Name of Monitoring Firm Briggs Associates	Hired by Building	Owner (8)		ASCM	No.	Name of Abatem Lilich Corporati	ent Contracti ion	or (9)				
Street Address 3 Crosswicks Street						Street Address 606 McBride A	ve					
City, State, Zip Code Bordentown, New Jers	entown, New Jersey 08505					City, State, Zip C Woodland Parl	code k, New Jers	ey				
Project Manager for Mon Michael Hoodak				Telephon 609-298	e No 3-5520	Telephone No. 973-225-8400		License No. 01104				
Start Date (10) 06/26/2018	art Date (10) Schedu				Date (11)	Name of OSHA Iris Environme	Monitor ntal Labora	tories, LLC				
Occupancy Status Durin	g Abatement (Che	ck Only One	e)			Street Address 2333 Route 22	2 West					
☐ Facility Closed/Vaca☐ Abatement Performs ☑ Other – Describe:	ad Outside of North	nal Facility F	lours	ent		City, State, Zip C Union, NJ 070	Code					
Scope of Work (Check A	All That Apply)					-					32	
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 		and the same of th	enova emolit			☐ Mini-E	Enclosure Bag Proced	with Negative Preduced In Nega	ntainm	ent & ure	Tent	
		la.	Loca	tion				Amount (Specify	Al	Type		
Locatio Asbestos-Containing TO BE AB In Fac (13)	g Material (ACM) BATED ility	Use Mai	lorma d Sole intena	ally ely by ance/ Staff?	(i.e. ther	Description of Containing Material mal systems insula urfacing, VAT, or ler miscellaneous)	(ACM) tion,	SF of LF)	Removal	Repair	Encapsulate	Linconia
		Yes	No	N/A		40					a	
Boiler Room		X				n (Full Containmer	A CONTRACTOR OF THE PARTY OF TH	260 SF				
Boiler Room		Х				Insulation (Full Cor		20 SF	X	-		
Boiler Room		X				n (Full Containm		120 LF				
Storage Room	X					on (Glovebag Prod		20 LF 40 LF		-	-	
Pump Room		X				on (Glovebag Pro		120 LF		-	-	-
Basement Hallway				X		on (Glovebag Pro		40 LF		-	-	+
Kitchen			X			on (Glovebag Pro		40 LF 30 LF		-	-	1
Speech Room			X			on (Glovebag Pro		30 LF		+	-	+
Media Center			X			on (Glovebag Pro		40 LF	-	+	-	+
Room 11			X		Pipe Insulation	on (Glovebag Pro	ceaure)	40 LF	^			1

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 12:120)
| Name of Building Owner/Operator (2)

