mo 24958765765
PAID

State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT

			F	rint	101	m
-	-	-	STATE OF THE OWNER, TH	and a section of the	DESCRIPTION	-
 -	17	17	Towns.	-		

/			(Pu	ırsuant t	o NJAC	8:60 and 12:1:	20)	12						
Date of Notification (1) 06/26/2018					Building williams	Owner/Operato	or (2)			JUN 2	9 2	018		U
Agencies Notified Type	e Notification			Street Ac	dress									
X EPA X	Initial		1						ASB	ESTOS	CON	TROL	. &	
X DEP	Amended				te, Zip Co				-,,,,,,,	LICE	NSIN	G		-
X DOL	Amendment Emergency				_	IJ,07017								
ĭ DOH	justification) Cancellation	š	1	Name of Jame \	Contact Williams	3			Tele	nhone Ni	nur, st			
DCA	Cancellation					DRMATION			1					
Name of Facility Where Abate	ment is Takin	g Place (3)	·	PAGIL	all I HALV	JAMES I I ON	Тур	oe of Facility (4	1)					
Private							П	School (K-12	2)					
Street Address							×	Subchapter Other (i.e. pretc.)	8 (Other	r than K- commer	12) cial bui	ldings,	home	s,
City (5) East Orange							Sqt N/	uare Feet	# of N/A	Floors		Bldg. A N/A	ge	
County (6) Essex				County C	ode (7)			rrent Use (Prio		g demoli	shed)			
Name of Monitoring Firm Hired N/A	d by Building	Owner (8)		ASCM	No.			batement Con BATEMENT		9)				
Street Address							et Add Fran	ress klin Street						
City, State, Zip Code								, Zip Code n,NJ,07524						
Project Manager for Monitoring	g Firm		1	Telephor	ne No.		phone 3-333	No. 3-5144		License 01274				
Start Date (10) 07/05/2018		Schedule 07/06/2		npletion [Date (11)			SHA Monitor BATEMENT	LLC					
Occupancy Status During Aba	tement (Ched	k Only On	e)				et Add					2-01-20		
Facility Closed/Vacated D	During Entire	Period of A	batem	nent		89	FRA	NKLIN STR	EET					
Abatement Performed Out Other – Describe: OCCO	utside of Norr OPIE	nal Facility	Hours	5				, Zip Code n,NJ,07524	1					
Scope of Work (Check All Tha	t Apply)													
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		CONTRACTOR .	enova emolit				××	Full Containme Mini-Enclosure Glovebag Proc	edure	-				
								Non-Exempted	(*) and	Non-Fri	able Pr			
			Locati										ement pe	Ĉ.
Location of	1-1/4011		lormal d Sole			Descripti		-1-1 (A O T				T .,		
Asbestos-Containing Mate TO BE ABATED		Mai	ntenar	nce/		tos Containing thermal syste				nount pecify	D D	_	Enc	П
In Facility	•3	Cust	odial 9 (12)	Staff?	(surfacing, \	/AT, o	r		or LF)	Remova	Repair	aps	CIO
(13)		-	(12)			other miscell	laneou	is)			val	ai-	Encapsulate	Enclosure
		Yes	No	N/A									O	
Basement			Х			PIPE INSU	LATIC	NC	8	5LF	X			
	United the second													
			1	UDEE ::	14	Lower		I No.	Da-1-1	I 1	EII			
Name of Desire 1347 - 13	TOUR			IJDEP W lauler ID		of Waste N/A	5	Name of I			1111			
Name of Registered Waste Ha EHW ABATEMENT LLC				03095		1 477 1		1						
						Disposal Da TBD	ite	City, State Bronx ,	e NY					



Date of Notification (1) 06/26/2018	1				Building (Gronpor		Operator	(2)	111		11181 0	- 20	10		
Agencies Notified	Type Notification		5	Street A	ddress					U	UN 2	9 24	10	-	1
EPA DEP DOL DOL	Initial Amended Amendment Emergency justification)	(including	-	Emers	te, Zip Coson,NJ,0						ESTOS LICE phone N	NSING	ROL	&	
DOH DCA	Cancellation				d Bueti	DESAT	ION			<u> </u>					
Name of Facility Where Private	Abatement is Takir	g Place (3)		FACI	LITY INFO	RIVIA	ION	Type of	f Facility (4)	1					
Street Address								St. Ot etc		(Othe			dings,	home	≥s,
City (5) Emerson								Square N/A	Feet	# of N/A	Floors		Bldg. A N/A	ge	
County (6) Bergen					Code (7) ISE ONLY)			Current Priva	t Use (Prior te house	if bein	g demol	ished)			
Name of Monitoring Firm	m Hired by Building	Owner (8)		ASCN	No.		Name EHV	of Abate V ABAT	ment Contr EMENT	actor ((9)	7,0-20,00			
Street Address				L				Address ranklin	Street					-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	
City, State, Zip Code								state, Zip erson, N	J,07524						
Project Manager for Mo	nitoring Firm		1	Γelephoι	ne No.			one No.		License No.					
Start Date (10) 07/06/2018		Scheduled 07/07/20	Com)18	pletion I	Date (11)				A Monitor EMENT	LLC					
Occupancy Status Durin Facility Closed/Vac Abatement Perform Other – Describe:	cated During Entire	Period of Ab	atem	ent			89 F	State, Zip	LIN STRI	EET					
Scope of Work (Check /	All That Apply)						1								
≥3 sf or ≥3 if ≥160 sf or ≥260 if		E-Territorion	novat					Mini- Glov	Containmer Enclosure ebag Proce Exempted	edure					
		ls Lo	ocatio	on				2 14011	Lxempled	() and	114011-1	lable I II	Abat	ement	t
Locatio Asbestos-Containing TO BE AB In Fac (13)	g Material (ACM) BATED ility	Used Maint Custoo	tenan	y by ice/		tos Cor therma surfa		/laterial (s insulati \T, or		(S	nount pecify or LF)	Removal	Repair	Encapsulate	Enclosure
Basem	ent		Х			VAT	T/MAS	TIC		35	OSF	X			
Name of Registered Wa		1	Ha	JDEP Wauler ID 03095		of Wa			Name of R			lfill '			
City, State Paterson,NJ		***************************************				Dispo	sal Date		City, State Bronx ,	۷Y					
Completed by Victor Espíritu	Acceptance of the Control of the Con	Title Projec	t Ma	anager			Signatur	e ell	I W	Mr		Date 06/26	/2018	3	

CK# 9046

					1 12 6	15 11 U 11		111		
Date of Notification (1)		PSE&	of Building Owner/0 .G	Operator (2)	3	0010	The second secon			
Agencies Notified Type Notification			Address HADLEY ROAI		III JUN	2 9 2018				
EPA Initial DEP Amended Amendment	#		ate, Zip Code TH PLAINFIELD	D, NJ 0708	0 ASBEST	TUS CONTRO	. &			
Emergency (including	Name o	of Contact			Telephone Nur	-			
DCA Justification			JOHN SA	HUBER	7	740.		6-0	0.5	37
			ILITY INFORMATI		,	1,,,,		-11: 15:	-	,
Name of Facility Where Abatement is Taking	g Place (3)			Тур	e of Facility (4) School (K-12)					
Street Address 95 Willow S	T			×	Subchapter 8 Other (i.e. pri	(Other than K-12 vate & commerci		dings,	home	es,
City (5)	00-0			4 100 2000	etc.) Jare Feet	# of Floors	1 200	Bldg. A		
EAST Ruth 6	RI-OR	County	Code (7)		x 600	if boing demolish		15	YR	.5,
BERGEN		(STATE	USE ONLY)	Cur		if being demolish てでH S		7:	on)
Name of Monitoring Firm Hired by Building C ENVIRONMENTAL TACTICS	Owner (8)	ASCN 004			patement Contr	actor (9) OF AMERICA			1211183	
Street Address 64 BROAD STREET				Street Addr 396 WHI	ess TEHEAD A\	√E.				
City, State, Zip Code MATAWAN, NJ 07747				City, State,	Zip Code RIVER, NJ (10001				
Project Manager for Monitoring Firm		Telepho		Telephone	No.	License N	0.			
TOM GEIGER Start Date (10)	Scheduled C		90-2217 Date (11)	732-432- Name of O	-8350 SHA Monitor	01111				
Occupancy Status During Abatement (Check	7	/11/.				OF AMERICA	A INC) .		
Facility Closed/Vacated During Entire F	858 10	ement		Street Addr 396 WHI	_{ess} TEHEAD A\	/E.				
Abatement Performed Outside of Norm Other – Describe:	al Facility Hou	urs	ly	City, State,	Zip Code RIVER, NJ (18882				
Scope of Work (Check All That Apply)			/	000111	1111 - 111, 140	30002				
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		vation		H M	lini-Enclosure Hovebag Proce					
					on-Exempled (*) and Non-Friab	T PIO		ement	
Logation of	ls Loc Norm								pe	
Location of Asbestos-Containing Material (ACM)	Used So	olely by	Asbestos Cont	scription of	al (ACM)	Amount				
TO BE ABATED In Facility (13)	Mainter Custodia (12	al Staff?	(i.e. thermal surface	systems insucing, VAT, or niscellaneous	ulation,	(Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes No	o N/A							te	
CONTROL HOUSE	>	<	TRANS!TE	Floor	BOARDS	50 SF	X			
Name of Registered Waste Hauler		NJDEP W	/aste Cubic	Yards	Name of Re	egistered Landfill				
WASTE MANAGEMENT		Hauler ID 1125		ste	FAIRLES					
City, State ELIZABETH, NJ			Dispos	BDate	City, State MORRIS	VILLE, PA				
Completed by	Title		Is	ignature /	,		te /	/	,	
CAROL RÁIMO	OFFICE	MGR.		(a	ral Xa	ema)	te 6/	18	/18	-



FAID		(Pu	rsuant to	NJAC 8:6	60 and	12:120))	T	P	0 E	W II	7 [3 [7
Date of Notification (1) 06/27/2018				Building Ov				Club	I I	b E	11 12			
Agencies Notified Type Notification EPA Initial		- 4	Street Ad 1 Cher	dress ry Hill Ln						JUN 2	9 20	18		2
DEP Amended Amendment #_			85.0	e, Zip Code dge, NJ (,			ASB	ESTOS	CONT	ROL	. &	
Emergency (inc justification) DCA justification Cancellation	luding		Name of Eric Pri						Telepl	none Num 727-14	ber		and the second second	
			FACIL	ITY INFOR	RMATIC	N							Louis	
Name of Facility Where Abatement is Taking P Glenwood Apartment	lace (3)							of Facility (4 School (K-12	?)					
Street Address 2-6 Boxwood Mall							×	Subchapter 8 Other (i.e. pr etc.)				ngs, l	nomes	۶,
City (5) OldBridge								re Feet	# of F	loors	Blo 60	dg. Ag)+	je	
County (6) Middlesex			County C	Code (7) ISE ONLY)				ent Use (Prio artment	r if being	demolish	ed)			
Name of Monitoring Firm Hired by Building Ow N/A	ner (8)		ASCM	No.			of Aba	atement Conteral Consti						
Street Address			<u> </u>			Street	Addre				18			
City, State, Zip Code	G-2-7[47] - 2.0					City, S	State, Z	Zip Code J 07012	0,11110					
Project Manager for Monitoring Firm			Telephor	ne No.	-	Teleph			[1	License N	0.			
,				22-23-25-22 				0089		00693				
	chedule)7/14/2		npletion [Date (11)				HA Monitor eral Const	ruction	, Inc.				
Occupancy Status During Abatement (Check (Only One	e)				Street			o DME	Suito 1	110			
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Normal Other – Describe:	riod of A Facility	baten	nent S			City, S	State, 2	ton Avenu Zip Code	e, FIVIC	Suite 2	.10			
						Clift	on, N	IJ 07012						
Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	and the same of th	enova emolit				>	M K G	ull Containme ini-Enclosure lovebag Proc on-Exempted	edure	S			e	
	Is	Locat	ion										ement pe	
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	intena	ely by ance/ Staff?		os Cont thermal surfa	scription taining I system cing, VA miscella	Materia ns insu AT, or		(Sp	nount pecify or LF)	Remova	Repair	Encapsulate	Enclosure
(13)	Yes	No	N/A								<u>a</u>	,	ate	-G
2 A-D Boxwood Mall-Crawl space		Х		Pi	pe/Ell	bow In	sulat	ion	18	0 LF	K			
4 A-D Boxwood Mall-Crawl space		Х		Pi	pe/Ell	bow In	sulat	tion		0 LF	X			
6 A-D Boxwood Mall-Crawl space		X		Pi	pe/Ell	bow In	rsulat	tion	17	0 LF	X			
Name of Registered Waste Hauler			NJDEP V	Vaste	Cubic	Yards		Name of	Register	red Landfi	II			
Service Transport Group		1	Hauler ID	MARIN DAY 19	of Wa 8 CY	aste /		Minery	a Land					
City, State New Castle, DE 19720						sal Dat 4/2018		City, Sta Wayne		OH 44	388			
Completed by Milan Njezic	Title Vice	Pres	sident			Signatu	ire	LA	t.		ate 06/27/	2018	3	

CK 25616



Date of Notification (1)				Nama of	Building (Dunor!	Inorotor	- (2)		JIF						₩
6/28/2	2018			Name of	bullaing (s Medical	Cent	er .IIII	N 2	a	201	3	11
Agencies Notified	Type Notification			Street A	ddress	3	94 Old	1 Sho	rts Hills Ro	4	001	-	0			
EPA DEP	X Initial Amended		-	City, Sta	te, Zip Co		0+ OIC		rto rimo r		ASBES	TOS	CC	NTF	OL	-1 X
X DOL	Amendment #		_			Li	vingst	on, N	J 07078		ASDLO	ICE	VSI	NG		
Ĭ DOH	justification)	icidaling			Contact Ron Carv	valho				1 330	ephone N 908) 20					
☐ DCA	Cancellation				LITY INFO		ON			(8	200) 200	0-30				
Name of Facility Where A)					Туре	of Facility (4	1)						
Street Address	t. Barnabas Med	ılcai							School (K-12 Subchapter		er than K	-12)				
94 0	old Short Hills R	d.						×	Other (i.e. pretc.)	rivate 8	& comme					es,
City (5)	gston, NJ 0707	8							re Feet 00000	# 01	Floors 5			dg. A 85+,		
County (6)	ssex			County (Code (7) JSE ONLY)	(<u>*</u>		Curre	ent Use (Prio Hosp		ng demol	lished)			
Name of Monitoring Firm Env	Hired by Building O rironmental Tact			ASCN	1 No.				atement Con Environme			s, Inc				
Street Address	64 Broad Street							Addre								
City, State, Zip Code		1000000					100000 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		Zip Code		-11-11-11					
	atawan, NJ 07	748		T 1 1					, NJ 0850	1		. Ma				
Project Manager for Moni Tom Geiger					90-2219		609	hone N 259-9	9688		License 00493					
Start Date (10) 7/16/2018		Schedule		npletion [31/201	Date (11) 8		MEC		HA Monitor							
Occupancy Status During		ā.	100					Addre								
Facility Closed/Vaca Abatement Performe Other – Describe:	ed Outside of Norma	al Facility					City, S	State, Z	Zip Code eld, NJ 08	515						-
Scope of Work (Check Al	l That Apply)						One	3101110	510, 140 00	010			-			
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		_	enova					Mi Gl	III Containme ni-Enclosure ovebag Proc on-Exempted	edure					9	
		Is	Locat	ion					JII-Exemples	() an	d Non-11	labic i		Abate	ement	
Location		N	lormal d Sole	ly	Market Control		scription					-	_	Ту	pe	_
Asbestos-Containing TO BE ABA	TED	Mai	ntena odial (nce/		thermal	system	s insul	al (ACM) ation,	(5	mount Specify		Re	R	Enca	Enc
In Facilit (13)	ty	Oust	(12)	Jan:			cing, VA niscella			SF	or LF)		Removal	Repair	Encapsulate	Enclosure
11		Yes	No	N/A									-		ate	.e
Exterior/Interior V	arious Areas			X		Wa	all Mas	stic		1(000 sf	1	X			
Name of Registered Was Stevens Environmen				IJDEP W lauler ID	No.	of Wa	_		Name of I			ווודב				
City, State	itai OGI VICES			18292	2		6 cu sal Date		City, State	1	-					
Allentown, NJ 08501							BD	/	Morrisv		A					
Completed by Mahlon E. Stevens		Title F	Proje	ct Mana	ager		Signatur	e//	1/	/		Date 6/	28	/18		

DATE		(Pur	suant t	o NJAC 8:	60 and	12:120)	Ch:	#	110	3				
Date of Notification (1)		2000		Building O			(2)		7 0	F	17	7 [2 [7	10	
06/26/2018				of Peter	P. Vai	da		In	E 16	51) A		-		
Agencies Notified Type Notification			treet Ad					IIUIT							
EPA Initial				dy Lane			-		111	1 0 0	20	18		4	
EPA Initial Amended Amendment	<u> </u>			e, Zip Cod nville, NY		1			JU	N 29	,	,0	1		
Emergency (i	ncluding			Contact					Tele	phone N	lumb	es Ol	8.		
DOH justification) DCA Cancellation		I	Elena						MODES	211362		110		- A CONTRACTOR OF THE PARTY OF	
Name of Facility Where Abstract in Taking	Diana (2)		FACIL	ITY INFO	RMATIC	N	Tun	o of Equility //	1)						
Name of Facility Where Abatement is Taking Commercial property	Place (3)						Тур	e of Facility (4							
Street Address							H	School (K-1: Subchapter		r than K	-12)				
100 West Main Street							×	Other (i.e. p etc.)	rivate &	comme	rcial	buildi	ngs, h	nome	5,
City (5)							Squ	are Feet	# of	Floors		Blo	ig. Ag	je	
High Bridge															
County (6)				ode (7)			Cur	rent Use (Prid	or if bein	ng demol	lished	1)			
Hunterdon Name of Monitoring Firm Hired by Building C	wner (8)		ASCM			Name	of Ah	patement Con	tractor	(9)					-
Name of Montoning Firm Filled by Building C	wilei (o)		AGOIN	140.				I Safety LL		(0)					
Street Address						Street	Addr	ress							
								y Ave							
City, State, Zip Code						A STATE OF THE PARTY OF THE PAR		Zip Code	0						
Project Manager for Monitoring Firm		Тт	elephor	ne No		Teleph		n, NJ 0750		License	e No				
rojest wariager for wormoning raini		1.	Cicpiloi	10 140.				-8711		01332					
Start Date (10)	Schedule	d Com	pletion [Date (11)		Name	of O	SHA Monitor							
07/05/2018	07/13/2					Sam	200								
Occupancy Status During Abatement (Chec	Conly On	e)				Street	Addr	ress							
Facility Closed/Vacated During Entire F Abatement Performed Outside of Norm Other – Describe: 7:00am - 4:30p			ent			City, S	tate,	Zip Code				-			
Scope of Work (Check All That Apply)															-
23 sf or ≥3 lf	Пв	enovat	ion				7 .	Full Containm	ent with	Negativ	e Pre	ecur	۵		
≥160 sf or ≥260 lf	_	emolitic					1	Mini-Enclosure	е	rvogativ	0110	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
						>		Glovebag Pro Non-Exempte		d Non-Fr	riable	Proc	edure	Э	
	ls	Locatio	on									1		ment	
Location of		lormally d Solel				scription					1		Ту	pe	
Asbestos-Containing Material (ACM) TO BE ABATED	Mai	intenan	ce/		os Cont thermal			rial (ACM) ulation,	3.50	mount Specify		R	711	Encapsulate	Ē
In Facility	Cust	odial S (12)	taff?		surfac	cing, VA	T, o	r	SF	or LF)		Remova	Repair	apsı	Enclosure
(13)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	NI.	NI/A		outer it	iisceiia	ieou	5)				/al	Ŧ	ılate	ure
M	Yes	No	N/A	10/1-14 - F			-:	Ohinalaa	4.4	00.05		22			
Masonary bldg on left facing front			Х	vvnite E				Shingles		00 SF		Х			-
Rear of bldg small enterance side			Х			lashin			_	0 SF		х			
Rear of bldg back section			Х		Whit	e shin	gles	3	40	00 SF		х			
Name of Degistered Weeks United		1 81	IDED !!	loot-	Cubi	Vard-		Name -	Dogiat	arad I a-	oden.				
Name of Registered Waste Hauler		257.53	JDEP W auler ID		of Wa	Yards ste		Name of			iuliil				
Atlantic Carting		1	90713		40			GROV		rm					
City, State Wayne, NJ					Dispo:	sal Date	9	City, Sta Morris		РА					
Completed by	Title				1000000	Signatur	ė,	- IVIOITIS	/	/ \	Dat	e			
Lasko Veskov	Pres	ident			1	Tas	lez	VARICE	cire		06	/26/	2018	3	

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Print Form

,	PAID	N		CATION	OF ASBE o NJAC 8	STOS A			T ID	E	医世	W	E			
Date of Notification (1) 06-26-18			- 1	Name of PSEG	Building C)wner/Op	perator	(2)		J	UN 29	201	8		U	
Agencies Notified EPA	Type Notification		1 1	Street Ad 4000 H	ldress ladley R	d.				*	STOS C			&		
DEP X DOL	Amended Amendment #				e, Zip Coo Plainfield					ASBE	LICENS	SING				
DOH DCA	Emergency (in justification) Cancellation	cluding	533	Name of Eric Bo						1	ephone Nu 3-365-28					
				FACIL	ITY INFO	RMATIC	ON									
Name of Facility Where A PSEG Montclair Su		Place (3)					Тур	oe of Facility School (K	(-12)						
Street Address 60 Valley Rd								×	Subchapt Other (i.e etc.)	er 8 (Oth . private	er than K-1 & commerc	12) cial bu	lding	ıs, h	omes	\$,
City (5) Montclair								Squ N//	uare Feet	# o N//	f Floors A		Bldg N/A		е	
County (6) Essex				County C	Code (7) ISE ONLY)			15-95	rrent Use (Fontrol Hou		ng demolis	shed)				
Name of Monitoring Firm	Hired by Building Ov	vner (8)		ASCM N/A	No.				batement C			C.				
Street Address N/A							Street 17 O		ress Dock Rd							
City, State, Zip Code N/A									, Zip Code k, NY 119	80						
Project Manager for Mon	itoring Firm		- 1	Telephor	ne No.		Teleph	hone			License 01136	No.				
Start Date (10) 07-06-18		Schedule		npletion [Date (11)				SHA Monit		vices, In	C.				
Occupancy Status During	g Abatement (Check	Only Or	ne)				Street									
	ated During Entire Pe								Dock Rd							
	ed Outside of Norma Electrical circuit cabine		Hours			_			, Zip Code k, NY 119	980						
Scope of Work (Check A	II That Apply)	100072					pre	-								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			Renova Demolit				>		Full Contair Mini-Enclos Glovebag P Non-Exemp	ure rocedure				dure		
		Is	Locati	on										ater	ment	
Location		1	Normal ed Sole	ly			scription					-	Т	Тур	e T	_
Asbestos-Containing TO BE AB In Facil (13)	ATED ity	Ma	intenal todial 3 (12)	nce/		thermal surface		ns ins AT, o		(Amount Specify F or LF)	Kemovai		Renair	Encapsulate	Enclosure
		Yes	No	N/A										_	(0)	
Control F	House			Х	Non	Friable	Asbe	esto	s Doors	4	00 SF	x	+	+		
Name of Registered Was Waste Management			F	IJDEP W lauler ID 7273		of Was	Yards ste		15-500-500-50-50	of Registes	ered Land dfill	fill				
City, State Elizabeth, NJ 07201						Dispos	sal Date	е	City, S Morr		PA 1906	7		3		
Completed by Raymond Tutiven		Title Supe	erviso	r		S	Signatur	re Ama	17	etin	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Date 06-26	5-18			

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Print Form

_/ P	AID		NOT	IFICATIO	ON OF AS	BESTOS	ABATE	EMEN 20)	IT	D	$rac{1}{2}$	5 (ا را	5	\mathbb{V}	E		
Date of Notification (1) 06-26-18				Name	of Buildin G	g Owner	/Operato	or (2)				J	UN	2 0	20	18	14	圳
Agencies Notified	Type Notification Initial Amended	1		4000	Address Hadley							ASBE	STC	S C	TIVIC	ROL	8	
DEP X DOL	Amended Amendmen Emergency	t #	<u> </u>	South	tate, Zip (h Plainfi	eld NJ							US	ENS	ING		-	
DOH DCA	justification Cancellation)	9	Eric E	of Contac Boston		ñ							ne Nu 5-28				
Name of Facility Where Al	batement is Takir	ng Place	(3)	FAC	CILITY IN	FORMAT	ION	I To	- /-									
PSEG Bloomfield Su	ıbstation		(0)					Тур	e of F									
Street Address 190 Bloomfield Ave								×	Othe	chap	oter 8	(Othe	er tha & com	n K-1	2) ial bui	ildings	s, hom	nes,
City (5) Bloomfield								Squ N/A	etc.) iare Fe	eet		# of N/A	Floor	rs		Bldg.	Age	
County (6) Essex				County (STATE	Code (7)	Y)		Cur	rent U	se (i	Prior use	if beir	ng de	molisi				
Name of Monitoring Firm F N/A	lired by Building	Owner (8	3)	ASC N/A	M No.		Name WRS	of Ab	ateme	ent C	Contra	actor Serv	(9) (ices	Inc				
Street Address N/A							Street	Addre						, 1110	•			
City, State, Zip Code N/A	0.00						City, S Yaph	tate,	Zip Co	ode	280							
Project Manager for Monito N/A	oring Firm			Telepho N/A	one No.		Teleph 631-9	one I	Vo.	1.10	,00		Licer 011	nse N	0.			
Start Date (10) 07-06-18		Schedu 08-08-		mpletion	Date (11)		Name WRS	of OS	HA M				Oliverine an					
Occupancy Status During A							Street 17 OI	Addre	ess		itai i	361 V	ices,	, IIIC.				
Facility Closed/Vacate Abatement Performed Other – Describe: Ele	Outside of Norm	al Facilit	Abater y Hour	nent s			City, St	tate, Z	Zip Co	de								
Scope of Work (Check All T	That Apply)						Yaph	ank,	NY	119	080		52.0/10.=					
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf	9,505 9992	greenesting.	Renova Demoli				×	Mi	III Con ni-Enc oveba on-Exe	dosu g Pr	ire oced	ure						
		743	Locat	005					TI LAC	ipt	T	and	14011-	Паы		(2) Att. (1)	ement	1
Location of Asbestos-Containing Ma		Use	Normal ed Sole	ly by	Ashes	Des tos Conta	scription	of atorio	I (ACN	4)		0				Ту	ре	
TO BE ABATI In Facility (13)	ED		intena todial 3 (12)		(i.e.	thermal surfac	systems sing, VAT hiscelland	insula , or	ation,	n)		(Sp	nount pecify or LF)		Remova	Repair	Encapsulate	Enclosure
		Yes	No	N/A											<u>a</u>		ate	Гe
Control Hou	ıse			Х	Non	Friable	Asbes	tos [Doors	3		400) SF		x			
											-		7.00					
Name of Registered Waste I	laulas																	
Waste Management	naulei		H	JDEP Wauler ID 17273		of Wast						istere ndfil		ndfill				
City, State Elizabeth, NJ 07201						Disposa TBD	al Date		City,			, PA	190	67				
Completed by Raymond Tutiven		Title Supe	rvisor			Si	gnature	No as . I	1	Tr	17	1, 3		Date	26-1	8		