			(PL	irsuant to	NJAC 8:60 an	0.12:120)	Contract on the Contract of th	The same of the sa	D 17 17			
Date of Notification (1) 06/19/2018			1	South Br	Building Owner/C runswick Board	of Education	(D)_E	Check No. 113	X// [Belleting and a
Agencies Notified T	ype Notification		3	Street Add	dress tive Drive			JUN 2 7 2	ndn.		-	No. of Chicago
国 EPA 日 区 DEP 区 DOL	Amended Amendment#		(City, State South Br	e, Zip Code runswick, New	Jersey 08852	1	et mantifest and sales are spaced for the design and the sales are specifically according to	018		rest of	The same of the sa
☑ DOH ☑ DCA ☐	justification)	cluding		Name of 0 David Pa	Contact awlowski			elephone Numbe 32-297-7800 \		Öt.	supre-	distance of the
				FACIL	ITY INFORMATI						_	-
Name of Facility Where A Dayton School	Abatement is Takin	g Place (3)				Type of Facility (☑ School (K-12 ☐ Subchapter	2)	n K-12)				
Street Address 310 Georges Road						☐ Other (i.e. pr	rivate & com	mercial buildings,				
City (5) Monmouth Junction, N	lew Jersey 0885	2				Square Feet 50,000	2	8	Bldg. 50+	Age		
County (6) Middlesex				County C (STATE U	ode (7) SE ONLY)	Current Use (Pr	School					- 3 - 3
Name of Monitoring Firm Briggs Associates	Hired by Building	Owner (8)		ASCM	No.	Name of Abatem Lilich Corporat		tor (9)				_
Street Address 3 Crosswicks Street						Street Address 606 McBride A	ve					
City, State, Zip Code Bordentown, New Jer	sey 08505					City, State, Zip C Woodland Par	code k, New Jers					
	ect Manager for Monitoring Firm hael Hoodak				ne No 8-5520	Telephone No. 973-225-8400		License No. 01104				
Start Date (10) 06/26/2018	chael Hoodak art Date (10) Scher				Date (11)	Name of OSHA Iris Environme	Monitor ntal Labora	atories, LLC				
Occupancy Status Durin	ng Abatement (Che	ck Only One)			Street Address 2333 Route 22	Meet					
☐ Facility Closed/Vac ☐ Abatement Perform ☑ Other – Describe:	ated During Entire	Period of Aba	atem ours	nent		City, State, Zip O Union, NJ 070	Code					_
Scope of Work (Check											100	
 ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf 			enova emoli			☐ Mini-B	Enclosure Bag Proced	with Negative Predure / Limited Col and Non-Friable	ntainm	ent & ure	Tent	
								Amount		paten		
	0	0.000	Loca orma			Description of		(Specify SF of LF)		Тур	3	Г
Location Asbestos-Containin TO BE All In Fact (13	g Material (ACM) BATED cility	Used Mair	Sol ntena	ely by ance/ Staff?	(i.e. ther	Containing Material mal systems insula urfacing, VAT, or er miscellaneous)	(ACM) tion,	2	Removal	Repair	Encapsulate	
	2005	Yes	No	N/A							O	1
Boiler Room		X				n (Full Containmer		260 SF		-		+
Boiler Room		X				Insulation (Full Cor		20 SF	X			-
Boiler Room	E	X			1	n (Full Containm		120 LF 20 LF			-	-
Storage Room		X				n (Glovebag Pro		20 LF 40 LF	2.55	-		1
Pump Room		X				n (Glovebag Pro		120 LF		-	+	-
Basement Hallway				X		on (Glovebag Pro		40 LF			-	
Kitchen			X			on (Glovebag Pro		30 LF	100		-	_
Speech Room			X			on (Glovebag Pro		50 LF		+	-	-
Media Center			X			on (Glovebag Pro		40 LF		+	+	
Room 11		1	X		Pipe Insulation	on (Glovebag Pro	cedure)	40 L	^			

Name of Registered Waste Hauler	NJDEP Wast Hauler ID No.		Name of Registered Landfill	
Lilich Corporation	18724	15	Fairless Landfill	
City, State Woodland Park, New Jersey		Disposal Date 07/10/2018	City, State Morrisville, PA	
Completed by Adriana Olejarova	Title President	Signature	Date 06/19/2018	

ASB-41 (R-06-08)

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

JUN 2 7 2018

ASSECTOS CONTROL &

CK3136			New Je	rsey - Notifi	ication of Asbestos	Abat	temer	ıt							
PA	UD)		(Purs	suant to N.J.A.C	C. 8:60-7 and 12:120-7)		70,000	n E	G	E II	W E	5 15			
Date of Notification (1) June 21, 2018					Name of Building Owner/Operator (2) Private										
Agencies Notified		Notificati	on Type		Street Address		-	111	1011	0 7 0		1111			
rigeriolog Hotillog			itial Not	ification	Street Address JUN 2 7 2018										
X EPA		The second second second second		ification	City, State, Zip Code										
DCA x DOL		☐ Eme	rgency (including	Pompton Plains, NJ ASBESTOS CONTROL &										
X DEP			fication)	S. (74)	Name of Contact										
x DOH		☐ Can	celled		Keith Devlin										
Name of Facility Miles At all		1: 51 (FACILITY IN	INFORMATION										
Name of Facility Where Abate Residence	ement is Ta	aking Place (<u>3)</u>		Type of Facility (4)										
					School (K-12) Subchapter 8 (other that	n K 12	Ň								
Street Address								uildinas	homes	etc.)					
					Other (i.e. private & commercial buildings, homes, etc.) Sq. Feet: Unknown # of Floors: 2 Bldg. Age: years										
<u>City (5)</u>	County (y Code (7)											
Pompton Plains	Morris		State	Use Only)	Current Use (prior if bein	ig dem	olished):							
Name of Monitoring Firm Hired			ASCM	The second secon	Name of Contractor (9)										
EnviroVision Const	ultants	inc.	000	79	CDEENIMOOD A DA	TEME	ENT CONSULTANTS, INC.								
Street Address					Street Address	I CIVIC	INIC	ONSU	LIANI	3, 1140	•				
20-21 Wagaraw Road	, Bldg #	# 35E			511 MAIN STREET										
City, State, Zip Code					City State, ZipCode										
Fairlawn, NJ 07410					Butler, NJ 07405										
Project Manager for Monitoring Fred Larson	g Firm	Telephone	6-9145		Telephone Number			Licen	se Numbe	<u>er</u>					
Freu Laison			973-492-0477			0084	10								
Scheduled Start Date (10)				on Date (11)	Name of OSHA Monitor										
August 7, 2018		August	9, 2018	3	EMSL inc.										
Occupancy Status During At					Street Address										
Facility Closed/Vacate					1056 Stelton Road										
Abatement Performed Describe	Outside	of Normal F	acility Hou	rs -	City, State, Zip Code										
Other - Describe:															
					Piscataway, NJ 08854										
Source of Work (Check all that	t apply)														
1						x Ful	l Conta	inment	with Neg	ative Pr	essure				
_ ≥ 3 sf or ≥ 3 lf				Renovation	i		i-Enclo								
$\square \ge 160 \text{ sf or } \ge 2$:60			Demolition		Hovebag Procedure Non-Exempted (*) and Non-Friable Proce									
Location of Asbestos-Containi	ng Is L	ocation Norm	ally Used	Description of As	bestos Containing Material	Non	-Exemp Amoun			-Friable ent Type		Jure			
Material (ACM) in Facility (13)	Sole	ely by Maint./			nal systems insulation, surfac	ing,	(Specif	y SF		Repair B		Enclose			
	YE	f? (12) S NO	NA	VAT, or other mis	scell.)		or LF)		Remove	Repail t	incap E	incluse			
Basement			X	TSI		-	3lf		X						
				Mechanical			50 sf		X						
Name of Reg. Waste Hauler		NJDEP W	aste Haule	r ID#	Cubic Yards of Waste:			Name	of Regist	ered Lar	ndfill				
See Hauler Below # 1 & 2	2	See Beld			5			Mead	dowfill L						
Hauler #1) Greenwood A	Abateme	nt Consul	tants, In	c Butler, NJ 0	7405	-	sal Da	<u>te</u>	2	city, State	e				
	NJ DEP # 12561 NY DEP # Hauler #2) Newark Carting, Inc. – Newark, NJ 04509, NJ DEP # 19551							August 9, 2018 Route 2, 1							
Completed by (Print or Type)		Title			Signature Date										
Marin Graure		Title Sr. PROJ	ECT MA	ANAGER	Marin Graure June 21, 2018										
					1										