06-26-18



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

	A.A.		(P	ursuant	to NJAC	8:60 an	d 12:120	0)				.11101	0	0 2	018		U)
Date of Notification (1) 06-26-18	20-			Name o	f Building	Owner/0	Operator	(2)		III L	2	0 UT		8 /	010		
Agencies Notified EPA	Type Notification			Street A 4000 I	ddress Hadley F	Rd.					AS	BEST L	OS CEN	SON	TRU G	L&	
DEP X DOL	Amended Amendmen				ate, Zip Co Plainfiel					has one							
DOH DCA	Emergency justification) Cancellation				f Contact				***************************************		0.0000000000	phone 3-365-				27-117-2	
	Canochaton	•			LITY INFO	DMAT	ION	-28			370	-000	200	'			
Name of Facility Where A		ng Place (3)		FAGI	LITTINE	ZKIWAT	ION	Ty	pe of Fac	ility (4)							
Street Address 467 River Street								×	School Subcha Other (apter 8	(Othe	r than	K-12) ercia	l buik	dings,	home	es,
City (5)								So	etc.) quare Fee		# of	Floors	78 880		ldg. A		
Paterson								N	/A		N/A			N	I/A		
County (6) Passaic					Code (7) USE ONLY)				urrent Use ontrol H		if bein	g dem	olishe	ed)			
Name of Monitoring Firm N/A	Hired by Building	Owner (8)		ASCN N/A	l No.				Abatement nvironm				Inc.				
Street Address N/A)	Street 17 O		dress Dock Ro	i			3	F-55-10			
City, State, Zip Code N/A						11-2-10-1			k, NY 1								
Project Manager for Moni N/A	toring Firm		- 1	Telephoi N/A	ne No.		Teleph	none	And the second second			Licens					
Start Date (10) 07-06-18		Scheduled 08-08-18	Con	elm store	Date (11)		Name	of (OSHA Mor						CHOPPE DE		
Occupancy Status During	Abatement (Chec						Street		nvironm	entai	Servi	ices,	iric.	0110-			
Facility Closed/Vaca Abatement Performe	ted During Entire ed Outside of Norr	Period of Aba	atem	ent			17 0	ld I	Dock Rd								
Other – Describe: E	lectrical circuit cab	inet				_	17000		k, NY 1								
Scope of Work (Check All	That Apply)								S MARKE								
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		Connection	novat noliti				×		Full Conta Mini-Enclo Glovebag Non-Exen	osure Proced	dure					9	
		Is Lo	cati	on					TTOTT EXCIT	Ipicu () and	NOTIFI	ITADIC		NAME OF	ement	
Location		Nor	mall	у		Des	scription	of							Ту	ре	
Asbestos-Containing I TO BE ABA In Facilit (13)	TED		enar lial S 12)	ice/ staff?	Asbest (i.e.	os Cont thermal surfac		Mate s ins	r		(Sp	nount pecify or LF)		Removal	Repair	Encapsulate	Enclosure
Control U	01100	Yes	No	N/A						_						(D	
Control H	ouse			Х	Non I	-riable	Asbes	sto	s Doors		60	SF		x			
Name of Registered Wast	e Hauler		0.55	JDEP W	73.77.77.75		Yards	-	Name	e of Re	gister	ed Lan	dfill				
Waste Management				auler ID 7273	No.	of Was	ste			less I							
City, State Elizabeth, NJ 07201						Dispos TBD	sal Date	8		State risville	e, PA	1906	67				
Completed by Raymond Tutiven		Title Superv	isor			S	ignature VGW		, 7	-	شند		Date	26-1	8		
							FINE S	28.60	100 1	100	4			Sauce 1			

Print Form

Type Notification

Initial

Name of Facility Where Abatement is Taking Place (3)

Amended

Amendment #

justification)

Cancellation

Emergency (including

Date of Notification (1)

06/27/2018

EPA

DEP

DOL

DOH

DCA

Street Address

OldBridge

City (5)

Glenwood Apartment

48-50 Apple Tree Ln

×

Agencies Notified

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

Street Address

1 Cherry Hill Ln

City, State, Zip Code

Name of Contact

Eric Prieto

Old Bridge, NJ 08857

FACILITY INFORMATION

X

Name of Building Owner/Operator (2)

Glenwood Apartments & County

	promotion .					Print	Form
ENT (2)			C E 1			M	The state of the s
unty C	lub		2 9 4	1010		2	
	A	SBES	CTOS CON	TAOI	_&		
							1
		C-129300	phone Numb 2-727-1414				
Type of	Facility (4)						
Scl Su	hool (K-12) bchapter 8 her (i.e. pri	(Othe	er than K-12) commercial	buildir	ngs, h	omes	,
Square		# of 2	Floors	Bld	lg. Ag ⊥	е	
2,000 Current Apartr			ng demolishe	200			
	ment Conti						
	al Constr	uctio	n, Inc.		VI		
Address	Avenue	DIV.	IB Suite 21	8			
tate, Zip		5, F IV	ID Oute 21				
on, NJ			License No.				
389-00	89		00693				
Security and	Monitor						
Genera	al Constr	uctio	n, Inc.				
Address			4D 0 :1- 04				
		e, PN	/IB Suite 21	18	-		_
state, Zip on, NJ							
011, 143	07012	-					
Mini-	-Enclosure rebag Proc	edure	n Negative Pr			e	
					Abate	ement	8
n of Material	Marie Committee		Amount	_	Ту		m
ns insulat AT, or neous)	tion,		Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
sulatio	n	1	160 LF	X			
sulatio	n	•	180 LF	X			
				-			
	Name of	Regis	tered Landfill			1	
	Minery						
'e	City, Sta						
e	Uity, Old	C					1

County (6) Middlesex			County Co	ode (7) SE ONLY)			Current Aparti		if being demolis	shed)				
Name of Monitoring Firm Hired by Building Ow	mer (8)		ASCM	No.				ment Contr						
N/A							Citarian		uction, Inc.					
Street Address						Street A				040				
						0.0000000000000000000000000000000000000			, PMB Suite	218	9			
City, State, Zip Code						City, Sta								
						Cliftor	n, NJ	07012						
Project Manager for Monitoring Firm			Telephon	e No.		Telepho	ne No.		License	No.				
2002 NO. 2007 NO. 2007 NO. 2007						973-3	89-00)89	00693					
Start Date (10)	Schedule	d Com	pletion D	ate (11)				A Monitor	E7 88					
	07/14/2	018				DIA	ener	al Constr	uction, Inc.					
Occupancy Status During Abatement (Check	Only One	3)				Street A								
			aent			1360	Clifto	n Avenue	e, PMB Suite	218				
Facility Closed/Vacated During Entire Pe Abatement Performed Outside of Norma	I Facility	Hours	5			City, Sta	ate, Zip	Code			1.1-6-1.3		2000	
Other – Describe:						Clifto	n, NJ	07012						
Scope of Work (Check All That Apply)		_												
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		enova emolit			×	Mini	-Enclosure rebag Proc	nt with Negative edure (*) and Non-Fri				2		
	Ι						14011	-Exempled	() and (40)(1)	ubic .		Abate		t
Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Use Mai	Locatiormal d Sole intena odial ((12)	lly ely by		tos Cor therma surfa	escription ntaining M al systems acing, VA miscellan	laterial sinsula T, or		Amount (Specify SF or LF)		Remova	Ty Repair	e Encapsulate	Enclosure
	Yes	No	N/A										te	to .
48 A-D Boxwood Mall-Crawl space		Χ		Р	ipe/E	lbow Ins	sulatio	n	160 LF	,	2			
50 A-D Boxwood Mall-Crawl space		X		Р	ipe/E	lbow Ins	sulatio	n	180 LF	>	(
														-
None of Desigtered Wests Houles			NJDEP V	Vaste	Cubi	ic Yards		Name of	Registered Lan	dfill			<u></u>	
Name of Registered Waste Hauler			Hauler ID		of W	/aste		1.054500	a Landfill					
Service Transport Group			20990		6 C			in the second se			_			
City, State					11 20	osal Date		City, Stat		160	2			
New Castle, DE 19720					077	15/2018		vvayne	sburg, OH 4		_			
Completed by	Title	220				Signatur	e	1 .	4	Date		2018	2	
Milan Njezic	Vice	Pres	sident				-)00	1	w	00/	211	2010		
ASB-41 (R-06-08)						* Do n	ot use	this form fo	r asbestos licer	sure	exe	mpted	l acti	vities.

2102												Р	rini
PAID		NOTIF (P	CATION	ate of Ne OF ASB to NJAC	ESTOS	ABATE	MENT 0)		ECE		\mathbb{V}		F
Date of Notification (1) 06/27/2018				f Building vood Ap				Club	JUN ;	0 2	018		
Agencies Notified Type Notification			Street A	22	artinei	ils & C	ounty (Jun [UUN 2	9 4	VIO	-	
X EPA X Initial Amended				rry Hill I					ASBESTOS	CON	TROI	2	
DEP Amended Amendment	#			ate, Zip Co ridge, N		7				NSIN			
Emergency (i justification) DCA Cancellation	including			f Contact	0000	-			Telephone No.				
				LITY INF	ORMATI	ON			132-121-1	414			
Name of Facility Where Abatement is Taking Glenwood Apartment	Place (3)	**					Facility (4)					
Street Address								chool (K-12 ubchapter 8) I (Other than K-	12)			
15-21 White Oak Ln							X Ot	her (i.e. pri	vate & commer	cial buil	dings	, hom	es
City (5) OldBridge							Square	Feet	# of Floors		Bldg. A	Age	
County (6)		T	County	Code (7)			2,000		if being demolis		+06		_
Middlesex				USE ONLY)		Apart		n being demons	sileu)			
Name of Monitoring Firm Hired by Building C N/A	wner (8)		ASCN	l No.				ment Contr					
Street Address							Genera	al Constr	uction, Inc.				_
								n Avenue	, PMB Suite	218			
City, State, Zip Code						City, S	state, Zip	Code			72		
Project Manager for Monitoring Firm			Telepho	ne No			on, NJ (none No.	07012	111	Mez			
			relepito	ne ivo.			389-00	89	License 00693	NO.			
	Schedule 07/15/		npletion	Date (11)			of OSHA	.,					
Occupancy Status During Abatement (Check							Genera Address	al Constru	uction, Inc.				
Facility Closed/Vacated During Entire Po	eriod of	Abatem	nent					n Avenue	, PMB Suite	218			
Abatement Performed Outside of Norma Other – Describe:	al Facility	/ Hours	5				tate, Zip						
Scope of Work (Check All That Apply)						Clifto	on, NJ	07012	**				
≥3 sf or ≥3 lf × ≥160 sf or ≥260 lf		Renova Demolit				×	Mini-l Glove	Enclosure ebag Proce	it with Negative dure *) and Non-Fria			e.	
	1000	Locati	100								Abate		t
Location of Asbestos-Containing Material (ACM)	Use	Normal d Sole	ly by	Asbes		scription aining M	of faterial (A	ACM)	Amount	-	, ,		T
TO BE ABATED In Facility		intenar todial S		(i.e.	thermal	systems	s insulation	on,	(Specify SF or LF)	Rer	Re	Encapsulate	
(13)		(12)			other m	niscellan	neous)		or or cry	Remova	Repair	psula	
	Yes	No	N/A									ate	(
15 A-D Boxwood Mall-Crawl space		Χ					sulation		160 LF	K			
17 A-D Boxwood Mall-Crawl space		X			-		sulation	3	150 LF	X			
19 A-D Boxwood Mall-Crawl space		X	-	Р	ipe/Elb	ow Ins	sulation		160 LF	X			
21 A-D Apple Tree Ln-Crawl space Name of Registered Waste Hauler	L	X	JDEP W		ipe/Elb	Carry Charles	sulation	November 1984	170 LF	. X			
Service Transport Group		H	auler ID 0990		of Was	ste		Minerva	egistered Landfi Landfill	I			
City, State						al Date		City, State			61		
New Castle, DE 19720 Completed by					0//15	/2018		Waynes	burg, OH 446	886	7.0		



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

Date of Notification (1)				N	ame of Puils	ding Owner/Operato	(0)	FIER	E	7 1	\//	F
	25 /	18				rstEnergy Comp		16 F22F Ch - 1	#400	1	U	
Agencies Notified T	ype Notificat	ion		_	reet Addres		ally / JOD # 160	10-5335 Check	#102	83		
⊠ EPA □	Initial			1		s Place- Building		JUI	1 2	9 21	018	
	Amended				ty, State, Zip		A	youl level				
☐ DHSS	Amendmer			71		n, NJ 07960		ASBEST	roe r	CONT	TROI	2.
(NJAC 5:23-8)	Emergency justification		ding		me of Conta			1	ICEN	SING		. a
] Cancellatio	500		1 1	John Grec			Telephone No				and day
								201-602-1	499			
Name of Facility Where Abar	tement is Tal	king Pl	ace (3)		ACILITY	NFORMATION	T (F W	7.1				
JCP&L- Morristown			(-)				Type of Facility ☐ School (K-1	5107 (6)				
Street Address							Subchapter	8 (Other than K-	12)			
7 Andrea LAne							Other (i.e.,	private and comm	nercial	buildi	ngs,	
City (5)							homes, etc.					
Morristown, NJ							Square reet	# of Floors		Bldg.	Age	
County (6)				Co	ounty Code (7)(STATE USE ONLY)	Current Use /P	rior if boing domo	liabad	`		
Morris						N	Substation		iisned)		
Name of Monitoring Firm Hire	d by Building	g Owne	er (8)	ASC	M No.	Name of Abatem						_
1 Source Safety & Heal	th, Inc.			1		AbateTech, i	127	′				
Street Address		200		+		Street Address						
140 S. Village Ave. Suit	e 130					30 Maple Ave	e. PO Box 25					
City, State, Zip Code						City, State, Zip C						_
Exton, PA 19341						Lumberton, I						
Project Manager for Monitoring	g Firm		Te	ephon	e No.	Telephone No.		License No.				
Brian Hovendon					4-5525	609-265-2107		00529				
Start Date (10)					ate (11)	Name of OSHA M	lonitor					
/12 /18				2_/	18	EMSL Analyt	ical					
Occupancy Status During Abai	tement (Che	ck only	one)			Street Address						_
Facility Closed/Vacated Du	ring Entire Po	eriod o	f Abate	ment		200 Route 13	0 North					
Abatement Performed Outs Time of Abatement:	AM- P	M/1.3	ty Hou ∩PM-	rs - De	scribe	City, State, Zip Co	de		_			_
		110			AIVI	Cinnaminson	, NJ 08077					
Scope of Work (Check all that a	apply)											
⊠ ≥3 sf or ≥3 lf □ ≥160 sf or ≥260 lf		⊠ R	enovat	ion		☐ Full Conta	ainment with Neg	ative Pressure				
_1 ≥ 100 St Or ≥260 If			emoliti	on		☐ Glovebag	Procedure					
		Is	Local	ion		Non-Exer Non-Exer	npted (*) and Nor	n-Friable Procedu	re			
Location of			Norma	lly		Description of			Al	atem	ent T	уре
Asbestos-Containing Materia TO BE ABATED	al (ACM)	Use	ed Sole aintena	ely by	Asbes	tos Containing Mat	erial (ACM)	Amount	Re	Repair	Ē	5
IN Facility		Cus	todial	Staff?	(i.e.,	thermal systems in surfacing, VAT,		(Specify	Remova	pair	caps	Enclosure
(13)			(12)		1	other miscellaneo		SF or LF)	<u>a</u>		Encapsulate	ure
		Yes	No	N/A		7.1					te	
xterior Pole JC149MRT				\boxtimes	Asbesto	s risers		16 LF		П	П	Г
										1] [_
									1	Ш	Ш	L
		_						<u> </u>				
ame of Registered Waste Haul	or											
AbateTech, Inc.	er			JDEP V	200200000000000000000000000000000000000	Cubic Yards of	Name of Registe	ered Landfill				
ty, State				18750		Waste 2	G.R.O.W.S.	Landfill				
Lumberton, NJ					[Disposal Date	City, State				_	
						7/12/18	Tullytown, F	PA				
ompleted By (Print or Type) Gwen Trumbetti	Title					Signature	0 -	Dat	te		9	_
Gwen Trumbetti	O	peratio	ons C	oordi	nator	1/00	1/1	1 0	0	25		Y