	_		CATIO	N OF ASBESTO: t to NJAC 8:60 a	SABATE		DE	CE] []	V [M			
Date of Notification (1) 6-26-18			Name of	of Building Owner	Operator	r (2) IY CHARTI	RSCHO	OHN 2	7 20	112	The section of the se				
Agencies Notified De Notification	el x	1	Street A	Address VEST STATE		1		0011 2	1 61	710	in the second				
EPA Initial \(\textbf{X} \) Amended \(\textbf{X} \) DOL \(\textbf{X} \) Amendment #	<i>‡</i> 1		City, St	ate, Zip Code NTON, NJ 086		ASBESTOS CONTROL & LICENSING									
Emergency (i justification) DCA Emergency (i justification) Cancellation		_	Name o	of Contact /E SCH	10	Telephone Number						MARTINA P			
Cancellation				LITY INFORMA	TION		ь	10-584-8	500						
Name of Facility Where Abatement is Taking RECTORY BUILDING	Place (3	3)	FAC	ILITT INFORMA	TION	Type of Fac	ility (4)								
Street Address 201 ADELINE STREET						Subch	apter 8 (Oth (i.e. private			dings,	hom	es,			
City (5) TRENTON						Square Fee 4000	t # c	f Floors	Bldg. Age +/-50						
County (6) TRENTON	-0			Code (7) USE ONLY)		Current Use		ing demolis	shed)						
Name of Monitoring Firm Hired by Building O AET	wner (8)		ASC	M No.	of Abatemen	eatement Contractor (9)									
Street Address 28 N. PENNELL ROAD					Street	PPER ENVIRONMENTAL SERVICES, INC.									
City, State, Zip Code					City, S	1 FRALEY STREET State, Zip Code									
MEDIA, PA 19053 Project Manager for Monitoring Firm		1.00	PHILADELPHIA, PA 19137 Telephone No. License No.												
ANTHONY KEIR				91-0114		215-533-5155 011				State carrier.					
	Schedule 7-15-1		pletion	letion Date (11) Name of OSHA Monitor AET											
Occupancy Status During Abatement (Check	- 5	7.5	- /2		L ROAD										
Facility Closed/Vacated During Entire Po Abatement Performed Outside of Norma Other – Describe:	eriod of A	Hours	ent		City, S	state, Zip Cod	ate, Zip Code IA, PA 19053								
Scope of Work (Check All That Apply)					IVIEL	ЛА, РА 190	J53								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	enova emoliti				Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
	77.53	Location							Abatement Type						
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai Cust	d Solel intenar odial S (12)	Asbestos Containing M			Material (ACM s insulation, T, or	(5	Amount (Specify SF or LF)		Repair	Encapsulate	Enclosure			
3RD FLOOR	Yes	No	N/A	DBYMALL	OINT	COMPOUN	D 0.	20005	\		Ф				
3RD FLOOR			X	DRYWALL/			- '	300SF	X						
			X	TRAIN	SITE CE	EILING	_	32 SF	X						
3RD FLOOR			X		ACPI		3	50 LF	X						
Name of Registered Waste Hauler	110	JDEP W		Yards	Nam	e of Registe	ered Landfil	1							
SERVICE TRANSPORT	H	auler ID	No. of Wa	aste	MINERVA LANDFILL										
City, State NEW CASTLE, DE				Dispo	osal Date		State SON, OH								
Completed by JENNIFER NIVEN	Title DIR.	OF O	PERA	TIONS	Signature	- 2		D:	ate 2	lo.	12	P			