ASB-41 MAY 11

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

/CK 102	57	NO.	TIEIC	ATIO	State of N	New Jersey SBESTOS ABA	TEMENT					
1	PATD	NO				AC 8:60 and 5:1		IN E	0 [V	
Date of Notification (1)	A A BARA			Nam	e of Buildir	ng Owner/Operator	(2)	HUIT	-			
6/	25 / _1	8			amesburg		o #1806-5331 (heck #10257	fal	70	201	Q
	Type Notification	1		Stree	et Address				The Day	2 3	401	
⊠ EPA				13	Agusta S	Street		0.74		a parameter of		
⊠ DOLWD	Amended Amendment	ц		City,	State, Zip	Code		ASBE				IOL &
☐ DHSS	☐ Emergency (i		-	Ja	mesburg	, NJ 08831			LICI	ENSI	NG	
(NJAC 5:23-8)	justification)	illoiddii	19	Name	e of Contac	ct		Telephone Numl	per			
	☐ Cancellation			Bu	siness A	dministration		(732) 521-21	34			1
				FA	CILITY IN	NFORMATION						
Name of Facility Where Ab	patement is Takir	ng Plac	e (3)				Type of Facility	(4)				
Grace M Breckwede	IMS						School (K-12					
Street Address								Other than K-12		and a	272	
13 Augusta Street							homes, etc.)	rivate and commer	ciai di	ıllaln	gs,	
City (5)							Square Feet	# of Floors	BI	dg. A	ge	
Jamesburg, NJ 0883	1											1
County (6)				Cou	nty Code (7	7)(STATE USE ONLY)	Current Use (Pri	or if being demolis	hed)			_
Middlesex							School					
Name of Monitoring Firm H	lired by Building	Owner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
TTI Environmental						AbateTech, I	nc.					
Street Address						Street Address	3,4440					
1253 North CHurch S	Street					30 Maple Ave	e. PO Box 25					
City, State, Zip Code						City, State, Zip Co	ode					
Moorestown, NJ 0805	57					Lumberton, N	VJ 08048					
Project Manager for Monito	ring Firm		Tele	phone	No.	Telephone No.		License No.		1		
Mike Stocku			85	6-840	-8800	609-265-2107		00529				
Start Date (10)					te (11)	Name of OSHA M	fonitor					
7/_11_/_	18	7_/	13	_ /	18	EMSL Analyti	ical					
Occupancy Status During A	batement (Chec	k only	one)			Street Address						
☐ Facility Closed/Vacated						200 Route 13	0 North					
Abatement Performed O						City, State, Zip Co	ode					
Time of Abatement:	AMPI	M/	PM-		AM	Cinnaminson	, NJ 08077					
Scope of Work (Check all the	nat apply)											
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf			novatio molitio			☐ Mini-Encl	Procedure U	ative Pressure Vof & Own-Friable Procedure				
		1 8	Locati						Ab	atem	ent T	уре
Location of Asbestos-Containing Ma TO BE ABATE IN Facility (13)	aterial (ACM)	Use Ma	Normal ed Sole intenai todial S (12)	ly by nce/		Description of stos Containing Mai thermal systems in surfacing, VAT, other miscellaneo	terial (ACM) insulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure
- Constant		Yes	No	N/A							0	
3 Restrooms		П	\square	П	Pipe Fit	tinas		45 total	×	П	П	П

Name of Registered Waste Hauler AbateTech, Inc.	100.00	IJDEP Was lauler ID No 18750		Name of Registered Landfill G.R.O.W.S. Landfill		
City, State			Disposal Date	City, State		

Lumberton, NJ Completed By (Print or Type) Gwendolyn Trumbetti

Title

7/13/18

City, State

Tullytown, PA

Operations Coordinator

Signature

Date 6/25/18

CK 10932

Late of Nutification (1)	N. M. M. N			Nam	e of Buildin	g O	wner/Operator ((2)			-		
6 /2	5 /	18		JO	P&L/Firs	tEn	ergy Compar	ny / Job #1806	-5323 Check#	10282	\mathbb{V}	E	In
Agencies Notified Ty	pe Notification	n		Stree	et Address				3			1	Π
	Initial			10	Legion P	lac	e- Building A		HIM	2 722 17	2010	1	
	Amended			City,	State, Zip (Code	9	- 14	LI JUN 2	9	2018		
□ DHSS	Amendment		-	1	orristown,							į	
□ DCA (NJAC 5:23-8)	Emergency justification)		ıg		e of Contac	30.00			Telephone Nun	her	T20	0	
	Cancellation				hn Greco				201-602-149			L CK	
				FA	CILITY IN	IFO	RMATION						
Name of Facility Where Abat	ement is Tak	ing Place	e (3)					Type of Facility	(4)				
JCP&L- East Hanover								School (K-12	2)				
Street Address		-							Other than K-12				
159 Rldgedale Avenue								homes, etc.)	rivate and comme	rcial b	ulldin	js,	
City (5)								Square Feet	# of Floors	В	ldg. A	ge	
East Hanover, NJ 0793	6												
County (6)				Cou	nty Code (7)(STA	ATE USE ONLY)		or if being demoli	shed)			
Morris				1				Substation					
Name of Monitoring Firm Hire		Owner	(8)	ASCM	No.	Na	me of Abateme	ent Contractor (9)					1
1 Source Safety & Hea	lth, Inc.					1	AbateTech, Ir	nc.					
Street Address						Str	eet Address						
140 S. Village Ave. Suit	te 130					3	80 Maple Ave	. PO Box 25					
City, State, Zip Code						1 1	y, State, Zip Co						
Exton, PA 19341							umberton, N	IJ 08048					
Project Manager for Monitorin Brian Hovendon	ig Firm			phone			lephone No.		License No.				
Start Date (10)	Cob	1.1-10			-5525		09-265-2107		00529				
7 /11 /18	95.0	eduled C				00000000	me of OSHA M EMSL Analyti						
Occupancy Status During Aba	tement (Che	ck only	one)			Stre	eet Address						
☐ Facility Closed/Vacated Du						2	00 Route 130	0 North					
Abatement Performed Outs Time of Abatement:	side of Norma	al Facility	Hour	s - Des	3000 CONT	City	y, State, Zip Co	de					
		- N/ 5 -	PIM-		AM	C	innaminson	, NJ 08077					
Scope of Work (Check all that	apply)						Π= " O ·						
≥3 sf or ≥3 lf		⊠ Re	novati	on			☐ Full Conta	ainment with Neg osure	ative Pressure				
≥160 sf or ≥260 lf		☐ De						Procedure					
		T .					☐ Non-Exer	npted (*) and Nor	n-Friable Procedu	re			
Location of		2000	Locat Norma				_			Ab	atem	ent Ty	уре
Asbestos-Containing Mate	rial (ACM)		d Sole		Ashes	tos	Description of Containing Mat		Amount	Re	Repair	E	E
TO BE ABATED		100000000000000000000000000000000000000	intena			, the	rmal systems in	nsulation,	(Specify	Removal	pair	cap	Enclosure
IN Facility (13)		Cusi	todial ((12)	stair?			surfacing, VAT, her miscellaned		SF or LF)	a		Encapsulate	ure
(10)		Yes	No	N/A		Oti	ner miscenanec	ous)				te	
Relay Supervisor Office					Pipe Fitt	ting	s		15 total				
Relay Supervisor Office				\boxtimes	Pipe Ins	ulat	tion		100 LF				
Relay Supervisor Office				\boxtimes	Ceiling t	tile	& wipe down	grid	150 SF				
											П	П	П
Name of Registered Waste Ha	uler		N	JDEP V	Vaste	Cub	oic Yards of	Name of Regist	tered Landfill				-
AbateTech, Inc.			Н	auler ID		Was	ste	G.R.O.W.S.					
City, State				18750		2 Disp	posal Date	City, State					
Lumberton, NJ						-	/17/18	Tullytown,	PA				
Completed By (Print or Type)	Titi	le			1		Signature	1	Da	ate,		1	P.
Gwen Trumbetti	(Operati	ons (oordi	nator		Con	V	l a	0 0	15	İ	8

CK/0284

Date of Notification (1)	PATT			12000	Nam	e of Buildir	na Ov	vner/Operator	(2)					
6 /	25 /	18	3							Companies	I Job	#18	306-5	5334
Agencies Notified	Type Notific	otion			Ch	eck #102 et Address			.	Ų —				111
⊠ EPA	I ppe Notific	auon			100000000000000000000000000000000000000				Danish					
⊠ DOLWD	☐ Amende	d				Maple A				JUN_	29	2018		IL
☑ DHSS	Amendm	nent#		- 1		State, Zip							9	
□ DCA	☐ Emerger		cludin	g	-	orristown		07900		THARDENIG	200	ITO	11 0	1
(NJAC 5:23-8)	justificat Cancella				1	e of Contac				Telephone Num 609-513-424			IL OL	1
	L Cancella	HIOH			-	am Wrig	olimoss.		- Lan-	609-513-424	14	-		
N			-	(0)	FA	CILITY IN	IFO	RMATION		22				
Name of Facility Where A			Place	(3)					Type of Facility					
Former Pharmaceu	tical Bulldi	ng							School (K-12	i) 3 (Other than K-12	2)			
Street Address									Other (i.e., pr	rivate and comme		ilding	JS,	
700 Union Blvd.									homes, etc.)		1=:			
City (5)									Square Feet	# of Floors	BI	dg. A	ge	
Totowa, NJ 07512			=27-978							1				
County (6)					Cou	nty Code ((814	ATE USE ONLY)	the second of the second secon	or if being demolis	shed)			
Passaic	11: 1 t D-11	J:		(0)	1001		Tie		Private Buil					
Name of Monitoring Firm		aing C	wner	(8)	ASCM				ent Contractor (9)					- 1
Detail Associates, In Street Address	nc.				16-0	0085	-	AbateTech, I	nc.					
300 Grand Avenue							1000	eet Address	DO D 25					
City, State, Zip Code									PO Box 25					
	24						1 100	y, State, Zip Co						
Englewood, NJ 0763				17-1		NI.	_	umberton, N	NJ 08048	I the same Ata				
Project Manager for Monit Stephen Jaraczews				1,2-00	ephone		0.000	ephone No.		License No. 00529				1
Start Date (10)		Sohod	ulad C	100		te (11)		09-265-2107 me of OSHA M		00529				-
7 / 16 /	200					18	1	MSL Analyti						
Occupancy Status During ☐ Facility Closed/Vacated					mont		2000	eet Address	0 N					
☐ Abatement Performed						cribe	-	00 Route 13						
Time of Abatement:								, State, Zip Co						
Scope of Work (Check all	that apply)							innaminson	, NJ 00077					
Scope of Work (Check all	triat apply)							☐ Full Cont	ainment with Neg	ative Pressure				
≥3 sf or ≥3 lf			⊠ Re					Mini-Enc						
_ ≥160 sf or ≥260 lf			∐ De	moliti	on					n-Friable Procedu	re			
			Is	Loca	tion				1		1	atem	ent T	vpe
Location of				Norma				Description o				_		
Asbestos-Containing M TO BE ABAT)		a Soli intena	ely by ince/			Containing Ma rmal systems i		Amount (Specify	Removal	Repair	nca	nclo
IN Facility			Cust		Staff?	(1.6		surfacing, VAT,		SF or LF)	oval	Α.	Encapsulate	Enclosure
(13)		1		(12)	Т	-		ner miscellane		10800 11400 NO.			ate	0
			Yes	No	N/A									
Main Floor						Abando	ned	Piping		10 LF				
Roof Top					\boxtimes	Elbows				12 total				
Roof Top					\boxtimes	Asbest	os D	ebris		5 SF				
Name of Registered Waste	Hauler			I	JDEP	Waste	Cub	oic Yards of	Name of Regis	tered Landfill				-
AbateTech, Inc.				F	lauler II 1875		Wa	ste 0	G.R.O.W.S					
City, State	-							posal Date	City, State					\neg
Lumberton, NJ							7	/18/18	Tullytown,	PA				
Completed By (Print or Typ	oe)	Title						Signature	1	Da	ate ,		n	-
Gwendolyn Trumbet	ti	0	perati	ons	Coord	inator		C	MIT	1	0/0	25		8

	K	1	1	31	/									Г	Pr
Date of Notice 4	PA	ID	A	OTIFIC/ (Pur	aiion o	FASRE	Jersey STOS ABAT 60 and 12:	TEM 120)	IENT		E	C	E.		7 [
Date of Notification (1) 06/20/2018				Na	ame of Bu	Jilding O	wner/Operat	ta= //	0)	110					
A				J	ASON	GENTI	F	tor (2)			IUN	2.0	201	`
Agencies Notified 7	ype Notificat	tion			reet Addr					1 1 1 1 1	1	, On	2 9	2010	5
Z EPA] Initial														
DEP X DOL	Amende			Cit	y, State,	7in Code					ASBE	STOS	CO	NTD	11 0
The state of the s	Amendm	ent#_			ORD N.							LICE	NSIN	IG	ال ق
☑ DOH	Emergen justification	icy (inclu	iding		me of Co		J								
DCA C	Cancellat				SON G		_			Te	lephone	Numb	er		
Mome of F. W.		22					MATION								
Name of Facility Where Aba PRIVATE	tement is Ta	king Pla	ce (3)	- 1	ACILII	INFOR	MATION	1 =							
INVAIL									ype of Facil	ity (4)	342.03				
Street Address City (5)									School (Subchar Other (i. etc.)	(K-12) oter 8 (Oth e. private 8	er than & comm	K-12) ercial l	ouildir	ngs, h	omes
FORD NJ. 08863								Sc	quare Feet	# of	Floors		Pld	~ A	
County (6)				1.					36 SF.	1	1		D10	g. Age 98	
· ·				Coul	nty Code	(7)		Cı	urrent Use (Prior if heir	na dem	nliehad		90	
Name of Monitoring Firm Hire	d by Ruildie	2 0	(0)			- (Y			P	V/A	-8 asii)(nsned)		
J (III C	- of namali	y owner	(8)	AS	SCM No.		Name	of A	Abatement C	Contractor	(9)				
Street Address							NOF	RTH	EASTE	NVIRON	MENIT	TAI I			
							Street	Add	Iress		INITIM!	ALL	LU.		
City, State, Zip Code							1126								
,			1						, Zip Code						
roject Manager for Monitoring							NOR	TH	BERGEN	JALLOZ	247				
To indiage to inonitoring	g Firm			Telep	hone No.		Teleph	one	No						
tart Date (10)			2535						0642		License				
6/23 /2018		Sched	luled C	ompletio	n Date (1	11)			SHA Monito		01300				
		1 116/	1.212	018		žá.			PROBE						
ccupancy Status During Abat	ement (Ched	ck Only	One)				Street A			IIVC	201-01				
Facility Closed/Vacated D	uring Entire	Period o	f Abate	ement					ess RTY ST.						
Abatement Performed Ou Other – Describe:	tside of Nom	nal Facil	ity Hou	Irs			-								
20001150.									Zip Code						
ope of Work (Check All That	Apply)	2-31-2-10-11-2		A			INIET	JUF	HEN NJ.						
≥3 sf or ≥3 lf ≥160 sf or ≥260 lf		X	Renov	ration lition		-8	×	Gl	ull Containm ini-Enclosur ovebag Pro on-Exempte	e cedure					
1			s Loca							- () (1.10 1)	OII-III	DIE Pro	0.000		
Location of Asbestos-Containing Materia	I (ACM)	Us	Norma ed Sole	illy alv by	-	D	escription of	F	1					emen /pe	Į.
TO BE ABATED	a (MOINT)	Ma	aintena	ince/	Asbe	estos Co	ntaining Mat	erial	(ACM)	Amo	unt		T	T	
In Facility (13)		Cus	todial		(1.6	e. inerma surf	of systems in acing, VAT,	nsula	ation,	(Spec		R	-	E	m
(13)			(12)			other	miscellaneo	or (suc		SF or	LF)	Removal	Repair	aps	nclo
		Yes	No	N/A				,				val	air	Encapsulate	Enclosure
Bedroom (2nd Floo	or)		X		-	P=-	205							te	Ф
			1	-		FL	OOR TILE	Ξ		268 5	SF.	X			
												+-1			
												\perp			
e of Registered Waste Haule	r		l M	JDEP W	note	16									
STATE ASSOCC INC		-5	H	auler ID	asie No.	Cubic of Wa	Yards		Name of R	egistered l	Landfill				-
State				19951	2007/07/D	TB			MINERY			SE IN			
NX NY.						10000	al Date	-			· w illi	OF IN	C		
						TBD			City, State WAYNE	CDITICA	O1 ::: -				
leted by								4			1 31 11/0				- 1
pleted by LOS ESQUIVEL		Title		IANAG		IS	ignature		44/41145	SOURG	OHIO				1

# 1106 E G E I V E PS CIATES JUN 2 9 2018	
Telephone Number ENSING 973-808-7/70	
4) 2) 8 (Other than K-12) rivate & commercial buildings, homes,	
# of Floors Bldg. Age 3	

Date of Notification (1)	CONTRACT OF THE CONTRACT OF TH	Name of	Building (Owner/Op	perator (ALTY.	ASS	SCIATE	25			
Agencies Notified Type Notifica	ion	Street Ad	ddress			ROAY				9	2018	}
EPA Initial Amende Amenda	nent #	City Sta	te Zin Co	de		NJ	070	O GASBES	TOS	CO	NTR	OL &
☑ DOH		Name of	Contact	n Ait	16	and the second s	Tel 9	ephone Num 73-80	59 -	7/	70	
Name of Facility Where Abatement is T	ahina Diana (2)	FACI	LITY INFO	RHATIC		Type of Facility	- (0)			_		
MARY AUD AM		1			destavysacien	Type or racing School (K	• •					
Street Address 500 BLOOMFIELD	AUE				Principle Parkets			er than K-12) & commercia		lings,	home	35,
City (5)		***************************************			Approximent of the second	Square Feet	4	f Floors	13	dg. A	ge	
CAUWELL		1 County 6	>=d= (=)		-	4200		3	-5	6.	L	
County (6) ESSEX	*	County C	Jode (7) ISE ONLY)	***************************************	_	Current Use (P	nor it be	ing demolishe	ia)			-
Name of Monitoring Firm Hired by Build	ing Owner (8)	ASCM	No.	and the contribution of th		f Abatement C c Contractin		(8)				
Street Address	NET TO BE OF THE PROPERTY OF T	Camina de provincia de la companya d			Street A 185 V	ddress reeland Ave		Accessed Sensolvani Oniversa				
City, State, Zip Code				and the state of t		ate, Zip Code nd Park, N.J						and the same
Project Manager for Monitoring Firm		Telephor	ne No.		Telepho 201-2	ne No. 62-5841		License No 00156			dinor	1
Start Date (19) / 8	Scheduled C	emplesion I				f OSHA Monito a Environm		ervices Inc				and the same of th
Occupancy Status During Abatement (C	heck Only One)			-	Street A					-		
Facility Closed/Vacated During En Abatement Performed Outside of I Other – Describe: NowE Occ	iormal Facility Hou	118/ JOG	3 To 84	E But		uyler Street ate, Zip Code	-					
	urier Acen	14 14	1 PHO		Hacks	ensack, N.J.	07606					
Scope of Work (Check All That Apply) ≥3 sf or ≥3 if ≥160 sf or ≥260 if	Reno Demo	vation dition				Mini-Enclosu Glovebag Pr	ire ocedure	n Negative Pr				
and December of the Control of the C	is Loc	niina			East	NOT-CASHID	1	NI TRUSPETTIALIR	-	-	ement	
Location of	Nonr	ally		Des	cription (of	object and the control of the contro			Ту	pe	1
Asbestos-Containing Material (ACM TO BE ABATED In Facility (13)	Custodia (12	nance/ il Staff? 2)		tos Conta thermal s surfaci	aining Ma	aterial (ACM) Insulation, , or	1 6	Amount Specify F or LF)	Removal	Repair	Encapsulate	Enclosure
	Yes No	D N/A					1	-			TO A STATE OF THE PARTY OF THE	
1	-19-1	1	7	7-1	10	45	1	7			NE-VEN MEN-SE	
		1/1	1	110	7	1/16	1	/				day.
	4-1-	1	-					_/_				
Name of Registered Waste Hauler		NJDEP W	aste	Cubic \	Yards	e Name	of Regist	ered Landfill			<u></u>	I
Newark Carting, Inc.	-	Hauler ID 04509	No.	of Was	0			al Sanitary	Lar	dfill		
City, State Newark, N.J. 07105				Dispos 7/9//	al Date	City, Si		A 08072			2	
Completed by R. McDonald	Title Preside	nt		Si	ignature	MFLI	1	Dat	%	5/	18	

Lo To TILLO TROPI		s	- P						1-1	40	PUUU:	3/00	103	F-89
CK# 10	16		4	lata of the	w ta							Ŀ	· . r!	טרוווו
, CCH O	1	NOTIFI	CATIO	tate of Ne N OF ASB	ESTOS A	BATE	MEN	T						
/ L: DATE	la.	(P	ursuani	to NJAC	8:60 and	12:12	0)	r						7
Date of Notification (1) 06/20/2018			Name o	of Building G	Owner/O	perator	(2)		DOL-	- 10	DAY			
Agencies Notified Type Notification EPA Initial				Address rk Place				and department of the	JUN	· .	0010			
DEP Amended				ate, Zip Co					UUR	E 1	1	-		
X DOL Amendment	#_ ncluding	0		rk, NJ 07	7102			<u> </u>	1		K	2	П	\// /
DOH justification) DCA Cancellation				of Contact Milarcz	yk		86	WA	Telepi 484	none Nu 239-19	mber /	<u>E</u>)	Ц	
Name of Fadlity Where Abatement is Taking	Place /	3)	FAC	ILITY INFO	ORMATIC	N	T	(111 /			item:		- 717	
PSE&G Bayway Sub Station Electr	ical Va	ult					-	e of Facility (4		1	JUN	29	20	118
Street Address	-				1	_	H	School (K-1: Subchapter	8 Other	han K-1	12)			
400 Clifton Street							K	Other (i.e. pretc.)	ivate & c	ommerc	ial bulk	dings,	home	FOL
City (5) Elizabeth							Squ	are Feet	# of FI	oors	LICE	Idg. A		
County (6)	-		County	Code (7)			0					0+		
Union			(STATE	USE ONLY		_	Sul	rent Use (Prio bsurface El	ectrical	Vault				
Name of Monitoring Firm Hired by Building C Bureau Veritas	wner (8))	ASC	M No.				atement Con Construction)				
Street Address 110 Fieldcrest Avenue - Raritan Pla	za l		A			Street PO F		ess 11587				_		
City, State, Zip Code Edison, NJ 08837						City, S	tate.	Zip Code	440				_	\dashv
Project Manager for Monitoring Firm		Т.	Telepho	ne No.		Teleph		hia, PA 19		icense N	No.			
JB Chadwick Start Date (10)			732-22	25-6040		267-	784-	4694	1000	1276				
06/20/2018	06/22/2	2018	pletion	Date (11)		Name Efrai		SHA Monitor ua ,						
Occupancy Stalus During Abatement (Check						Street		7.7.7						
Facility Closed/Vacated During Entire P Abatement Performed Outside of Norma Other – Describe:	eriod of A al Facility	Abatem Hours	ent			Cily, S	itate,	drix Place Zip Code	00.4879.889					_
Scope of Work (Check All That Apply)						Phila	iqelb	hia, PA 19	116					
≥3 sf or ≥3 If ≥160 sf or ≥260 If		Renova Demoliti				×	MG	ull Containme lini-Enclosure lovebag Proc	edure					
	Τ.			1			N L	on-Exempted	(*) and N	lon-Fria	ble Pro	2100000000		_
Location of	1	Location Normall	У		Dass	cription	of		22			Abate Ty	pe	
Asbestos-Containing Material (ACM) TO BE ABATED		ed Solel aintenar			tos Conta	ining N	/ateri		Amo				ţ	
In Facility	Cus	todial S	itaff?	(I.e.	thermat s surfaci			lation,	(Spe		Removal	Repair	ncap	nclo
(13)		(12)	r	1	other mi)	55.0		loval	pair	Encapsulate	Enclosure
Cubaufaa Dual Da 1/51	Yes	No	N/A										कि	
Subsurface Duct Bank/Elec. Vault			X		Trans	site P	ipe	-	300	LF	X			
											+			
											+	-		
Name of Registered Waste Hauter		1.02	JDEP W		Cubic Y			Name of F	Registered	d Landfi	II			
WM of New Jersey			auler ID 7273	INO.	of Wast	e		WM Fai	rless Hi	lls Lar	dfill			
City, State Bethlehem, PA					Disposa 06/21/			City, State		19067				\neg
Completed by	Title				Sie	gnatur	1		>		ate	_		-
Stephen Carne	Envi	ronme	ntal E	ngineer	-	1	/	VA	_		6/20/2	2018	8	

06/20/2018

CK#

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

Date of Notification (1)					Name of Buil	ding Owner/	Operator (2)	12 lb		<u> </u>	y L	
June 25, 2018					PSEG Fossil			N				0.10	
Agencies Notified (X) EPA (X) DEP	Abatement is Taking Place (3) tation County (6)		ation	Street Address 80 Park Plaz City, State, Z	a				IN 2		018		
(X) DOL (X) DOH (X) DCA					Newark, NJ	07102-4109		por harmonia.		LICE	NSIN(TROL 8	L
1 1 5					Name of Con ELVIN VE				Tel. Num (973)418				
N				FACILITY IN	FORMATION								
Sewaren Generating Station	ement is T n	aking Place (3)		Type of Facili () School (K- () Subchapte	-12) er 8 (other th	nan K-12)						
Street Address 751 Cliff Road					(X) Other (i.e.								
City (5)	ounty (6)	•	Country	Cada (7)	Sq. Feet1,0	000,000		#	of Floors	s 8			
Sewaren M	iddlesex		(State U	se Only)	Bldg. Age 69 Current Use (prior if being	g demolishe	ed) E	lectric G	ienera	ating S	tation	
Name of Monitoring Firm Hire	ed by Bldg	. Owner (8)	ASCM N	<u>lo.</u>				Con	tractor (9)				
Street Address		90			Street Addres PO BOX 295								
City, State, Zip Code			.2		City State, Zip Florham Park								
Project Manager for Monitorin	ıg Firm				<u>Telephone Nu</u> (973) 410-921			- 1	License N 00225	Numbe	<u>er</u>		
Scheduled Start Date (10) July 10, 2018	-ta	Dec 1, 2018		n Date (11)	Name of OSH MECS								
(X) Facility Closed/Vacated D	Durina Enti	ire Period of A	batement		Street Addres 5 Linwood Ct								
Value of the same					City, State, Zig Hamilton, NJ								
		s each, 24 ho	ur plant c	coverage									
Source of Work (Check all that													
() Demolition (X) Renovat (X) Large Proj. (>160 SF or >2 (X) Full Containment with Neg Location of Asbestos-	260 LF AC gative Pre	ssure (X)	Mini-Enc	losure (X)	Glovebag Proce				Control Control	M)			
Containing Material (ACM) in Facility (13)	Solely Staff?	by Maint./Cus (12)	todial	Description of thermal system surfacing, VAT	ns insulation,	Amount (S	Specify SF	or Li			nent Ty		
FUEL OIL AREA		110	11//1	Pipe insulatio	n	1,500 LF			10000	em.	Rep.		Enclose
Air Heaters				Thermal Syste			UARE FEE	=T		X	X	X	X
BASEMENT & SERVICE BLDG				Pipe Insulatio		4,000 Lin			X		X	X	X
Name of Reg. Waste Hauler Waste Management of New	Jersey		te Hauler I	ID#	Cubic Yards o	f Waste	11-2-11-2		Name of F Tullytown			Recove	ry
City, State Elizabeth, NJ 07114-2436							Disp. Date 8-18 thru		8		ity, Sta ullytow	te m, PA 1	9007
Completed by (Print or Type)		Title			Signature	1		Г	Date				
ROBERT GROGAN		<u>VP</u>			1/	out	Trans		5-25-18				

		NOT	EICA	St	ate of Ne	w Jerse	y C A D A T	CAFLIT						-			
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PATD

Yes No N/A 6" Piping to DA-203 @ Coker			IAID	7	(1	Pursuant	to NJAC	8:60 ar	d 12:12	0)			40100	TIME				
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Name of Facility Where Abatement is Taking Place (3) Paulsboro Refining Company Street Address 300 Billingsport Rd City (5) Paulsboro County (6) County (6) Clousty (6) Clousty (7) County (8) Clousty (7) Clousty (8) Clousty (9) Clousty (8) Clousty (9) Cloust	X		justification)	i -								0.00			r			
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Total Environmental Solutions Street Address T40 Veterans Drive Street Address T40 Veterans Drive City, State, Zip Code Landenburg, Pa 19350 Project Manager for Monitoring Firm Ed Igelesias Scheduled Completion Date (11) 12/31/2018 S	Glo	oucester			and the state of t			,		Oil	Refinery			olished)				
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Landenburg, Pa 19350 Swedesboro, NJ 08085																		
Ed Igelesias 302-344-4217 856-467-2850 01009 Start Date (10) 06/14/2018 * Coccupancy Status During Abatement (Check Only One) Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Cutside of Normal Facility Hours Other – Describe: Regulated Area will be Established - Active Oil Refinery Scope of Work (Check All That Apply) 23 sf or ≥3 if 23 sf or ≥3 if 23 sf or ≥2 if 24 normally Demolition September 1 of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13) Paging To DA-203 @ Coker S" Piping to DA-203 @ Coker S" Piping CU-6 to Vac Tower Name of Registered Waste Hauler Waste Management Inc. Scheduled Completion Date (11) Name of OSHA Monitor Total Environmental Solutions Street Address 1005 St Georges Lane City, State, Zip Code Landenburg, PA 19350 Street Address 1005 St Georges Lane City, State, Zip Code Landenburg, PA 19350 Full Containment with Negative Pressure Mini-Enclosure Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Type A					- 5.500 P		5	085	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									
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Maintenance/ Custodial Staff? (12) Yes No N/A Thermal Insulation Systems 75 LF x 6" Piping CU-6 to Vac Tower Name of Registered Waste Hauler Waste Management Inc. Name of Registered Waste Hauler Waste Management Inc. Maintenance/ Custodial Staff? (12) Yes No N/A Thermal Insulation Systems 75 LF x Thermal Insulation Systems 21 LF x Name of Registered Landfill Gloucester County Landfill City, State South Harrison NJ Maintenance/ Custodial Staff? (12) NAMINE State South Harrison, NJ	٨		90000				Asha-				ol (ACSA)			-	T	Ť		
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Charles J Perri Project Manager 06/27/2018				1	t Ma	anager		S	ignature	7	7		- 1	Date 06/27	/20	18	-	

^{*}To support scheduled and unscheduled plant shutdown, revised notification will be submitted for each project.