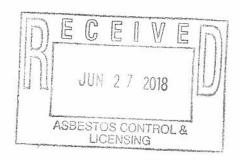
PAID

STATE OF NEW JERSEY NOTIFICATION OF ASBESTOS ABATEMENT (PURSUANT TO NJAC 8:60-7 AND 12:120-7

Check # 3144

Date of Notification	(1)			Part of	CONTRACT DESCRIPTION OF	Name of Building Owner / Operator (2)										
06 /07	/18					Mondelez International										
/	/					Street Address										
Agencies Notified	Type of N					2211 Route 208 North										
☑ EPA DEP		Initia	al ended			City, State, Zip Code										
☐ DOH				n6 44	_1_	THE RESERVE OF THE PERSON NAMED IN	Fairlawn, New Jersey, 07410									
☑ DOL	lп				' / justification	PETER VI	[1]	1	Telephone Number 201-794-4000 0 7 0010							
			cellati		Juotinoution		LLTITO			JUN 2	7 2018	Ci yes Sin				
					F/	ACILITY IN	FORMATION	į la	low]		and specifically several	İ				
											and adjusting the state of the state of	أحسما				
Name of Facility Wh		ent is	s Taki	ng F	Place (3)		Type of Facility (4)	į.	ASB	ESTOS	CONTHULA					
Mondelez Internationa	al						Cabasi/	(42)		LICEN	ENSING					
Street Address			_	-		-	School (ter 8 (Other	than V 1							
2211 Route 208								e., private &								
								omes, etc.)	Oilinioi Oil	••						
City (5)	County (6)			County Code ((7)	Square Feet	# Of Floor	'S	Buildin	g Age					
Fairlawn	Bergen						1,000,000		3							
		-					Current Use (Prior	f being dem	olished)		40 +	40 +				
Name of Manitorina	Firm Illiand	h D	Ide O		- (0)	IACON NO	Bakery									
Name of Monitoring	Firm Hirea	by B	iag. U	wne	er (8)	ASCM NO	1									
AET							NORTHSTAR CONT	RACTING C	ROUP IN	C						
Street Address	M			-			Street Address	101011110	, 1001 , 114	0.	***************************************					
907 Doolittle Drive																
City, State, Zip Code							32 Williams Parkway									
Bridgewater, NJ 0880							City, State, Zip Cod	е								
Project Mngr. For M	onitoring F	irm			Telephone Nu	mber										
Eric Houseknecth	(40)	IC-h-	-d C-		908-218-1108	41	East Hanover, NJ 07	936	1							
Sheduled Start Date 06 // 25	/ 18	Sche	06	mpi	etetion Date (1	19	Telephone Number License Number									
1 -55 // - 25	/	-	-00	-/	/		973-884-8682 00860									
Occupancy Status D	uring Abate	emen	t (Che	ck (Only 1)		Name of OSHA Mor	itor			0000					
☐ Facility C	losed/Vaca	ted D	uring	Enti	ire Period of		NORTHSTAR CONT	RACTING G	ROUP, IN	C.						
Abatemer		3.2					Street Address									
	it Performe escribe:			of N	ormal Facility		22 Milliama Dadavav									
	escribe:			.300	DNA.		32 Williams Parkway City, State, Zip Code									
Other - De	solibe	1.007	- IVI - J	,501	- IVI		East Hanover, NJ 07936									
Scope of Work (Che	ck All That	Apply	y)			-						MUNICIPAL PROPERTY.				
						0.000										
☐ Demolitio	552		4		Renovation		✓ Full Containment with Negative Pressure									
☐ ≥3sf or_≥3 ✓ ≥160 sf or							Mini - Enclosure	•								
2100 \$1 01	≥200 II						Glovebag Procedur Non-Exempted (*) a		hle Proce	dura						
						_	Non Exempted () e	110 11011-1 110	ible i ioce	uuie						
Location o	f		Is			Descript	ion of		Abatement Type							
Asbestos Conta	aining	17 (27)	ocatio		As	bestos - C			R		E	E				
TO BE ABAT	ED	A 90955	ormali	у		Material		Amount	E	R	N	N				
TO BE ABAT in Facility			Used Solely			e., therma	r systems facing, VAT,	(Specify SF or LF)	M	E P	C	C				
(13)		1	y Main	_			ellaneous)	SF OF LF)	O V	A	A	L				
(1.5)			nance	200	0	011101 111100	chancous,		A	lî	s	s				
			ıstodia						L	R	Ū	U				
		-	aff (12	the street owner, and							L	R				
OND ELOOP SUEL	7	YES	NON	the same of	8811=											
2ND FLOOR OVEN#		1-			ROLLER GASH	KETS		80 SF	V							
2ND FLOOR OVEN#		-	✓✓✓	+	TRANSITE GASKET			100 SF	V		1 4	+	<u> </u>			
2ND FLOOR OVEN#		H	17	-	PIPE & FITTIN	G		4,000 SF 60 LF	SF 2 D							
Name of Registered			1-1-1-		NJDEP Waste		Name of Registered									
NEWARK CARTING					Hauler ID No.	Yards	GROWS									
NORTHSTAR CONTR	RACTING G	ROU	P, INC		4509	of Waste										
City, State						Disposal	City. State									
NEWARK, NJ						Date	Morrisville, PA 1906	7								
EAST HANOVER, NJ	The state of the s				Tidle		Isida Maria									
Completed by (Print	or type)				Title		Signature Date									
Steve Stiles					Project Manage	er	1 X	eigh	LL		- DE	3/26/1	18			
ASB-41	- Carlotte de la companya del companya de la companya del companya de la companya	dansahi ng			, , , , , , , , , ,	The Later of the L		-			1 00		-			