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Date of Notification (1)	A THE		(ursuant to NJAC 8:6	0 and 12:	120)	II LI	JUN	20	1 70	10
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City, State, Zip Code						4	50 Sou hy, State, Zip	C eda	River	Stree	<u>t</u>			_	
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Project Manager the Monit	oring Firm		T	Telaphon	a No.	1	elephone No.			Lianne No.					
Steat Date (10)	1	Scheduler	d Come	lation D	m /123	- 2	01 - 32 9 arme of OSH	74	44	0038	8				
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Name of Registered Waste	Haulet			DEP W		Cubic Yar of Waste	,	MITTE	of Register	red Landfill			-		
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State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT (Pursuant to NIAC 8-60 and 12:120)

(Pursuant to NJAC 8:60 and 12:120) Name of Building Owner/Operator (2) Date of Notification (1) GARDENS JEFFER SON Street Address JUN 29 Type Notification Agencies Notified E Initial ☐ EPA City, State, Zip Code DEP Amended . NJ. 4 7.0 STOS CONTROL & CLIFTON Amendment # Ø DOL Telephone Number NSING Emergency (including Name of Contact DOH justification) BAUER MR. Cancellation DCA **FACILITY INFORMATION** Type of Facility (4) Name of Facility Where Abatement is Taking Place (3) GARDENS School (K-12) TEHERSON Subchapter 8 (Other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) Bldg. Age # of Floors Square Feet City (5) 1949 2 16000 Current Use (Prior if being demolished) County Code (7) County (6) (STATE USE ONLY) RESIDENCE Name of Abatement Contractor (9) ASCM No. Name of Monitoring Firm Hired by Building Owner (8) Best Removal Inc Street Address Street Address 450 South River Street City, State, Zip Code City, State, Zip Code Hackensack, NJ 07601 License No. Telephone No. Project Manager for Monitoring Firm Telephone No. 00388 201-329-7444 Name of OSHA Monitor Scheduled Completion Date (11) Start Date (10) 7/10/18 Omega Environmental Street Address Occupancy Status During Abatement (Check Only One) 280 Huyler Street □ Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours
Other - Describe: 730 AK TO 5:22 PM South Hackensack, NJ 07606 Scope of Work (Check All That Apply) Full Containment with Negative Pressure ≥3 sf or ≥3 lf
 ≥160 sf or ≥260 lf Renovation Mini-Enclosure Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Type Is Location Normally Description of Location of Used Solely by Asbestos Containing Material (ACM) Amount Asbestos-Containing Material (ACM) Maintenance/ (i.e. thermal systems insulation, surfacing, (Specify Repair TO BE ABATED Custodial Staff? SF or LF) VAT, or In Facility (12)other miscellaneous) ** (13)Yes No N/A 470 SF 100H # 3 THERHAL SURFACING BOILER 260 LF HERMAL SYSTEMS INSULATION BOUZA Name of Registered Landfill Cubic Yards NJDEP Waste Name of Registered Waste Hauler of Waste Hauler ID No. ISCYS Minerva Enterprises, 17109 Best Removal Inc City, State Disposal Date 18 Wavnesburg Hackensack, NJ 07601 Signature Completed by

Estimator

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

J. Maiorano

CIC#.	2885 NOTI	State of I	New Jersey	RATEMENT	г		
- 0 "		ursuant to N.J.A			MEC	EIVE	
Date of Notification	06-26-2015	Bergen County 7	Owner / Operator			2 0 2018	
Agencies Notified EPA	Type Notification	Street Address 540 Fairview Ave	The state of the s			2 3	in the second
□ DEP □ DOL	☐ Initial ☐ Amended	City, State & Zip Paramus, NJ 0765	2		ASBEST	OS CONTROL &	
☐ DOH ☐ DCA	☐ Emergency ☐ Cancellation	Name of Contact Jim Napolitano o	t r Thomas Jodice	201-937-9845		Telephone Numb 973-837-1515 ex: 230	
Name of Facility Wh	nere Abatement is Taking F	FACILITY IN	FORMATION				
Bergen County Tech	nnical and Special Services	Place (3)	Type of Faci	(K-12)			
Street Address 327 East Ridgewood	d Avenue		Other (i.	oter 8 (Other the e. private & co	mmercial buildin	ngs, homes, etc.)	
City (5)	County (6)	County Code (7)	Square Feet 2,400		oors I	Bldg. Age 30	
Paramus, NJ	Bergen		Current Use Campus Buil	(Prior if being o	demolished)		
Health & Safety Ser	Firm Hired by Building Ow vices	ner (8) ASCM N		atement Contra	oup, LLC		
Street Address PO Box 365			Street Addre				
City, State & Zip Co Berlin, NJ 08009			City, State & Trenton, NJ	Zip Code			
Project Manager for Mr. Jim Proctor		Telephone Number 856-452-1311	Telephone N 609-914-427	umber	License N	Number 01185	
Scheduled Start Dat 07-09-201		mpletion Date (11) 7-20-2018	Name of OSI		ories Inc		
☐ Facility Clos	During Abatement (Check of ed/Vacated During Entire F	nly one) Period of Abatement	Street Addres	SS			
Abatement F Describe:	Performed During 1st Shift 8:00am to 5:00pm		City, State & Union, NJ 07	Zip Code	7.0		
Scope of Work (Che	upied During Abatement cck all that apply)			-1L280280 / / / / / / / / / / / / / / / / / / /			
≥3 sf or ≥3 lf ≥3 sf or ≥3 lf ≥400 f>000		Renovation		☐ Mini-En	closure	Negative Pressure	:
⊠ ≥160 sf ≥260	p-catch	☐ Demolition		☐ Non-Ex	Bag Procedures/ cempted and Nor	'Cut & Wrap n-Friable Procedu	ıre
Asbesto	cation of os-Containing	Is Location Normally Used	Description Asbestos-Con		Amount (Specify	Abatement T	уре
<u>TO B</u>	erial (ACM) E ABATED	Solely by Maintenance or	Material (A (i.e., thermal s		SF or LF)	Re Re	Enc
in	Facility (13)	Custodial Staff? (12)	insulation, surfactor or other miscell	cing, VAT		Encapsular Repair Removal	Enclsoure
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			Transite	,	240 SF		블
N							
Name of Registered Resource Manageme		NJDEP Waste Hauler ID No. 0035218	Cubic Yards of Waste TBD	Name of Reg Grows Landfi	istered Landfill		
City, State Trenton, NJ	3.000, 220	0030210	Disposal Date	City, State Morrisville, P	1		
Completed By (Print Mr. Brian J. Haney	or Type)	Title	Signature	INOTISVIIIE, P	hu h	Date	
Wit. Dilati J. Hatley		President	1991A	1	M	06-26-2018	

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Date of Notification		EZRAL					Owner / Operato	or (2)						
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Agencies Notified EPA	Type Notific	ation			Addr		h Danil		IU L	JUN	29 21	lŏ	L	2
DEP	Initia	r	-			& Zip C	b Road						+	
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Street Address									Other than	K-12)				
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							Square Feet		# of Floors	3	Bldg. Ag	е		
City (5)		County (6)	Cou	unty (Code ((7)	20000			1		76		
Warren		Somerset					Current Use	(Prior i	f being den	nolished)				
							School							
Name of Monitoring		y Building Owr	ner (8)		ASC	CM No.								
TTI Environment	al						BRISTOL E		ONMENT	AL INC				
Street Address	-1-04-4						Street Addre							
1253 North Churc City, State & Zip Co						Corpount-	1123 BEAV							
Moorestown, NJ							City, State & BRISTOL, I							
Project Manager for		irm	Telep	hone	Numb	her	Telephone N			License	Number			
Mike Stocku	ke Stocku 609				3969	001	215-788-60			Liochiso	0050	9		
Scheduled Start Dat	cheduled Start Date (10) Scheduled Complete				te (11)	Name of OSI		nitor					
6/26/18			6/28/				BRISTOL E	NVIR	ONMENT	AL INC				
Occupancy Status E							Street Addres	7-7-	AND THE STATE OF T					
		During Entire P					1123 BEAV							
E		utside of Norm	al Hou	ırs –	/am to	o 3pm	City, State &							
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ir	Facility		Custo		Staff?		nsulation, surfac	cing, V	AT		Remova	Repair	sde	Enclsoure
	(13)			(12)	NI/A	-	or other miscell	aneous	s)		/ <u>al</u>	=	Encapsulate	ure
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Name of Registered	Waste Haule	er	ш	NJ	DEP V	Naste	Cubic Yards	Name	of Registe	ered Landfil				ш
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SERVICE TRANS	PORT GRO	UP, INC.		20	990		3	MINE	ERVA LAN	IDFILL				
City, State					Disposal Date	City,					-311120			
	NEW CASTLE, DE 19720						TBD	WAY	NESBUR	G, OH 446	888			
Completed By (Print				Titl			Signature			1	Date			
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Date of Notification (1)	. In although die		-		Name	of Buildin	ng Owner/Operator ((2)		EGEL	W	E	1	1
06 /	26 /	18			V102400.000	l Corp	ig Owner/Operator ((2)			U	5		
Agencies Notified	Type Noti	fication				t Address			7		14	5	114	
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☑ DOH	_	dment #_	-1 -1°-				NJ 08758		A	SBESTOS CON	VTRC	L&		10 confession
☐ DCA (NJAC 5:23-8)	☐ Emerg justific		cludin	g	-	of Conta				Telephone Numb	G		and the second s	1
,	☐ Cance				Al	DelPrete	73.9			609-693-039				
					FA	CILITY II	NFORMATION							
Name of Facility Where	Abatement i	s Taking	Place	e (3)				Type of Fa	cility (4)				
Residence								School		,				
Street Address								Subcha	pter 8 ((Other than K-12)	-:	man sa		
								homes,		rate and commer	ciai bi	iliaing	JS,	
City (5)								Square Fee	et	# of Floors	BI	dg. A	ge	
Waretown								1500 sf		1		70		
County (6)					Cou	nty Code (7)(STATE USE ONLY)			r if being demolis	hed)			
Ocean	11. 11. 5							Resider						
Name of Monitoring Firm N/A	Hired by Bi	uilding C)wner	(8)	ASCM	No.	Name of Abateme		1.7					
Street Address							Guardian Co	ntracting,	Inc.					
offeet Address							Street Address	11.24.04						
City, State, Zip Code	-						1889 Route 9							
- 91 - 14101 - 15 - 0000							City, State, Zip Co		007					
Project Manager for Mon	itoring Firm			Te	elephone	No	Telephone No.	New Jerse	y 007		Section 1			
	•				портисто		732-349-9932)		License No. 00624				
Start Date (10)		Sched	uled C	omp	letion Da	ite (11)	Name of OSHA M			00024				
07 /09 /	18	1000			13 /	and the second second	E.M.S.L. Ana	lytical						
Occupancy Status During	Abatement	t (Check	only	one)			Street Address	•						-
□ Facility Closed/Vacate	ed During Er	ntire Per	iod of	Abat	tement		1056 Stelton							
Abatement Performed	Outside of	Normal	Facilit	у Но	urs - Des		City, State, Zip Co	ode						
Time of Abatement: _			/l/	_P	VI	AM	Piscataway, I	New Jerse	y 0885	54				
Scope of Work (Check al	I that apply)				LES MES									-
≥3 sf or ≥3 lf			□Re	nova	ation		☐ Full Cont		n Negat	tive Pressure				
≥160 sf or ≥260 lf			⊠ De	moli	tion		☐ Glovebag	g Procedure						
			la		ation	T	⊠ Non-Exe	mpted (*) an	d Non-	Friable Procedure	9			
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exterior						asbest	os siding			1500 sf	\boxtimes			
-														
Name of Registered Wast					NJDEP		Cubic Yards of	Name of F	Registe	red Landfill		_		
Guardian Contraction	ng, Inc.				Hauler II	O No.	Waste	T.R.R.F	0.50					

Toms River, New Jersey Completed By (Print or Type)

Nicholas Fernicola

Project Manager

Disposal Date

City, State

07/13/18 Tullytown, Pennsylvania Signature

Date

City, State

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P	ALD							NEG	TE	102	50	
<u></u>					BESTOS ABATEMEN 50-7 and 12:120		4			1 (1)	L	
Date of Notification	(1)		NAME OF TAXABLE PARTY.	-	ng Owner/Operat		(2)	1				111
6/25/2018			Matt	hew 1	Eberhart			LI JUI	V 29	2018	5	$\ U\ $
Agencies Notified	Type Notific	ation	Street 2	Address								
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[]DEP	Notifie	cation	City, St	tate, Z	ip Code				CENSI		II is	
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100 to 200 200 to 200 t	[]EMERGEN		Matt				101011					
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	1			FACILIT	Y INFORMATION							
Name of Facility Whe		is Takir	ng Place	(3)		T	ype of Facili	ty (4)				
Matthew Eberha	art						[]School					
Street Addres						\dashv	[]Subchapt [X]Other (i					
Joseph Industry								ildings, h				
						s	quare Feet	# of Floo	rs B	Ldg.	Age	
City (5		County	(6)	1	County Code (7)	- 11						
Montclair		ESSEX			(STATE USE ONLY	, c	urrent Use (E	rior if be	ing de	molis	hed))
Name of Monitoring F Owner (8)	irm hired by	Building	ASCM	No.			nt Contractor					
N/A							nagement,	Inc.				
Street Address					Street Addr		C+					
							opher St.					
City, State, Zip Code	е				City, State Montcl		p Code , NJ 070 4	12				
Project Manager for	Monitoring F.	irm Tel	ephone	Number	Telephone N	umbe	r	ļ	icense	Numl	per	
		N/	A		(973) 7	44-	8800		0037	71		
Scheduled Start Date 7- 24- 18	The second second	ed. Compl		ate (11 .8	Name of OSH N/A	A Mo	nitor					
Month Day Ye Occupancy Status Dur [X] Facility Clos	ing Abatemen	t (Check	only on		Street Addr	ess		- 111-111-111-111-11				
of Abatement []Abatement Per		de of No	rmal Fac	aility	City, State	7.11	n Code					
Hours - Descr []other - Descr	cibe: «OffHour	s Descri	pt»	55	City, State	, 41	pode					
Scope of Work (Check	all that ap	ply)										
[X]≥3 sf or []≥160 sf o		-	X]Renova]Demoli		[X]Mir [X]Glo	i-En veba	ntainment wit closure g Procedure		Press	ure		
			Is		[]Nor	-Fri	able Procedu	ce	Ab	ateme	nt 1	Type
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Asbestos-Con			Used		Asbestos-C Material			Amount (Specify	E	RE	C	C
Material (В	Solely y Main-		(i.e., them		1000	SF or	0	PA	P	PO
In Facil	ity	Cu	enance/ stodial		insulation, su or other mis			LF)	V A	IR	S U	S U
(13)		Yes	aff (12)	N/A	or other mis	cerr	aneous)		L		L	R
Basement			X	Pi	pe Insulat	cio	n	55 LF	X			
										-		
								1 3 T	26:11	1		
Name of Registered W AZTECH MANAGI		AC HE	DEP Was uler ID 7040		Cubic Yards of Waste 0.5	200004	Name of Regis		77.7.7.			
City, State					Disposal Date		City, State					
Montclair, NJ	07042				7/27/18	/	1199 Rai	ndall A	ve,	RLOI	nx	
Completed By (Print		tle			Signatu	ire	// /	1.	Date		0	
Constantine V:	ivian P	reside	ent			On!	spantine	JIVIA	6/25	5/201	ک	
							e V	Ť				

Check# 13110

State of New Jersey - Notification of Asbestos Abatement (Pursuant to N.J.A.C. 8:60-7 and 12:120-7)

GAC Project # 060-18 Date of Notification (1) Name of Building Owner/Operator (2) June 25, 2018 RUTGERS, THE STATE UNIVERSITY OF NJ Agencies Notified Notification Type Street Address ☑Initial Notification ENVIRONMENTAL HEALTH & SAFETY DEPT. (REHS) ☐ EPA ☐ Amended Notification # 74 STREET 1603, BLDG 4116, LIMINGSTON CAMPUS -DCA ■ Emergency (including City, State, Zip Code X DOL PISCATAWAY, NJ 08854 justification) ■ DEP- No Longer REQUIRED **□**Cancelled Name of Contact Telephone Number X DOH MICHAEL F. SMITH, ENV. 848-445-2550 2 9 2018 **HEALTH & SAFETY FACILITY INFORMATION** ASBESTOS CONTROL & LICENSING Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) ALEXANDER JOHNSTON HALL, BLDG# 3100 School (K-12) ☐Subchapter 8 (other than K-12) Street Address Other (i.e. private & commercial buildings, homes, etc.) COLLEGE AVENUE CAMPUS Sq. Feet: N/A # of Floors: 3 Bldg. Age: 100+ years City (5) County (6) County Code (7) Current Use (prior if being demolished): ACADEMIC NEW BRUNSWICK (State Use Only) MIDDLESEX Name of Monitoring Firm Hired by Bldg. Owner (8) ASCM No. Name of Contractor (9) ATC 00098 GREENWOOD ABATEMENT CONSULTANTS, INC. Street Address Street Address 3 TERRI LANE 511 MAIN STREET City, State, Zip Code City State, ZipCode BURLINGTON, NJ 08016 BUTLER, NJ 07405 Project Manager for Monitoring Firm Telephone Number Telephone Number License Number BRIAN R. KEARNEY 609-386-8800 973-492-0477 00840 Scheduled Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 07/05/18 07/09/18 ENVIROVISION, INC. Occupancy Status During Abatement (Check only one) Street Address ☐ Facility Closed/Vacated During Entire Period of Abatement 20-21 WARGARAW ROAD, BLDG# 35E Abatement Performed Outside of Normal Facility Hours -City, State, Zip Code FAIRLAWN, NJ 07410 ☑ Other- Describe: Schedule: 4PM - 5AM Daily (24 HOURS & WEEKENDS AS NEEDED) Scope of Work (Check all that apply) ☐Full Containment with Negative Pressure $\square \ge 3 \text{ sf or } > 3 \text{ lf}$ **X**Renovation ☐ Mini-Enclosure **⊠**≥ 160 sf or ≥ 260 lf ☐ Demolition Glove bag Procedure / Wrap & Cut ☑Non-Exempted (*) and Non-Friable Procedure Location of Asbestos-Containing Is Location Normally Used Description of Asbestos Containing Material Amount Abatement Type Material (ACM) in Facility (13) Solely by Maint./Custodial (ACM) (i.e. thermal systems insulation, surfacing, (Specify SF Remove Repair Encap Enclose Staff? (12) VAT, or other miscell.) or LF) YES NO NA 3rd Floor X VAT 2000 SF X Name of Reg. Waste Hauler NJDEP Waste Hauler ID # 30 CY Name of Registered Landfill Cubic Yards of Waste: See Hauler Below #1 & 2 See Below G.R.O.W.S. North Landfill Hauler #1) Greenwood Abatement Consultants, Inc. - Butler, NJ 07405 Disposal Date City, State 100 New Ford Mill NJDEP # 12561 Rd. Morrisville, Pa Hauler #2) Newark Carting, Inc., Newark, NJ 04509 07/09/2018 19067 NJ DEP # 4509 215-736-1700 Completed by (Print or Type) Signature Date RAYMOND C. PEDALINO SENIOR PROJECT June 25, 2018 Raymond C. Pedalino MANAGER

PATD

State of New Jersey NOTIFICATION OF ASBESTOS ABATEMENT

(Pursuant to NJAC 8:60 and 5:16)

Date of Notification (1)		_	-	Name	of Building	g Owner/Operator (2) E G	EIVE	po	10		
	7 / 18				gers Uni		11		k #	50	1,0	A STATE OF THE STA
Agencies Notified T	ype Notification	_		Street	Address		1)				UK.	
	Initial					ridge Road	J L JUN	2 9 2018	14			
I i i i i i i i i i i i i i i i i i i i] Amended				State, Zip C				The same of the sa		-	
□ DHSS	Amendment #_					NJ 08854	ASBESTO	S CONTROL &				
DCA (NJAC 5:23-8)] Emergency (in justification)	cluain]		of Contac			Telephone Numb	er			-
] Cancellation				n Stanto			848-445-2419	The state of the s			
						IFORMATION			>>			
Name of Facility Where Aba	tement is Taking	Place	(3)				Type of Facility	(4)				
Facilities Maintenace							☐ School (K-12					
Street Address								(Other than K-12)				
590 Taylor Road							homes, etc.)	rivate and commerc	ciai bu	liaing	S,	
City (5)		2-1-10-1					Square Feet	# of Floors	Blo	lg. Ag	je	
Piscataway							7000	1		50		
County (6)				Coun	ty Code (7)(STATE USE ONLY)	Current Use (Pri	or if being demolish	ned)			
Middlesex							Vacant					
Name of Monitoring Firm His	ed by Building C	wner	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)					
Criterion Laboratories	3					Asbestos an	d Mold Service	s, Corp.				
Street Address						Street Address						
400 Street Road						3859 Sylon B	oulevard					
City, State, Zip Code						City, State, Zip Co	ode					
Bensalem, PA 19020						Hainesport, N	NJ 08036					
Project Manager for Monitor	ing Firm		Tele	phone	No.	Telephone No.		License No.				
Mike Panepresso			21	5-244	-1300	609-702-0400		00862				
Start Date (10)					te (11)	Name of OSHA N	Ionitor					
7/_6_/_	18	7 /	_10	_ / _	18	EMSL Analyt	ical, Inc.					
Occupancy Status During Al	patement (Check	only	one)			Street Address						
☐ Facility Closed/Vacated [200 U.S. Rou	te 130 North					
Abatement Performed Or Time of Abatement:						City, State, Zip Co	ode					
		V1/			AIVI .	Cinnaminsor	i, NJ 08077					
Scope of Work (Check all the	at apply)					M Eull Con	tainmant with Nac	gative Pressure E	- m 1	In		00
≥3 sf or ≥3 lf			novati				losure	jative Pressure	116	103	i Li.	
≥160 sf or ≥260 lf		☐ De	molitic	n		Gloveba	g Procedure	n-Friable Procedur				
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TO BE ABATE IN Facility	D	Fig. 10020785	todial		(i.e	e., thermal systems surfacing, VAT		(Specify SF or LF)	Removal	air.	Encapsulate	Enclosure
(13)			(12)			other miscellane		Of Of Lif	-		ılate	re
		Yes	No	N/A								
Dans Office Area					Floor T	ile & Mastic		225 SF	\boxtimes			
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	MI parameter and the second se						13					
Name of Registered Waste I	Hauler		1000	JDEP \		Cubic Yards of	Name of Regis					
Champion			-	32707		Waste 5	Grand Cer	itral				
City, State						Disposal Date	City, State					
Hainesport, NJ						7/10/18	Penn Argy	le, PA				
Completed By (Print or Type) Title)				Signature	VAA	// , Da				d
Joann Mullarkey	0	ffice	Coord	dinato	r	1600	millell	Milling 1	0-	27	7-1	8
ASB-41		2 0		(g 867	32	//			<i>y u</i>	- /	0 8	,
MAY 11	*	Do no	use th	nis form	for asbes	tos licensure exem _l	oted activities.	9'				

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(Pursuant to NJAC 3:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) Rutgers. The State University of New Agencies Notified Type Notification Street Address 74 Street 1603, Building 4116 JUN 2 9 2018 FPA Initial City, State, Zip Code DEP Amended × DOL Amendment # Piscataway, NJ 08854-8036 Emergency (including ASSEST WS ABONTHOL & Name of Contact DOH justification) Michael Smith DCA Cancellation FACILITY INFORMATION Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Labor Education Center School (K-12) Subchapter 8 (Other than K-12) Street Address Other (i e. private & commercial buildings, homes, 50 Labor Center Way etc.) Bldg. Age # of Floors Square Feet 50+ New Brunswick 12.000 Current Use (Prior if being demolished) County (6) County Code (7) (STATE USE ONLY) Labor Education Center Middlesex Name of Abatement Contractor (9) Name of Monitoring Firm Hired by Building Owner (8) ASCM No. ecoservices, LLC ATC Group Services Street Address Street Address 303 B National Road 3 Terri Lane, Suite 4 - 5 City, State, Zip Code City, State, Zip Code Exton, PA 19341 Burlington, NJ License No. Telephone No. Project Manager for Monitoring Firm Telephone No. 01161 484-872-8884 609-386-8800 Brian Kearney Name of OSHA Monitor Start Date (10) Scheduled Completion Date (11) **EMSL** 5/23/18 31 Street Address Occupancy Status During Abatement (Check Only One) 200 Route 130 Facility Closed/Vacated During Entire Period of Abatement City, State, Zip Code Abatement Performed Outside of Normal Facility Hours Other - Describe: 4 pm - 12 am Cinnaminson, NJ Scope of Work (Check All That Apply) Full Containment with Negative Pressure ≥3 sf or ≥3 lf Renovation Mini-Enclosure ≥160 sf or ≥260 lf Demolition Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Type Normally Location of Description of Used Solely by Amount Asbestos Containing Material (ACM) Encapsulate Asbestos-Containing Material (ACM) Enclosure Maintenance/ (Specify (i.e. thermal systems insulation, Removal Repair TO BE ABATED Custodial Staff? SF or LF) surfacing, VAT, or In Facility (12)other miscellaneous) (13)Yes N/A No 110 LF X X Pipe fitting insulation* Bldg. 6109, Basement, Chase X 110 LF X Pipe fitting insulation* Bldg. 6109, Floor 1 *cut and wrap procedure Name of Registered Landfill NJDEP Waste Cubic Yards Name of Registered Waste Hauler Hauler ID No. of Waste **GROWS** Landfill Waste Management of NJ 20 City, State Disposal Date City, State Morrisville, PA TBD Trenton, NJ Signature Completed by 6/28/18 Jack Bally Sr. Project Manager

ASB-41 (R-06-08)

Do not use this form for accestos licensure exempted activities.