Location of	ls				Description of	Abateme	ent Type			
Asbestos Containing		Lo	cati	on	Asbestos - Containing		R		E	E
		Normally			Material (ACM)	Amount	E	R	N	N
TO BE ABATED	Used		d	(I.e., thermal systems	(Specify	M	E	c	С	
in Facility	1	S	ole	ly	insulation, surfacing, VAT,	SF or LF)	0	P	A	L
(13)		by	Ma	in-	or other miscellaneous)		V	A	P	0
		tenance/ Custodial Staff (12)		ce/			Α	1	s	s
	1			dial	1		L	R	U	U
				12)				1	L	R
	Y	ES	NO	N/A						
MEZZANINE	T	П	1		PIPE & FITTING	4 LF	7			
DC WAREHOUSE	T	П	J		PIPE & FITTING	6 LF	7		TIT	
1ST FLOOR BAKERY	TI	I	1		PIPE & FITTING	5 SF		1		
	TL	П								
	IL									
	T									



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MAY 11

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 5:16) Name of Building Owner/Operator (2) 06 26 18 General Growth Properties Agencies Notified Type Notification Street Address **⊠** EPA ☐ Initial 585 From Road **⊠** DOLWD City, State, Zip Code **⊠** DHSS Amendment #3 ASBESTOS CONTROL & Paramus, NJ 07652 ☐ DCA ☐ Emergency (including (NJAC 5:23-8) Name of Contact justification) Telephone Number Cancellation Kelly Webb 312-960-5000 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Sears Departement Store School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i.e., private and commercial buildings, 585 Form Road homes, etc.) City (5) Square Feet # of Floors Bldg. Age Paramus, NJ 07652 10,000 2 45 County (6) Current Use (Prior if being demolished) County Code (7)(STATE USE ONLY) Bergen Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Hillmann Consulting 62252 JVN Restoration Inc. Street Address Street Address 1600 Route 22 East 47 Foster Road City, State, Zip Code City, State, Zip Code Union NJ 07083 Staten Island NY 10309 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Tammy Lomax 908-577-6171 718-605-6256 00774 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 06 / 29 / 18 10 / 31 / 18 **Testor Tech** Occupancy Status During Abatement (Check only one) Street Address □ Facility Closed/Vacated During Entire Period of Abatement 10 59 Jackson Avenue Abatement Performed Outside of Normal Facility Hours - Describe City, State, Zip Code Time of Abatement: _AM-____PM/7;00PM-7:00 LIC NY 11101 Scope of Work (Check all that apply) ≥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 Encapsulate Asbestos-Containing Material (ACM) Removal Enclosure 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 First & Second Throughout VAT 16,500 SF X First Floor Throughout Styrofoam Glue 7,000 SF П Name of Registered Waste Hauler NJDEP Waste Cubic Yards of Name of Registered Landfill Hauler ID No. Waste **Newark Carting IESI** NJ-566 100 City, State Disposal Date City, State Newark, NJ 05/31 /18 Bethlehem,PA Completed By (Print or Type) Signature Date Ralph Barnhardt Project Manager ASB-41