Date of Notification (1)			Name	of Buildin	g Owner/Operator (2)	184/25 =	7 7	лг	Ta) per	
6/27/	18		Ru	tgers Un	iversity	/ Job#	Chk.	# 4	70	70	m)
Agencies Notified Type Notific	ation		Street	t Address			× 210				
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☑ DOLWD ☐ Amende	d			State, Zip			UI JUN 2	0 20	118	-11	1
□ DHSS Amendm		_	-0.000		, NJ 08854					1	
DCA Emerger		ng		959	<u> </u>		I WONE STEEL	C/S 5 197		-	
(NJAC 5:23-8) justificat			1000000	of Contac			Telephone Numb			ÖL.	
Cancella	ition			an Stanto			848-445-241	9			
Name of Equilibria/have Ababasashi	T.1: DI	(0)	FA	CILITY IN	NFORMATION						
Name of Facility Where Abatement is Building #3716 & 3717 (ONE B						Type of Facility					
	UILDING)				School (K-12	²⁾ 8 (Other than K-12)				
Street Address							rivate and commer		ildino	IS.	
581 Taylor Road						homes, etc.)			•	998429	
City (5)						Square Feet	# of Floors	BI	dg. A	ge	
Piscataway						1875	1		50		
County (6)			Cour	nty Code (7	7)(STATE USE ONLY)	Current Use (Pr	ior if being demolis	hed)			
Middlesex						Vacant					
Name of Monitoring Firm Hired by Buil	ding Owne	(8)	ASCM	No.	Name of Abateme	ent Contractor (9)				-315	
Criterion Laboratories					Asbestos and	d Mold Service	es, Corp.				
Street Address					Street Address						
400 Street Road					3859 Sylon B	oulevard					
City, State, Zip Code					City, State, Zip Co	ode					
Bensalem, PA 19020					Hainesport, N	J 08036	*				
Project Manager for Monitoring Firm	110000000000000000000000000000000000000	Tele	phone	No.	Telephone No.		License No.				
Mike Panepresso		2	15-244	-1300	609-702-0400		00862				
Start Date (10)	Scheduled	Comple	tion Da	te (11)	Name of OSHA M	lonitor				_	_
7 /12 /18	8	/ _ 03	3_/	18	EMSL Analyti	ical, Inc.					
Occupancy Status During Abatement (Check only	one)			Street Address					-	_
☐ Facility Closed/Vacated During Enti					200 U.S. Rout	te 130 North					
Abatement Performed Outside of N	ormal Facil	ity Hour	rs - Des	cribe	City, State, Zip Co		1				_
Time of Abatement:AM	PM/	PM-	_	AM	Cinnaminson						
Scope of Work (Check all that apply)						•					
≥3 sf or ≥3 lf	Mo	enovati				ainment with Neg	gative Pressure				
⊠ ≥160 sf or ≥260 lf		emolitic			☐ Mini-Enc						
		edwarf.co.co.co.fr		3			n-Friable Procedur	e			
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IN Facility	Cu	stodial	Staff?	(1.6	surfacing, VAT,		(Specify SF or LF)	Remova	=	psu	Enclosure
(13)		(12)	_		other miscellane	ous)	,	_		Encapsulate	e,
	Yes	No	N/A								
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Exterior 3717			\boxtimes	Transit	e Siding		1875 SF	\boxtimes			
		П									
			1					-			
Name of Designated Wests Harden				<u> </u>					Ш	Ш	Ш
Name of Registered Waste Hauler		100	IJDEP \ lauler I[Cubic Yards of Waste	Name of Regis					
Champion			32707		5	Grand Cer	ntral				
City, State					Disposal Date	City, State				11-11-1	
Hainesport, NJ					8/3/18	Penn Argy	le, PA				
Completed By (Print or Type)	Title				Signature	700	, Da				
Joann Mullarkey	Office	Coord	dinato	r	Char	11/11/	111111111 7		2	7-1	2
ASB-41					Thum	r jern	cencery (p.	× 1	(0)	
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Date of Notification (1) 06/26/2018			f Building C E SCHO				į.	M	And the second second	HIN	0.0	200	10	100
Agencies Notified Type Notification		Street A	ddress _emoine	Avenu	ie .					UUN	2	j Zi	10	
EPA Initial Amended Amendment #			ate, Zip Coo ee, NJ	de		100			ASB		OS C			8.
Emergency (included justification) DCA Emergency (included justification) Cancellation	ding -		f Contact DeNichilo					335200	ephone 1-585					
		FACI	LITY INFO	RMATI	ON									
Name of Facility Where Abatement is Taking Place Fort Lee ES #1	ce (3)					process.	of Facility (4 School (K-1)	98.00 State						
Street Address 250 Hoym Street						X S	Subchapter Other (i.e. parts)	8 (Oth				lings,	home	s,
City (5) FORT LEE							e Feet	# o 2	f Floors	3	100000	ldg. A 0+	ge	
County (6) Bergen			Code (7) USE ONLY)			Currer	nt Use (Prio	or if bei	ng den	nolish	ed)			
Name of Monitoring Firm Hired by Building Owne Westchester Environmental	r (8)	ASCN 0012				of Abat Froup,	ement Con	tractor	(9)					
Street Address 307 North Walnut Street	eet						s urg Tpke							
City, State, Zip Code West Chester, PA 19380					City, S	tate, Zi	p Code ale, NJ 0	7403						
Project Manager for Monitoring Firm Philip Conteh		Telepho 610-43	ne No. 31-7545		Teleph	one No 710-9).		Licen 0108	ise No),			
	eduled Cor 24/2018	mpletion	Date (11)		Name		A Monitor						-12-111 -2-1	
Occupancy Status During Abatement (Check Only	y One)				1777	Addres						3		-
Facility Closed/Vacated During Entire Period	of Abater	ment					urg Tpke							
Abatement Performed Outside of Normal Fa Other – Describe:	cility Hour	s		_		tate, Zip mingd	o Code ale, NJ 0	7403						
Scope of Work (Check All That Apply)					7/									
≥3 sf or ≥3 lf x ≥160 sf or ≥260 lf	Renova Demoli				×	Mini	Containme i-Enclosure vebag Proc i-Exempted	edure					3	
	Is Locat	ion						() =			T	Abate	ment	
Location of	Norma	lly	-	Des	scription	of						Ty	pe T	
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	es No	N/A			8								to	
Boiler Room	Di		Tank ting Ins	ulatio	n		50 SF 1 LF		X					
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				Cubic										
Name of Registered Waste Hauler	Hauler ID No						Name of F	3	red La	ndfill				
GL Group, Inc	0033034						Minerva							
City, State														- 1
Bloomingdale, NJ Completed by				TBD	sal Date		City, State Waynes	burg,						



MAY 11

Date of Notification (1)	LABAR			Nar	ne of Buildi	ing Owner/Operator	(2)	- \ E (M	P	7	// Tr	7 6			
6 /	18			Name of Building Owner/Operator (2) Hamilton Township School District / Job #18096-5336 Check #10286											
Agencies Notified	Type Notificat	ion		Stre	Street Address										
⊠ EPA				91	0 Park Av	enue		JUN	29	20	8				
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(NJAC 5:23-8)	/ (IIICIUUI 1)	ng	Nan	ne of Conta	ct	ASSESTOS CONTROL &									
	Cancellatio			В	uilding A	dministration	609-631-4100								
				F	ACILITY II	NFORMATION									
Name of Facility Where A	batement is Ta	king Plac	ce (3)				Type of Facility	(4)							
ALexander ES		i					School (K-12)								
Street Address							Subchapter 8 (Other than K-12)								
20 Robert Frost Driv	/e						Other (i.e., private and commercial buildings, homes, etc.)								
City (5)		701					Square Feet # of Floors Bldg. Age					-			
Hamilton, NJ 08690															
County (6)				Cou	inty Code (7)(STATE USE ONLY)	Y) Current Use (Prior if being demolished)								
Mercer					THE PARTY OF A STREET OF STREET	Managara Literatura (n. 1905).	High School								
Name of Monitoring Firm H	lired by Buildin	g Owner	(8)	ASCN	1 No.	Name of Abateme	ment Contractor (9)								
Westchester Environ	nmental	72													
Street Address					AbateTech, Inc. Street Address										
307 North Walnut St	reet					30 Maple Ave. PO Box 25									
City, State, Zip Code			3.7			City, State, Zip Co									
Westchester, PA 193	80					Lumberton, NJ 08048									
Project Manager for Monito	oring Firm		Tele	ephone	ne No. Telephone No. License No.										
Matt Abraham	2070		6	10-996	3-3515	609-265-2107	i	00529							
Start Date (10)	Sch	eduled (Comple	etion Da	ate (11)	Name of OSHA M	onitor								
7 /16 /			8.5		/ 18 EMSL Analytical										
Occupancy Status During A	Abatement (Che	eck only	one)		Street Address										
☐ Facility Closed/Vacated															
Abatement Performed C Time of Abatement:															
Scope of Work (Check all the	nat apply)														
≥3 sf or ≥3 if ≥160 sf or ≥260 if			novati												
		Is	Locat	ion	T				1	atem	ent T	vne			
Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)			Norma d Sole intena todial (12)	ely by nce/		Description of stos Containing Mat , thermal systems in surfacing, VAT, other miscellaned	erial (ACM) nsulation, or	Amount (Specify SF or LF)	Removal	Repair	Encapsulate	Enclosure			
Areas		Yes			Floor til	e & mastic	i	140 SF total							
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[2] - 17 : 17 : 18 : 18 : 18 : 18 : 18 : 18 :					Vaste O No.	Cubic Yards of Waste 40	Name of Registered Landfill G.R.O.W.S. Landfill								
City, State						Disposal Date	D4								
Lumberton, NJ						7/20/18	Tullytown,	PA							
ompleted By (Print or Type Gwendolyn Trumbetti	20	le Operati	ons C	oordi	nator	Signature	wit	Dat	e U	26	1	8			
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* Do not use this form for asbestos licensure exempted activities.

CK 19285

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

	AIII				NI	of Duildin	~ 0.40	nor/Operator (2)		F.23	7 0	VII I	CI	
Date of Notification (1) 6 /	26 /	Name of Building Owner/Operator (2) Hamilton Township School District / Job #18006-5336 Check #10285													
						114									
Agencies Notified ⊠ EPA	Type Notifica	ation				Address Park Ave	nue		JUN 2 Q 2018						
⊠ DOLWD	☐ Amended	i				State, Zip C			12 21	11 /					
⊠ DHSS	Amendme	ent#			Common Street	nilton, N.		300				-			
DCA	☐ Emergen		uding	ļ .				330		Telephone Num	per S	CCI	THO	18	
(NJAC 5:23-8)	justification					of Contact			Telephone Number S CONTING 609-631-4100						
	☐ Cancellat	ion			Bui	Iding Adı	minis	stration	Si t	609-631-410	0			_	
	72.5			FAG	CILITY IN	(F. 304	(4)				_				
Name of Facility Where A	(3)					Type of Facility (4) ⊠ School (K-12)									
Steinert HS					2) 8 (Other than K-12)										
Street Address							private and comme	ivate and commercial buildings,							
2900 Klockner Road						homes, etc.)									
City (5)					100.00		Square Feet	# of Floors	Ble	dg. Ag	je				
Hamilton, NJ 08690															
County (6)						ty Code (7	(STAT	TE USE ONLY)							
Mercer						High School									
Name of Monitoring Firm	Hired by Build	ling Ow	vner (8)	ASCM	No.	Nan	ne of Abateme	ement Contractor (9)						
Westchester Enviro				Α	bateTech, lı	Inc.									
Street Address				Stre	et Address										
307 North Walnut S				30 Maple Ave. PO Box 25											
City, State, Zip Code				City, State, Zip Code											
Westchester, PA 19															
Project Manager for Monit	Tele	phone	No	Tele	phone No.	n, NJ 08048 License No.									
Matt Abraham	0.000,000,000	0-996		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	09-265-2107		00529								
		tion Da			ne of OSHA M										
Start Date (10) 7 / 9 /	Maria III			- Maria			EMSL Analytical								
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Occupancy Status During							00 Route 13								
☐ Facility Closed/Vacate	Abater	nent o Doc	cribo	14755							-				
Abatement Performed Outside of Normal Facility Hours Time of Abatement:AMPM/PM-						S - Describe City, State, Zip Code Cinnaminson, N									
			-070				C	innaminson	, NJ 00011					-	
Scope of Work (Check all	that apply)							☐ Full Cont	ainment with Ne	gative Pressure				1	
□ >3 ef or >3 If	novati	on Mini-Enclosure					4								
⊇ 3 sf or ≥3 lf Image: Renovation of the state of								Glovebag	g Procedure	Friable Procedu					
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is Locat								D ::#:	£			_			
Location	,	Normal Used Sole			Acho	etos (Description of Containing Ma		Amount	Remova	Repair	Enc	Enclosure		
Asbestos-Containing Material (ACM) TO BE ABATED				ntena		(i.e	, the	mal systems	insulation,	(Specify	Vou	air	aps	losı	
IN Facility (13)			Custodial S				surfacing, VAT, or			SF or LF)	<u>a</u>		Encapsulate	ıre	
			. 1	(12)	1	other miscellane			ous)				te		
		Yes	No	N/A					1,805 SF total	×		П	П		
10 Areas				\boxtimes		Floor ti	e &	mastic		1,805 57 1014		屵			
	1							61				Ш	Ш		
						Naste	Cub	ic Yards of	Name of Registered Landfill						
AbateTech Inc						O No.	Was		G.R.O.W.S. Landfill						
					18750 40 Disposal Date				City, State						
City, State Lumberton, NJ								/20/18	Tullytown, PA						
		Signature				Data									
Completed By (Print or Ty		دمديم	inator		Jig. Id. Gro	W 12				11	8				
Gwendolyn Trumbe	erati	OIIS	Coord	mator		1	100		-			***			

ASB-41 MAY 11

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



State of New Jersey EDS18-083 NOTIFICATION OF ASBESTOS ABATEMENT Boiler Rm (Pursuant to NJAC 8:60 and 12:120) Date of Notification (1) Name of Building Owner/Operator (2) 06/26/2018 Ft. LEE SCHOOL DISTRICT Agencies Notified Type Notification Street Address 2175 Lemoine Avenue **EPA** Initial CONTROL × DEP City, State, Zip Code Amended LICENSING DOL Amendment # Fort Lee, NJ Emergency (including Name of Contact × DOH Telephone Number justification) × DCA Jack DeNichilo Cancellation 201-585-4612 **FACILITY INFORMATION** Name of Facility Where Abatement is Taking Place (3) Type of Facility (4) Fort Lee Elementary School #1 School (K-12) Street Address Subchapter 8 (Other than K-12) 250 Hoym Street Other (i.e. private & commercial buildings, homes, etc.) City (5) Square Feet # of Floors Bldg. Age FORT LEE 40,000 + 50+ County (6) Current Use (Prior if being demolished) County Code (7) Bergen (STATE USE ONLY) School Name of Monitoring Firm Hired by Building Owner (8) ASCM No. Name of Abatement Contractor (9) Westchester Environmental 00127 GL Group, Inc. Street Address Street Address 307 North Walnut Street 140 Hamburg Tpke City, State, Zip Code City, State, Zip Code West Chester, PA 19380 Bloomingdale, NJ 07403 Project Manager for Monitoring Firm Telephone No. Telephone No. License No. Philip Conteh 610-431-7545 (201)710-9725 01084 Start Date (10) Scheduled Completion Date (11) Name of OSHA Monitor 07-27-2018 08/01/2018 GL Group, Inc. Occupancy Status During Abatement (Check Only One) Street Address 140 Hamburg Tpke Facility Closed/Vacated During Entire Period of Abatement Abatement Performed Outside of Normal Facility Hours City, State, Zip Code Other - Describe: Bloomingdale, NJ 07403 Scope of Work (Check All That Apply) ≥3 sf or ≥3 lf Renovation Full Containment with Negative Pressure × ≥160 sf or ≥260 lf Demolition Mini-Enclosure × Glovebag Procedure Non-Exempted (*) and Non-Friable Procedure Abatement Is Location Туре Normally Location of Description of Used Solely by Asbestos-Containing Material (ACM) Asbestos Containing Material (ACM) Amount Maintenance/ TO BE ABATED Encapsulate (i.e. thermal systems insulation. Enclosure (Specify Removal Custodial Staff? In Facility surfacing, VAT, or SF or LF) (12)(13)other miscellaneous) Yes No N/A Boiler Room X Pipe Fitting Insulation 20-25LF X Name of Registered Waste Hauler NJDEP Waste Cubic Yards Name of Registered Landfill Hauler ID No. of Waste GL Group, Inc Minerva 0033034 TBD City, State Disposal Date City, State Bloomingdale, NJ TBD Waynesburg, OH Completed by Title Signature Date Elena Solakov President

06/26/2018