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

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

			ICATIO	N OF ASBESTOS t to NJAC 8:60 ar	ABATE			CE		\mathbb{W}	E	-		
Date of Notification (1) 06/22/18			Name of Building Owner/Operator (2) Phillips 66 Domestic Trades Terminal							0010	and the second s			
Agencies Notified Type Notification			Street Address											
X EPA Initial		_	Route 1 North											
DEP Amended Amendment #				ate, Zip Code			A	ASBESTUS CONTROL & LICENSING						
Emergency (i				en, NJ 07036 of Contact			11 - A 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
DOH justification) DCA Cancellation			Joe C	Charles and a series			Telephone Number 1-832-740-2596							
				ILITY INFORMAT	ION		- 1					-		
Name of Facility Where Abatement is Taking		3)				Type of Facilit	y (4)							
Phillips 66 Domestic Trades Termir	nal					School (H								
Street Address Route 1 North								er than K-12 & commerci		dinas	home	98		
City (5)						etc.)				2000				
Linden						Square Feet 200	0 0	f Floors		Bldg. Age 0				
County (6)		T	County	Code (7)		Current Use (F		na demolish	Ι,					
Union			(STATE	USE ONLY)		Transfer Pi		9	/					
Name of Monitoring Firm Hired by Building O	wner (8)	ASCI	M No.	ontractor (9)									
Street Address						et Address								
					2400	00 Main Street Extension Suite 10								
City, State, Zip Code					10.000	State, Zip Code								
Project Manager for Monitoring Firm			Talaaba	NI-		ayreville, NJ 08872 ephone No. License No.								
Project Manager for Monitoring Pilm			Telepho	one No.		525-0100		License No 00750).					
Start Date (10)	ed Com	pletion	Date (11)	1	of OSHA Monito	or	00730							
	07/19		2. 1 (100 (100 (100 (100 (100 (100 (100 (1		100000	r Environmer								
Occupancy Status-During Abatement (Check	Only O	ne)				45								
Facility Closed/Vacated During Entire Pe	Abatem													
Abatement Performed Outside of Norma Other – Describe: Encapsulation of acm	y Hours rack	city, State, Zip Code Brick, NJ 08724												
Scope of Work (Check All That Apply)														
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	-	Renova Demoliti			Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure									
	Is	Location	on						Abatement					
Location of		Normall ed Solel			scription				Type			\dashv		
Asbestos-Containing Material (ACM) TO BE ABATED	Ma	intenar todial S	ice/	Asbestos Con (i.e. thermal			10000	mount specify	Z.		Enc	m		
In Facility (13)	Cus	(12)	lanr		cing, VA		SF	or LF)	Remova	Repair	Encapsulate	Enclosure		
13.27	Yes	No	N/A	outer (moderan	6043)			/al	7	ılate	ure		
Transfer Pipe	X	110	18/73	Dino	Insula	tion	00	200 LF			\ <u>'</u>	\dashv		
Transfer i pe			ripe	irisuia	liori	20	JU LF			Х				
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							-							
Name of Pogistared Wests Usada			IDED !!	lasta I a v	V- 1	110	10							
Name of Registered Waste Hauler	50000	JDEP W auler ID		Yards ste	Name of Registered Landfill									
Freehold Cartage	15	5939	60			ss Land	IIII							
City, State Freehold NJ				Dispos 07/19	sal Date 9/18	City Sta Morris	_{ate} sville, P	A						
Completed by	Title	in the second second		9	ignature	All Ill	11	Dat						
Dan Baptista Safety Agent								06	/22/	18				

Do not use this form for asbestos licensure exempted activities.